



Health
Mid North Coast
Local Health District



2014 NSW ABORIGINAL MENTAL HEALTH & WELLBEING WORKFORCE FORUM

Valuing the
Aboriginal Workforce

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Speaker Profiles**

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Program

5 and 6 March, 2014
Opal Cove Resort, Coffs Harbour

Valuing the Aboriginal Workforce

**2014 NSW
ABORIGINAL
MENTAL HEALTH
& WELLBEING
WORKFORCE FORUM**



Welcome Message

The Planning Committee welcomes you to the NSW Aboriginal Mental Health and Wellbeing Workforce Forum at the Opal Cove Resort, Coffs Harbour. We would like to acknowledge the traditional owners the Gumbaynggirr people on whose land we are meeting.

This year the forum is being hosted by the Mid North Coast Local Health District (funded by the NSW Ministry of Health), in partnership with the Aboriginal Health and Medical Research Council of NSW (AH&MRC).

The Aboriginal Health & Medical Research Council of NSW is hosting a professional development day for the social and emotional wellbeing workforce immediately prior to the forum. Staff from the AH&MRC have also been actively involved in the planning of this year's forum.

The Mid North Coast Local Health District covers a geographic area from Red Rock near Woolgoolga in the North to Passionfruit Creek in the south, and extends west to the Great Dividing Range where it shares its border with the Hunter New England Local Health District. It includes the Local Government Areas of Bellingen, Coffs Harbour, Nambucca, Kempsey and Port Macquarie Hastings.

The theme for the 2014 forum is "Valuing the Aboriginal Workforce."

The theme is in recognition of the valuable contribution of the Aboriginal workforce in making a difference to the health of their communities. Whilst the forum is an avenue to showcase the wonderful examples of innovative practice being undertaken across our communities, it also provides a venue to discuss many of the important issues relating to the training, supervision, mentoring, recruitment and retention of our Aboriginal workforce. This year we have organised "yarning time" where groups of people with similar jobs or interests can get together informally to yarn.

We hope you enjoy the forum.

Planning Committee Members

State-wide Committee

Lucy Abbott
Ann Baker
Tom Brideson
Darcy Budden
Dennis Churchill
Christine Flynn
Barry Hunter
Len Kanowski
Ivy Peters
Rebekah Raynaud
Amanda Ryan

Local Committee

Ann Baker
Darcy Budden
Barry Hunter
Ivy Peters
Rebekah Raynaud
Alana Rossmann
Yoorana Whitby
Richard Widders
Donna Widdison

The Hon Kevin Humphries MP

Minister for Mental Health
Minister for Healthy Lifestyles
Minister for Western NSW
Member for Barwon

Kevin Humphries was born and raised in Tamworth. After a career in education, the cotton industry and the aged-care and retirement sector he was elected as the Member for Barwon in 2007. In 2009 he was appointed as Shadow Minister for Mental Health, Sports & Recreation, Healthy Lifestyles, Aboriginal Affairs and Western NSW. In March 2011 he was re-elected as the Member for Barwon and was appointed Minister for Mental Health, Healthy Lifestyles and Western NSW in the O'Farrell Stoner Government.

Kevin lives with his wife Linda in Moree where they raised their three children.



Pete Carter

Pete Carter is Acting Director, Mental Health and Drug and Alcohol Program, in the Ministry of Health, North Sydney, a position he has held since August 2013.

Born in New Zealand, Pete travelled widely then returned to New Zealand and spent almost 25 years working in the health and social services sector.

Pete has held General Manager roles with three community based health providers.

Pete's public service experience has included service provision and management roles in hospital settings, but most of his career has been with central Government agencies: the Ministry of Health and its associated agencies (the Regional Health Authorities and the Health Funding Authority); the Ministry of Social Development; and Housing New Zealand.

Well over half of Pete's career has been spent in mental health and drug and alcohol service provision and in the planning for, and contracting and funding for, these services. The most inspiring role he held was as National Strategic Planning Manager for the Health Funding Authority at the time when the New Zealand Mental Health Commission and the Ministry of Health were collaborating on the implementation of New Zealand's First National Mental Health Plan.

His other national roles with the Ministry of Health and the Ministry of Social Development focussed on the disability and aged care sectors, both of which have considerable overlap with mental health service provision.

Pete holds a Bachelor of Social Sciences degree; a Master of Business Administration degree; and is close to finishing a Master of Health Management degree.



Dr Robyn Shields

Robyn Shields comes from the Bundjalung Nation of northern NSW. She spent most of her younger years travelling between her family homes in south east Queensland and on the border towns of northern NSW. Her first introduction to mental illness was growing up in the shadow of the Sandy Gallop Asylum in Ipswich, south east Queensland.

It was not until later, after pursuing a career in mental health, firstly as a nurse, did she realise the harsh realities, isolation, the long term consequences and impact that mental illness and mental distress has on individuals, families and communities. After working in one of the oldest mental health hospitals Robyn had an opportunity and the privilege to work in and alongside her own people, knowing that Aboriginal people are recognised largely as the most disadvantaged group living in this country. Her experience has taken her beyond the fences of the large institutions onto the streets, where people with mental illness are homeless and alienated in society either by falling through the system or simply by not being able to access services. She has also found herself working in the prison system where there are large populations of Aboriginal men and women severely disadvantaged and traumatised by life experiences. Robyn has worked in close partnership with Aboriginal community controlled health services in the past and has helped develop and shape mental health services working within an urban population. She is now continuing her career in health and is a registrar in psychiatry. At the end of her training Robyn intends on working in and with disadvantaged groups.

- NSW Deputy Mental Health Commissioner,
- Member, NSW Mental Health Review Tribunal Member,
- Aboriginal Health & Medical Research Council of NSW Ethics Committee,
- Order of Australia (AM division) for development of Aboriginal mental health services, 2004



Auntie Lorraine Peeters

Auntie Lorraine Peeters has devoted many years of her life to supporting Aboriginal people heal from past and present traumas and helping others understand the unique experiences of Stolen Generations.

During childhood, like many other Aboriginal and Torres Strait Islander children, Auntie Lorraine was forcibly removed and separated from her home and family at the age of four and placed in an institution. Through the healing journey necessitated by this traumatic event in her childhood, and her involvement with the healing of others, Auntie Lorraine developed a model of healing. In response to great demand and through collaboration with others, she went on to develop the Marumali Program that is an accredited training program that aims to increase the quality of support available to Stolen Generations. She has been facilitating the program workshops since 2000 and more than 2200 participants have completed the program with overwhelmingly positive results. Participants are empowered by the workshop and its model of healing.

Auntie Lorraine played an active advocacy role in the lead-up to the National Apology. She was NSW Senior Australian of the Year in 2009, and in 2011 she was co-winner of the World Council for Psychotherapy – Sigmund Freud Award and in 2012 won the Deadly Award for Lifetime Contribution Achievement Award for Healing the Stolen Generations. On the day of the National Apology, Auntie Lorraine presented Kevin Rudd with the gift of a glass Coolamon, traditionally a vessel for carrying children, containing a message thanking the Parliament for the Apology and a symbol of hope that Indigenous people placed in a new relationship.



WEDNESDAY 5 March 2014

8:00am	Registration in the Ocean View Foyer
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SESSION ONE

Ballroom	
M.C.	Lynn Lelean
8:50am	Forum Preview Barry Hunter, Forum Convenor
9:00am	Welcome to Country Mr Barry Hoskins
9:10am	Us Mob Dance Group
9:25am	Welcome to Mid North Coast Local Health District Warren Grimshaw AM, Chair MNCLHD Governing Board
9:35am	Opening Address The Hon Kevin Humphries MP, Minister for Mental Health, Minister for Healthy Lifestyles, Minister for Western NSW
10:20	Morning Tea

SESSION TWO

Ballroom	
M.C.	Lynn Lelean
11:10	Keynote Address Auntie Lorraine Peeters, Managing Director Marumali Program
11:55am	Keynote Address Dr Robyn Shields, NSW Deputy Mental Health Commissioner
12:20pm	<i>Getting with the program! Skilling up the Aboriginal workforce in the use of e-wellbeing apps and online technologies.</i> Liz Lewis, Assoc Prof James Bennett-Levy
1:10pm	Lunch

SESSION THREE

	Osprey Room	Currawong Room	Shearwater Room
Chair	Donna Stanley	Kristie Harrison	Gay Foster
2:00pm	“The fall and rise of clinical supervision” Gina O’Neill, Ann Baker	AMIHS (Aboriginal Maternal Infant Health Service) how MH affects mums and bubs Kristen Ella, Eda Devoti	Pathways to psychiatry for Aboriginal and Torres Strait Islander people Nigel Beetson
2:30pm	NSW Ministry of Health Aboriginal Recruitment and Retention (Multimedia) Resource Charles Davison, Wendy Bryan-Clothier, Justin Noel	An insight to the role of an Aboriginal Alcohol Other drug Worker Nathan Deaves, Wade Longbottom	Waminda’s Dead, or deadly Program Willow Firth, Hayley Longbottom
3:00pm		Kempsey Healthy Eating Activities and Lifestyles for Indigenous Groups Marilyn Dean, Jessica Morris	The Positives and Negatives of Psychological Resilience Marsat Ketchell
3:30pm	Afternoon Tea		

SESSION FOUR

	Osprey Room	Currawong Room	Shearwater Room
Chair	Darcy Budden	Bron Rose	Gina O’Neill
3:55pm	MLHD MHDA Aboriginal Mental Health Business Plan Laura Ross	“Are they ready for the workforce” Faye McMillan, Stephanie Perrot	Update on the NSW Aboriginal grief and loss training project Anthony Hillin
4:25pm	Aboriginal Psychiatry Mentoring Program Donna Stanley	The NSW Aboriginal Mental Health Worker Training Program Evaluation –Findings and Future Directions Tom Brideson, Christine Flynn	Usin’ it or Losin’ it! Colin Locke
4:50pm	NEAMI National Aboriginal Linkages program Lee Willis	Learning from each other and growing together Cindi McCormick	Key Learnings in retaining an Aboriginal Workforce in the Community Managed Mental Health Sector Simone Montgomery, Craig Parsons
5:20pm	Close Day 1		

Dinner at 7pm on the Ocean View Terrace

THURSDAY 6 March 2014

8.00am – 8.45am Yarning Time: network meetings (see separate flyer)

SESSION FIVE

	Osprey Room	Currawong Room	Shearwater Room	Opal Room
Chair	Ivy Peters	Alana Rossman	Laura Ross	Anthony Hillin
9:00am	<i>Traditional Circles in Practice</i> Vanessa Edwidge, Bahadur Bryson, Noleen Hoskins	<i>Supporting the Aboriginal workforce to address tobacco in their communities – showcasing the Aboriginal Resistance Tool Kit</i> Jasmine Sarin	<i>A Model for the Aboriginal Mental Health and Drug & Alcohol Workforce</i> Gay Foster, Tammy Sampson	
9:30am	<i>The Aboriginal Drug & Alcohol Network (ADAN) of NSW</i> Kristie Harrison, Rodney Turner	<i>Working through incarceration with an holistic approach to reintegration for the emotional wellbeing of families</i> Lloyd Gibbs	<i>Research...Pfft! A dirty word? Or an avenue to privilege and action Aboriginal voices</i> Chontel Gibson	<i>Aboriginal grief and loss training program: consultation groups exploring learning areas, staff support and resources</i> Anthony Hillin, Megan Wynne-Jones
10:00am		<i>Healing our Way: A Kinchela Boys Home Healing Centre</i> Manuel Ebsworth, Michael Welsh, Jason Pitt, Tiffany McComsey	<i>Warangesda Cultural Camp</i> Stephen Collins	
10:30	Morning Tea			

SESSION SIX

Ballroom	
Chair	Faye McMillan
11:00am	<i>Childhood Separation & Trauma: The Stolen Generation Effect on Kids' Brains and Adult Outcomes</i> Professor Tony Broe
11:30am	<i>Valuing Each Other & Working Together: The importance of Aboriginal Health Workers working with mainstream services to provide culturally safe service delivery to clients at the Awabakal Aboriginal Primary Healthcare Centre. What might get in the way and what helps.</i> Toni Manton, Lawrence Dadd, Stacey McMullen, Cyriac Matthew
12:00pm	<i>Supporting the Workforce</i> Lucy Abbott, Terry Smith
12:30	Lunch

SESSION SEVEN

Ballroom	
Chair	Lynn Lelean
1:45pm	Forum Overview Tom Brideson, Ann Baker
2:00pm	Discussion & Questions Peter Carter, A/Director NSW Mental Health and Drug & Alcohol Office
2:20pm	Evaluation Barry Hunter
2:30pm	Aboriginal Culture Dhinawan
2:45pm	Afternoon Tea

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your health link
health information the right way



ABSTRACTS

Abbott, Lucy

Manager,
SEWB, Workforce Support Unit
Supporting and training the workforce
AH&MRC

Smith, Terry

Manager,
Aboriginal Health College
AH&MRC

Supporting the workforce

A game-show themed presentation to inform participants of the work of the NSW SEWB Workforce Support Units run by AH&MRC, South Coast AMS and the Aboriginal Health College. Along the lines of last year's Quiz Show, this will be fun and an interactive way to inform delegates of the function and role of the WSU RTOs and highlight current projects that support the workforce.

Beetson, Nigel

5th Year Medical Student
University of NSW

Pathways to psychiatry for Aboriginal and Torres Strait Islander people

There are approximately 180 Indigenous doctors and 260 Indigenous medical students in Australia. There are currently two Indigenous Psychiatrists in Australia and the number of Indigenous Psychiatry registrars is growing annually. The University of NSW has the highest cohort in Indigenous medical students in Australia and offers a number of support programs to support students throughout their student years.

The paper highlights the successes of these programs, and provides information to prospective students in Indigenous entry into medicine and pathways to a career in Psychiatry or General Practice. The paper also discusses barriers to medical education and specialist training opportunities in rural locations.

Brideson, Tom

State-wide Coordinator
NSW Aboriginal Mental Health Workforce Program

Flynn, Christine

Senior Policy Officer
Mental Health and Drug & Alcohol Office

The NSW Aboriginal Mental Health Worker Training Program Evaluation- Findings and Future Directions

The NSW Aboriginal Mental Health Worker Training Program commenced in 2007 and has produced almost 50 graduates.

An Evaluation, ARTD Consultants was completed in August 2013. The Program has faced many challenges over the last six years in achieving its planned outcomes, with mixed results in different areas.

The Findings in general found: the Program is highly valued by Local Health Districts (LHD) mental health services across NSW. It is also improving the capacity of LHDs; the Program is providing a unique opportunity for Aboriginal people to gain valuable skills and a tertiary qualification to work as mental health professionals.

Six recommendations were made to strengthen and improve the Program.

- Working party to review and strengthen the Program
- Review Program direction, governance and accountability
- New policy directive
- Strengthen program implementation
- Communication between mental health services and the University
- Program management

An Implementation Working Group (IWG) has been established to provide advice in respect to the findings and recommendations of the evaluation report. The first of six meetings of the IWG took place in November 2013. This presentation will discuss the evaluation and forward plans that will assist to add value and strengthen this important area of workforce need.

Associate Professor Broe, Tony

Head of Aboriginal Health and Aging Group
 Neuroscience Research Australia & Professor of Geriatric Medicine
 University of NSW

Aboriginal Australians often face profound socioeconomic disadvantage, trauma and stress compared to the non-indigenous population, with associated differences in health and wellbeing. The Koori Growing Old Well Study (KGOWS) aimed to find how Aboriginal health and social factors in childhood, including the stolen generation, affected Aboriginal ageing, lifespan and dementia rates in later life. The older Aboriginal population is increasing in number and is at a higher risk of developing dementia. The KGOWS and KICA Studies have found the prevalence of dementia in Aboriginal Australians 60+ years to be three times higher than non-Indigenous, with younger onset.

What happens in childhood grows the mind & brain to deal with adult life & ageing. We believe positive child experiences and good parenting grow minds & brains effectively for adult life & ageing. Negative experiences such as separation from parents and Stolen Generation Effect, delay brain growth or grow brains in the wrong way to deal with adult life; to grow old well.

This paper describes some outcomes of KGOWS and discusses how separation from family can have devastating effects on health in adult life; on social and emotional wellbeing and lead to higher dementia rates in later life.

Collins, Stephen

BTH Worker
 Griffith Aboriginal Medical Service

Warangesda Cultural Camp

To show a short DVD of the Griffith Aboriginal Medical Service's, Warangesda Cultural Camp and discuss afterwards.

The camp provides opportunity for participants to share and learn more about their personal, family and cultural identity, which has been acknowledged as a contributing factor to Indigenous social and emotional wellbeing including physical, spiritual and mental health. It also provides opportunity for family reunions and reunions back to country.

The DVD highlights the significance of some Aboriginal sites within Griffith BTH outreach area and importance of coming together and learning from our elders and sharing knowledge of family connections. It also shows the importance of coming together and discussing avenues to maintaining, conserving and preserving these cultural heritage sites to share with our future generations.

Davison, Charles

Manager Aboriginal Workforce Unit
 NSW Ministry of Health

Bryan-Clothier, Wendy

Senior Project Officer
 NSW Ministry of Health

Noel, Justin

Principal Consultant
 Origin Communications Australia

NSW Ministry of Health Aboriginal Workforce Recruitment and Retention (Multimedia) Resource

The NSW Ministry of Health (NSW Health) is committed to culturally sensitive and effective recruitment and retention practices for Aboriginal people within its workforce. A key part of this commitment is ensuring that practices are consistent with NSW Health's Human Resource policies, NSW Health's *Good Health – Great Jobs Aboriginal Workforce Strategic Framework 2011-2105* and *Respecting the Difference An Aboriginal Cultural Training Framework for NSW Health*. NSW Health actively promotes Aboriginal employment prospects and opportunities while also ensuring the need of other Health organisations and Local Health districts (LHD) are met. This also forms part of the NSW Government's overall commitment to the *National Partnership Agreement on Closing the Gap in Indigenous Health Outcomes* (Closing the Gap) and *National Partnership Agreement on Indigenous Economic Participation* target of 2.6% Aboriginal employment by 2015.

In working towards this target and better supporting managers in recruiting and retaining Aboriginal staff, NSW Health intends to develop a recruitment and retentions resource which will provide clear, simple and culturally sensitive process for effective recruitment and retention of Aboriginal people with maximum flexibility. The resource will provide NSW Health managers with information about sound practices. Together with some useful tools including examples, forms and templates.

Dean, Marilyn
Aboriginal Health Education Officer
Mid North Coast Local Health District

Morris, Jessica
Aboriginal Health Promotion Officer
Mid North Coast Local Health District

Kempsey Healthy Eating Activities and Lifestyles for Indigenous Groups

The HEALInG Program was developed by Laurel Rogers, Health Promotion Officer, Northern NSW Local Health District. This program is designed to provide health education to support and enable positive lifestyles by focussing on regular physical activity and healthy food. The program consists of a physical activity component; an interactive educative session and a practical group cooking and eating activity.

The HEALInG program is delivered over eight weeks, one day/week. Each week includes an hour exercise session, an hour cooking session and 30min-1hr education/information session. Education sessions are from women's health topics, mental health (self-esteem, anxiety and simple management strategies), chronic disease and associated risk factors, respiratory diseases with a focus on smoking cessation, nutrition, Heart Foundation Walking Program, all provided by health professionals.

The program was introduced at "Tackling Aboriginal Women's Issues Kempsey" (TAWIK) workshop in September 2013 where local Aboriginal Women expressed interest in a HEALInG program. Participants established their own walking group, exercise group and social catch-ups, using knowledge gained from the program. Participants are now role models in their community and pass on their new knowledge and promote a healthy lifestyle to all ages.

Deaves, Nathan
SEWB WSU Program Coordinator
SCMSAC

Longbottom, Wade
SEWB WSU Project Officer
SCMSAC

An insight into the role of an Aboriginal Alcohol Other Drug Worker

The South Coast Medical Service Aboriginal Corporation has developed a DVD to provide new Aboriginal workers an insight into the role of Alcohol and Other Drug work through a culturally appropriate and visual learning experience. It provides advice and direction from experienced workers assisting new workers to gain a better understanding of the role and what is expected of them. It outlines the scope of the role and touches briefly on self-care, training, case management, legal and ethical obligations and the challenges a worker can experience. As an outcome, a worker will benefit from a better understanding of the expectations and responsibilities thus are able to set a stable foundation and appropriate support for themselves from the beginning of employment.

To complement this resource, there is also a second film which demonstrates a client's "Journey of Healing" and the expected support an Aboriginal Alcohol and Other Drugs worker should provide from initial client contact through the processes of Detoxification, Rehabilitation and after care support for the client. This presentation will discuss the need for the DVD and will detail its development. The presentation will include an oral presentation interspersed with selections of the DVD.

Ebsworth, Manuel
Chair, Kinchela Boys home Aboriginal Corporation

Welsh, Michael
KBH Survivor and member of the Healing Foundation
Stolen Generations Reference Group

Pitt, Jason
KBH Bringing Them Home Counsellor

McComsey, Tiffany
Strategic Development Manager, KBH

Healing our Way: A Kinchela Boys Home Healing Centre

The Kinchela Boys home Aboriginal Corporation (KBHAC), in partnership with MURU Marri Indigenous Health Unit at the University of New South Wales, is conducting an eighteen-month scoping study for a KBHAC Healing Centre. This KBHAC Healing Centre will address the long term healing needs of the KBH Men, their family members, other individuals who were forcibly removed from their families and their family members as well. It will provide its own programs and services on site. It is envisaged the KBHAC Healing Centre will pilot a working model that will develop further into a measurable approach with a focus on outcomes that assist with the healing of traumas that impact on the lives of Aboriginal Australians, which in turn could be modified and used by other Aboriginal Healing Centres across NSW and Australia.

This paper will outline the work of the scoping study, reflect on the roles and engagement of the KBH Men and their families in this study and the design of the KBHAC Healing Centre; and discuss the role the KBHAC Healing Centre will play in training KBHAC and other community members so that they can deliver healing programs both at the KBHAC Healing Centre and in local communities where the KBH Men and their families reside.

Edwidge, Vanessa
Psychologist

Bryson, Bahadur
Project Worker & Group Therapist

Hoskins, Noleen
Youth & Women's Advocate

Weave Youth & Community Services

Traditional Circles in Practice

Extensive research into traditional models of healing in group work has led to the development of two unique projects in the Redfern/Waterloo community in Sydney.

Bush Circle is an experiential, bush-therapy project for young people aged 16-28 experiencing co-existing mental health and alcohol and other drug issues. This six-week project begins with a five-day bush camp. Weekly follow-up day trips and group work facilitate integration of insights and learning. Based on a model of concentric circles of relationship with self, nature, culture, community and each other, young people return with a sense of who they are and new experiences of themselves. Bush Circle connects inner city Aboriginal young people with the Aboriginal community in the Blue Mountains.

Through funding by the Healing foundation, traditional Aboriginal women's yarning circles were initiated to address generational trauma, offending behaviours and drug and alcohol misuse. The yarning circles ran for 12 weeks. The circle utilised traditional creative arts to build strength in cultural identity and shared experiences as Aboriginal women to facilitate healing. Both of these unique projects and their relevance for working with Aboriginal people will be outlined. Together we will explore together innovative ways to use circles in practice.

Ella, Kristen
Aboriginal MH Clinician
Child & Young Peoples MH & Ngilyang

Devoti, Eda
Mental Health Social Worker
Aboriginal Maternal & Infant Health Service
Manning Mental Health Services – Taree

AMIHS (Aboriginal Maternal Infant Health Service) how MH affects mums and bubs

AMIHS is a model of maternity care aimed at improving the health outcomes for Aboriginal women and women with Aboriginal partners, to decrease maternal and perinatal morbidity and mortality. The Central Coast model included antenatal and postnatal care only with birthing and inpatient care being attended by hospital staff. The Central Coast AMIHS team is lucky enough to have a Mental Health Worker and Drug & Alcohol worker involved. Perinatal mental health research shows that women experience an increased susceptibility to social and emotional adjustment difficulties, psychological distress, anxiety and mood disorders. The issue of perinatal mental health is a major public health problem affecting not only mothers but also their infants, other children in the family, partners and communities generally. Little is known about the incidence and experience of perinatal depression by Aboriginal women and men, in particular, but what is known is that Aboriginal people do not access mental health and drug and alcohol services consistent with their level of need because of limited access to services and lack of cultural respectfulness by services.

Firth, Willow
Health & Wellbeing Coordinator

Longbottom, Hayley
Aboriginal Health Worker

Lonesborough, Angie
Dead or Deadly Program Worker

Waminda – South Coast Aboriginal Health and Welfare Corporation

Waminda's 'Dead, or deadly Program'

Aboriginal communities view health and wellbeing holistically, and health is intricately related to the social, emotional, physical, environmental, spiritual and cultural aspects embedded within the constructs of the local community. With the Aboriginal population suffering significantly higher rates of mental illness, it is our responsibility within the workforce to maintain, even improve Indigenous mental health. Waminda now employs 40 Aboriginal women with very high retention rates. The health of our staff is seen as a key priority, not only for the individuals, but for the community by role modelling. Through the organisations "Dead, or Deadly Program", staff have full access to an exercise shed with a qualified exercise instructor. There is increasing evidence to prove that exercise not only improves physical health, but mental as well. To emphasise the importance of this, Waminda's visionary CEO and Board of Management actually approve two, 30 minute exercise classes within working hours. Waminda's exercise shed is a safe, culturally appropriate space for Aboriginal women to exercise, learn about nutrition, chronic disease and provides a yarning space. This program has had a huge impact on the community -participant numbers have doubled in the last year and exercise sessions tripled. Workplace policies and procedures for an Indigenous person must comply with the Indigenous health paradigm to efficiently, and responsibly support them.

Foster, Gay
IECD NP E2 MHDAS D&A Project Manager
NSW Ministry of Health

Sampson, Tammy
Aboriginal Mental Health Trainee
Mid North Coast Local Health District

A model for the Aboriginal Mental Health and Drug & Alcohol Workforce

Investing in traineeships to build capacity of the Aboriginal Mental Health and Drug & Alcohol workforce has proven to be a valuable and effective model as reflected in a current NSW pilot initiative.

The Closing the Gap Indigenous Early Childhood Development National Partnerships Element 2, (ICED NP E2), was established to improve outcomes for Indigenous children in their early years and to contribute to Closing the Gap targets for Indigenous Australians. As part of the IECD NP E2, funding has been approved until June 2014 and allocated from the Mental Health & Drug & Alcohol Office (MHDAO), NSW Ministry of Health, to nine Local Health Districts (LHDs) to establish culturally safe prevention and early intervention mental health and drug and alcohol services, in partnership with, and co-located in, selected Aboriginal Maternal Infant Health Services (AMIHS). The MHDAS Initiative incorporates an innovative traineeship model.

This presentation by the state-wide D&A project manager, in partnership with one of the Initiative's soon to graduate Aboriginal mental health trainees will describe the components of this effective model.

Gibbs, Lloyd
Aboriginal Group Worker
Shine for Kids

Cohen, Barber
Aboriginal Group Worker
Shine for Kids

Working through incarceration with a holistic approach to reintegration for the emotional wellbeing of families.

We work with Aboriginal inmates and their families with the aim to break the inmates re-offending cycle and to reduce the intergenerational component within families of incarceration. This is achieved through a cultural and common-sense approach in group sessions. Areas covered; the effects of incarceration and the presenting issues from incarceration, the financial, emotional and physical wellbeing of the family structure.

We would like to present with an overview of The Belonging to Family Program and the areas of work SHINE for Kids is involved in and progressing into a discussion panel.

Gibson, Chontel
Indigenous Academic Fellow
Charles Sturt University

Dudgeon, Pat
Professor & Research Fellow
University of Western Australia

Curtin, Michael
A/ Professor and
Occupational Therapy Coordinator
Charles Sturt University

Research...Pfft! A dirty word? Or an avenue to privilege and action Aboriginal voices.

Research has a negative history with Aboriginal Torres Strait Islander communities. Due to historical, political and social reasons, research is perceived as part of the colonising process by many communities and is seen as having little value. However, in the past three or so decades, there have been many developments in research methodologies that have changed traditional Western research and its ongoing negative impact in and on indigenous communities. In particular, this presentation will overview two recently developed research approaches that are already showing great potential to be culturally appropriate and accepted by communities: Indigenous Standpoint Theory (IST) and Community Based Participatory Research (CBPR). Both approaches provide a philosophical basis underpinning the research design, process and outcome to promote and privilege Indigenous voices, and they are becoming globally accepted as best practices for engaging Indigenous peoples in research.

IST and CBPR are research methodologies that are embedded in a human rights context, that promote collegial and collaborative partnerships between all research partners, that privilege and action Indigenous peoples voices, and acknowledges the political, historical and social contexts of Indigenous realities. These approaches will be used in research to investigate the social and emotional wellbeing for older Aboriginal people, and are considered to be culturally appropriate research approaches that could be empowering and inclusive to other research involving Aboriginal people.

Harrison, Kristie
Senior ADAN Project Officer, WSU
AH&MRC

Turner, Rodney
AOD Project Officer, SEWB WSU
AH&MRC

The Aboriginal Drug & Alcohol Network (ADAN) of NSW

This presentation will include;

- An overview of the establishment of the ADAN;
- The continuous growth of the network;
- The 10 year anniversary Symposium (2013);
- An outline of the state-wide ADAN Leadership Group;
- Current core business and activities for Aboriginal AOD workers in NSW; and
- Future directions and recommendations from the workforce.

Hillin, Anthony. Senior Project Officer
NSW Institute of Psychiatry

Update on the NSW Aboriginal grief and loss training program

The NSW Ministry of Health has funded the NSW Institute of Psychiatry to develop a training package to assist the NSW Aboriginal Mental Health Workforce to support Aboriginal communities to deal with grief and loss issues. This presentation will summarise feedback about staff learning and support needs gained from consultation workshops at the NSW Aboriginal Mental Health and Wellbeing Workforce Forum, 2013. Following this, progress made in the following areas will be briefly described:

- developing and delivering training workshops for Aboriginal mental health staff in public mental health services, Aboriginal Community Controlled Health Services and mainstream non-government organisations that employ Aboriginal mental health workers (e.g. through Aboriginal HASA). This will include workshop content, learning processes, evaluation results from pilot workshops and schedule for state-wide rollout;
- developing resources that support and enhance the training program;
- facilitating the development of local professional networks to provide clinic and cultural support.

Central to this project is ongoing consultation with the NSW Aboriginal Mental Health Workforce to ensure that the training package effectively addresses staff needs, whilst at the same time, building a sense of ownership and involvement in the project. Over the previous year the consultation process has comprised a survey, focus groups, pilot workshops and a literature review. A consultation workshop at this forum will provide further opportunities for you to discuss your learning, support and resource needs in relation to supporting your communities to deal with grief and loss.

Hillin, Anthony.
Snr Project Officer

Wynne-Jones, Megan
Project Officer

Edwidge, Vanessa
Trainer /Consultant

Byers Danielle
Head of Community Mental
Health Education

NSW Institute of Psychiatry

Aboriginal grief and loss training program: consultation groups exploring learning areas, staff support and resources

The NSW Ministry of Health has funded the NSW Institute of Psychiatry to develop a training package to assist the NSW Aboriginal Mental Health Workforce to support Aboriginal communities to deal with grief and loss issues.

Central to this project is ongoing consultation with the NSW Aboriginal Health Workforce to ensure that the training package effectively addresses staff needs, whilst at the same time, building a sense of ownership of and involvement in the project. Over the previous year the consultation process has comprised a survey, focus groups, pilot workshops and a literature review. This consultation workshop is the next step in providing you with opportunities to share your expertise and reflect on your learning, support and resource needs in relation to supporting your communities to deal with grief and loss.

In order to facilitate discussion, following a brief introduction, you will have an opportunity to form small groups of no more than 12 people, including a facilitator and scribe.

Ketchell, Marsat

Program Manager SEWB and ATOD Service
Torres Strait and Northern Peninsula Hospital and Health Service
Thursday Island – Torres Strait

Psychological Resilience and the Indigenous Health Worker

The presentation aims to present resilience in the workforce of the remote and isolated communities of North Queensland and in this case, the Torres Strait Islands.
The Program – Earth Wind and Fire (EW&F)

PR-IHW will also present self-awareness and healing concept of service delivered to target groups working in high risk arenas. It is also a concept that may be tailored to all age groups, genders, individuals, groups including family,, and whole of community. EW&F takes the participant(s) back to culture and tradition collaborating with life skills, modern day living, and coping with the environment/community and also holistic expectations from peers, family, and community.

Lewis, Liz

Lismore Region Aboriginal Coordinator
University Centre for Rural Health (North Coast)
University of Sydney

Bennett-Levy, James

A/Professor
Centre for Rural Health (North Coast)
University of Sydney

Getting with the program! Skilling up the Aboriginal workforce in the use of e-wellbeing apps and online technologies.

As part of a national e-mental health initiative, the federal Department of Health and Ageing has funded the University Centre for Rural Health (North Coast) and the Menzies School of Health Research to train Aboriginal health professionals in the use of e-social and emotional wellbeing technologies including apps for smartphones and tablets and online mental health programs. His project will be rolled out across the North Coast in 2014 and 2015. The aim is to train North Coast Aboriginal health professionals to develop skills and confidence in using new technologies as an additional tool to assist their clients. For instance, many young people use smartphones, but very few young people use mental health services, despite the high incidence of mental health problems. Online technologies and apps offer the opportunity for health professionals to “meet people in the places that they hang out.” In this presentation, we will talk about the rationales for the program, and the ways that we are engaging with the community and training health professionals over the next two years. During the day in the exhibition space, we will also be demonstrating the apps and online programs, and inviting forum delegates to try them out for themselves.

Locke, Colin

Aboriginal Mental Health Clinician
Western NSW Local Health District

Usin' it or Losin' it!

This paper highlights the importance of maintaining Mental Health trainees within the workplace on completion of their university degrees. Currently, there is a tendency for graduates to either move away from the profession or not to have a position available for them to remain! Hence, this is leaving a gaping hole in the highly specialised area of Aboriginal Mental Health Services. There appears to be a shortage of trained and culturally appropriate Aboriginal Mental Health Clinicians available to service the needs of Aboriginal communities

A great deal of money, time and effort has gone into the training of these university graduates. Money that is meant to improve and uphold the mental health of our people, money from different quarters of government used in putting students through this course. The time that each student has put into study, travel and attendance at lectures. Time that they have spent away from their family and friends. This includes all the sacrifices made by workplaces, colleagues and family for them to be able to help our fellow Brothers and Sisters in life.

What can be done to stop this loss and waste of valuable and specialised skills? We need to support and value our Aboriginal Mental Health Workforce.

Manton, Toni
Senior Aboriginal Health Worker
Awabakal Aboriginal Primary Health Care Centre

Dadd, Lawrence
Staff Specialist Psychiatrist
Mental Health & Substance Abuse Service

McMullen, Stacey
Psychologist
Newcastle Mental Health Service

Mathew, Cyriac
Clinical Director
Newcastle Mental Health Service

Valuing Each Other & Working Together: The importance of Aboriginal Health Workers working with mainstream services to provide culturally safe service delivery to clients at the Awabakal Aboriginal Primary Healthcare Centre. What might get in the way and what helps?

How can psychologists and psychiatrists work with Aboriginal and Torres Strait Islander patients, families, communities and Indigenous health workers to help “close the gap”? We will discuss the importance of valuing each other and how ‘working together’ helps. We will also discuss the importance of the Aboriginal Health Workers in engaging with clients, families, and the community to build a level of trust to seek services.

The panel will also discuss and explore some of the potential social, cultural, professional and ethical barriers that can get in the way as well as some ‘ways forward’. We hope for audience questions, participation and contribution.

McCormick, Cindi
Area Transition Support Educator
NSLHD MHDA

Growing opportunities for a sustainable Aboriginal Mental Health workforce

How can we identify opportunities to establish sustainable support structures and mentorship options for Aboriginal mental health trainees working in mental health clinical settings?

Following a successful first three years participating in the Trainee Aboriginal Mental Health worker (TAMHW) program our service has strived to embed this program in our LHD. To ensure this TAMHW program is sustainable we have developed a tiered support system. This involves a collaborative approach from senior level management; mentor for on-site preceptor and on-site clinical preceptor for the Trainee. Cultural support for the trainee is identified by the trainee and supported by the team. All involved are working in consultation with regards to the needs of the Trainee.

The AMHW Trainee brings with them a rich cultural expertise which enhances the LHD/service cultural awareness. In turn the service/organisation provides a wealth of clinical expertise combined with access to education and training opportunities to support the trainee’s learning. Our previous trainee has successfully progressed to a role in Perinatal and Infant Mental Health for an Aboriginal Mental Health Service.

If we focus on what we CAN do by embracing enthusiastic passionate non Aboriginal clinicians willing to share their clinical expertise while at the same time learning from the cultural expertise of the Trainees then we all learn from each other and grow together.

McMillan, Faye
Program Director
Bachelor of Health Science (Mental Health)
Charles Sturt University

Stephanie Perrot
Lecturer
Djirruwang Program
Charles Sturt University

“Are they ready for the workforce?”

The Bachelor of Health Science (Mental Health) degree has undergone a number of curricula design changes; the purpose of change is designed to improve or enhance the academic content to provide industry with early career mental health/health service professionals. The program aims through consultation and collaboration with industry partners to provide content and material that supports and enhances practice based experience with the theory that underpins it. Through the delivery of a program that seeks to scaffold the learning experience across the three year degree students are provided with the opportunity to build their own capacity to be effective contributors in inter-disciplinary environments to meet the therapeutic needs of clients. The embedding of clinical experiences within the program is a key facilitation that allows the meshing of theory and practice to come together in a supported environment that ultimately contributes to the provision of an early career workforce that is ready to meet the demands of industry. This paper will explore the subjects within the curricula and the benefits to providing a cohort of individuals who are workforce ready.

Montgomery, Simone
Manager Learning and Development
Mental Health Coordinating Council

Parsons, Craig
Regional Manager Southern NSW
Neami Ashfield

Key Learnings in retaining an Aboriginal Workforce in the Community Managed Mental Health Sector

The Aboriginal Careers in Mental Health Program aims to assist the development of a culturally responsive and accessible mental health workforce by:

- Increasing Aboriginal employment in the community mental health sector;
- Building capacity of community mental health organisations to employ and support Aboriginal workers;
- Building the capacity of community mental health organisations to engage with and better support Aboriginal communities and people;
- Assisting Aboriginal people to develop the skills and requirements to work in the community mental health sector; and
- Increasing Aboriginal engagement with vocational training

O'Neill, Gina
Clinical Specialist
AH&MRC

Baker, Ann
State Mental Health Co-ordinator
AH&MRC

"The fall and rise of clinical supervision"

Extensive research into the benefits and necessity of clinical supervision in the helping and medical professions has led to the development of a culturally appropriate supervisions model. A recent literature review led the AH&MRC to 'Our healing ways' (a culturally appropriate supervision model), established by the Dual Diagnosis Unit at St Vincent's Hospital, Melbourne. AH&MRC are currently building a partnership agreement with St Vincent's Hospital to adopt the model and train staff to roll-out the model to the SEWB/Mental Health workforce in 2014.

The workshop presentation will include:

- What is supervision?
- Why we need supervision?
- Introduce the 'Our healing ways model'
- Discussion of relevance to workplace situations and identify questions/discussion points
- World Café group exercise- Questions identified above and small group exploration of innovative ways to establish supervision for the SEWB/Mental Health workforce in NSW

Ross, Laura
Adult MH Clinician/Acting Aboriginal MH Clinical Leader
Murrumbidgee Local Health District

MLHD MHDA Aboriginal Mental Health Business Plan

In 2012 it was identified that the MLHD Mental Health & Drug and Alcohol teams needed a framework to enhance Indigenous engagement with our services, and more effectively support our Indigenous mental health clinicians and their respective teams.

Consequently a MLHD MHDA Aboriginal Mental Health Business Plan was developed by Indigenous clinicians and trainees in conjunction with Executive staff in 2011.. The impact of this was examined in 2013 by Indigenous mental health staff and trainees leading to a reformulation of the Business Plan.

The Business Plan is used as a guide by all staff within the MHDA teams in MLHD, and influences the way we offer service provision to Indigenous clients. It describes various important strategies to improve engagement with Indigenous people and provide better support to our Indigenous clinicians in their clinical practice in a way that maintains/enhances and protects their cultural responsibilities, safety and knowledge. It covers various areas of practice including: promotion, service access, service flexibility, clinical models and cultural awareness.

The Business Plan was endorsed by the MLHD MHDA Senior Executive in October 2013, giving Indigenous clinicians a clear message that there is commitment from our service to enhance our delivery of service to Indigenous communities in the most culturally safe and appropriate way possible. We are now at the stage of implementation, which will see a positive impact on Indigenous engagement with MHDA in the MLHD. This should mean an overall improvement in the mental health of Indigenous people and their communities with increased engagement with services across our Local Health District.

Sarin, Jasmine
Senior Project Officer
Aboriginal Health and Medical Research Council of NSW

Supporting the Aboriginal workforce to address tobacco in their communities – showcasing the Aboriginal Resistance Tool Kit

A range of tobacco control resources are available. The AH&MRC, Aboriginal Tobacco Resistance Tool (ATRT) Kit was designed to meet an identified need from workers new to health and Aboriginal tobacco control, by developing a Kit with useful tools and templates that could be used and adapted for Aboriginal Community controlled Health Services.

Through consultation with people who work in tobacco control in NSW the key modules let's get started, workplace smoking policy, data collection and social marketing were developed. Generally, tool kits are knowledge based, describing the use of tools but rarely containing a variety of tool which can be adapted or used as is.

Drawing on experience from the NSW ACCHS sector, this paper/workshop will discuss how workers can use the ATRT tools and templates based resources, to build on their own skills. It could also be expanded out to work in small groups to develop localise strategies and activities focussed on tobacco resistance and control activities.

Stanley, Donna
Clinical Leader Aboriginal MHDA
Western NSW Local Health District

Aboriginal Psychiatry Mentoring Program

The NSW Aboriginal Mental Health and Well Being Policy 2006 -2010 has a key priority under Strategy Five: A supported and skilled workforce; within this there are a range of action items under three focus areas; Aboriginal Mental Health Worker Recruitment, Training supervision, **mentoring and support**; Aboriginal mental health worker qualifications and competencies.

In 2007 the former Greater Western Area Health Service (GWAHS) now Western NSW Local Health District identified and supported the implementation of the Aboriginal Mental Health Workers and Psychiatrists Mentoring Project. This was designed to assist supporting both the Aboriginal Mental Health Workforce and Psychiatrists through mentoring. In 2013 an evaluation of this project was undertaken, this paper will report some of the findings from that review and highlight the value and importance participants place in this project.

The project has a long term focus and is important to assist the early stages of development of the Aboriginal Mental Health Workforce as a discrete emerging workforce.

Willis, Lee
Aboriginal Social Emotional Wellbeing Program
NEAMI National

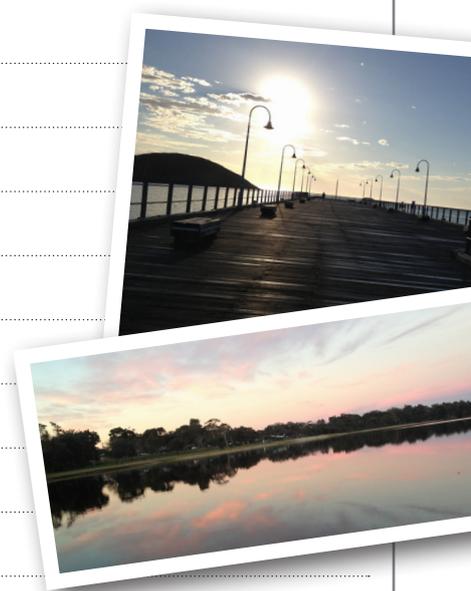
NEAMI National Aboriginal Linkages program

Neami National is a non-Government organisation that provides support services within a recovery framework to people living with serious mental illness. The Dubbo Mental Health Rehabilitation and Recovery Centre (MHRRRC) was established by Neami National in 2013 and provides recovery focussed sub-acute care to people from Dubbo and surrounding regions. In addition to site-based support, Neami also provides outreach support to Aboriginal communities in Central Western NSW through the Aboriginal Linkages Program. The Aboriginal Linkages Program was created in response to the fact that Aboriginal people are typically over-represented in acute inpatient settings and under- represented in community based mental health services. The Aboriginal Linkages Program employs Aboriginal staff, headed by Social and Emotional Wellbeing Worker, to:

- Ensure that the many diverse Aboriginal communities in Dubbo and surrounding regions are able to access the Centre;
- Promote knowledge of the Centre as a safe space for Aboriginal people;
- Develop strong partnerships with communities, service providers and individuals to encourage and facilitate Aboriginal people's access to the service;
- Assist people to 'step up' into the centre, diverting them from an acute inpatient admission; and work directly with consumers and their families to facilitate successful transitions home; and
- Build capacity within communities to foster better mental health and social and emotional wellbeing.

NOTES

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Health

Mid North Coast
Local Health District

Thank you for attending the 2014 NSW Aboriginal Mental Health & Wellbeing Workforce Forum

