



Submission to
Aged Care Workforce Strategy
Department of Health
March 2018

1. Introduction from the CEO

The Healing Foundation is pleased to contribute to the development of the Aged Care Workforce Strategy. We wish to emphasise the importance of taking a trauma-informed, culturally-relevant approach to aged care for Aboriginal and Torres Strait Islander people. We also want to share new knowledge from our current Action Plan for Healing project detailing the specific experience and needs of Stolen Generations survivors.

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. The research shows 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.

The Aged Care Workforce Strategy is an opportunity to ensure that policy and service systems support an aged care workforce that is equipped to provide culturally-responsive and trauma-informed care that meet the special needs of elderly Aboriginal and Torres Strait Islander people.

Consistent with the vision of the Aged Care Diversity framework¹, and given the high level of trauma and disadvantage experienced by Stolen Generations, it is essential that strategies aimed at ensuring quality of care systems for ageing Australians, such as the Aged Care Workforce Strategy, specifically highlight the special needs of elderly Stolen Generations survivors and their descendants.

This submission provides practical approaches that can be applied to increase the effectiveness of policy and programs aimed at improving the wellbeing of elderly Aboriginal and Torres Strait Islander people, and for taking into account the complex needs of Stolen Generations. It identifies the sources and impact of trauma and the elements of healing approaches, and draws out the implications for the Aged Care Workforce Strategy.

We recommend that the Aged Care Workforce Strategy embeds:

- a comprehensive understanding of the history of colonisation and subsequent policies such as removing children from their families and 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 applied holistically to aged care services and support for Aboriginal and Torres Strait Islander people. Assistance to navigate the aged care system and to connect across service domains should be staffed by Aboriginal and Torres Strait Islander people who are trained in trauma-informed practice. Where they are servicing Stolen

¹ "All older people experience a high quality aged care system that ensures equitable access and outcomes and embraces their diverse characteristics and life experiences." <https://agedcare.health.gov.au/support-services/people-from-diverse-backgrounds/aged-care-diversity-framework>

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Generations, they should have specialist knowledge and preferably lived experience of the Stolen Generations.

- leadership, collaboration and coordination across all levels of government, the non-government sector, industry and, most importantly, Aboriginal and Torres Strait Islander people to promote and support trauma and healing-informed policies, programs and services for elderly Aboriginal and Torres Strait Islander people.
- urgent action to ensure that Stolen Generations can access aged care services and support that meet their complex needs and which do not re-traumatise survivors. Organisations supporting and providing services to Stolen Generations must adopt trauma-informed, culturally relevant approaches at all levels including in their underpinning policies and systems, as well as for individual workers.
- commitments to co-design of policy and programs, and to investments in community-led services and programs that are supported over the long-term, so that self-determination becomes a reality for Aboriginal and Torres Strait Islander communities. This means, for example, that Initiatives taken to address the needs of the Stolen Generations must be led by Stolen Generations members and centred on the needs that they themselves have identified.
- recognition of the value of cultural knowledge and how it can inform policy formation and service delivery;
- a strong evidence base with a commitment to co-evaluation that informs and empowers local decision-making at all levels, including local models of aged care.

Richard Weston
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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.

3. Towards a trauma-informed, culturally relevant aged care workforce that can achieve good outcomes for elderly Aboriginal and Torres Strait Islander people

Section 11-4 of the *Aged Care Act 1997* requires that the provision of care for people with special needs is considered in planning for, and the allocation of, new aged care places under the Act. Section 11-3 of the *Aged Care Act 1997* identifies Aboriginal and Torres Strait Islander peoples, care leavers, parents separated from their children by forced adoption or removal as people with special needs

Government policy and program settings must go beyond good intentions and result in real improvements in outcomes for Aboriginal and Torres Strait Islander peoples, and in particular take into account the special needs of the Stolen Generations and their descendants.

The Healing Foundation's recent submissions in relation to the cultural and social determinants of health² and the Closing the Gap refresh³ set out the case for taking trauma-informed, culturally-relevant approaches to delivering services and support to Aboriginal and Torres Strait Islander people. These submissions are attached for the Taskforce's consideration.

Evidence demonstrates that outcomes for Aboriginal and Torres Strait Islander people will be enhanced by:

- recognising the extent of intergenerational and collective trauma and the associated trauma burden
- adopting effective healing frameworks that recognise that collective trauma requires collective healing
- an overarching policy framework that is integrated across all sectors and embedded in systems, frameworks, policies and services
- acknowledging the primacy of Aboriginal and Torres Strait Islander values and cultural governance
- commitment to programmatic co-design principles that privilege Indigenous knowledge

² The Healing Foundation submission to the Social and Cultural Determinants of Health. Department of Health, 2017. See My Life, My Lead. Consultation Report. <http://www.health.gov.au/internet/ministers/publishing.nsf/Content/health-mediarel-yr2017-wyatt143.htm>

³ The Healing Foundation submission to the Closing the Gap refresh (attached). Department of the Prime Minister and Cabinet, 2017

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- building capacity for healing/informed approaches and trauma-informed services
- developing and promulgating a strong evidence base and applying evidence-based practices, with a commitment to co-evaluation that informs and empowers local decision-making

Development of the national Aged Care Workforce Strategy is an important opportunity to ensure that the aged care workforce supporting elderly Aboriginal and Torres Strait Islander people is culturally responsive and trauma-informed.

It is also important to recognise that there are diverse needs within Aboriginal and Torres Strait Islander communities, and in particular to have increased understanding and support for Stolen Generations and their families. These needs are set out in the Healing Foundation's recent submission to the Aged Care Diversity Framework - Action Plan for Aboriginal and Torres Strait Islanders⁴ (attached).

3.1 Trauma is pervasive, collective and intergenerational

International and national evidence demonstrates that colonisation and past and present government policies have led to trauma for Aboriginal and Torres Strait Islander people across generations. This trauma limits (or removes) the ability to act in empowered ways and leads to a number of negative outcomes, which in turn mean Aboriginal and Torres Strait Islander people are limited in their capacity to initiate / take up development opportunities – regardless of external resources. Healing is an essential (although not sufficient) condition of any support for Aboriginal and Torres Strait Islander development in Australia. This characterisation of the context for enabling better outcomes for Aboriginal and Torres Strait Islander people can be applied in all domains, including aged care.

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. 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 healing⁵.

We cannot allow a failure to understand and respond to this trauma burden to prevent significant improvements in outcomes for elderly Aboriginal and Torres Strait Islander people. Trauma and healing remains a key missing ingredient in Australia's Indigenous reform efforts. Unless we factor recognition of intergenerational and collective trauma into the co-design of Aboriginal and Torres

⁴ The Healing Foundation submission to Aged Care Diversity Framework, Action Plan for Aboriginal and Torres Strait Islanders, 2018, unpublished (attached).

⁵ Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change p14

Strait Islander programs and program evaluations for aged care, we will be faced with another set of services that fail to meet the needs of Aboriginal and Torres Strait Islander people.

3.2 Healing

Through its work, the Healing Foundation has developed four pillars of trauma recovery⁶:

- *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
- *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 and social and emotional well-being.

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 participants⁷. 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'.⁸ Quality healing balances Indigenous and western concepts, may provide for

⁶ 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

⁷ The Healing Foundation (2014). *Our Healing Our Solutions: Sharing Our Evidence*

⁸ Caruana, C 2010, 'Healing services for Indigenous people', *Family Relationships Quarterly*, vol. 17, pp. 3–9. in *The Healing Foundation 2014 Our Healing Our Solutions: Sharing Our Evidence*:18

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individual support within a broader collective approach, and supports cultural and spiritual renewal concurrently with psychological and therapeutic support.

Holistic healing for individuals, families and communities needs a strong focus on spirituality and culture. It is critical that aged care programs focussed on Aboriginal and Torres Strait Islander people 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 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.

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 approach⁹

Aboriginal and Torres Strait Islander cultural governance¹⁰ allows communities to engage in governing with a focus on empowering Indigenous decision-making. 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. 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.

⁹ Social Compass 2016 A Theory of Change for Healing, prepared in partnership with the Institute for Human Security and Social Change for the Healing Foundation, unpublished.

¹⁰ 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

3.3 Co-design and co-evaluation of policy, programs and services

Aboriginal and Torres Strait islander people continue to face barriers to effective engagement with the services that are funded to support them¹¹. 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.

Government commitment to programmatic co-design principles that privilege Indigenous knowledge is a critical element of achieving effective policy and program outcomes. For example, the current approach to developing the Aged Care Workforce Strategy is based on ‘consultation’ with people and organisations. 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 people on every aspect of strategy design and evaluation, communities can ensure that actions are designed to be safe, accessible and culturally and locally relevant.

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 tailor actions to the circumstances of individual communities and/or regions.

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’¹², 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 systems’¹³.

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

¹¹ The Healing Foundation submission to the Social and Cultural Determinants of Health. Department of Health, 2017. See *My Life, My Lead* Consultation Report

¹² *Social Compass 2016 A Theory of Change for Healing*, prepared in partnership with the Institute for Human Security and Social Change for the Healing Foundation, unpublished.

¹³ Healing Foundation (2015). *Our Men, Our Healing: Creating Hope, Respect and Reconnection*. Evaluation Report Executive Summary.

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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 tend to be subjected 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.

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. 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.

We support the establishment of a fully resourced, specialist platform for sharing knowledge, best practice models and guidance to overcome common challenges in Aboriginal and Torres Strait Islander aged care. Such forums provide space for community developed knowledge and practices, guidance for educators and other support professionals, as well as community driven leadership in the space of culturally responsive trauma informed practice. Readily available and easily applicable information about evidence-based practice is an invaluable resource to build capacity among service managers and staff.

3.4 Workforce

This section describes the implications for workforce development, inherent in the previous sections about trauma, healing and program co-design and co-evaluation.

Clearly, organisations working alongside Aboriginal and Torres Strait Islander communities must have the workforce capability to work effectively with people and communities impacted by trauma, and to adopt healing approaches to service delivery that empower Aboriginal and Torres Strait Islander people. From a workforce perspective, this means that staff (including managers) at all levels must be equipped and supported to put healing and co-design approaches into practice.

Common elements of a trauma-informed service model¹⁴ include understanding trauma and its impacts, creating safe places¹⁵, 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

¹⁴ Atkinson J 2013. 'Trauma-informed services and trauma-specific care for Indigenous Australian children'. Closing the Gap Resource Sheet No 21.

¹⁵ 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.

of Training and Education¹⁶ 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.

Despite increasing references to trauma awareness across the health sector, feedback from community practitioners and members suggests there is still a significant gap in the accessibility of genuinely trauma-informed psychological and therapeutic support. Atkinson suggests common elements of a trauma-informed service model 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 (Atkinson 2013)¹⁷. Trauma-informed practitioners are mindful that the symptoms of trauma can be misdiagnosed and that the presence of trauma can undermine the potential impacts of therapeutic interventions (Miller and Najavits 2012)¹⁸.

Where trauma impact in community is significant, it can result in a large load for staff of service providers and community members including high staff turnover. Much more needs to be done to provide qualified healing training and supervision for Aboriginal and Torres Strait Islander organisations to be able to deal with highly traumatised people, including supporting staff. This would not only enable them to support their staff well, but would increase the quality of the supports available for survivors and the opportunity to heal.

4. Addressing the needs of Stolen Generations

Section 11-3 of the *Aged Care Act 1997* identifies Aboriginal and Torres Strait Islander peoples, care leavers, parents separated from their children by forced adoption or removal as people with special needs. These categories encompass the Stolen Generations. Stolen Generations have been identified as a 'special needs' group, by DOHA and others in submissions to the National Aboriginal and Torres Strait Islander Health Plan and to the review of aged care but this has not necessarily led to a systemic response that ensures policies and programs specifically cater for the experiences of the Stolen Generations and their families¹⁹.

¹⁶ The Healing Foundation (undated) Training and Education Vol 2, Journey to Healing December 2012-November 2013

¹⁷ Atkinson J 2013. 'Trauma-informed services and trauma-specific care for Indigenous Australian children'. Closing the Gap Resource Sheet No 21.

¹⁸ Miller NA, Najavits LM. Creating trauma-informed correctional care: a balance of goals and environment. *European Journal of Psychotraumatology*

¹⁹ McCausland R, Nettheim, A, & Kang C Qualitative analysis of documentation of the contemporary experience and needs of the Stolen Generations, Research Paper for the Healing Foundation, December 2017 unpublished

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Two-thirds of Stolen Generations were already aged 50 or more in 2015, and the remaining third will be aged 50 or more by 2023²⁰. Qualitative and quantitative analysis recently undertaken for the Healing Foundation indicates that Stolen Generation survivors have complex needs and are significantly more disadvantaged than Aboriginal and Torres Strait Islander people of a similar age who were not removed. Almost 40% of Stolen Generations aged 50 and over have poor mental health, nearly 70% have a disability, and 18% have a profound disability.

14% of all respondents to the Royal Commission into Institutional Responses to Child Sexual Abuse were Aboriginal and Torres Strait Islanders²¹. Nearly 1000 Aboriginal and Torres Strait Islander individuals came forward to tell of the distressing impact of childhood sexual abuse in institutions that they suffered and the trauma inflicted on their lives. Many of these survivors were elderly and are also members of the Stolen Generations. This indicates that the trauma burden for our Stolen Generations and their descendants is significant, pervasive and due to a lack of comprehensive government responses, remains largely unresolved.

Many survivors experience complex trauma needs and many require additional case management supports to assist them to deal with the impact of that trauma. Many are now interacting with multiple systems and require support to deal with health, homelessness and intergenerational trauma family issues, as well as aged care. We have illustrated an emerging model of healing aimed at to supporting survivors needs.



The Healing Foundation recently provided a submission (attached) to the development of an Aged Care Action Plan for Aboriginal and Torres Strait Islanders which will form part of the Aged Care

²⁰ Australian Institute of Health and Welfare *Action Plan for Healing: quantitative analyses Contemporary demography of the removed population and comparative analyses of their characteristics* draft report, Feb 2018, unpublished

²¹Royal Commission into Child Sexual Abuse 2017 A brief guide to the final report: Aboriginal and Torres Strait Islander Communities.

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Diversity Framework²². The submission includes details about the contemporary experience of Stolen Generations and recommends that:

- Healing frameworks should be applied holistically to aged care services and support for Aboriginal and Torres Strait Islander people. This is an opportunity to establish an aged care system/framework that acknowledges the history and impact of colonisation, and subsequent policies such as removing children from their families.
- In order to exercise greater self-determination in relation to policies and decisions that impact on them, Stolen Generations must be invited into negotiations that determine services and policies as an equal negotiating partner.
- Initiatives taken to address the needs of the Stolen Generations must be led by Stolen Generations members and centred on the needs that they themselves have identified.
- Urgent action is needed to ensure that Stolen Generations are able to access aged care services and support that meet their complex needs, and which do not re-traumatise survivors.
- Funding and programs need to be in place that enable Stolen Generations and their descendants to address intergenerational trauma and achieve healing including through individual counselling; intergenerational healing strategies; collective healing approaches such as healing camps and on-country programs; and in healing centres accessible to Stolen Generations across all jurisdictions in cities and regional and remote areas.
- Aged care support and services need to be sufficiently flexible and resourced to enable enhanced cultural connection for elderly Stolen Generations and their families, including support to return to country and being buried on country.
- Non-institutional models of aged care and support need to be urgently investigated and adopted to avoid re-traumatisation. This includes services and support from Aboriginal and Torres Strait Islander organisations with specific focus on Stolen Generations, and avoiding government and non-government service providers who were historically associated with removal of children.
- Organisations supporting and providing services to Stolen Generations must adopt trauma-informed, culturally relevant approaches at all levels including in their underpinning policies and systems, as well as for individual workers.
- Direct points of contact and clear pathways are required to assist Stolen Generations survivors to navigate the service system by providing information and making referrals to appropriate services would be useful additions to service systems. Such points of contact should be staffed by people who are trained in trauma-informed practice and have specialist knowledge about the Stolen Generations, and preferably who are Aboriginal or Torres Strait Islander people and with lived experience of Stolen Generations.

²² The Healing Foundation submission to Aged Care Diversity Framework, Action Plan for Aboriginal and Torres Strait Islanders (attached).

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The implication for the Aged Care Workforce Strategy is that there is an urgent need to ensure that there is a workforce equipped to support and care for a cohort of elderly survivors who have experienced severe trauma as a result of being forcibly removed from their families, and then who may have been abused in institutional care. Survivors are more likely to suffer from poor mental health, and are very likely to have physical disabilities and chronic illnesses. Many fear being re-institutionalised, and want services provided by organisations that were not associated with earlier removal policies.

The acknowledgement of this trauma, its impact, and the need for culturally-relevant, trauma-informed services must be embedded in organisational policies, systems and practices. Staff and management at all levels must be equipped and supported to provide trauma-informed and culturally relevant care.

This includes offering a choice of service models, co-designed and negotiated with the full cooperation of Stolen Generations and their carers. It also involves ensuring that clients are integral in setting and measuring performance standards.

In principle, these settings are similar to those recommended for the broader population of elderly Aboriginal and Torres Strait Islander people. In practice, supporting and caring for Stolen Generations requires a greater level of diligence to avoid re-traumatisation and to address the complex needs experienced by survivors.

As part of the Action Plan for Healing for Stolen Generations, the Healing Foundation has funding from the Department of the Prime Minister and Cabinet to work with Stolen Generations, their carers and other stakeholders to develop resources for the aged care sector that focus on the special needs of the Stolen Generations. However, much more needs to be done in this area to prevent further traumatisation and ensure a workforce that is culturally capable and trauma responsive.

5. Conclusion

This submission provides practical approaches that can be applied to increase the effectiveness of policy and programs aimed at improving the wellbeing of elderly Aboriginal and Torres Strait Islander people, and for taking into account the complex needs of Stolen Generations.

We recommend that the Aged Care Workforce Strategy embeds:

- a comprehensive understanding of the history of colonisation and subsequent policies such as removing children from their families and 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 applied holistically to aged care services and support for Aboriginal and Torres Strait Islander people. Assistance to navigate the aged care system and to connect across service domains should be staffed by Aboriginal and Torres Strait Islander people who are trained in trauma-informed practice. Where they are servicing Stolen Generations, they should have specialist knowledge and preferably lived experience of the Stolen Generations.
- leadership, collaboration and coordination across all levels of government, the non-government sector, industry and, most importantly, Aboriginal and Torres Strait Islander people to promote

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and support trauma and healing-informed policies, programs and services for elderly Aboriginal and Torres Strait Islander people.

- urgent action to ensure that Stolen Generations can access aged care services and support that meet their complex needs and which do not re-traumatise survivors. Organisations supporting and providing services to Stolen Generations must adopt trauma-informed, culturally relevant approaches at all levels including in their underpinning policies and systems, as well as for individual workers.
- commitments to co-design of policy and programs, and to investments in community-led services and programs that are supported over the long-term, so that self-determination becomes a reality for Aboriginal and Torres Strait Islander communities. This means, for example, that Initiatives taken to address the needs of the Stolen Generations must be led by Stolen Generations members and centred on the needs that they themselves have identified.
- recognition of the value of cultural knowledge and how it can inform policy formation and service delivery;
- a strong evidence base with a commitment to co-evaluation that informs and empowers local decision-making at all levels, including local models of aged care.

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