Improving forensic mental health care for Aboriginal Australians – Challenges and opportunities

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Context

• State Forensic Mental Health Service,
• specialised area of mental health
• jurisdiction of WA Health Dept and crosses into Dept of Corrective Services
• admissions of Aboriginal patients
Background

- 2011: Aboriginal people 2.6% overall Australian population yet represented 26% of the total prison population (ABS 2011)
- 2011: rate of imprisonment (ABS 2011)
- mental disorders: major burden of disease for Aboriginal people (Browne & Varcoe 2006; Paradies et al 2008)
- ongoing Aboriginal/non-Aboriginal health disparities - morbidity and mortality rates
- national health priorities:
  - mental health
  - Aboriginal health
  - prison health (ABS 2011)
Challenges

• concept of ‘white privilege’ (du Bois, 1903; Moreton Robinson 2009, McIntosh 1990)
• racialised social structure (Kowal 2008)
• western biomedical model of care
• racism in health services (Henry et al 2004; Johnstone & Kanitsaki 2009)
Methods

1) ethics approval
2) online survey
3) in-depth interviews
Findings

• 57% response rate to survey

• Factors influencing high quality care
  – meaningful & ongoing education and training to work in a culturally sensitive way with Aboriginal people (76%)
  – knowledge of Aboriginal culture (72%)
  – self awareness and good reflective skills (66%)
  – education on Aboriginal people’s perceptions of mental health and illness (65%)
  – knowledge of Aboriginal history and the impact of colonisation (51%)
Findings

• open to Aboriginal healing methods being introduced into care (51%)
• more awareness of cultural protocols (49%)
• culturally appropriate and sensitive assessment of Aboriginal patients (47%)
• reducing discrimination against Aboriginal people (45%)
• full-time employment of Aboriginal staff at the service (63%)
Opportunities - intercultural space (Bhabha 2012, Nakata et al. 2012)

- ‘third space’ or ‘middle-ground’
  - a space in-between cultures
  - avoids binary oppositions
  - shared space: allows and holds difference, is sometimes confronting, ambiguous, uncertain and risky
  - space of struggle yet deep potential
  - in-between space that can be both inclusive and expansive
shared space

• ‘You can only be invited into someone’s personal space and you can only do good when you are properly invited in and Aboriginal people have particular concerns about that. They will keep you out – historical trauma and those things [where] they don’t trust white people, the western world’.
trust

• ‘The clients we see are a mixture of urban, semi-urban, Goldfields, Broome and then remote traditional tribal Aboriginal people and I think things are quite different for each of those groups. But I think the most important thing I have learned from tribal and urban Aboriginal people is the importance of land. It is not just a symbolic importance but a concrete representation of internal space, an inner world that is projected onto the landscape around you’
inclusive & expansive

• ‘It’s understanding as deeply as possible and understanding the meta issues as well – so not just the mind [of an Aboriginal person] but also what the Aboriginal people are going through, to put it into context, to have understanding and dialogue’
partnership

• ‘...just talking to an Aboriginal person helps to sort out what is psychosis, delusion, hallucination from what is being sung, sorry business to appropriate grieving. Obviously there is education I can have to help that but I think the ultimate way is to have the Aboriginal health worker alongside you, able to filter’.
conclusion

• ‘I like the landscape thing because it is an Aboriginal metaphor where you get into their landscape and walk on their internal world and find the things that are wrong and do that in partnership ... [It is important] to have Aboriginal health workers to vouch for you, elders to hold your hand and lead you in’
References

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How to find us:

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*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.