



HealingFoundation

Strong Spirit • Strong Culture • Strong People

GROWING OUR CHILDREN UP STRONG AND DEADLY

healing for children and young people

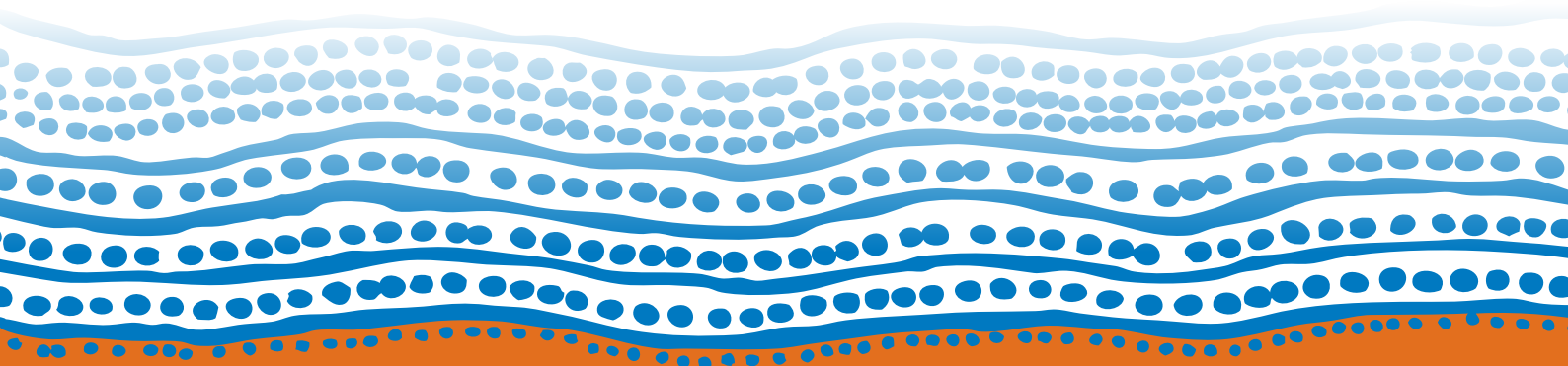


Table of Contents

Aboriginal and Torres Strait Islander Healing Foundation	2
Introduction	2
Intergenerational trauma	3
Effects of intergenerational trauma on children and young people	3
What we know about creating healing opportunities for children and young people	4
Adopting a trauma-informed approach	5
Incorporating brain-based approaches	6
Using the wisdom of culture to heal and protect	6
Empowering communities to find their own solutions	7
Operating from an Aboriginal and Torres Strait Islander worldview	7
The Intergenerational Trauma Initiative: Putting evidence into action	8
Conclusion	11
References	12



Aboriginal and Torres Strait Islander Healing Foundation

The Aboriginal and Torres Strait Islander Healing Foundation is a national, independent Aboriginal and Torres Strait Islander organisation with a focus on healing our community.

Established on the first anniversary of the Apology to Australia's Aboriginal and Torres Strait Islander peoples, the Healing Foundation works to address the profound legacy of pain and hurt of our people caused by colonisation, forced removals and other past government policies.

Building culturally strong community programs, designed and delivered by Aboriginal and Torres Strait Islander peoples, and from an Aboriginal and Torres Strait Islander worldview, the Healing Foundation is improving the wellbeing of our people by:

- developing the story of healing by funding healing programs
- raising the profile and documenting the importance of culturally strong healing programs through research and evaluation
- building leadership and the capacity of communities and workers to deal with trauma through education and training.

The initial priorities of the Healing Foundation were established in June 2010. They include:

- defining what healing means to Aboriginal and Torres Strait Islander peoples
- acknowledging the intergenerational impact of trauma on families and communities
- developing links between Aboriginal and Torres Strait Islander and non-Indigenous healing models
- working with young people to build strong spirits and connections to culture
- supporting Stolen Generations survivors
- developing programs relevant to men and boys
- building on the work women have done to unite and heal families and communities.

Introduction

Around the world, indigenous peoples have experienced colonisation, cultural oppression, forced assimilation, and absorption into a global economy with little regard for their autonomy or wellbeing. These profound transformations have been linked to high rates of depression, alcoholism, violence and suicide in many communities, with the most dramatic impact on youth.

– Kirmayer, Tait & Simpson 2009, p. 3

The trauma experienced by Indigenous people as a result of colonisation and subsequent policies, such as the forced removal of children, has had devastating consequences. The disruption of our culture and the negative impacts on the cultural identity of Aboriginal and Torres Strait Islander peoples has had lasting negative effects, passed from generation to generation. The cumulative effect of historical and intergenerational trauma severely reduces the capacity of Aboriginal and Torres Strait Islander peoples to fully and positively participate in their lives and communities, thereby leading to widespread disadvantage.

This is particularly true for our children and young people who we must recognise are hurting. They have been witness to, and experienced first-hand, the trauma that past government policies have had on their families and communities. Without adequate opportunities to overcome trauma, young people internalise their experiences and seek to find their own means of coping. This often results in negative behaviours such as high rates of drug and alcohol addiction, violence directed at themselves and others, criminal behaviour and interaction in the justice system, gang membership, homelessness and leaving school early.

It is clear that the current responses to ensuring the safety and wellbeing of Aboriginal and Torres Strait Islander children and young people are not working. Across the country our children and young people are over-represented in the child protection and youth justice systems. Investment in services and programs that address the symptoms of disadvantage – safety, health, housing, education and employment – are important, but without first addressing the healing needs of children, young people and families, such interventions are likely to have limited effect.

The Healing Foundation is committed to creating new approaches to redress these negative outcomes for our children. This paper will outline our understanding of intergenerational trauma, the emerging evidence of what works in addressing trauma and how this fits within our Aboriginal and Torres Strait Islander knowledge systems. The paper will also focus on how the Healing Foundation is using this information to create a healing environment for our children and young people.

Intergenerational trauma

Psychological trauma is generally understood as the response of the mind and nervous system to a life-threatening experience that is so overwhelming it leaves the individual unable to come to terms with it. The traumatic event need not have been directly experienced. It can include threats to others the victim has a relationship with or those nearby. Witnessing or hearing about the traumatic experiences of another can have a lasting psychological impact. A person's response to trauma involves intense fear, helplessness or horror. In children, trauma responses may include disorganised or agitated behaviour (Rothschild 2011).

Aboriginal and Torres Strait Islander children and young people may experience trauma through direct experience or secondary exposure. Direct experience occurs through abuse, neglect and exposure to violence (AIHW 2011). Secondary exposure for Aboriginal and Torres Strait Islander children and young people occurs through bearing witness to the past traumatic experiences of their family and community members as a result of colonisation, forced removals and other government policies. A key consequence of secondary exposure to traumatic experiences is intergenerational trauma (Atkinson, Nelson & Atkinson 2010).

Intergenerational trauma is a form of historical trauma that is transmitted across generations. It is the trauma that is transferred from the first generation of survivors that directly experienced or witnessed traumatic events to the second and further generations (Atkinson, Nelson & Atkinson 2010). Atkinson, Nelson and Atkinson (2010, p. 138) define intergenerational trauma as 'the subjective experiencing and remembering of events in the mind of an individual or the life of a community, passed from adults to children in cyclic processes'. Other researchers have suggested that historical trauma can become normalised within a culture because it becomes embedded in the collective, cultural memory of a people and is passed through the generations using the same mechanisms by which culture is generally transmitted (Duran & Duran 1995).

Effects of intergenerational trauma on children and young people

Childhood trauma has the potential to interrupt the normal physical, physiological, emotional, mental and intellectual development of children and can have wide-ranging, and often life-long implications for their health and wellbeing (van der Kolk 2005 & 2007). Prolonged exposure to chronic stress and trauma alters a child's brain development, continually activates a stress response and leads to hyper-arousal. The capacity to learn and concentrate, develop trusting, reciprocal relationships, regulate behaviour and make use of self-soothing or calming strategies is all severely impaired in children who have experienced trauma, including intergenerational trauma (Victorian Government Department of Human Services 2010). Without the necessary skills, many children grow into young people and adults who struggle with self-destructive, pain-based behaviours including aggression and violence, substance misuse, criminal acts, suicide, sexual promiscuity and inactive lifestyles (Atkinson, Nelson & Atkinson 2010; van der Kolk 2007).



Aboriginal and Torres Strait Islander children, families and communities experience significant social and economic disadvantage and fare worse on almost all measures of health and wellbeing compared to their non-Indigenous contemporaries. This disadvantage is even more pronounced among those affected by the policies of forced separation and removal from family and country. The Western Australian Aboriginal Health Survey (2005) reported that carers of children and young people who had experienced the legacy of the Stolen Generations, either directly or through family, were more likely to have contact with the criminal justice system, struggle with excessive alcohol use and gambling and have poorer mental health. In addition, those parents and carers who had been forcibly separated from their own families were deprived of the experiences necessary to become 'successful' parents themselves (Wilson 1997), a significant but not necessarily well understood factor in why Aboriginal and Torres Strait Islander children and young people come to the attention of statutory child protection authorities at such alarming levels (AIHW 2011).

Child abuse, neglect and socio-economic disadvantage are symptoms of underlying pain and suffering. If this generation of children and young people are to have a different experience from their parents and grandparents, we must act to acknowledge and address their healing needs. Unless children and young people are able to heal from their own experience of trauma, many will go on to create a traumatic environment for their own children and the cycle of intergenerational trauma will continue.

What we know about creating healing opportunities for children and young people

Healing occurs throughout a person's life journey as well as across generations. It can be experienced in many forms ... Mostly, however, it is about renewal. Leaving behind those things that have wounded us and caused us pain. Moving forward in our journey with hope for the future, with renewed energy, strength and enthusiasm for life.

Healing gives us back to ourselves. Not to hide or fight anymore. But to sit still, calm our minds, listen to the universe and allow our spirits to dance on the wind ... [and] drift into our dreamtime.

Healing ultimately gives us back to our country. To stand once again in our rightful place, eternal and generational. Healing is not just about recovering what has been lost or repairing what has been broken. It is about embracing our life force to create a new and vibrant fabric that keeps us grounded and connected ...

– Helen Milroy 2009

According to Carauna (2010) the idea of 'healing' as an approach to Indigenous disadvantage is not a concept that is always well understood. Healing programs encompass a range of practices (traditional and western), cover a range of issues or problems being experienced by individuals, groups (such as youth, men and women), families and sometimes whole communities, and have as their core a focus on spirituality and culture. They span the areas of mental health, social and emotional wellbeing, family violence, child protection, addictive behaviour (such as alcohol, drugs and gambling), sexual abuse, youth development, justice and corrections. There is also a growing emphasis on the need for preventative and restorative approaches in addition to those based on therapeutic intervention.

Critical to healing programs is an emphasis on restoring, reaffirming and renewing a sense of pride in cultural identity, connection to country and participation in community. Cultural identity and connection to country are seen as crucial elements of everyday life for Indigenous people. Cultivating a sense of this cultural distinctiveness is inextricably linked with spiritual, emotional, social health and wellbeing and is also an important part of strengthening communities.

If we are to effectively respond to the deep hurt and pain many Aboriginal and Torres Strait Islander children and young people have experienced, we must adapt our responses to make use of the promising research coming out of the trauma field. There is increasing evidence that services that adopt a trauma-informed approach, incorporate recent learnings about the physical and psychological affects of trauma, and that respect and draw on the ancient wisdom of Indigenous cultures are most successful in facilitating healing and recovery (van der Kolk 2007). It is also critical that communities have responsibility and control for the design, development and delivery of their own healing.

Adopting a trauma-informed approach

Trauma-informed services are based on a deep understanding of trauma and the impact trauma has on individuals, families and communities. All aspects of these services are seen through a trauma lens. There is a high level of congruency across the organisation including at governance, management and service delivery levels (Anglin 2002). Responding to trauma and providing opportunities for healing and recovery is understood to be at the core of the organisation’s mission (Atkinson, in press).

Atkinson (in press) articulated a set of principles essential in the design and delivery of trauma-informed services based on her reading of acknowledged trauma experts. Trauma-informed services incorporate the features outlined in Table 1 at the heart of their design and delivery and engage in regular reflection to assess their success.

Understand trauma and its impact on individuals, families, and communal groups	This is critical to avoid misunderstandings and disengagement. Trauma-informed policies and workforce training and development strategies embedded across an organisation are essential to promote an understanding of trauma and its impact on service users.
Promote safety	Individuals and families who have experienced trauma require spaces in which they feel physically and emotionally safe for healing to occur. The voices of children and young people should be included in the design of program spaces and procedures.
Ensure cultural competence	Culturally competent services are respectful of, and specific to, the cultural backgrounds of service users. Cultural knowledge and practices are incorporated into service activities. Culturally competent staff are aware of their own cultural attitudes and beliefs as well as the individuals, families and communities they support.
Support clients’ control	Self-determination and autonomy are central within the design of service. Clients are supported to regain a sense of control over their daily lives and are active participants in the healing process.
Share power and governance	Power and decision making is shared across all levels of the organisation, whether related to day-to-day decisions or reviewing and creating policies and procedures.
Integrate care	Integrating care involves bringing together all the services and supports needed to assist individuals, families and communities to enhance their physical, emotional, social, spiritual and cultural wellbeing.
Support relationship building	Relationships that are safe, authentic and positive assist healing and recovery.
Enable recovery	Services empower individuals, families and communities to take control of their own healing and recovery and adopt a strengths-based approach.

Table 1: Core principles of trauma-informed services (adapted from Atkinson, in press)



Trauma-specific care refers to the specific actions and practices employed to address the consequences of trauma and to facilitate healing in individuals, families and communities. Best practice trauma-specific care is holistic and takes account of the physical, emotional, social, spiritual and cultural wellbeing needs of those exposed to trauma (Atkinson, in press). As research in the area of trauma-informed care expands, practitioners and service providers are developing a range of interventions that are suited to the particular needs and context of those they seek to support.

Incorporating brain-based approaches

In recent years there has been increasing research focus on the effects of abuse, neglect and trauma on the developing brain, particularly during infancy and early childhood. Neurodevelopmentally-informed approaches involve understanding which areas of the brain have been affected by the trauma and then designing a treatment plan that includes the necessary therapeutic, enrichment and educational activities to help the child's brain heal and realign with typical development (Perry 2009).

We now know that the brain is organised in a hierarchical fashion with four main anatomically distinct regions – brainstem, diencephalon, limbic system and cortex. The brain develops in a sequential way from the least complex (brainstem) to the most complex (limbic system and cortex) areas. Lower parts of the brain (brainstem and diencephalon) are responsible for maintaining cardiovascular and respiratory functions, sensory integration, motor control and regulating arousal and attention levels. The limbic system controls the emotional and relational parts of the brain and this stage of development is critical in emotional regulation, attachment and social relationships. The most complex area of the brain (cortex) is responsible for higher-order cognitive functioning such as abstract reasoning, problem solving and creativity.

This bottom-up developmental sequence has significant clinical implications for those working with children and young people who have experienced trauma. By identifying the problems and strengths in a child's developmental history and current functioning, clinicians can 'map' which parts of the brain have been affected and design interventions that replicate the normal sequence of development, beginning with the lowest most under-developed or abnormally functioning areas of the brain and moving sequentially up the brain as improvement is seen. Brain-based approaches recognise that it is necessary to first reorganise and establish functioning in the lower parts of the brain before initiating therapeutic interventions that require healthy relational abilities and the capacity to verbalise experiences and emotions or demonstrate insight.

While still an emerging area of research and practice, brain-based approaches have shown promising results in healing for traumatised children and young people and are congruent with traditional cultural practices. Many traditional cultural practices use processes that are rhythmic, repetitive and that lower heart rates. This demonstrates that our people understood the need for calm and contained environments long before this science emerged.

Using the wisdom of culture to heal and protect

As part of the oldest living continuous culture in the world, Aboriginal and Torres Strait Islander people developed sophisticated ways of healing from trauma and loss. By reconnecting with knowledge systems and practices, culture can help to heal our pain and create opportunities for harmony and balance that allow Aboriginal and Torres Strait Islander people to participate more fully in family and community life in healthy, safe and confident ways.

Indigenous healing programs by their very nature focus on the importance of cultural identity and connection to country. Being on country and learning from Elders and senior men and women allows communities to draw on long-held wisdom and to reconnect to the strengths of cultural knowledge. Elders can teach and pass on knowledge about country, story, song and ceremony, ensuring that the culture will be strong through the generations. There is emerging evidence that increased connection to culture seems directly related to a strengthened sense of positive identity, self-confidence and hope for the future, particularly for young people and descendants of the Stolen Generations (Aboriginal and Torres Strait Islander Healing Foundation 2012b).

An example of this is the healing camps facilitated by Winangali Marumali for children of the Stolen Generations. These camps draw on the Marumali Journey of Healing to reconnect teenage children of the Stolen Generations with elements seen as essential to Aboriginal identity and social and emotional wellbeing – family, community, country, ancestors, spirituality and culture. Facilitators lead the group on a journey to understand the policies that led to the forcible removal of their parents and grandparents, to examine the impact this has had on them, their families and communities, and to identify protective factors associated with Aboriginal cultures and spirituality. Participants are then given the opportunity to produce art works that draw on the strengths and protection offered by their culture and spirituality.

Culture can also act as protection against risk and harm for children and young people. For Aboriginal and Torres Strait Islander people cultural concepts such as connection to land, culture, spirituality, ancestry, family and community are common protective factors that 'can serve as sources of resilience and can moderate the impact of stressful circumstances on social and emotional wellbeing at an individual, family and community level' (Zubrick et al. 2010, p. 81).

Michael Chandler is a Canadian researcher with expertise in social and emotional wellbeing. He has written widely on the concept of cultural continuity and identity in Aboriginal communities. Cultural continuity is enabled where communities have an understanding and access to their past, and share and have ownership of a common future. Chandler and his colleagues proposed six to eight factors they believed acted as protection against youth suicide in First Nation communities in Canada (Chandler & Lalonde 2008). Chandler and Lalonde found that communities with the greatest number of protective factors recorded significantly less suicide and in many cases no suicide at all.

The protective factors they found made a difference were:

- self-determination and self-government
- progression of native title and land claims
- a measure of control over health, education and social services
- a measure of influence over police and justice services
- a measure of control over children's services
- community facilities that allowed for preservation of culture
- knowledge of Indigenous languages
- women in leadership and governance roles.

Empowering communities to find their own solutions

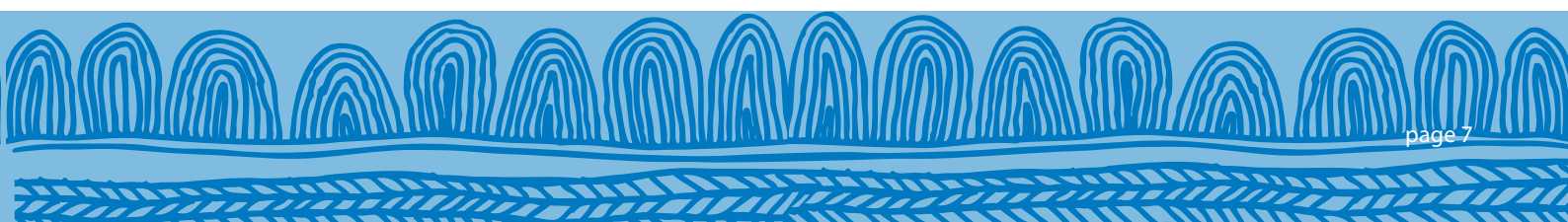
The 1997 National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their Families recommended that a new framework based on self-determination of the wellbeing of Indigenous children and young people be realised. The Inquiry called for, among other things, the eventual transfer of responsibility for children's safety and wellbeing to Indigenous peoples (Wilson 1997, Recommendation 43).

The ongoing tendency to identify issues and solutions from a non-Indigenous perspective continues to act as a barrier to improving the safety and wellbeing of Aboriginal and Torres Strait Islander children and young people. Many program approaches currently hold individuals and communities accountable for factors beyond their control. They also fail to ensure community control, empowerment and self-determination, corroding the foundations for effective change and improved outcomes. The safety and wellbeing of our children and young people will only truly be realised by empowering families and communities to articulate their own needs, determine the solutions, and design, develop and deliver services using Indigenous knowledge systems.

Operating from an Aboriginal and Torres Strait Islander worldview

All the programs funded by the Healing Foundation operate from an Aboriginal and Torres Strait Islander worldview as they work to improve the social and emotional wellbeing of Indigenous people and communities. This is achieved by providing holistic responses that address the body, mind and spirit. While not specifically intended to provide support to children and young people, approximately two-thirds of the funded projects under this initiative in 2011–12 used a family-focused approach that helped parents and families to 'grow their children up strong'.

The Nar-un-bah and Thou Walla Engaging Aboriginal Fathers Project, coordinated by the University of Newcastle Family Action Centre, is one such example. This project enhances the capacity of Aboriginal men with current or future parenting responsibilities (for example, fathers, pops and uncles). The project engages Aboriginal men in a range of local informal and formal healing activities, events and workshops with a focus on reconnecting to culture and the role of fathers in raising their children to be strong. The project fosters trusting relationships that allow workers to connect with, engage and build on the strengths and interests of Aboriginal men to help heal some of the damaging intergenerational impacts that invasion and colonisation have had on their role, knowledge, confidence and skills in parenting.



The project's success was evident recently during a boys group that included conversations about identity and connection to culture. It was clear that many of the children in the group knew they were Aboriginal; however, they didn't seem to have a deep knowledge about their tribal links, language, links to land and spirituality. The children enjoyed learning about these perspectives from the Aboriginal men and they were encouraged to talk to their fathers and families about these things when they returned home. Many of the children later came back to the group or to talk to the facilitators and said they had learnt even more from their parents through follow-up conversations.

The Aboriginal and Torres Strait Islander worldview is also seen in the work of the Banatjarl Strong Wimun Grup Project run by the Jawoyn Association Aboriginal Corporation. While on a recent culture camp, girls participated in workshops with Elders and senior women and learnt about kinship, skin and moiety groups, and the different groups' connections to country. The girls were involved in activities to identify what groups they belonged to and how they were linked as 'family'. They heard about culturally safe 'women's business', including women's law, their responsibilities in ceremony and the importance of 'right way marriage'. Elders spoke strongly with the girls about the need, as young women, to not find babies too early and to have healthy partnerships with husbands who are proper, strong men. Girls also learnt traditional arts and crafts and bush medicine from the senior women. At night around the campfire the girls heard dreaming stories, and learnt how they came to be here and who they are.

Feedback from the program coordinators found that the young participants actively listened to the Elders and senior women – more than is common when they are in their home environments – and talked about the session content among themselves during the camp. They encouraged the girls to take 'ownership' of the camp by working in teams based on skin names, with different groups having designated roles in the camp. The groups had to work collaboratively to make sure the camp ran smoothly. This approach was very effective and increased engagement and participation and how the girls later applied what they learnt.

The camp culminated in the women and girls participating in the Katherine NAIDOC march. This was the first time any of them had ever publicly celebrated their Aboriginal and Torres Strait Islander identity outside their home community. The women and girls led the NAIDOC march and no participants were too 'shame' to participate. Camp participants were the only representatives from remote communities in the Katherine region.

The Intergenerational Trauma Initiative: Putting evidence into action

The Healing Foundation recognises that for the cycle of trauma and disadvantage to be interrupted it is imperative that we support our children and young people to heal. That is why we believe that investing in programs and services that aim to help Aboriginal and Torres Strait Islander children and young people heal from their distress and prevent the continuing transmission of trauma is a national priority.

Our major commitment in this area is the Intergenerational Trauma Initiative which is a new approach to addressing the issues our children and young people are struggling with. The aim of this initiative is to acknowledge and address the devastating impact intergenerational trauma has had on Aboriginal and Torres Strait Islander young people. Rather than focusing on the symptoms of distress, projects funded under this initiative will work with young people and families in a holistic way, improving physical, emotional, social and spiritual wellbeing by strengthening cultural connectedness and identity. Young people will be able to create a vision for their future that is hopeful, confident and full of pride.

In July 2011 the Healing Foundation announced the availability of funds for the pilot of the intergenerational trauma projects in the three chosen communities of Brisbane, Darwin and Kununurra. Leading Aboriginal and Torres Strait Islander organisations that had demonstrated a commitment to providing healing programs for children and young people in their community were invited to attend a local information session to learn about the initiative and associated funding. Interested organisations were encouraged to apply for the funding through a tender process.

The funding guide provided interested organisations with a set of key elements identified as critical to the success of healing programs. Applicants were required to respond to these elements and to outline how the design of their project would incorporate these features. The elements are explained in Table 2.

Building strong youth	Programs that achieve holistic health and healing for young people are those that strengthen protective factors. Protective factors increase resilience in the face of distress and enable recovery from trauma. Key protective factors for youth include: a strong sense of identity and cultural pride; confidence in life skills and a strong desire to succeed; being part of an active community with opportunities to participate in the cultural life; and community self-governance and influence over health and education services.
Family and community	Successful youth programs involve family and community and enable youth to feel accepted within their community. Parents and kin should be centrally involved. The most effective programs are those that build a role for youth and strengthen their sense of self within their family and community. Such programs strengthen the community’s internal problem solving capacity and build shared recreational and cultural activities that include youth and community.
Elders	Our Elders are the guardians and teachers of our cultural knowledge. Successful youth programs are guided by the wisdom of community Elders and promote the role of Elders as teachers of cultural knowledge.
Trusted workers	Successful programs use existing and trusted workers and community members and trusted peers—other young people within the community who can provide a network of support. It is important that key workers and community members are supported by the program so they do not burn out from the pressure of the work. All workers need to have been police checked to ensure they are cleared to work with young people.
Collaboration and integration	Projects that collaborate and integrate with existing youth services show better outcomes for young people. These services include schools, employment services, juvenile justice and youth diversion programs, youth centres and counselling services and other programs working with young people.
Learning and evaluation	Successful programs are adjusted as they progress. Regular evaluation gives the opportunity to reflect on the strengths and weaknesses of the program and solve problems. The program can be improved and changed. A good evaluation process documents the evidence of the program’s success which can help to convince governments and other funders that the program is effective and a good investment.
Safety and trauma	It is essential that strategies are in place to prevent and minimise any potential harm to young people’s wellbeing. Projects should have a safety plan which includes strategies for dealing with disclosure of abuse or an acute crisis, such as counselling services on call or having trained counsellors employed within the project activities. Ongoing and appropriate training, supervision and support for staff also ensure that high-level responses can be made.

Table 2: Key elements of healing programs for young people (Healing Foundation 2011)



After awarding funding to the three successful organisations, the Healing Foundation invested significant time and resources in working with the funded services to design and develop the projects. Drawing on the latest research in implementation science and using many of the design features identified by the Australian Government Department of Finance and Deregulation (2010) as crucial to a program's success, the Healing Foundation worked in partnership with our funded services to:

- engage in genuine consultation
- jointly develop project goals, outcomes and outputs
- integrate the new initiative with existing programs and services
- include risk management strategies in service delivery plans
- demonstrate a commitment to providing employment opportunities for local Indigenous community members
- support staff recruitment and selection
- offer pre-service training.

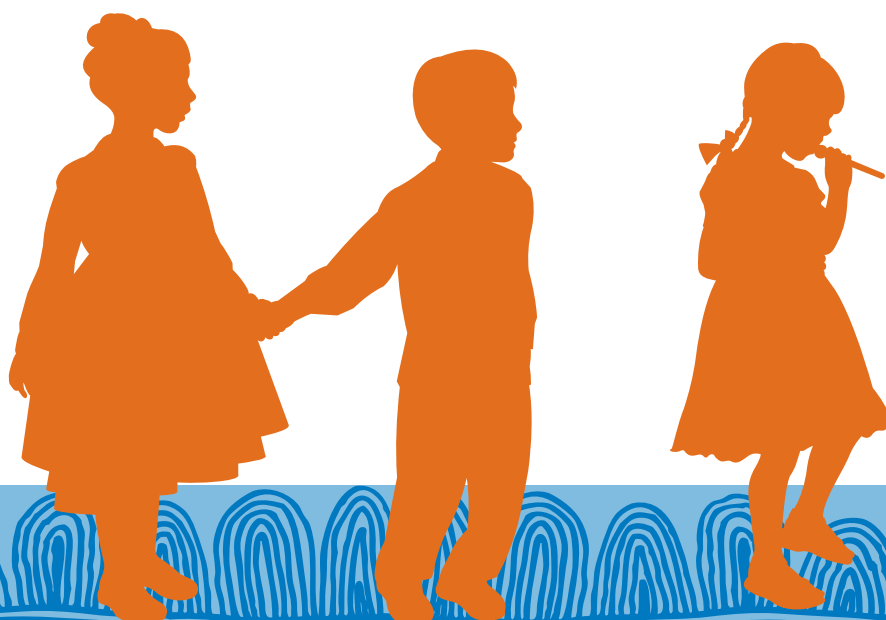
A thorough analysis of the initial implementation of the Intergenerational Trauma Initiative is detailed in *Implementing healing for children and young people: Putting evidence into action* (Healing Foundation 2012a).

As the projects evolve, our understanding about what is necessary to create healing for children and young people continues to grow.

We have learnt that healing can best be realised by:

- paying respect to the strong history of child-rearing practice and knowledge within Aboriginal and Torres Strait Islander culture and empowering families and communities to take control and responsibility for healing and growing their children and young people up strong
- moving away from a problem-focused approach that relies heavily on tertiary interventions towards one that promotes safety and wellbeing for all Aboriginal and Torres Strait Islander children and young people by instilling in them a strong sense of identity and cultural pride, providing opportunities to participate in cultural life
- supporting strong Aboriginal and Torres Strait Islander service systems by providing the necessary training, resources and support to strengthen the workforce, service system and governance arrangements
- incorporating the latest research in trauma recovery and healing with our ancient wisdom about how culture can assist in healing our pain and restore harmony and balance
- engaging in critical reflection and evaluation so that learnings can be replicated across the country to create healing for all children and young people.

The Healing Foundation is committed to ensuring all our work is trauma informed. Figure 1 demonstrates how we have ensured trauma-informed practice is at the core of the Intergenerational Trauma Initiative.



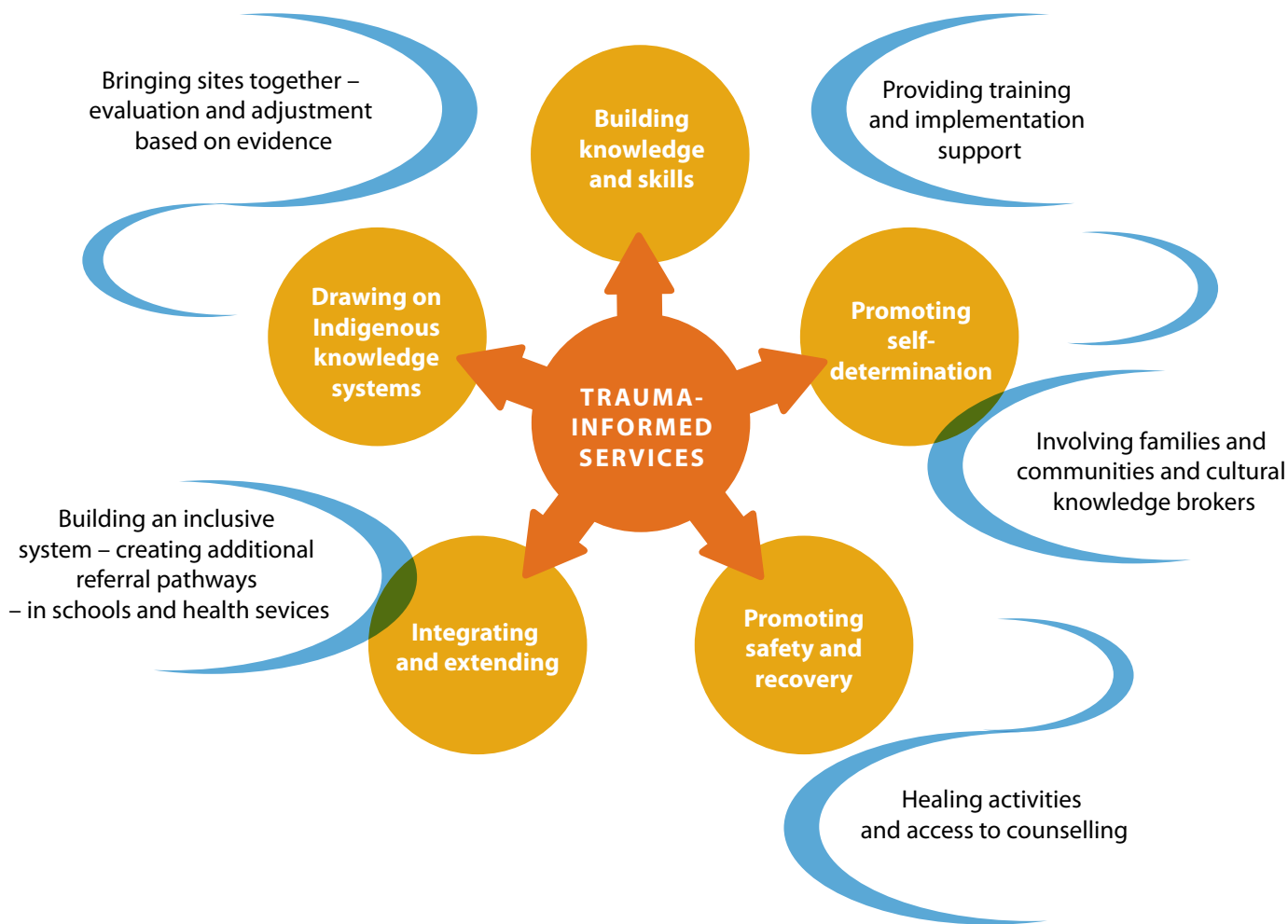


Figure 1: Using trauma-informed approaches in practice

Conclusion

Our people have grown our children up strong for over 40 000 years. Our culture and wisdom ensured our young ones grew into prosperous adults. Colonisation has brought much sadness to our people and across our nation our people are struggling to recover from the many pains that this has resulted in, including the forced removal of our children. In this time our global understanding of trauma, its impacts, effects and treatment has grown.

The Healing Foundation is committed to creating opportunities for our communities to heal using the best available evidence. This incorporates drawing on our own Aboriginal and Torres Strait Islander wisdom and strength of culture and marrying this with the best modern processes to achieve positive outcomes for our children and families.

This journey of growing our own knowledge and understanding is an important one so that our children and young people are strong in spirit, strong in culture and become strong people, able to transverse our modern world with pride in their cultural identity.

References

Aboriginal and Torres Strait Islander Healing Foundation 2011, *Intergenerational trauma discussion paper: Responses for children and young people*, Aboriginal and Torres Strait Islander Healing Foundation, Canberra.

Aboriginal and Torres Strait Islander Healing Foundation 2012a, *Implementing healing for children and young people: Putting evidence into action*, Aboriginal and Torres Strait Islander Healing Foundation, Canberra.

Aboriginal and Torres Strait Islander Healing Foundation 2012b, *Our healing, our solutions: Volume 3, January to June 2012*, Aboriginal and Torres Strait Islander Healing Foundation, Canberra.

Anglin, J 2002, *Pain, normality and the struggle for congruence: Reinterpreting residential care for children and youth*, The Haworth Press, Binghamton, New York.

Atkinson J (in press).

Atkinson, J, Nelson, J, & Atkinson, C 2010, 'Trauma, transgenerational transfer and effects on community wellbeing', in N Purdie, P Dudgeon & R Walker (eds), *Working together: Aboriginal and Torres Strait Islander mental health and wellbeing practices and principles*, Department of Health and Ageing, Canberra, pp. 135–144.

Australian Government Department of Finance and Deregulation 2010, *Strategic review of Indigenous expenditure: Report to the Australian Government*, Department of Finance and Deregulation, Canberra.

Australian Institute of Health and Welfare 2011, *Aboriginal and Torres Strait Islander child safety*, cat. no. IHW 50, AIHW, Canberra.

Caruana, C 2010, 'Healing services for Indigenous people', *Family Relationships Quarterly*, 17, pp. 3–9.

Chandler, MJ & Lalonde, CE 2008, 'Cultural continuity as a protective factor against suicide in First Nations youth', *Horizons – A Special Issue on Aboriginal Youth, Hope or Heartbreak: Aboriginal Youth and Canada's Future*, vol. 10 (1), pp. 68–72.

Duran, E, & Duran, B 1995, *Native American post-colonial psychology*, State University of New York Press, Albany, New York.

Kirmayer, LJ, Tait, C, & Simpson, C 2009, 'The mental health of Aboriginal peoples in Canada: Transformations of identity and community', in LJ Kirmayer & GG Valaskakis (eds), *Healing traditions: The mental health of Aboriginal peoples of Canada*, UBC Press, Vancouver, Canada, pp. 3–35.

Milroy, H 2009,

Perry, B 2009, 'Examining child maltreatment through a neurodevelopmental lens: Clinical applications of the neurosequential model of therapeutics', *Journal of Loss and Trauma*, 14, pp. 240–55.

Rothschild, B 2011, *Trauma essentials: The go-to guide*, WW Norton & Company, Los Angeles, California.
van der Kolk, BA 2005,

van der Kolk, BA 2007, 'The developmental impact of childhood trauma' in L Kirmayer, R Lemelson, & M Barad (eds), *Understanding trauma: Integrating biological, clinical and cultural perspectives*, Cambridge University Press, New York, pp. 224–41.

Victorian Government Department of Human Services 2010, *Child development and trauma: Specialist practice resource*, Victorian Government Department of Human Services, Melbourne.

Wilson, R 1997, *Bringing them home: Report of the national inquiry into the separation of Aboriginal and Torres Strait Islander children from their families*, Human Rights and Equal Opportunity Commission, Sydney.

Zubrick, SR, Dudgeon, P, Gee, G, Glaskin, B, Kelly, K, Paradies, Y, Scrine, C & Walker, R 2010, 'Social determinants of Aboriginal and Torres Strait Islander social and emotional wellbeing', in N Purdie, P Dudgeon, & R Walker (eds), *Working together: Aboriginal and Torres Strait Islander mental health and wellbeing practices and principles*, Department of Health and Ageing, Canberra, pp. 75–90.



www.healingfoundation.org.au



www.facebook.com/healingfoundation



www.twitter.com/HealingOurWay

