Negotiating the ‘contested arena’ of Indigenous mental health: progress update and preliminary findings

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Building Mental Wealth: Improving Mental Health Outcomes for Indigenous Australians
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http://bmw.curtin.edu.au
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• Even by the standards of Indigenous health more broadly, Indigenous mental health is a tensely contested arena.

• ‘…competing political and other agendas that resulted in constructions of Indigenous ‘health’ which were presented as incompatible with health and healthcare as understood (and practiced) by non-Indigenous Australians’. (p.1)

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• ‘While Aboriginal people comprise three percent of the population in WA, they make up five percent of the population who received specialised mental health inpatient services.’

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‘Aboriginal people are hospitalised for mental illness at significantly higher rates than the general population and have higher rates of suicide.’

‘Many Aboriginal people experience economic, social, educational and health disadvantages and are overrepresented within the mental health system’

‘Aboriginal women often are overburdened as they assume the major caring role for a number of family members with mental health, health, disability, alcoholism, justice and other issues.'
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• ‘The Aboriginal concept of mental health is holistic. It doesn’t just mean the physical wellbeing of the individual but refers to the social, emotional and cultural wellbeing of the whole community’.

• Mental Health 2020: Making it personal and everybody’s business. Reforming Western Australia’s mental health system. Mental health Commission: Government of Western Australia. Page 26
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Aim
- To construct a layered, integrated and holistic picture of the 'arena of Indigenous mental health'

Activity
- Literature review
- Interviews with Indigenous people, mental health professionals and students

Analysis
* Causal Layered Analysis

Outcomes
- An insight into the various ways Indigenous mental health is constructed as an idea and as a site of interaction;
- Clarification as to the sources of conflict and tension within the arena.

Aims
- To examine how Indigenous people, mental health students and professionals negotiate the tensions identified in the arena of Indigenous mental health.

Activity
- Focus groups

Analysis
* Discourse Analysis
What resources do participants use to permit and shape their engagement in the arena?

Outcomes
- An insight into the various ways people negotiate their involvement in Indigenous mental health.

Aims
- To discuss the changing arena of Indigenous mental health; the emergence and origins of tensions and the means by which people negotiate these in order to engage as clients and/or employees;

- To consider how these findings can inform resources for professional and community development.

- To identify and outline ways to consider and address the tensions in order to develop better services; and

- To discuss implications and opportunities for educators.

Project Map
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- Indigenous Australian people: n=15
- Indigenous Mental Health
- Mental Health Professionals: n=15
- Students: n=15
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- Indigenous Australian People
- Indigenous MH professionals
- Indigenous students
- Employed Indigenous student
- Mental Health professionals
- Students
- Employed students
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**Litany** offers the public description of the issue, often considered as the official, unquestioned view;

**Social Causation or Systemic level** attempts to articulate causation utilising economic, cultural, political and historical factors. Data in the litany are explained and questioned at this level but not necessarily the paradigm in which the issue is framed;

**Discourse/ Worldview level** Ideological and discursive assumptions are unpacked. Different stakeholder explanations of the litany and system are examined;

**Myth/ Metaphor level** considers the emotive dimensions of the issue. This level provides a gut level element to the inquiry using language that invokes emotive and visual imagery.
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Causal Layered Analysis

Outcomes
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Aims
- To examine how Indigenous people mental health students and professionals negotiate the tensions identified in the arena of Indigenous mental health.

Activity
- Focus groups

Analysis
Discourse Analysis

Outcomes
- An insight into the various ways Indigenous people negotiate their involvement in Indigenous mental health and the discursive strategies employed to do so.

Aims
- To discuss the changing arena of Indigenous mental health; the emergence and origins of tensions and the means by which people negotiate these in order to engage as clients and/or employees;
- To consider how these findings can inform resources for professional and community development;
- To identify and outline ways to consider and address the tensions in order to develop better services; and
- To discuss implications and opportunities for educators.

Aims
- To discuss implications and opportunities for educators.


Garvey, D. (2010). ‘Ready, Steady... Practice!’: How working better with Indigenous Australian people can take as little as three minutes of your time. The Australian Community Psychologist, 22, 1, December, 8-17.

‘A funny thing happened on the way to the hypogeum’: An account of crisis and congruity in the arena of Indigenous mental health. (Submitted to AQR post-conference publication sites).

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Portrait of a young girl, *La Penitente*

Pietro Rotari (1707-1762)
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*Saint Peter Repentant*

1823-1825, Goya
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• ‘All the world's a stage,
  And all the men and women merely players:
  They have their exits and their entrances;
  And one man in his time plays many parts,’

• William Shakespeare, As You Like It, Jacques Act II, Scene VII
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• Indigenous mental health arena as performance space;
  – Reconciliation
  – Social movement
  – Resistance
  – Health promoting

• Cultural competence as performance
  – ‘Discursive scaffolding’
How to find us:

http://bmw.curtin.edu.au

http://www.facebook.com/pages/Building-Mental-Wealth/152130671468063

http://twitter.com/BMW_group_WA

*The story of our logo:* The logo uses the central symbol of a head to represent the field of mental health. It is surrounded by large circles which symbolize the organisations and community groups which contribute to a combined effort to improve mental health in Australia. The smaller circles in between the larger circles represent the individuals affected by mental ill-health and their families. The roads in the outer section of the logo symbolize the many pathways that lead to mental ill-health and back to restored mental health. The logo was designed by Allison Bellottie, an Aboriginal artist belonging to the Malgana and Nanda tribal groups from the Shark Bay area of Western Australia.
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‘In each other's story we see so much of ourselves. Ancestors who crossed vast oceans-some by choice, some in chains. Settlers who pushed west across sweeping plains. Dreamers who toiled with hearts and hands to lay railroads and to build cities. Generations of immigrants who, with each new arrival, add a new thread to the brilliant tapestry of our nations. And we are citizens who live by a common creed-no matter who you are, no matter what you look like, everyone deserves a fair chance; everyone deserves a fair go. Of course, progress in our societies has not always come without tension, or struggles to overcome a painful past. But we are countries with a willingness to face our imperfections, and to keep reaching for our ideals. That’s the spirit we saw in this chamber, three years ago, as this nation inspired the world with a historic gesture of reconciliation with Indigenous Australians.’

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A number of inquiries have drawn attention to the unacceptable gap between the physical health status of Aborigines and that of the remainder of the community. The House of Representatives Standing Committee on Aboriginal Affairs report, Aboriginal Health, and the National Trachoma and Eye Health Program of the Royal [Australian] College of Ophthalmologists are recent examples. Comparatively little attention, however, has been given to the mental health needs of Aborigines.