

Submission
No 41

INQUIRY INTO REPARATIONS FOR THE STOLEN GENERATIONS IN NEW SOUTH WALES

Organisation: Aboriginal Health and Medical Research Council

Date received: 23/02/2016



Submission to the
NSW Parliament Legislative Council
**Inquiry into Reparations for the Stolen
Generations in NSW**

Prepared by

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Aboriginal Health and Medical Research Council NSW

INTRODUCTION

Thank you for the opportunity to provide a submission to the NSW Legislative Council's Inquiry into Reparations for Stolen Generations in NSW.

The Aboriginal Health and Medical Research Council (AH&MRC) of NSW commends this inquiry and report on the response of NSW to the Bringing Them Home Report and its recommendations regarding reparations. We welcome the potential introduction of policies and legislation to address reparations for Stolen Generations in NSW.

ABOUT THE AH&MRC

The Aboriginal Health and Medical Research Council of New South Wales (AH&MRC) is the peak representative body and voice of Aboriginal communities on health in NSW. We represent our members, the Aboriginal Community Controlled Health Services (ACCHSs) that deliver culturally appropriate and comprehensive primary health care to their communities. The AH&MRC supports and promotes the holistic view of Aboriginal health as defined by NACCHO:

“Aboriginal health” means not just the physical well-being of an individual but refers to the social, emotional and cultural well-being of the whole Community in which each individual is able to achieve their full potential as a human being thereby bringing about the total well-being of their Community.’

<http://www.naccho.org.au/aboriginal-health/definitions/>

The AH&MRC is governed by a Board of Directors, who are Aboriginal people elected by our members on a regional basis. We represent our members and communities on Aboriginal health at state and national levels. Our purpose is to lead the Aboriginal health agenda for better policies, programs, services and practices, ensure Aboriginal knowledge informs decision making process, support, strengthen and sustain Aboriginal Community Controlled Health Services. The AH&MRC is made up of 49 Aboriginal Community Controlled Health Services across NSW.

ABOUT THE SEWB WSU

This submission is prepared by the AH&MRC Social and Emotional Wellbeing (SEWB) Workforce Support Unit (WSU), funded under the Indigenous Advancement Strategy to support approximately 180 SEWB, Mental Health and Alcohol and Other Drug (AOD) workers in Aboriginal Community Controlled Health Services (Aboriginal Medical Services) across NSW. The AH&MRC is also funded by the NSW Ministry of Health to run the Aboriginal Drug and Alcohol Network (ADAN) and for the position of Statewide Mental Health Coordinator.

The core business of the WSU is to build and support a more stable and qualified SEWB and AOD workforce in Aboriginal communities across NSW. It does this in three ways:

- 🌸 Promoting and facilitating forums, networks and events which bring workers together
- 🌸 Delivering training and professional development opportunities
- 🌸 Developing culturally specific resources for the workforce

Since its establishment in 2012, the WSU's engagement with its 180 strong workforce has fostered trust and confidence, enabling open and regular channels of communication and strong relationships between workers and AH&MRC staff.

Since its establishment, the SEWB WSU have formed strong working partnerships with key NSW Stolen Generation organisations and councils and their members, such as Link – Up NSW, Cootamundra Girls Home Inc, Kinchela Boys Home Inc and, AIATSIS, Family Records Unit, The Healing Foundation and the Stolen Generations Council NSW/ACT. AH&MRC staff have also supported significant reunions such as The Kinchela Boys Home 90th Anniversary, The Darcy Wright Reunion and Healing camps facilitated by Link Up – NSW.

The workforce the AH&MRC support are primarily positioned in ACCHS in Aboriginal communities across NSW, (see map in appendices) and their primary concern and core business is to address the health and social, cultural and spiritual wellbeing of their clients, their families and communities.

SEWB WSU STRUCTURE

The SEWB WSU structure is unique, in that we are funded by both State and Commonwealth governments, so we are able to offer support to all SEWB and AOD workers. The WSU consists of a highly skilled team with clinical and cultural expertise.

STOLEN GENERATION REPARATIONS IN NSW

The AH&MRC acknowledges that there have been some significant actions of reparation for the Stolen Generations in NSW since the Bringing Them Home Report (1997), such as the apology to Aboriginal peoples by the NSW Premier in 1997.

There has also been an increase in Aboriginal representation in education syllabuses and various attempts at restitution through native titles, education and self determination strategies.

However, as a team working within the peak NSW Aboriginal community controlled health body, the AH&MRC is most concerned with the measures of rehabilitation by the NSW government as a means of reparation for the stolen generation.

The AH&MRC interprets measures of rehabilitation as ongoing and sustainable delivery of health, healing and wellbeing services for Stolen Generations members and their families in NSW. The trans-generational trauma experienced as a result of past policies of removal continues to affect Aboriginal families and communities today, and the increasing rates of removal of Aboriginal children from their families in NSW¹, amongst other persistent issues, indicate that the process of rehabilitation has not been adequately addressed and that it requires a sustained commitment from a range of agencies into the future.

The Bringing Them Home Report stated that *“a substantial injection of funding is needed to address the emotional and well-being needs of Indigenous people affected by forcible removal. In addition it is clear that these needs must be treated as unique because of their causes and because of the family and socio-economic contexts in which they are now experienced”*(p340).

The Australian Government allocated \$62.85 million over the period 1998–2001 to establish the Bringing Them Home (BTH) Program and extend the national network of Link-Up Services. This saw the funding of 25 BTH dedicated workers in NSW.

Bringing Them Home Workers, in tandem with Link Up services, were implemented nationally to attempt to meet Stolen Generations rehabilitation needs. There are various reports that have been published that point to some effectiveness of these services, but also the need for more resourcing, standardisation and clarity around the role, particularly because of the complex, multifaceted issues associated with Stolen Generation members.

Over the past decade funding changes and the changing nature of health programs has seen a loss of emphasis on Stolen Generations issues. In 2012, BTH workers were merged into the SEWB workforce and the BTH workers were consolidated with general Aboriginal Social and Emotional Wellbeing, losing some focus on the Stolen Generation as a priority. Ten of the BTH worker roles in NSW were redirected

¹ The Productivity Commission 2014, *‘Overcoming Indigenous Disadvantage – Key Indicators 2014’*, Steering Committee for the Review of Government Service Provision, Canberra, ISBN 978-1-74037-500-9 (PDF).

to SEWB worker roles. This saw a change in their job roles and KPIs because the change broadened their job description to work with the SEWB and AOD issues of the general, wider community and resulted in loss of Stolen Generation prioritisation. Despite these changes, 15 BTH workers have continued to retain the BTH worker title.

The loss of Stolen Generation focus has been added to further by the recent IAS scheme which has again changed the programs and funding streams. SEWB and AOD program funding has been removed from health and placed within PM&C. These changes have impacted on the consistency of the role through the State by individualising KPIs and job roles.

The BTH Report recommended the establishment of specialist rehabilitation services for the Stolen Generations to meet their distinctive mental health needs, and likened it to Government initiatives for the rehabilitation of trauma and torture survivors (page 340).

“By funding rehabilitation services for survivors of torture the Commonwealth and States have already recognised the need for specialist services, in this case particularly for refugees and other immigrant torture and trauma survivors, to meet unique needs. There is a torture and trauma rehabilitation service in each State and Territory with substantial joint Commonwealth-State funding and large professional and bilingual staffing. For example, the Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS) in NSW receives \$1.3 million annually to deal with a caseload of approximately 400 clients each year. These services meet a distinctive mental health need. Indigenous mental health needs are also distinctive and require similar specialist responses.”

The AH&MRC believes Stolen Generations need to remain a government priority and supports the need for specialist Stolen Generation services that not only focus on mental health but incorporate the Indigenous well-being model of holistic health. As stated in the BTH Report (page 342), *“Traditional Aboriginal culture like many others does not conceive of illness, mental or otherwise, as a distinct medical entity. Rather there is a more holistic conception of life in which individual wellbeing is intimately associated with collective wellbeing”*.

The AH&MRC also believes that consistency in the job role of any Stolen Generations specialists is needed.

With the recent federal unrest, we look to the State government for support in rehabilitation services as a form of reparation for Stolen Generations.

This submission reflects our own research and feedback from our workforce who have identified that Stolen Generations members and their families need to be acknowledged as a priority group within our communities with increased and enhanced services that respond to their ongoing and particular needs. We have focused our attention on one clear recommendation and have demonstrated how this recommendation could be implemented.

GOVERNMENT PROGRAM CHANGES AFFECTING SERVICE DELIVERY FOR STOLEN GENERATIONS CLIENTS-THE NEED FOR REPRIORITISING

As previously mentioned, in 2012 the Commonwealth funded Bringing Them Home (BTH) Program was replaced by the Social and Emotional Wellbeing Program. Under the new SEWB Program arrangements, BTH and Link Up counselors are now referred to as SEWB counselors, (*SEWB Handbook for Counselors p 1*). Across NSW there are currently 15 workers who continue to identify themselves as BTH, despite these program changes, asserting their intention to prioritise the needs of Stolen Generations clients.

Under the new program SEWB workers are dealing with clients with a range of complex needs including AOD and MH issues. The widened scope of the program resulted in Stolen Generations clients not being the priority clients, as they were previously within the Bringing Them Home Program. Feedback from our SEWB workforce has included their frustration with the lack of clarity around their roles and their client base. The SEWB program scope has been further blurred under the Indigenous Advancement Strategy, which saw 150 Aboriginal programs rolled into five streams. Social and Emotional Wellbeing (SEWB) programs now located within the 'Safety and Wellbeing' funding stream. This has seen an increase in SEWB worker vacancies across the State and a lack of clarity and standardized KPI's for workers roles.

According to the location of current SEWB workers who still identify as BTH workers around the state, we have identified gaps in specialised service delivery for Stolen Generations clients in the Far West, the North West, Central Tablelands, North Coast, Hunter New England, Lower Central West, Far South Coast, Riverina, Murray River region and Metropolitan Sydney. For example, a client in Brewarrina seeking specialist Stolen Generation support would need to travel as far as Dubbo. On top of this, services are often restricted by their service delivery boundary areas and not funded to take clients from outside this boundary.

Effective rehabilitation requires workers with skill and expertise in Stolen Generations issues in each community or region as the legacy of removal policies is unique in each community and so rehabilitation needs to reflect the local, cultural and historical knowledge and context.

Our recommendation to create 15 Stolen Generations Wellbeing worker positions would fill current gaps in specialist services across the state.

To respond to cultural needs in Aboriginal communities, a male and female counselor should ideally be employed in each region.

The need for services is not restricted to older members of the Stolen Generations but also to their children and grandchildren as trauma of removal has ongoing intergenerational affects.²The evaluation

² The Productivity Commission 2014, '*Overcoming Indigenous Disadvantage – Key Indicators 2014*', Steering Committee for the Review of Government Service Provision, Canberra, ISBN 978-1-74037-500-9 (PDF).

report, Bringing them Home and Indigenous Mental Health programs, in 2007 clearly recognised the need for second, third and subsequent generations to receive services.³

THE AH&MRC RECOMMENDATION

Our recommendation is that the NSW government reprioritise Stolen Generations health and wellbeing by enhancing specific services to address Stolen Generations holistic health needs.

We believe this can be done through

1.1 The creation of 15 Stolen Generations Wellbeing Worker positions within SEWB teams in ACCHS across NSW, which will form the Stolen Generation Wellbeing Network of NSW

1.2 The development of a Stolen Generations State Co-coordinator position, seated at the AH&MRC

³ Wilczynki, A, K Reed Gilbert, K Milward, B Tayler, J Fear & J Schwartzkoff (2007) Evaluation of the Bringing them Home and Indigenous Mental Health Programs. Report prepared by Urbis Keys Young for OATSIH, DOHA, Canberra

THE AH&MRC PROPOSAL

1.1 Stolen Generations Wellbeing Workers (SGWW) clients would include families of Stolen Generations survivors, and workers would actively participate in community engagement and education in their region to make visible and raise awareness of local Aboriginal history and Stolen Generations issues, (please see table of Rehabilitation Measures).

The Commonwealth Government's Stolen Generations Working Partnership states that,

"Stolen Generations need to feel that they have sufficient opportunity to participate in decision making about how services are delivered to them and lead the development of their own solutions."

Placing SGWWs in Aboriginal Community Controlled Health Services provides the right context for the perspectives and needs of Stolen Generations clients to be heard, and responses and services to be self-determined, as well as facilitating access to a broad range of primary health care services.

The AH&MRC sees the implementation of the Stolen Generations Wellbeing workers and the state coordinator positions as a strong supportive initiative to support the healing process for Stolen Generation clients and communities. The positions will be based in Aboriginal Community Controlled Health Services and within their roles would cover the following strategies

- Cultural assessment of clients using culturally appropriate screening tools such as the WASC –Y and WASC –A tools
- Provide crisis intervention, family counselling, family tracing, case management using a holistic approach to health and wellbeing
- Work proactively to improve the understanding of social and emotional wellbeing, counselling interventions and culturally safe methods of working with Stolen Generations clients
- Collaborate with the Social and Emotional Wellbeing and Alcohol and Other Drug Workforce of NSW
- Build and maintain quality and respectful working partnerships with key Stolen Generation organisations and councils on a local, regional and national level
- Establish partnerships with local key stakeholders and community organisations who support Stolen Generation clients including mainstream organisations
- Promote education and events within region/ community which raise awareness about the Stolen Generations and its impact on Aboriginal people. Engage local institutions including Schools, TAFE, Libraries and community groups in this process
- Attend AH&MRC WSU forums and professional development activities
- Participate in regular peer, clinical and cultural supervision and mentoring programs
- Assist and support Link – Up NSW with reunions and return to country projects where relevant
- Provide outreach support

These strategies will provide holistic healing support to Aboriginal people who are affected by Stolen Generation and transgenerational trauma, through a qualitative and strength based approach

1.2 The AH&MRC strongly believes there is a need for a State Coordinator position. The position could be seated at the AH&MRC of NSW.

The position will work collaboratively with key Stolen Generation services and members of the AH&MRC and where relevant, align WSU programs and activities with Stolen Generation activities and projects both local and state.

The State Coordinator's position will be responsible for the development and planning with a strong emphasis on implementation, of culturally appropriate Stolen Generation services within the NSW Aboriginal Community Controlled Health Services and mainstream organisations. The position would also focus on building and maintaining strong links between the AH&MRC, NSW Government and Key Stolen Generation Organisations and councils within NSW.

Strategies that could be achieved by the State Coordinator position are

- Support the delivery and development of Stolen Generation services and policy across NSW
- Work cooperatively with other staff members of Key Stolen Generations services in enhancing the provision of timely, culturally appropriate and safe Stolen Generation policies and procedure
- Develop principles of practice, Standards and Guidelines for providers of Stolen generation services for Aboriginal people
- Lead and manage the development and implementation of a process/ framework of support for Stolen Generation support services in NSW
- Provide expert advice and high level support to the AH&MRC member services (49 AMSs) in issues relating to Stolen Generation support services in NSW
- Contribute to the analysis and evaluation of health and healing outcomes from Stolen Generation programs, including strategy development to assist providers to achieve and maintain quality services
- Participate in whole of Government initiatives regarding Stolen Generation partnerships
- Promote the development of best practice
- Enhance the accessibility of Stolen Generation services for Aboriginal people and Aboriginal communities of NSW
- Establish the Stolen Generation Wellbeing Worker Network and Support the Stolen Generation Wellbeing Worker Workforce in NSW

The AH&MRC believes this position is critical to provide a more coordinated approach for Stolen Generation services, providers and clients in NSW.

WHY THE AH&MRC?

The AH&MRC believes they are best suited as the organisation to employ the position of a State Stolen Generation Wellbeing Coordinator:

- We already host several other State Coordinator positions, which would help provide support and Peer Supervision to the State Stolen Generations Wellbeing Coordinator
- These workers would be included in our SEWB workforce, so we would have direct access to provide other means of support in their roles such as established networks, orientation, ongoing support and training and development opportunities
- We have other teams to help support recruitment and retention, such as the Business Development Unit (BDU)
- We believe that the unique and complex nature of their job roles would be best supported by an Aboriginal community controlled organisation. As the peak NSW Aboriginal Community Controlled Health body, we could help integrate these new roles into the workforce.

CONCLUSION

Despite various attempts from organisations in NSW at reparations for Stolen Generations, the AH&MRC believes rehabilitation as a form of reparation for Stolen Generations could be developed more effectively. Stolen Generations should be brought to the NSW Government's agenda as a priority. This could be implemented in a variety of methods, such as our recommendation to build on existing Aboriginal Community Controlled Organisations, and providing specialized Stolen Generation wellbeing support roles in Aboriginal Health services. This recommendation could also help meet other stated initiatives such as the Living Well report.

If you would like any further information or would like to discuss any of the points raised, feel free to contact the AH&MRC. We would like to thank you for taking the time to read our submission.

Kind Regards

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