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Truth Telling and the “Lead Splinter”: Aboriginal Elders’ Perspectives on Community Service Provision and Intergenerational Trauma

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ABSTRACT

This article is based on PhD research aimed at improving community services for remote Aboriginal people with intergenerational trauma. It focuses on the role that Yamatji Aboriginal Elders played in cocreating a framework to enhance service provision for Aboriginal clients and the importance of local truth telling in this endeavour. Elders specified that local truth telling was essential in building shared understandings of healing from intergenerational trauma between Aboriginal people and community service providers. The characterisation of intergenerational trauma as a “lead splinter”, continually poisoning the wellbeing of Aboriginal people provided an illustration of trauma and the complexities of facilitating healing. The findings emphasise the need for community service providers to undertake truth telling to understand and resolve these key challenges. This engagement facilitates the decolonisation of social work practice through deeper knowledge of local history, incorporation of Aboriginal perspectives of wellbeing, and the development of culturally based approaches to social work with people with intergenerational trauma.

IMPLICATIONS

- Understanding historical trauma and intergenerational trauma can inform meaningful social work practice with Aboriginal service users.
- Decolonising community services and social work practices needs to include an emphasis on local truth telling.

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Intergenerational trauma refers to the transmission of historical trauma impacts, including grief, loss, and cultural separation, across generations (Menzies, 2020; Ralph et al., 2006). The pervasive and devastating impacts of colonisation-related atrocities and the ongoing trauma for First Nations peoples globally are well-documented (Atkinson, 2013; Dudgeon et al., 2020). For Aboriginal and Torres Strait Islander peoples, ongoing trauma symptomatology is reflected through rates of family and domestic violence, significantly higher than average unemployment rates, lower educational

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outcomes, and disproportionately elevated incarceration rates compared to mainstream Australia (Australian Institute of Health and Welfare [AIHW], 2023; Productivity Commission, 2023). Koolmatrie and Williams (2000) specifically identified the connection between unresolved grief and the removal of Indigenous Australian children, highlighting how these historical practices continue to manifest in contemporary trauma symptoms. These disparities are attributed to colonisation, Stolen Generation policies, and ongoing systemic disadvantage (Bennett & Green, 2019; Garvey et al., 2024; Holl et al., 2025) that continue the legacy of many colonial practices. Furthermore, the damaging impacts of intergenerational trauma have been attributed to governments' delayed recognition of its severity on Aboriginal and Torres Strait Islander peoples until recent decades (Menzies, 2020; Ralph et al., 2018).

Despite academic research recognising intergenerational trauma and its detrimental effects on Aboriginal and Torres Strait Islander peoples, broader Australian society has yet to appreciate the impacts of unresolved trauma and grief, compounded by ongoing systemic racism and prejudice against Aboriginal and Torres Strait Islander peoples (Anderson et al., 2023; Ralph et al., 2018). These factors contribute to ongoing emotional harm and underscore the importance of services to support healing in a manner respectful of historical and current experiences of Aboriginal and Torres Strait Islander peoples (Atkinson, 2013; Chamberlain et al., 2022). Dudgeon and colleagues (2020) emphasised that cultural continuity and revitalisation are essential preconditions for responding to intergenerational trauma. This suggests that interventions for people with intergenerational trauma must centralise culture and the perspectives of cultural authorities such as Aboriginal Elders to address how community services can adequately meet the healing needs of Aboriginal and Torres Strait Islander peoples in culturally responsive and trauma-informed ways. Although efforts have been made at better supporting Aboriginal and Torres Strait Islander people with intergenerational trauma within social work practice, the approaches have been based mostly on international models adapted for use in Australia, or Western approaches that do not meet the needs of Aboriginal and Torres Strait Islander people (Bennett, 2022; Bennett & Green, 2019; Garvey et al., 2024; Healy, 2011; Holl et al., 2025). The aim of this study was to develop an Elder-led framework to improve community services for remote Aboriginal people with intergenerational trauma in the Gascoyne region of Western Australia, with particular emphasis on the role of truth telling

Author Positionality

JC (author one) is an Anglo/Idda Wadjjerri woman with maternal connections to Malgana, Wadjjerri and Ingidda country and paternal connections to Great Britain and Europe. The current study is based on findings from her PhD research; she has an interest in Indigenous-led, place-based solutions for mental health and community wellbeing. EG (author two) is a non-Indigenous academic with a keen and devoted interest in the welfare and thriving of Indigenous Australians, human rights, inclusivity, and social justice. DG (author 3) is a Torres Strait Islander man, with Asian and European heritages, and an academic interested in Aboriginal and Torres Strait Islander psychology, social and emotional wellbeing, and the perspectives of providers and recipients of Aboriginal and Torres Strait Islander health service.

Truth Telling as a Means of Understanding Needs

Truth telling allows alternative versions of history, often told by the marginalised and oppressed, to be recognised (Adams et al., 2018; Corntassel, 2009; Maddox & Morton Ninomiya, 2025; Wilmott et al., 2023). As Maddox and Morton Ninomiya (2025) explain, truth telling represents a process aimed at uncovering and acknowledging historical wrongdoings and creating a shared understanding of the past. Although general information is readily available for people to explore Aboriginal history, this information tends to focus on the Stolen Generations or traditional practices and can represent an account “about” Aboriginal people, rather than the *perspective of* Aboriginal people. Further, such information may be met with resistance by approximately one in three non-Indigenous Australians who disbelieve that Indigenous people were wrongly imprisoned, removed from Country, or massacred during colonial history (Anderson et al., 2023; Reconciliation Australia, 2023; Truth Telling Symposium Report, 2019). The *Truth-telling symposium report* stated that, despite evidence of such atrocities, “we have a very disrupted and disputed narrative in terms of what happened to us at the present moment, and if we don’t understand the narrative and if the narrative remains disputed then we’ll never understand magnitude, and if we don’t understand magnitude, we can’t understand healing” (2019, p. 17). Principles of respect and acknowledgement of the impact of history on Aboriginal people can be tokenistic unless accompanied by a rich and effectively engaging connection with the lived experiences of Aboriginal people in an area (Dudgeon et al., 2020; Korff, 2022; Watson, 2009).

The *Uluru statement from the heart* highlighted truth telling as a vital concept of the path towards reconciliation and Makarrata (Anderson et al., 2023; Referendum Council, 2017). Although many non-Indigenous Australians remain unaware of the nation’s violent history and subsequent ongoing damaging impacts (Reconciliation Australia, 2023), truth telling processes create space for acknowledging both historical traumas and the intergenerational and ongoing traumas experienced by contemporary Indigenous Australians (Maddox & Morton Ninomiya, 2025; Pol, 2022). Dalgarno (2025) emphasised that truth telling is necessary to build a shared understanding of our history and to work towards reconciliation and healing. Prioritising truth telling by community service providers is essential as it makes staff aware of their potential ignorance of local history as it applies to social work practice (Bennett, 2022; FitzGerald et al., 2019). As McAvoy (2021) explained, through a lack of truth telling, many Aboriginal people are told:

that our recovery from the trauma of our dispossession is largely our own responsibility, that we should stop living in the past. But that is not possible. Our past, our connection to these lands and waters is such a profoundly spiritual affair that our identity and wellbeing depends on the maintenance and transmission of these connections. (2021 Charles Perkins Memorial Oration and Prize speech)

The contrasting outcomes of truth-telling initiatives in Rwanda (Brounéus, 2010) and Canada (Truth and Reconciliation Commission of Canada, 2015) demonstrated that participant-led approaches yield better outcomes than officially driven processes. When truth-telling initiatives are guided by those who continually and intergenerationally experience the trauma, the process can become a healing journey rather than a potential source of harm.

An Illustration of Truth Telling in the Gascoyne: The Lock Hospitals Tragedy

The importance of truth telling for Yamatji people in the Gascoyne region was highlighted through the positive effect of the Lock Hospitals Tragedy becoming publicised and commemorated (“Lock hospitals on Bernier and Dorre Islands acknowledged in ceremony as ‘horrific piece of WA history’”, ABC Pilbara, 10 Jan 2019). The Lock Hospitals Tragedy, that occurred in the early 1900s, involved more than 800 Aboriginal people being removed from their homelands across Western Australia and taken in chains to “lock hospitals” on Bernier and Dorre Islands for treatment of suspected venereal diseases. On the islands they were fed rations, forced to build makeshift humpies for shelter, and subjected to medical experimentation. Many lost their lives on the islands. A descendant of a victim of the Lock Hospitals Tragedy stated, “It’s important for other families because of the trauma and the hurt that we have suffered, knowing what happened to our ancestors and the horrific things that were done to them” (Michelmores, 2018). The emotional impacts of the Lock Hospitals Tragedy led Aboriginal people in the region to be silent on the matter. The implications of this were that high-ranking government officials have remained unaware of the Tragedy until quite recently (Michelmores, 2018).

Following the history being uncovered and publicly acknowledged, Aboriginal leaders affirmed “healing does start with truth telling” (Michelmores, 2019). The effectiveness of healing through truth telling is illustrated through the Lock Hospital Tragedy commemoration. As Ingidda Elder Marion Crowe stated, “Look, learn and listen and then you’ll understand ... we just helped the old people (spirits) go through and they did come and they whistled as they went past ... you can feel it now, they are all here”. (Hinaki, 2019). This example is particularly relevant as it occurred within the same region where the research on which the current article is based was conducted; it involved the ancestors of author one, and illustrates the profound impact that local truth telling can have on healing processes for Aboriginal communities experiencing intergenerational trauma.

Driving Cultural Continuation—The Role of Elders

Despite the challenges that stem from intergenerational trauma, Aboriginal and Torres Strait Islander peoples continue to engage in cultural practices, form strong communities, and contribute positively to Australia’s social, cultural, and economic landscapes (Menzies, 2020). One of the drivers of the continuation of culture is the effort of Aboriginal and Torres Strait Islander Elders. As Elders hold a unique and highly respected position within Aboriginal communities as counsellors, knowledge holders, and teachers, their insights into effective provision of social work and other community services are unlike any other (Busija et al., 2020; Cox et al., 2021). McKivett et al. (2020) have asserted that Aboriginal and Torres Strait Islander Elders are recognised as the custodians of cultural knowledge and practice, and are highly respected for their wisdom, experience, and contributions to community wellbeing. Their deep cultural wisdom and lifetime of supporting community position them as experts in best practice in this space. The current article, thus, focuses on the voices of Elders, not as consultants on a solution, but rather as the codesigners and artists creating a framework for community service

provision for Aboriginal people with intergenerational trauma. This offers an important counterpoint to concerns raised by Skogerbø et al. (2024) that institution-led, truth-telling initiatives minimise marginalised voices.

The current article is based on a broader study that developed a framework for improving community services for Aboriginal people with intergenerational trauma in the Gascoyne region through a codesign approach with four Elders and consultations with two reference groups. The findings reported here highlight local truth telling as conceptualised through a “lead splinter” metaphor and clients on healing journeys.

Method

Research Design

The qualitative codesigned study on which the current article is based was guided by Indigenous research principles to investigate how community service provision could be improved for Aboriginal people with intergenerational trauma in the Gascoyne region. The research asked “What are the perspectives of Aboriginal Elders in the Gascoyne region regarding effective community service provision for Aboriginal people who have experienced intergenerational trauma?” The study developed a codesigned framework to enhance service provision through centring Aboriginal perspectives.

Australian Indigenous approaches to research have identified the need for Indigenous-led models (Macdonald et al., 2022; Martin-Booran Mirraboopa, 2003), where “Indigenist research occurs through centring Aboriginal ways of Knowing, Ways of Being and Ways of Doing in alignment with aspects of Western qualitative research frameworks” (Martin-Booran Mirraboopa, 2003, p. 211). The study was based on Dadirri and Aboriginal ways of Knowing, Being and Doing that centralise cultural perspectives within Western research practices.

Dadirri, originating from the Aboriginal peoples of the Daly River region, involves deep listening, quiet still awareness, and accommodation (Ungunmerr-Baumann et al., 2022). As Ungunmerr-Baumann et al. (2022) have explained, Dadirri enables a respectful stance, that recognises that knowledge revealed through yarning cannot be rushed but rather emerges through relationship and trust. Dadirri was employed throughout the research process in specific ways:

1. The lead researcher practised Dadirri during yarning sessions with Elders, maintaining a stance of deep listening without interruption, allowing silences to be comfortable rather than rushed, and respecting the pace and direction set by Elders.
2. Dadirri informed the approach to data collection, with multiple sessions held with each Elder to allow time for reflection, relationship building, and the gradual unfolding of knowledge at a pace that honoured cultural protocols.
3. During data analysis, Dadirri guided the researcher to sit with the data in stillness, often on Country, before attempting to identify themes or meanings, allowing deeper understandings to emerge.
4. The practice of Dadirri supported the codesign approach by creating space for Elders’ leadership in the research process, acknowledging their authority and wisdom in determining how the framework should be developed.

The codesign methodology positioned Elders as coleaders and knowledge authorities throughout the research process (Trischler et al., 2019). This manifested through collaborative development of the research agreement, Elder-led identification of key issues, iterative development of the framework, and joint decision making regarding dissemination.

Epistemologically, social constructionism (Schwandt, 2003) supported the integration of social influences on interpretations of Aboriginal people with intergenerational trauma, complemented by symbolic interactionism (Blumer, 1986; Carter & Alvarado, 2018), that recognised participants' agency within the research experience. The decolonising approach involved centring Aboriginal ways of knowing throughout all phases, examining power dynamics, challenging Western-centric knowledge systems, ensuring Aboriginal data sovereignty, and prioritising benefits to Aboriginal communities (Laenui, 2000; Muller, 2023; Ryder et al., 2020). The study on which the current article is based was approved by the University Human Research Ethics Committee (approval number 2021-03078-MORT).

Participants

Participants were four Elders from the Gascoyne region (Yamatji Countries), representing three of the 11 Aboriginal language groups in the area. Recruited through established community networks, the Elders (two females, two males, aged 60–85 years) were identified as cultural knowledge holders. Six staff members from local community service providers comprised Reference Group A, representing social work, alcohol and other drug rehabilitation, policing, and youth work. Four members of the broader local multicultural community comprised Reference Group B. The role of reference groups was to provide contextual information regarding considerations and potential limitations from service provider and local community perspectives. Voluntary participation in the research was advertised via local government agencies, local Aboriginal corporations, and direct contact with community service providers. To protect cultural intellectual property and data sovereignty, Elders and the lead researcher created a research agreement covering intellectual property management, ownership, reproduction of outputs, timeframes, and dispute resolution.

Data Collection and Analysis

Data collection employed cultural tools including yarning, art, Dadirri, and storytelling. Due to COVID-19, individual yarning sessions replaced planned yarning circles. Sessions were conducted face-to-face, via phone, and video calls between September 2022 and June 2024, with each Elder participating in between two and seven sessions. Yarning followed cultural protocols (Barlo et al., 2021; Bessarab & Ng'andu, 2010) and included member checking throughout. All sessions were audio recorded, with permission, and transcribed. Interpretive Phenomenological Analysis (Eatough & Smith, 2017) guided data analysis alongside the practice of Dadirri. Member checking was conducted throughout, with Elders invited to provide clarity or corrections to emerging themes. Self-reports from Reference Group A and Reference Group B enriched the study with their experiences and insights.

Findings

The study centred around the lived experiences of Aboriginal Elders in the Gascoyne region of Western Australia and investigated how Aboriginal people understand and engage with service and service providers, and the ways in which these may be improved. The Elders offered important insights into the conceptualisation of trauma, the nature of healing, and the role of service providers in this process. Central to these priorities was the need for local truth telling.

Conceptualising Intergenerational Trauma

All participating Elders asserted that truth telling, supported effectively by non-Aboriginal organisations, is pivotal in aiding non-Aboriginal community service workers to comprehend Aboriginal experiences. To illustrate the significance of truth telling, intergenerational trauma was described by an Elder using the metaphor of a “lead splinter”:

You know it’s there, you feel the pain when you try to move and go on with your life. Some people will realise it’s there, but they think it’s so small, they don’t see why it’s bothering you so much. They don’t know it’s spreading into your blood, making you sicker and sicker. Some people will say, “I’ve had splinters before, it’s no big deal,” but they don’t feel it like you do. So, you think something is wrong with you. But then you go see a doctor who looks at it and says, “Yeah this makes sense. This was poisoning you. Let’s get it out of you, and the pain will slowly start to get better.” There was nothing wrong with you, just the splinter. (Participant 4)

This comparison illustrates how unresolved trauma can perpetuate pain and suffering. The healing process itself is painful, akin to the removal of a splinter. However, with appropriate support and opportunities, healing is achievable. Without healing, this pain can become normalised, leading to a diminished quality of life and an increased risk of further complications. Interventions that do not address the splinter, however, can lead to lack of progress, resulting in diminished self-worth. The conceptualisation of trauma as a “lead splinter” was confirmed in member checking by other Elders who agreed with the appropriateness of the metaphor.

The Complexity of Splinter Removal

The image of the “lead splinter” underscores the pervasive effects of unresolved intergenerational trauma and the positive impact of its resolution. The prevalence of trauma among Elders and other Aboriginal individuals in the Gascoyne region suggests that many splinters are embedded and that this should not be overlooked or undervalued, as neglecting it may perpetuate ongoing intergenerational trauma. As one Elder explained: “It’s like we’re carrying around these splinters from our parents, our grandparents ... they’re deep under our skin. Some of us don’t even know they’re there, but they make us sick anyway” (Participant 3). Another Elder emphasised how this collective trauma affects the entire community: “We all feel it, every one of us. Some of us can get on with our lives, and some of us, the pain is always there, they can’t live with it. It pulls you down. It’s no good” (Participant 1).

Elders explained that the process of truth telling—analogue to extracting a splinter—is painful but essential for treating and initiating healing. Elders indicated that truth telling aims to enable community service providers to support clients. Service providers may not always be in position to remove the splinter themselves, a task that is both painful and challenging. Nevertheless, they hold the privileged role of accompanying clients as they acknowledge historical atrocities as well as continuous mistreatment and provide support throughout its acknowledgement and through the facilitation of healing. The perspective that service providers *accompany* clients through working towards healing represents a shift in provider—client relationships that are typically characterised by values like “empowerment” and “support”, which place the expertise in the hands of the service provider. An Elder described the experience of being supported to process trauma: “Sometimes we cry, you know? Big tears, not just a little snuffle. But we get it out and then we keep going. It keeps us strong, being together like that” (Participant 3).

Good Foundations Are Built on Truth

The power of listening to clients’ life stories, including intergenerational stories, was captured in the words of an Elder who stated:

Outcomes could be so different ... some people have been so badly traumatised, defeated in life ... it’s just so overwhelming, but at least working with these service providers, they may have developed a bit of self-esteem and been empowered because someone actually listened to my story, and I think they cared about me. I think they cared about my story. (Participant 2)

One Elder described the embodied experience of the Lock Hospitals Tragedy:

When you think about your Old People (ancestors), and them on those islands. The pain is there. You can feel it. People have read it but the people still feel it. When I walk in a certain place, and I’ll cry. That place holds the trauma; when I stand there I feel what they felt. Terrified, really, because they’d never seen an ocean really. And being in chains, from the bush, all from different tribes, and to be chained for three or four months, never undone until they got to the islands. (Participant 1)

Another Elder emphasised the importance of service providers having historical knowledge: “If they [service providers] don’t know our history, they can’t understand why we are how we are. They think we’re just being difficult or don’t want to help, but they’re not seeing the whole picture” (Participant 3). This sentiment was further reinforced by Participant 1 when discussing attempts by service providers to support Aboriginal clients without understanding their historical context: “Yes, you see it now. They did all the things in that book of theirs, but they didn’t know the history. So none of it worked, did it?”

Service providers’ willingness to engage in truth telling lays the foundation for healing. Although individual differences in trauma experiences may necessitate individualised approaches, common themes in service provision include access to high-quality care, support from others, and a professional team committed to understanding clients and their circumstances comprehensively. Therefore, effective community service provision, such as social work, demands truth telling of local historical trauma that has perpetuated intergenerational trauma and associated symptomology.

Discussion

This study aimed to develop an Elder-led framework to improve community service provision for remote Aboriginal people with intergenerational trauma in the Gascoyne region of Western Australia, with particular emphasis on the role of truth telling. The Elders' conceptualisation of truth telling as essential to service provision aligns with growing recognition of decolonised truth telling as fundamental to reconciliation and healing for Aboriginal peoples (Anderson et al., 2023; Muller 2023). The “lead splinter” metaphor offers a framework for understanding both the harmful effects of unaddressed historical trauma and the potential for acceptance through acknowledging it, resonating with literature on unresolved historical trauma (Menziés, 2020). This perspective parallels Aboriginal healing models that identify acknowledgment of historical trauma as a critical first step in healing (Dudgeon et al., 2020).

Bennett et al. (2018) have emphasised that effective social work with Aboriginal communities requires practitioners to develop historical consciousness about colonisation—precisely what the Elders identified as lacking in many service providers. The metaphor illustrates why generic approaches often fail for Aboriginal clients. When service providers fail to recognise historical context, they may misinterpret symptoms as individual failings rather than manifestations of deeper historical wounds (Chamberlain et al., 2022). The metaphor emphasises that healing is possible but requires acknowledgement and appropriate support—a position supported by emerging literature on Indigenous healing frameworks (Maddox & Morton Ninomiya, 2025).

A significant finding is the Elders' articulation of what should be the service providers' role, that of “accompanying” clients through healing rather than “empowering” clients from a position of expertise. This reconceptualisation represents a shift from dominant social work paradigms that position practitioners as experts (Bennett, 2022; Bennett et al., 2018). The accompaniment model places expertise and authority with Aboriginal people and positions service providers as allies. This finding aligns with calls for decolonising social work practice (Holl et al., 2025) and Bennett and Green's (2019) argument that effective practice requires social workers to relinquish the expert role and instead practice from a position of learning and collaboration. Cox et al. (2021) similarly found that Aboriginal people value service providers who listen deeply and recognise client expertise in their own healing journeys.

Implications for Social Work Practice

The Elders emphasised that local truth-telling initiatives must be given the approval by local Aboriginal Elders to be effective and avoid retraumatisation. This finding has significant implications for how organisations approach truth-telling efforts. Truth-telling processes carry a risk of retraumatisation when poorly executed, with risks mitigated through Indigenous leadership (Maddox & Morton Ninomiya, 2025). The Elders' position for participant-driven, truth-telling initiatives is supported by the contrasting outcomes of Rwandan (Brounéus, 2010) and Canadian (Truth and Reconciliation Commission of Canada, 2015) truth-telling initiatives, demonstrating official-driven compared to participant-led truth telling.

The findings have several important implications for social work practice. First, they suggest that social workers should develop deeper understanding of local historical contexts through Elder-led, truth-telling processes. Second, they challenge social workers to reconceptualise their role from expert to ally, recognising Aboriginal people's expertise in their own healing journeys. Third, organisations would do well to develop new approaches to partnering with Aboriginal Elders that position them as authorities rather than consultants. Finally, effective service provision must be locally responsive rather than standardised, tailored to local cultural contexts, histories, and healing traditions.

Limitations

The study on which the current article is based included a small sample of Elders from three language groups within the Gascoyne region, and while their perspectives offer valuable insights, they cannot represent the views of all Aboriginal Elders or communities. COVID-19 necessitated changes to the planned methodology, with individual yarning sessions replacing yarning circles, potentially limiting collaborative dialogue. Despite these limitations, the in-depth engagement with Elders, the codesign approach, and consultations with the reference groups helped ensure that the findings authentically represented the involved Elders' perspectives on truth telling and community service provision.

Conclusion

Ineffective community service provision for remote Aboriginal people who live with intergenerational trauma is often derived from Western approaches that do not align with Aboriginal cultural needs. This article has provided an argument for prioritising local truth telling to facilitate effective service provision as proposed by Aboriginal Elders in the Gascoyne region of Western Australia. Through supporting local truth telling, community service providers may work to generate shared understandings of the needs and experiences of Aboriginal people with intergenerational trauma, to better accompany Aboriginal clients on their healing journey.

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