



HealingFoundation

Strong Spirit • Strong Culture • Strong People

**Submission to the
Department of Prime Minister and Cabinet
on the Closing the Gap refresh**

December 2017

1. Introduction from the CEO

The Healing Foundation is pleased to have this opportunity to contribute to the Closing the Gap refresh.

There is a significant body of research, including the Healing Foundation's own experience, which identifies systemic barriers to health and wellbeing for Aboriginal and Torres Strait Islander people.

What is evident from the research is that the risk factors that undermine Indigenous wellbeing are symptomatic of, and exacerbated by the collective and intergenerational trauma stemming from colonisation, forced removals and other government policies. What is also evident is that government policies and programs seemingly disregard the level of trauma in our communities, and in many instances, exacerbate that trauma by imposing service models that continue to marginalize and disempower Aboriginal and Torres Strait Islander people.

This submission draws from evidence to:

- explain trauma as a barrier to improving Aboriginal and Torres Strait Islander wellbeing;
- emphasise the need for healing the intergenerational and collective trauma experienced by our communities in order to make progress towards improving outcomes for Aboriginal and Torres Strait Islander Australians; and
- propose practical approaches that governments can apply to increase the effectiveness of collective efforts to 'Close the Gap'. In particular we recommend that the refreshed Closing the Gap framework embeds:
 - a comprehensive understanding of the collective and intergenerational trauma and its impacts on Aboriginal and Torres Strait Islander communities, families and individuals;
 - healing and trauma-informed approaches that are integrated across all sectors and embedded in systems, frameworks, policies and services;
 - leadership, collaboration and coordination across all levels of government, the non-government sector and, most importantly, Aboriginal and Torres Strait Islander

people to promote and support trauma and healing-informed policies, programs and services at the local community level;

- commitments to co-design of policy and programs, and to investments in community-led services and healing programs that are supported over the long-term, so that self-determination becomes a reality for Aboriginal and Torres Strait Islander communities;
- recognition of the value of cultural knowledge and how it can inform policy formation and service delivery;
- acknowledgement of past wrongs, such as the Stolen Generations and Stolen Wages with provision for appropriate reparations; and
- a strong evidence base with a commitment to co-evaluation that informs and empowers local decision-making.



Richard Weston
December 2017

2. About the Healing Foundation

The Healing Foundation is a national Aboriginal and Torres Strait Islander organisation that partners with communities to address the ongoing trauma caused by colonisation and subsequent actions such as the forced removal of children from their families. Our work helps people create a different future by building culturally strong, community designed and delivered pathways to healing. The Healing Foundation:

- funds and supports healing programs targeted at communities, families and individuals;
- builds the evidence and knowledge base for best practice in Indigenous healing; and
- builds leadership and the capacity of Aboriginal and Torres Strait Islander communities and workers to respond to trauma through education and training.

In 2016, the Healing Foundation embarked on developing a Theory of Change (TOC) for healing, designed to enable better definition of the building blocks necessary to bring about long term, sustained change in healing from trauma for Aboriginal and Torres Strait Islander people. It is the first time that trauma knowledge has been combined with an Aboriginal and Torres Strait Islander worldview.

The context that guides our TOC for healing is¹:

- Colonisation and past and present government policies had led to trauma for Aboriginal and Torres Strait Islander people (across generations)
- Such trauma limits (or removes) the ability to act in empowered ways and leads to a number of negative outcomes for Aboriginal and Torres Strait Islander people
- Such outcomes mean Aboriginal and Torres Strait Islander people are limited in their capacity to initiate / take up development opportunities – regardless of external resources

¹ Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change p4

- Healing is an essential (although not sufficient) condition of any support for Aboriginal and Torres Strait Islander development in Australia.

Our Theory of Change builds a clear narrative about how healing creates positive social change for Aboriginal and Torres Strait Islander communities, families and individuals. The work demonstrates that sustained and positive change is more likely to occur at the individual, family and community level when there is positive alignment across three key domains. Investment in these domains of change, enables empowerment, resources and opportunities to emerge.

The three key domains to support quality healing are:

- a policy context that enables healing;
- the identification of healing network and champions that lead healing; and
- the development of responses to deliver healing.

3. Improving the effectiveness of the Closing the Gap agenda

The COAG Closing the Gap agenda provides a high-level multi-jurisdictional focus on improving the lives of Aboriginal and Torres Strait Islander people. It is an important and critical endeavour, and must not be allowed to fail. Progress has been slow, and alarmingly, but predictably after nearly a decade of investment and effort, only one of the Closing the Gap targets is on track.

The Healing Foundation's view is that progress is predictably slow because the initial Closing the Gap agenda did not take into account international evidence about trauma and healing, and therefore:

- did not address the collective and intergenerational trauma experienced by Aboriginal and Torres Strait Islander people arising from colonisation and subsequent government policies at all levels which brought family separation, removal from land and culture, and systemic racism. Because this trauma is both intergenerational and collective, it cannot be addressed by focusing solely on individuals who are exhibiting the 'effects' of this trauma such as mental illness, substance abuse, family violence, unemployment, welfare dependency.
- did not take into account international evidence about the impact of trauma on health outcomes and thus had limited strategies to address trauma

- failed to work with Aboriginal and Torres Strait Islander people to co-design, implement and review policies and programs that meet local needs. The COAG Closing the Gap targets were determined by governments for governments. They were not negotiated with Aboriginal and Torres Strait Islander communities as partners in a shared journey. Co-design goes beyond consultation and engagement to genuine negotiation among equals.
- did not place and preference Aboriginal and Torres Strait Islander culture at the centre of policies and service delivery, and continued to exacerbate trauma by imposing western service models that marginalise and disempower Aboriginal and Torres Strait Islander people.

The Closing the Gap refresh is an important opportunity to adopt an evidence-based approach in order to rectify these failings. All health outcomes are intrinsically inter-related to your mental health and wellbeing. Trauma impacts must be addressed in order to prevent chronic disease, improve overall health and ensure engagement with education and employment.

This section draws on the evidence related to the collective and intergenerational trauma experienced by Aboriginal and Torres Strait Islander communities, families and individuals, and the elements of effective healing. The evidence demonstrates that without taking active steps towards collective healing, well-intentioned interventions and investments will continue to be ineffective at best, and at worst will compound existing harm.

For the Closing the Gap agenda to meet its existing targets (and any new inclusions), it is necessary for governments to recognise this trauma and adopt healing frameworks holistically across their activities.

3.1 The burden of intergenerational and collective trauma

The first step is to recognise the extent of intergenerational and collective trauma and the associated trauma burden.

First Australians have been exposed to generations of trauma through colonisation, dispossession, assimilation, child removal policies, and exclusion. The nature of this trauma has been both collective and intergenerational. As a result of past and present government policies, trauma has



taken place at the community, family and individual levels. It has also been transferred from generation to generation, leading to a vicious cycle of worsening social, economic and cultural outcomes.

Nearly all the current challenges faced by Aboriginal and Torres Strait Islander people, families and communities are interconnected with this history of trauma, a history where trauma is 'passed on' to future generations. That is, there is a transmission of trauma from Aboriginal people who experienced the worst of colonialism to their families and communities. For Aboriginal and Torres Strait Islander people a history of forced removal of children, policies such as racial assimilation, and socially sanctioned racism and violence are drivers for intergenerational trauma, as are grief over the loss of land and culture².

In order to 'close the gap' and address the disparity in outcomes for Aboriginal and Torres Strait Islander people, we need to understand trauma, how it manifests and how we can support healing. The Healing Foundation has shown that³:

- trauma in our communities is not just experienced individually but collectively. It is experienced between generations and across communities and has multiple impacts on relationships;
- trauma affects a person's sense of physical and emotional safety, impacting on the social, emotional, physical, cultural and spiritual aspects of functioning;
- trauma is often caused by a psychologically stressful event or series of events; and
- trauma can cause feelings of intense fear, helplessness or horror and can affect a person for many decades and in many different ways.

For many Aboriginal and Torres Strait Islander people, colonisation was not a moment in the past, but rather remains an ongoing experience that is perpetuated through contemporary policies and events.⁴ For example, in implementing the Closing the Gap agenda:

² Aboriginal and Torres Strait Islander Healing Foundation. (2012). *Our Healing, Our Solutions: Volume 3*. Aboriginal and Torres Strait Islander Healing Foundation

³ Weston R 2017 Evaluation is not life or death – it's far more important than that. Keynote Address, Australasian Evaluation Society International Evaluation Conference, Canberra 5 September 2017

⁴ King M, Smith A and Gracey M, 2009 Indigenous health part 2: the underlying causes of the health gap *The Lancet*, Vol 374, Issue 9683, 76 - 85

- governments continue to impose top down service models that are not informed by an Indigenous worldview, with a reliance on programs structured by western theory and logics that readily disregard the importance of cultural and spiritual wellbeing for Aboriginal and Torres Strait Islander people; and
- governments continue to fund agencies and organisations that have recent histories of being involved in the removal of Aboriginal and Torres Strait Islander children to deliver services for Aboriginal and Torres Strait Islander communities.

When considered against the key measures and targets identified in Closing the Gap, we can see the relationship between trauma and disadvantage, and the social determinants of health for Aboriginal and Torres Strait Islander people. Trauma impacts early childhood development, causing learning difficulties and lack of self-control, often resulting in disengagement from school. Living with trauma diverts a person's energy to manage the physical and emotional impacts of that trauma. This, along with poor educational outcomes, undermines the ability of Aboriginal and Torres Strait Islander people to engage in employment, which is correlated with poverty, overcrowded housing and poor standards of living. The disproportionate levels of incarceration of Aboriginal and Torres Strait Islander people is both symptomatic of, and a cause of trauma, with a strong correlation between criminogenic risk factors, the social determinants of health, and the prevailing symptoms of trauma⁵.

⁵ Derzon J 2010. 'The Correspondence of Family Features with Problem, Aggressive, Criminal and Violent Behaviour: A Meta-Analysis'. Springer;
 Farrington et al in Welsh B and Farrington D 2012. 'The Oxford Handbook of Crime Prevention'. Oxford University Press. New York;
 Fite P, Preddy T, Vitulano M, Grassetti S and Wimsatt A 2012. 'Perceived Best Friend Delinquency Moderates the Link Between Contextual Risk Factors and Juvenile Delinquency'. Journal of Community Psychology. Vol 40, Issue 6, pp 747-761. Wiley Online Library;
 Halsey M and Deegan S 2012. 'Father and Son: Two Generations Through Prison'. Punishment and Society 13 (3), pp 338 – 367;
 Homel R, Freiberg K, Branch S and Le H 2015. 'Preventing the Onset of Youth Offending: The Impact of the Pathways to Prevention Project on Child Behaviour and Wellbeing'. Trends and Issues in Crime and Criminal Justice No 481. Australian Institute of Criminology;
 Weatherburn D, Snowball L & Hunter B 2008 'Predictors of Indigenous Arrest: An Exploratory Study'. Australian and New Zealand Journal of Criminology, Vol 41, No 2, pp 307 – 322;
 Allard, T 2010 'Understanding and Preventing Indigenous Offending', Indigenous Justice Clearinghouse Brief 9, Australian Government;
 Wundersitz J 2010 'Indigenous Perpetrators of Violence: Prevalence and Risk Factors for Offending'. AIC Reports Research and Public Policy Series 105. Australian Government;



Intergenerational trauma is a thread that links chronic diseases, poor emotional health, mental illness, substance misuse and alcohol abuse, and disengagement from education and work, among other issues. There is also clear evidence that if not healed, trauma negatively affects neurological development which passes to future generations⁶.

The social, economic and cultural disadvantage experienced by many Aboriginal and Torres Strait Islander people manifests itself most clearly in disproportionate experiences of suicide, child removal, family violence and imprisonment – all of which generate further damage to communities and compound trauma. Very often, these issues are connected – for example, family violence is a leading cause of the removal of Aboriginal and Torres Strait Islander children. Family violence is also a significant underlying cause of children and young people being exposed to youth detention, and is both a cause and consequence of contact with the criminal justice system. The trauma caused by one experience cascades into further, compounding impacts through other traumatic experiences. While this trauma remains unhealed, Closing the Gap targets will inevitably not be met.

The trauma affects all aspects of people's lives: spiritual, mental, physical and emotional well-being. It acts to disempower people which then limit their ability to control and direct their development and / or take up opportunities⁷. Further, international research⁸ points to the complex relationship between opportunities made available to people and their ability to act on these. Where people's ability to be able to consider and act, is limited and /or they don't have access to the resources they need to manage their lives, they are significantly less likely to take up opportunities to improve the situation even where these would seem to be in their best interests. Essentially, trauma leads to a

Blagg H, Bluett-Boyd N and Williams E 2015. 'Innovative Models in Addressing Violence against Indigenous Women: State of Knowledge Paper'. ANROWS State of Knowledge Paper Issue 8

⁶ van Der Kolk, B. 2014, *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma*, Penguin, New York

⁷ Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change p13

⁸ Sen, Amartya 2005. "Human rights and capabilities". *Journal of Human Development* (Taylor and Francis) 6 (2): 151–166. Nussbaum, Martha 2003. "Capabilities as fundamental entitlements: Sen and social justice". *Feminist Economics* (Taylor and Francis) 9 (2-3): 33–59 in Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change p13.

lack of empowerment – a key requirement for Aboriginal and Torres Strait Islander people to take up development opportunities; and an important precursor to improved wellbeing⁹.

Importantly, recent research suggests that not only has past actions disempowered people, but more recent Government policies have continued the disempowerment process. The provision of government resources (infrastructure, funding and programs / activities) has in some cases not only removed the ability to act in empowered ways but has removed or replaced traditional roles. That is, the ‘state’ intervenes and takes on the role of – for example – protector and provider, carer, nurturer and teacher. This can have the effect of removing the ability to ‘pass’ cultural knowledge.¹⁰ The refreshed Closing the Gap agenda must ensure that government actions empower, rather than disempower, Aboriginal and Torres Strait Islander people.

It is also important to understand the impacts of collective trauma as opposed to individual trauma, with research demonstrating that significant events that impact whole communities have ‘devastating social consequences’¹¹, causing community breakdown and loss of connection to community. This explains how disconnection from country, culture, family and community has had a devastating impact on Aboriginal and Torres Strait Islander health and wellbeing. It also emphasises the need to prioritise collective healing responses rather than focusing on individual treatment interventions. Given that communities live collectively and experience distress collectively, this is critical to creating real change. The failure to tailor healing efforts at a community level means families continue to live in vulnerability without the strength of a community to assist them.

Governments, service providers, and indeed many Aboriginal and Torres Strait Islander communities themselves, are currently ill-equipped to deal with the complex trauma facing many of our people. Governments typically respond to the outcomes of such trauma rather than the causes. This has increased the breakdown of social trust rather than restore it. Rather than addressing the impact on the collective, in policy targeted at recovery, individuals have become pathologised and issues

⁹ Cairney S, Abbott T, Quinn S, Yamaguchi J, Wilson B & Wakerman J. 2017 Interplay wellbeing framework: a collaborative methodology ‘bringing together stories and numbers’ to quantify Aboriginal cultural values in remote Australia. *International Journal for Equity in Health* 16:68 <https://doi.org/10.1186/s12939-017-0563-5>

¹⁰ McKendrick, JH. 2012. ‘Book Review: A Different Inequality by Broos, D. A.’ *AlterNative* 8(3): 357-359. In *Social Compass 2016 A Theory of Change for Healing*, prepared in partnership with the Institute for Human Security and Social Change p14

¹¹ Erickson in Krieg A 2009. ‘The experience of collective trauma in Australian Indigenous communities’. *Australian Psychiatry Vol 17* supplement. The Royal Australian and New Zealand College of Psychiatrists



addressed. As Saul (2014)¹² notes, individualised oriented ideologies and institutional practices often pose tremendous obstacles to addressing the collective consequences of massive trauma. It will be important that the refreshed Closing the Gap agenda shifts the focus away from targeting the behaviour of individuals – more often the symptoms of trauma rather than the cause – and takes a holistic and collective approach to addressing trauma.

In terms of collective responses, acknowledgement, recognition, accountability and justice become pre-requisites for recovery at the individual and community levels. When policies ignore history, the impacts of trauma are increased rather than reduced or addressed. This leads to further breakdown of trust and increases blame, humiliation and shame for those communities that have suffered collective trauma¹³.

If external service providers and government fail to address collective trauma, policies will continue to undermine individual and community development. People will likely respond to the ongoing impact of trauma with negative behaviours for themselves and their families. Further, even when offered opportunities to change the situation the lack of control will mean that people are less likely to take up those opportunities. Finally, ongoing attempts by others to ‘help’ in such situations, without attention to underlying trauma and related issues, runs the risk of extending and perpetuating a sense of lack of control (and trauma) rather than promoting healing¹⁴.

Unresolved trauma creates a huge social and economic cost for all Australian governments, particularly through expenditure on child protection, family violence, youth justice, prisons and social welfare. The persistent and often increasing gaps between Aboriginal and Torres Strait Islander people and non-Indigenous people across many of these areas have traumatising and re-

¹² Saul, J. 2014 *Collective Trauma Collective Healing: Promoting Community Resilience in the Aftermath of Disaster*, Routledge, New York in Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change p14

¹³ Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change p14

¹⁴ Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change p14

traumatising impacts for Aboriginal and Torres Strait Islander people, and further contribute to the trauma burden.

We cannot allow a failure to understand and respond to this trauma burden to prevent significant improvements in outcomes for Aboriginal and Torres Strait Islander people. The Closing the Gap refresh must have trauma- and healing- informed strategies implemented alongside enablers like employment, education and economic empowerment in order for traumatised people to transform their lives. Trauma and healing remains a key missing ingredient in Australia's Indigenous reform efforts. Until recognition of intergenerational and collective trauma is factored into the co-design of Aboriginal and Torres Strait Islander programs and program evaluations, we will continue to fall short of closing the gap.

3.2 Adopt effective healing frameworks

Healing refers to the process by which people come to a stronger sense of self-identity and connection and through this are able to address the distress that they experience changing how they are able to interact. Healing involves a holistic and ongoing approach that is deeply rooted in culture and addresses physical, social, emotional, mental, environmental and spiritual well-being.¹⁵

It is vital that healing is recognised as an ongoing and long-term process that requires slow, deliberate and meaningful work. Multiple generations of collective and cumulative trauma cannot be solved through short-term, one-off programs or events. Time is needed to build connections and relationships, to reconnect with culture and to work towards self-determination emerging as a reality for Aboriginal and Torres Strait Islander communities.

A critical element of healing programs is an emphasis on restoring, reaffirming and renewing a sense of pride in cultural identity, connection to country, and participation in and contribution to community. Collective healing reinstates and reconnects Aboriginal and Torres Strait Islander communities to their core cultural value systems, where obligations and reciprocity were central to community survival. Without enabling the reclaiming and reconnection to these value systems, the

¹⁵ Aboriginal and Torres Strait Islander Healing Foundation Development Team 2009 'Voices from the Campfires: Establishing the Aboriginal and Torres Strait Islander Healing Foundation'. Commonwealth of Australia.



Closing the Gap agenda will continue to languish, and the predominant responses to the significant issues facing contemporary Indigenous communities will remain justice, child protection and welfare.

Collective healing moves away from the individual ‘treatment’ of individuals to a model where ‘individuals develop their own skills and capacities to empower healing in themselves and their families and communities’¹⁶. Materials circulated for the Closing the Gap refresh, which situate ‘overcoming trauma’ in the domain of ‘individuals’ indicate that government does not yet understand the importance of community/collective healing as a critical response to overcoming the trauma experienced by Aboriginal and Torres Strait Islander peoples.

The Healing Foundation’s experience working with Aboriginal and Torres Strait Islander people demonstrates that effective healing creates positive change for individuals, families and communities. Aboriginal and Torres Strait Islander people who have experienced trauma will be unlikely to take up development opportunities without support for healing. Healing is an essential (although not sufficient) condition of any support for Aboriginal and Torres Strait Islander development in Australia¹⁷. Incorporating healing into a collective process of self-determination enables Aboriginal and Torres Strait Islander people to identify and deal with the underlying causes of trauma.

For example, an independent evaluation¹⁸ of the Northern Territory Men’s Healing projects supported by the Healing Foundation demonstrates that healing strategies that are developed through a genuine co-design process and balance therapeutic support with cultural practice can achieve outcomes across a number of health and wellbeing domains. The initiative empowered Aboriginal men through cultural, education and therapeutic healing activities, facilitated access to support services, increased their confidence and capacity to gain meaningful employment and

¹⁶ Collective Healing for members of the Stolen Generations Aboriginal and Torres Strait Islander Healing Foundation 2014b:14

¹⁷ Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change p16

¹⁸ Healing Foundation 2015. ‘Our Men, Our Healing: Creating Hope, Respect and Reconnection’. Evaluation Report Executive Summary. <https://healingfoundation.org.au/app/uploads/2017/03/OMOH-60-pg-report-small-SCREEN-singles.pdf>

overcome issues such as family and domestic violence, alcohol and other drug use, self-harm, incarceration and poor health and social and emotional wellbeing. The evaluation found:

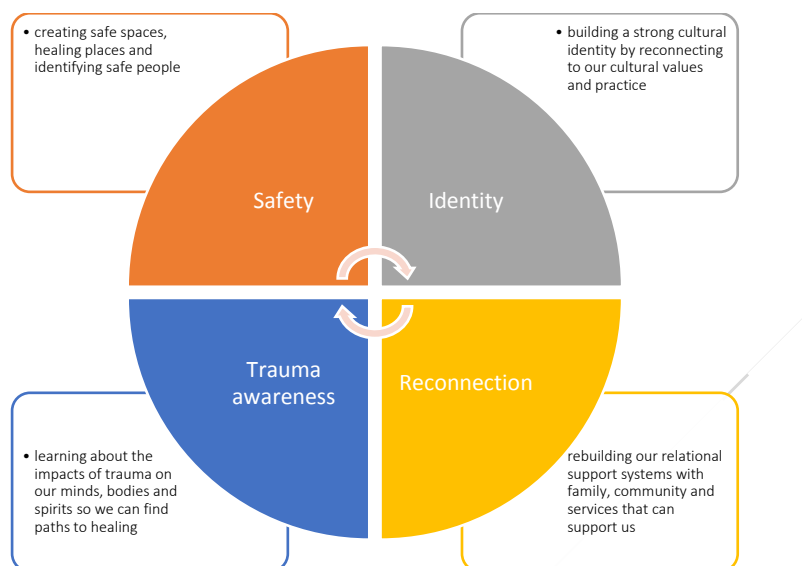
- a reported decrease in incidence of family and domestic violence and less violence generally in communities;
- reduced observable rates of self-harm and suicide during the life of the program in two of the communities;
- at Wurrumiyanga where the program has been running the longest, a reported 50 per cent reduction in the number of men registered with the NT Department of Correctional Services and a significant reduction in rates of recidivism and reoffending over the life of the program;
- women feeling safer and more supported by the men in their families and communities;
- increased health and emotional wellbeing among men in the communities and increased leadership as men take responsibility for their past, present and future; and
- an increased re-emergence of cultural celebrations and ceremonies, some of which had not occurred in the communities for decades.

Through its work, the Healing Foundation has developed four pillars of trauma recovery¹⁹:

- *Safety*: creating safe spaces, healing places and identifying safe people to support healing;
- *Identity*: building a strong cultural identity by reconnecting to our cultural values and practice;
- *Reconnection*: rebuilding our relational support systems with family, community and services that can support us; and

¹⁹ Healing Foundation with Adams, M, Bani, G, Blagg, H, Bullman, J, Higgins, D, Hodges B, Hovane, V, Martin-Pederson, M, Porter, A, Sarra, G, Thorpe A and Wenitong M 2017. *Towards an Aboriginal and Torres Strait Islander violence prevention framework for men and boys*. The Healing Foundation and White Ribbon Australia

- *Trauma awareness*: learning about the impacts of trauma on our minds, bodies and spirits so we can find paths to healing.



Healing-informed approaches based on these pillars can improve outcomes across a range of health and well-being domains, including mental health, social and emotional well-being, family violence, child protection, substance misuse, sexual abuse, youth development, justice and corrections.

Quality healing balances Indigenous and western concepts, may provide for individual support within a broader collective approach, and supports cultural and spiritual renewal concurrently with psychological and therapeutic support.

International and local research indicates that healing programs should be specific to local regions and groups, and are best delivered on country by people from the same cultural group as participants²⁰. Localisation of healing can ensure a trauma-informed approach delivered by skilled workers who understand the history and collective experiences of local Aboriginal people, 'both traumatic and positive'²¹.

²⁰ Aboriginal and Torres Strait Islander Healing Foundation (2014). 'Our Healing Our Solutions: Sharing Our Evidence';

²¹ Caruana, C 2010, 'Healing services for Indigenous people', Family Relationships Quarterly, vol. 17, pp. 3–9. in Aboriginal and Torres Strait Islander Healing Foundation 2014 Our Healing Our Solutions: Sharing Our Evidence':18

Almost ten years into the implementation of Closing the Gap, the 2017 progress report indicates that six of the seven key measures are not on track, including life expectancy, child mortality, educational outcomes and employment. Although profoundly disappointing, the Healing Foundation is unsurprised by these results given that healing-informed approaches were not embedded in policy and programs.

Healing is an ongoing process that needs to be integrated across the broad ambit of laws, policies and services that relate to Aboriginal and Torres Strait Islander people. Trauma-informed approaches must therefore be embedded in all aspects of systems that engage with and impact on Aboriginal and Torres Strait Islander peoples and in cross-sector initiatives that span the community, health, education, employment, justice sectors and beyond. It must be foundational for the refresh of the Closing the Gap agenda in order to give that agenda the impetus it needs to achieve lasting improvements for Aboriginal and Torres Strait Islander people.

The following sections highlight critical elements of effective healing frameworks.

3.2. 1. Overarching policy framework

The complex nature of intergenerational and collective trauma requires a concerted and coordinated cross-sector approach to respond to the lived experiences of Aboriginal and Torres Strait Islander individuals, families and communities.

The Closing the Gap refresh is an opportunity to create policy frameworks at the federal and state level that are informed by an understanding of intergenerational and collective trauma and that enable the development of integrated, holistic, community-led, trauma-informed services and programs.

At a policy level, the integration of trauma- and healing-informed approaches can address many of the issues caused by the silos within government departments and across sectors, and give life to the integration envisaged, but not yet achieved, through the Closing the Gap “building blocks”. At

the service level, this will promote and enable collaboration across sectors to develop holistic, integrated healing approaches, as well as enhance access to knowledge and skills²².

The policy framework should incorporate:

- a comprehensive understanding of the collective and intergenerational trauma and its impacts;
- healing and trauma-informed approaches that are integrated across all sectors and embedded in systems, frameworks, policies and services;
- leadership, collaboration and coordination across all levels of government, the non-government sector and, most importantly, Aboriginal and Torres Strait Islander people to promote and support trauma and healing-informed policies, programs and services at the local community level;
- commitments to co-design of policy and programs and investments in community-led services and healing programs that are supported over the long-term, and with self-determination becoming a reality for Aboriginal and Torres Strait Islander communities;
- recognition of the value of cultural knowledge and how it can inform policy formation and service delivery;
- acknowledgement of past wrongs, such as the Stolen Generations and Stolen Wages with provision for appropriate reparations; and
- a strong evidence base with a commitment to co-evaluation that informs and empowers local decision-making.

²² For example, the Queensland Government's *Our Way* strategy specifically recognises addressing trauma and developing a healing strategy as a core enabler to address the over-representation of Aboriginal and Torres Strait Islander children and families in the child protection system.²² The strategy is an illustration of how trauma and healing informed approaches can be integrated into a comprehensive, long-term, cross-sector plan.

Testimony given at the Royal Commission into Institutional Responses to Child Sexual Abuse has reinforced the importance of truth-telling and recognition in healing, and highlights the critical need for healing and trauma-informed approaches to be embedded in policy and practice at all levels. More than 12% of witnesses to the Royal Commission were Aboriginal and Torres Strait Islander people, indicating that there is an ongoing, urgent need for healing services. As time passes it is likely that more people will be ready to tell their stories. With the Royal Commission closing in December, it is essential that there are new mechanisms for people who want to tell their stories and have truth recognised as part of their healing journey.

3.2.2 Acknowledging the primacy of Aboriginal and Torres Strait Islander values and cultural governance (at the local and regional level)

Holistic healing for individuals, families and communities needs a strong focus on spirituality and culture. The Closing the Gap refresh can be used to ensure that all programs are underpinned by Aboriginal and Torres Strait Islander principles and values including:

- respect: this includes respect for Aboriginal and Torres Strait Islander culture, kinship structures and governance and for principles of respect that guide conversations and ensure safety for everyone at a local level.
- accountability and confidence: people must be accountable for their behaviour; government and other service providers must be accountable to community and community leaders; and community members must demonstrate accountability to each other. We must work with communities to restore their confidence in governance.
- safety: everyone – including women, children, Elders and men – has the right to feel safe and live in peaceful household and community environments. Everyone must be afforded protection through traditional cultural lore/law and under mainstream Australian law. Everyone must contribute to building safe communities for children.

Collective healing programs focus on restoring, reaffirming and renewing a sense of pride in cultural identity, connection to country, and participation in and contribution to community. Collective



healing reinstates core cultural value systems, where obligations and reciprocity were central to Aboriginal survival²³.

Aboriginal and Torres Strait Islander cultural governance²⁴ allows communities to engage in governing with a focus on empowering Indigenous decision-making. Principles of self-determination empower communities to make decisions and choices about the factors that influence their daily lives. Communities, services and initiatives that have strong cultural governance will generally measure success in terms of collective, rather than individual, achievement.

Cultural governance facilitates strong leadership and representation with integrity that gives voice and effect to community members through appropriate engagement channels – and processes that are inclusive, accessible, open and transparent – so that decisions are made in accordance with, for, and by the will of the people. It involves honouring and respecting traditional cultural process, lore and practice, and charging the local leadership with responsibility to govern.

Strong cultural governance and self-determination allows communities to have effective and direct input into addressing issues like family and domestic violence, and to find locally relevant solutions while maintaining honour and respect for local custom and lore or laws. It allows vital and effective cultural components to be embedded into solutions alongside contemporary interventions and support.

Strong cultural governance, which incorporates fair inclusive process, is inherent in functional and thriving Indigenous culture and society. When strong cultural governance is respected, honoured, consulted and followed, it enables successful community led and owned solutions, offering greater potential for local buy in or support, which increases the likelihood of positive outcomes and contributes to broader community transformation.

²³ The Healing Foundation 2017 Submission to the Department of Health on the social and cultural determinants of Aboriginal and Torres Strait Islander health (unpublished) p13

²⁴ Healing Foundation with Adams, M, Bani, G, Blagg, H, Bullman, J, Higgins, D, Hodges B, Hovane, V, Martin-Pederson, M, Porter, A, Sarra, G, Thorpe A and Wenitong M (2017). *Towards an Aboriginal and Torres Strait Islander violence prevention framework for men and boys*. The Healing Foundation and White Ribbon Australia

The 2002 Final Report of a First Nation Research Project on Healing in Canadian Aboriginal Communities recognises the importance of three sectors coming together to lead healing: grass roots community members devoted to healing; community political leaders who validate the importance of the healing work, channel resources and empower people; and the renewal of spiritual and cultural awareness.²⁵

Where the domains of policy, networks and individual / community come together with increasing congruence, healing work has the best chance to restore culture, spirituality, values and ethical mores and balance and harmony begin to emerge again. Aboriginal and Torres Strait Islander people, families and communities then become empowered to take control of their own lives and develop and implement their own solutions. As our own evidence demonstrates, things change at the individual, family, organisation and community levels.

3.2.3 Co-design promotes healing

Government commitment to programmatic co-design principles that privilege Indigenous knowledge is a critical element of achieving effective policy and program outcomes including the national Closing the Gap agenda. The current approach to the Closing the Gap refresh is predicated on government 'consultation' with Aboriginal and Torres Strait Islander people and organisations. As in the past, government retains full control over the decisions about policy and programs affecting Aboriginal and Torres Strait Islander people. Persisting with this approach will jeopardise future progress towards Closing the Gap outcomes.

In contrast with 'consultation', co-design of programs involves services and communities working together from the outset to develop services and programs that are genuinely informed by the clients. By working directly with Aboriginal and Torres Strait Islander men, women and children on every aspect of program design and evaluation, communities can ensure that programs are designed to be safe, accessible and culturally and locally relevant.

²⁵ *Mapping the Healing Journey: The Final Report of a First Nation Research Project on Healing in Canadian Aboriginal Communities*, Aboriginal Healing Foundation. In Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change p18-19



An effective co-design process empowers communities, promotes leadership, supports self-determination to become a reality, and ensures that programs and strategies are based in local cultural knowledge and practice. In turn, this community-led approach enables Aboriginal and Torres Strait Islander communities to take control of their lives and participate more fully in the economy by solving the social issues that otherwise impede this.

The manner in which colonisation occurred, with different impacts in different regions and communities, requires localised responses to address the way trauma manifested in different communities. Recognition of truth in a local context is crucial to effective healing. National priority outcomes such as those articulated in the Closing the Gap targets and key underpinning principles can be agreed in partnerships with Aboriginal and Torres Strait Islander community leaders, peak bodies and service providers. However, the means by which these outcomes are achieved need to be tailored to the circumstances of individual communities and/or regions.

Quality healing is most likely to emerge from strategies that address issues in the local community, are driven by local leadership, and which are based in understanding of the impact of colonisation and intergenerational trauma and grief. Genuine co-design processes recognise this and provide pathways to healing and recovery through recognition of truth at the local level.

Co-design processes also provide opportunities to acknowledge the ‘tensions in relationships [between communities and governments and other service providers] and lack of trust that is the result of this history’²⁶, which is essential if effective partnerships are to be established. It also allows service delivery to be tailored to cultural boundaries, which are often quite different to administrative or jurisdictional boundaries. Co-design requires a genuine willingness for government and non-Indigenous organisations to change and, to some extent, surrender control. It ‘demands that public service staff shift from fixers who focus on problems to enablers who focus on abilities, enabling community ownership and a continued commitment to local needs, culture and knowledge

²⁶ Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change | 2016:5



systems'²⁷. Co-design also allows communities the opportunity to identify their own goals, aspirations and indicators of success, which can inform a meaningful evaluation framework.

3.2.4 Building capacity for healing/informed approaches and trauma-informed services

The development of healing-informed approaches must be informed by an understanding of intergenerational and collective trauma and its impacts. Both program and evaluation design for any Aboriginal and Torres Strait Islander program will continue to fail until such time as there is recognition of the prevalence of trauma as a factor in the poor outcomes for Aboriginal and Torres Strait Islander people across the spectrum of health, justice, child and family and other human service domains.

Aboriginal and Torres Strait islander people continue to face barriers to effective engagement with the services that are funded to support them²⁸. Communities tell us that government and the non-government organisations funded by them continue to impose programs and services, rather than engage in genuine co-design processes that allow communities to identify their own needs, priorities and indicators of success and who is best placed to deliver those services. Additionally, governments continue to fund non-government agencies that have a recent history of removal of Aboriginal and Torres Strait Islander children and then question why community members are not engaging with the service.

The Closing the Gap refresh must be used as an opportunity to ensure that government-funded services reframe their thinking of Aboriginal and Torres Strait Islander clients as 'hard to reach' and instead recognise their failure to build trust and safety with clients as 'a symptom of problematic service delivery'²⁹

²⁷ Healing Foundation (2015). 'Our Men, Our Healing: Creating Hope, Respect and Reconnection'. Evaluation Report Executive Summary.

²⁸ The Healing Foundation 2017 Submission to the Department of Health on the social and cultural determinants of Aboriginal and Torres Strait Islander health (unpublished) p8

²⁹ Mitchell and Chapman 2010 in Arney F and Westby M 2012 'Men's Places Literature Review'. The Centre for Child Development and Education, Menzies School of Health Research, Darwin NT.



Strategies to nurture and develop trauma-informed organisations are a priority if we are to remove the barriers to systems and services that support the healing that is necessary to close the gap in life expectancy between Indigenous and non-Indigenous Australians³⁰.

Community healing requires the creation of 'safe spaces'. A common element in many programs that create safety is leadership by Aboriginal and Torres Strait Islander people who have made considerable progress on their own healing journey. Healing works best when it is in combination with other strengths and activities. For example, when there is a good organisation or a strong community with other activities established and where healing can come in as part of a wider package of change. This suggests healing is not a 'cure' on its own but works best when it is part of a comprehensive enabling approach³¹

Given the levels of trauma among Aboriginal and Torres Strait Islander people it is also important that safety planning is conducted for any gathering where discussion could trigger trauma among participants. Safety plans should include establishing rules of respect, having a time out space, identifying people with counselling skills to support participants, and follow-up to ensure the safety and wellbeing of participants after any yarn that explores trauma-awareness.

Organisations working alongside Aboriginal and Torres Strait Islander communities must have the workforce capability to work effectively with people and communities impacted by trauma.

Common elements of a trauma-informed service model³² include understanding trauma and its impacts, creating safe places, employing culturally competent staff, actively involving trauma survivors in their healing, sharing power and governance through community co-design, providing integrated holistic care, and supporting safe relationship building to promote healing.

The work of the Healing Foundation supports organisations and workers to become trauma-informed and to apply collective healing approaches in delivering programs and services. An analysis

³⁰ The Healing Foundation 2017 Submission to the Department of Health on the social and cultural determinants of Aboriginal and Torres Strait Islander health (unpublished) p14

³¹ Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change p23

³² Atkinson J 2013. 'Trauma-informed services and trauma-specific care for Indigenous Australian children'. Closing the Gap Resource Sheet No 21.

of Training and Education³³ projects funded by the Healing Foundation to provide work place training opportunities for developing skills for understanding and managing the outcomes of trauma, indicated that the great majority of participants did not understand that trauma played a role in their own lives and behaviours, and that developing this understanding was transformative in many cases. The independent evaluation found that the workforce training provided workers with the opportunity to better understand the impact of trauma and grief on the communities where they work. The data showed a significant improvement in workers' confidence to recognise and address trauma as a result of the training which in turn better positions services to assist in Aboriginal and Torres Strait Islander healing.

Trauma-informed services are alert to the symptoms of trauma, which can prevent the risk of misdiagnosis. Services must also be mindful that the presence of trauma can undermine the potential impacts of therapeutic interventions³⁴.

3.2.5 A strong evidence base

The Healing Foundation recognises the importance of applying evidence-based practices in achieving improved outcomes for First Australians. Aboriginal and Torres Strait Islander programs and services are still subject to evaluations focused on the measurement of centrally determined outcomes that give no consideration to Aboriginal and Torres Strait Islander views on what constitutes success. Western theoretical frameworks underpin evaluation approaches that seek to measure individual outcomes, with no regard for the collective nature of Aboriginal and Torres Strait Islander communities.

Empirical evaluation designs that seek to prove a statistically significant impact on Aboriginal and Torres Strait Islander wellbeing are failing to shed light on what elements of the program failed, why they failed or how they could have succeeded, and have not given recognition to those considered effective in the eyes of the people who deliver or engage with the services. While there is a place for

³³ The Healing Foundation (undated) Training and Education Vol 2, Journey to Healing December 2012-November 2013 <https://healingfoundation.org.au/app/uploads/2017/02/Training-Education-Vol-2.pdf>

³⁴ Miller N and Najavits L (2012). 'Creating Trauma-Informed Correctional Care: A Balance of Goals and Environment'. European Journal of Psychotraumatology 2012:3.

quantitative evaluation of Aboriginal and Torres Strait Islander programs, evaluation needs to go beyond the finding of ‘nothing works’ to consider whether the program has actually failed, whether the evaluation methodology has failed, or if both the program and evaluation have disregarded key underlying factors associated with poor outcomes for Aboriginal and Torres Strait Islander people.

Evaluation frameworks must have a true commitment to co-creation of knowledge, create safe spaces for our communities to share wisdom and acknowledgement for their understanding and consider indicators of community-level change. Quality healing is evidence-based, which requires the embedding of strong evaluation frameworks into the programmatic co-design. To this end the Healing Foundation supports reflective practice with communities, empowering them to build their own evidence, rather than relying on external evaluators to undertake outcome analysis in isolation of community.

It is important to note that many evaluators and researchers think that Aboriginal and Torres Strait Islanders are new to these processes; the existence of Aboriginal and Torres Strait Islanders over the last 65,000 years is founded on research. The sophisticated, familial, environmental, conflict resolution and community structures were driven by knowledge creation and passing down and implementing evidence-based strategies over time that worked. These were not changed or tampered with as they were safe, supportive and rigorous and ensured that communities not only survived but thrived.

4. Conclusion

The evidence demonstrates that unless the intergenerational and collective trauma experienced by Aboriginal and Torres Strait Islander people is addressed by trauma-informed practices and healing-informed approaches, interventions and investments in Aboriginal and Torres Strait Islander people’s wellbeing will be ineffective, no matter how well intentioned.

Our research demonstrates that good practice healing initiatives for Aboriginal and Torres Strait Islander peoples are co-designed to address issues in the local community and are driven by local leadership, ideally positioned in a strong Indigenous led organisation. Quality healing practices support collective healing, recognising the importance of connection to family, country and culture, which are central to collective Aboriginal and Torres Strait Islander wellbeing. Analysis of our work shows how quality healing programs draw from both Indigenous and western knowledge systems,

balancing therapeutic approaches with cultural activities and practices that build cultural identity and resilience, and reinstate healthy cultural ways of living.

In order to ensure that outcomes improve for Aboriginal and Torres Strait Islander people, the Healing Foundation recommends that the refreshed Closing the Gap agenda embeds:

1. a comprehensive understanding of the collective and intergenerational trauma and its impacts;
2. healing and trauma-informed approaches that are integrated across all sectors and embedded in systems, frameworks, policies and services;
3. leadership, collaboration and coordination across all levels of government, the non-government sector and, most importantly, Aboriginal and Torres Strait Islander people to promote and support trauma and healing-informed policies, programs and services at the local community level;
4. commitments to co-design of policy and programs and investments in community-led services and healing programs that are supported over the long-term, and with self-determination becoming a reality for Aboriginal and Torres Strait Islander communities;
5. recognition of the value of cultural knowledge and how it can inform policy formation and service delivery;
6. acknowledgement of past wrongs, such as the Stolen Generations and Stolen Wages with provision for appropriate reparations; and
7. a strong evidence base with a commitment to co-evaluation that informs and empowers local decision-making.

“Trauma is not easy to talk about, it often makes people uncomfortable and to hear truth for any of us is not easy. However, talking about trauma is not about deficit thinking but creating hope – many of our people have been caught in feeling mad or bad rather than understanding that they have a normal reaction to very distressing events that have continued to happen to them, their families and



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communities. Having access to understanding how trauma across the generations has impacted on you, has changed how you think, act and behave lets you acknowledge this and find the solutions to move forward. Without being offered an understanding many people feel there is no way out – healing is all about hope – offering a new ending to a distressing story, it is energizing our communities to lead and develop their solutions to get harmony and balance back in their lives. “

*Richard Weston
Keynote Address
Australasian Evaluation Society
International Evaluation Conference, Sept 2017*