HEALING INFORMED ORGANISATIONS

FINAL REPORT – FEBRUARY 2015

www.healingfoundation.org.au
www.facebook.com/healingfoundation
www.twitter.com/HealingOurWay
Urbis staff responsible for this report were:

Director | Claire Grealy
Indigenous Consultant | Karen Milward
Consultant | Joanna Farmer

Suggested citation
Contents

Executive Summary .................................................................................................................. 4

1 Introduction .......................................................................................................................... 5
  1.1 This project .................................................................................................................. 5
  1.2 Assumptions ................................................................................................................. 5
  1.3 Methodology ................................................................................................................ 5
  1.4 This document .............................................................................................................. 5

2 What is healing? .................................................................................................................... 6

3 Trauma and healing in the organisational context ................................................................ 7

4 Trauma aware, healing informed organisations ................................................................. 10
  4.1 Developing a healing organisation ............................................................................... 13

5 Deciding to be a trauma aware, healing informed organisation ......................................... 15
  5.1 Positive, healing oriented value system ...................................................................... 15
  5.2 Procedures and policies that reflect the organisation’s values ..................................... 16
  5.3 Discipline to stick to clearly defined policies and procedures ....................................... 17
  5.4 Good leadership at the management and governance levels ....................................... 18
  5.5 Review and monitoring of progress ........................................................................... 18

6 Healing aware, trauma informed organisation framework ................................................ 19

7 References .......................................................................................................................... 23

Appendix A – case studies ..................................................................................................... 24
  Gallang Place ..................................................................................................................... 24
  Mununjali Jymbi Centre .................................................................................................... 31
  Maari Ma Health ............................................................................................................... 33

FIGURES:
  Figure 1 – The assumed connections between positive practices and organisational effectiveness .......... 10
  Figure 2 – Elements of a quality healing program .............................................................. 11
  Figure 3 – Unhealthy organisations .................................................................................. 13
  Figure 4 – Healthy organisations ....................................................................................... 14

TABLES:
  Table 1 – Forms of lateral violence .................................................................................... 9
  Table 2 – Deciding to be a trauma aware, healing informed organisation ......................... 19
Executive Summary

This report contributes to the work being undertaken by the Healing Foundation to promote healing informed organisations. It explores a number of issues, including the impact trauma can have on Aboriginal community controlled organisations, and the potential for governance, management and service delivery frameworks that are trauma aware and healing informed.

The report draws on an extensive review of literature, reports and articles that have a focus on the organisational impact of trauma and the strategies that have been used to address this impact. A small set of case studies of Aboriginal organisations that have implemented trauma aware and healing informed approaches also forms part of the report.

The findings presented here have contributed to the development of a framework to assist governance and management groups in engaging in the journey to being a trauma aware, healing informed organisation.

Background

Colonisation, intergenerational trauma and grief manifest in myriad ways. Beyond the impact on the individual, trauma can have a significant impact on the organisations where people work or volunteer, and from where they seek support. An organisation can be adversely affected by the trauma informed behaviours of their staff, members of their governance group, and their clients. Without appropriate strategies, this combination can lead not only to stress and burnout for individuals, but have a significant impact on the healthy functioning of organisations as a whole.

Emerging practice

The notion of a healing informed organisation is relatively new. An analysis of the literature suggests that applying the principles of individual healing and mainstream positive organisational psychology to the governance, management and staffing structures of a community controlled organisation can create a trauma aware, healing informed body. Doing this is preventative and healing for both the organisation and its clients.

The framework in this report, developed from the literature about organisational health, resilience, and healing practice, provides a scaffold for discussion and decision making within community controlled organisations. The development of the framework has also been informed by the work of three organisations that have already embarked on a journey to operate in a way that is healing informed. Their stories are featured throughout the report, and collated as case studies in the appendix.

A framework of four pillars

There are four pillars to the framework, which outline key considerations for organisations wanting to develop a trauma aware and healing informed approach. These are:

1. developing a positive, healing oriented value system that is shared and promoted across the organisation

2. revising all procedures and policies to directly name and reflect the value system

3. maintaining the discipline to consistently adhere to the policies and procedures

4. ensuring the leadership at the management and governance levels is coherent with the value system.

These pillars are discussed further in this report, and detailed in the framework (page 19).
1 Introduction

1.1 This project

This report considers the role of healing informed governance in Aboriginal community controlled organisations (ACCOs). It is part of a suite of work being undertaken by the Healing Foundation to promote healing informed organisations.

The Healing Foundation engaged Urbis to investigate the hypothesis that the healthy function of ACCOs can be negatively impacted by the trauma carried by the individuals who contribute to and are employed by the organisations. Given staff and governing board members are largely drawn from Indigenous communities shaped by trauma, this trauma can translate into the workplace. Conversely, by instituting governance and management that are informed by healing principles, ACCOs may enjoy a trauma aware, healing informed organisational culture and increase their sustainability.

This phase of work aims to develop a framework for trauma aware, healing informed organisations, including identifying the enablers of healthy responses to incidents and the levers for changing organisational culture.

1.2 Assumptions

The following assumptions underlie the work in this report:

- effective ACCOs can provide the most effective support for trauma-exposed clients when the organisation itself is functioning in a healthy and effective way
- trauma aware, healing informed organisations are not immune from disputes and crises, however, they respond to incidents in a resilient manner which in turn ensures the long-term sustainability of the organisation
- trauma aware, healing informed organisations have a flow-on effect to their surrounding community by practising healing informed governance.

1.3 Methodology

The evidence for this report was collected in two phases. The first was a literature review, which formed the basis of a discussion paper presented to the Healing Foundation in August 2014.

The second phase involved the development of case studies about the trauma aware and healing informed practices in three ACCOs. These case studies further inform the development of the framework included in this report.

1.4 This document

The next section of this report sets out a summary of healing. Section 3 discusses the impact of trauma in the organisational context. Section 4 sets out the findings of the literature review into developing trauma aware, healing informed organisations. In section 5, processes for achieving a trauma aware and healing informed organisation are laid out. This section draws on the case studies, which are presented in Appendix A.
2 What is healing?

‘Healing’ as a critical concept of social and emotional wellbeing began to be discussed in communities in the 1990s. The release of the Bringing them Home report in 1997 led to recognition of the Stolen Generations and the continuing negative impacts on individuals and whole communities of government policies. It is now broadly recognised that unresolved trauma arose from the policies of past governments, resulting in the legacy of the Stolen Generations; and many of the problems prevalent in today’s Aboriginal and Torres Strait Islander communities, such as substance misuse, mental illness and family violence, are themselves rooted in a cycle of trauma.

The journey to healing is recognised as a difficult one, because it exposes the person to their own trauma and pain as well as to the pain of others:

"Recognition of self, of others and as a collective that there are ‘issues’. That there is pain. That there is anger and hurt and sadness that stems from past events. And that this anger, hurt and sadness is handed down like an unwanted legacy through the generations of our people. Once there is that collective recognition, of both Aboriginal and Torres Strait Islander people and of all Australians, then begins the process of healing. Healing is a change. A change of attitude, a change of behaviours that have become entrenched."  

In Voices from the campfires, healing was described as holistic and involving ‘physical, social, emotional, mental, environmental and spiritual wellbeing.’ The report established four primary principles to support the healing journey:

- addressing the causes of community dysfunction, not its symptoms
- recognising the fundamental importance of Aboriginal and Torres Strait Islander ownership, definition, design and evaluation of healing initiatives
- designing initiatives based on Aboriginal and Torres Strait Islander worldviews, not western health understandings alone
- strengthening and supporting initiatives that use positive, strength-based approaches.

In addition to the concept of ‘healing as recovery’, healing also focuses on a positive view of wellness, rather than sickness. Traditional Aboriginal and Torres Strait Islander culture does not recognise mental or physical health issues as distinct medical conditions. Wellness is considered in the context of family, community, culture, land and spirituality.

The aims of successful healing programs are to support Aboriginal and Torres Strait Islander people to reassert control over their lives, ‘increasing social and cultural identity and self-esteem, cultural knowledge and skills and cultural connectedness.’ Healing involves a renewal and affirmation of language, dance, story, music, art, identity and land.

A strengths-based approach to health and social and emotional wellbeing draws on traditional and western approaches. However, international research suggests that some Indigenous people perceive western health service providers as ‘an extension of colonisation’. Culture, gender, cultural incompetence of service providers, mistrust and fear of repercussions, and negative previous experiences, are among the barriers to service provision for Aboriginal people in Australia.

---

1 Lane Jr et al. (2002)  
2 Aboriginal and Torres Strait Islander Healing Foundation Development Team (2009)  
3 Aboriginal and Torres Strait Islander Healing Foundation Development Team (2009)  
4 Aboriginal and Torres Strait Islander Healing Foundation Development Team (2009)  
5 Healing Foundation (2014a)  
6 Healing Foundation (2014a)  
7 Healing Foundation (2014a)  
8 Lane Jr et al. (2002); Healing Foundation (2014a)  
9 Healing Foundation (2014a)  
10 Healing Foundation (2014a); Health Workforce Australia (2014)
As a result, healing requires cultural awareness and the development of culturally safe environments for the exploration of trauma and identity. The two terms are often used interchangeably, but have distinct meanings. Cultural safety is a more complex term, but a culturally safe environment is most desirable for health services in their provision for Aboriginal and Torres Strait Islander people.

Organisations, including the Healing Foundation, are developing important work to heal the systemic trauma of Aboriginal and Torres Strait Islander communities. In *Voices from the campfires*, Aunty Lilla Watson describes the journey this way:

“Our people have retreated into the belly of the snake. Only recently have we begun emerging from the mouth of the snake with renewal and consolidation of who we are.”

This recognition of the trauma within Indigenous communities has continued to be discussed and over time is beginning to inform the ways in which organisational operations can be considered.\(^{11}\)

### 3 Trauma and healing in the organisational context

Trauma within a community, and among staff and board members, can undermine the healthy function of an organisation. Understanding this enables a fresh approach to addressing dysfunction and rebuilding sustainability. It takes the focus away from an individual or a specific conflict, and places it in the context of the effects of trauma.

It is important to note the ways in which the impact of colonisation, intergenerational trauma and grief manifest in people’s lives - trauma can have significant negative psychological and social consequences including:\(^ {12}\)

- violation of the sense of safety, trust and self-worth
- emotional distress, shame and grief
- aggression and difficulty negotiating relationships
- disruption of attachment styles, which can lead to interpersonal difficulties
- adoption of negative behaviours, such as smoking, drug and alcohol misuse and physical inactivity
- increased incidence of chronic diseases, such as heart disease, cancer, diabetes, liver disease and depression.

Individual trauma can have an impact on organisations given the way that individuals’ trauma is borne out in their interactions with the organisation and between other people who work in, attend, manage or govern that organisation. This section discusses a number of important concepts that describe these factors, including:

- the concept of ‘cultural load’
- the occurrence of ‘lateral violence’
- the challenges of working within one’s own community
- the challenge to reconcile identity as a community member and organisational member.

**Cultural load**

*Aboriginal and Torres Strait Islanders who work in the government or industry do not leave their Aboriginal or Torres Strait Islander identity and culture at the door when they go to work.*,\(^ {13}\)

---

\(^{11}\) Prince (2014)  
\(^{12}\) Atkinson (2013)  
\(^{13}\) Gooda (2011)
Aboriginal workers bring a ‘cultural load’ – “a sense of the accumulation of factors/trauma that builds over time and causes [at a] minimum angst, [at] maximum stress, to daily living and working”.14

This concept recognises the high frequency of events that range from sad through to traumatic in Indigenous people, from family bereavements, to incarceration of relatives and community members, to acts of violence, racism and discrimination. Each event adds to the ‘load’ and can result in a burden that is carried into the workplace, increasing susceptibility to stress, anger, and burnout. Stress can have significant impacts on individuals, including depression, psychosomatic illness and increased susceptibility to health problems.15 At the organisational level, individuals’ stress plays out as high rates of absenteeism, difficulties retaining staff and extended periods of leave relating to stress and/or chronic illness.

With recognition that these workplace behaviours can be symptomatic of an accumulation of trauma, an organisation can be proactive in setting a culture and organisational norms that promote recognition of these behaviours as being trauma related, and setting in place healing informed responses.

**Lateral violence**

*Our organisations are another battleground for feuds and bullying to be played out. The weapons of choice here are nepotism, gossiping and harassment. When our organisations are under siege from lateral violence their effectiveness is diminished.*16

‘Lateral violence’ is the term for the violence, physical and emotional, that a group inflicts on members of its own. This form of violence can result from the extreme pressure a group feels as a result of the collective oppression, and the personal trauma, that members of that group experience:

*When we are consistently oppressed we live with great fear and great anger and often we turn on those who are closest to us. Lateral violence comes from being colonised, invaded. It comes from being told you are worthless and treated as being worthless for a long period of time. Naturally you don’t want to be at the bottom of the pecking order, so you turn on your own.*17

Lateral violence has a significant impact on Aboriginal community controlled organisations. One study found that 60 per cent of surveyed Aboriginal academics and professional staff have experienced lateral violence in their workplace.18 A study of Indigenous corporate failure found that disputes were responsible for 15 per cent of organisational failures.19 The report details cases where the governing committee could no longer meet in the same room, where the committee was split into two factions, where the committee was alienated from the community it purports to serve, and where the manager ostracised a majority of the board members, refusing to deal with them.20

Lateral violence manifests in a number of ways, as seen in. It is clear that these symptoms of lateral violence can create a negative culture in organisations; organisations can be characterised by mistrust and aggression. However, it is only recently that lateral violence has been named and with its naming, comes recognition of it as a pain-based behaviour.

---

14 Social Compass 2014 cited in Healing Foundation (2014b)
15 NCETA (2009)
16 Gooda (2011)
17 Frankland and Lewis (2011) cited in Gooda (2011)
18 Koori Mail cited in Korff (2014)
Table 1 – Forms of lateral violence\textsuperscript{21}

- Bullying
- Non-verbal innuendo
- Malicious gossip
- Imposition of derogatory labels
- Shaming
- Undermining activities
- Withholding information
- Sabotage
- Infighting
- Scapegoating
- Backstabbing
- Failure to respect privacy
- Broken confidences
- Organisational conflict
- Verbal affront
- Social exclusion
- Physical violence
- Cyber bullying

Organisations can get trapped in a cycle of lateral violence, as the existing violence becomes normalised, and an aggressive approach becomes the accepted means of addressing problems within the organisation. Understanding lateral violence as a trauma informed behaviour and recognising the symptoms early is another way organisations can take a healing informed approach to the management.

**Congruence between the vision and the reality**

Working within community as a means of contributing to community is a common employment pathway. Similarly for volunteers on governance bodies, it is seen as a way to lead, to give back, and to ensure the presence of strong community managed services. In many ways, this can drive success as organisations draw on the skills and passion of a committed workforce and volunteers. This strong sense of alignment can be a double-edged sword. There is the potential for staff and governing members to over-commit to the organisation, taking on too big a burden. This can lead to stress and emotional exhaustion.\textsuperscript{22}

As a values-driven organisation working to improve the wellbeing of Indigenous people, the alignment of the organisation’s vision and values with its governance performance and its workforce is paramount. As much as a strong alignment can enable success, when staff or board members perceive a misalignment or a diversion from the organisation’s values, the risks are great: communication and goodwill can suffer and stressful conflict can emerge.

Congruence is a critical element in a trauma aware, healing informed organisation. In the context of a traumatised community, trust is hard to win and easily lost. One breach of trust or perceived unfairness can be experienced as one among many, and spiral quickly to blame and recriminations. A proactive strategy is to ensure there is a strong, visible congruence between the stated values of the organisation, the decisions of the board, the management of the programs and staff, and the service experienced by clients.

**Identity within community and the organisation**

Working within your own community can place additional stresses on individuals working in community controlled organisations. Workers and board members are seen as representatives of that organisation within the community, which means that the role is 24/7. Individuals are asked to deal with problems or disputes, and account for the actions of the organisation, even on issues over which they have little control. This additional stress, the sense that an individual cannot take a break from their role, also increases susceptibility to burnout.

There is also often an expectation that an individual will help out members of their own family, for example, through hiring someone into the organisation or lending them a resource of the organisation. These potential conflicts of interest fuel disputes and the perception of favouritism. When issues between the organisation and the community do arise, workers and board members can often be perceived as at odds with the community, leading to abuse, gossip and innuendo. This becomes an additional pressure that staff must deal with. The stress can present a challenge to someone’s sense of identity – a feeling that they must choose what they represent.\textsuperscript{23}

Recognising that volunteers and staff can experience these pressures and conflicts, a healing informed organisation is proactive in naming these risks, ensuring volunteers and staff know what to do when and if these risks arise for them. When these risks need to be addressed, a healing informed organisation has the procedures and the skill to address the issue, and maintain the safety and connection of those involved.

\textsuperscript{21} Korff (2014)
\textsuperscript{22} NCETA (2009)
\textsuperscript{23} Gooda (2011)
4 Trauma aware, healing informed organisations

The evidence relating to the development of trauma aware, healing informed organisations is slim at the organisational level in the Aboriginal and Torres Strait Islander context. However, emerging theory and evidence from mainstream organisational theory suggests that improving relationships and the connections between those with a stake in the organisation — the board, staff and service users — helps to develop effective, sustainable, flourishing organisations.

Relationships and wellbeing at an individual level have an impact on the wellbeing at an organisational level, and vice versa. For example, Cameron et al. (2011) document the relationship between positive work practices and organisational effectiveness (see Figure 1 – The assumed connections between positive practices and organisational effectiveness).

Figure 1 – The assumed connections between positive practices and organisational effectiveness

These principles can be used to direct action to create a ‘flourishing’, sustainable organisation. Seligman (2011) discusses the five essential elements that enable lasting wellbeing at the individual level and thus at the organisational level:

- **positive emotion**: the importance of enjoying yourself in the here and now, through emotions such as peace, gratitude, satisfaction, inspiration, curiosity and hope
- **engagement**: truly engaging in an activity and experiencing ‘flow’ — time seems to stop, we lose our sense of self, and we concentrate intensely on the present
- **relationships**: good relationships are core to wellbeing
- **meaning**: the feeling of purpose of serving a cause bigger than ourselves
- **accomplishment**: bettering ourselves in some way by achieving a valuable goal.

Evidence from projects funded by the Healing Foundation since 2012 suggests that communities experiencing trauma have “had limited understanding of how their collective and ongoing experiences of trauma, as a result of past government policies, has manifested in increased health issues and family and community dysfunction and disengagement”. However, when provided with opportunities for community education and professional development, the effects on these communities can be positive, helping them to understand and recognise their trauma, and respond in a constructive way:

---

24 Lighthouse Institute (2014)  
25 Cameron et al. (2011)  
26 Healing Foundation (2014b)
This is suggestive of a trauma informed workforce being built. Workplaces are more culturally safe and aware of their historical and intergenerational trauma. Further, the impacts of such workplaces on individuals, service provision, families and communities are evidenced in the data. There are changes that are substantive and sustainable.27

The Healing Foundation has identified the eight elements of a quality healing program, shown in. While these elements are based on healing programs for individuals and communities, several of these elements are applicable to an organisational approach to healing, including the importance of:

- understanding and recognising the impact of trauma
- addressing issues in the community context
- strong leadership
- proactive approach rather than reactive
- evidence of what works, including monitoring of the organisation
- building staff, management and governance capacity.28

Figure 2 – Elements of a quality healing program

27 Healing Foundation (2014b)
28 Healing Foundation (2014b)
These elements also reflect the evidence of the important components necessary for the delivery of trauma informed services. Atkinson (2013) summarises these:

- understand trauma and its impact on individuals, families and communal groups
- promote safety
- ensure cultural competence
- support client’s control
- share power and governance
- integrate care
- support relationship building
- enable recovery.

Notwithstanding the slim body of evidence on culturally-specific organisational management and governance responses to trauma, there are emerging organisational frameworks for responding to trauma. For example, the Sanctuary Model attempts to change organisational culture, especially in response to psychological and social traumatic experiences. It has been incorporated into the Residential Care Conceptual and Operational Framework for the Department of Child Protection in WA.

It acknowledges that exposure to trauma is likely to lead to behaviours that have a negative impact on an organisation, such as being less able to learn from the past and predict future outcomes of action; less capable of recognising and modifying mistakes; being frightened of dealing with motivations; and being triggered by or re-enacting traumatic events or relationships. The Model has seven principles that provide an overarching framework for organisations to approach these issues:

- non-violence
- emotional intelligence
- social learning
- open communication
- democracy
- social responsibility
- growth and change.

These principles can guide action, with characteristics that reflect the description of healing informed organisations discussed in the previous chapter:

- caring: people care for, are interested in, and maintain responsibility for one another as friends
- compassionate support: people provide support for one another, including kindness and compassion when others are struggling
- forgiveness: people avoid blame and forgive mistakes
- inspiration: people inspire one another at work
- meaning: the meaningfulness of the work is emphasised, and people are elevated and renewed by the work
- respect, integrity and gratitude: people treat one another with respect and express appreciation for one another. They trust one another and maintain integrity.

29 The Sanctuary Model (nd)
30 Department for Child Protection (WA) (2009)
31 Cameron et al. (2011)
4.1 Developing a healing organisation

Drawing on the Sanctuary Model, it is clear that the way an organisation responds to difficulties shapes its sustainability and its relationships with staff and service users. It is likely that organisations which engage with individuals affected by trauma will experience incidents that could threaten their long-term sustainability if they don’t respond effectively.

Powley & Piderit (2008) use the analogy of a wound for how organisations respond to negative incidents. In an unhealthy organisation, the wound is ignored or poorly treated. Over time, infection sets in as the wound is not dealt with, or is exposed to further negativity. This then threatens the wellbeing of the whole, making further infection more likely to occur. Figure 3 – Unhealthy organisations illustrates that in unhealthy organisations, the response to emerging issues is inadequate, which creates a cycle that in turn encourages other problems to emerge. It becomes difficult to improve the whole of the organisation when individual problems threaten the wellbeing of the individuals and relationships within it. This echoes the cycle of lateral violence where violence is normalised, fuelling ongoing trauma expressed through further violence.32

Figure 3 – Unhealthy organisations

32 Gooda (2011)
Trauma informed organisations still experience wounds, especially when, like ACCOs, they continue to work with traumatised individuals and communities. However, a healthy trauma aware, healing informed organisation is one that responds to these challenges effectively and openly, assisting individuals to deal with their trauma, while remaining connected rather than excluded. The ongoing presence of such challenges is evident in these reflections from the case study sites:

**We all have issues and pain and trauma, so it is about building strong, healthy counsellors.**  
*(Gallang Place)*

**We are not perfect but continually working through it and will always do that.**  
*(Munjali Jymbi Centre)*

In response to working with survivors of sexual and domestic violence in war and post-war situations, an organisational development toolkit emphasises the importance of engaging staff and governing members in this process of addressing potential issues. It emphasises that people are the building blocks of an organisation and are the means by which an effective organisation is maintained. As such it is important to ensure that staff are recognised, appreciated, supported and offered influence over major decisions. In organisations like Aboriginal community controlled organisations, where the values of the community are vital to the success of an organisation, it is important to maintain ongoing communication and continued sharing of values.
Deciding to be a trauma aware, healing informed organisation takes commitment from the board and staff. In a community affected by trauma, healing informed approaches do not always come organically, but as the result of strategic decisions. The areas in which these decisions need to be taken are outlined below:

- creating a positive, healing oriented value system
- procedures and policies that reflect the organisation’s values
- the discipline to stick to clearly defined policies and procedures
- good leadership at the management and governance levels.

Achieving organisational change is difficult and specific to each organisational context – what the organisation’s activities and structures are, and where the organisation currently is on its healing journey.

Section 6 outlines a framework which poses key questions that organisations should consider when attempting to implement their own healing approach, and some examples of processes that organisations can take to achieve this. These are informed by case studies which are presented in Appendix A.

5.1 Positive, healing oriented value system

*We are not sweeping things under the carpet or letting things fester.*  
*(Munjnjali Jymbi Centre)*

Organisations should embed positive, healing oriented values throughout the organisation, such as those highlighted in the Sanctuary Model of non-violence, emotional intelligence, social learning, open communication, democracy, social responsibility, and growth and change.

Open communication between all levels of the service — clients, staff, management and governance — is important. This allows for the acknowledgement of issues, which may otherwise escalate.

For example, the approach taken at Gallang Place when staff are stressed is to care about that person, and provide plenty of opportunities for them to debrief, reflect, listen and yarn up. When acknowledging issues, it is important to address the cause of the issue as well as the outcome, in this example the stress is seen as a symptom of a problem rather than a problem in itself. Issues need to be understood in the context of community networks. As the manager at Mununjali Jymbi Centre noted, staff live and work in a small community that includes their clients and management. Communication with the community helps to identify the issues that the community needs to address.

Most importantly, the open communication of issues should lead to positive action to reconcile problems. A strengths-based approach will help to enforce the care that the organisation ultimately feels for the individual. For example, Maari Ma Health noted that they were having difficulty retaining staff who found it difficult to travel to work, or whose uniforms were repeatedly stolen. By openly communicating this problem, rather than being ashamed to come forward, staff could work together to find solutions:

*We step back and we say we have some shirts at work for you if that is what is happening to you. If there is an issue we can change the structure to support people.*  
*(Maari Ma Health)*
Healthy organisations are based on effective, healthy individuals. This means it is particularly important to have board members and management who understand the full weight of their roles and responsibilities. This may require changes in hiring and/or board appointment practices, such as appointment criteria. This does not necessarily mean that the board members must be ‘healed’ — healing is a process — but people in positions of responsibility should demonstrate a commitment to open communication, learning and the healing values of the organisation:

*We give people a go because you don’t know where our natural healers come from.*
(Gallang Place)

It is also important that board members understand the impact of their formal and informal power as a board member. Taking on the formal role of a board member means that, for example, when someone comments on a community issue they do so not just as a community member or Elder, but also as an organisational representative.

New members of an organisation cannot be expected to intuitively understand the policies and procedures of an organisation, and importantly, the rationale behind them. Understanding this enables greater buy-in from board members and increases the likelihood that they will lead by example to other people in the organisation — staff, service users and the broader community. This requires solid induction processes as well as ongoing training activities, which maintain understanding and engagement in healthy organisational practices.

### 5.2 Procedures and policies that reflect the organisation’s values

Having clearly defined policies and procedures means that board members and management should proactively support their implementation. This encourages a preventative approach to inappropriate action, perceived or real. Organisations should have policies and procedures to address:

- violence
- lateral violence
- conflict of interest/family relationships
- cultural load of each person at every level of the organisation: service delivery, management and governance, and awareness of its impact on their roles and responsibilities.

Naming violence, and the ways it is expressed, is important so that all clients, staff and board members have an understanding of their actions, and their consequences. Recognising this violence when it occurs, and its insidious effects, is the first step in ensuring the violence and its consequences can be addressed. Clearly articulating policies and procedures to individuals within an organisation is important to ensuring clear boundaries of practice.

Often people are not aware that their actions are damaging to themselves, their relationships and the broader community. The organisations that were consulted as part of this project discussed steps they took to ensure their policies were understood across the organisation, such as posters outlining the policy in every client room and the staff room. Publicising policies and procedures also means that policies have to be clearly and concisely documented, which reduces the possibility of interpretation errors. Mununjali Jymbi Centre discussed how these policies and procedures were at the core of what they did, and the importance of continually reviewing them, based on experience, to ensure they are providing the best experience for staff and clients.
5.3 Discipline to stick to clearly defined policies and procedures

Discipline to adhere to policies and procedures is needed to clearly flag to people working in, contributing to and using the service what is acceptable behaviour, and what is not. This helps to ensure congruence between the stated mission of an organisation and its activities.

When the line is made clear, it is possible to work with people to help promote change:

> We might have a community member come in and have a mental health condition or drugs or they’re having a bad day and abuse people. We sit down and put them on a contract or they are unable to utilise the service. The community members have to weigh this up and can’t abuse staff people. We have a zero tolerance policy, but it’s different from in a mainstream service. We work with the community and they respect us. These things are in place so our staff members are safe. Other community members are also exposed to this behaviour whilst waiting for their service. So it is important to keep the staff and community safe. (Maari Ma Health)

As described at Gallang Place, the organisation can only be as good or as bad as the board, staff and community make it:

> We have built our cultural base and we don’t put up with bad behaviour. We are healing ourselves and we can then pass it on to our communities. (Gallang Place)

Organisations should lead by example. Staff should ‘get culturalised’, that is, buy into the policies and procedures set out by the organisation. Gallang Place highlighted that many of their staff come from a different ethos, for example, from working in a hierarchical government agency. When they start at the service, they have to learn that the service model is based on a cultural and community perspective. Policies and procedures can assist staff to make these adjustments part of their everyday approach, and in this way, policies can help to establish positive patterns of behaviour that become the ‘way things are done’. At Gallang Place, staff meetings, debriefs, supervision and general yarning help to reinforce the cultural framework for service delivery. Investment in staff through training and development was also a factor identified by organisations as being important to supporting staff in their journey.

Requiring governing members, staff and service users to sign a code of conduct may be a means of ensuring people understand policies, have indicated their commitment to them and understand the consequences of refusing to abide by certain standards. For example, board, staff and service members could commit to a code of conduct relating to lateral violence, which sets out clearly what the term means and how it is manifested, and how the organisation will deal with people who are found to be breaking the code of conduct. The additional value of naming the set of behaviours captured under ‘lateral violence’ is that it further introduces the concept and helps bring more people to understand how their own and their communities’ trauma may be playing out.

The consequence of breaking a code of conduct could be asking a board member to step down from their position. However, it is important that even if formal action is taken, that person remains engaged with the organisation to maintain their connections and wellbeing.

Boards could include formal declarations of conflict of interest as a standing item on their agenda. This would suggest boards are leading by example, taking an open approach to issues even when this may make things more difficult or awkward in the short term.

---

34 Owen (1985)
5.4 Good leadership at the management and governance levels

Good leaders are vital at the management and governance levels of organisations;\textsuperscript{35} and leaders must be committed to the organisation and its aims, not their own agenda: ‘egos are left at the door’ (Gallang Place). Effective leaders also play a significant role in the sustainability of an organisation:

\textit{They put the wellbeing of the community before themselves and are very determined to keep everything transparent. I believe this is the reason we are still here.} 
\textit{(Mununjali Jymbi Centre)}

Sometimes good leadership involves having difficult conversations and making difficult decisions, such as when an organisation identifies that a member of staff is not coping with an aspect of their role. Leaders need to understand that these difficult conversations are not personal, and help staff to realise that ‘this is not me being picked on’, but a part of ensuring staff follow particular procedures to make the service a safe environment (Mununjali Jymbi Centre).

The effective organisations consulted as part of this project recognised that good leaders, including board and staff members, are not necessarily those that have the best qualifications on paper, and their hiring approaches took a pragmatic approach to appointment. In some cases, this meant headhunting individuals from the community who were identified as having the relevant skills, personality traits or knowledge. It is not always the case that people who could be good leaders have had the relevant experience to help them flourish in a leadership role. By having a clear idea of what the organisation needs and an eye on the community for potential leaders, organisations are able to draw on the best pool for governance, from people who might otherwise be overlooked. Important too was developing the future workforce by providing training, mentoring and upskilling for young Aboriginal people within the community.

5.5 Review and monitoring of progress

It is important to monitor the organisation to identify if it is heading in the right direction towards becoming a healing informed organisation, and to identify the areas of the organisation which need more work. Performance measures might include:\textsuperscript{36}

\begin{itemize}
  \item less violence (physical, verbal and emotional)
  \item a system of understanding the impact of trauma
  \item less victim blaming: less punitive and judgemental responses
  \item clearer, more consistent boundaries and higher expectations (linked to rights and responsibilities)
  \item earlier identification of, and strategies to deal with, perpetrator behaviour
  \item better ability to state clear goals, create strategies for change, justify need for a holistic approach
  \item understanding of repeat behaviour and resistance to change
  \item more democratic environment at all levels
  \item better outcomes for children, staff and the organisation
    \begin{itemize}
      \item reduced absenteeism, especially for stress and chronic disease
      \item increased retention
      \item more clients report positive interactions with the organisation, its staff members and management.
    \end{itemize}
\end{itemize}

The case study organisations emphasised the importance of continually reviewing policies to ensure that they were meeting the community’s needs. Trauma-specific evaluation and monitoring measures can help to focus specifically on the factors which can help to build a trauma aware, healing oriented organisation. Additionally, many of the factors which it may be useful to measure from a trauma perspective, such as staff retention or leave for stress, have wider benefits for organisational performance monitoring.

\textsuperscript{35} National Congress of Australia’s First Peoples (2012)
\textsuperscript{36} Department for Child Protection (WA) (2009)
### 6 Healing aware, trauma informed organisation framework

#### Table 2 – Deciding to be a trauma aware, healing informed organisation

<table>
<thead>
<tr>
<th>Area</th>
<th>KEY QUESTIONS</th>
<th>Examples of processes</th>
</tr>
</thead>
<tbody>
<tr>
<td>BOARD</td>
<td>The board’s role is to provide direction on the development of a positive, healing oriented value system, and to ensure coherence across the organisation.</td>
<td>- Dedicating time to debriefing and yarning up</td>
</tr>
<tr>
<td>MANAGEMENT</td>
<td>Management’s role is to identify what is needed to implement a positive, healing oriented value system.</td>
<td>- Selection and induction processes for board and staff which explain the rights and responsibilities of a role, and how trauma informed and healing awareness works in this organisation, so that people understand the commitment they are making</td>
</tr>
<tr>
<td>STAFF</td>
<td>Staff’s role is to ensure that services are provided in a culturally safe, trauma informed way that ensures their own safety as a staff and community member.</td>
<td>- Employee support, such as an Employee Assistance Program</td>
</tr>
</tbody>
</table>

- Where and how have we clearly articulated the positive values of our organisation, e.g. open communication, non-violence, growth and change?
- What do board members understand about the concept of trauma, and the impacts it can have on individuals and the organisation?
- What recent decisions have been successfully or unsuccessfully resolved in line with our values? What can we learn from this for future discussions?
- How are we encouraging open communication among board members, and between the board and the rest of the organisation?
- How do we know if our values are transparent and reflect the community’s expectations?
- How are we encouraging open, values-based communication within the management team, and with the rest of the organisation?
- How are our values reflected in opportunities for staff to debrief and discuss issues they might be having in a safe environment? How could we better align staff care with our values?
- Do our hiring practices address the values, knowledge and experience we are looking for in our staff?
- Do we provide training for our staff on trauma aware, healing informed practice?
- Do we have an effective Employee Assistance Program that understands trauma in our context? How do we know if it is effective?
- How can we ensure we have the time and space to debrief?
- What do we understand about the trauma in our community and the way this impacts feelings and behaviours?
- Do we have a process in place to recognise and manage our own triggers? How well is this working? What can we ask of others in supporting us to do this?
- In what ways are we providing a safe environment for clients? Could we do more to make our trauma awareness more visible to clients? 
- How can we ensure we have the time and space to debrief?
- What do we understand about the trauma in our community and the way this impacts feelings and behaviours?
- Do we have a process in place to recognise and manage our own triggers? How well is this working? What can we ask of others in supporting us to do this?
- In what ways are we providing a safe environment for clients? Could we do more to make our trauma awareness more visible to clients? 
- How can we ensure we have the time and space to debrief?
- What do we understand about the trauma in our community and the way this impacts feelings and behaviours?
- Do we have a process in place to recognise and manage our own triggers? How well is this working? What can we ask of others in supporting us to do this?
- In what ways are we providing a safe environment for clients? Could we do more to make our trauma awareness more visible to clients?
<table>
<thead>
<tr>
<th>Area</th>
<th>KEY QUESTIONS</th>
<th>Examples of processes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>BOARD</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The board’s role is to provide direction on the development of appropriate</td>
<td>• Clear policies and procedures posted prominently in the</td>
</tr>
<tr>
<td></td>
<td>policies and procedures.</td>
<td>organisation</td>
</tr>
<tr>
<td></td>
<td>▪ Where do our values get communicated in our policies and procedures?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ Are there identifiable actual or potential issues in the organisation which</td>
<td></td>
</tr>
<tr>
<td></td>
<td>require a healing policy response?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ How familiar are our board members with our policies? Could induction for</td>
<td></td>
</tr>
<tr>
<td></td>
<td>new board members and refreshers for existing board members be helpful?</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>MANAGEMENT</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Management’s role is to provide leadership on the implementation of policies</td>
<td></td>
</tr>
<tr>
<td></td>
<td>and procedures.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ Does our organisation have policies addressing violence, lateral violence,</td>
<td></td>
</tr>
<tr>
<td></td>
<td>conflict of interest and family relationships, and understanding and</td>
<td></td>
</tr>
<tr>
<td></td>
<td>support about cultural load?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ Are the policies clearly articulated, with no room for</td>
<td></td>
</tr>
<tr>
<td></td>
<td>misinterpretation, enabling staff, board and clients to understand the</td>
<td></td>
</tr>
<tr>
<td></td>
<td>issues?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ Are policies part of the induction process for management?</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>STAFF</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Staff’s role is to follow policies and procedures.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ How can the policies and procedures be used to guide our practice?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ Can we better use policies and procedures to maintain our health and</td>
<td></td>
</tr>
<tr>
<td></td>
<td>wellbeing?</td>
<td></td>
</tr>
</tbody>
</table>

Policies and procedures that reflect the organisation’s values
<table>
<thead>
<tr>
<th>Area</th>
<th>KEY QUESTIONS</th>
<th>BOARD</th>
<th>MANAGEMENT</th>
<th>STAFF</th>
<th>Examples of processes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Discipline to stick to clearly defined policies and procedures</strong>&lt;br&gt; The board’s role is to provide direction on the organisational response to policies and procedures.</td>
<td>How do we support and enable our organisation to follow policy?</td>
<td>Do our induction processes ensure people in the organisation understand our policies?</td>
<td>Do staff understand the importance of policies and procedures?</td>
<td>Codes of conduct</td>
<td></td>
</tr>
<tr>
<td></td>
<td>What can we learn from the times we’ve followed and not followed policy?</td>
<td>Is the consequence of breaching a policy clear to staff?</td>
<td>Is the consequence of breaching a policy clear to each client?</td>
<td>Contracts with service users and staff who breach a zero tolerance policy</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Is the consequence of breaching a policy clear to each board member?</td>
<td>What can we learn from the times we’ve followed and not followed policy?</td>
<td>Do our staff work positively with clients who breach policies?</td>
<td>Standing agenda items for areas at risk of negative influence from individuals’ trauma</td>
<td></td>
</tr>
<tr>
<td><strong>Good leadership at the management and governance level</strong>&lt;br&gt; The board’s role is to provide effective leadership and direction for the organisation.</td>
<td>Do our board members understand the role they play as community leaders, and the impacts that has?</td>
<td>Are the actions of our leaders congruent with the stated mission of the organisation?</td>
<td>Do staff model effective behaviour to their clients and peers? How could they be better supported?</td>
<td>Headhunting effective leaders</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Does our board lead by example?</td>
<td>Are management supported in having ‘difficult conversations’?</td>
<td></td>
<td>Support and training for ‘difficult’ conversations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Do we have processes for finding the most effective leaders?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Area</td>
<td>KEY QUESTIONS</td>
<td>Examples of processes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Review and monitoring of progress</td>
<td><strong>BOARD</strong> The board’s role is to provide direction on responses to the findings of progress monitoring to help the organisation achieve its goals.</td>
<td>• Performance monitoring measures that relate to trauma symptoms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>MANAGEMENT</strong> Management’s role is to collect reporting measures and ensure that policies reflect the current status of the organisation.</td>
<td>• Regular reviews of policies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>STAFF</strong> Staff’s role is to contribute to the collection of reporting measures and discussions about how the organisation can best achieve its goals.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• How do we know if our organisation is operating in a way that reflects our values?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Do we regularly review our policies?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• How does our organisation perform on a number of trauma-related indicators?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Are there any gaps we would like addressed through policies and procedures?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
7 References

Aboriginal and Torres Strait Islander Healing Foundation Development Team. (2009). Voices from the campfires: establishing the Aboriginal and Torres Strait Islander Healing Foundation.


Health Workforce Australia. (2014). Implementing the Aboriginal and Torres Strait Islander health curriculum framework: Consultation paper.


Appendix A – case studies

Gallang Place

Gallang Place is an Indigenous counselling service in Brisbane, which was incorporated in 1994. They offer counselling and support on a variety of issues including family violence, anger management, trauma and grief, abuse, drug and alcohol problems, and for emotional and social health and wellbeing. They also advocate for clients experiencing problems with government agencies.

The organisation was established because at the time there were no Indigenous organisations offering social and emotional health and wellbeing programs in Brisbane to address transgenerational grief and loss. The organisation provides counselling and support services for clients of all ages, for all issues, to support their healing from past trauma.

The CEO and senior staff have played a lead role in forming the framework for healing. This framework involves identifying issues that may arise within the workplace, and having them dealt with honestly and in a safe way that encourages ownership and responsibility for healing and organisational values and principles.

Gallang Place has also established a Registered Training Organisation (RTO) focused on mental health and counselling using a narrative therapeutic approach. The narrative therapeutic approach supports the emotional health and wellbeing of the student. The courses draw from the participant’s experiences, strengths and many times traumas. The RTO has been successful with high retention and graduation rates (38 graduates from 45 enrolments so far).

What the organisation is doing

Recruitment and retention of staff

Over the 20 years since Gallang Place was established, the organisation has had a good track record in relation to staff retention and report very low levels of staff burnout. This success is credited to both recruitment and staff support practices.

Gallang Place recruitment practices reflect a strong awareness that choosing the right people is paramount to providing a successful counselling and support program and services. Based on this approach Gallang Place usually doesn’t openly advertise positions nor actively seek out people with high-level degrees, the priority is on finding the right fit for the clients and for the Gallang Place team. Instead, an exploratory approach to recruitment is used to ensure they find candidates with the skill set and attributes that align with the organisation’s principles and values:

*Headhunting people is the way to go. If they are of good character, caring, have a willingness to learn new skills and therapeutic practices, and are passionate about helping our mob then we will give them a go. It is good if they do have some qualifications, but qualifications alone do not mean they are the right person for the job.*

*We need people who care, have a conscience and don’t have an agenda or an ego, are honest and open about their abilities and their limitations or areas they need to improve on. We need people who are smart, caring and are willing to understand the cultural obligations and professional responsibilities of the role.*
MINI CASE STUDY: STAFFING AND WORKING WITH CLIENTS

Gallang Place gave many examples of people who had taken unconventional routes into counselling. One of the counsellors prior to working at Gallang Place was picking bananas in Far North Queensland when a family member told her to have a go at counselling because they could see that she was the one in her family that family members and friends would go to for help.

Qualifications are not a guarantee that the person will make a good counsellor. We give people a go because you don’t know where our natural healers will come from.

The counsellor who came to us from Far North Queensland had never worked in counselling before Gallang Place, but was one of our best counsellors. She was able to achieve great outcomes for many of her clients. There was one client that held a lot of anger and brought this into her relationships with her husband and children.

This client had been removed from her family as a child and was in the care of the department of child safety. Even though she loved her family, her relationship with her partner and children suffered because of unresolved anger and negative behaviour. She had seen many psychologists and psychiatrists throughout her adult life with no success. She had also seen a counsellor at Gallang Place prior to the current one, and had been with us for quite a while, but there didn’t seem to be any shift in her healing.

The counsellor was going to terminate this case due to overwhelming caseload, as well as having tried all sorts of therapies without any success, but decided to try another approach as a last attempt. A mapping approach was used with a combination of practical and visual processes, which suited the client’s individual counselling needs, and finally there was a breakthrough.

[the client’s] husband and children saw the difference counselling made, and could now experience a better relationship with her, and on the whole a better family life.

This particular counsellor went on to college and received her counselling diploma, and was employed with Gallang Place for a number of years before returning to Far North Queensland.

We see counselling as a vocation not just a job. It is the person, their talent, their ability of knowing how far you can go with a client – how far you can go with challenging a person’s behaviour or thoughts, or how far we can go with an issue – just a feeling that we have. We do give our counsellors as many tools as possible to assist them in their practice, as every client is different.

Counselling is a difficult business and vicarious trauma is a real workplace health and safety issue for staff. In terms of staff support practices, both formal and informal arrangements have underpinned operations since the establishment of Gallang Place. These include debriefing with workers to ensure their own health and wellbeing is kept in check, supervision (internal or external) to support professional development, and mentoring and allowing time to sit and reflect on their work, listen and yarn up. Although disciplinary action is rare, it is undertaken as required with the key focus on the action not the individual.

The Gallang Place leadership team encourages staff to take a shared responsibility for dealing with actions that need change “if you see something being done incorrectly or inappropriately and don’t address or report it you are as much at fault as the person doing that thing.”

Counsellors and other employees are also encouraged to participate in training opportunities and information sessions to further develop their professional skills. This has included sessions on art therapy, narrative therapy, cognitive behaviour, body based therapies and personality disorders. This provides staff with the skills and knowledge to provide the best possible service to our clients. The combination of these supportive work practices contributes to a healthy and strong team:
We are a strong healthy workplace and look after the individual. The clients are not the counsellor’s clients they are Gallang Place’s clients. We try not to burden the individual employee with sole responsibility for the client.

We are like a big family and people are able to talk amongst themselves about anything and don’t feel threatened or that the focus is on the counsellor, the focus is on therapeutic techniques, processes, skills or training required and all employees are working for the best interests of the client.

We have good debates and like to work it out our way in-house.

In the occasional case when staff have experienced severe stress related to their roles or outside lives that may be affecting their work, they are encouraged to share this with their managers and together to consider alternatives (including in some cases alternative roles) which would reduce stress until things become more comfortable:

With counselling we are it — we are the tools of our trade. If a worker is having problems in their personal life they can go to one of our senior staff for support. We need staff to give 100 percent to their clients. We look after the tools of the trade — like a carpenter would.

The organisation also works within a culturally respectful framework that considers and supports the important role of male and female counsellors and supervisors. The organisation has always employed male and female counsellors and supervisors and the cultural framework is embedded in this approach.

**Staff and the community**

Gallang Place works on a principle that egos are left at the door and the focus is on what is in the best interests of the client or student. The service prides itself on providing high quality services that bring about positive outcomes for clients, students and the community.

It is recognised that initial entry to the organisation forms part of the client’s counselling experience; the beginning of their healing journey. Feeling welcome, comfortable and safe will help keep clients engaged and willing to work on their trauma. Frontline staff understand that they are required to make visitors including clients feel welcome and valued.

The receptionist is the first contact for clients who are in emotional turmoil / distress, so it is important that they have adequate skills to calm the caller and take down the information required to make an appointment. Receptionists are trained in conflict resolution, mental health and understanding personality disorders as part of their role.

The work of the service is undertaken in a cultural context supporting the Murri way of engagement and service provision where clients and staff can go back to their traditional ways and sit and yarn, and have a laugh, while maintaining staff professionalism. Counsellors go on home visits to see clients. We go where clients feel most comfortable, safe, and supported.

The organisation also encourages Aboriginal Kriol as a way of communicating. This comes from the organisation’s values and beliefs that reflect an appreciation or honouring of the person as an individual.
An important aspect of working effectively with the community is dealing with negative staff issues quickly. There is a strong view that if negativity amongst staff is not dealt with quickly and with proper conflict resolution skills and respectful processes, then the disharmony will grow and the quality of their work will suffer. “Healthy processes must be applied to all we do - client or no client involved.”

Feedback is also an important factor in developing relationships between staff and the community. Gallang Place encourages clients to flag any issues they may have with any counsellors or the organisation and this feedback is welcomed. Staff interviewed advised that they see feedback from clients as a sign of respect for, and appreciation of, the service - a chance to work through any complaints.

The organisation is clear about clients’ rights and also their responsibility for their actions. “We model the behaviour we want to see in others”. It is hard work for the clients to work on past traumas and to begin their healing. While the organisation understands this, it will also address issues with the client in terms of respecting the staff and the service:

*When they understand us and understand why and how we do things, then they do show us respect and we always show respect to them.*

**Governance**

Although Gallang Place has been established for 20 years, good leadership for a specialised organisation can still be challenging. The organisation advised that they have had ‘really bad board members’ in the past and that many lessons have been learnt from this. To meet the challenge of leadership, the organisation actively ‘headhunts’ community members to become members of the organisation so that they can later become members of the board. Additionally, community members have, over time, become more aware of the culture of Gallang Place and this shift has attracted the right people to become the recently appointed directors to the board. In terms of functionality of the board and subsequently the organisation, it is important to have “fairly healed people well advanced in their journeys” who have a good understanding of their governance responsibilities, liabilities and roles – they don’t necessarily need a background in human services although sometimes it assists:

*We want people with good ethics, who take it seriously, ask questions and challenge – people that care.*

*We have built into our cultural base that we don’t put up with bad behaviour. They pick it up because it is about healing our mob and it starts in-house – we are healing ourselves and we can then pass it on to our communities.*

The current board is collaborative and supportive, participating in strategic planning workshops with the staff but taking a hands-off role with regard to day-to-day operations, monitoring the work of the organisation through management reports provided to them at each meeting.
Developing staff and ownership

Gallang Place is based on a principle of ownership and that it can only be as good or as bad as the board, staff and community make it.

When staff are employed they also become members of the organisation and therefore have a community role and interest in the ongoing success of the organisation.

A sense of ownership is developed in various ways: staff meetings are held once a month to discuss and work through any issues, and all decisions are made together. Also, each staff member has a voice in the organisation, and staff work together to achieve positive outcomes for the clients. “Quality improvement is an item on the meeting agenda, so we are constantly reminded of our responsibility to improve on our work and the organisation.”

At the beginning of Gallang Place there were only two Aboriginal counsellors employed and the organisation set about creating their own pool of skilled and qualified counsellors. This included training the workers at Gallang Place and supporting their professional development. Aboriginal counsellors have been supported to further develop their skills, knowledge and expertise and further develop on the job.

Staff also complete the necessary training to obtain their qualifications to show government and other funding bodies that the organisation has a skilled and qualified workforce to provide counselling and support to Aboriginal clients:

They want to see that piece of paper. Training also helps to reinforce what we are doing. People employed over the years have come to Gallang Place with a degree of skills, passion and desire to work with their mob.

Buying into change

Some of the staff have come from many years of working in government agencies. There is a view that if you have worked in government for a long time you have the government ‘mentality/way of thinking and approaches’. When these staff start at Gallang Place they need to buy into the service model and its foundation within a cultural and community context - it’s about connection not detachment:

New staff are very switched on so they change because they love our organisational culture rather than the old way of doing things.

The regular formal and informal interaction of staff meetings, debriefing, supervision and general yarning around the office helps to reinforce the cultural framework for service delivery, which is often a new approach to some staff who come from a mainstream, government background:

In a government department the personalities just don’t connect and they come across to Gallang Place and it is like they have come back to culture and community and look forward to coming to work every day. The Murri way, community way is about cultural relationships and that’s what we want to create with our clients — respectful, sharing, caring relationships. We have been around for thousands of years and know each other and how to connect with each other.
Staff are integral to the development of policies that guide their work. It is the frontline workers who deliver the programs and therefore provide valuable information on how well the programs are doing or not doing. Developing policies is a collective process, at staff meetings the team identifies any issues emerging in their practice or administrative processes and considers whether they need to be improved. If so then the policy is changed and all staff sign off on these changes before placing the changed policy in the Policy and Procedures Manual. This is part of our continued quality improvement process. Policies are not developed by the Governing Committee, they approve the policies as they are developed, but it is the staff who develop them. This means that our staff own the policies and this increases the quality of our systems.

In this way all staff have a responsibility for ensuring all services and programs are continually improving, our environment and system processes are functioning well, and that our clients are always receiving best practice.

**Barriers**

Those interviewed suggested that the government has shown some resistance to the approach taken by Gallang Place. This is possibly due to a lack of understanding of the cultural framework for service delivery for Aboriginal clients. Research elsewhere reinforces the emotional, spiritual and physical health and wellbeing approach taken by Gallang Place in the development of their service model since it was established 20 years ago.

There was also a view that the work of the organisation couldn’t be ‘seen’ [we work with the person on an emotional, cultural and spiritual level that is not tangible] by funding organisations and that it was difficult to gather data on successes:

> Healing is time consuming if you are going to do it well and stay with your client until the very end. Data is really hard to get, when talking about long term outcomes.

Associated with this was the belief that the work of the RTO was more acceptable to government because outcomes could be quantified:

> It is often difficult for government to understand trauma informed healing approaches because the outcome is not visual. They can’t see a wound healed. The government likes the RTO because they can identify with the target numbers and the number of people graduating from the programs.

**Impact**

Although data is sometimes difficult to obtain in order to measure the level of impact, there are significant anecdotal reports of how the service is able to impact positively on clients’ lives and their healing journeys:

> We have been doing the same thing year after year and we have good feedback. Clients have gone through mainstream and then come to us. They feel comfortable seeing another black face, and don’t feel like they are being judged.”

Gallang Place also delivers cultural training to non-Indigenous organisational partners, including through the **Partners in Recovery** program. An Elder participates in the training delivery – matching cultural knowledge (psychology, philosophy, spirituality, comparison with other cultures etc) with the narrative methodology. The participants are fully involved and share their stories, and provided positive feedback about this approach – they were not walking away angry or negative, but felt really inspired and wanted to learn more.
The alternative

Without implementing the current approaches, those at Gallang Place thought the organisation would be very different to how it is now. For example, there would be a different dynamic with clients under a mainstream counselling model — whereas Gallang Place is designed to meet the needs of the Aboriginal community, mainstream health services are not built on a cultural framework. Staff also suspected that the organisation would be highly dysfunctional, with factions and an unhealthy environment.

The organisation distinguishes its approach from mainstream services, particularly in relation to the time taken to develop trusting relationships:

> It’s not about us getting the job done, it’s about the clients getting support and healing and focusing on time takes away from the important thing for the client. It is their journey and their feedback and years of pain and suffering to deal with, their trauma and unhealthy situations. When they come they may take a lot of time to unpack all that — our focus is on the client and on the counsellors and we have to be looked after by the board and as an organisation so we are not stressed.

Sustainability

Staff advised that the way Gallang Place builds up the strength of its workers, clients and the team is a key factor in its sustainability. The healing model is also embedded within the organisation and there is an organisational culture of analysis, reflection and questioning.

The organisation is supportive of flexibility in allocation of roles — while it’s important that team members are appropriately skilled for their role, there is an openness to helping people transition to alternative roles if they choose.

Additionally, bringing younger workers into the organisation was identified as important, as was succession planning, within a culturally appropriate frame:

> We need the young ones to sense it and feel it — we are passing on our knowledge as family members, staff and individuals.

> Healing and succession planning need to be done in our way in our time. Our approach works for Gallang Place — doing it culturally, uniquely and differently — bringing our values into our work our way.

The board has six directors and two stand down each election to ensure there is a balance of continuity and fresh ideas. Staff also support the board where necessary and have a good working relationship and feel comfortable to raise issues and plans for the future of the organisation:

> If they feel the board is mucking up we can all work together to ensure it works for us and the community — so they really do care and have ownership of what they do. Gallang Place is part of their being so they are fully involved in how the organisation fares in the community and the results are good which means we have a good reputation. It is a real community organisation in that way.
Munjunjali Jymbi Centre

The Beaudesert Aboriginal and Islander Cooperative Society was established in 1974, becoming the Mununjali Housing and Development Company in 1994. In 2002 the MHDC procured funding through the Queensland State Government’s “Finding A New Direction” funding initiative and The Mununjali Jymbi Centre was established. The Mununjali Jymbi Centre now provides counselling and support to families and individuals in Beaudesert and its surrounding areas. The services the Mununjali Jymbi Centre provides include case management; court support; counselling; referrals, targeted programs; women’s and men’s groups; community events; and many other client support services.

What the organisation is doing

We are not experts and we are not separate to the trauma or past generational trauma Indigenous people have endured.

The key focus of Mununjali Jymbi Centre’s approach to service delivery consists of community strengthening, healing and support. An important understanding underlying this is the recognition that both their Indigenous and non-Indigenous workers are part of the community, and that because the majority are locals, everyone is connected in some way to the impacts of trauma experienced by clients. This philosophy is reflected in relations between managers and staff, interactions with staff, and partnerships with other organisations. Central to being able to put Mununjali Jymbi Centre’s philosophy into practice is a policy and procedural framework that has been developed over time through an action based learning model.

The Mununjali Jymbi Centre’s current philosophy and approach has been developed by the board and staff of the Mununjali Housing and Development Company over 40 years of operation. This has involved a continuous process of review at different levels within the organisation and means that:

We are not sweeping things under the carpet or letting things fester.

It is just woven through our policies and procedures.

We want to apply those principles to ourselves and in our community.

Flexibility in staffing arrangements and open communication within the organisation are important factors in supporting their healing informed approach. This is achieved through regular staff meetings, including case management meetings; internal training and/or workshops that discuss any changes and/or updates to policies or procedures; and the development of partnerships with other organisations under the service agreement, where appropriate.

At an operational level, Mununjali Jymbi Centre through its policy and procedures provides training to staff and fosters an environment of support for staff where managers follow up with their team members at regular intervals. It also provides a framework that recognises the complexities of its inter-staff relationships, which can be challenging at times because staff live and work in a small community:

It has taken a lot of work to get to this point, including continuous training, talking things through and debriefing. If there is an issue we bring it up and even if we only believe there is an issue we bring it up. We are only a small office – it can cause so much drama if people are gossipping or picking on someone else so we will address it with people rather than letting it go. A client might come in and not want to work with someone (because they may be related etc) and we will work through that.

The systems put in place under the policies and procedures also keep the organisation accountable to the community, and provide a process through which the community is able to provide feedback. Under these procedures, staff and managers follow up any concerns raised by clients or the broader community:
We are not perfect but continually working through issues and will always do that.

Inter-service relationships are framed by an effective service agreement, which assists all staff and board to meet the requirements of the funding bodies. Building partnerships with both other organisations and the community involves the nurturing of inter-organisational relationships; conducting cultural awareness training and programs; and involving people and service providers in the Mununjali Jymbi Centre’s cultural events to provide them with a real understanding of the local Mununjali community and the services the Mununjali Jymbi Centre provides to its community.

How this approach was developed

The way Mununjali Jymbi Centre has developed its approach to healing has involved strong Aboriginal leadership through the Board of Directors, our General Manager and the work of staff, who, through externally and/or internally facilitated reviews and planning sessions each year, have been able to identify what works and what hasn’t worked so well.

The Mununjali Jymbi Centre acknowledges that it has been a long journey for the Mununjali Housing and Development Company over the last 40 years. Key organisational leaders, acting with integrity, have played an important role by putting the bigger picture before their own interests. External consultants have also worked with the staff over the years. This approach has provided an opportunity for the staff to ‘down tools’ and take the time to reflect and have significant input into updating the policies and procedures and identifying best practice:

They put the community before themselves and are very determined to keep everything transparent. I believe this is the reason we are still here.

Buying into and enabling change

The processes outlined above that have contributed to the development of the Mununjali Jymbi Centre’s current philosophy and approach has been developed and its approach to service delivery, have relied on input from staff members as well as the community. This has involved clear communication between management and staff about any changes that are being considered, developed, or implemented:

We don’t just implement something with staff and say you have to do this, we create understanding.

Relationships are also important and depend on the policies and procedures highlighted earlier.

The result of the work put into fostering a healing informed approach to staff and the community, is described by staff as positive. People are now more accountable for their actions instead of blaming others; and the policies and procedures in place result in a sense of staff feeling that they are being treated fairly; and this takes away the negative atmosphere that could exist.

Sustainability

The healing approaches towards staff and community, set within a dynamic and active policy and procedural framework, were seen to be crucial for the organisation’s sustainability to this point.

From the board to the General Manager, Coordinator to Program Team Leader, staff know that systems are in place that are followed and that have become the norm in the workplace:

We are a healthy organisation. Unless something is nurtured and looked after it won’t stay healthy – we need to constantly be reviewing, planning and implementing. Maybe we wouldn’t even be here if we didn’t put these approaches into place.
Maari Ma Health

Established in 1995, Maari Ma Health is an Aboriginal community controlled health organisation in Broken Hill that covers the far west region of New South Wales. The centre provides a variety of primary health care services, such as a clinic and visiting nurses, specialist doctors and allied health services. Maari Ma Health also runs community programs and support services such as a healing program, a drop-in centre for Aboriginal young people, playgroups, a pregnancy and parenting service and education services. It also provides housing assistance, job and income support, court support, alcohol and other drug referrals and legal advice.

What the organisation is doing

Governance

An underlying philosophy of Maari Ma Health is that healing informed governance links directly to the organisation’s delivery of services. These services have been developed with an understanding of trauma in the community. Maari Ma Health’s all Aboriginal board is representative of the service catchment of the organisation, and their style of governance filters down through to the staff who deliver the services.

In relation to service delivery, Maari Ma Health uses a holistic approach, where physical health is only one factor. This enables staff to explore a person’s trauma first, before looking at other health conditions they might present with, and allows them to tap into someone emotionally and spiritually, as well as physically. This approach tends to work because of the healing language used when providing the direct service to a client.

Staffing, recruitment and retention

Having the same personal issues they see every day, some issues might get triggered.

Maari Ma Health seeks to support current staff and to develop their future workforce by skilling up Aboriginal people in the community. In terms of current staff, Maari Ma Health aims to be flexible and to support staff to avoid burnout. Some staff will have the same issues as the people they are working with so it is important to keep the staff safe and support them by talking through and helping to work with their emotions. This is done by providing external supervision and counselling.

Staff provide a supportive environment for each other, and recognise it is not just the responsibility of management or the board to do this. An example is that new Aboriginal health workers may find it difficult to get used to the work ethic and what is required as an employee, particularly those who are just beginning their careers. Simple strategies to overcome some of these barriers and to reduce some of the stresses of getting to work include other staff members picking up the young trainees on the way through to Maari Ma Health, and providing work shirts:

The reason some of the new trainee staff are not attending could be because someone has nicked their shirt and they are too ashamed to come to work. We step back and say we have some shirts at work for you if that is what is happening for you. If there is an issue we change the structure to support people.
WHY MAARI MA HEALTH TAKES THIS APPROACH TO HEALING

I will say I can see you are not travelling so well – this is our program in place.

Maari Ma Health has 19 years' experience working with high levels of social and emotional wellbeing and physical wellness in the far west of NSW, and has identified a need to have the relevant supports in place for their staff. Maari Ma Health now has a strong policy of actively promoting the Employee Assistance Program service and there is also access to a psychologist who provides external supervision. Funding from the Healing Foundation supports the Employee Assistance Program (EAP) and education and supervision to alleviate vicarious trauma for staff given the high levels of distress in the community.

Managers and staff also identify staff members who might be having a lot of time off work, are looking stressed or not participating in team and staff events and activities, and remind each other about the supports available to them. For some of these staff it is their first or second job. Managers also have an open door policy to discuss any issues with staff at any time and staff access the external supervision and counselling with the support of management.

Similar support is also provided in the broader community, in terms of workforce development, by training Aboriginal people to be health workers and encouraging them into the workforce. Maari Ma Health has a goal to develop local Aboriginal people from traineeships through to management and has been focussing a lot of effort into skilling up young Aboriginal people into the Aboriginal health workforce. Staff see a lot of issues when training future employees and aim to support people firstly by ensuring expectations of trainees are clear and then secondly by describing how support will be provided to ensure they get through the training program.

Maari Ma Health hasn’t captured this approach in any principles or policies and report it works because it is just the reality of the way they do things.

**Barriers and enablers**

We try not to sit in our silos. I am the nurse and this is my job, but there is a larger picture here where we have to work together for one common goal.

Maari Ma Health has a strong staff ethos of getting used to change, which enables a flexible approach to program development. Although the current structure is well supported it can be changed when needed, and the strong ethos means there is less resistance from staff.

**Impact**

The organisation has taken measures to ensure that the community understands the parameters of the service delivery model and that staff don’t support a walkover service. For example, staff will sit down with community members and negotiate signed contracts with individuals if they are abusing staff. This makes boundaries with the community much stronger:

We might have a community member come in and have a mental health condition or drugs or they're having a bad day and abuse people. We sit down and put them on a contract or they are unable to utilise the service. The community members have to weigh this up and can’t abuse staff people. We have a zero tolerance policy, but it’s different from in a mainstream service. We work with the community and they respect us. These things are in place so our staff members are safe. Other community members are also exposed to this behaviour whilst waiting for their service. So it is important to keep the staff and community safe. Maari Ma Health has a mutual respect with the community around expectations of behaviour, given this the number of people on our contracts is very low.
Staff at the centre believe that if the approach they have taken wasn’t implemented there might be more community members projecting bad behaviour because they think this would be acceptable. The organisation has noted a reduction in aggression and threats since setting out expectations for community members:

*My team would be more stressed and would have left if we didn’t provide the support and external supervision and counselling.*

**Sustainability**

A strength of the organisation was seen to be its support of developing its Aboriginal staff members through study opportunities and ongoing support. Although the organisation supports the development of both Indigenous and non-Indigenous staff, the strategic plan focuses on supporting local Indigenous staff:

*If that’s done, you develop your local Indigenous staff and support them through those processes. Otherwise the government will still be flying people in and out and people will see them as blow-ins and won’t come.*