



**Empowering Indigenous
Communities:
Modern Solutions to
Colonial Problems**

CREDIT: Dr Cheryl Kickett-Tucker

 Scientia

EMPOWERING INDIGENOUS COMMUNITIES: MODERN SOLUTIONS TO COLONIAL PROBLEMS

Dr Fiona Stanley and her team of multi-disciplinary researchers at the Centre for Research Excellence in Aboriginal Health and Wellbeing use novel strategies to empower Indigenous Australians and promote public health.



An Institutional Legacy of Failure

Worldwide, the destructive effects of European colonisation continue to plague indigenous peoples today, often through pervasive and persistent systemic racism. The Aboriginal and Torres Strait Islander peoples of Australia are a prime example of these effects. Aboriginal Australians experience higher rates of poverty, illness, poor mental health and low self-esteem, incarceration, and ongoing consequences of stolen generation trauma.

Despite millions of dollars spent on public health initiatives for Indigenous Australians, Aboriginal populations continue to experience higher rates of infant mortality, preventable diseases, mental disorders, suicide, and shorter life expectancies. Discriminatory practices and racism, both overt and subliminal, are major contributing factors to the compromised health of Aboriginal communities. Numerous studies have linked the 'everyday racism' experienced by Aboriginal peoples and disenfranchised populations worldwide to higher stress rates and poorer overall health,

and the effects of racism extend beyond individual experience. Systemic racism contributes to lack of cultural understanding and commitment among mainstream health providers, perpetuating the failure of many public health interventions led by non-Aboriginal teams.

All too often, government initiated programs intended to aid marginalised populations fail to involve members of these populations when designing the program. As a result, such programs have frequently been ineffective and inappropriate in the communities they were meant to serve. Dr Fiona Stanley heads a diverse team of Indigenous and non-Indigenous Australian researchers at the Centre for Research Excellence in Aboriginal Health and Wellbeing, dedicated to shifting the paradigm driving Aboriginal public health initiatives by partnering with Indigenous Australians to develop effective programs that both serve and empower their communities. The problems of Aboriginal populations are complex and interwoven, but the multifaceted approach of Dr Stanley's team is driving positive change in Indigenous

Australian communities, and is setting an example for the rest of the world.

A Career of Service

Dr Stanley began her career in Perth in the 1970s as a young doctor working in child health. She found herself repeatedly treating Aboriginal children flown in from remote settlements, nursing them back to health only to return them to the same problematic environments. 'I realised that clinical treatment of sick Aboriginal children was not the best way to improve Aboriginal health and that we needed to understand the pathways causing disease and other poor outcomes,' she explains.

Determined to get in front of the problem, rather than treat the aftermath, Dr Stanley joined the Aboriginal Advancement Council in East Perth, and soon found herself visiting reserves and missions all over Western Australia to learn more about the conditions afflicting Aboriginal families. This experience led her to further her education in public health in the United Kingdom, and upon returning to Perth she established the Western Australia Maternal and Child Health Research Database (MCHRDB) to begin quantifying data on births and maternal and childhood health.

Through developing strong friendships with Indigenous community leaders, she began to understand the complex nature of improving Aboriginal health. In order to create healthier

‘The solutions to closing this gap include recognition of the history of colonisation, reducing racism, understanding the power of culture and land and giving power and responsibility to Aboriginal people and organisations to enable effective services’



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Aboriginal communities, living conditions, education, employment, and cultural self-esteem all need to improve as well. She recognised that creating change in these communities would require a holistic effort and needed to involve and empower Aboriginal leaders.

In 1990, Dr Stanley founded the Telethon Institute for Child Health Research, dedicated to investigating and preventing childhood diseases and disabilities. The Telethon Institute is committed to training and supporting the group of researchers that cared the most about the plight of Indigenous communities – Aboriginals themselves. The Institute has trained numerous Aboriginal PhD and masters students, and facilitated their progression into leadership roles. By employing Aboriginal health workers as research assistants, the Telethon Institute has been able to enrol more Aboriginal mothers and babies in longitudinal research studies, and perform research in Aboriginal communities that far exceeded any previous public health efforts led by non-Aboriginal teams.

In 2005, with a team of Aboriginal investigators, the Institute secured a five-year capacity building grant to train numerous Aboriginal PhD students. In 2010, many of the newly trained Aboriginal researchers from the Telethon Institute partnered with the Western Australian Aboriginal Controlled Health Organisation and Kulunga Research Network

to secure a 5 year, 2.5 million dollar grant to form the Centre for Research Excellence in Aboriginal Health and Wellbeing (CRE). The grant laid out goals for a revolutionary approach to Aboriginal public health – seven years later the CRE is an internationally renowned beacon for transformative approaches to public health.

Lofty Goals

Dr Stanley and her team recognised that to truly alter Aboriginal health trajectories, it was not enough to follow the standard procedure of delivering pre-packaged care without considering community culture and readiness. They needed to partner with and engage the Indigenous Australians that would be receiving care, and in the process, address socioeconomic drivers of health, combat systemic racism in healthcare delivery, and facilitate leadership and empowerment in Aboriginal communities. They recognised that by taking a holistic approach that promotes community building to create healthier environments from the onset, they would not simply be putting a band aid on existing conditions, but getting to the root causes behind health disparity in disenfranchised communities.

Their goals were to generate new knowledge that would lead to improved health outcomes, and to ensure this knowledge was translated into changes in public health policy and practice, while simultaneously facilitating collaboration with Aboriginal

groups and researchers, as well as advancing the training of new Aboriginal researchers and community leaders.

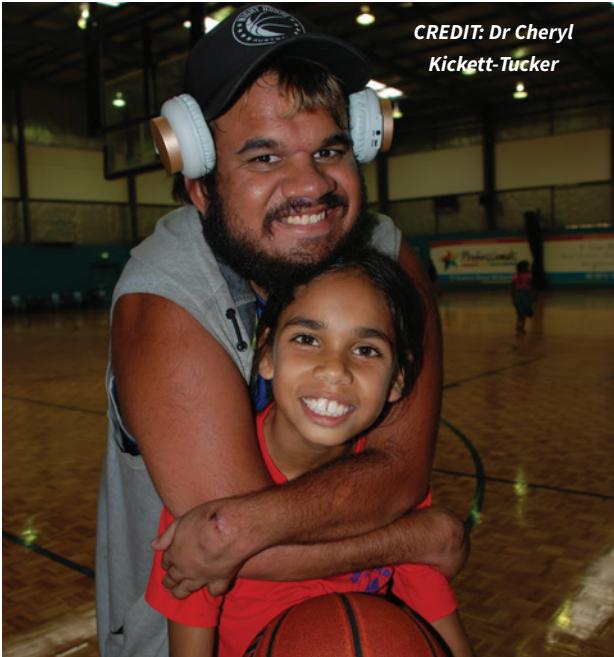
New Knowledge About Old Problems

The CRE's approach to augmenting knowledge about the unique health challenges facing Aboriginal communities involves both quantitative and qualitative strategies. To develop comprehensive childhood and maternal datasets, the CRE researchers built on and combined data from three major Aboriginal health initiatives: the Developmental Pathways Project (DPP), a study following Aboriginal individuals for over 30 years from before birth through adulthood; the Western Australian Aboriginal Child Health Survey, a survey of 1 in 5 Western Australian Aboriginal children; and Dr Stanley's own MCHRDB, which continues to compile data on maternal and childhood health in Indigenous Australian populations. The comprehensive quantitative data gathered from these measures has allowed CRE researchers to distinguish risk factors and health trajectories unique to Aboriginal communities and identify solutions and interventions tailored to these communities.

The CRE combined these results with community engaging qualitative research to develop a holistic perspective on the unique challenges Aboriginal communities face. Using Community based Participatory Action Research (CPAR) methods, the team partners



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with Aboriginal people to build communities. CPAR techniques focus on establishing dialogue with disenfranchised and marginalised groups, empowering them to create positive social change, while recognising and deconstructing systemic racism imposed by colonisation. One of the greatest pitfalls of previous government interventions has been lack of cultural sensitivity and awareness. The CRE is working to develop new measures of cultural competence by which government and non-profit organisations that offer services to Aboriginal communities can be measured.

Strong cultural identity is highly associated with mental wellbeing among the youth of marginalised groups, yet many Australian schools actively suppress the racial identity of Aboriginal students. The CRE is working to measure the association between cultural identity and wellbeing across the lifespan, in order to strengthen Aboriginal racial identity and pride in positive and empowering ways. Through all of these initiatives, the CRE is gathering the most comprehensive datasets on Indigenous Australian health and wellness ever collected, while working to identify and dismantle systemic racism and discrimination that has contributed to Aboriginal struggles.

Shifting Policy for a Brighter Future

To enact genuine positive change in marginalised populations, data collection alone is not enough. This is illustrated by over 20 years of research on Aboriginal communities, that has served to build many researchers' careers, but done little to improve the plight of Aboriginal families. If anything, many past research efforts have served to

perpetuate the impacts of colonisation, by reinforcing exploitative paradigms and racist perspectives. The CRE recognises that in order to strengthen Aboriginal communities and enact effective change, their research must be in partnership with Indigenous peoples, structured to facilitate positive narratives and perceptions, and tracked to ensure only effective strategies persist.

To accomplish this aim, CRE researchers analyse Aboriginal data in contrast to the population as a whole, rather than making race specific comparisons. This helps to reduce the sense of fatalism often seen in research on marginalised groups, and is more effective in identifying factors associated with positive health outcomes that may be unique to Indigenous populations.

The CRE is dedicated to testing the effectiveness of the tools they develop, and maintaining a critical track record of how well their research programs translate into positive health outcomes. In addition to the talented Aboriginal researchers that lead many CRE programs, members of the local Aboriginal community are involved in planning and implementation at the onset of each initiative. This meaningful engagement increases overall participation and fosters collaboration between public health workers and the communities they serve. Finally, the CRE works to promote the successes of Aboriginal-led programs through an extensive outreach strategy in the community at large. The combination of these tactics ensures that the CRE's efforts work to elevate rather than marginalise Indigenous Australians.

Aboriginal Researchers Empowering Aboriginal Communities

One of the subtler lasting effects of colonisation is the tendency to view Indigenous peoples as needing non-Indigenous saviours to lift them out of poor conditions. While this perspective may be well-intentioned, it is problematic because it takes power away from fully-capable Aboriginals and reinforces the false notion that they are somehow lesser than their European contemporaries. 'The main solution to these issues to give the power, capacity, responsibility for them to Aboriginal researchers and professionals,' explains Dr Stanley. The CRE combats the 'white saviour' narrative by supporting the careers of Aboriginal scientists and researchers, and developing cohesive teams of Aboriginal and non-Aboriginal collaborators working together towards a shared goal of Aboriginal empowerment and community responsibility.

They accomplish this through two primary approaches. First, they collaborate tightly with numerous Aboriginal organisations and groups to cooperatively foster programs that benefit Indigenous Australians. This approach ensures that CRE programs are well received across many Aboriginal communities and that positive programs with focuses beyond public health continue to succeed in these communities. Second, the CRE is dedicated to promoting early- and mid-career Aboriginal researchers, community leaders, and public health workers. The Centre actively recruits both Aboriginal and non-Aboriginal PhD students that are dedicated to culturally sensitive public health. It provides facilities and financial support for Aboriginal researchers and research initiatives, along with a well-established mentoring program that is supportive and culturally sensitive.

Through the efforts of Dr Stanley and the researchers at CRE, Aboriginal peoples are empowered to improve their conditions and enjoy healthier lives and communities. The Centre has become an internationally recognised leader in translational research that enables marginalised communities to live better lives.

Meet the researchers



Dr Fiona Stanley, Australian of the Year in 2003, is a vocal advocate for the needs of children and their families. She was the Founding Director of the Telethon Kids Institute, established in Perth from 1990 until 2012. She continues to advocate for the Institute, research and families as their Patron. She is trained in maternal and child health epidemiology and public health, and has spent her career researching the causes of major childhood illnesses such as birth defects.

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Dr Juli Coffin is a prominent Aboriginal researcher with research expertise in cultural security, education and research across a diverse range of chronic diseases, nutrition, contextualising bullying, and health promotion. She holds a Bachelor of Education, a Masters of Public Health and Tropical Medicine and a PhD with an award in excellence, combining her education and cultural learnings to deliver outstanding translation of research into practice.

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Dr Pat Dudgeon is an Aboriginal psychologist and Fellow of the Australian Psychological Society and a Professor at the School of Indigenous Studies at UWA. She is actively involved with the Aboriginal community and her primary research focus includes Indigenous social and emotional wellbeing and suicide prevention. She is currently the director of the *National Empowerment Project* – an Indigenous suicide prevention project working with eleven sites in Aboriginal communities across the country.

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Dr Michael Wright is an Aboriginal researcher who has an extensive and varied array of experience in Aboriginal health, mental health, and education. He holds a PhD from Curtin University, a Masters in Applied Epidemiology from ANU and a Bachelor of Social Work from the University of Western Australia. His research experience and expertise are highly regarded and recognised in the Aboriginal community, with Government and non-Government agencies, and policy-makers.

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Dr Cheryl Kickett-Tucker, an Aboriginal researcher, holds a PhD from Edith Cowan University, Perth, a Masters from the University of Oregon, a Bachelors of Applied Science and an Associate Diploma of Applied Science from Edith Cowan University, Perth. In 2008, Cheryl founded *Pindi Pindi Pty Ltd- Centre for Research Excellence in Aboriginal Wellbeing*, a research hub representing urban Aboriginal people. She has dedicated her career to Aboriginal community development programs.

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Mr Glenn Pearson is an Aboriginal researcher and is the Head of Aboriginal Research and leads the Kulunga Aboriginal Research Development Unit at the Telethon Kids Institute. A trained primary school teacher, he has 15 years of experience within the Australian and State Governments in a range of areas including health, education and child protection. Mr Pearson ensures that the Institute's research reflects the needs of Aboriginal families and is conducted in accord with Aboriginal community ethical and cultural protocols. He is currently completing a Doctorate at the University of Western Australia, exploring delivery of child protection, health and educational services to Aboriginal families.

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Dr Roz Walker is the Head of Aboriginal Maternal Health and Child Development at the Telethon Kids Institute, where she works on several projects which aim to address the social and cultural determinants that impact on Aboriginal maternal, child and adolescent outcomes. She is a Chief Investigator on several national ARC Indigenous Discovery and NHMRC Project grants, and has been involved in research, evaluation and education with Aboriginal communities building local capacity within both Aboriginal and non-Aboriginal organisations for thirty years.

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Dr Rhonda Marriott has over 40 years of experience as a registered nurse and midwife. In 2003, she was invited to become the inaugural Head of the School of Nursing at Murdoch University – becoming the first Indigenous Head of a University School of Nursing in Australia. Over the past 5 years, Rhonda has focussed on full-time research and applies community participatory action research methods to address questions of concern to Aboriginal people and communities. She is the lead investigator on an NHMRC study investigating culturally secure birthing experiences of urban Aboriginal women and their families; and is a chief investigator on 15 other funded research projects.

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Dr Sandra Eades is Australia's first Aboriginal medical doctor to be awarded a Doctorate of Philosophy, with a focus in epidemiology at the Institute for Child Health Research, Perth. Her research career has focused on the epidemiology of Indigenous child health in Australia. Over the past decade, she has made substantial contributions to the area of Aboriginal health and has provided leadership at a national level in Aboriginal research.

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Dr Dawn Bessarab is an Aboriginal researcher and Director for the Centre for Aboriginal Medical and Dental Health at the University of Western Australia. She advocates the importance of understanding the cultural traditions of Aboriginal people and is engaged in research looking at interventions and collaborative approaches to addressing health issues affecting Aboriginal people. Dawn is a chief investigator on a number of National Health and Medical Research Council grants and her expertise in Aboriginal research is highly regarded.

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