

# Implementing Healing for Children and Young People: Putting Evidence into Action

October 2012



**HealingFoundation**

Strong Spirit • Strong Culture • Strong People

## 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.

## Background to the Intergenerational Trauma Initiative

In July 2011 the Healing Foundation announced a funding initiative aimed at acknowledging and addressing the devastating impact intergenerational trauma has had on Aboriginal and Torres Strait Islander young people. The overarching goal of the initiative is to assist Aboriginal and Torres Strait Islander young people to heal from their distress and prevent the continuing transmission of trauma through future generations. The projects aim to improve the wellbeing of young people by strengthening cultural connectedness and identity, providing opportunities for individual and family healing, and building skills to manage pain and loss in a way that allows for a hopeful future.

Following a select-tender funding process, in December 2011 the Healing Foundation awarded funds to three Aboriginal and Torres Strait Islander controlled organisations in Brisbane, Darwin and Kununurra. The distribution of project sites ensured representation across urban, regional and remote Australia. \$1.5million over two years has been allocated to support the development and implementation of the lighthouse projects.

A range of project activities will be delivered over the life of the initiative including:

- healing camps for young people and families
- healing circles
- use of country to support increased cultural connection
- outreach support to young people and families
- revitalisation of ceremony and cultural activities
- mentoring and personal development programs for young people
- participation in employment and education programs
- counselling and therapeutic support for young people and families.

As part of the tender process, applicants were advised that the Healing Foundation would undertake a significant evaluation of the Intergenerational Trauma Initiative and that funded projects would need to agree to participate in the evaluation process.

## Purpose of this paper

As the story of healing gains momentum across our country there is increased interest in understanding what supports healing for Aboriginal and Torres Strait Islander people and communities. The Healing Foundation is aware of an increased acknowledgement and appreciation by State and Federal governments of the need for healing services that are informed by Indigenous concepts of wellbeing and that address the physical, emotional, social, spiritual and cultural needs of our community members, acknowledging the impact of the history and collective experience of our people (Caruana, 2010).

As we continue to build this evidence base, the challenge now lies in bridging the gap between knowledge and practice in a way that improves the lives of Aboriginal and Torres Strait Islander people.

To support our commitment to building programs from an Aboriginal and Torres Strait Islander worldview, the Healing Foundation has invested significant time, energy and resources in the planning and development phases of our Intergenerational Trauma Initiative. We have done this as we recognise that bridging the gap between knowledge and practice can be achieved through effective program implementation.

The purpose of this paper is to:

- provide a brief snapshot of the current best-practice thinking about program implementation
- identify the steps undertaken by the Healing Foundation in the planning and development of the Intergenerational Trauma Initiative and demonstrate how this connects to current research
- provide a roadmap for the ongoing implementation of the initiative
- contribute to the growing evidence base about best-practice service development and delivery in Indigenous communities.

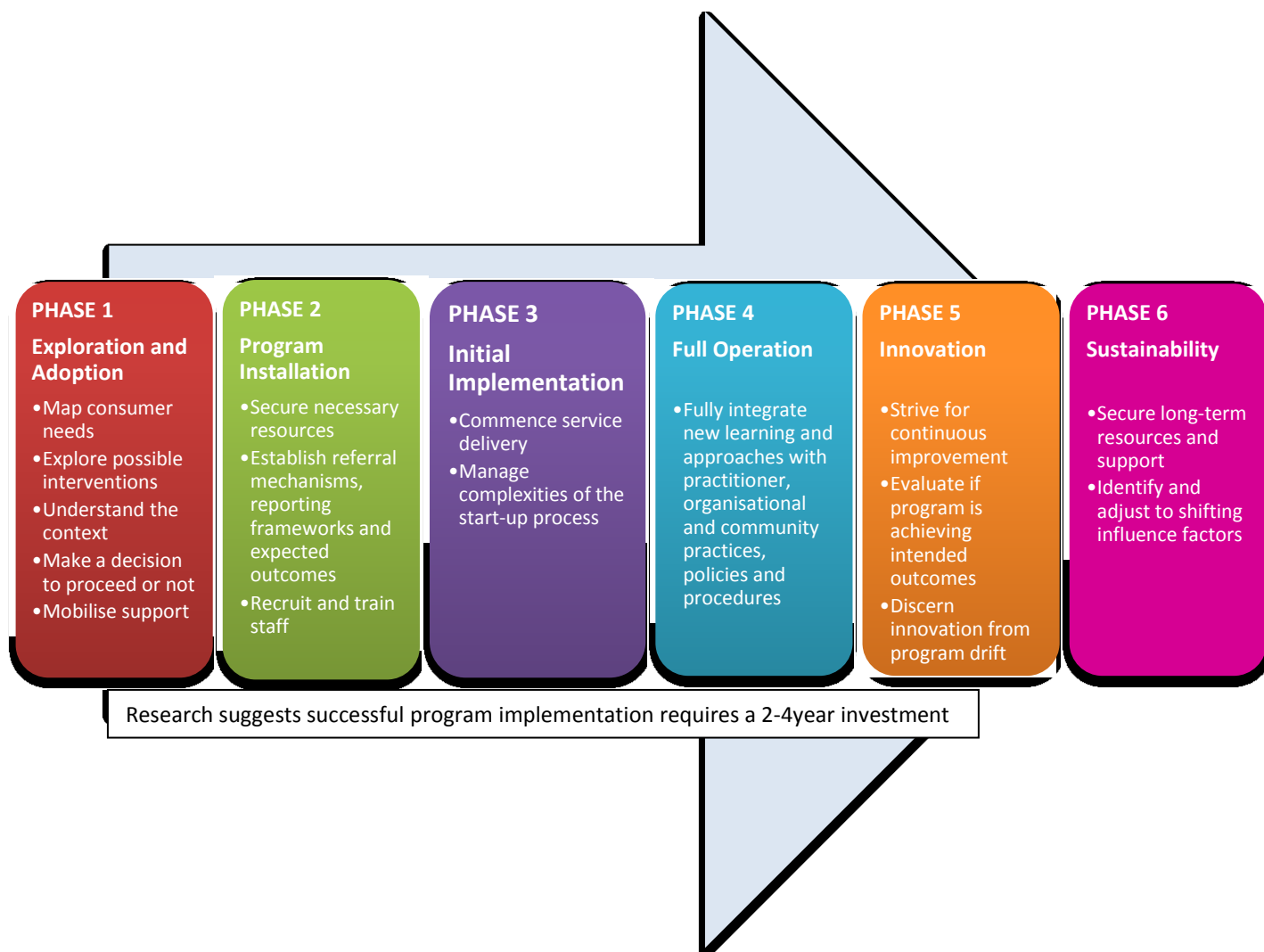
## What does research tell us about best-practice program design, development and implementation?

Over the past decade, researchers have started to pay close attention to what is referred to in the literature as ‘the science of implementation’. According to Milton and Shlonsky (2011), “implementation is a process that is commonly defined as a specified set of activities of known dimensions, put into practice, or a planned effort to mainstream an innovation”. Implementation science refers to the “study of methods to promote the systematic uptake of clinical research findings and other evidence-based practices into routine practice” (Graham et al., 2006). Implementation science is an emerging field of inquiry that is providing us with answers about how to successfully transform policies and programs that have empirical support into benefits for people in real world settings.

If implementation is the key to bridging the knowledge to practice gap, what exactly makes an implementation strategy successful and effective? Findings from the National Implementation Research Network in the United States have identified three core elements that researchers believe are central to the successful implementation of evidence-based practices and programs (Fixsen, Naoom, Blase, Friedman & Wallace, 2005; Fixsen, Blase, Naoom & Wallace, 2009).

The first critical element for successful program implementation is the inclusion of program leaders and champions (Fixsen et al., 2005, 2009; Milton & Shlonsky, 2011). Like the cheerleaders at a sporting match, program champions keep the team focused on the goal, celebrate successes and cajole us when our energies are tested. Program leaders and champions can be internal or external to the organisation. External leaders support program development by providing funding, technical assistance and advice to assist the agency with implementing the program. Internal champions act as the voice of the program, maintain motivation in the face of disappointments and ensure the continuity of the program despite staff or organisational changes.

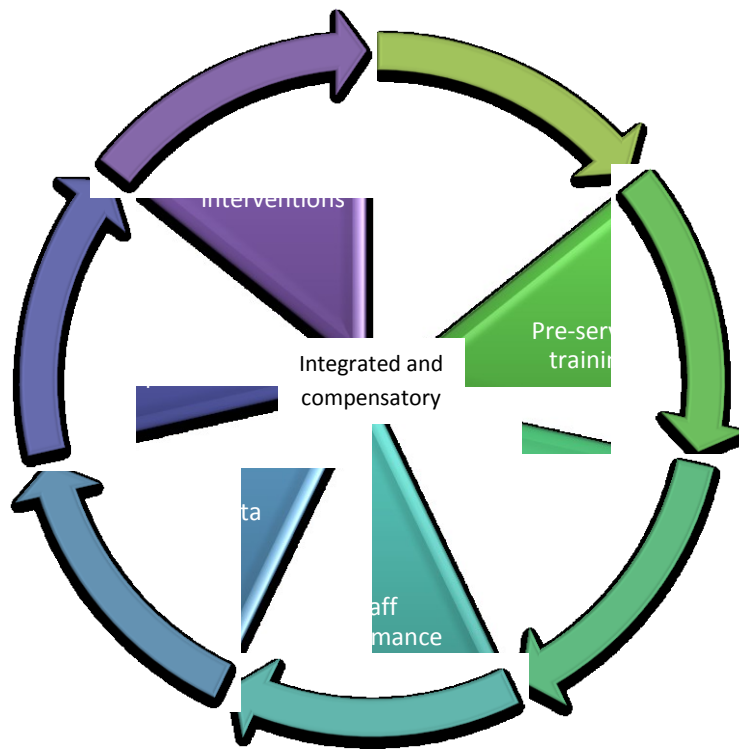
The second central element for successful program implementation is an understanding that implementation is a process, not an event in and of itself, with a series of identifiable phases (Fixsen et al., 2005, 2009). The model proposed by the National Implementation Research Network is useful when trying to conceptualise the implementation process.



**Figure 1: Phases of Implementation (adapted from Fixsen et al., 2005)**

The majority of research has tended to focus on what factors in the exploration and initial implementation phases lead to successful implementation of evidence-based practices and programs, often to the exclusion of the second phase of program installation. We see this at the ground-level when organisations move rapidly from deciding to adopt a specific intervention to commencing service delivery without first securing the necessary resources, investing time in the design of the program or ensuring staff are skilled and equipped to deliver the program.

In addition to discernible implementation phases, the third and final core element identified by researchers is the inclusion of purposeful, active and integrated strategies that support program implementation and facilitate the bridging of the knowledge to practice gap (Fixsen et al., 2005, 2009; Mildon & Shlonsky, 2011).



**Figure 2: Core Components of Implementation (adapted from Fixsen et al., 2009)**

These core components serve as practical strategies and guideposts throughout the implementation process:

- Staff recruitment and selection – Who is qualified to carry out the evidence-based practice or program? What are the methods for recruiting or selecting practitioners with those characteristics, knowledge and skills?
- Pre-service and in-service training – Knowledge of background information, theory, philosophy and values. Staff learn when, where, how and with whom to use new approaches and new skills and have opportunities to practice this and receive feedback in a safe training environment.
- Ongoing coaching and consultation – Advice, encouragement and opportunities to practice and use skills specific to the innovation leading to behaviour change at the practitioner, supervisory and administrative support levels.
- Staff performance evaluation – Assess the use and outcomes of the skills that are reflected in the selection criteria, taught in training and reinforced and expanded in the supervisory process.
- Decision support data systems – Frequent, user-friendly reports of process and outcome data that provide guidance for future decision making.
- Facilitative administration – Aspects of an organisation (policies, procedures, structure, culture and climate) are aligned to the needs of practitioners and keep staff focused on desired intervention outcomes.
- System alignment intervention – Strategies to work with external systems to ensure availability of financial, organisational and human resources required to support the work of practitioners.

## How does implementation science link with Government's funding strategy for Indigenous programs and services?

In 2010 the Department of Finance and Deregulation conducted a strategic review of Indigenous expenditure for the Australian Government (Australian Government, 2010). The review was congruent with emerging research in the field of implementation science in that it clearly acknowledged that the key challenge in closing the gap lies not so much in further policy development but in effective implementation and service delivery.

The Government review identified a set of good programmatic design features that have been shown to lead to positive outcomes for consumers including:

- a clearly articulated policy rationale that aligns with the strategic focus
- community consultation and engagement
- clearly framed, specific and measurable goals and objectives
- clearly identified target group/s
- the service is delivered on the basis of a program logic
- service activities are flexible, evidence-based and integrated with other initiatives
- risk management (as opposed to risk avoidance) strategies are built in from the beginning
- timeframes and scale are consistent, realistic and achievable
- the service is efficient, cost effective and accountable
- commitment to rigorous, regular evaluation
- building the capacity of communities and organisations
- encouraging Indigenous employment.

The review highlighted the importance of investing in programs that take a long-term view and that work patiently towards enduring change. In this sense, it becomes evident that empowering organisations and services to spend the time to 'get it right from the beginning' through effective implementation is vitally important.

## How has the Healing Foundation utilised implementation science in the establishment of the Intergenerational Trauma Initiative?

### *Phase One – Exploration and adoption*

The first phase of implementing the Intergenerational Trauma Initiative involved exploring the need for healing programs for children and young people, mobilising support for such an initiative and making funding available to develop a number of community-based projects. In this way the Healing Foundation ensured that the policy rationale underlying the initiative was clearly articulated and aligned with the strategic focus of the organisation. This was highlighted as a critical design element identified in the Federal Government's recent strategic review of Indigenous expenditure (2010).

Beginning in January 2011, the first step undertaken by the Healing Foundation was the production and public release of a discussion paper about the need to invest in healing programs for children and young people. The discussion paper commented that:

*“Without adequate opportunity to overcome trauma, young people internalise their experiences and seek to find their own means to cope with the overwhelming nature of events. This often results in negative behaviours such as high rates of drug and alcohol addiction, violence directed at self and others, criminal behaviour and interaction in the justice system, gang membership, homelessness, and early school leaving ... In order to overcome the intergenerational transmission of trauma in indigenous communities, a focus on children and young people is imperative”* (Healing Foundation, 2011).

The discussion paper provided a summary of the latest research about the effects of intergenerational trauma, emerging evidence from projects that are working to address this issue, and what the literature has identified as key elements of healing programs for children and young people. The discussion paper made the following recommendations:

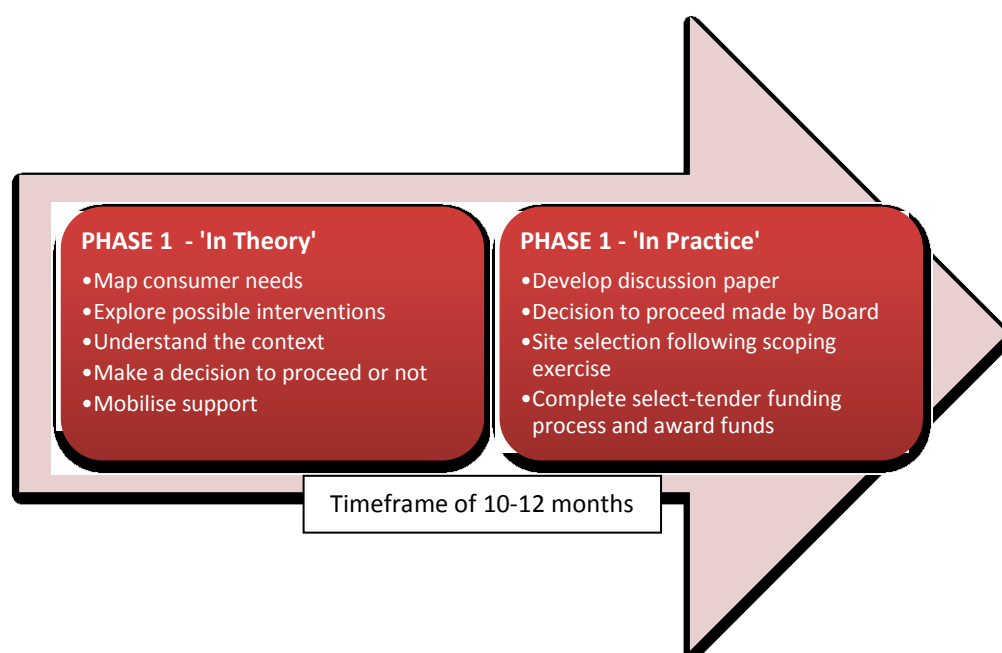
1. That the Healing Foundation in partnership with a number of targeted communities develop a healing program to impact upon the effects of intergenerational trauma
2. Three communities across Australia are chosen to develop the initiative that incorporate a remote, regional and urban context and have strategic importance for the Healing Foundation
3. That the intergenerational initiative runs for two years and is evaluated to enable the Healing Foundation to make recommendations post the implementation of the programs

4. That the voices of young people form a significant part of the evaluation strategy
5. That state government partnerships of funds are sought to enable sustainability of the programs if successful post the development stage.

The next step following the release of the discussion paper and endorsement of the recommendations by the Board of the Healing Foundation was to identify three communities across Australia that could be supported to develop and pilot the Intergenerational Trauma Initiative. The project sites were selected following a significant scoping exercise which included ascertaining current state, territory and federal government responses and an analysis of data related to trauma indicators such as child protection and juvenile justice statistics. In keeping with the second recommendation from the discussion paper, the three selected sites of Brisbane, Darwin and Kununurra are spread across urban, regional and remote contexts respectively.

In July 2011 the Healing Foundation announced availability of funds for the pilot of the intergenerational trauma projects in the three chosen communities. Leading Aboriginal and Torres Strait Islander organisations who 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 funding opportunity. Interested organisations were encouraged to apply for the funding within a select tender framework and following an external assessment of applications, in December 2011 the following organisations were selected to develop and deliver these ground-breaking healing programs:

- Aboriginal and Islander Independent Community School (known locally as the Murri School), Brisbane
- Darwin Aboriginal and Islander Women’s Shelter (DAIWS), Darwin
- Ord Valley Aboriginal Health Service (OVAHS), Kununurra.



**Figure 3: Phase 1 of Implementing the Intergenerational Trauma Initiative**

### **Phase Two – Program installation**

The second phase of implementing the Intergenerational Trauma Initiative was critical in the design of the projects. Many of the programmatic design features identified by the Australian Government (2010) as crucial to a program’s success were included in this second phase of implementing the initiative. These features included:

- consultation and engagement with the funded services
- joint development of project goals, outcomes and outputs
- integrating the new initiative with existing programs and services
- inclusion of risk management strategies in service delivery plans

- demonstrated commitment to providing employment opportunities for local Indigenous community members.

Similarly, the inclusion of the core components of staff recruitment and selection and pre-service training, as identified by Fixsen et al. (2009), is evident in this phase of program installation.

Commencing in January 2012 this phase involved a series of visits to each site to develop the program logics, negotiate funding agreements, develop a reporting framework, and ensure the necessary resources were in place including skilled and trained staff and stakeholder support.

The program logics of the service models were developed by each organisation. Through the process of developing the program logic, each service articulated the unique issues their community faced, their target group, available resources, planned strategies or service activities, outputs, desired outcomes and over-arching goals. During visits to the services, the following questions were posed by the programs team to elicit this information:

- Who will the project reach? What are their ages? Where do they live? Are there any specific criteria they must meet to receive the service?
- If our project is effective, what changes will we see in our young people and families in five years?
- What will we need to do to achieve this? What activities will we engage young people and families in so we can see these changes? How often or how many of these activities will we deliver? How many young people and families will be involved? How many and what kinds of workers will we need?
- How will the project be guided by our community leaders and Elders? Who do we need to work with to achieve these outcomes? What resources – money, knowledge, experience, workers – do we already have in place?
- If our project is starting to make a difference, what outcomes for young people and families do we think we will see in 12 months? What about in 2-3 years?
- What are the issues in our community and society that may impact on delivering the project? The issues may assist us or make it more difficult.

Healing Foundation Programs staff documented these answers and compiled them into a diagram of the program logic. We worked closely with each funded organisation to refine their program logics and ensure that they were confident that they could deliver their project according to the description of the model outlined. This also entailed integration of the new project with existing services and systems operating within the organisation. Once the program logic was finalised, the information gathered through this process was incorporated into the service delivery plan (SDP) that forms a core part of the funding agreement the Healing Foundation has with each of our funded projects.

Upon signing the funding agreement with the Healing Foundation, organisations were in a position to commence staff recruitment. To assist in this process the Healing Foundation Programs team provided administrative support through the drafting of position descriptions and provision of other resource material. Simultaneously, funded organisations worked to ensure the necessary structural supports were in place for the start of service delivery by:

- aligning intergenerational trauma initiative funding with other funding sources the organisations had
- creating referral mechanisms
- securing and setting-up appropriate staff and project space
- meeting with stakeholders and Elders
- establishing project reference groups

The Healing Foundation Programs team during this time then reviewed each of the program logics in an effort to find common features that could be reported against and tracked over the life of the initiative. Whilst each project has been designed to meet the unique challenges their young people and families face and the cultural context in which they live, the following were identified as common national outcomes across all three projects:

1. improved social and emotional wellbeing of our children and young people
2. improved resiliency of our children and young people



3. improved relationships between children and young people and their families
4. improved service coordination for children and young people and families.

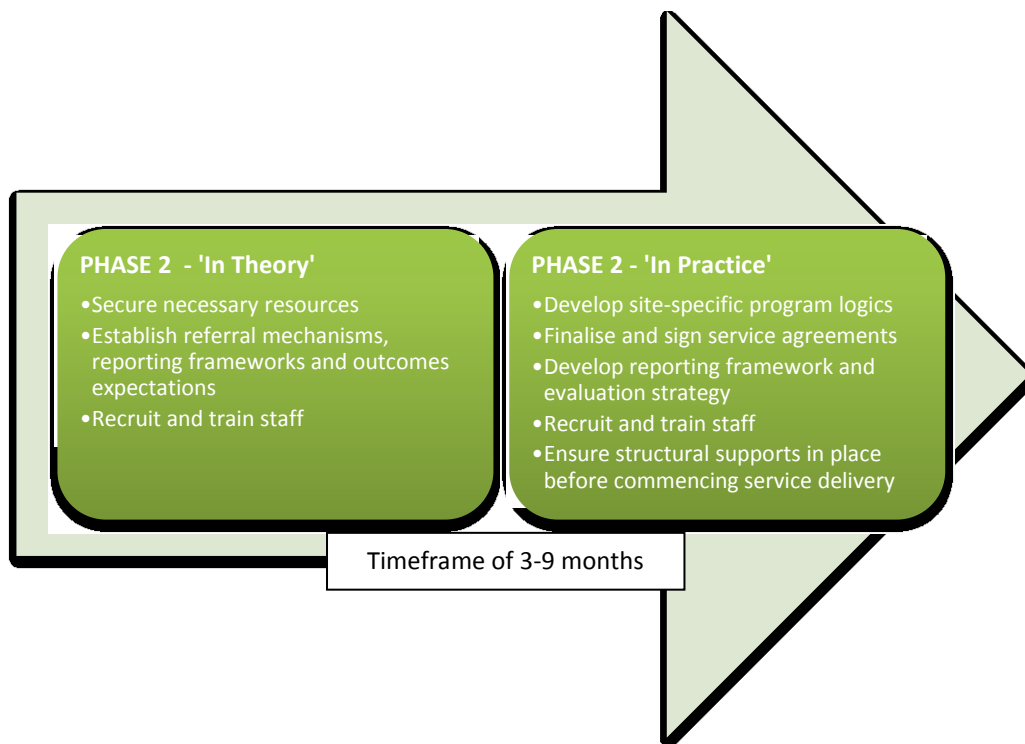
The reporting framework developed by the Healing Foundation primarily measures service activities and outputs against these national outcomes. Key indicators relating to wellbeing and resiliency were identified through a literature review and were incorporated into the reporting framework. A major evaluation of the initiative is also planned and will be used to primarily capture outcome-based data. Whilst in the early stages of development it is envisioned that the external evaluation will serve to:

- contribute to the evidence base for an Aboriginal and Torres Strait Islander framework for youth-focused healing practices and programs
- increase and share the understanding of the cultural and social worth of such healing projects amongst the wider community and professionals supporting children, young people and families experiencing trauma
- increase sustainability of the projects by demonstrating the need for, and the value of, such projects when sourcing ongoing funds.

A final element of the program installation phase was the delivery of targeted training and workshops specific to each site. The Healing Foundation has committed to delivering Therapeutic Crisis Intervention (TCI) training for project leaders and staff in each site. TCI is a crisis prevention and intervention model designed to teach staff how to help children and young people learn constructive ways to manage difficult emotions and experiences without the need to resort to acting-out behaviours. The ability of an entire organisation to respond effectively to staff and young people in crisis situations is critical in establishing not only a safe environment but also one that promotes growth and development. As each project had incorporated group activities, bush trips or camps into the design of their project, the need to ensure staff were skilled to structure activities and provide positive behaviour support was recognised and supported by the foundation.

In the Darwin and Kununurra communities, specific implementation support needs were identified. The Healing Foundation has therefore been working in partnership with our funded organisations to strengthen the skills of project staff in areas of designing and developing group activities for young people, outreach-based service provision and service models that support integration of work across agencies.

The timeframe required for this second phase of implementation has to some extent been dependent upon the location and local context of each project. For the services operating in regional and remote locations and dealing with the complexities these communities face, the investment in this design and development stage has by necessity been longer.



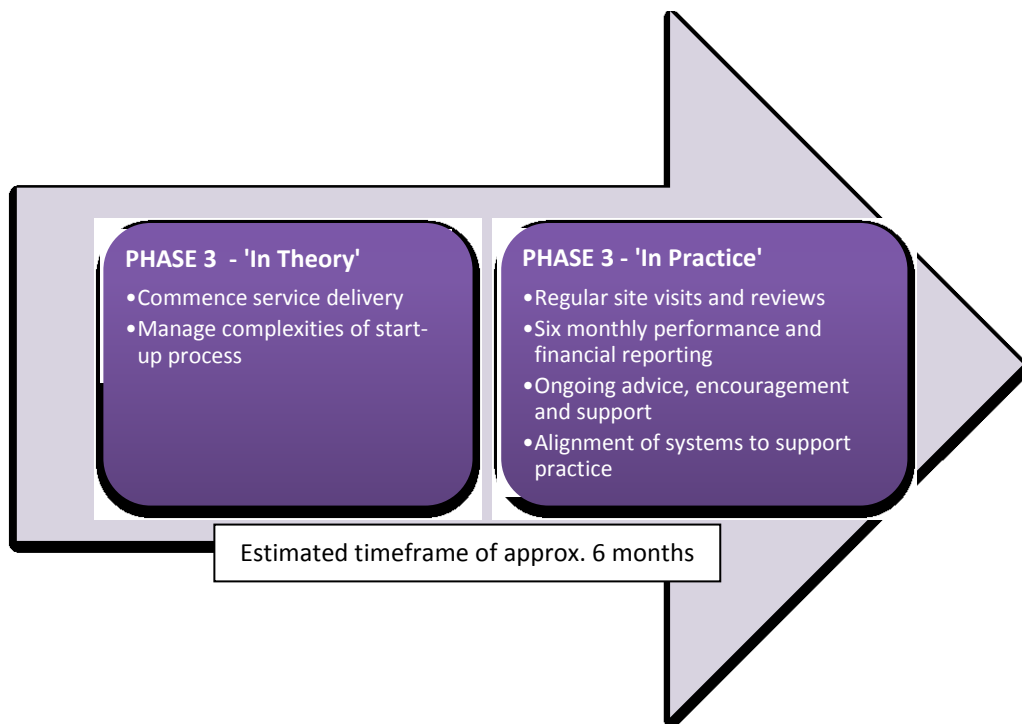
**Figure 4: Phase 2 of Implementing the Intergenerational Trauma Initiative**

### **Phase Three – Initial implementation**

The first project funded under the Intergenerational Trauma Initiative to come online was the Handstand Project operated by the Murri School. The Handstand Project commenced service delivery in April 2012 and was officially launched in early May in a celebration held at the school. The second project to come online was the Youth Centre operated by the Darwin Aboriginal and Islander Women’s Shelter (DAIWS). The DAIWS Youth Centre was officially opened in September 2012 in a moving ceremony that included musical performances by local young people. The final project to come online will be the project operated by Ord Valley Aboriginal Health Service (OVAHS) which is expected to sign their service agreement by October 2012 and commence service delivery shortly thereafter.

At this phase of the implementation process the Healing Foundation is working closely with each funded service to support the roll-out of the projects. This is the period when we are working to align our systems – financial, reporting and program development – with the needs of the funded services to ensure we support the valuable work of project staff. We envision that projects will be in the initial implementation phase for approximately six months.

As the projects progress, in our role as program champions, the Healing Foundation will work with our funded services to showcase the emerging evidence of these pilot projects to key stakeholders, government representatives, partner agencies and the wider community. The Healing Foundation has established a process with stakeholders to ensure that continued dialogue is encouraged and supported with key stakeholders during the development of the pilot projects.



**Figure 5: Phase 3 of Implementing the Intergenerational Trauma Initiative**

## Key learnings

As an evolving organisation the Healing Foundation is committed to engaging in critical reflection and continuous improvement. This paper is an opportunity for the Programs team to reflect upon the journey thus far of establishing the Intergenerational Trauma Initiative and considering what learnings can be taken from this experience and applied to the ongoing development of healing projects across the country.

Key learnings from the early phases of implementing the Intergenerational Trauma Initiative include:

- Mapping current government responses and targeting funding initiatives towards gaps in service delivery allows the Healing Foundation to support the development of innovative healing projects.
- It is important that funding initiatives are generated by a recognised need in the community, are informed by a clear policy rationale and evidence base, and promote the strategic vision of the Healing Foundation.
- Significant time and resources need to be invested in the early phases of implementation to effectively support the design and development of healing projects, particularly in regional and remote sites.
- The process of developing and refining the program logic ensures projects are driven by local knowledge and have a clear understanding about what they are trying to achieve and how they will go about doing this.
- The development of the program logic leads to budget refinement and better strategic investment of funds that build on existing infrastructure, thereby reducing duplication in service delivery.
- The development of the program logic enables the funded service and the Healing Foundation to easily review the performance of the project against their stated objectives and strategies and has resulted in mindful outcomes that are attainable by the organisation.
- Measures to ensure rigorous evaluation and sustainability need to be built into funding initiatives from the beginning.
- The up-take of training is increased when it is adapted to the local context and specific issues faced by staff in the delivery of their project.
- The Healing Foundation can play an important role as an external program champion.

## Where to from here? The next steps in the ongoing implementation of the Intergenerational Trauma Initiative

Over the coming 6-12 months, the Healing Foundation will work closely with our funded services to support the ongoing implementation of the Intergenerational Trauma Initiative.

In accordance with the identified phases of implementation proposed by Fixsen et al. (2005), the coming months will see the foundation and projects:

- maintain regular contact including site visits by the Healing Foundation to monitor progress
- undertake six-monthly performance and financial reporting
- further develop project activities and embed the model into service delivery
- commence external evaluation with particular emphasis on outcome-based measures for young people and families who have participated in the projects
- gather together in Canberra to celebrate the collective achievements and share ideas to manage the complexities encountered during the start-up process
- identify future training and development needs for project staff and funded services
- promote and share learnings from the Intergenerational Trauma Initiative at suitable forums
- explore future funding opportunities to increase the sustainability of the projects post the initial two-year funding initiative.

### Conclusion

The Intergenerational Trauma Initiative is a new approach to addressing the issues our children and young people are struggling with. Rather than focusing on the symptoms of distress, these projects will work with young people and families in holistic manner, 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 proud.

The Healing Foundation is committed to developing initiatives and projects that support the healing journey for our people, that are founded on a strong evidence-base and that are innovative and pioneering in their approach.

Utilising implementation science in the design, development and initial phases of implementing the initiative has ensured that:

- the Healing Foundation's approach to program implementation is congruent with best-practice methods
- investment of resources is done with a view to cost-effectiveness, capacity building and sustainability
- our funded projects are rolled out to young people, families and communities after careful consideration of the context, available resources, key activities and strategies to be employed, and desired outcomes for each project.

By documenting the process of implementing the Intergenerational Trauma Initiative, the Healing Foundation is:

- reflecting on our own processes and learning what can be achieved if close attention is paid to the implementation of initiatives and projects in a thoughtful manner
- demonstrating how implementation science can be translated into on-the-ground practices and strategies
- providing a framework that funding bodies can replicate in the implementation of Indigenous programs
- assisting our funded projects to utilise implementation science in the design, development and delivery of services.

## References

Aboriginal and Torres Strait Islander Healing Foundation. (2011). *Intergenerational Trauma Discussion Paper: Responses for Children and Young People*. Canberra, ACT: Author.

Australian Government. (2010). *Strategic Review of Indigenous Expenditure: Report to the Australian Government*. Canberra, ACT: Department of Finance and Deregulation.

Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. A., & Wallace, F. (2005). *Implementation Research: A Synthesis of the Literature*. Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, the National Implementation Network.

Fixsen, D. L., Blase, K. A., Naoom, S. F., & Wallace, F. (2009). Core implementation components. *Research on Social Work Practice, 19*(5), 531-540.

Graham, I. D., Logan, J., Harrison, M. B., Straus, S. E., Tetroe, J., Caswell, W., & Robinson, N. (2006). Lost in translation: Time for a map? *Journal of Continuing Education in the Health Professions, 26*, 13-24.

Mildon, R., & Shlonsky, A. (2011). Bridge over troubled waters: Using implementation science to facilitate effective services in child welfare. *Child Abuse and Neglect, 35*, 753-756.