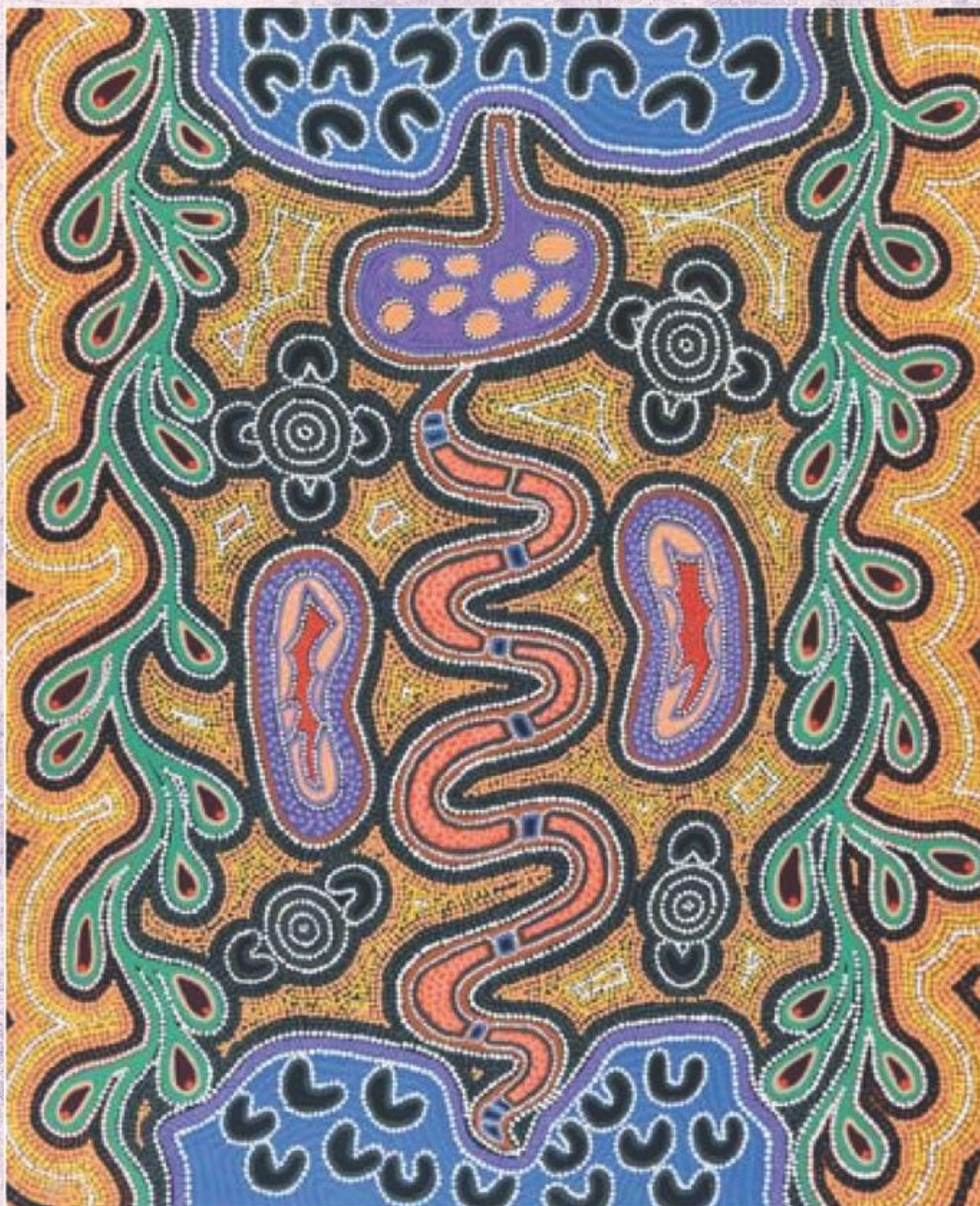


Staff guidelines for working with Aboriginal & Torres Strait Islander Community Members



**Painting by Irene Wangudu O'Loughlin,
Narungga Mayi Yunggadja Wanggi ('receive good food in belly')**

Background

Aboriginal and Torres Strait Islander People come from a wide range of distinctive backgrounds, with a rich diversity of life experiences and cultural traditions. However, many Aboriginal and Torres Strait Islander People share in common:

- A recent history of dispossession, disempowerment and trauma
- Negative experiences of government, non-government and church agencies
- Interruption to kinship relationships, cultural practices, and connection to traditional land.

It is important that Staff consider this historical background otherwise they may unwittingly cause further distress, or find it difficult to engage Aboriginal and Torres Strait Islander community members in their service.

Note: For the remainder of this document the term 'Aboriginal' will refer inclusively to all Aboriginal and Torres Strait Islander People.

Learning about Aboriginal culture and history

These guidelines are designed to assist EACH staff to work with Aboriginal community members in a culturally safe manner. Given the complexities of the issues involved, these guidelines have only been developed as a starting point.

To gain an understanding of Aboriginal culture and history requires ongoing learning and staff are encouraged to take advantage of Aboriginal cultural awareness training when offered. A detailed list of recommended websites, books, movies and other resources are available on the EACH GRID, through the [Aboriginal Reconciliation](#) page.

Author: Anja Tanhane.

Contributors: Marika Jackomos, Penny Wagstaff, Melissa Stevens, Heather McMinn the EACH Aboriginal and Torres Strait Islander Health and Wellbeing/RAP Committee and EACH Aboriginal Health Team.

Engaging directly with the Aboriginal community

Where possible, staff are encouraged to engage directly with Aboriginal staff members, community members, and local Aboriginal services, taking the time to establish trusting relationships. EACH currently works with a number of Aboriginal focussed services and organisations including those listed below.

Respectful relationships and partnership activities with these organisations are important to EACH to ensure we continue to work in a culturally appropriate manner to improve the health and wellbeing outcomes for community members. Please remember to consult with Aboriginal staff or senior managers about protocols, which may need to be observed, to ensure local organisations are not overwhelmed by approaches from mainstream service providers.

Victoria

- Boorndawan Willam Aboriginal Healing Service
- Mullum Mullum Indigenous Gathering Place
- Healesville Indigenous Community Services Association
- Dandenong and District Aboriginal Co-operative
- Victorian Aboriginal Child Care Agency
- Ngwala Willumbong Cooperative
- Wurundjeri Tribe Land & Compensation Cultural Heritage Council Inc.
- WORAWA Aboriginal College - Healesville
- Victorian Aboriginal Community Controlled Health Organisation
- Bunurong Health Service; Healthy Lifestyle Team,
- Eastern Region Local Indigenous Network
- Victorian Aboriginal Health Service
- Indigenous Family Violence Regional Action Group

NSW

- Werrin Medical Centre,
- Aboriginal Housing,
- Moree, Narrabri and Port Macquarie Lands Council,
- Biripi Aboriginal Medical Centre,
- Pius X Aboriginal Medical Service,
- Thyamali Legal Service Moree,
- Hunter New England Aboriginal Drug & Alcohol Service,
- Aboriginal Health Services in Moree, Byamee

Key considerations

Keeping in mind that every person is different and individual, people with an Aboriginal background may prefer:

- **Having time to get to know you as a person:** Within the limits of professional boundaries, it may be possible to spend some time chatting to the client, allowing them to get a feel for who you are, perhaps over a cup of tea, to establish a sense of mutual respect and trust.
- **Being addressed correctly:** Some older Aboriginal community members may like to be called Aunty or Uncle. However, others don't. Always ask how they would like to be addressed. A person in their 40s may be an Elder in their Aboriginal community.
- **Not making assumptions based on appearance:** Aboriginal community members come from diverse backgrounds, and staff members should refrain from making judgements based on a community member's appearance. It's very distressing and insulting to Aboriginal people to have their Aboriginality questioned by staff who have pre-conceived ideas of what an Aboriginal person should look like.
- **Involving family and other community members:** If the Aboriginal person desires it, and where appropriate, it may be effective to include family and other Aboriginal community members in your work. Of course, it's very important to always maintain confidentiality.
- **Linking with Aboriginal services:** Some clients like to be referred to an Aboriginal health practitioner, where available. However, others may prefer to see someone outside their own small community. Again, always ask.
- **Longer session times and episodes of care:** It is recommended to schedule longer session times, allowing community members time to tell their story, and for staff to establish rapport. Also, allow for longer episodes of care, as well as easy exit and re-entrance to programs.

- **Community views on disability, illness, mental health and Acquired Brain Injury.** Some Aboriginal community may hold a view of these conditions that is more complex and/or viewed from a holistic perspective. This often includes a spiritual component, which doesn't fit easily with a Western medical model. Learning more about these cultural differences will require time, and a professional relationship built on trust. Also, rather than having a 'main carer', the whole community may be involved in caring for the person who is ill or has a disability.
- **Liaise with Aboriginal staff or staff working in Aboriginal programs where possible:** Hospitals and other organisations may have an Aboriginal Liaison Officer (ALO) who you can speak to when looking for support for a community member. Within EACH you can ask the community member if they would like to get assistance from the Aboriginal Health Team (*Victoria*) to access appointments or to link them into community etc.

For staff working in EACH programs outside of Melbourne please check with your Line Manager for contact with specific staff members who have experience working with Aboriginal people.

- Additional support for staff is also available through the **EACH Wirrigirri Champions**. Wirrigirri is an Aboriginal term that refers to someone who is a messenger. The Wirri Girri's are the staff who have identified themselves with the Aboriginal Health Team as having an interest, passion and commitment to improving the health and wellbeing outcomes for Aboriginal people and supporting reconciliation strategies within EACH. These staff are available for contact regarding working with Aboriginal community members and will assist you to link with additional resources or contacts required.

See contact email for the EACH Aboriginal Health Team and Wirrigirri Champions at the end of this document.

Commitment to priority access for Aboriginal community

- EACH as an organisation has made a commitment to give priority access to particular population groups who have or continue to experience inequity and disadvantage. This priority access group includes; Aboriginal and Torres Strait Islanders, refugee and asylum seekers, people living with a disability, mental illness, individuals who are experiencing social or financial disadvantage, people at risk of homelessness, or unemployed, women experiencing hardship and frail aged. Any individual who identifies with one of these groups is entitled to **priority of access** regardless of funding or contractual priority access rules.

Given the number of priority access population groups which are seeking to access EACH services staff must consider all needs of the individual including their immediate needs, clinical or other, when determining priority of access and appointment.

- Where possible, staff are encouraged to **demonstrate flexibility** during the intake process and service provision when working with Aboriginal community members. This includes an expectation that staff will take a compassionate approach to Aboriginal members who fail to attend appointments. Where this happens staff are encouraged to identify with the individual what supports may be needed to attend appointments or to liaise with one of the Aboriginal Health Team or caseworker, where one exists, regarding the individual's needs. Failure to attend appointments will not result in reduced priority of access.

Aboriginal and Torres Strait Islander Significant Days

The list below highlights the significant dates in the Aboriginal and Torres Strait Islander community that are marked in some way throughout the calendar year. EACH encourages staff to increase their understanding of these dates through an activity such as:

- Participation in local Community events, where possible and appropriate
- Inviting a local Elder or Community member to your site, to share their story and the significance of the date
- Gathering for a morning or afternoon tea where a staff member provides information about that date from our list of reference materials and resources
- Schedule a time for staff to view and discuss one of the videos or online documentaries highlighting the history, culture and current life experiences of Aboriginal and Torres Strait Islander People.

Information about all dates will be posted on the GRID for staff reference.

Please check the GRID for links to the list of reference materials, resources and videos identified through Community members and the EACH Aboriginal Health Team.

Significant dates:

- 13 February - Anniversary of the Apology (2008)
- 19 March - National Close the Gap Day
- 26 May - National Sorry Day
- 27 May - Anniversary of the 1967 Referendum
- 27 May–3 June - Reconciliation Week
- 3 June - Mabo Day
- 1 July - Coming of the Light
- 4 July-12 July 2015 - NAIDOC Week
- 4 August - National Aboriginal and Torres Strait Islander Children's Day
- 9 August - International Day of the World's Indigenous Peoples
- 3 September - Indigenous Literacy Day
- 13 September - Anniversary of the United Nations Declaration on the Rights of Indigenous People.

Accessing more information or support

Aboriginal Health Team: A group that includes all of the current staff who currently work specifically with Aboriginal Community members.

AboriginalHealthTeam@each.com.au

Heather McMinn, Manager Inclusion and Diversity – this role includes support for EACH organisation wide implementation of the Reconciliation Action Plan.

Heather.McMinn@each.com.au

Wirrigirri Champions: A group that includes all of the current staff who have been identified as a Wirrigirri Champion.

Wirrigirri.Champions@each.com.au

** **Note:** If you would like to join the **Wirrigirri Champion** group, please contact Merylyn Duff to discuss this. Training and support for this group is part of the EACH Reconciliation Action Plan and will be advertised when available.*

EACH Aboriginal Reconciliation: An online list of staff interested in Aboriginal reconciliation, health and wellbeing issues.

EachAboriginalReconciliation@each.com.au

****Note:** Please contact IT Support if you would like to add your name to this list.*

EACH Resources: Policies, Publications and Videos

All resources, reference and organisational links are available through the EACH GRID, [Aboriginal Reconciliation](#) page.

- **EACH Reconciliation Action Plan 2015-16**
- **Policy, Procedure and Site Welcome/Acknowledgement Statements**
[Aboriginal and Torres Strait islander People Welcome/Acknowledgement of Country Policy](#)
[Aboriginal and Torres Strait islander People Welcome/Acknowledgement of Country Procedure](#)
[Sites Welcome/Acknowledgement of Country Statement](#)