

Working Together:

Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice

Editors: Pat Dudgeon, Helen Milroy and Roz Walker



This book was funded by the Australian Government Department of the Prime Minister and Cabinet and was developed by the Telethon Institute for Child Health Research/Kulunga Research Network, in collaboration with the University of Western Australia. This publication is free of charge as part of a Government initiative.

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The publication aims to assist students and others to understand a variety of perspectives about the social and emotional wellbeing and mental health of Aboriginal and Torres Strait Islander people, and to assist reflection and open discussion.

ISBN Numbers

Publications ISBN:
978-0-9579494-4-7

Online ISBN:
978-0-9775975-3-6

Front cover artwork *Under the Milky Way* by Nellie Green.

The extract from Rob Riley's Indigenous keynote address *From exclusion to negotiation: the role of psychology in Aboriginal social justice* presented at the Australian Psychological Society Conference in 1995 is kindly reprinted with permission from his family. The photograph of Rob Riley is reproduced with the permission of the West Australian.
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Aboriginal and Torres Strait Islander readers are advised that this book may contain images or information on deceased persons.

Under The Milky Way

About the Cover Artwork

Spiritual and emotional wellbeing are at the heart of Indigenous cultures. Aboriginal Australians, despite suffering the greatest disadvantages and adversity, demonstrate the strongest resistance to those actions that are foreign to our unique culture, like separation from families, discrimination and removal from Country.

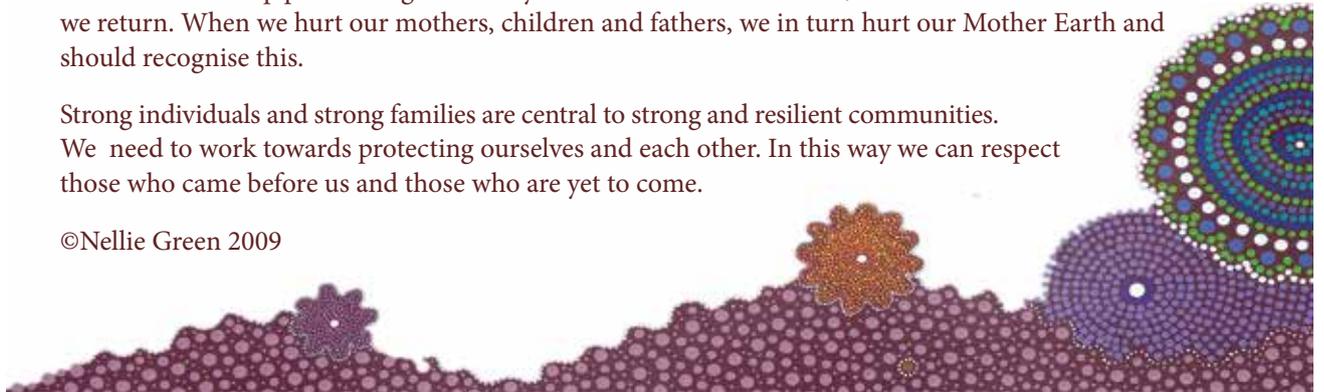
Over the years we have seen the damage done to Aboriginal and Torres Strait Islander communities and the level of disadvantage we experience on many levels has increased. We have seen the lasting impact this has on our people, yet our social position and the historical issues continue to haunt us. In the end, our men, women and children remain disempowered if society continues to neglect the emotional and spiritual needs of our Peoples.

I believe that ultimately, our Ancestors surround and protect us like an invisible spiritual cloak—this is symbolised by the purples and mauves in the painting. The Milky Way is vast and awesome and magnetic. It is an unknown dimension that holds a lot of power—much like the power of Indigenous spirituality. It is said that our Creator Spirit(s) call the Milky Way ‘home’, finding rest and comfort there following the creation work they undertook.

The moon and stars signify strength and the smaller circles symbolise the elements of our culture that sustain us and keep us going despite the desperation and shame we often feel as victims of racism and exclusion. The deep plum background is symbolic of our Mother Earth, from where we come and to where we return. When we hurt our mothers, children and fathers, we in turn hurt our Mother Earth and should recognise this.

Strong individuals and strong families are central to strong and resilient communities. We need to work towards protecting ourselves and each other. In this way we can respect those who came before us and those who are yet to come.

©Nellie Green 2009



About the Artist

Jonelle (Nellie) Green is a Badimaya woman from the Yamatji people of the Central Wheatbelt area of Western Australia. Born in Morawa, Western Australia, she lived most of her life in Perth and Fremantle, before moving to Melbourne in 2001. Nellie has 3 sisters and 2 brothers and is an Aunty and Great Aunty.

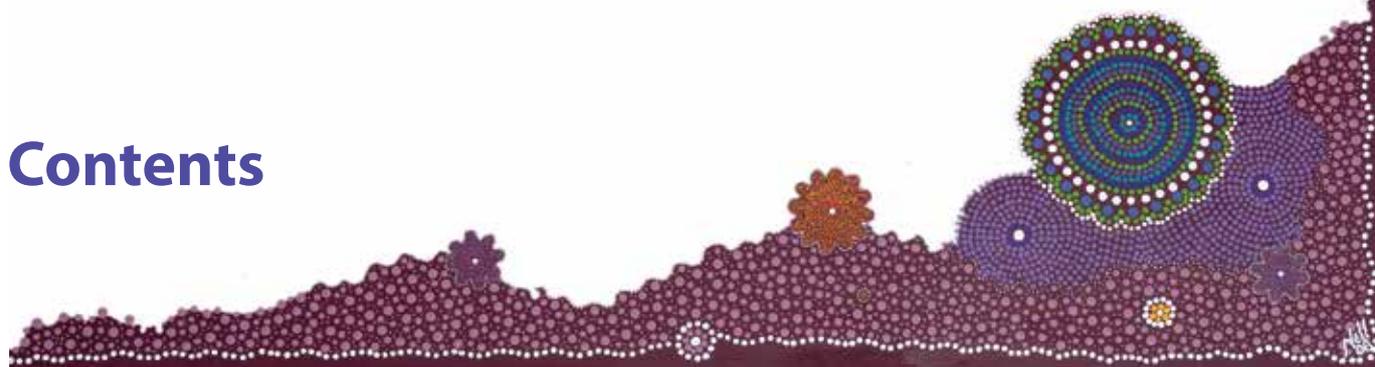
Nellie has a strong professional background in higher education, and is involved in issues concerning media representation, creative writing, social justice and the human rights of Indigenous peoples.

Over the years, Nellie has represented her Community/s locally, regionally, nationally and internationally. She was winner of the 2000 NAIDOC Aboriginal Artist of the Year in the ATSIC Noongar (Perth) Region awards and has been published in Indigenous anthologies and other publications. Nellie produced the beautiful artwork ‘Spirit Strength’ for the cover of the first edition of *Working Together*.

In 2010 Nellie graduated with a Bachelor of Applied Science (Indigenous Community Development and Management) Honours from Curtin University. She is currently enrolled at Curtin University undertaking a master of Philosophy (Indigenous Research and Development) with the topic ‘Pragmatism and Symbolism— Towards the Implementation of Indigenous Cultural Protocols in Higher Education.’

Nellie is the Manager of Indigenous Student Services at La Trobe University, Melbourne, where she is responsible for the academic, personal and cultural support for all enrolled and intending Indigenous students at the Melbourne and regional campuses of the university.

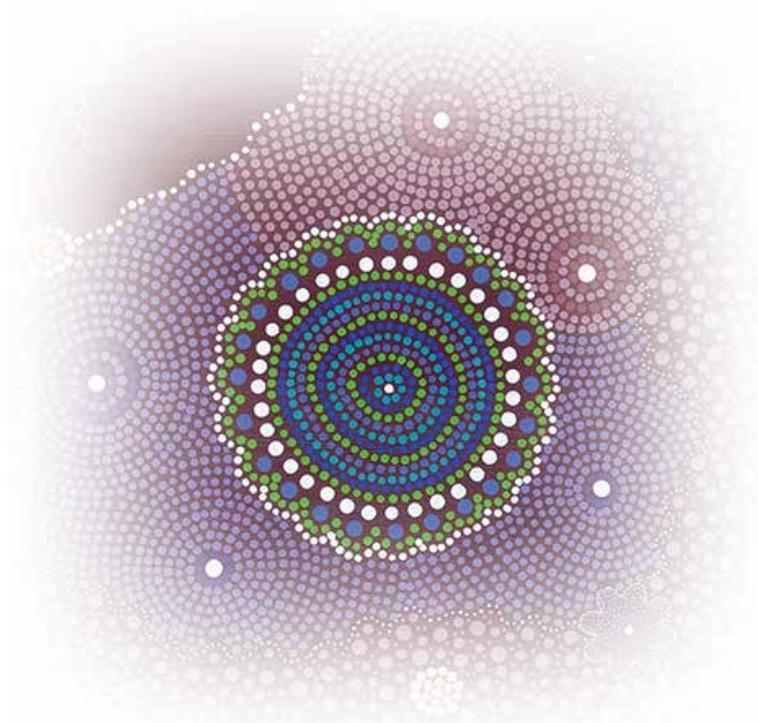
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Foreword



In 2010, I welcomed the publication of the first edition of *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice* as an important milestone on the road to understanding and improving the mental health and social and emotional wellbeing of Aboriginal and Torres Strait Islander peoples, and closing the overall health gap between us and other Australians.

In fact, the first edition far exceeded my expectations—it met a hitherto unrecognised thirst for knowledge about Aboriginal and Torres Strait Islander mental health and social and emotional wellbeing, with over 48,000 copies printed and a similar number of copies downloaded as electronic versions in three years. Feedback suggests that not only mental health professionals benefited, but the work of a wide range of service providers whose work touched on Aboriginal and Torres Strait Islander mental health and social and emotional wellbeing and its determinants.

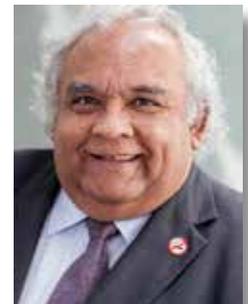
It also became an authority in the field, proving an important further step towards recognising the existence of a distinct field of Aboriginal and Torres Strait Islander psychology, and raising awareness about the inappropriate application of western mental health models to Aboriginal and Torres Strait Islander peoples. It did so, in part, by highlighting the unique determinants of our mental health: the resilience that social and emotional wellbeing (drawn from the healthy functioning of our communities, our families, and our cultures) provides us in relation to both our mental and physical health; and, on the other hand, the devastating impact of colonisation, assimilation, racism, trauma, poverty and social exclusion. It demonstrated the value of Aboriginal and Torres Strait Islander leadership in the field, and the importance of traditional and innovative contemporary healing practices.

I am extremely delighted to welcome this second edition, funded by the Australian Government Department of the Prime Minister and Cabinet and developed under the tireless and passionate editorial leadership of Pat Dudgeon, Helen Milroy and Roz Walker of the Telethon Institute for Child Health Research and the University of Western Australia. Together they have coordinated the efforts of 44 Aboriginal and Torres Strait Islander authors and 32 other authors to create this significantly expanded and enriched edition. It will surely mark another watershed in this ever-growing field, and it is my hope that it not only continues to inform mental health policy and practice in Australia to the benefit of Aboriginal and Torres Strait Islander peoples, but that all Australians benefit from the understanding of Aboriginal and Torres Strait Islander peoples that it provides.

I wholeheartedly commend this second edition of *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice* to you.

Dr Tom Calma AO

*Former Aboriginal and Torres Strait Islander Social Justice Commissioner
Chair, Reconciliation Australia
Chancellor, University of Canberra*



Message from the Minister

I am delighted to introduce the second edition of *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice*.

The first edition of *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice*, published in 2010, has become an important resource for mental health professionals, social and emotional wellbeing workers and students studying in the fields of Aboriginal and Torres Strait Islander mental health and social and emotional wellbeing.

This government has made improving the lives of Aboriginal and Torres Strait Islander people a high priority and has identified three policy priorities that are essential to doing this – getting children to school, getting adults into work and creating safe communities.

The expansion of this new edition to include a greater focus on children and young people, the significant impacts of mental health in the justice system and the cultural determinants of social and emotional wellbeing is welcomed.

The knowledge contained in this book directly supports the Government's efforts to address the underlying causes of the disadvantages many Aboriginal and Torres Strait Islander people face. Good social and emotional wellbeing and mental health underpin the ability of people to work and live lives free of alcohol, drugs and violence and many of the things that lead to community breakdown. Similarly, good education, worthwhile employment and safe communities are fundamental to good health and wellbeing.

This book recognises the need for local and culturally appropriate solutions as fundamental to improving Aboriginal and Torres Strait Islander peoples' mental health and social and emotional wellbeing. Local Indigenous people need to take the lead in solving local issues.

I commend the commitment of the experts who have contributed their time, experience and extensive knowledge. I am sure that, as well as being a valuable resource to Aboriginal and Torres Strait Islander workers and students, it will also benefit all who take the time to read it.

Senator the Honourable Nigel Scullion

Minister for Indigenous Affairs



Message from the Director

On behalf of the Telethon Institute for Child Health Research, I welcome the publication of the second edition of *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice*.

This book is an important contribution to improve the mental health and social and emotional wellbeing of Aboriginal and Torres Strait Islander peoples, across Australia and beyond. This second edition of *Working Together* was initiated in response to the overwhelmingly positive feedback from numerous Aboriginal organisations and communities, mental health professionals, students and a diverse range of service providers who regarded it as an invaluable resource.

The first edition advanced people's understanding of the issues and ways of working to promote mental health and wellbeing by giving them unique access to the views, experiences and knowledge of a number of Aboriginal and non-Aboriginal experts, practitioners and thinkers.

This edition builds on the first by providing important revisions to many of the chapters on policy and practice, workforce development and capacity building, and evidence based research. It also includes ten new contributions with a strong focus on healing models and programs that reflects the significance to Aboriginal people and to the maintenance and restoration of their health and wellbeing. It also covers priority issues including mental health and the criminal justice system, intellectual disabilities, fetal alcohol spectrum disorder and the role of families in caring for someone with a mental illness.

The *Working Together* book embodies the Institute's aim to provide the highest level of research and best practice, and its commitment to prioritising Aboriginal people's health and wellbeing. It also reflects our proud history of working with Aboriginal people to build on existing strategies and strengths, as well identifying new ways of supporting and improving the lives of their families, communities and children and young people.

I would like to thank all those who have contributed to this important work and acknowledge the significant efforts of the editors. I am pleased to see that so many Institute and University of Western Australia staff have contributed as authors and reviewers, as well as, in the design and editing of this edition.

I am confident that this book will promote a deeper understanding of ways of working to make a genuine difference and have a lasting impact in improving Aboriginal mental health and wellbeing outcomes.

Jonathan Carapetis

Director

Telethon Institute for Child Health Research



Acknowledgments

This book would not have come to fruition without significant collaboration and the sustained energy, ideas, support and input of many people.

The editors would like to thank, foremost, the important contribution of all authors who volunteered their time and shared their expertise. Their contribution is acknowledged with gratitude and admiration.

The editors would also like to thank the Australian Government which funded the project; and members of the Department of the Prime Minister and Cabinet and the National Expert Reference Group for the revision of *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice* for their valued advice and editorial assistance:

John Shevlin	Department of the Prime Minister and Cabinet
Helen Rankin	Department of the Prime Minister and Cabinet
Sandra Brown	Department of the Prime Minister and Cabinet
Prof. Pat Dudgeon	School of Indigenous Studies, University of Western Australia; Centre for Research Excellence in Aboriginal Health and Wellbeing, Telethon Institute for Child Health Research (Institute)
Prof. Helen Milroy	Royal Commission into Institutional Child Sexual Abuse
A/Prof. Roz Walker	Centre for Research Excellence in Aboriginal Health and Wellbeing, Telethon Institute for Child Health Research; University of Western Australia
Dr Stephanie Gilbert	The Wollotuka Institute, University of Newcastle; Australian Association of Social Workers
A/Prof. Robert Parker	The Royal Australian and New Zealand College of Psychiatrists and the Top End Mental Health Services, Northern Territory
Tom Brideson	Statewide Coordinator, New South Wales Aboriginal Mental Health Workforce Program
Dr Robert Brooks	Previously of The Healing Foundation; School of Psychology, University of New South Wales
Dr Lawrence Dadd	Chair, Aboriginal and Torres Strait Islander Mental Health Committee of the Royal Australian and New Zealand College of Psychiatrists
Craig Dukes	Australian Indigenous Allied Health Organisation
Prof. Rhonda Marriott	Murdoch University; National Health and Medical Research Council; Centre for Research Excellence in Aboriginal Health and Wellbeing, Telethon Institute for Child Health Research; Centre for Child Development, University of Western Australia and Congress of Aboriginal and Torres Strait Islander Nurses and Midwives
Faye McMillan	Australian Indigenous Allied Health Organisations

Acknowledgments



Stephen Meredith	Aboriginal and Torres Strait Islander Peoples and Psychology Interest Group and SA Health
Prof. Sven Silburn	Centre for Child Development and Education, Menzies School of Health and Northern Territory Department of Education
Prof. Neil Thompson	Director, Australian Indigenous HealthInfoNet, Edith Cowan University
Dr. Belinda D'Costa	Australian Indigenous HealthInfoNet, Edith Cowan University
Glenn Pearson	Manager, Kulunga Research Network

Institute staff who contributed valuable support as critical readers:

Dr. Clair Scrine	Senior Researcher, Centre for Research Excellence in Aboriginal Health and Wellbeing
Dr. Carrington Shepherd	Senior Researcher, Centre for Research Excellence in Aboriginal Health and Wellbeing
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Dr. Jan Payne	Population Sciences
Dr. Monique Robinson	Population Sciences
Linda Watson	Population Sciences
Dr. Tracy Reibel	Population Sciences
Dr. Helen Leonard	Head, Child Disability Research

The reviewers who provided informed and helpful comments on draft chapters:

Prof. Michael Alpers AO	Centre for International Health, Curtin University
Dr. Lauren Breen	School of Psychology and Speech Pathology, Curtin University
Dr. Janette Brooks	Western Australian Perinatal Mental Health Services; Women's Health Clinical Care Unit, King Edward Memorial Hospital and School of Women's and Infants' Health, University of Western Australia
Dr. Tom Calma AO	Former Aboriginal and Torres Strait Islander Justice Commissioner; Chair, Reconciliation Australia; Chancellor, University of Canberra
Julie Carter	Justice and Forensic Mental Health Network
Monique Gale	Northern Territory Suicide Prevention Centre
Laurencia Grant	Mental Health Association of Central Australia

Acknowledgments



Marsat Ketchell	Coordinator, Family Support Program
Dr. Michael Lowe	Geriatrician, Royal Darwin Hospital
Prof. Dennis McDermott	Aboriginal and Torres Strait Islander Health, Flinders University
Valda Napurrula Shannon	Mental Health Association of Central Australia
A/Prof. Julian Troller	Intellectual Disability Mental Health, University of New South Wales
Leanda Verrier	Western Australian Perinatal Mental Health Unit, Faculty of Health Sciences, Curtin University
Katherine Wiggins	Previously of the Justice and Forensic Mental Health Network

The stakeholders for their considered feedback during consultations:

Aboriginal and Torres Strait Islander Mental Health Advisory Group

Congress of Aboriginal and Torres Strait Islander Nurses and Midwives

Community Services and Health Industry Skills Council

beyondblue

Lifeline

Kidsmatter

MindMatters

Justice Health and Forensic Mental Health Network

The Working Together team at the Telethon Institute for Child Health Research who assisted with a range of tasks. We are especially grateful to Carolyn Mascall and Jacqui Bradley for their major contributions in assisting with coordination and liaison activities throughout the project.

Tammy Gibbs and Lauren Jones of the Institute's Public Relations Department, whose efforts with design and editing are greatly appreciated.

The Project Editor, Robin Dalby and the copy editor and designer, Chrissie Easton who diligently, graciously and competently assisted with the monumental task of preparing the manuscript for publication.

Jaxon Reibel and Richard Easton for their eye for detail and persistence in editing and proofreading the first and second editions respectively.

We would like to acknowledge the important contribution of the many hundreds of mental health practitioners, students, lecturers, service providers and policy makers in areas that address the social determinants of mental health who completed the evaluation surveys and interviews and provided valuable feedback for improving the book. Their suggestions are reflected in this revised edition.

Finally, and sadly, we pay respect to the late Dr Nola Purdie and acknowledge her valuable contribution as an editor on the first edition of *Working Together*.

Principal Editors and Authors

Professor Pat Dudgeon



Professor Pat Dudgeon is from the Bardi and Gija people of the Kimberley. She is a Research Fellow at the School of Indigenous Studies, University of Western Australia (UWA). She was the first Aboriginal psychologist to be awarded the grade of Fellow in the Australian Psychological Society. She is well known for her significant leadership in Indigenous psychology and in higher education. Her roles include Chief Investigator in an ARC (Indigenous Discovery) grant, *Cultural Continuity and Change: Indigenous Solutions to Mental Health Issues*. She is also a Chief Investigator in the NHMRC Centre for Research Excellence Grant, *Aboriginal Health and Wellbeing* at the Telethon Institute for Child Health Research. She is a Chief Investigator and Research Node Leader (health) on the National Indigenous Research and Knowledge Network, a multidisciplinary network of Indigenous researchers. Pat was the inaugural Chair of the Aboriginal and Torres Strait Islander Mental Health Advisory Group; the inaugural Chair of the Australian Indigenous Psychologists Association and now a steering committee member; a member of the National Aboriginal and Torres Strait Islander Suicide Prevention Advisory Group; a member of the National Aboriginal and Torres Strait Islander Health Equality Council; and is a Commissioner on the new National Mental Health Commission. She co-chairs the Reconciliation Action Plan Working Party in the Australian Psychological Society (APS) with the President of the APS.

Winthrop Professor Helen Milroy

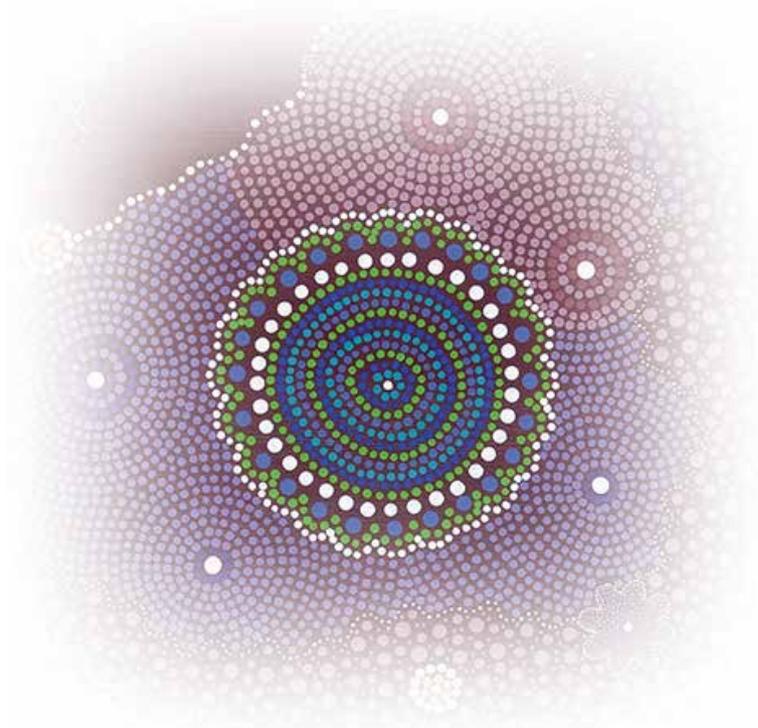


Dr. Helen Milroy is a descendant of the Palyku people of the Pilbara region of Western Australia born and educated in Perth. She studied Medicine at UWA, worked as a General Practitioner and Consultant in Childhood Sexual Abuse at Princess Margaret Hospital for Children for several years before completing specialist training in Child and Adolescent Psychiatry. Helen is a Royal Commissioner on the Royal Commission into Institutional Child Sexual Abuse which is being conducted for the next three years. Until February 2013, Helen held the positions of Winthrop Professor and Director of the Centre for Aboriginal Medical and Dental Health at UWA; and Consultant Child and Adolescent Psychiatrist with the Specialist Aboriginal Mental Health Service, Department of Health. Helen was Country Lead Investigator of the Australian team [July 2010 to January 2013] on the National Health and Medical Research Council (NHMRC) International Collaborative Grant, *Educating for Equity* exploring how health professional education can reduce disparities in chronic disease. Helen was conjoint award recipient of the World Council for Psychotherapy's Sigmund Freud Award 2011 for contributions to the field of psychotherapy. She was also 2011 Yachad Scholar. Helen is a board member of the Australian Institute of Health and Welfare (AIHW). She plays a significant role on many State and National committees and advisory groups including the NHMRC Indigenous Health and Mental Health Advisory Groups; and ADHD Expert Working Group, and many more.

Associate Professor Roz Walker



Associate Professor Roz Walker has been involved in research, evaluation and education with Aboriginal communities building local capacity within both Aboriginal and non-Aboriginal organisations for thirty years. Roz is a senior researcher with both the University of Western Australia and the Telethon Institute for Child Health Research and a Principal Investigator on the Institute Faculty. She is a Chief Investigator in several national ARC grants as well as in the NHMRC Centre for Research Excellence Grant, *Aboriginal Health and Wellbeing* at the Institute. Roz also serves on a number of high level steering committees and national Indigenous networks. Her key areas of interest include developing transformative and decolonising strategies at individual, organisational and community levels as well as promoting system level change. She has worked in Aboriginal education in teaching, curriculum development, academic coordination, research and evaluation. She has extensive experience in translating research into policy and practice and community-based participatory action research methods and ethics to achieve health related outcomes. Roz has taught extensively at undergraduate and graduate levels in Aboriginal community management and development and early years education in remote areas. Roz was co-editor of the first edition of the *Working Together* book and led the highly effective communication and dissemination strategy for the book. Roz has published widely in Aboriginal maternal and child health and mental health and wellbeing.



A Charge to Mental Health Practitioners



Rob Riley

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In September 1995, Rob Riley, renowned Aboriginal leader and activist for social justice and self-determination presented a seminal paper at the Australian Psychological Society Annual Conference held in Perth, Western Australia in which he challenged the practice of psychology to facilitate Aboriginal self-determination in the treatment of Aboriginal and Torres Strait Islander mental health. The following is an extract from that paper.

In his opening comments, Rob revealed his drive and compassion in pursuing improved outcomes in the mental wellbeing of Aboriginal people. In doing so, he encouraged the discipline of psychology and other professions to find ways to better deliver outcomes for Aboriginal people.

I believe there are profound obligations for those who commit themselves to helping their fellow human beings in the pursuit of a better quality of life. This is especially true where what we do impacts on the mental wellbeing of individuals in these dramatically changing times.

There are of course daunting and at times seemingly insurmountable obstacles, yet the challenges can be stimulating and enticing. This is my personal philosophy and it is also what I perceive to be the reality that confronts the discipline of psychology. I make the assumption that you, like professionals from all health and social science disciplines, have the motives and 'open-mindedness' to incorporate different perspectives within the discipline that you have chosen.

In my address I make reference to a number of reports that have been published over the years to provide an historical background to the current mental health status of Aboriginal peoples in this country, and the problems that have hindered provision of appropriate psychological services to them. My intention is not to lay blame or promote feelings of guilt—these are negative emotions that achieve little—but to invite you to share the challenge of finding better ways that have better outcomes for all of us.

I outline the initiatives already taken by the profession in its attempts to improve its service to Aboriginal Australians. And suggest ways in which I feel psychology can further enhance its response to the needs of the contemporary Aboriginal community. I truly hope that what I have to say has both meaning and relevance and that it will give you a better insight into the issues which confront Aboriginal people on a daily basis. I share this knowledge on the assumption that information freely given will be openly received and that this knowledge may challenge you, as individuals, to contemplate your functional role and responsibilities to all Australians, especially in this context to Aboriginal Australians.

Rob was strong on the issue of social justice and how it related to the mental health of Aboriginal people.

The current problematic mental health status of Aboriginal people can be traced directly to denial of social justice. The history of this denial is best told in the underlying issues report to the Royal Commission into Aboriginal Deaths in Custody. This report is the most comprehensive analysis of the

myriad of social welfare variables, identified by the Aboriginal community as being fundamental issues that have perpetrated welfarism and that have maintained the co-dependency between the community and the bureaucracy, which I sum up as 'administrative genocide'. Aboriginal people have not been empowered to make decisions about their lives and the lives and futures of their children.

He described the gradual change from the long process of Aboriginal disempowerment and destabilisation that came with colonisation to one of increased empowerment through legislative change that gradually removed the onerous and punitive measures of earlier legislation and through 'affirmative action programs aimed at encouraging Aboriginal participation in decision making'. But as Rob noted:

The process of empowerment, in one sense, has come far—but in many others, as illustrated, it has proved to be an illusion, and the cost to the community in achieving even these modest gains over a period of some 150 years has been enormous.

An issue personally experienced by Rob was the removal of Aboriginal children from their parents, families and communities. He described the profound impact on the children and members of their families who were directly affected by the assimilation policies and indicated the duty of care that psychologists and other health professionals have in the reparation process.

The anguish of their grief-stricken parents, families, kinship groups and communities, and the children themselves was brusquely discounted as inconsequential and at any event of a temporary nature. Today the legacy of those policies (should) haunt the conscience of white Australia, as it has haunted the memories of generations of Aboriginal families. The residue of unresolved anger and grief that blankets the Aboriginal community has had a devastating effect on the physical, emotional and mental well-being of so many.

The removal of children report cannot be allowed to suffer the fate of previous reports . . . The recommendations made in this report can and must go some way toward easing the anguish that plagues the Aboriginal community. These recommendations provide a blueprint for direct and unequivocal intervention, on behalf of the state government, to repatriate families and to care for the broken spirit of thousands of our people.

Psychologists, other health and social science professionals have an absolute obligation and a duty of care to share in this reparation process. More importantly the paramount obligation on the profession is to guarantee the participation of control by Indigenous people in any area of psychological study, counselling, and preparation of reports that pertain to the Indigenous community.

Rob's conclusion and charge to mental health practitioners is profound as has been its powerful impact on progressing improved mental and physical health outcomes for Aboriginal and Torres Strait Islander people.

. . . the pertinent question for the Australian Psychological Society and you as practitioners is 'how can the profession facilitate Aboriginal self-determination'? How can this begin and how can it be sustained?

We as individuals have the obligation and the power to ensure that positive social change occurs. On another level however, organisations and departments need to show leadership and commitment by subscribing formally to the principles and guidelines for achieving social justice.

The world we live in is in a state of intense and unprecedented environmental, political, economic and social change that impacts on every living thing on this planet. We are an active part of this change and we as individuals, as collectives in families or in work organisations can and must direct where our world is going.

Until recently the practice of psychology has largely served to oppress, control and assimilate minority groups, especially Aboriginal people. In the past few years a range of Aboriginal mental health initiatives, some connected with the Australian Psychology Society have been established.ⁱ

There are, of course, a myriad of mental health initiatives happening on the ground in Aboriginal communities at local and regional levels, as Aboriginal people themselves are attempting to identify and seek solutions to the inequitable situations they live in. To the members of the Australian Psychology Society I would say 'join us in this quest'.

i Aboriginal mental health initiatives are outlined in Chapter 3 (Dudgeon and colleagues).

- *What part can the discipline of psychology and you as psychologists play in the pursuit of social justice?*
- *How many psychologists have an understanding of Aboriginal people?*
- *How many of you have an understanding of Aboriginal culture, history and contemporary issues?*

For many of you this knowledge is crucial given the social conditions and your work environments such as prisons and the welfare sector and where there are large numbers of Aboriginal clients. It is your responsibility to seek that knowledge and understanding now, and to ensure that it is available for future generations of psychologists, in psychology training and educational programs. To their credit some psychology departments have been actively involved in Reconciliation Study Circles. Some educational institutions have begun introducing more appropriate and relevant contemporary Aboriginal issues into their curriculum and training for psychologists. I applaud the Universities and again, I applaud the leadership in your profession for these real and important initiatives. They represent a most appropriate and empowering process because the initiatives I have just mentioned are developed, designed and delivered by Aboriginal people. Aboriginal participation in their own matters, academic or otherwise, is integral. This is the basis of equity and self-determination.

Another challenge to psychology is to examine the discipline and its theory; training practices; methods employed, and their appropriate application to Aboriginal people (e.g. the use of Western tests on Aboriginal clients. It has been recognised that these tests were not 'culture-fair' but they are still being used.)

The discipline of psychologists needs to be open to change but more-so, it needs to be dynamic and be prepared to change. The signs are positive, as I have acknowledged. But so many obstacles remain and still much needs to be done. We cannot allow ourselves to become complacent nor limit potential simply because we think we have done enough.

I am enthused and I hope you are as well, by the guiding principles contained within the National Aboriginal and Islander Mental Health Policy Report, authorised by Swan and Raphael. These principles intended to guide the development of an Aboriginal and Torres Strait Islander mental health strategy and plan, are principles that your profession should take on board. I commend them to you as the basis for your future proactive involvement in meeting the challenges outlined here. They include the understanding that:

- *The Aboriginal concept of health is holistic.*
- *Self-determination is central to the provision of Aboriginal health services.*
- *Culturally valid understanding must shape provision of Aboriginal health (and mental health) care.*
- *The experience of trauma and loss contribute to the impairment of Aboriginal culture and mental health wellbeing.*
- *The human rights of Aboriginal people must be recognised and enforced.*
- *Racism, stigma, adversity and social disadvantage must be addressed in strategies aimed at improving Aboriginal mental health.*
- *The strength and centrality of Aboriginal family and kinship must be understood and accepted.*
- *The concept of a single homogenous culture and/or groups is erroneous.*

Aboriginal people have great strengths including creativity, endurance, humour, compassion and spirituality. These characteristics of Aboriginal people have enabled their survival through the period of dispossession and oppression that you have had described in some detail to you today. This has helped us (Aboriginal peoples) through the worst of times.

They will go on sustaining us until, with your understanding and support and commitment, we are ready and able to enjoy with all Australians, the best of times.

Finally, I say to you, two thoughts that I keep in the back of my mind when the struggle along the road to social justice and equity gets a bit tough:

- *You can't be wrong if you're right, and*
- *You don't stop fighting for justice simply because those around you don't like it. Just keep on fighting.*

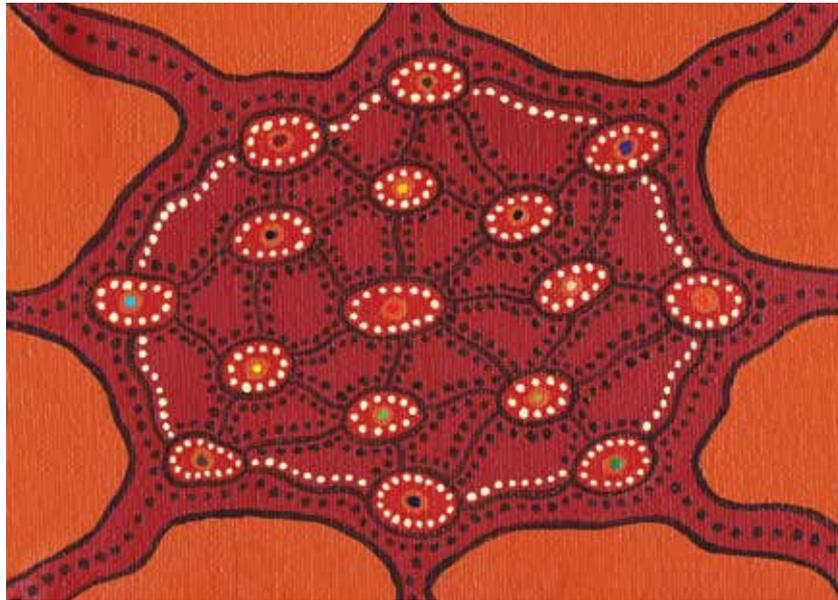
The full transcript of Rob Riley's Conference Paper **From Exclusion to Negotiation** is available from:

Rob Riley. From exclusion to negotiation: the role of psychology in Aboriginal social justice /discussion paper (Curtin Indigenous Research Centre) ; No. 1/1997. Gunada Press, Curtin University, Perth WA

A Reflective Story by Gladys Milroy

The Little Green Frog

The little green frog sat at the edge of the waterhole watching the ripples in the water. It was so beautiful and clear you could almost see the coloured stones lying on the bottom except the movement of the water put them out of focus. The little green frog longed to swim to the bottom but he knew it was too deep. It was very deceiving because the water was so pure. He would love to have collected some of the coloured stones.



© Painting by
Helen Milroy

Suddenly a large barramundi swam into the waterhole and rested on the colourful stones. 'Are you looking at my pretty stones frog?' asked the barramundi.

'Yes' frog replied, 'I am too small to swim to the bottom of your waterhole but I would love to have one.'

Barramundi swam to the surface with a bright red stone in his mouth. 'Here is a present for you frog' he said giving frog the red stone.

'Oh thank you barramundi but I haven't got a present to give you.'

'You can give me one of those blue flowers that grow on the rocks' barramundi said.

Frog picked a blue flower and gave it to barramundi.

'The pretty stones you see I have been collecting since I was young' barramundi said, 'they are all memories, the red stone is full of happy memories.'

'Oh thank you, I will treasure it always' said frog.

Each day frog would visit the waterhole; each day barramundi would give frog a pretty stone, in turn frog gave barramundi a lovely flower. The little green frog was enjoying the beautiful coloured stones as they made him feel very happy so he didn't visit the waterhole for a while. 'I will go and visit my friend today' he thought and set off for the waterhole where his friend barramundi lived.

Barramundi was floating on top of the water with a black stone in his mouth and surrounded by half dead and rotting flowers.

You can't give away your past memories, you need them to see the future.

There are many ways to understand this story.

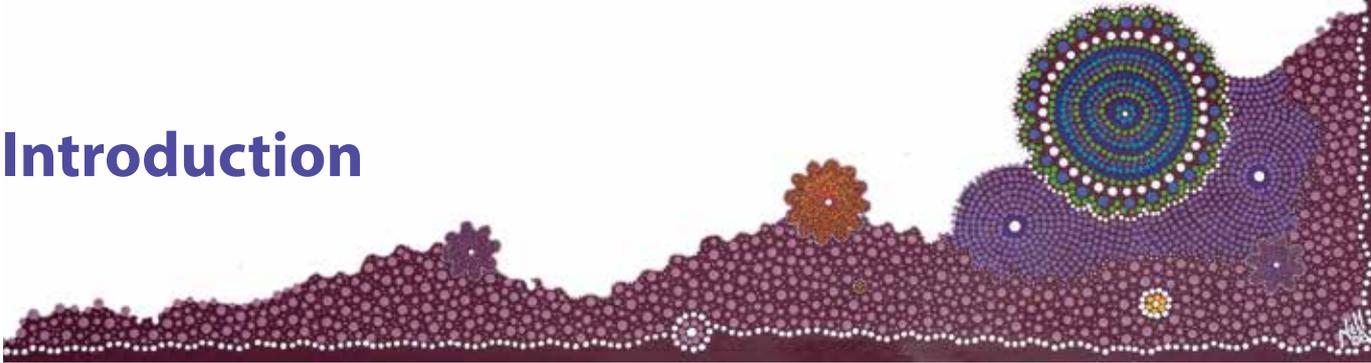
We often take stories from our communities and our clients with little in return. We consult over and over again and yet ignore the recommendations or fail to implement policy.

Do we get caught up with what we have taken and fail to return to those who have given us their gifts so freely?

How many beautiful stones have we been given and what have we done with all of those memories? As we hold the stories in our minds and hearts, it is our responsibility to give back hope for a better future.

© Story by Gladys Milroy

Introduction



The Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice had its origins in the Australian Government's commitment to improve mental health services nationally. The book was a key strategy to support Aboriginal and Torres Strait Islander-specific initiatives of the Council of Australian Governments (COAG) mental health reform over five years. When we undertook the first edition it was evident that there was a lack of culturally appropriate resources to educate and assist mental health professionals to work with Aboriginal and Torres Strait Islander people experiencing social and emotional wellbeing issues and mental health conditions across all life stages. Further, those resources currently used by mental health clinicians were found to have little cross-cultural validity. It is pleasing, however, in this book to see a number of Aboriginal psychologists and allied health practitioners writing about their work in addressing many of the issues surrounding diagnosis, assessment of mental health and social emotional wellbeing issues.

The first edition of *Working Together* provided a culturally appropriate resource; models of practices and strategies to enhance the effectiveness of a range of professionals who work with Aboriginal and Torres Strait Islander people with a range of social and emotional and mental health issues. It provided a comprehensive, culturally relevant, and specific resource to support the provision of services to Aboriginal and Torres Strait Islander people who are striving to effectively deal with their loss, grief, suffering and other impacts of past policies and practices. The book was also intended for students in vocational education and training and undergraduate and postgraduate courses in relevant fields.

The first and second editions of the book have been written by recognised experts, practitioners and researchers in a range of disciplines within the mental health field and have presented a variety of perspectives related to the causes and possible solutions to many of the social and emotional and mental health issues experienced by Aboriginal and Torres Strait Islander people. A strong Aboriginal voice permeates both editions of the book; indeed the high number of Aboriginal and Torres Strait Islander authors and the strength of the collegiality and collaboration between authors have made both the first and second editions unique. In the second edition there are 76 authors, 44 Aboriginal and Torres Strait Islander authors and 32 non-Aboriginal and Torres Strait Islander authors. This speaks well to the growing number of Aboriginal and Torres Strait Islander experts who are writing and adding to the body of knowledge around mental health and associated areas.

BACKGROUND TO THE REVISION

As with the first edition, this revised book has been made possible through the dedication, time and shared wisdom of the authors about the social and emotional wellbeing of Aboriginal Australians. Since the first edition was published in June 2010, the widespread and ongoing dissemination of the book has been, and continues to be an effective strategy to enhance the cultural competence of the mental health workforce and the mental health services.

Over 48,000 hard copies and 48,000 PDF downloads of the book have been distributed to or accessed by a broad range of target audiences. In addition, at least 50,000 copies of the book and chapters were downloaded from the *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice* website. The volume of hard copies and electronic copies disseminated during the past three years has greatly exceeded expectations. It is also evident from the high volume of books disseminated to target audiences around Australia that there remains a high demand for the book which is filling an area of a perceived and actual gap in the knowledge base and resources for health and mental health practitioners and for academics delivering courses to future mental health practitioners.

The feedback and evaluation since its introduction confirms that *Working Together* is an important and effective resource for a range of relevant health and allied health practitioners and educators and other professionals who have front line involvement with Aboriginal and Torres Strait Islander people experiencing mental health issues, and agencies supporting and working with them. Since the introduction of the book, extensive stakeholder consultation has taken place to inform the development of the revision of the book. The main focus of activities has been twofold: to enhance the promotion and dissemination of the *Working Together* book and to collate feedback and evaluation findings in preparation for the revision.

While the first edition was indeed an important milestone in addressing Aboriginal mental health and social and emotional wellbeing, the inclusion of many additional topics and resources in the second edition contributes even more significantly. These new chapters bring important knowledge and understanding identified by the Expert Reference Group and evaluations. The addition of Aboriginal psychiatrist Helen Milroy as an editor and author has brought yet another level of clinical and cultural expertise, experience and wisdom to the revision. Importantly, the inclusion of the 'Charge to Psychologists' by Rob Riley is yet another distinctive feature of this revised book.

LEGACY OF LEADERS

In addition to the contribution of the late Rob Riley, we would like to pay tribute to two other leaders—the late Joe Roe and the late Dr Mark Sheldon—whose ideas and models and ways of working are an important legacy. All three leaders had a strong influence on people's lives and their work is reflected throughout this book.

Joe Roe

Another inspirational leader is the late Joe Roe (Purungu by skin name). Joe was a Karajarri/Yawru man. His people are also from the Broome and Bidyadanga area in the Kimberley. He completed a Bachelor of Applied Science in Indigenous Community Health (Mental Health Counselling specialisation) in 1996. Mr Roe worked in the area of Aboriginal mental health for over 10 years, which included working with the Aboriginal Visitors Scheme, Pinikarra Aboriginal Counselling Service and the Kimberley Aboriginal Medical Services Council. Mr Roe also worked as the Psych/Social Rehabilitation worker with Northwest Mental Health Services in Broome.

In that time he developed the Ngarlu model—a highly regarded and culturally appropriate way of working to support Aboriginal people’s spiritual, social and emotional wellbeing. The Ngarlu model aims to strengthen and heal the spirit of Aboriginal people and is based on cultural beliefs and holistic understandings of health and wellbeing. These traditional concepts of emotional, spiritual, and social wellbeing are being rekindled to support social, spiritual and emotional reconnection. His family has kindly given permission for Mr Roe’s unique work to be incorporated into policies, healing practices and programs that have continued to be adapted and developed by his family so that his legacy can continue.

Dr Mark Sheldon

The late Dr Mark Sheldon was one of the leading psychiatrists working in the field of Aboriginal mental health. He was a pioneer psychiatrist with a mission to provide psychiatric services to remote Aboriginal communities. His work is equally informative for all mental health and wellbeing practitioners intending to work with Aboriginal people. In the vastness of central Australia, Mark learnt to overcome cultural and language barriers in his work with Indigenous people and was honoured by having an Aboriginal name bestowed upon him. He sought to find alternative ways of working clinically in the cross-cultural setting of traditional and semi-traditional contexts, offering a different approach to suit the setting. It required adjustments in history-taking, mental state examination, diagnosis, management, professional boundaries, and the way one works with colleagues. He approached all of these issues in a modified way, with considerable reflection on, and appraisal of, his clinical experiences. Many of his ideas are still relevant and are included in relevant chapters in this book. He was awarded the Fellowship of the Royal Australian and New Zealand College of Psychiatrists (RANZCP) in October 1997. Memorial prizes in the name of Mark Sheldon have been established by the RANZCP and by his old high school. Mark’s family has kindly given permission for his unique work to be presented in this book so that his legacy can continue.

TERMINOLOGY

In Australia there are many Indigenous nations, languages, and cultures. This is shown clearly in the Horton’s map of Australia’s Indigenous languages, which indicates the general location of larger groupings of people but may include smaller groups such as clans, dialects, or individual languages in a group (see page 533).

It is difficult to identify terminology that is appropriate and acceptable to all these groups. Indigenous Australians are people of Aboriginal and/or Torres Strait Islander descent who identify, and are accepted as an Aboriginal and/or Torres Strait Islander person in the community in which they live, or have lived.

In this book, we have chosen Aboriginal and Torres Strait Islander in the title of the book to indicate the distinctiveness of these two major groups of people and to respect the term most Aboriginal and/or Torres Strait Islander people prefer to use. Authors have used a range of terms and in general we have retained their language, although this has been changed sometimes to aid the flow of text for the reader. Overall our intent has been to use language that accords respect and dignity to Australia’s Indigenous peoples. Throughout this book, authors use the term Aboriginal, Aboriginal and Torres Strait Islander and Indigenous peoples.

GUIDING PRINCIPLES

The *National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Well Being 2004–2009* contains nine guiding principles that further emphasise the holistic and whole-of-life view of health held by Aboriginal and Torres Strait Islander people. The Framework was endorsed by the Commonwealth and State/Territory governments and represented agreement among a wide range of stakeholders on the broad strategies that needed to be pursued.

The nine principles enunciated in the Framework guided the development of *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice*. The nine principles are:

-  Aboriginal and Torres Strait Islander health is viewed in a holistic context that encompasses mental health and physical, cultural and spiritual health. Land is central to wellbeing. Crucially, it must be understood that while the harmony of these interrelations is disrupted, Aboriginal and Torres Strait Islander ill health will persist.
-  Self-determination is central to the provision of Aboriginal and Torres Strait Islander health services.
-  Culturally valid understandings must shape the provision of services and must guide assessment, care and management of Aboriginal and Torres Strait Islander peoples' health problems generally and mental health problems in particular.
-  It must be recognised that the experiences of trauma and loss, present since European invasion, are a direct outcome of the disruption to cultural wellbeing. Trauma and loss of this magnitude continue to have intergenerational effects.
-  The human rights of Aboriginal and Torres Strait Islander peoples must be recognised and respected. Failure to respect these human rights constitutes continuous disruption to mental health (as against mental ill health). Human rights relevant to mental illness must be specifically addressed.
-  Racism, stigma, environmental adversity and social disadvantage constitute ongoing stressors and have negative impacts on Aboriginal and Torres Strait Islander peoples' mental health and wellbeing.
-  The centrality of Aboriginal and Torres Strait Islander family and kinship must be recognised as well as the broader concepts of family and the bonds of reciprocal affection, responsibility and sharing.
-  There is no single Aboriginal or Torres Strait Islander culture or group, but numerous groupings, languages, kinships and tribes, as well as ways of living. Furthermore, Aboriginal and Torres Strait Islander peoples may currently live in urban, rural or remote settings, in urbanised, traditional or other lifestyles, and frequently move between these ways of living.
-  It must be recognised that Aboriginal and Torres Strait Islander peoples have great strengths, creativity and endurance and a deep understanding of the relationships between human beings and their environment (*National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Well Being 2004–2009, page 6*)

A SOCIAL AND EMOTIONAL WELLBEING PERSPECTIVE

Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice has proved to be a unique and invaluable resource to educate and assist health professionals to work with Aboriginal Australians. In both editions we have taken a particular approach.

Aboriginal and Torres Strait Islander people prefer to take a holistic view of mental health. To reflect this, we have adopted a social and emotional wellbeing approach to mental health in both editions of the book. The holistic view incorporates the physical, social, emotional, and cultural wellbeing of individuals and their communities.

In this respect Tom Calma, the former Aboriginal and Torres Strait Islander Social Justice Commissioner, has observed that we need to break down 'health silos'; he argues that we must break down the silos that separate out mental health, family violence, and substance abuse services. He proposes that these should be integrated within comprehensive primary health care services to reflect the fact that these issues are often linked (Calma, 2005).

The holistic view of health of Aboriginal Australians is evident in their capacity to sustain self and community in the face of historically hostile and imposed culture. Unique protective factors contained within Indigenous cultures and communities have been sources of strength and healing when the effects of colonisation and what many regard as oppressive legislation have resulted in grief, loss and trauma.

Aboriginal and Torres Strait Islander authors in this book remind us of the importance of recognising existing frameworks of healing in Indigenous communities and how culture and spirituality in relation to social and emotional wellbeing are ongoing sources of strength. For instance, Chapter 4 explores determinants that have shaped Aboriginal and Torres Strait Islander social and emotional wellbeing outcomes and the chapters in Part 6 specifically discuss the importance of accessing traditional and contemporary Indigenous healing models, programs and trainings developed by Aboriginal and Torres Strait Islander people themselves.

DISSEMINATION

Since the book was published in June 2010, the Telethon Institute has coordinated a highly effective communication and dissemination strategy. This has involved the establishment of a database of all stakeholders who have requested copies of the book. Information about the book was, and continues to be, distributed to contact personnel on these lists inviting them to promote the *Working Together* book to their networks. In addition, a targeted dissemination strategy was implemented in the health, mental health, education and community services sectors and among Commonwealth funded organisations with an exceptional response and uptake, far exceeding expectations.

A total of 44 university campuses ordered the book for their libraries, undergraduate and postgraduate courses in health, mental health, psychology, nursing and social work and Aboriginal health schools and divisions. Since the project commenced, there has been an increase in interest and requests by major tertiary hospitals, general practice divisions, and local and state government and university libraries around Australia. Other stakeholders include high schools, the Department of Education and Training, Department of Housing and Works, Centrelink offices, all allied health professions, and non-government organisations and community services throughout Australia. Stakeholder groups and professional/specialised bodies such as the Royal Australian College of Obstetricians and Gynaecologists, the Perinatal Society of Australia and New Zealand and the Australian Medical Association have endorsed the book.

EVALUATION

An evaluation examined the extent to which *Working Together* was perceived as contributing to enhancing understanding of Aboriginal and Torres Strait Islander social and emotional wellbeing and mental health; and improving organisational, professional and individual practice. The evaluation methodology included a Survey Monkey questionnaire. Readers, teachers and course coordinators in nursing, psychology, allied health, general practice and psychiatry were invited to provide additional feedback regarding their perceptions of the books usefulness within their specific areas and how the layout, content, reflective exercises and program information could be improved. Various groups undertaking professional and cultural awareness training or professional development workshops were asked to obtain feedback to assess the relevance of *Working Together* for students, practitioners and participants. These groups included the Australian Indigenous Psychologists Association (AIPA), and Aboriginal training delivering courses in mental health, social work and nursing. Outcomes from the evaluations have informed the second edition in additional new chapters and overall content of all chapters such as stronger inclusion of critically reflective exercises.

The book is also being sought by professionals, practitioners and students who, while not directly in the first line of mental health aid, are nevertheless dealing with Aboriginal and Torres Strait Islander people who are experiencing mental health issues. These include Department of Child Protection workers, ambulance drivers, Royal Flying Doctor Service staff and emergency staff in hospitals, Centrelink employees, employment agencies, non-government organisations, judiciary staff, justice workers and prison officers, to name a few.

THE PROCESS

The Australian Government Department of Health and Ageing commissioned the Telethon Institute of Child Health Research to produce the second edition of this book. An Expert Reference Group (see the acknowledgments) provided support and advice to the editors with respect to commissioning key experts and stakeholders in the mental health sector to contribute to various topics in the book. This list included clinicians and education and cultural experts. A small editorial team (see acknowledgments), led by Associate Professor Roz Walker managed the day-to-day production of the book. During the process for the second edition, all chapters were reviewed and updated. New chapters were identified and the most suitable experts were invited to contribute. The second edition was informed by evaluation and advice from the Expert Reference Group.

THE STRUCTURE OF THE BOOK

The book is structured into six parts.

Part One: History and Contexts

Provides an overview from a historical, social, emotional and cultural context, within a mental health framework. Impacts of colonisation and cultural devastation in contrast to resistance, resilience, equality, empowerment and cultural recognition are discussed from a social and emotional wellbeing and psychological perspective. Progression of policies reflective of situation and time are outlined.

Part Two: Issues and Influences

Describes various issues and influences on people's mental health and social and emotional wellbeing, including a clinical description and diagnosis of mental health. Substance misuse, suicide and the over-representation of people in the criminal justice system are viewed as most significantly impacting on individuals and communities.

Part Three: Standards, Principles and Practice

Better health outcomes can be achieved by best work practice, which includes consideration of and working to the National Practice Standards and ensuring, where possible, support is offered within an interdisciplinary team in a culturally competent and culturally secure environment.

Part Four: Assessment and Management

Assessing and managing an individual and ensuring cultural competency and a culturally secure environment are highlighted. Acknowledging and understanding the diversity of attributes impacting on an individual's assessment, such as trauma and transgenerational trauma and unrecognised or undiagnosed disability are considerations. A range of tools appropriate for assessment are provided.

Part Five: Working with Children, Families and Communities

Focuses on the complex issues surrounding young Aboriginal people and explores ways for families and communities to deal with these issues. Issues discussed include factors influencing parental and infant mental health, addressing fetal alcohol spectrum disorder and understanding the lives of Aboriginal children and families using case studies. Also discussed are ways of working with behavioural and emotional problems in young people and how to move forward when family violence occurs.

Part Six: Aboriginal Healing Models and Programs

A number of culturally sensitive, culturally driven, culturally developed and culturally implemented programs and models provide pathways forward for individuals and communities. Involvement in these cultural specific models and programs will enable individuals and communities to benefit as part of the healing process. It will also encourage forward movement and positive participation at a community level.

