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## **Journeys to Healing and Strong Wellbeing**

**A project conducted by the Lowitja Institute  
for the National Mental Health Commission**

**Roundtable Report – October 2018**

**This document should be read in conjunction  
with the Journeys to Healing and Strong  
Wellbeing Final Report – June 2018**



the  
**Lowitja**  
Institute

Australia's National Institute for Aboriginal and  
Torres Strait Islander Health Research

## Roundtable Participants

- Mr Scott Avery, First Peoples Disability Network
- Dr Chris Bourke, Australian Healthcare and Hospitals Association
- Mr Tom Brideson, National Aboriginal and Torres Strait Islander Mental Health Leadership
- Ms Catherine Brown, National Mental Health Commission
- Professor Pat Dudgeon, National Aboriginal and Torres Strait Islander Mental Health Leadership
- Ms Emma Gleeson, Commonwealth Department of Health
- Ms Lisa Hillan, The Healing Foundation
- Mr Rod Little, National Congress of Australia's First Peoples
- Mr Rob McPhee, Kimberley Aboriginal Medical Service
- Ms Anita Mills, Australian Indigenous Doctors' Association
- Professor Helen Milroy, National Mental Health Commission
- Ms Stacie Murphy, National Aboriginal and Torres Strait Islander Health Workers Association
- Mr Mark Roddam, Commonwealth Department of Health
- The Lowitja Institute: Ms Tahlia Eastman, Ms Mary Guthrie, Mr Romlie Mokak (Chair), Ms Leila Smith

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## Roundtable agenda

Date / time	Tuesday 16 October 2018, 11:00am-3:00pm
Location	Lowitja Institute Canberra Office, Nous House, Level 9, 121 Marcus Clarke Street, Civic, Canberra
Objectives	<p>Confirm priority themes and areas of action:</p> <ol style="list-style-type: none"> <li>1) To explore barriers and enablers for success in delivering the prioritised recommendations,</li> <li>2) To test prioritised recommendations are potential areas for the National Mental Health Commission and others to focus energy and resources</li> </ol>
Attendees	<ul style="list-style-type: none"> <li>• Mr Scott Avery, First Peoples Disability Network</li> <li>• Dr Chris Bourke, Australian Healthcare and Hospitals Association</li> <li>• Mr Tom Brideson, National Aboriginal and Torres Strait Islander Mental Health Leadership</li> <li>• Ms Catherine Brown, National Mental Health Commission</li> <li>• Professor Pat Dudgeon, National Aboriginal and Torres Strait Islander Mental Health Leadership</li> <li>• Ms Lisa Hillan, The Healing Foundation</li> <li>• Mr Rod Little, National Congress of Australia's First Peoples</li> <li>• Mr Rob McPhee, Kimberley Aboriginal Medical Service</li> <li>• Ms Anita Mills, Australian Indigenous Doctors' Association</li> <li>• Professor Helen Milroy, National Mental Health Commission</li> <li>• Ms Stacie Murphy, National Aboriginal and Torres Strait Islander Health Workers Association</li> <li>• Mr Mark Roddam, Commonwealth Department of Health</li> <li>• Ms Emma Gleeson, Commonwealth Department of Health</li> <li>• The Lowitja Institute: Ms Tahlia Eastman, Ms Mary Guthrie, Mr Romlie Mokak (Chair), Ms Leila Smith</li> </ul>
Apologies	<ul style="list-style-type: none"> <li>• Ms Donna Murray, Indigenous Allied Health Association</li> <li>• Ms LeShay Maidment, Institute of Urban Indigenous Health</li> <li>• Mr Indi Clarke, Koori Youth Council</li> <li>• Professor Ngiare Brown, National Mental Health Commission</li> <li>• Ms Tania Dalton, Australian Indigenous Psychologists' Association</li> <li>• Mr Richard Weston, The Healing Foundation</li> <li>• Ms Fiona Petersen, The Healing Foundation</li> <li>• Dr Graham Gee, Victorian Aboriginal Health Service</li> <li>• Mr Karl Briscoe, National Aboriginal and Torres Strait Islander Health Workers Association</li> </ul>

Time	Topic	
11.00	Welcome and Acknowledgement of Country Roundtable objectives	Romlie Mokak
11.10	<b>Background</b> Background on the Journeys to Healing and Strong Wellbeing Project Opening remarks from the National Mental Health Commission	Romlie Mokak Catherine Brown
11.30	<b>Where are we now?</b> Current operating context for Aboriginal and Torres Strait Islander mental health and wellbeing Summary of report themes and prioritised recommendations	Leila Smith
11.40	<b>Policy and practice on trauma informed-care</b> Discussion and questions from discussion paper Areas to focus energy and resources	Mary Guthrie
12.20	<b>Expand and resource Aboriginal and Torres Strait Islander leadership</b> Discussion and questions from discussion paper Areas to focus energy and resources	Leila Smith
1.00	<i>Lunch</i>	
1.30	<b>Establish an annual conference</b> Discussion and questions from discussion paper Areas to focus energy and resources	Tahlia Eastman
1.30	Review and prioritisation of recommendations	Romlie Mokak
2:45	Closing remarks	All

## Background

The Lowitja Institute, Australia's national institute for Aboriginal and Torres Strait Islander health research, was commissioned by the National Mental Health Commission to conduct research in Aboriginal and Torres Strait Islander mental health and wellbeing. The overall purpose of the project was to identify areas of focus and action that support good mental health among Aboriginal and Torres Strait Islander people on their own terms.

Our findings and recommendations in the Final Report<sup>1</sup> are based on advice and guidance from an expert Reference Group, focus groups and interviews held in Brisbane, Melbourne and Broome, and a workshop with Aboriginal and Torres Strait Islander stakeholders.

At its final meeting in June 2018, the Project Reference Group identified the following three recommendations as priorities:

1. Develop an overarching policy and practice in relation to trauma-informed care as it relates to the mental health and wellbeing needs of Aboriginal and Torres Strait Islander peoples.
2. Establish and resource a network across the National, State, and Territory Mental Health Commissions, guided by National Aboriginal and Torres Strait Islander Leadership in Mental Health (NATSILMH).
3. Host an annual national Aboriginal and Torres Strait Islander mental health conference for Aboriginal and Torres Strait Islander health professionals.

Following submission of the final report, the Commission invited the Lowitja Institute to host a one-day roundtable in Canberra on the 16th October 2018. The purpose of the roundtable was to discuss these prioritised recommendations and next steps with Reference Group members, project partners, Aboriginal and Torres Strait Islander organisations, and government agencies. This report outlines the discussions and outcomes against each of these recommendations.

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<sup>1</sup> The Lowitja Institute 2018, *Journeys to Healing and Strong Wellbeing, Roundtable Report for the National Mental Health Commission*, The Lowitja Institute, Melbourne.

## Introductory remarks

Following the Acknowledgment of Country and introductions, Roundtable Chair, Mr Romlie Mokak outlined the status and outcomes of the project, and proceedings for the day as outlined on the agenda on page 4.

Ms Catherine Brown who has represented the Commission on this project, outlined the role of the Commission. She explained that the focus of the Commission is at a national level, and one of its aims is to create linkages between organisations and government bodies undertaking similar work in the mental health space. Figure 1 below shows slides from this presentation.

**Figure 1 - Slides on from National Mental Health Commission's presentation**

**The Commission's role**

*That all Australians achieve the best possible mental health and wellbeing.*

- Monitor and report** on mental health and suicide prevention systems
- Provide advice** to Government and the community
- Act as a **catalyst for change**

**National environment – some new developments**

Fifth National Mental Health and Suicide Prevention Plan

- Priority Area 4: Actions for **Governments** include:
  - work with PHNs and LHNs to implement **integrated** planning and service delivery at a **regional level**;
  - establish an Aboriginal and Torres Strait Islander Mental Health and Suicide Prevention **Reference Group** to set future directions for planning and investment;
  - improve** access to, and experience with, mental health and wellbeing services, in **collaboration** with ACCHS and other service providers;
  - strengthen the **evidence base** needed to improve services and outcomes.

Million Minds Mental Health Research Mission \$125M over 10 years

- First tranche: Three priorities identified - Aboriginal and Torres Strait Islander mental health

Australian Government  
National Mental Health Commission

There was further discussion in relation to the high level of activity in the mental health space. This included:

- The Senate referral of the accessibility and quality of mental health services in rural and remote Australia in 2018 to the Senate Community Affairs References Committee for inquiry and report. The reporting date for this Committee has been extended to 27 November 2018.<sup>2</sup>
- The Australian Government announcement in May 2018 of the Medical Research Future Fund (MRFF) Million Minds project. The Government will deliver \$125 million over 10 years to the Million Minds Mission to assist a million people who might otherwise not be part of mental health research and clinical trials to access new approaches to diagnosis, treatment and recovery. Aboriginal and Torres Strait Islander mental health is one of three priorities under this initiative.<sup>3</sup> The Mission will complement priorities under the Fifth Mental Health

<sup>2</sup> [https://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate/Community\\_Affairs/MentalHealthServices](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/MentalHealthServices)

<sup>3</sup> <https://beta.health.gov.au/initiatives-and-programs/million-minds-mental-health-research-mission> accessed 20/11/2018

Plan and Suicide Prevention Plan and is consistent with Australian Medical Research and Innovation Strategy 2016–2021 and Priorities 2016–2018.<sup>4</sup>

- The Minister for Health announcement in October 2018 of additional funding of \$51.8 million for the mental health care for young Australians through Headspace.<sup>5</sup>
- Also, in October 2018, the Australian Government announced that it will establish a Productivity Commission Inquiry into the role of mental health in the Australian economy and the best ways to support and improve national mental wellbeing.<sup>6</sup>

This is in addition to an already crowded mental health policy space as outlined in Appendix A.

## Trauma and trauma informed care

### Recommendation outlined in the Final Report<sup>7</sup>

Develop an overarching policy and practice in relation to trauma-informed care as it relates to the mental health and wellbeing needs of Aboriginal and Torres Strait Islander peoples. This should include, but not necessarily be limited to:

- a) review the current state of operating trauma-informed care for Aboriginal and Torres Strait Islander peoples
- b) review relevant terminology and definitions including individual, collective and cumulative trauma, historical and contemporary trauma, and intergenerational trauma
- c) develop principles for trauma-informed care for Aboriginal and Torres Strait Islander peoples
- d) design appropriate content for trauma-informed care for Aboriginal and Torres Strait Islander peoples
- e) ensure that there is a duty of care protocol for all mental health workers dealing with mental health trauma patients
- f) consider the relationship between trauma-informed care training and cultural competence training
- g) ensure systemic, organisational and individual processes for trauma-informed care to operate as a standard practice for Aboriginal and Torres Strait Islander mental health patients
- h) identify the target audience across the mental health workforce for training.
- i) identify resources to implement the above.

There was broad discussion around the recommendation above from the Final Report<sup>8</sup> and the context of trauma and trauma informed care. Some points included:

- the need to define trauma-informed care

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<sup>4</sup> <http://www.health.gov.au/internet/budget/publishing.nsf/Content/budget2018-factsheet71.htm>

<sup>5</sup> <https://www.greghunt.com.au/support-for-headspace-boosts-youth-mental-health-in-flinders/>

<sup>6</sup> <http://jaf.ministers.treasury.gov.au/media-release/024-2018/>

<sup>7</sup> The Lowitja Institute 2018, *Journeys to Healing and Strong Wellbeing, Roundtable Report for the National Mental Health Commission*, The Lowitja Institute, Melbourne.

<sup>8</sup> *Ibid.*

- being trauma-informed does not necessarily mean that a practitioner or organisation is culturally safe
- trauma-informed training tends to focus more on practitioners – and less on management, policy, and system – meaning that the training remains static at a practitioner level when broader, system changes are required, and
- Understanding that trauma-informed care doesn't provide competency.

Participants saw merit in the following areas of focus and activity:

- A healing framework as an alternative way to respond to trauma (this background research is currently being done by the Healing Foundation),
- more research in the trauma-informed space; there were suggestions on the need for research to look at global Indigenous issues that are comparable and documented, and
- Better understanding of how teachers, the justice system, and other sectors and environments outside the health system experience and respond to the impacts of trauma.

There were also calls to review the current state of trauma informed care for both the mainstream mental health system, and for Aboriginal and Torres Strait Islander people within the system. It was agreed that it was imperative that the Aboriginal and Torres Strait Islander aspect of this work must be undertaken by Aboriginal and Torres Strait Islander people. In addition, there should be strong links and synchronicity between both the mainstream and Aboriginal and Torres Strait Islander aspect of this work.

Other points raised about this framework were:

- The **scope** could be principles and competencies to address prevention of trauma, better recognise trauma and support recovery from trauma. In doing this, the Framework could also provide reference to a call for national truth telling as stated in the Uluru Statement from the Heart.
- The **objectives** of a framework could be to lead the way for more immediate outputs such as more trauma-informed training and longer-term outputs such as reforms for the mental health system.
- The **approach** should ensure that Aboriginal and Torres Strait Islander people lead the way in developing the Aboriginal and Torres Strait Islander framework; to define what trauma means, and to demonstrate success through stories and cases that link to tangible calls to action. Also, an Aboriginal and Torres Strait Islander approach will benefit others by reshaping the discourse around mental health and wellbeing through a national, strengths-based approach that adopts a broader perspective to healing and mental health and wellbeing services.

### Revised recommendation

The revised recommendation following the Roundtable discussion is outlined below:

Develop a trauma-informed care framework of principles and competencies relating to the mental health and wellbeing of Aboriginal and Torres Strait Islander peoples, in sync with a framework for the wider Australian population. This should include, but not necessarily be limited to:

- review the current state and key concepts surrounding trauma-informed care,

- develop an action plan to apply the principles and translate competencies to training needs across the mental health and wellbeing workforce,
- draw on the framework to develop calls to action that reform systemic and organisational processes, and
- identify resources to implement the above.

## Aboriginal and Torres Strait Islander mental health leadership

### Recommendation outlined in the Final Report<sup>9</sup>

Establish and resource a network across the National, State, and Territory Mental Health Commissions, guided by National Aboriginal and Torres Strait Islander Leadership in Mental Health (NATSILMH). The network should consider leading the development of an action plan to:

- a) provide a strong case and support for all mental health services to continuously improve their service model to meet the mental health and wellbeing needs of Aboriginal and Torres Strait people
- b) monitor the accountability of PHNs and LHNs to deliver services to Aboriginal and Torres Strait Islander people and to work with ACCHOs and Aboriginal and Torres Strait Islander services
- c) undertake further research and evaluations on mainstream organisations' contributions to health and wellbeing outcomes for Aboriginal and Torres Strait Islander peoples.

Roundtable participants discussed the objectives and scope of the recommendation above to expand and resource Aboriginal and Torres Strait Islander leadership. The context of this recommendation in the Final Report was as a response to the current context of mental health and wellbeing services, namely to:

- Support the strengths of Aboriginal and Torres Strait Islander services
- Improve recognition and responses to Aboriginal and Torres Strait Islander services that are under-resourced and operating at crisis level
- Contribute to improvements in collection, reporting and management of data, and
- Advocate on ways to balance clinical and cultural aspects of care.

Participants discussed ways to reword the recommendation to meet the primary objective of supporting sustainable models and processes for Aboriginal and Torres Strait Islander leadership. Aboriginal and Torres Strait Islander leadership in this context was framed as both individuals in leadership roles and bodies or organisations.

Participants suggested broadening the scope of the recommendation beyond National, State, and Territory Mental Health Commissions. This also led to discussion on how Aboriginal and Torres

<sup>9</sup> The Lowitja Institute 2018, *Journeys to Healing and Strong Wellbeing, Roundtable Report for the National Mental Health Commission*, The Lowitja Institute, Melbourne.

Strait Islander leadership could hold others to account, for example through links to contracting arrangements with PHNs.

### Revised recommendation

Expand, support and resource Aboriginal and Torres Strait Islander individuals and models of leadership. These leaders and organisations should have authority to inform, monitor, and report on activities of mental health and wellbeing services and their contributions to Aboriginal and Torres Strait Islander people's health and wellbeing.

## National Aboriginal and Torres Strait Islander mental health conference

### Recommendation outlined in the Final Report<sup>10</sup>

Host an annual national Aboriginal and Torres Strait Islander mental health conference for the Aboriginal and Torres Strait Islander workforce.

Lastly, roundtable participants considered the third recommendation regarding an annual national Aboriginal and Torres Strait Islander mental health conference. This recommendation was identified as a priority based on responses from Aboriginal and Torres Strait Islander health practitioners throughout the consultation component of this project. This followed an ongoing narrative throughout the roundtable about honouring voices coming from community.

During project consultations Aboriginal and Torres Strait Islander practitioners identified the need for safe spaces to talk among peers and actively engage outside of the workplace, with many participants identifying how this could contribute towards minimising burnout and isolation.

The following were agreed. That the Conference:

- be led by Aboriginal and Torres Strait Islander people
- be undertaken in partnership with relevant Aboriginal and Torres Strait Islander organisations
- be open to the Aboriginal and Torres Strait Islander mental health workforce as well as non-Indigenous people working in the Aboriginal and Torres Strait Islander mental health space
- have scope that includes mental health, social and emotional wellbeing and drug and alcohol
- include master classes on topics such as leadership and cultural models of care
- seek funding and sponsorship from multiple avenues, including funding for conference bursaries
- be held in 2020.

This recommendation was strongly supported.

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<sup>10</sup> The Lowitja Institute 2018, *Journeys to Healing and Strong Wellbeing, Roundtable Report for the National Mental Health Commission*, The Lowitja Institute, Melbourne.

## Revised recommendation

Hold an annual national Aboriginal and Torres Strait Islander mental health and wellbeing conference for the Aboriginal and Torres Strait Islander workforce.

## Next steps

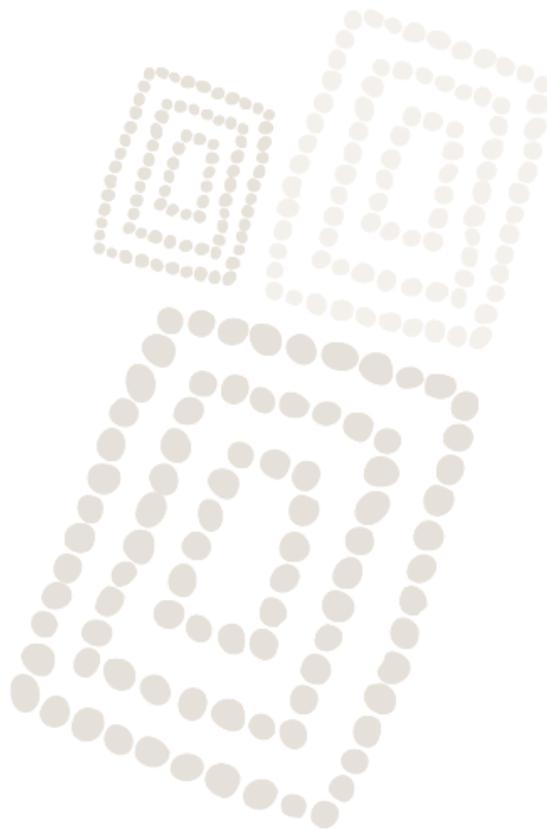
It was agreed that all recommendations outlined in the Final Report are important, with each warranting further exploration, though noting that current capacity and time is a limiting factor in considering and prioritising the work.

The Lowitja Institute will undertake to widely distribute the Final Report, together with this Roundtable report and will keep key stakeholders informed of developments emerging from the Roundtable.

The National Mental Health Commission and the Department of Health will consider the Final Report and Roundtable Report as a part of their future plans and provide feedback to this group.

## Conclusion

Participants agreed that the Roundtable provided a valuable opportunity to consider and prioritise actions that are occurring in an already crowded policy space, and to progress important work in the mental health space for Aboriginal and Torres Strait Islander people.



## Appendix A

Key policy documents relating to the

Mental Health of Aboriginal and Torres Strait Islander people, 2013–2018

### **Commonwealth Government Policy**

*Fifth National Mental Health Plan, August 2017 (Priority Area 4 – Improving Aboriginal and Torres Strait Islander mental health and suicide prevention)*

Fifth National Mental Health Plan Implementation Plan

National Aboriginal and Torres Strait Islander Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing – 2017-2023

National Aboriginal and Torres Strait Islander Health Plan 2013–2023

National Aboriginal and Torres Strait Islander Health Plan Implementation Plan

My Life My Lead - Opportunities for strengthening approaches to the social determinants and cultural determinants of Indigenous health: Report on the national consultations - December 2017

National Cultural Respect Framework for Aboriginal and Torres Strait Islander Health 2016-2026

National Aboriginal and Torres Strait Islander Suicide Prevention Strategy 2013

Australian Government Response to Contributing Lives, Thriving Communities - Review of Mental Health Programmes and Services 2015

Resource sheet no. 18 produced for the Closing the Gap Clearinghouse - *Strategies to minimise the incidence of suicide and suicidal behavior* February 2013 - produced for the Closing the Gap Clearinghouse

Resource sheet no. 19 produced for the Closing the Gap Clearinghouse, Strategies and practices for promoting the social and emotional wellbeing of Aboriginal and Torres Strait Islander people - February 2013

Resource Sheet No. 21 produced for the Closing the Gap Clearinghouse Trauma-informed services and trauma-specific care for Indigenous Australian children, Prof. Judy Atkinson - 2013 – AIHW/AIFS

### **Jurisdictional Policy documents**

Proud and Strong – Queensland Aboriginal and Torres Strait Islander Social and Emotional Wellbeing Action Plan 2016-19 – Queensland Mental Health Commission Queensland

Balit Murrup – Aboriginal Social and Emotional Wellbeing Framework 2017-2027 – Victorian Department of Health and Human Services

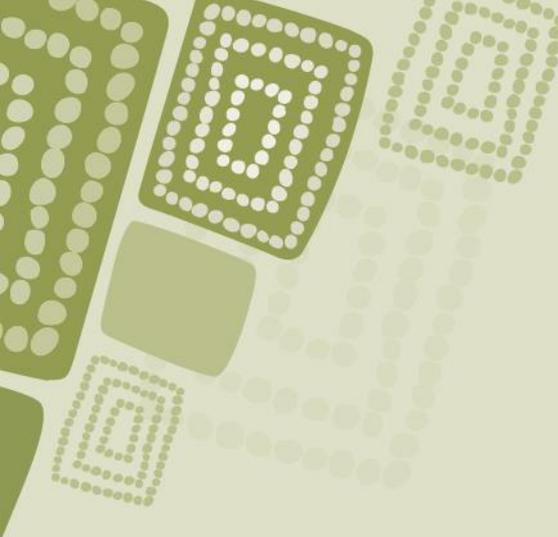
### **Australian Government funded projects**

Solutions that Work: What the evidence and our people tell us: Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project Report, June 2016

Gayaa Dhuwi (Proud Spirit) Declaration, 2018

Gayaa Dhuwi (Proud Spirit) Declaration Implementation Guide

Our Healing Our Way – Leading and Shaping our Future - Healing Foundation, May 2016.



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