

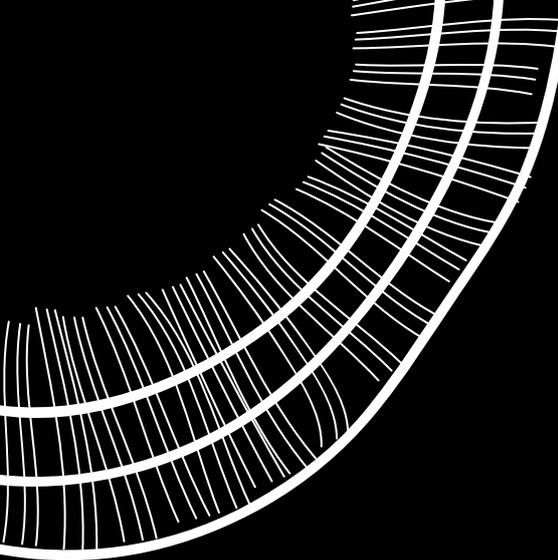


VOICES FROM THE CAMPFIRES

ESTABLISHING THE ABORIGINAL
AND TORRES STRAIT ISLANDER
HEALING FOUNDATION



David Williams 2009
Voices from the campfires
Digital composition
(See page x for explanatory notes)



VOICES FROM THE CAMPFIRES

ESTABLISHING THE ABORIGINAL
AND TORRES STRAIT ISLANDER
HEALING FOUNDATION

Report by
the Aboriginal and Torres Strait Islander
Healing Foundation Development Team



© Commonwealth of Australia 2009

This work is copyright. Apart from any use as permitted under the *Copyright Act 1968*, no part may be reproduced by any process without prior written permission from the Commonwealth, available from the Commonwealth Copyright Administration, Attorney-General's Department. Requests and inquiries concerning reproduction and rights should be addressed to the Commonwealth Copyright Administration, Attorney-General's Department, Central Office, 3-5 National Circuit, Canberra ACT 2600 or posted at www.ag.gov.au/cca.

The opinions, comments and/or analyses expressed in this document are those of the authors, the Aboriginal and Torres Strait Islander Healing Foundation Development Team, and do not necessarily represent the views of the Minister for Families, Housing, Community Services and Indigenous Affairs or the Department of Families, Housing, Community Services and Indigenous Affairs, and cannot be taken in any way as expressions of government policy.

Please be aware that this report may contain the images and names of Aboriginal and Torres Strait Islander people who have passed away.

ISBN: 978-1-921647-03-1

Funded by the Department of Families, Housing, Community Services and Indigenous Affairs

Artwork: David Williams

Design: Gilimbaa

Printing: Blue Star

LETTER OF TRANSMITTAL

The Hon Jenny Macklin, MP
Minister for Families, Housing,
Community Services
and Indigenous Affairs

Parliament House
CANBERRA ACT 2600

Dear Minister

Voices from the campfires: Establishing the Aboriginal and Torres Strait Islander Healing Foundation

It is with great pleasure we present you with the Aboriginal and Torres Strait Islander Healing Foundation Development Team's report, *Voices from the campfires: Establishing the Aboriginal and Torres Strait Islander Healing Foundation*.

The report contains ten recommendations to the Australian Government. However, as a key recommendation is that the Foundation be independent of government and run by Aboriginal and Torres Strait Islander people, the report also contains advice for the Foundation's inaugural Board.

We would like to express our sincerest gratitude to the members of the Team and secretariat, who have made a significant contribution to the consultation process and the report. We would also like to thank Dr Lowitja O'Donoghue, the Team's patron, whose guidance has been invaluable.

Most importantly, however, we would like to thank the Aboriginal and Torres Strait Islander community, whose openness and generosity of spirit have made the entire journey possible. It has been a privilege to lead this very important work and we thank you for the opportunity.

We commend the report to you and look forward to working with you in the months ahead to establish the Aboriginal and Torres Strait Islander Healing Foundation for the spirit, heart and culture of our people.

Yours faithfully



Gregory Phillips

Co-Chair
Aboriginal and Torres Strait Islander
Healing Foundation Development Team



May O'Brien BEM

Co-Chair
Aboriginal and Torres Strait Islander
Healing Foundation Development Team



CONTENTS

Letter of transmittal	iii
Terms of reference	vi
Membership	viii
About the artwork	x
Executive summary	xi
Recommendations	xii
Introduction	xiii
Chapter one: Putting healing back on the agenda	
1.1 Context	3
1.2 Rationale	4
1.2.1 The nature of healing	4
1.2.2 The nature of the problems	4
1.2.3 The nature of the solutions	5
1.2.4 How will the Foundation help healing?	7
Chapter two: Voices from the campfires	
2.1 Consultation approach	10
2.2 Healing in Aboriginal and Torres Strait Islander Australia	11
2.2.1 What is healing to you?	11
2.2.2 What will help individuals and communities heal?	11
2.2.3 What good healing programs and services do you know about in your communities?	13
2.3 Role of the Foundation	14
2.3.1 Do you support the establishment of the Foundation?	14
2.3.2 What role do you think the Foundation should have?	14
2.3.3 Should the Foundation be independent of government?	14
2.3.4 What sort of reporting role should the Foundation have?	15
2.3.5 Which groups should the Foundation focus on?	15
2.4 Structure of the Foundation	17
2.4.1 What skills should the members of the Board have?	17
2.4.2 How should membership of the Board be decided?	17

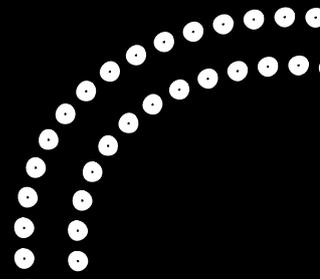
2.5 Funding and sustainability of the Foundation	18
2.5.1 How could the Foundation become self-sustaining?	18
2.5.2 How could the Foundation create sustainable healing initiatives within the community?	19

Chapter three: Future directions

3.1 Establishment	23
3.2 Scope	23
3.3 Independence	24
3.3.1 Statutory bodies	24
3.3.2 Public companies limited by guarantee	25
3.4 Implementation	26
3.4.1 Selection of the inaugural Board	26
3.4.2 Responsibilities of the inaugural Board	26

Appendices

Appendix A: Healing is a movement	30
Appendix B: Discussion questions	31
Appendix C: Workshop timetable	32
Appendix D: List of submissions	33
Appendix E: What good healing programs and services do you know about in your communities?	34
Australian Capital Territory	34
National	34
New South Wales	34
Northern Territory	34
Queensland	34
South Australia	35
Tasmania	35
Torres Strait Islands	35
Victoria	35
Western Australia	35
Appendix F: The eight principles of public life	36
List of abbreviations	37
List of references	38



TERMS OF REFERENCE

The Aboriginal and Torres Strait Islander Healing Foundation Development Team has been convened by the Minister for Families, Housing, Community Services and Indigenous Affairs to work with relevant Aboriginal and Torres Strait Islander people to ensure broad support for a Healing Foundation.

The members of the Development Team will consist of persons with demonstrated expertise in Indigenous healing, knowledge of Stolen Generations issues and knowledge around establishing a Foundation.

The role of the Development Team is to:

- have workshops with Aboriginal and Torres Strait Islander people, in particular the Stolen Generations, to build support for and seek input into a Healing Foundation;
- report to the Minister on the results of that consultation and on a proposal for a Healing Foundation; and
- advise the Minister on the establishment of a Healing Foundation.

The Development Team will provide a final report to the Minister by 30 September 2009. The Development Team will be available until the end of 2009 to provide any further advice required to the Minister.

Co-Chairs

In undertaking their role the Co-Chairs, in addition to their roles as Development Team members, will:

- develop a relationship with and provide advice to the Minister, both formally and informally;
- work with the secretariat in the development of agenda and meeting papers;
- chair meetings on a joint or alternating basis;
- be contacts for media and/or other enquiries; and
- approve:
 - meeting papers;
 - papers for the workshop sessions; and
 - the report on the outcomes of the workshop meetings and the proposal for the establishment of a Healing Foundation.

Development Team

In undertaking its role the Development Team will:

- operate as a team of people with expertise in various fields such as healing services targeting Aboriginal and Torres Strait Islander people, Stolen Generations issues, governance and management knowledge;
- prepare for, attend and participate in meetings of the Development Team;
- contribute to the discussion of issues based on individual expertise and not as representatives of any particular group;
- as required, attend, present material and actively participate at the workshop sessions — a maximum of four members of the Development Team is expected to attend each workshop being:
 - the two Co-Chairs; and
 - two other members on a rotational basis;
- contribute to the development of:
 - meeting papers;
 - papers for the workshop sessions;
 - the report on the outcomes of the workshops and the proposal for the establishment of a Healing Foundation;
 - report to the Minister on the outcomes of the consultations/workshops and a proposal to establish a Foundation; and
 - as required, advise the Minister on the establishment of the Foundation; and
- other duties as negotiated.



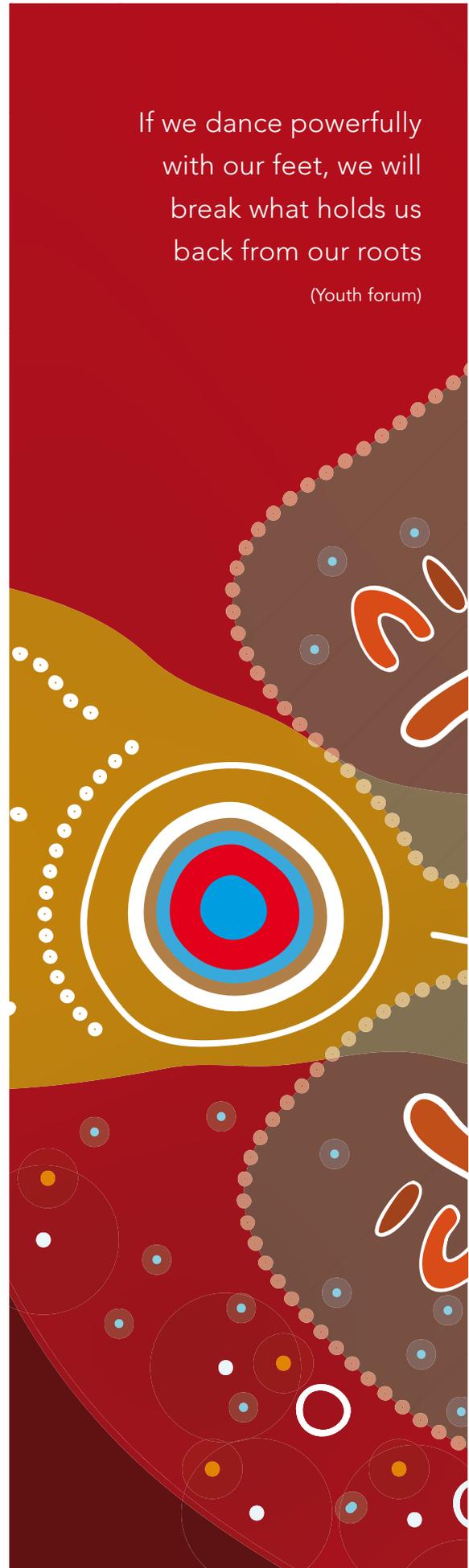
Role of the Department

The Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) will provide administrative, logistical and secretariat support to the Development Team, including by:

- organising travel and accommodation for members of the Development Team;
- organising meetings and workshop sessions;
- developing agenda and papers for meetings in consultation with the Co-Chairs;
- attending meetings of the Development Team;
- preparing and disseminating minutes of meetings;
- with instruction from the Development Team, drafting papers for the consultation/workshops, including discussion questions and timetables;
- with instruction from the Development Team, drafting the report on the workshop session outcomes;
- undertaking research; and
- with instruction from the Development Team, drafting the proposal for the establishment of the Aboriginal and Torres Strait Islander Healing Foundation.

If we dance powerfully
with our feet, we will
break what holds us
back from our roots

(Youth forum)



MEMBERSHIP



Mrs May L O'Brien BEM (Co-Chair)

May O'Brien was born in Patricia, Western Australia. She is a Wongatha person and at six years of age was placed at Mt Margaret Mission. May worked for twenty-two years as a teacher and fourteen years in senior positions in the West Australian Education Department. Although May is now retired she continues in her role as an Education Ambassador for the Department of Education, Employment and Workplace Relations.



Mr Gregory Phillips (Co-Chair)

Gregory Phillips is a Waanyi and Jaru man. A medical anthropologist by training, Greg has a research Masters degree in Medical Science and a Bachelor of Arts in Aboriginal Studies and Government, both from the University of Queensland. Greg has worked in community healing, health, leadership, youth and advocacy projects for many years, both Australia-wide and internationally.



Ms Barbra Asplet

Barbra Asplet, a Gumilaroi woman originally from Burra Bee Dee Mission Coonabarabran in New South Wales, is a member of the Stolen Generations and has been actively involved in Aboriginal affairs, politics, healing and spirituality over the past forty years. Barbra set up the Aboriginal Home Care Service of NSW and is the Founder and Coordinator of the Aboriginal Women's Healing House in Picton.



Mr Bradley Brown

Bradley Brown is a proud Gunditjmara man and is married with six children and four grandchildren. He grew up in Melbourne and has always been close to its Aboriginal community. His main employment and knowledge base is in Aboriginal health and he worked for 22 years in the Victorian Aboriginal Health Service. He was also Chief Executive Officer of Stolen Generations Victoria. Brad stepped down from the Team immediately prior to the publication of this report due to personal reasons.



Mr Brian Butler

Brian Butler is an Aranda man. He is currently the Aboriginal Advocate for South Australia in the Aged Rights Advocacy Service. He is a member of the Stolen Generations and is a lifelong advocate for the human rights of Aboriginal people. He was a founding member and Chairman of the Secretariat of National Aboriginal and Islander Child Care and the South Australian Aboriginal Housing Board. He was also Zone Commissioner of the Aboriginal and Torres Strait Islander Commission for South Australia.



Mr David Cole

David Cole is the Founder and Director of the Balunu Foundation in Darwin, which works with young, at-risk Aboriginal and Torres Strait Islander people to give them a sense of purpose and pride. Balunu uses a holistic approach to help youth to reconnect with their true identity and deal with the underlying issues they face and equips them with the necessary tools to make strong choices.



Ms Debra Hocking

Debra Hocking is from Tasmania and is a member of the Stolen Generations and descendant of the Mouheneener people. She is a recipient of the United Nations Award for the International Year of the Culture of Peace and the Human Rights Award for Humanitarian Activities in Tasmania. Debra holds a Masters degree in Indigenous Health and is currently the Indigenous Co-Chair of the Stolen Generations Alliance.



Professor Helen Milroy

Helen Milroy is a descendant of the Palyku people of the Pilbara region of Western Australia. She studied medicine at the University of Western Australia and worked as a general practitioner and consultant in childhood sexual abuse at Princess Margaret Hospital for Children. Helen currently works as a child and adolescent psychiatrist and is Director of the Centre for Aboriginal Medical and Dental Health at the University of Western Australia.



Ms Noritta Morseu-Diop

Noritta Morseu-Diop is originally from Thursday Island, with her ancestral heritage from Erub, Mer, Iama and Ugar Islands in the Torres Strait. She is currently a PhD candidate at the University of Queensland in Brisbane. She is a respected social worker and has worked in the areas of grief and loss, holistic health and healing with Aboriginal and Torres Strait Islander people in the Queensland criminal justice system.



ABOUT THE ARTWORK



The artwork on the cover of this report is by David Williams, a descendant of the Wakka Wakka people of central south-west Queensland. David writes the following explanatory notes about the artwork:

The depiction of the campfire circle, or healing circle, is a representation of the place in which healing takes place within Aboriginal and Torres Strait Islander culture. The central location it takes in the artwork represents the importance of the campfire as a space for communities to come together and create positive outcomes. The 'squiggly' line represents the stories that happen in this circle and the white dots emanating from the campfire represent smoke and, more broadly, the benefits that come from dealing with trauma in such a therapeutic way.

The more traditional representation of spirit is used in this artwork to show the spirit overlooking the campfire to bring spiritual healing to the circle by rebuilding identity and culture. The spirit is also a symbol of the good spirit, or intention, that the Team brings by creating the Foundation to address healing needs. The sun symbolises new beginnings and the hope that comes from this new initiative of healing to address the root causes of unresolved trauma, grief and shame.

The progression of circles leading inwards from the bottom left of the artwork to the campfire signifies the intergenerational trauma that has occurred, leading to the use of the campfire to create communication as a therapeutic approach to address these traumas. The circles leading from the campfire start small and grow large, meaning positive outcomes that create growth within individuals. A timeline symbolises the positive flow-on effects of healing.

The river running down the left-hand side of the artwork is used to bring a calming effect to the artwork. As a colour palette, the blue balances the reds and yellows of the fire and symbolises peace and serenity as the aim of holistic healing for individuals, families and communities. The use of fire, and a colour scheme strongly representative of fire, is to show the importance that it has in Aboriginal and Torres Strait Islander culture, from its use as a place for meeting to its use in back-burning country as a way of regenerating life.

EXECUTIVE SUMMARY

This report documents the Aboriginal and Torres Strait Islander Healing Foundation Development Team's findings from a national consultation process, conducted from May to August 2009, regarding Aboriginal and Torres Strait Islander healing and the establishment of the Aboriginal and Torres Strait Islander Healing Foundation.

While the Apology to Australia's Indigenous Peoples and its acknowledgment of the legacy of colonisation, forced removals and other past government policies was an important first step on the road to healing, it must now be followed by concrete policy responses — including the provision of culturally-appropriate healing services to assist Aboriginal and Torres Strait Islander people to begin the process of recovering from trauma.

The research demonstrates that there is an overwhelming need among Aboriginal and Torres Strait Islander people for services that are designed and run by communities to address the underlying causes of dysfunction in a manner that is holistic, safe and culturally appropriate. The international experience shows the effectiveness of this approach and its potential cost benefits.

Participants in the consultation process agreed that healing is a spiritual journey that requires initiatives to assist in the recovery from trauma and addiction and reconnection with family, community and culture. Healing services must be culturally appropriate and take a capacity-building approach. They need to be multi-disciplinary and mix modern therapeutic practices with traditional methods. Healing services must also be available to all Aboriginal and Torres Strait Islander people who are experiencing, or have experienced, trauma and its effects — particularly members of the Stolen Generations and their families.

There was consistent support for the establishment of the Foundation, which participants agreed should have three broad roles: supporting grassroots healing initiatives by providing funding and workforce development; health promotion, education and skills training in the prevention and treatment of trauma; and evaluating and documenting best practise in healing. The overwhelming preference of participants was for the Foundation to operate independently of government.

The most common suggestion regarding how the Foundation could become self-sustaining was through partnerships with philanthropic organisations, universities, Aboriginal and Torres Strait Islander organisations and other bodies. However, many also suggested that the Government has an obligation to provide the Foundation with ongoing funding.

Participants agreed that appointment to the Foundation's Board must be based on merit and by a transparent selection process. Selection criteria should be based on the qualities suggested by participants:

- commitment to healing and traditional and/or western knowledge in relation to healing;
- support from community with the ability to rise above community and organisational politics;
- professionalism and integrity;
- financial management, governance and legal skills;
- ability to work with communities, governments, businesses and philanthropic organisations; and
- respect for the diversity of Aboriginal and Torres Strait Islander people.

While board membership should be open to all Aboriginal and Torres Strait Islander people over the age of 18, consideration should also be given to gender, age and regional diversity and ensuring representation from members of the Stolen Generations.



RECOMMENDATIONS

Establishment

1. That an independent, national Aboriginal and Torres Strait Islander Healing Foundation be established to address the transgenerational cycle of trauma and grief in Aboriginal and Torres Strait Islander communities as a result of colonisation, forced removals and other past government policies.

Scope

2. That the Foundation identify and support Aboriginal and Torres Strait Islander healing initiatives, at the community level and in response to community needs, by providing funding and workforce development.
3. That the Foundation conduct health promotion and public education activities in relation to Aboriginal and Torres Strait Islander healing, including skills training in the prevention and treatment of trauma.
4. That the Foundation contribute to an evidence base for Aboriginal Torres Strait Islander healing through community-driven and culturally-appropriate research and evaluation.

Independence

5. That, to ensure the Foundation's independence from government, it be established as an Australian public company limited by guarantee, its funding be provided in full at establishment and it seek public benevolent institution and deductible gift recipient status.

Implementation

6. That the Aboriginal and Torres Strait Islander Healing Foundation Development Team incorporate the Foundation as soon as possible and form an interim Board, made up of no more than four members from that Team, with responsibility for establishing the Foundation, including seeking specialist advice, drafting establishment documents and preparing for its inaugural annual general meeting in December 2009.
7. That an independent selection panel, made up of no more than six well-respected Aboriginal and Torres Strait Islander community members, be established with the responsibility for selecting the nine-member inaugural Board.
8. That the selection panel carry out an open, national and merit-based selection process to appoint the inaugural Board, including a Chair and Deputy Chair, by 1 December 2009.
9. That the selection panel inform the Minister for Families, Housing, Community Services and Indigenous Affairs of the outcome of the selection process before appointing the successful candidates.
10. That formal responsibility for the Foundation pass from the interim Board to the inaugural Board at the Foundation's inaugural annual general meeting in December 2009.

The core of what we need
to do is to get back to
country and to a sense of
sacred, of our ancestry and
of our true values

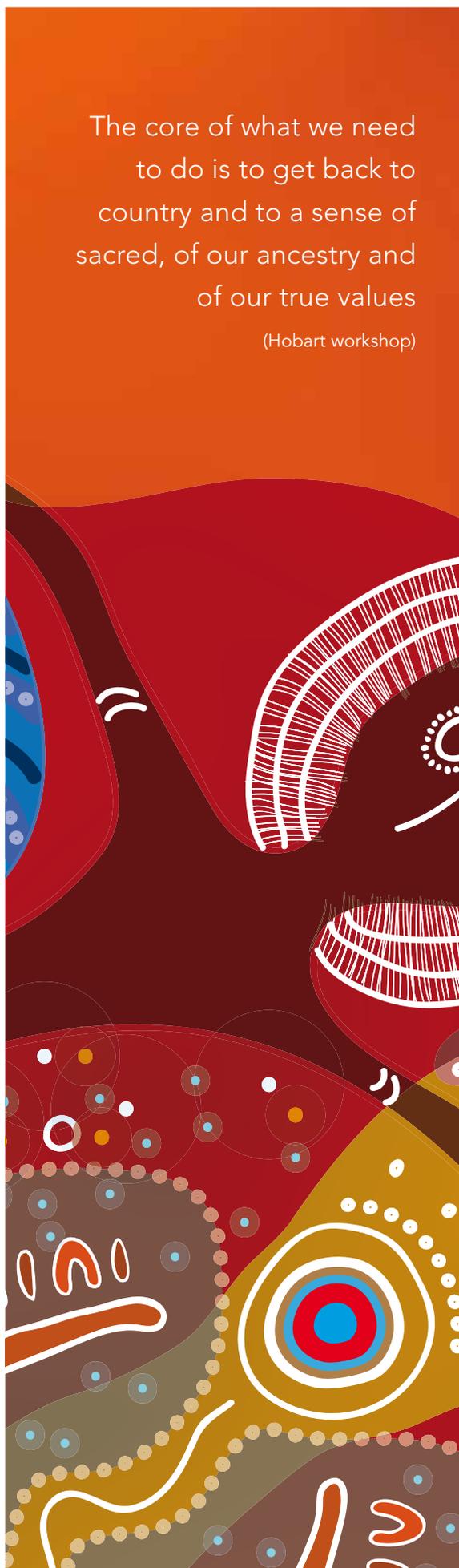
(Hobart workshop)

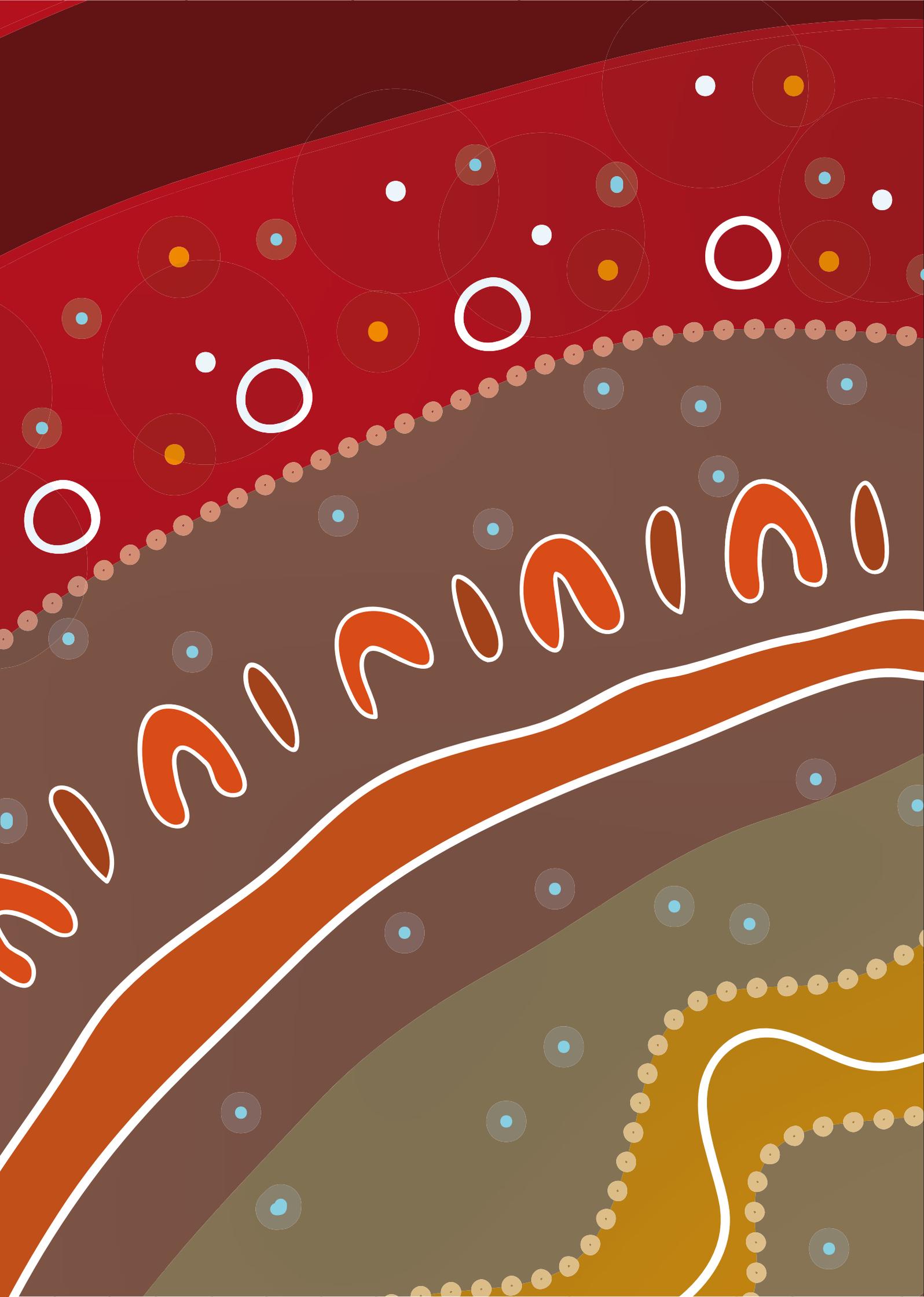
INTRODUCTION

This report, *Voices from the campfires: Establishing the Aboriginal and Torres Strait Islander Healing Foundation*, documents the Aboriginal and Torres Strait Islander Healing Foundation Development Team's findings from a national consultation process, conducted from May to August 2009, regarding healing and the establishment of the Aboriginal and Torres Strait Islander Healing Foundation.

Chapter one provides an overview of the policy context and academic literature in relation to healing. Chapter two presents the findings from the Team's consultations with Aboriginal and Torres Strait Islander individuals, communities and organisations on their ideas relating to healing and the possible roles and structure of the Foundation. Chapter three discusses these ideas and makes ten recommendations on the Foundation's establishment. Each chapter is introduced by an excerpt from 'Healing is a movement', a poem by David Cole, which is reproduced in full at *Appendix A* with the author's permission.

The Team would like to thank everyone who has contributed to the report, in particular Dr Lowitja O'Donoghue for acting as the Team's patron, David Williams for the beautiful artwork, David Cole for his wise words and Brenda Campe and her team for their unflagging enthusiasm. Lastly, thank you to the Aboriginal and Torres Strait Islander community members who generously shared their stories. This is your report.





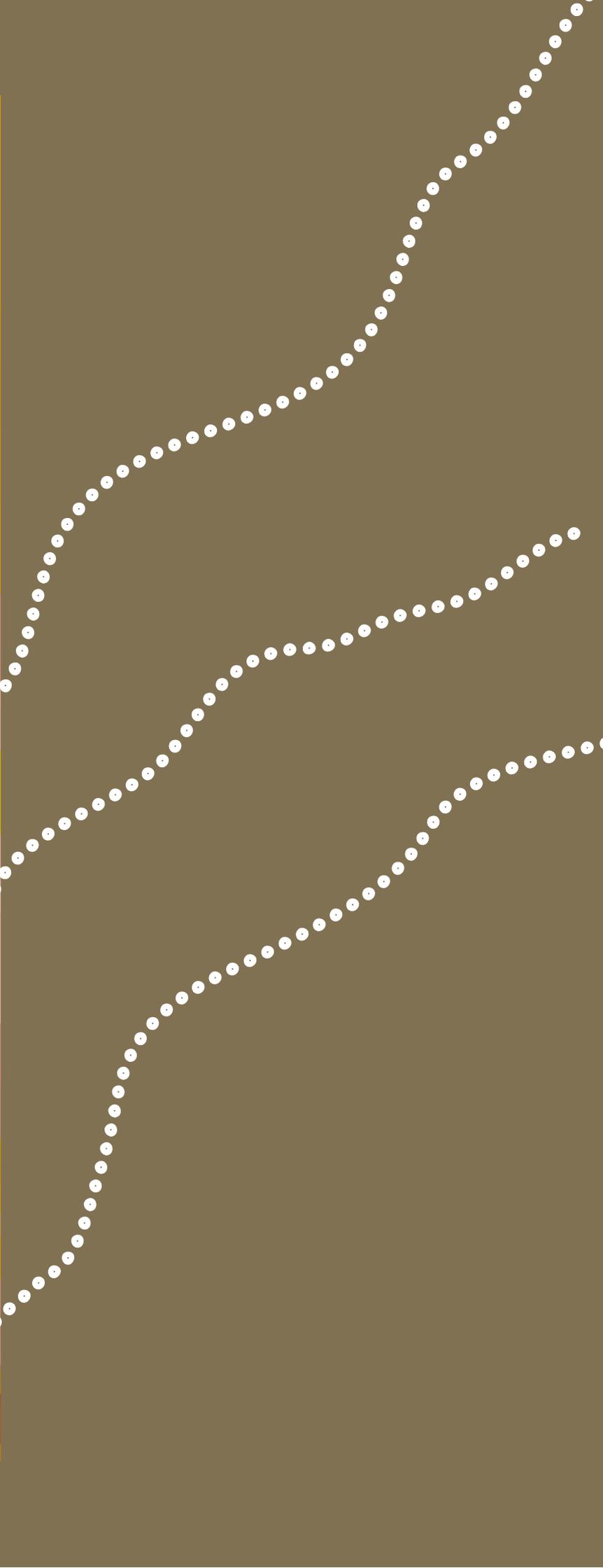
CHAPTER ONE
PUTTING HEALING
BACK ON THE AGENDA

This journey is a movement

David Cole, 'Healing is a movement'

It [healing] meant knowing
where I fitted in the world.
It was about being accepted
and about belonging to
someone or something.
It meant feeling at peace,
at one with the land and
then within the family

(Submission 26a)



1.1 CONTEXT

The Apology to Australia's Indigenous Peoples, moved by the Prime Minister, the Hon Kevin Rudd MP, and passed by the Australian Parliament on 13 February 2008, acknowledged the legacy of trauma and grief in Aboriginal and Torres Islander communities as a result of colonisation, forced removals and other past government policies and, in doing so, marked the beginning of a new relationship between Aboriginal and Torres Strait Islander and non-Indigenous people, in which reconciliation and healing are possible:

Today the parliament has come together to right a great wrong. We have come together to deal with the past so that we might fully embrace the future. We have had sufficient audacity of faith to advance a pathway to that future, with arms extended rather than with fists still clenched. So let us seize the day. Let it not become a moment of mere sentimental reflection. Let us take it with both hands and allow this day, this day of national reconciliation, to become one of those rare moments in which we might just be able to transform the way in which the nation thinks about itself, whereby the injustice administered to the stolen generations in the name of these our parliaments causes all of us to reappraise, at the deepest level of our beliefs, the real possibility of reconciliation writ large: reconciliation across all Indigenous Australia; reconciliation across the entire history of the often bloody encounter between those who emerged from the Dreamtime a thousand generations ago and those who, like me, came across the seas only yesterday; reconciliation which opens up whole new possibilities for the future (Prime Minister, the Hon Kevin Rudd MP 2008, p. 172).

The Apology sparked a renewed commitment to concrete action to address the healing needs of members of the Stolen Generations, their families and communities. Participants at the 2020 Summit, convened at Parliament House on 19 and 20 April 2008 to help shape a long-term strategy for the nation's future, recommended that the Government establish an independent, Aboriginal and Torres Strait Islander healing body, funded for the long term.

In response to this recommendation, the Minister for Families, Housing, Community Services and Indigenous Affairs, the Hon Jenny Macklin MP, convened a national healing forum on 16 and 17 September 2008 in Canberra. The forum brought together approximately sixty delegates, including members of the Stolen Generations, other Aboriginal and Torres Strait Islander individuals and

organisations working in healing at local and national levels, and representatives from government, the Australian Human Rights Commission (AHRC), research bodies and other interested parties.

The forum discussed what healing means to Aboriginal and Torres Strait Islander people, showcased examples of successful healing programs and approaches, and discussed what public policy directions might be taken. The forum resolved to support the development of a healing foundation for Aboriginal and Torres Strait Islander people and the formation of a working party, funded by the Government, to manage community consultations in establishing this foundation.

Following the forum, Gregory Phillips and Muriel Bamblett co-wrote a discussion paper (2009) in consultation with a team of Aboriginal and Torres Strait Islander experts, the Healing Forum Working Group, that built upon previous work in this area and provided a broad overview of the thinking behind the foundation and proposed a potential development process for its establishment.

Feedback from the Forum, papers published by the National Sorry Day Committee and the Stolen Generations Alliance and other research underpinned Minister Jenny Macklin's announcement on 13 February 2009, the first anniversary of the Apology, that the Australian Government would invest \$26.6 million over four years to establish the Aboriginal and Torres Strait Islander Healing Foundation to address the healing needs of Aboriginal and Torres Strait Islander people, with a strong focus on the unique needs of members of the Stolen Generations.

1.2 RATIONALE

1.2.1 The nature of healing

According to Phillips and Bamblett, for Aboriginal and Torres Strait Islander people, healing is 'a spiritual process that includes addictions recovery, therapeutic change and cultural renewal'. They explain that alcohol and other addictions are often contributing factors to individual, family and community dysfunction, and that therapeutic change means dealing with trauma in a safe and culturally-appropriate environment. Cultural renewal means strengthening and reconnecting with identity, which may include language, dance and song. Fundamentally, however, healing is grounded in Aboriginal and Torres Strait Islander spirituality (2009, pp. 4, 13).

Aunty Lilla Watson provides a good illustration of the importance of Aboriginal and Torres Strait Islander beliefs to the healing journey:

Aboriginal people believe that the spirit child comes from the earth ... I haven't seen this belief about the spirit child in any other culture, even Indigenous ones. We come from this earth, we are born from the earth. We believe that the whole of life is a spiritual experience and that we as Aboriginal people are actually more spirit than matter ... I really believe that emotions can create chemical reactions in the body. If we don't face those emotions, it can create sicknesses ... So for Aboriginal people, the whole of life is a spiritual experience, and so the whole of sickness is a spiritual process. The spirit cannot be in balance if it is out of balance with the body. If you're spiritually unwell, you can't help but affect the whole of your being ... See, the impact of colonialism has been huge ... we Aboriginal people are spiritual people and we are still recovering because of colonialism ... There's not a lot of understanding about the part of white Australia because they have this misguided belief that colonialism doesn't affect them. Of course it does! It's made them into the people they are today, which means they cannot hear what Aboriginal people are telling them ... Many are trying to run away from their own history ... As they get older and more mature [chuckles], hopefully they'll have a better understanding ... You see, that mouth of the snake ... our people have retreated into the belly of the snake. It's our consolidation of our Aboriginality, a renewing of our identity. Only recently have we begun emerging from the mouth of the snake with renewal and consolidation of who we are ... You see,

it's the white terms of reference, it's their misinterpretations that have given definition to Aboriginal illnesses (Watson 2003, pers. comm., in Phillips 2003, p. 25).

1.2.2 The nature of the problems

The nature of unresolved trauma and its intergenerational effects in Aboriginal and Torres Strait Islander communities as a result of forced removal policies are well documented (Aboriginal and Torres Strait Islander Women's Task Force on Violence report 2000; AHRC 2008; Atkinson 2002; Gordon report 2000; Little children are sacred report 2007; Swan & Raphael 1995; Victorian Indigenous Family Violence Taskforce report 2003). Similar legacies are well documented in other indigenous populations (Duran & Duran 1995; Evans-Campbell & Walters 2006; Hodgson 1996).

But what is trauma for Aboriginal and Torres Strait Islander people? Judy Atkinson defines it as:

the reaction of normal people to abnormal experiences ... which cause great distress or destruction ... [and overwhelm] the individual, family or community, and the ability to cope in mind, body, soul, spirit (2002, pp. xi, 52).

While trauma is not an excuse for criminal behaviour, Atkinson (2002) argues that many of the problems prevalent in Aboriginal and Torres Strait Islander communities today — alcohol abuse, mental illness and family violence (which themselves perpetuate the cycle of trauma) — have their roots in the failure of Australian governments and society to acknowledge and address the legacy of unresolved trauma still inherent in Aboriginal and Torres Strait Islander communities.

The Western Australian Aboriginal Child Health Survey highlights the way trauma is passed from one generation to another:

Even when children are protected from the traumatic stories of their ancestors, the effects of past traumas still impact upon children in the form of ill-health, family dysfunction, community violence, psychological morbidity and early mortality (Zubrick et al. 2005).

Where trauma is left unresolved, people can begin to internalise shame and guilt and, in more severe and sustained cases, whole communities can begin to think that pain and chaos is normal (van der Kolk et al. 1996; Middleton-Moz & Dwinell 1986; Wesley-Esqimeaux & Smolewski 2004; Wilson & Raphael 1993).

The effects of unresolved trauma are reflected in Australian Bureau of Statistics (ABS) and Australian Institute of Health and Welfare (AIHW) data. Aboriginal and Torres Strait Islander adults are twice as likely as non-Indigenous adults to report high or very high levels of psychological distress (ABS & AIHW 2008). Data also show a higher level of hospitalisations for mental and behavioural disorders than expected — where substance use was indicated, these were almost five times higher for males and twice as high for females compared to the non-Indigenous population (ABS & AIHW 2008, p.111). Furthermore, the suicide rate among Aboriginal and Torres Strait Islander people aged 0–24 is three times higher in males and five times higher in females compared with the non-Indigenous population (ABS & AIHW 2008, p. 169). It is clear that the health system is failing to meet the needs of Aboriginal and Torres Strait Islander people.

1.2.3 The nature of the solutions

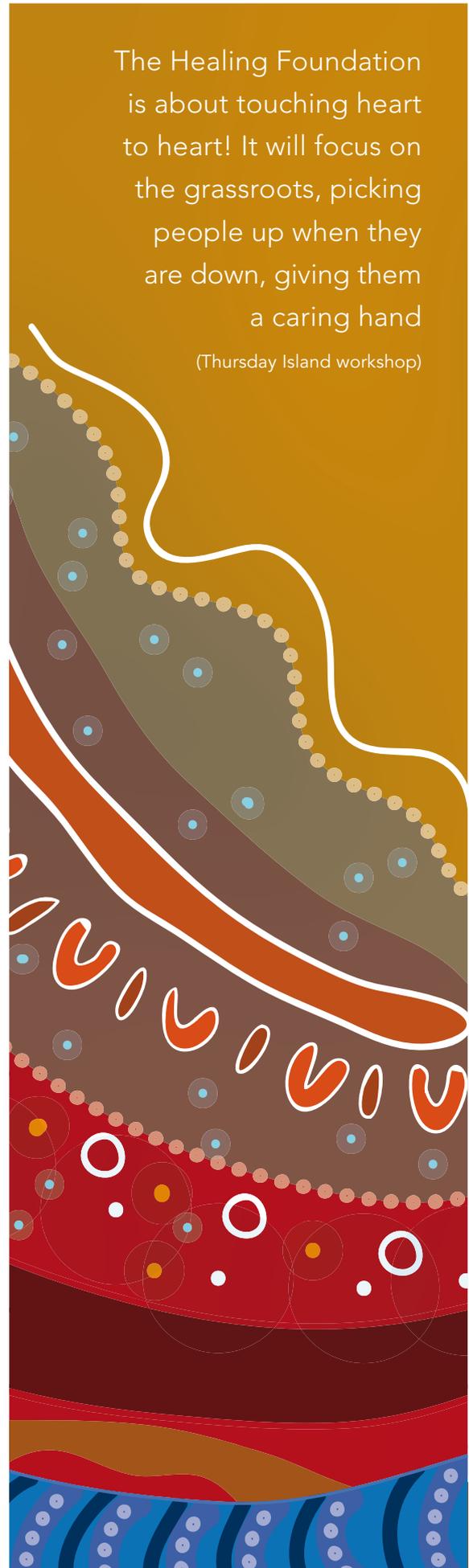
If Aboriginal and Torres Strait Islander people are to be adequately supported in their healing journey, four primary principles must be observed. First, we must focus on addressing the causes of community dysfunction, not its symptoms. Second, we must recognise the fundamental importance of Aboriginal and Torres Strait Islander ownership, definition, design and evaluation of healing initiatives. Third, and by extension, the way we design initiatives must be based on Aboriginal and Torres Strait Islander worldviews, not western health understandings alone. Finally, we must strengthen and support initiatives that use positive, strength-based approaches.

Address the causes

Policy responses to trauma in Aboriginal and Torres Strait Islander communities are too-often tailored to its symptoms, for example punitive responses such as incarceration and legislative responses such as the banning of pornography. These have met with limited success. Policy responses are further hamstrung by the nature of the bureaucracy, in which programs are scattered through a multitude of departments in silos that lack the necessary coordinating mechanisms (Albany Consulting Group 2004). Similarly, services for Aboriginal and Torres Strait Islander people also have a tendency to focus on symptoms, usually using western health understandings. This affects their ability to address the root causes of trauma in a manner that is holistic and culturally-appropriate (Phillips 2007, p. 144).

The Healing Foundation
is about touching heart
to heart! It will focus on
the grassroots, picking
people up when they
are down, giving them
a caring hand

(Thursday Island workshop)



Like a chain we have to
repair the links to make
it strong — support the
culture to reinstate the
leadership required for
the people

(Submission 26a)

Aboriginal and Torres Strait Islander ownership

When healing initiatives are designed, implemented and evaluated by Aboriginal and Torres Strait Islander people, they are more likely to produce lasting, positive changes (Cornell 2006). Both Aboriginal and Torres Strait Islander and non-Indigenous people trained in western counselling, psychiatry, psychology and social work need to work together with community healers to ensure a balance between clinical safety, quality of care and respect for the practices of Aboriginal and Torres Strait Islander healing (Timpson et al. 1988).

Aboriginal and Torres Strait Islander worldview

While social and emotional wellbeing programs have been a good attempt to make western mental health services more culturally-appropriate for Aboriginal and Torres Strait Islander people, their effectiveness has been limited, largely because these services only provide what policy-makers, with western understandings of mental health, will support. The net result is that, despite best intentions, social and emotional wellbeing programs treat *clients* as if they are *sick* and need *experts* to help them with their *illnesses*.

While there is no doubt that some clients are in distress and need of care, the diagnostic and treatment regimes used are still inherently western and there has been no attempt to start defining the specific basis of Aboriginal and Torres Strait Islander wellbeing, or at the very least, to integrate the two differing worldviews (Phillips 2003, p. 30). Healing programs, run independently from government, could help fill an important policy gap: cultural renewal and trauma recovery services that have therapeutic, community-development and self-determining features.

Strength-based approach

It is be critical to take a strengths-based approach to Aboriginal and Torres Strait Islander wellbeing. Communities need to develop cultural renewal initiatives that promote healthy living and bush medicine and help re-establish song, dance, language and ceremony. These initiatives should form the basis of wellbeing interventions, rather than an afterthought for health interventions using western approaches (Jiwa et al. 2008). The Balanu Foundation is a good example of an organisation whose services adhere to the four principles for successful healing. Balanu provides healing, suicide prevention and cultural-renewal programs that are based on country. In an independent evaluation, Kate Senior and Richard Chenhall found that young people that participated in Balanu's programs demonstrated improvements in their quality of life.

For example, one young man commented:

Nothing at first, thought it was gonna be boring. The first day we went down there and made them spears and it made me proud. Then the other night when we went down the beach and did the smoking thing [a ceremony to cleanse and purify] that thing [his hunger for alcohol] went boof! And disappeared (2008).

There are a number of other successful Aboriginal and Torres Strait Islander programs and services that use these principles. For example:

- the Marumali program, which delivers widely-respected trauma training to members of the Stolen Generations and their families and communities and workers across the country;
- the Family Wellbeing program, which educates Aboriginal and Torres Strait Islander community members and workers to understand the effects of grief and loss on families; and
- the Red Dust Healing project in Queensland and New South Wales, which helps Aboriginal men to heal, reconnect with their culture and build self-worth to reduce violence and self-harm.

1.2.4 How will the Foundation help healing?

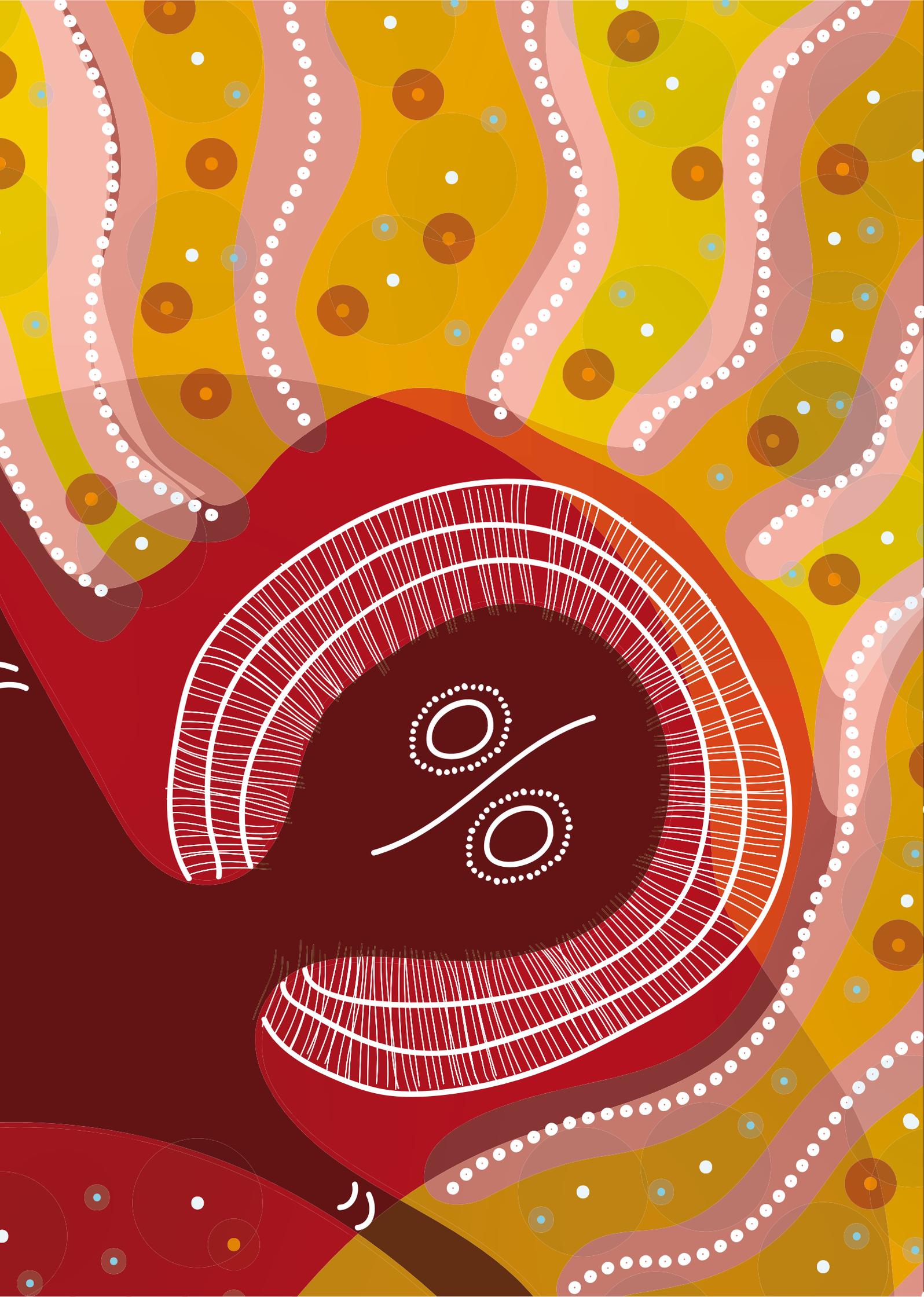
In 1998, the Canadian Government provided the Aboriginal Healing Foundation (AHF) with a one-time grant of \$350 million in response to the *Report of the Royal Commission on Aboriginal Peoples* (1996), which stressed the urgency of addressing the effects of residential schools for survivors. Established as an independent, Aboriginal-owned organisation, its long-term goals were to support community-based healing initiatives as well as to build and reinforce community structures that would foster long-term healing.

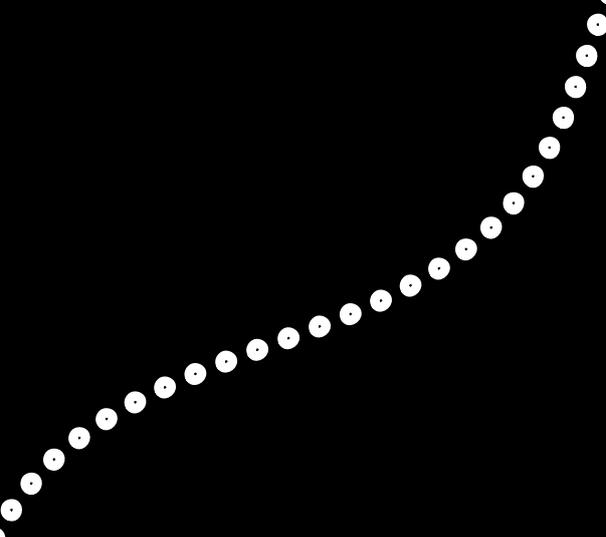
In *Mapping the healing journey: The final report of a First Nation research project on healing in Canadian Aboriginal communities*, Lane et al. (2002) found that, over a ten-year period, an estimated 204,564 First Nation people participated in healing programs funded by the AHF. This figure is 55 per cent of the total target population of residential school survivors, their families and communities. Of these participants, 57 per cent felt that the opportunity to work through their trauma had improved their self-esteem and self-awareness, had improved their relationships with others and had provided them with an opportunity to reconnect with their cultural identity.

Furthermore, an evaluation (Aboriginal Corrections Policy Unit 1997) of Hollow Water's Community Holistic Circle Healing Program, which was funded by the AHF to address an epidemic of sexual abuse, concluded that the program

had reduced recidivism rates within the community. The AHF found that in this instance, healing was a more cost-effective policy than incarceration: for every \$2 spent on the program, federal and provincial governments saved between \$6–16 in incarceration costs (AHF 2006).

Healing is a journey and must be supported in such a way that recognises the legacy of colonisation, forced removals and other past government policies and that allows for the wounds of history to be healed honestly, openly and willingly. The literature agrees that a holistic policy response is needed to address unresolved trauma in Aboriginal and Torres Strait Islander communities. The international experience suggests that a dedicated non-government organisation, run by and for Aboriginal and Torres Strait Islander people, would be best placed to begin to do so.



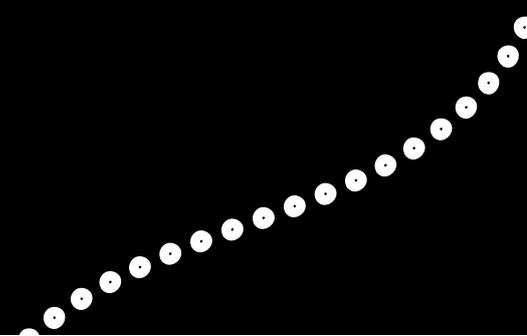


CHAPTER TWO

VOICES FROM THE CAMPFIRES

If we listen to our spirit, our ancestors will guide us

David Cole, 'Healing is a movement'



2.1 CONSULTATION APPROACH

The Team consulted with Aboriginal and Torres Strait Islander individuals, communities and organisations in a series of workshops conducted between May and August 2009. The Team advertised workshops in Aboriginal and Torres Strait media and sent emails, letters of invite, flyers and pamphlets through its networks of Aboriginal and Torres Strait Islander organisations and individuals.

The Team made every effort to acknowledge and adhere to local cultural traditions and, where possible, Aboriginal and Torres Strait Islander facilitators were engaged and traditional smoking ceremonies conducted.

Workshops were held in Broome, Perth, Darwin, Alice Springs, Brisbane, Thursday Island, Townsville, Adelaide, Melbourne, Hobart, Sydney, Dubbo and Canberra, and most workshops ran for two days. The first day focused on the Team's discussion questions and the second provided a forum in which individuals could meet with members of the Team, share their stories and provide any additional comments.

The discussion questions, at *Appendix B*, provided a framework for the workshops and written submissions and consequently form the basis of this chapter. The workshop timetable is at *Appendix C* and a list of submissions is at *Appendix D*. Approximately 450 people attended the 17 workshops and the Team received 48 written submissions.

Healing comes from
acceptance, within your
skin and within your
people and community

(Townsville workshop)



2.2 HEALING IN ABORIGINAL AND TORRES STRAIT ISLANDER AUSTRALIA

2.2.1 What is healing to you?

Participants in the consultation process agreed that healing is holistic and involves physical, social, emotional, mental, environmental and spiritual wellbeing. It is also a journey that can take considerable time and can be painful:

Healing means to be or make whole. To put together the broken or damaged bits so that the one can feel good again and be more resilient in the future. Healing often is painful as a process but results in learning more about myself and what I need to be well in myself (Submission 26e).

Healing is about bringing feelings of despair out into the open, having your pain recognised and, in turn, recognising the pain of others. It is a therapeutic dialogue with people who are listening. It is about following your own personal journey but also seeing how it fits into the collective story of Aboriginal and Torres Strait Islander trauma:

Initially, I think healing is about recognition. Recognition, both internally and externally, 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, though the generations of our people. Once there is that recognition, 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 (Youth forum).

Healing is also about personal renewal. It is about choosing to address individual trauma in an effort to purify the spirit by letting go of anger, shame and grief and being able to finally accept ones experience and feel hopeful about the future:

Healing to me is being able to come to terms with the trauma I've experienced throughout my life, and the fact I cannot change what has already occurred, but I can start to connect with my spiritual self and take the time I need by myself to discover what the road ahead has in store for me (Submission 1).

However, some people are still too angry to heal:

Even the word 'healing' insulted some ... because we can never fully heal the losses of family and self and the many abuses people have suffered (Submission 7).

Participants also agreed that healing is strengthening and connecting with your identity. It is about knowing where you belong and who you belong to, and the restoration of, and reconnection with, families, communities, and country. Healing is the renewal of language and culture: dance, story, music, art, identity and land:

Healing for me is reconciling myself with my history, my family and the associated heartache, despair, trauma, addictions, self-doubt and hopelessness that comes with an inability to truly connect with other people because no-one understands my pain, loss and questions (Youth forum).

Lastly, healing is about the future. It is about looking forward and enabling cultural traditions to evolve in order to keep them strong and sustainable for future generations.

2.2.2 What will help individuals and communities heal?

Participants agreed that healing requires self-determination, recognition of rights (including land rights), and access to justice. Many felt that a treaty is necessary, and most wanted some form of constitutional recognition. Some participants felt compensation is a prerequisite for healing while others felt that it can take place alongside healing, together with the return of human remains, artefacts and stolen wages.

Given the many facets of healing for Aboriginal and Torres Strait Islander people, it is clear that healing initiatives will benefit from a multidisciplinary approach. As well as modern therapeutic services, the vast majority of participants suggested that healing requires re-establishing access to traditional healing practices:

We need to change our ways of dealing with our healing. As a young Aboriginal man, I mistook what 'black' was. I felt a loss of Elders. Elders were disappearing figures and yet I saw the incredible

The Apology from
Kevin Rudd filled me with a
sense of warmth and peace
because I felt at ease for my
grandfather who could now
rest in peace

(Townsville workshop)

wealth of Elders, their core knowledge. Now I am an Indigenous artist who performs in Australia and world wide. I see the young people coming back. Here in Australia we are suffering indignity, the wounds of time and history move through us. In the US I've been with Indigenous people reconnecting with the idea of ancestry, trying for a balance between the land and the black spiritual way. I've not seen this in Australia. I have seen Elders of the Northern Territory and the Navajo crying because children don't want their knowledge. We need to find the people who do this, borrow from them with no shame and de-demonise and use what we have already, in health services for example, as well as in the land and in our life force. We need to learn from out there in the world (Hobart workshop).

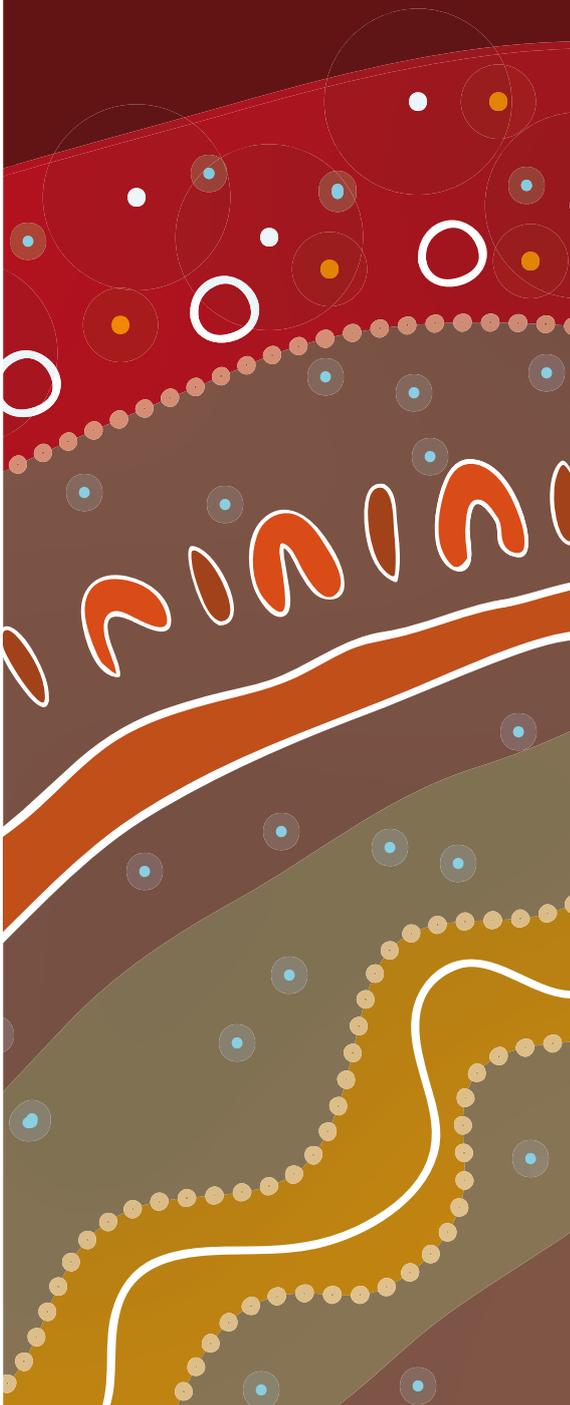
Respect and trust are necessary for healing to take place: racism must be addressed and the true history of our country told. Although the term reconciliation is problematic for some, the majority felt it is an important part of the healing journey, both within Aboriginal and Torres Strait Islander families and communities, and with non-Indigenous Australia.

Healing requires cultural awareness, and many participants suggested that Aboriginal and Torres Strait Islander studies be a core component of curricula in schools. Non-Indigenous Australians must be proud of Aboriginal and Torres Strait Islander culture:

A major prerequisite to community and individual healing is, at minimum, comfort in their place in their own and in the wider society. Governments and non-Indigenous NGOs [non-government organisations] and people must learn to respect Aboriginal and Torres Strait Islander culture, people and their self-determined solutions to their 'problems' as Aboriginal and Torres Strait Islander people understand these. At best healing will occur when Aboriginal and Torres Strait Islander people feel pride in their culture and their achievement as people and as individuals (Submission 18).

A number of participants also suggested that the Government should assist in documenting people's stories and histories and build the necessary infrastructure to house them. Knowledge centres could preserve and display Aboriginal and Torres Strait Islander culture and history to the benefit of both Aboriginal and Torres Strait Islander and non-Indigenous people.

While Elders need to be empowered to be role models, individuals also need to take responsibility for their own healing. Healing requires recovery from addictions and a shift in mindset from welfare to empowerment: 'we mob



are like Rip van Winkle. We need to wake up and engage. This is a revolution and we need to be a part of it' (Townsville workshop).

Recognition of the diversity of Aboriginal and Torres Strait Islander experiences and needs — that there are different ways of healing and sorry business — is also important. While some suggested a 'one-stop-shop' healing model, the majority felt it would not be appropriate.

Some other suggested healing initiatives include:

- healing centres;
- family support and resource centres;
- ceremonies and rituals;
- going back to country;
- traditional healers;
- Elder support groups;
- support groups for sexual assault survivors;
- leadership programs, including those for youth;
- anger-management groups;
- grief and loss programs;
- peer support groups;
- drug and alcohol groups;
- arts programs;
- more movies about Aboriginal and Torres Strait Islander issues;
- circle sentencing; and
- improved mainstream literacy programs.

A constant theme was that a bottom-up approach to healing is imperative. Initiatives that are designed and delivered by communities, and that build community capacity, are more likely to succeed. Governments must also use every means possible to facilitate greater workforce participation by Aboriginal and Torres Strait Islander people, particularly in the health, mental health, education and social service sectors. This will assist providers to deliver services that are culturally appropriate, equitable and accessible.

Finally, services must be funded for the longer term. Too often, the 'stop-start' nature of funding for services (many of which are proven to be successful) serves to discourage people from seeking help.

2.2.3 What good healing programs and services do you know about in your communities?

Many participants were not aware of the programs and services in their communities, while others felt that the services that are available are often not culturally appropriate. Therefore, it is not surprising that a frequent suggestion was that the Foundation work to raise awareness of existing services in the community. A list of some of the services suggested by participants is at *Appendix E*. Please note inclusion in this list does not mean the Team necessarily endorses the service.

2.3 ROLE OF THE FOUNDATION

2.3.1 Do you support the establishment of the Foundation?

There was broad and consistent support for the establishment of an Aboriginal and Torres Strait Islander Healing Foundation. However, many Torres Strait Islander people felt that a separate Foundation for the Torres Strait would be appropriate — but appreciated that this may not be possible.

2.3.2 What role do you think the Foundation should have?

The Foundation must support Aboriginal and Torres Strait Islander people to heal and should do so by providing support to non-profit, community-based Aboriginal and Torres Strait Islander individuals and organisations to deliver healing initiatives. Participants felt that the Foundation should leave the how up to communities: ‘programs that are culturally-driven and empower community members will be more likely to be sustaining’ (submission 23).

A related suggestion, also frequently voiced, is that the Foundation should acknowledge the importance of traditional community healers and provide financial and professional support for Aboriginal and Torres Strait Islander people already working in the healing sector:

We want the Healing Foundation to know that we are *Tjarttjura* Women Healers in Balgo. We are worried for our grannies and great grannies. We want our kids to grow up Strong for Law, Strong for Culture. Women heal our men and women, children and little babies too. We paint them — red ochre. We dance for them. We sing them. We got *Maparn* Men Healers here in Balgo too. We worried that *Tjarttjura* and *Maparn* never get pay for our work. Our work is important for our families. But no-one pays us. Only *Kapululangu* looks after the *Tjarttjura*. We want Two-Way medicine. Why do doctors and nurses get pay but not Aboriginal? Pay is respect. Why does *Kartiya* [whitefella] way get respect, but not Aboriginal way? We *Tjarttjura* know *Tjukurpa*. Our kids need *Tjukurpa*, Law. They need Country. They need *Tjarttjura* and *Maparn*. They will get lost if they have no Culture. We talk up for healing — Aboriginal way. Not just *Kartiya* way. We want Two-Way. We want our kids to be strong. We want them to live (Submission 13).

The Foundation should also coordinate services to better meet the diverse healing needs of Aboriginal and Torres Strait Islander people. This could be achieved by creating and administering a database of endorsed Aboriginal and Torres Strait Islander healing professionals and services, which could then be accessed through the Foundation. Such a database would not only help people to find services, but could also pick up service gaps and duplications, which would help in service management and design.

The Foundation should advocate on Aboriginal and Torres Strait Islander healing issues, and possibly provide policy development and advice. For example, the Foundation could lobby for the establishment of a truth and reconciliation commission and in favour of increased protection of Aboriginal and Torres Strait Islander intellectual property regarding healing: ‘we’re sick of spilling our guts and government stealing our ideas and adapting them for the mainstream’ (Townsville workshop).

The Foundation should also develop culturally-appropriate research and evaluation frameworks to strengthen the evidence base on the effectiveness and cost benefit of healing programs. This research could also involve undertaking an audit of existing programs to evaluate and document what is working and what is not — which could later form the basis of best-practise guidelines. These, in turn, could be used to inform culturally-appropriate training and accreditation programs to increase workforce capacity.

Lastly, participants suggested that the Foundation have a monitoring role to ensure funding that is designated for healing reaches its intended target groups and that healing services are safe and culturally appropriate.

2.3.3 Should the Foundation be independent of government?

The overwhelming preference of participants was for the Foundation to operate independently of government. Ownership by Aboriginal and Torres Strait Islander people was seen as being critical to ensuring that the initiatives the Foundation supports meet the needs of Aboriginal and Torres Strait Islander people.

Some participants expressed concerns that independence, at least at the outset, may come at the cost of stability, with a very small number of participants suggesting that the Foundation may therefore need to be established as a statutory body before becoming an independent body

at a later stage. Some participants voiced fears that without ongoing government financial support the Foundation may struggle.

However, most participants felt that while the control of the Foundation must remain in the hands of Aboriginal and Torres Strait Islander people, the Government has a moral responsibility to provide the Foundation with ongoing funding as part of its redress for past policies.

2.3.4 What sort of reporting role should the Foundation have?

The Foundation must be transparent and accountable to its constituency and vision. Reporting should take place on an annual basis and reports should provide details on financial management, program operations, research findings and should celebrate the Foundation's successes: 'look at the strengths ... not the negatives' (Townsville workshop).

The Foundation should provide these reports to the community, Parliament, funding bodies, peak bodies and other stakeholders, the Australian Securities and Investments Commission, the Council of Australian Governments (COAG), the Australian Human Rights Commission as well as relevant international bodies such as the World Health Organisation and the AHF. Participants felt that reports must focus on results:

Reporting performance indicators to funding agencies are not the same thing as identifying the underlying values and principles of a therapeutic practice, and capturing its effectiveness and suitability for those needing the service (Submission 26).

2.3.5 Which groups should the Foundation focus on?

Overall, participants agreed that healing must be available to all Aboriginal and Torres Strait Islander people who are experiencing, or have experienced, trauma and its effects. However, it may not be able to be all things to all people and must not over-extend itself:

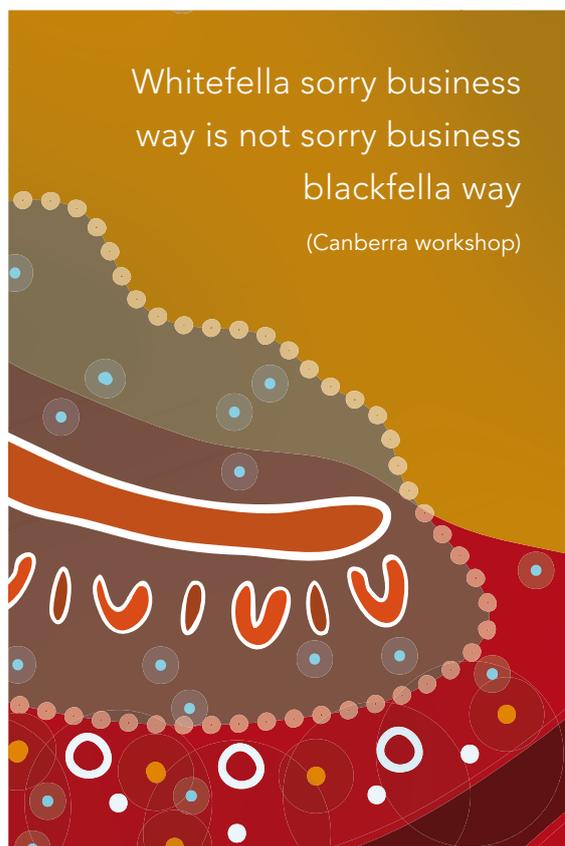
We need a strong, focused core, otherwise it is just going to be fractured pieces struggling on their own like dust in the wind (Canberra workshop).

All agreed that the Foundation should address the unique needs of members of the Stolen Generations and their families as a fundamental part of its work:

The focus of the Foundation needs to be on Stolen Generations and their families. These people have been alienated from their families, their communities, their language and society as a whole, which has led to a raft of problems including alcohol and drug abuse, violence, loss of identity, crime, incarceration etcetera (Broome workshop).

However, there are also many other Aboriginal and Torres Strait Islander groups with their own needs:

- Elders and Traditional Owners;
- women, especially single mothers and those experiencing domestic violence;
- men;
- children and young people;
- families and communities;
- prisoners;
- kinship carers and traditional adoptees;
- gay and lesbian groups;
- war veterans; and
- people with a disability or mental illness.



Healing gives us back to ourselves. Not to hide or fight anymore. But to sit still, calm our minds, listen to the universe and allow our spirits to dance on the wind. It lets us enjoy the sunshine and be bathed by the golden glow of the moon as we drift into our dreamtime. Healing ultimately gives us back to our country. To stand once again in our rightful place, eternal and generational

(Helen Milroy)



2.4 STRUCTURE OF THE FOUNDATION

2.4.1 What skills should the members of the Board have?

A passion for healing was the most desired quality in members of the Foundation's Board. Participants felt that it is crucial for members to be committed to their own healing journeys, to upholding cultural traditions and to the healing needs of Aboriginal and Torres Strait Islander people, especially the members of the Stolen Generations. Experience in healing practices, either in traditional or western medicine, would also be valued.

Board members must be able to rise above factionalism and community and organisational politics. They must also be credible in their communities and conduct themselves with professionalism and integrity at all times. Empathy, humility, and honesty are also essential. Board members must effectively communicate the needs of Aboriginal and Torres Strait Islander people to governments, and, in turn, sensitively communicate the requirements of governments to communities.

Members of the Board need to be respected leaders with long-term vision. As one participant commented, 'the Healing Foundation is a glimpse of a vision... the people that are going to run this vision must be visionary... without a vision, people will perish' (Thursday Island workshop).

Overall, the Board must have a mix of members with traditional and western knowledge. Board members need to have an understanding of the way Aboriginal and Torres Strait Islander people do business, but also of the way governments and mainstream businesses, particularly philanthropic businesses, operate.

Board members must also bring specialist skills to the Foundation, which could include:

- financial management, governance and legal skills;
- negotiation, facilitation and mediation skills; and
- problem-solving ability and creativity.

2.4.2 How should membership of the Board be decided?

Participants agreed that appointment to the Board must be based upon merit. Nepotism must be guarded against: 'we don't want six people from the same family stacking the decks' (Townsville workshop). Board members should be required to undergo comprehensive background checks and declare conflicts of interest before appointment.

Most participants agreed that board membership should be decided by an inclusive nomination and application process. However, some did suggest an election process similar to state tribal councils and land councils. Less favoured suggestions included having the Board appointed by the Minister responsible for Indigenous affairs or the Prime Minister.

There was unanimous agreement that the Board must be comprised entirely of Aboriginal and Torres Strait Islanders. Non-Indigenous people could become members of an honorary Board and provide advice and support to the Board as required. Participants also felt that Elders and youth need to play a prominent role, either through representation on the Board, forming part of an honorary Board or having an ongoing role as patrons.

Many people would like geographical representation on the Board. All wanted the Board to be gender balanced and to have representation from members of the Stolen Generations, Elders and youth. Most agreed that members of the Board should have three-year terms, with a period of exclusion after stepping down before being eligible to reapply. Some participants also suggested that members of the Board should not sit on other boards during the period of their appointment.

Participants also suggested a sliding Board during the initial establishment phase. This would see three members of the Team being retained as part of an interim Board for a period of one year to oversee the selection process for the remaining interim Board, which would then manage the Foundation's establishment and election of the inaugural Board. Another suggestion was that the Team form a selection panel to appoint the inaugural Board.

2.5 FUNDING AND SUSTAINABILITY OF THE FOUNDATION

2.5.1 How could the Foundation become self-sustaining?

The most common suggestion regarding how the Foundation could become self-sustaining was through seeking philanthropic investment. In particular, participants suggested the Foundation approach organisations that either benefit, or had benefited from, Aboriginal and Torres Strait Islander people: mining and rail companies, sporting clubs and the sugar, pearl and alcohol industries. Participants felt that the churches, too, have a moral obligation to support the Foundation:

Former participants in the Aboriginal child removal process, such as churches and welfare bodies, should be approached to contribute to a healing trust fund from which the Foundation could finance its operations (Submission 23).

The Foundation will need to seek in-kind support and partnerships. For example, participants suggested legal firms be approached for *pro bono* assistance in establishing the Foundation and universities for research and training partnerships. The Foundation could also seek endorsement from high-profile Aboriginal and Torres Strait Islander people, for example sports people and celebrities. It should seek funding from Aboriginal and Torres Strait Islander organisations such as the land councils and Indigenous Business Australia. The Foundation should also seek private donations from non-Indigenous Australians and could conduct a yearly appeal to facilitate this.

As noted under section 2.3.3, while participants overwhelmingly felt the Foundation should be independent from government, a large number also questioned whether the Foundation needs to be self-sustaining and suggested the Government has an obligation and duty of care to provide the Foundation with ongoing funding:

Why does the Healing Foundation need to be self-sustaining, given... there will be significant savings in other areas of government spending if the outcomes of [the] Healing Foundation are achieved... savings in the justice, health care... social and emotional health, [and] child protection [systems] (Submission 18).

Participants also suggested that the Foundation approach the states and territories for ongoing support but this would need to be new money and not at the expense of existing essential services.

A number of participants suggested that the Foundation rigorously evaluate the healing initiatives it funds using culturally-appropriate evaluation frameworks to build the evidence base and consequently the case for further funding:

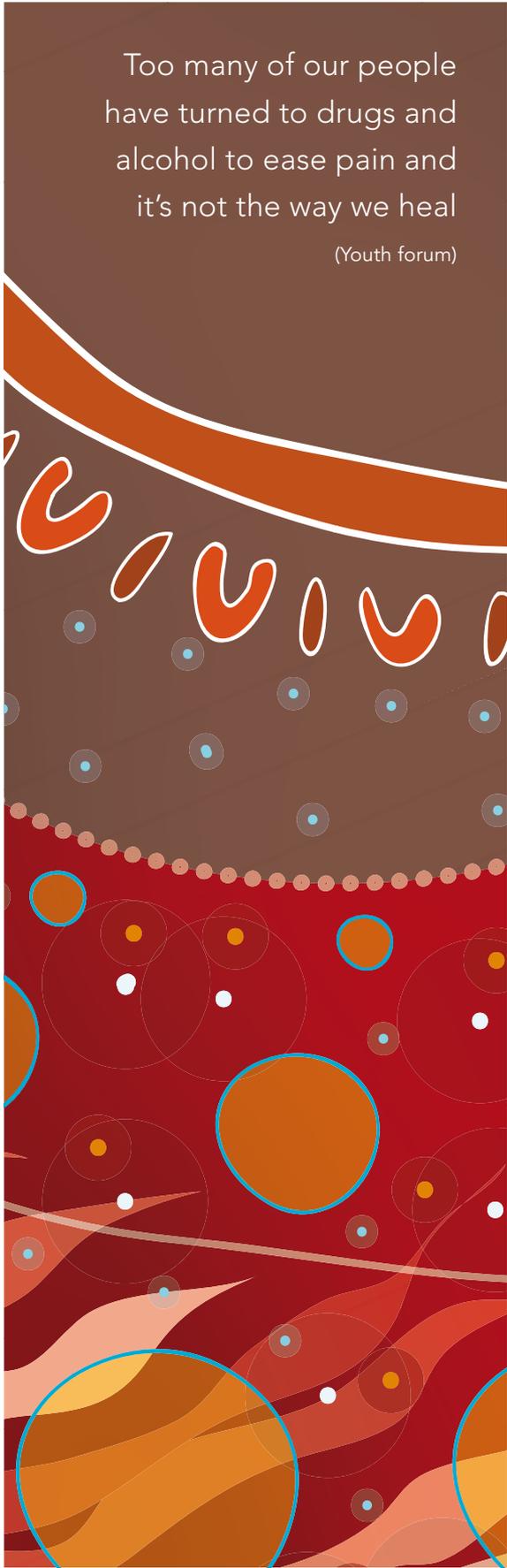
Because they will save tens of millions for example, by reducing incarceration rates for juveniles and adults, by reducing disabilities and early death, by making robust and resilient families, and doing the work to close the gap (Submission 26e).

There are a number of ways that the tax and transfer system could be used to support the Foundation. For example, a percentage of the Goods and Services Tax (GST) on alcohol and tobacco and a national reparations tax could go towards the Foundation. The Government could also support the Foundation by establishing a Medicare item number for healing consultations conducted by accredited traditional healers and by fast-tracking its application for public benevolent institution and deductible gift recipient status.

As well as seeking philanthropic and government support, the Foundation must also generate its own income streams. It could do so through fees for membership, consulting services and the licensing of Aboriginal and Torres Strait Islander intellectual property. Another frequent suggestion for the sustainability of the Foundation was through the use of a prudent investment strategy:

The Foundation would most benefit from the establishment of ... income-generating investments and asset holdings, which would result in the Foundation decreasing its reliance on 'gifts' and lead to, effectively, self-funding, and consequently self-determination (Submission 15).

To ensure ongoing support, the Foundation will need a strong promotional strategy. Suggestions included support from Aboriginal and Torres Strait Islander and mainstream media, an annual healing corroboree or conference, merchandising and fundraising dinners.



Too many of our people
have turned to drugs and
alcohol to ease pain and
it's not the way we heal

(Youth forum)

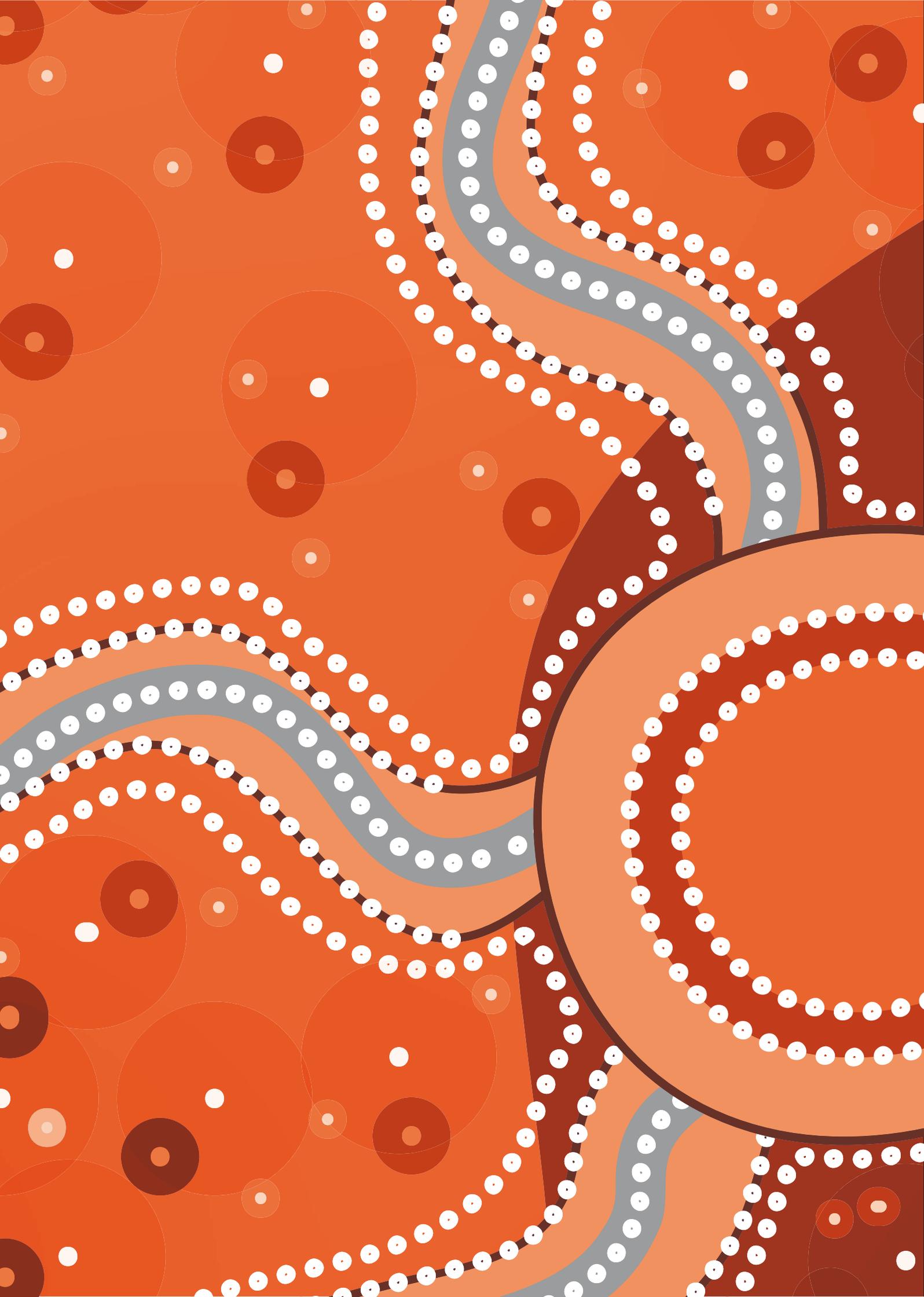
2.5.2 How could the Foundation create sustainable healing initiatives within the community?

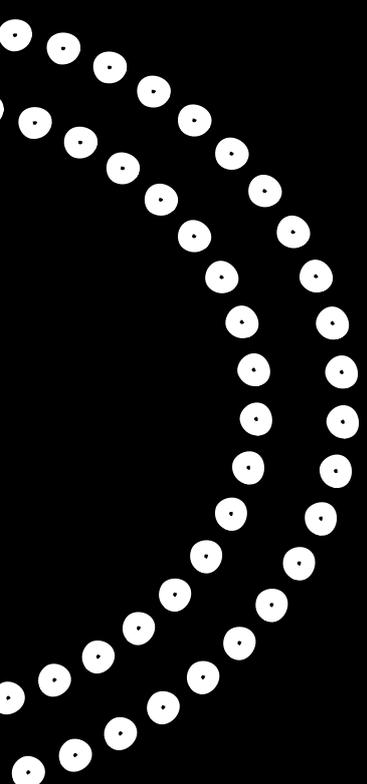
Participants agreed that the Foundation needs to adopt a capacity-building approach to ensure the sustainability of its community-based healing initiatives: 'teach them how to fish, rather than feeding them fish' (Townsville workshop). The Foundation must empower people to lead within their own communities and support existing services.

Capacity building should include formal and informal training, professional development and generational skills transfer. It should also include education and awareness campaigns regarding healing, healing services and how to access them.

Lastly, and as noted under section 2.2.2, to ensure sustainable healing in the community, funding for healing initiatives needs to be sustained. However, sustainable healing will require more than dollars. It will require the Foundation and its partners to remain true to the Foundation's vision and values:

The Foundation must have a strong vision around what it wishes to achieve, why, how it plans to do so, from which it must not waiver ... People need to be drawn to the Foundation not sucked into it because of the money it offers. It should be a campfire that provides warmth for our people (Broome workshop).





CHAPTER THREE

FUTURE DIRECTIONS

*Warriors have walked before us;
we walk now to build Warriors for tomorrow*

David Cole, 'Healing is a movement'

Healing is not just about recovering what has been lost or repairing what has been broken. It is about embracing our life force to create a new and vibrant fabric that keeps us grounded and connected, wraps us in warmth and love and gives us the joy of seeing what we have created. Healing keeps us strong and gentle at the same time. It gives us balance and harmony, a place of triumph and sanctuary forevermore

(Helen Milroy)



3.1 ESTABLISHMENT

While the Apology and its acknowledgment of the legacy of colonisation, forced removals and other past government policies was an important first step on the road to healing, it must now be followed by concrete policy responses — including the provision of culturally-appropriate healing services to assist Aboriginal and Torres Strait Islander people to begin the process of recovering from trauma.

There is an overwhelming need among Aboriginal and Torres Strait Islander people for services that are designed and run by communities to address the underlying causes of dysfunction in a manner that is holistic, safe and culturally appropriate. The international experience shows the effectiveness of this approach and its potential cost benefits.

Recommendation one

That an independent, national Aboriginal and Torres Strait Islander Healing Foundation be established to address the transgenerational cycle of trauma and grief in Aboriginal and Torres Strait Islander communities as a result of colonisation, forced removals and other past government policies.

3.2 SCOPE

Participants agreed that the Foundation should have three broad roles: supporting grassroots healing initiatives by providing funding and workforce development; health promotion, education and skills training in the prevention and treatment of trauma; and evaluating and documenting best practise in healing.

However, participants also made a number of suggestions that must lie outside the Foundation's scope. For example, while policy development in relation to addressing racism and reconciliation is important to healing, in the opinion of the Team it would be best provided in partnership with the new National Representative Body (once established), other peak bodies and all levels of government. Another frequent suggestion, capital funding for a national network of healing centres, will not be achievable with the Foundation's current funding allocation.

The Foundation will not be able to be all things to all people and its inaugural Board will need to make strategic choices about what is achievable. For example, the inaugural Board must review the service landscape to avoid duplication and will need to build partnerships with other organisations to draw on their research projects to build its own evidence base with minimal financial outlay.

Recommendation two

That the Foundation identify and support Aboriginal and Torres Strait Islander healing initiatives, at the community level and in response to community needs, by providing funding and workforce development.

Recommendation three

That the Foundation conduct health promotion and public education activities in relation to Aboriginal and Torres Strait Islander healing, including skills training in the prevention and treatment of trauma.

Recommendation four

That the Foundation contribute to an evidence base for Aboriginal Torres Strait Islander healing through community-driven and culturally-appropriate research and evaluation.

Once the healing is done there needs to be celebration on an individual, community and cultural level in recognition that the trauma, grief and pain has been overcome and healing is taking place. Acknowledging progression along the healing journey, no matter how small the steps, is very important

(Broome workshop)

3.3 INDEPENDENCE

The overwhelming preference of participants was for the Foundation to be fully independent from government. In deciding the best way to achieve this, the Team considered the relative merits of establishing the Foundation as a statutory authority and as a public company limited by guarantee.

3.3.1 Statutory bodies

There are two types of statutory bodies: prescribed agencies under the *Financial Management and Accountability Act 1997* (Cwth) (FMA Act) or statutory authorities under the *Commonwealth Authorities and Companies Act 1997* (CAC Act). Statutory bodies require enabling legislation.

FMA Act authorities are financially part of the Commonwealth and hold public money that can only be spent under the authority of an appropriation from the Australian Parliament. Some FMA Act authorities, such as the Australian National Audit Office, the Australian Competition and Consumer Commission and the Australian Human Rights Commission are statutorily independent bodies. This means they are only subject to limited government oversight in the daily performance of their roles.

In contrast, CAC Act authorities are legally and financially separate from the Commonwealth. The level of government control over Commonwealth authorities depends on the individual authority's enabling legislation. CAC Act authorities are financially more independent than FMA Act authorities; however, ministerial powers of direction can apply to these bodies. Examples of CAC Act authorities within the FaHCSIA portfolio are the four Northern Territory land councils, the Indigenous Land Corporation, Indigenous Business Australia and the Torres Strait Regional Authority.

Advantages of establishing the Foundation as a statutory body

- It would have ongoing access to government resources
- It would be more likely to be able to influence government

Disadvantages of establishing the Foundation as a statutory body

- It would not be independent
- It would therefore be highly unlikely to have community support

- It would also be difficult to attract philanthropic funding
- It is unlikely that its enabling legislation could be drafted and passed by Parliament by 1 January 2010.

3.3.2 Public companies limited by guarantee

Not-for-profit organisations are usually registered as public companies limited by guarantee. Companies are legal entities that are distinct from their members and can hold property, sue and be sued. Limited by guarantee means the liability of the company's members is limited to the amount the members undertake to contribute to the property of the company if it is wound up and its assets are not sufficient to meet its liabilities. Public companies are registered under the *Corporations Act 2001* (Cwth) (Corporations Act) and can operate across Australia; examples are Reconciliation Australia, Indigenous Community Volunteers and beyondblue.

Some companies come under the CAC Act as well as the Corporations Act and are called Commonwealth companies. A company becomes a Commonwealth company when the Commonwealth controls the company. This happens when the Commonwealth controls the casting of the majority of votes that might be cast at a general meeting of the company or if the Commonwealth can appoint or remove all, or the majority, of the directors of the company; an example is Aboriginal Hostels Limited.

Advantages of establishing the Foundation as a public company limited by guarantee

- It would be independent and run by Aboriginal and Torres Strait Islander people
- It would therefore have strong community endorsement
- It would also be easier to attract philanthropic funding
- It would not require enabling legislation

Disadvantages of establishing the Foundation as a public company limited by guarantee

- It would potentially have less access to government resources
- It would not have guaranteed influence with government

Based on the strong views of participants that the Foundation should be independent from government, the considered opinion of the Team is that this would be best achieved by establishing the Foundation as an independent public company limited by guarantee. The Foundation should also be funded in such a way to maintain this independence. This could be achieved by providing the Foundation with its funding allocation in full at establishment so that it can achieve self-sustainability through an investment strategy as well as seeking philanthropic partnerships and public benevolent institution and deductible gift recipient status. However, while the Foundation should be independent from government it should publicly report to the Minister responsible for Indigenous affairs in addition to its responsibilities under the Corporations Act.

Recommendation five

That, to ensure the Foundation's independence from government, it be established as an Australian public company limited by guarantee, its funding be provided in full at establishment and it seek public benevolent institution and deductible gift recipient status.

3.4 IMPLEMENTATION

3.4.1 Selection of the inaugural Board

In accordance with the principles of self-determination, the positive experience of the Aboriginal Healing Foundation in Canada and the overwhelming preference of participants, the Foundation should be run by Aboriginal and Torres Strait Islander people. Not only does this mean the Board should be made up of Aboriginal and Torres Strait Islander people, but also that Aboriginal and Torres Strait Islander people should select the Board.

The Aboriginal and Torres Strait Healing Foundation Development Team recommends incorporating the Foundation as soon as possible and forming an interim Board, made up of no more than four members of that Team, with responsibility for establishing the Foundation. This will allow the interim Board to receive establishment funding from FaHCSIA, which would in turn allow it to act independently — to seek specialist advice, draft establishment documents, promote the Foundation and prepare for its inaugural annual general meeting in December 2009. Interim Board members should be part-time and meet monthly.

An independent selection panel, made up of no more than six well-respected Aboriginal and Torres Strait Islander community members, should be established to carry out an open, national and merit based selection process to appoint the Foundation's nine-member inaugural Board, including a Chair and Deputy Chair, by 1 December 2009. The panel should inform the Minister of the outcome of the selection process before appointing the successful candidates.

Selection criteria should be based on the qualities suggested by participants:

- commitment to healing and traditional and/or western knowledge in relation to healing;
- support from community with the ability to rise above community and organisational politics;
- professionalism and integrity;
- financial management, governance and legal skills;
- ability to work with communities, governments, businesses and philanthropic organisations; and
- respect for the diversity of Aboriginal and Torres Strait Islander people.

While board membership must be open to all Aboriginal and Torres Strait Islander people over the age of 18,

consideration should also be given to gender, age and regional diversity and ensuring representation from members of the Stolen Generations.

3.4.2 Responsibilities of the inaugural Board

At the Foundation's inaugural annual general meeting, formal responsibility for the Foundation must pass from the interim Board to the inaugural Board. Inaugural Board members should be part-time and meet quarterly, and should be responsible for establishing the Foundation's financial and accommodation arrangements and engaging an administrative staff comprising five full-time employees: a Chief Executive Officer, a finance officer, a communications officer, a research officer and an office manager.

The Board should also seek membership and develop a business plan and a code of conduct for all Foundation employees that takes into account Aboriginal and Torres Strait Islander values and the eight principles of public life developed by the United Kingdom Committee on Standards in Public Life and adapted by the Steering Committee for the Creation of a New National Representative Body (2009) at *Appendix F*.

The inaugural Board should also appoint four community advisory teams: the first open to non-Indigenous people, supporters and technical advisors; the second to members of the Stolen Generations; the third to Elders; and the fourth to Aboriginal and Torres Strait Islander youth. Members should serve in a voluntary capacity and provide advice to the Foundation as required.

The inaugural Board should allocate the Foundation's funding in the following way: 30 per cent to grant funding for grassroots healing initiatives; 40 per cent to health promotion and public education activities; 20 per cent to research and evaluation; and 10 per cent to administration.

Funding priority should be given to strength-based healing initiatives that are run by Aboriginal and Torres Strait Islander people and deliver holistic and culturally-appropriate capacity development, cultural renewal, health promotion and trauma recovery services, as suggested in section 1.2.3. The Foundation should not provide capital funding in its first four years due to its limited resources.

The Foundation's first grant process should begin as soon as possible in the first quarter of 2010 and should be a mix of mechanisms, including submissions, open tenders and direct selection, but each should ensure quality and value for money.

Recommendation six

That the Aboriginal and Torres Strait Islander Healing Foundation Development Team incorporate the Foundation as soon as possible and form an interim Board, made up of no more than four members from that Team, with responsibility for establishing the Foundation, including seeking specialist advice, drafting establishment documents and preparing for its inaugural annual general meeting in December 2009.

Recommendation seven

That an independent selection panel, made up of no more than six well-respected Aboriginal and Torres Strait Islander community members, be established with the responsibility for selecting the nine-member inaugural Board.

Recommendation eight

That the selection panel carry out an open, national and merit-based selection process to appoint the inaugural Board, including a Chair and Deputy Chair, by 1 December 2009.

Recommendation nine

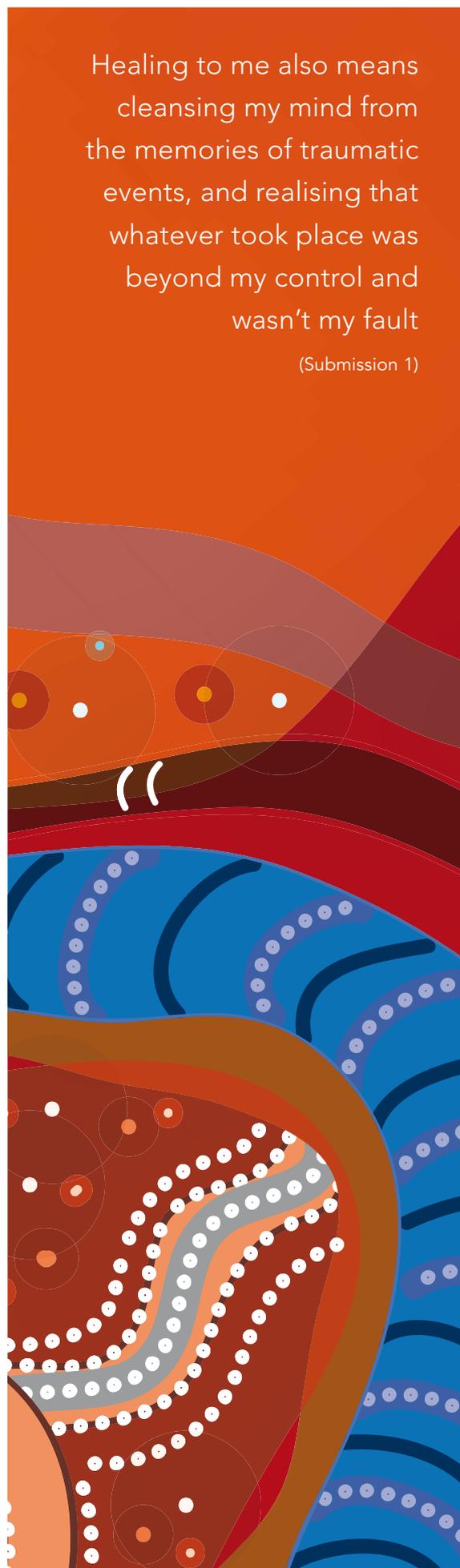
That the selection panel inform the Minister for Families, Housing, Community Services and Indigenous Affairs of the outcome of the selection process before appointing the successful candidates.

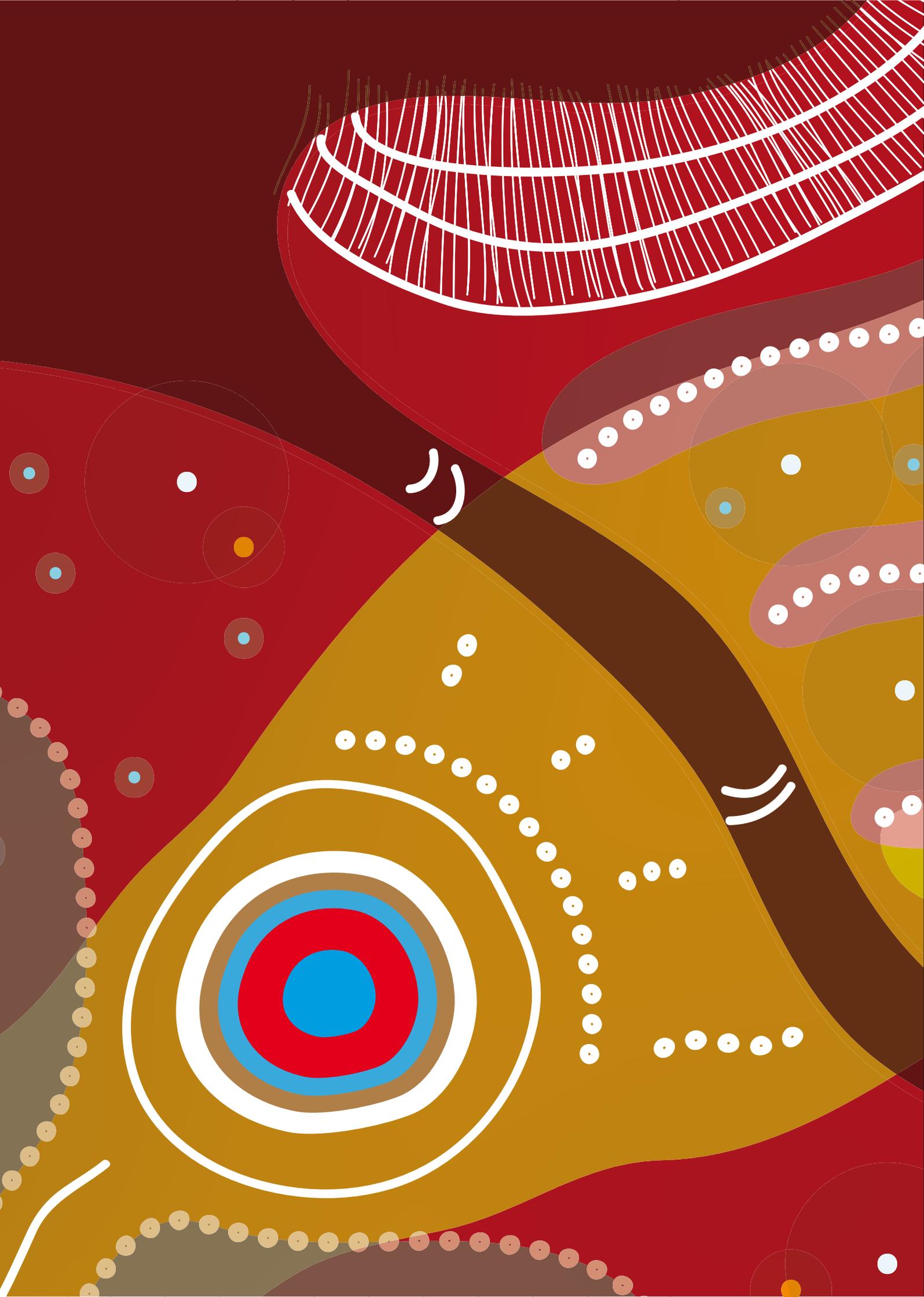
Recommendation ten

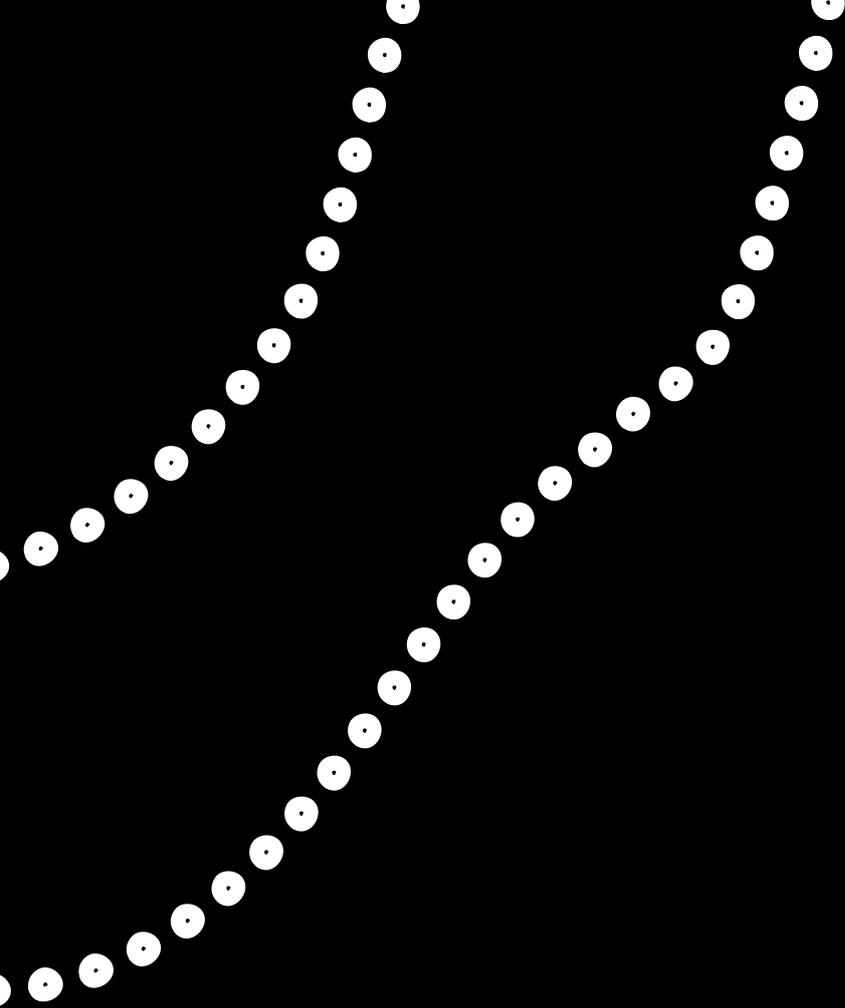
That formal responsibility for the Foundation pass from the interim Board to the inaugural Board at the Foundation's inaugural annual general meeting in December 2009.

Healing to me also means
cleansing my mind from
the memories of traumatic
events, and realising that
whatever took place was
beyond my control and
wasn't my fault

(Submission 1)







APPENDICES

Let's walk together united as one on this healing journey

David Cole, 'Healing is a movement'

APPENDIX A: HEALING IS A MOVEMENT

This journey is a movement;

Movements can only happen in unison, standing together,
strong and united;

The wisdom and culture of our ancestors has allowed for
us to be here today;

The strength, courage and resilience of our Elders have
ensured the war trauma and genocide has not broken our
will or our spirit;

Our brothers and sisters struggle each day to find their
place in this imposed artificial world;

Our children cry out for they are lost, angry and confused,
unaware of where this pain comes from and why they
must feel it;

The Warrior has been attacked and forgotten, left to suffer
in the turmoil he has been oppressed into;

The Mother carries the burden of caring for the children,
absorbing the pain of the Warrior while she too tries to
understand her pain;

If we listen to our spirit, our ancestors will guide us;

If we open our hearts and free our pain we will see our
future more clearly;

It is our journey, but all can walk with us because we all
own the now and the future belongs to our actions of today;

This land is our creator, the LORE is our way, disrupted it
may be, but far from lost;

The wisdom of our existence held in the hands of our
traditional peoples;

The stolen children given the tools of the oppressor we
must use them;

Together we must unite to remember the past and walk to
the future;

We have been handed this role as we lay the pathway for
our children;

Far too often poisons become the only escape of our pain,
followed closely by death;

Warriors have walked before us, we walk now to build
Warriors for tomorrow;

I remember our ancestors;

I thank our Elders;

I walk for our children;

We must not fear failure, it is the failure not to act that we
must fear;

Our pain strengthens our spirit, our tears water the roots
of our strength;

Let's walk strong;

Let's walk proud;

Let's walk together united as one on this healing journey;

For this is the movement.

David Cole, 4 June 2009

APPENDIX B: DISCUSSION QUESTIONS

What is healing to you?

What will help individuals and communities heal?

What good healing programs and services do you know about in your communities?

Do you support the establishment of an Aboriginal and Torres Strait Islander Healing Foundation?

What role do you think a Foundation should have?

Should the proposed Foundation be independent of government?

What sort of reporting role should the Foundation have?

What skills should the members of the Board of the Foundation have?

How should membership of the Board be decided?

Which focus groups should be supported by the Foundation?

How could the Foundation become self-sustaining?

How could the Foundation create sustainable healing initiatives within the community?

APPENDIX C: WORKSHOP TIMETABLE

Date	Location
25–26 May 2009	Broome, Western Australia
27–28 May 2009	Perth, Western Australia
1–2 June 2009	Darwin, Northern Territory
3–4 June 2009	Alice Springs, Northern Territory
11–12 June 2009	Brisbane, Queensland
22– 23 June 2009	Thursday Island, Torres Strait Islands
24–25 June 2009	Townsville, Queensland
26 June 2009	Townsville, Queensland
29–30 June 2009	Adelaide, South Australia
1 July 2009	Adelaide, South Australia
14–15 July 2009	Melbourne, Victoria
16–17 July 2009	Hobart, Tasmania
20–21 July 2009	Sydney, New South Wales
22–23 July 2009	Dubbo, New South Wales
27–28 July 2009	Canberra, Australian Capital Territory
18 August 2009	Broome, Western Australia
19 August 2009	Perth, Western Australia

APPENDIX D: LIST OF SUBMISSIONS

Of the 48 people and organisations that provided submissions to the Aboriginal and Torres Strait Islander Healing Foundation Development Team, the following 24 agreed to be identified:

Australians for Native Title and Reconciliation Queensland

The Benevolent Society

Susan Berry

Mark Bin Bakar, Chairperson and Rosie Sahanna, Coordinator,
Kimberley Stolen Generations Aboriginal Corporation

Monique and Graham Bond

John Burke, Geelong One Fire Reconciliation Group

Central Australian Stolen Generations and Families Aboriginal Corporation

Laura Elkin, Secretary, Bringing Them Home Committee Western Australia

Ray Gates

Dr Sue Gordon, Chairperson and Director, Sister Kate's Children 1934 to 1953

Echoes

Frank Hytten, Executive Officer, Secretariat of National Aboriginal and Islander Child Care

Sandra Kirkwood, Director, Music Health Australia

Dr Cat Kutay, School of Computer Science and Engineering, University of New South Wales

Many Tribes, One Mob, Queensland

Dr Brian McCoy, National Health and Medical Research Council Postdoctoral Fellow,
Aboriginal and Torres Strait Islander Health, Australian Research Centre in Sex,
Health and Society, La Trobe University

New South Wales Link-Up

Northern Territory Stolen Generations Aboriginal Corporation

South Western Sydney Stolen Generations Support Group

Stolen Generations Alliance

Jane Vadiveloo

Victorian Aboriginal Child Care Agency and Link Up Victoria

Christine Walters

Yintjuru Margaret Anjule (Bumblebee) Napurrula and Ruby Darkie Nangala, Co-Chairs and
Dr Zohl de Ishtar, Coordinator, Kapululangu Aboriginal Women's Association

APPENDIX E: WHAT GOOD HEALING PROGRAMS AND SERVICES DO YOU KNOW ABOUT IN YOUR COMMUNITIES?

The following is a selection of the services suggested by workshop attendees and in written submissions in response to the above question. Please note inclusion in this list does not mean the Aboriginal and Torres Strait Islander Healing Foundation Development Team necessarily endorses the service.

Australian Capital Territory

Ngunnawal Community Healing Farm
Winnunga Nimmityjah Aboriginal Health Services

National

Australian Government Indigenous Leadership Program
Australians for Native Title and Reconciliation
Bringing Them Home Counsellors
Community patrols
Family Wellbeing program
Lifeline
Link-Up services
Marumali program
Men's Sheds
Midnight Basketball
National Aboriginal and Islander Day Observance Committee
National Indigenous Basketball Competition
National Sorry Day Committee, Journey of Healing Tour
Red Dust Healing project
Relationships Australia
Stolen Generation Alliance
Triple P Positive Parenting Program

New South Wales

Aboriginal Women's Healing House, Picton
Indigenous Mentoring Experience, state-wide
Babana Aboriginal Men's Group, Redfern
Biala Services, Charlestown
Gamarada, Redfern
Gnibi College of Indigenous Australian Peoples,
Southern Cross University, Lismore

Mudgin-Gal, Chippendale
NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors, state-wide
Tjanara Goreng Goreng, Byron Bay

Northern Territory

Balunu Foundation, Darwin
Dilthan Yolngunha, Gulkula
Garden Point Association, Darwin
Ipurla Outstation, Alice Springs
Spiritual Healing Centre, Santa Teresa
Warlukurlangu art centre, Yuendumu

Queensland

Aboriginal and Islander Community Health Service, Brisbane
Alternative to Aggression prison program, Cairns
Black Ink Press, Condon
Gallang Place Aboriginal and Torres Strait Islander Counselling Service, West End
Goori House Addiction Treatment Centre, Cleveland
Gurriny Yealamucka Health Services, Yarrabah
Indigenous Catholic Council, Townsville
Indigenous Schooling Support Unit, Cairns
Kambu Medical Centre, Ipswich
Kurbingui Youth Development Association, Zillmere
Marcus Pedro Warrior Program
Mothers Crying Out For Help, Townsville
Murri Court, Townsville
Murrigunyah, Woodridge
Nalingu Aboriginal & Torres Strait Islanders Day Respite Centre, Zillmere
Reverend Charles Harris Diversionary Centre, Townsville
Sisters Inside, South Brisbane
Townsville Aboriginal and Islander Health Service
Townsville Aboriginal and Islander Media Association
Townsville Community Justice Group
Townsville Cultural Centre
Townsville Indigenous Human Rights Group
Wuchopperen Health Service, Cairns

South Australia

EarthSong Aboriginal Healing Pathways Foundation, Adelaide
Nunkuwarrin Yunti, Adelaide
Sacred Site Within Healing Centre, Port Adelaide

Tasmania

Colony 47, Hobart
Tasmanian Aboriginal Centre, Hobart

Torres Strait Islands

Danalaig Niai-Idid 'Our life, Our Way to Live Longer' Building
Healthy Communities project
Torres Strait Regional Healing Service

Victoria

Maya Healing Service, Thornbury
Meerindoo Youth Service, Bairnsdale
Mungabareena Aboriginal Corporation, Healing Spirit
Program, Wodonga
Rumbalara Football and Netball Club, Shepparton
South Eastern Centre Against Sexual Assault, East Bentleigh
Stolen Generations Victoria, Preston
UnitingCare Moreland Hall drug and alcohol service, Moreland
Victorian Aboriginal Child Care Agency, East Brunswick
Victorian Aboriginal Health Service, Fitzroy
Western Suburbs Indigenous Gathering Place, Maribyrnong

Western Australia

Aboriginal Early Years Support Service, Goldfields
Aboriginal Grandparents and Family Support, Perth
Derbarl Yerrigan Health Service, East Perth
Jacaranda Community Centre, Belmont
Marr Mooditj Aboriginal Health Training College, Waterford
Western Australian Government Youth Development Holiday
Program, state-wide
Yorgum, East Perth

APPENDIX F: THE EIGHT PRINCIPLES OF PUBLIC LIFE

Selflessness

Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.

Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.

Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

Openness

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

Leadership

Holders of public office should promote and support these principles by leadership and example.

Behaviour

Holders of public office must exhibit at all times exemplary levels of personal and corporate behaviour.

LIST OF ABBREVIATIONS

ABS	Australian Bureau of Statistics
AHF	Aboriginal Healing Foundation, Canada
AHRC	Australian Human Rights Commission
AIHW	Australian Institute of Health and Welfare
CAC Act	<i>Commonwealth Authorities and Companies Act 1997</i>
COAG	Council of Australian Governments
Corporations Act	<i>Corporations Act 2001 (Cwlth)</i>
Cwlth	Commonwealth
FaHCSIA	Department of Families, Housing, Community Services and Indigenous Affairs
FMA Act	<i>Financial Management and Accountability Act 1997 (Cwlth)</i>
GST	Goods and Services Tax
eds	editors
edn	edition
et al.	and others (Latin <i>et alii</i>)
no.	number
p., pp.	page(s)
vol.	volume

LIST OF REFERENCES

Aboriginal and Torres Strait Islander Women's Task Force on Violence 2000, *The Aboriginal and Torres Strait Islander Women's Task Force on Violence report* (B. Robertson, Chairperson), 2nd edn, Department of Aboriginal and Torres Strait Islander Policy and Development, Brisbane.

Aboriginal Corrections Policy Unit 1997, 'The four circles of Hollow Water', *Aboriginal peoples collection*, Public Works and Government Services Canada, no.15, Ministry of the Solicitor General, Ottawa.

Aboriginal Healing Foundation 2006, *Final report of the Aboriginal Healing Foundation*, vol. 2, AHF, Ottawa.

Atkinson, J. 2002, *Trauma trails, recreating song lines: The transgenerational effects of trauma in Indigenous Australia*, Spinifex Press, North Melbourne.

Australian Bureau of Statistics & Australian Institute of Health and Welfare 2008, *The health and welfare of Australia's Aboriginal and Torres Strait Islander peoples*, ABS & AIHW, Canberra.

Australia, House of Representatives 2008, *Debates*, vol. 1.

Australian Human Rights Commission 2008, *Social justice report* (T. Calma, Aboriginal and Torres Strait Islander Social Justice Commissioner), AHRC, Sydney.

Cornell, S. 2006, 'Indigenous peoples, poverty and self-determination in Australia, New Zealand, Canada and the United States', *Joint occasional papers on native affairs*, no. 200602, Native Nations Institute for Leadership, Management, and Policy & Harvard Project on American Indian Economic Development, Tucson.

Albany Consulting Group 2004, *Council of Australian Governments Indigenous coordination trials evaluation strategy: Final report*, COAG, Canberra.

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

Evans-Campbell, T. & Walters, K. 2006, 'Indigenous practice competencies in child welfare practice: A decolonization framework to address family violence, substance abuse, and historical trauma among First Nations peoples', in *Intersecting child welfare, substance abuse, and family violence: Culturally competent approaches*, eds R. Fong, R. McRoy, & C. Ortiz Hendricks, Council on Social Work Education Press, Washington.

Inquiry into Response by Government Agencies to Complaints of Family Violence and Child Abuse in Aboriginal Communities 2002, *Putting the picture together* (S. Gordon, Chairperson), Department of Premier and Cabinet, Perth.

Gordon report. See Inquiry into Response by Government Agencies to Complaints of Family Violence and Child Abuse in Aboriginal Communities 2002.

Hodgson, M. 1996, *Impact of residential schools and other root causes of poor mental health (suicide, family violence, alcohol and drug abuse)*, Nechi Training, Research and Health Promotions Institute, Edmonton.

Human Rights and Equal Opportunity Commission 2007, *Social justice report* (T. Calma, Aboriginal and Torres Strait Islander Social Justice Commissioner), Human Rights and Equal Opportunity Commission (AHRC), Sydney.

Jiwa, A., Kelly, L. & Pierre-Hansen, N. 2008, 'Healing the community to heal the individual: Literature review of aboriginal community-based alcohol and substance abuse programs', *Canadian family physician*, vol. 54, no. 7, pp. 1000–1000.e7.

van der Kolk, B., Alexander, C. & Weisaeth, L. (eds) 1996, *Traumatic stress: The effects of overwhelming experience on mind, body, and society*, Guildford Press, New York.

Lane, P., Aboriginal Corrections Policy Unit, Mapping the Healing Experience of Canadian Aboriginal Communities Project, Aboriginal Healing Foundation 2002, *Mapping the healing journey: The final report of a First Nation research project on healing in Canadian Aboriginal communities*, vol. 2, Ministry of the Solicitor General, Ottawa.

Little children are sacred report. See Northern Territory Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse 2007.

Middelton-Moz, J. & Dwinell, L. 1986, *After the tears: Reclaiming the personal losses of childhood*, Health Communications, Deerfield Beach.

National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their Families 1997, *Bringing them home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their Families* (R. Wilson, Commissioner), Human Rights and Equal Opportunities Commission, Sydney.

Northern Territory Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse 2007, *Ampe akelyernemane meke mekarle 'Little children are sacred' report* (R. Wild and P. Anderson, Co-Chairs), Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse, Darwin.

Phillips, G. 2003, *Addictions and healing in Aboriginal country*. Aboriginal Studies Press.

Phillips, G. 2007, 'Healing and public policy', in Altman, J. and Hinkson, M. (eds), *Coercive reconciliation: Stabilise, normalise, exit Aboriginal Australia*, Arena Publications, North Carlton.

Phillips, G. & Bamblett, M. 2009, *A healing foundation discussion paper*, Healing Forum Working Group, Canberra.

Prime Minister, the Hon Kevin Rudd MP 2008. See Australia, House of Representatives 2008.

Royal Commission on Aboriginal Peoples 1996, *Report of the Royal Commission on Aboriginal Peoples* (R. Dussault & G. Erasmus, Co-Chairmen), Royal Commission on Aboriginal Peoples, Ottawa.

Senior, K. & Chenhall, R. 2008, Individual quality of life among at risk Indigenous youth, paper presented to the 13th National Health Outcomes Conference, Canberra, 29 Apr.–1 May.

Steering Committee for the Creation of a New National Representative Body 2009, *Our future in our hands: Creating a sustainable National Representative Body for Aboriginal and Torres Strait Islander peoples*, AHRC, 2009.

Swan, P. & Raphael, B. 1995, *Ways forward: National Aboriginal and Torres Strait Islander mental health policy national consultancy report*, Australian Government Publishing Service, Canberra.

Timpson, J., McKay, S., Kakegamic, S., Roundhead, D., Cohen, C. & Matewapit, G. 1988, 'Depression in a Native Canadian in Northwestern Ontario: Sadness, grief or spiritual illness?' *Canada's mental health*, Jun.–Sep., 5–8.

Victorian Indigenous Family Violence Taskforce 2003, *Final report* (D. Yarram, Chairperson), Department for Victorian Communities, Melbourne.

Wesley-Esqimeaux, C. & Smolewski, M. 2004, 'Historic trauma and Aboriginal healing', *Aboriginal Healing Foundation research series*, AHF, Ottawa.

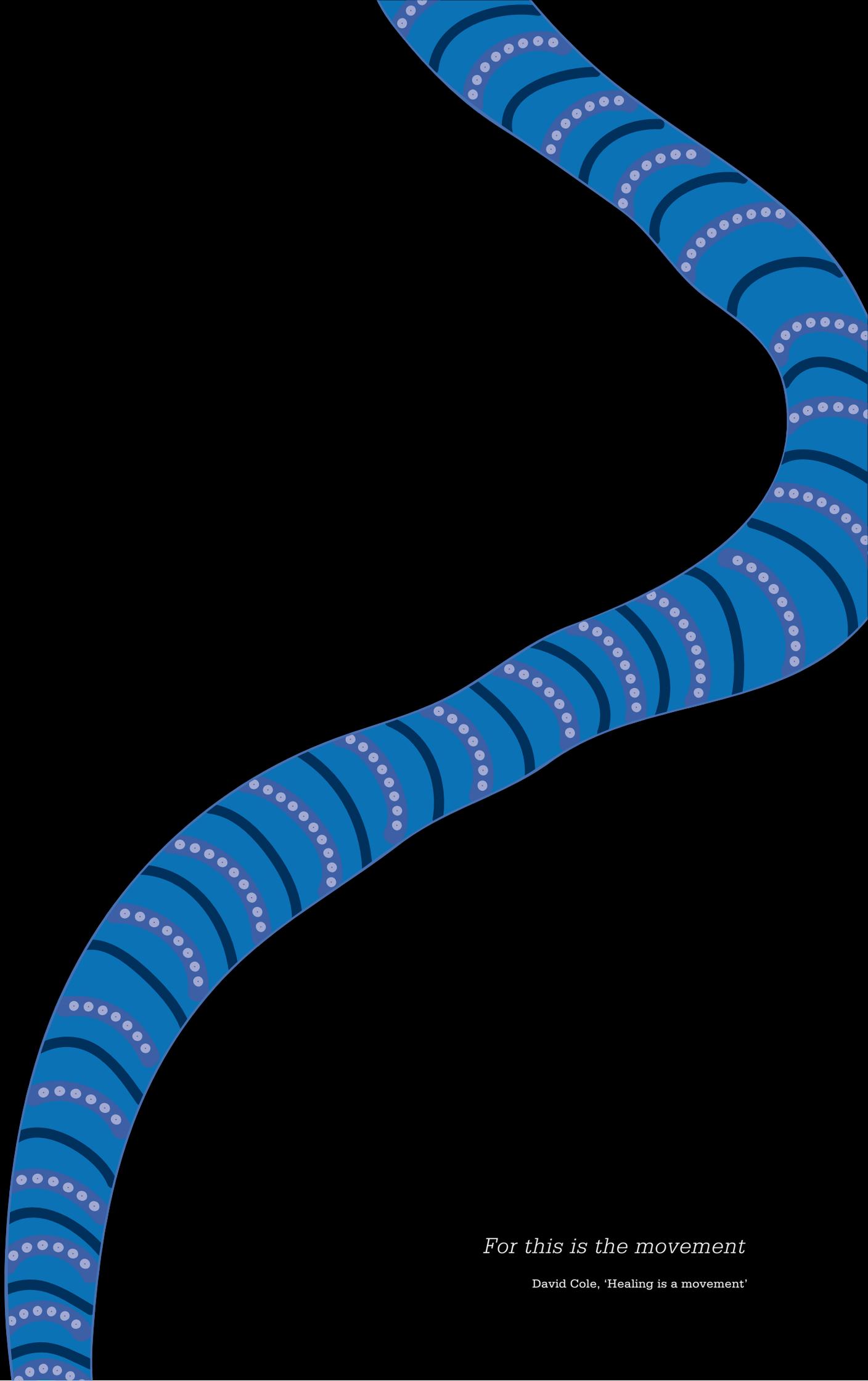
Wilson, J. & Raphael, B. (eds) 1993, *International handbook of traumatic stress syndromes*, Plenum Press, New York.

Zubrick, S., Silburn, S., Lawrence, D., Mitrou, F., Blair, E., Griffin, J., Milroy, H., De Maio, J., Cox, A. & Li, J. 2005, *The Western Australian Aboriginal Child Health Survey: The social and emotional wellbeing of Aboriginal children and young people*, Curtin University of Technology & Telethon Institute for Child Health Research, Perth.

[Healing is] Trying to put a
broken emu egg together,
one piece at a time

(Canberra workshop)





For this is the movement

David Cole, 'Healing is a movement'