4th International Indigenous Voices in Social Work Conference - ALTA, Norway
11-14 June, 2017

We are pleased to share the latest information from our Sami friends in Norway to give you an idea of what to expect and time to plan and prepare to this amazing event. In this newsletter we include information on the key note speakers, their biographies and abstracts along with information on where to go to get the latest information as it comes to hand. (See pages 8-10 for more details)

Wrapping up the 3IISWC

Last September's International Indigenous Social Work Conference in Darwin, was a remarkable experience for so many local and international delegates and was a resounding success. Thank you to everyone involved for their time, support, resources and amazing efforts.

Professor Steve Larkin from Darwin presented our keynote opening address and has shared his remarks in this newsletter. Also, Josephine Lee, and Carmel Laragy have included their article on the National Disability Insurance Scheme which is based on a workshop they ran at this same conference.

We think you will enjoy reading their remarks.

The NCATSISWA Board

The ascendency of Indigenous Knowledges: Providing leadership in the healing of Aboriginal and Torres Strait Islander peoples

It is my responsibility to acknowledge the Larrakia people whose lands this conference takes place. I also acknowledge their elders and past, all Larrakia people in attendance today, to all other Aboriginal and Torres Islander peoples from around Australia, and also other Indigenous peoples from around the world.

The theme of this conference is Indigenous Knowledge’s: Recognising, Reclaiming and Celebrating Indigenous Heritage. It is only the third time internationally that we have gathered to discuss this in the context of our Social Work Profession. It is of particular relevance that we are hosting this conference in Australia at a point in time that our nation is discussing and striving for recognition of Aboriginal and Torres Strait Islander peoples within our constitution.

In 2015, it is a poignant reminder that despite Australian Indigenous cultures being the longest continuing cultures in the world, the fight for equality and parity in our own lands continues and is an ongoing one.

This morning I will very briefly outline for you the context of Social work in Australia and its relationship with Indigenous knowledges, detailing both its limitations and impacts. I will demonstrate how the preferencing of Indigenous knowledges within the Aboriginal and Torres Strait Islander Healing Foundation contributes to the achievement of significant outcomes for our people. I will then contrast this with the comprehensive failure by governments to recognise and apply our wisdom and knowledge within the field of child protection that creates even more challenging circumstances for our peoples. Finally I will explain how
Firstly, Social work in Australia has a chequered history as it does in many colonised countries. Whilst modern social work is framed on principles such as social justice and equity, its historical practices inevitably failed in this regard because of its alignment with state projects of colonisation. Some scholars (Bennett, Zubrzycki and Bacon, 2011) have correctly pointed out that social work has been harshly critiqued for its role in the history of Indigenous affairs in Australia, particularly in relation to the “Stolen Generations”; a term applied to the thousands of Indigenous Australians who were forcibly removed by the State from their families as children because of their Indigeneity, and raised in government institutions and foster homes between 1910 and 1970 (Briskman, 2003, 2007; Human Rights and Equal Opportunity Commission, 1997; King, 2003).

While little has been documented of the specific role of social work in these events, Bennett et al point out that this is most likely due to the lack of systematic study of the profession in that period. This in itself likely reflects the apathy in our broader society brought about by colonial denial, to avoid examining and reflecting on alternative versions of the truth of the past and the pain this has created for our communities.

In recent decades, a changed relationship between social work and Indigenous Australians appears to have materialised in many areas. For example, the Australian Association of Social Workers (AASW) have since issued a formal apology for the involvement of both qualified and unqualified social workers for their roles in contributing to the Stolen Generations, and they are to be commended for that.

However, whilst social work with Australia’s Aboriginal and Torres Islander people has been largely informed by the history of colonisation, other scholars have suggested that the theory and practice of social work processes and practices, its impact on individuals and communities, the role of social work in socio-political history, its theories of trauma, racism, human rights and whiteness, as well as generic social work theories of systems, and its socio-ecological and postmodern theories; do not access or engage Indigenous ways of knowing and healing as we would expect. (Bennett, Zubrzycki & Bacon, Australian Social Work, Volume 64, 2011).

Baldry and Green in 2008 highlighted how in Australia, Aboriginal and Torres Strait Islander peoples have always been positioned as the disadvantaged, that is, those always in extreme need of social services, education, housing, and child protection services and so therefore have been, and remain, the recipients of social work’s practice, not active participants in its theorising and/ or practice development. We might ask why social work has not interrogated the politics of advantage, why privilege and advantage based on race and gender are left invisible.

The fact that Indigenous Australians had lived highly successfully and harmoniously with and in their land and had developed extraordinary social and community skills is rarely acknowledged. The welfare and social policies imposed upon Indigenous Australians by the British invaders did not in any way value these traditional systems.

In fact, there was a determined effort, driven by colonialist, racist ideology, to eradicate them (Baldry & Green, 2002; Reynolds, 1996). This lack of understanding and recognition on the part of non-Indigenous governments and bureaucracies go a long way to explaining and understanding the continuing poor results from imposed non-Indigenous designed programs. (Green & Baldry Australia Social Work Vol 61, 2008)

Whilst we would like to think we have progressed, I would argue that many government policies but especially the Northern Territory Intervention, the single most pervasive policy intervention in the lives of Indigenous people in this nation, was based on these exact ideologies.

In 2011 I argued that a more insidious form of exclusion exists in the higher education academy and more generally within society. This exclusion is institutional in nature and takes the form of a dominant epistemology (ways of knowing what is “real”) in teaching, assessment, and research that serves to disregard or even devalue Indigenous ways of knowing.

This dominant epistemology—often referred to by critical race theorists as the neo-liberal positivist epistemology – pervades all aspects of Australia’s higher education institutions, including pedagogical approaches, the structure and governance of institutions, staffing, and research. Its continued dominance is due to its perceived objectivity and neutrality, but in operation, it is anything but that. In action, the dominant pedagogical approach, assessment paradigm, and research methods converge to disregard and devalue Indigenous perspectives. (Larkin, Australian Social Work Vol 64, 2011)

Thus it is imperative that our institutions and our profession engage and apply Indigenous knowledges to their work. Whiteside, Tsey and Earls point out that new approaches to research are attempting to bring “subjugated knowledge to the forefront and to include the marginalized in the research experience, valuing their meanings, interpretations and participation”.

There is growth in such collaborative research underway, involving Indigenous community members and Indigenous and non-Indigenous social work practitioners and academics, exploring social work practice within Indigenous communities and aiming to better inform social work education and practice, and there is now a growing body of Indigenous social work professionals with the establishment of the National Coalition of Aboriginal and Torres Strait Islander Social Workers Association Inc., who are hosting this conference (Whiteside, Tsey & Earles, Vol 64, 2021).

Thus whilst there has been some progress achieved with many of our Indigenous and Non-Indigenous social work researchers, academics and practitioners debating, discussing and collaborating on emerging ideas.
and theorising, the marginalisation of Aboriginal and Torres Strait knowledges continues to be a battle. For example, how many of the current social work programs do not include specific Indigenous knowledge or healing subjects as part of their core curricula – many are still at the elective level, so we still have far to go.

And this is one reason why I am proud to be the Chair of the Aboriginal and Torres Strait Islander Healing Foundation, an Indigenous organisation that prioritises the reclamation of our own knowledges in the development of healing practices in this nation.

On the first anniversary of Prime Minister Kevin Rudd’s apology to the Stolen Generations, the Australian government acknowledged the need to continue to support Australia’s first people through specific actions to address trauma and grief and to aid healing in Indigenous communities. Consequently, the Aboriginal and Torres Strait Islander Healing Foundation was established in 2009 to support community-based healing initiatives to address the traumatic historical legacy of colonisation, forced removals and other past government policies.

The Healing Foundation designs and develops its evidence based programs with the knowledges of Aboriginal and Torres Strait Islander communities. The Foundation understands healing as the restoration of harmony and balance rather than the Western construct of reducing symptoms or restoring function (Milroy, 2008).

Healing implies restoration of health in the broadest sense, defined in the 1st National Aboriginal Health Strategy (1989), to include “not just the physical wellbeing of the individual but the social, emotional, and cultural wellbeing of the whole community... a whole-of-life view [that] also includes the cyclical concept of life-death-life” (National Aboriginal Health Strategy Working Party, 1989).

Given the complexity and diversity of needs in Indigenous communities, “healing” will mean different things to different people. Healing relates to the personal journey of individuals, families and communities dealing with the trauma caused by past policies and current disadvantage. (Caurna, Healing for Indigenous people, Family Relationships Quarterly, No 17, 2010)

Healing Foundation evidence indicates that healing is:

- an ongoing journey to restore and sustain holistic wellbeing, including physical, social, economic, emotional and spiritual wellbeing.
- led by Aboriginal and Torres Strait Islander people, with and for their own communities.
- Healing is founded in an Aboriginal and Torres Strait Islander worldview, and strengthens cultures.
- Healing empowers individuals and communities to overcome trauma and its causes, as well as its symptoms.

In five short years the Healing Foundation has:

- Provided funding to over 100 community organisations to lead and develop healing projects across our nation
- Established an impressive body of evidence with over 22 evaluations and publications in partnership with over 8 research institutions and policy bodies
- Developed and led in partnership with our communities the establishment of community healing forums and gatherings, assisting our people to create the template for healing in their region
- Assisted over 20,000 Indigenous community members to be supported on a healing journey

Aboriginal and Torres Strait Islander people have developed culturally effective ways of healing trauma and loss. The Healing Foundation initiatives are reconnecting Aboriginal and Torres Strait Islander people to these ways.

The key to the Healing Foundation approach is reinstating and reconnecting communities to their core cultural value systems to enable them to locate the solutions to their problems based on their thousands of years of knowledge and incorporating the best of modern knowledge systems to create a pathway forward.

The way that the Healing Foundation achieves this is through a process of effective and meaningful co-design. This incorporates the key principle of working directly with Aboriginal men, women and children to empower them to develop solutions for themselves. This work enables healing to be embedded in service delivery. The functionality of the community thus improves.

This process has been evidenced in the NT based Our Men Our Healing project, the first Healing Foundation program dedicated to Aboriginal and Torres Strait Islander men, and was made possible through a $600,000 contribution from the Northern Territory Office of Children and Families.

Aboriginal and Torres Strait Islander men in these communities have acknowledged their uncertainty about their traditional roles and their disengagement from both their culture and identity. The result has seen:

- Poor social, spiritual, physical, mental and emotional wellbeing
- Dismemberment and low self-esteem
- Unemployment and economic disadvantage
- Substance use and misuse
- Child and family abuse, neglect and breakdown
- Lateral and sexual community violence
- Incarceration and recidivism
- Self-harm and suicide.

The intent of the Our Men Our Healing has been to reconnect men in their communities to culturally significant roles and responsibilities.

A critical step in enabling men in communities to begin the complex and difficult process of healing, Our Men Our Healing was underpinned by an Aboriginal and Torres Strait Islander knowledges, and its design was driven through Indigenous cultural authority. Accordingly, the Aboriginal and Torres Strait Islander men in the program became the influencers and change agents.

The external evaluation undertaken in 2015 found that participation rates in each of the 3 programs has been strong (across age ranges) and increasing. Over 448 men have participated in the three community healing programs with an additional nine jobs being created. The evaluation not only validated the self-
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Critical success factors for the Our Men Our Healing program included:

- At each site the elements that need to be present for a quality healing program including: addressing local issues; local leadership; an understanding of the impact of trauma and grief; being proactive rather than reactive; building individual, family and community capacity; and combining Western and Indigenous healing practices were all found to be present.
- A meaningful co-design process that ensured that there was ownership and agency by the men and the community.
- The presence of a strong auspicing organisation in the community that provided support and legitimacy to the program.
- The presence of individual leadership to build capacity within other individuals and the group, families and community.
- A space for men to meet that is culturally safe and is recognised in the community as a place for men to talk, cool off, share and support each other. Without such a place / space the program essentially has no home and can therefore stall.
- A reconnecting to culture and country that is embedded or even embodied within any cultural healing program for men.
- The inclusion of women who are informed and supportive of the program.

A key outcome of the program appears to be enhanced self-esteem and confidence in the men. Men became stronger and were more able to take up their role as providers (through culture and employment), as protectors (of families and communities) and as teachers (of their children and others).

This is reflected in the words of the men who shared the impact of the Healing work in their lives.

- It’s about sharing good things and bad, about building role models and helping the community... they need us men... to be a better community we have to get better ourselves.
- We are learning about what violence is and what drives it and how we can heal as men and change. Without this program we would keep doing the same old thing. It’s been wonderful to come out and build my spirit and find the answers. I’m getting a lot of value for myself and have a little family of my own.
- It’s private and supportive and we hold one another like we have not done before and it frees us and puts the good spirit in us.
- The men’s group brings it [trauma] out of us for family, community, culture and children. We have a lot of pain in ourselves and if the group was not here we could not tell our stories of domestic violence. They would not get talked about.

This is also reflected by our women and their views of the program:

- The program has been really successful with men speaking more and owning their mistakes. They are open about their mistakes and willing to share them for the benefit of others. Tyson [pseudonym] has gone to apologize to his neighbours for disturbing them which would never have happened before...

A further endorsement for the Men’s Healing Program came from the Northern Territory Department of Corrections. With reference to quantifiable data, the Department reported that over a 2 year period the number of men from the community registered with Corrections had reduced from 80 to 40 men. Of these 40, there were 20 that had been referred to the Wurrumiyanga Men’s Healing Program.

Importantly, the Department stated that:

“many of the men do not reoffend and the pleasing thing is that many of the men still stay in the program and the change is remarkable... there has been an amazing transformation in the last couple of years”.

Through the process of co-design, men from Wurrumiyanga, Maningrida and Ngukurr have been able to take ownership of their challenges and the solutions.

The process of co-design ensured that there was male ownership and agency within the program that positioned themselves as the agents of change. Co-design meant that the men were given tools and resources to support the program but much more importantly, the design of the program valued their culture and their knowledge systems.

This led to an increased sense of confidence where the men believed that “our own solutions can work best if we own them and take responsibility for them”. The evaluation concluded it was doubtful whether the outcomes achieved could have emerged as quickly – indeed if at all – had the co-design elements described earlier had not been present.

Through the program men have begun to see themselves, their families, their culture and their community through a new lens –their own. It is a lens of hope, respect and possibility. As many men noted, a number of the challenges have now gone away and there is still a complex and difficult local environment. However, Our Men Our Healing is providing tangible evidence of change and increased connection to culture, education and employment.

Aboriginal men in other jurisdictions have experienced the imposition of many non-Indigenous designed policy and programs. Yet despite enormous amounts of funds and good will invested, these programs have not been able to the changes they sought. What these programs have lacked is a focus on creating change through the utilisation of Indigenous knowledges. The Our Men Our Healing program provides compelling evidence that where Indigenous knowledges engaged and applied, sustainable change can be achieved within short periods.

So what might this mean for Child protection programs?

The Child Protection system is a good example of a current system that could benefit from the application of Indigenous knowledge systems. In particular, the growing over-representation of Indigenous children in the child protection system provides...
the rationale for the intervention of Indigenous knowledges.

National data from 2014 indicates that whilst only 3% of the our population, Aboriginal and Torres Strait Islander children were 7 times more likely to be the subject of substantiated reports than non-Aboriginal children (with rates of 38.8 per 1,000 children compared with 5.7 per 1,000) (AIHW, 2015).

At 30 June 2014, there were 14,991 Aboriginal and Torres Strait Islander children in care (OOHC), a rate of 51.4 per 1,000 Indigenous children. The national rate of Indigenous children in care (OOHC) was almost 10 times the rate of other children.

The reasons for this are complex and are influenced by past policies like forced removals, the effects of lower socio-economic status and differences in child rearing practices and intergenerational trauma (Human Rights and Equal Opportunity Commission [HREOC], 1997).

Yet despite these shocking figures, Aboriginal organisations struggle for formal opportunities to contribute their knowledges into policy service design, nor do governments actively seek them. The inclusion of these knowledges would provide valuable evidence to create inter alia, the changed environments that would reduce these figures.

For example, SNAICC our secretariat for Aboriginal and Torres Strait Islander children has for over 30 years continued to provide governments with key evidence based on Indigenous knowledges that might have or would have prevented the vast number of our children into the out of home care system. Our jurisdictions lack any accountability in their failure to take note of such evidence and their failure to do so subsequently prevents a flow of resources to Indigenous organisations.

Through both direct and indirect means, Indigenous knowledges are precluded from existing and developing bodies of evidence that supposedly drive change in our communities.

Until academic institutions that train social workers, and indeed the profession itself operationalise epistemological equivalence and a parity of esteem to the key principles of indigenous knowledge, then social work remains complicit in the perpetuation of Indigenous oppression and disadvantage.

Our profession has the ability to truly embrace our strong traditions in social justice and to uphold the concepts of self-determination and equity. It can do this through Aboriginal and Torres Strait Islander social workers leading this change in parallel with the commitment to embedding Indigenous knowledges in the construction of evidenced based policy.

Finally, this approach must adopt what Gillborn refers to as “a radical critical edge” (Gillborn, 2006, p. 7). The risk for social work scholars in this field is the trap of placing their emphasis on system reform “while taking for granted the essential shape and character of the system itself” (Gillborn, 2006, p. 6).

Pursuing a reform agenda is not without utility when it involves mapping the scale of inequality and the generation of local level approaches to improve the situation, but I echo Gillborn’s counsel that such efforts must also engage with “the most powerful forces operating at the societal level to sustain and extend these inequalities” or otherwise risk “tinkering with the system to make its outputs slightly less awful, but leaving untouched the fundamental shape, scale and purpose of the system itself” (Gillborn, 2006:7).

As a final example, Indigenous social workers around the world often attribute the ongoing disadvantage of their peoples, amongst other things, to the continuity of colonisation ideologies and practices, both of which are founded on white theories of race and racism. However it has not been their intent to promote the idea that every racial disparity or negative experience an Indigenous person has is attributable to racism. However, it would seem that nearly all scholars and policy analysts rely on everything but racism when explaining, theorising and discussing the failure to achieve social justice outcomes for Indigenous people (Harper, 2012, p. 24).

So in this example, our failure to seriously investigate and study race, racism and racist institutional norms will consign us to a trajectory where we will only study the ‘symptom’ (racial disparities) without understanding the ‘disease’ (racism and white supremacy).

Social work as a profession has a duty to lead. And it must do so with us alongside and in front. We are no longer prepared to walk in its shadow.

Thank you.

References


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Indigenous social work practice and the National Disability Insurance Scheme (NDIS)

Authors: Josephine Lee & Carmel Laragy

At the Third International Indigenous Social Work Conference held in Darwin in September 2015 we facilitated a workshop that explored how Indigenous communities can benefit from Australia’s National Disability Insurance Scheme (NDIS). In this article we report on the workshop and the scenario and strategies the workshop produced for social workers working with Indigenous people in the NDIS environment.

We are Josephine Lee, an Indigenous woman, a social worker and the Senior School Counsellor with the Department of Education in the Northern Territory who has a wealth of experience working with Indigenous communities in a range of positions; and Carmel Laragy who worked as a social worker in a range of fields before teaching social work and later moving to research, particularly studying the introduction of individualised funding and the NDIS. For the workshop we combined our knowledge of social work practice with Indigenous communities and working within the NDIS environment. IN the workshop we presented the values and principles that underpin our work and we gave a brief introduction to the NDIS. The workshop participants created a scenario and identified what might help the people involved. We wanted to show that NDIS offers opportunities for Indigenous communities that social workers can utilise. In this paper we also consider additional supports that can be provided through the NDIS.

Principles

Principles of human rights and social justice described in the United Nations Universal Declaration of Human Rights (1948) underpin social work profession. These have been put into practice in the Australian Association of Social Work’s Code of Ethics and Practice Standards. We drew upon these principles and practices when planning for social work with Indigenous communities in the NDIS context. The practice guidelines we follow, based on principles of human rights and social justice, are:

- Awareness of the impact of colonisation
- Listen to people and their community
- People are the knowledge holders / experts in their own lives
- Empowerment
- Strengths based approach
- Facilitate collective decision making
- Build long term collaborative partnerships
- Build networks with significant others
- Consult with Elders, especially Indigenous ‘strong woman’
- Be optimistic and hopeful

We are aware of the disadvantage that women suffer and how they are often overlooked in consultations despite taking key roles in community building. Consequently we emphasise the importance of consulting with the ‘strong women’ in Indigenous communities.

National Disability Insurance Scheme (NDIS)

The NDIS was introduced after the Productivity Commission (2011) reviewed Australia’s disability services and concluded that the previous disability support system was ‘underfunded, unfair, fragmented, and inefficient, and it gave people with a disability little choice and no certainty of access to appropriate supports’. New Commonwealth NDIS legislation was created, and the Medicare levy was increased to help fund the NDIS. Additional money is being provided to support people with disability through the NDIS, which is being progressively ‘rolled out’ across Australia. However, the NDIS is much more than an expanded, unfair, fragmented, and inefficient disability support system.

The NDIS budget is allocated in the person’s name and the funds can be spent on a wide range of supports and activities. NDIS funds can be used flexibly as long as the items purchased are in accordance with the person’s plan. Items that can be funded include personal care and home based support for the person to remain living in their community, equipment, and support to overcome disability impairments related to health and wellbeing, education, economic participation and social participation.

People usually choose a service provider to hold and manage their NDIS funds and they pay a fee for this administrative service. Alternatively, if approved, the person can self-manage their funds and save money on administration fees. Self-management allows people to organise their supports and directly employ their own support staff. However, they have to pay the invoices from their own funds initially and receive reimbursement later, and they have responsibility for keeping detailed financial records. To date, only a small number of people have chosen to self-manage as most do not want these tasks and responsibilities.

Disability advocates have lobbied over many decades for disability supports to be provided through individualised funding, as used in the NDIS. They argued that individualised funding would give people with disability greater control of their funding and allow them to use it according to their cultural and personal preferences. The move away from service provider control towards individual control is happening in many countries -- in Europe, North America and in some Asian countries. Each country designs a program with unique characteristics that suits their cultural background.
Workshop scenario

Approximately 50 people participated in the workshop. We asked them to work with others at their table and create a scenario involving an Indigenous person with disability who needed assistance. After one group suggested the topic of foetal alcohol syndrome, others quickly filled in the details. The scenario that workshop participants created was:

Bill is 10 years old and lives with his single mother in a remote Indigenous community. He has foetal alcohol syndrome. Although Bill is enrolled at school he only attends irregularly, and when he does attend he often leaves early because of his limited attention span. The school does not have funds to provide a teacher’s aid, and the principle asked Bill’s mother to help at school or send a family member or friend to assist the teachers because they cannot manage Bill’s behaviour while also teaching the other children. Bill participates in few school activities and does not join the other kids in hunting activities, which he would like to do.

Support for Bill and his mother

The workshop participants were asked to consider what disability support would benefit Bill and his mother. Groups at each table discussed possibilities and they proposed the following:

1. Organise a meeting with the disability planner, a school staff member, a community Elder and Bill’s mother and anyone she wants to accompany her to discuss what supports and activities would assist her and help Bill’s development.
2. Ensure that Bill’s mother is actively involved in making plans and that she ‘owns’ the plan developed.
3. Strategies to consider in discussions with Bill’s mother and others are:
   i. The disability plan could include funds to employ a support worker to support Bill participate in community activities, especially joining other kids on hunting trips.
   ii. The disability plan could include a male mentor or support worker to provide Bill with a male role model.

   iii. Look to the local community for people who could be the teacher’s aid, the support worker and the male mentor. This could strengthen ties between Bill, his mother and the local community and benefit the community by providing employment.

   iv. Investigate community development strategies to promote Bill’s inclusion and acceptance in the community.

   v. Lobby the Education Department for more funding to employ a teachers aid so that Bill can attend school full time.

What can the NDIS offer?

In the workshop participants were asked what disability supports Bill and his mother might need without reference to the NDIS. In this section we consider if the NDIS can provide the suggested supports, and we add additional strategies that could be considered.

Planning & supports

The NDIS places much emphasis on the person with disability being actively involved in preparing a plan tailored to their goals, personal circumstances and disability support needs. Plans are developed with the person’s family members and significant others when requested by the person or when the person has a cognitive impairment and requires help from others. Because Bill is only 10 years old, his mother would be central to developing his plan. It might take a number of meetings to build positive relationships between the planner and Bill’s mother and for her wishes to be known. The NDIS planning guidelines would allow funds for the items suggested by the workshop participants, with the exception of securing funds to lobby the Education Department. This would not be considered appropriate. The NDIS and the Education Department are developing protocols to maximise the effectiveness of planning and support services when families are working with both. The NDIS guidelines would allow funds for a support worker to be employed to assist Bill participate in community activities and join other children on hunting trips as promoting social participation is a major NDIS goal. Similarly, a male worker could be sought to be a role model.

Notably, there are additional supports the NDIS could possibly provide to Bill and his mother. These include domestic help and support for Bill’s mother to maintain her health and wellbeing. She could have training to increase her skills in caring for Bill, and short breaks to sustain her caring role. Bill’s mother had an alcohol abuse problem in the past, which resulted in him being diagnosed with foetal alcohol syndrome. Her current health, abilities and alcohol and substance use would be considered when developing Bill’s plan and referrals made for his mother to get extra assistance if appropriate and support is available.

The NDIS guidelines value the family unit and the community as integral to the wellbeing of the person with disability. The community can be of particular importance for Indigenous people and some ethnic groups. Support is available to increase the sustainability of the family arrangements and community connections. Although a wide range of support is potentially available, not everything can be provided to every person. While the NDIS has additional funds available, these will not be sufficient to offer every potential support to each person. Priorities will need to be determined during the planning process with decisions made by Bill’s mother and the NDIS planner with input from others involved. People often like to bring along an advocate to assist them negotiate with the planner when determining what supports will be funded. In the United Kingdom, the government’s ‘austerity’ measures have cut disability funding and there are grave concerns that Australia might follow suit.

Conclusion

The NDIS offers new opportunities that social workers can use to gain supports for people with disability. Their families and wider communities are encouraged to be involved when appropriate. As well as bringing more disability funding, the NDIS emphasises choice and control by people with disability and their families. The NDIS is creating opportunities for disability supports to be more flexible and responsive to individual’s needs. Central to this is allowing people to have more control and be more empowered when planning their
supports and activities. The NDIS is a major ideological and structural reform that is slowly being rolled out across the country. While the values and high level processes have been determined, the detailed implementation strategies are being developed as the roll out progresses. There is scope for social workers to influence NDIS guidelines and procedures if they engage with the consultations occurring. The NDIS can be challenging for social workers and case managers trained in traditional methods where they had more authority and control. Higher levels of power sharing, rights based practice, openness and creativity are required than previously. This is both a challenge and an opportunity for social work.

The NDIS offers new opportunities for Indigenous people to receive supports in culturally appropriate ways. We encourage social workers to utilise the potential that is available to improve people’s lives.


Primary school books for remote communities

In December 2015 the NCATSISWA INC., was asked to respond to a request for Primary School age relevant books for remote school libraries. We are happy to report that we have been able to respond positively to this request due to the amazing response of those who read our newsletter. Thank you everyone!

Upcoming Conference in ALTA

ALTA, Norway 2017

Keynote speakers

Professor Jan Erik Henriksen, UiT The Arctic University of Norway, Sápmi, Norway

BIO

Henriksen is a Sámi-speaking coastal Sámi from Unjargga, married into a reindeer-herding family and has two adult children. In 1982, he completed BA in social work. He worked for one year as child welfare consultant and later six years as head of the social work department in Kautokeino Municipality. In 1989 he started at the Department of Social Work at the University College in Finnmark, which today is part of UiT The Arctic University of Norway. Henriksen has always had a strong community involvement through assignments and participation in media debates. In 2004, he was co-editor and contributed with two articles in a textbook on social work and health in various Sámi contexts (Tronvoll, Moe & Henriksen 2004). He has also written several articles on networking and Sámi social work (Henriksen 2010, Henriksen, Jan Erik 2013). In recent years, Henriksen has increased his international commitments and has published several articles in English: The extended Sami family in a social network perspective (2015). In 2016 he published two articles in a special issue of the journal: International Social Work: The one article; ‘Participatory action of conflicts in Sami areas’, together with professor Ida Hydle. And the other article ‘From housing campaign to multicultural understanding: The development of professional social work in Sámi areas in Norway’, is the bases for this lecture.

ABSTRACT

The presentation focuses on the development of professional social work in Sámi areas in Norway after World War II, which coincided with the development of the welfare state. Labour immigration in the 1970s made Norway visible as a multicultural society and the welfare professions adopted culturally sensitive methodology, which is also reflected in Sámi social work. Today’s criticism of multiculturalism requires new answers. The integration of the Sámi into the nation-state’s welfare system is an argument for why a decolonizing Sámi approach should build on the aim of post-colonialism. This approach recognizes historical injustice and the emphasis on dialogue in critical indigenous philosophy.

Continuing the Blankets for Communities Project.

The National Coalition of Aboriginal and Torres Strait Islander Social Workers Association Inc., has been approached by a number of individuals and organisations about their continuing commitment to supporting this community project asking for the contact details of whom they should send blankets to. If you would like to donate to this project, please send your blankets to:

Dr. Brett Dale
PO Box U179,
Charles Darwin University,
NT 0815  Australia

Dr. Yvette Abrahams

University of Western Cape, South Africa

BIO

Yvette Abrahams was born in Cape Town in the early 1960s to struggle parents of slave and Khoekhoe descent. She grew up in exile (Zambia, England, Sweden), and returned home to study at the University of Cape Town in 1983. This was just in time to experience the last chapter of the liberation struggle, which she did within the Black Consciousness Movement. By 1986 she had dropped out of varsity and was learning Revolution 101 in Mitchell’s Plain. In 1991, what with the release of political prisoners and a negotiated settlement on the horizon, she reluctantly ran out of reasons to neglect her studies, and graduated eventually with a Master’s...
degree in History in 1994 and a Ph. D. in Economic History in 2002.

Abrahams has worked at the University of Cape Town and the University of the Western Cape. She has consulted for both government and various NGO’s on issues relating to gender equality in policy and practice. She has published widely both locally and internationally on various topics related to gender equality, queer theory, as well as the history of First Nations South Africans. She worked for five years as Commissioner For Gender Equality, based in Cape Town. At the CGE, she was head of their programmes on poverty, energy and climate change. She is currently nominated Extraordinary Professor in the Department of Women and Gender Studies, University of the Western Cape, while she continues to consult for NGO’s in the field of gender and climate change.

Her work at present focuses on food security, energy, and climate finance in the context of climate change. Her current research interests are in the field of indigenous economic plants (especially as they speak to economic development and climate resilience); and climate change economics. As part of that work she realized that you can write a hundred papers and attend a thousand conferences, but nothing has the impact of actually practicing what you preach. So now she makes organic carbon neutral soaps and oils, based on her many years of research and growing indigenous plants. She reckons one bar of soap does more to convince people of the need to act to end climate change than all her words.

ABSTRACT

Abrahams will be talking about the relationship between the Khoesan people and the land, and what it meant to them in cultural, spiritual and moral terms to be separated from the land. Next she shall look at the centrality of growth and change in Khoesan culture, as expressed in the concept of !nau.

Finally she will analyse the situation today, arguing that the political troubles stem from a spiritual malaise, stemming in turn from the separation from the land. “We are species who have been deprived of our habitat. We exist in an urban zoo. This prevents us from completing the !nau that is the journey through colonialism.”

Dr. Lydia Heikkilä, Researcher, Sámi Studies Program, Faculty of Social Sciences, University of Lapland, Sápmi, Finland

ABSTRACT

In her presentation, Dr Lydia Heikkilä reflects on the preliminary results of a case study of satisfaction among the Sámi with social and health services. The study seeks to provide insights on Indigenous resilience capacities and to expand social scientific understanding of the concepts of social inclusion and cultural marginalization from the Sámi perspective. To this end, it pursues two focuses: the first examines the strategies that Sámi living in urban environments employ to meet their everyday life needs; the second analyses the special challenges that this group faces in maintaining cultural integrity and relationships with Sámi communities, both those in their immediate surroundings and in the remote Sámi Home Area. The success of urban Sámi in these efforts is crucial to enabling intergenerational transmission of the culture and language. The case study has found that the traditional Sámi reciprocal networks operate in multiple restructured ways to sustain members’ material and relational needs, replacing or complementing what is a limited supply of culturally based social and health services.

Dr. Michael Yellow Bird, Director, Tribal and Indigenous Peoples Studies Program, Professor at North Dakota State University, USA

ABSTRACT

In this presentation, Dr. Michael Yellow Bird uses neuroscience research to examine how mindfulness approaches and traditional Indigenous contemplative practices can train the mind and positively change the structure and function of the brain. He will discuss how experiences and perceptions change our brain (neuroplasticity); shape our DNA and affect the expression of our genes; activate different brain regions, change our brain waves, and shape specialized brain cells such as mirror neurons; and alter our neurotransmitters and modulators.
Traditional values are often destroyed, especially among young indigenous people of the north in the boarding schools away from their parents and the traditional way of life. The practice of social, psychological training, social work, resolving conflicts between traditional values and trends of modernization allows to generate positive social mood, improve the socio-psychological climate in the communities of indigenous peoples of the north. As shown by our experience in conducting such trainings and workshops in communities of indigenous peoples of northern Russia, from 2006 initiated by the Thematic Network on Local and Regional Development, University of the Arctic, this activity brings tangible results in terms of increased social adaptability of the indigenous peoples of the north and their integration into modern life as well as to the growth of national consciousness.

**New Book**

Dr Michael Adams recently completed and launched his second book which is titled, *My Journey Through the Academic Mist*.

Dr Adams’ journey through the academic mist started way back in 1976 when he enrolled in the Aboriginal Task Force with the South Australian Institute of Technology (SAIT). The introduction to the process of academia was through an interview in the stairwell exit of the old Darwin post office. This book is about courage and determination and how the author turned his life around to become a respected leader in his own right. It is an inspirational story laced with humour, raw emotion and spirit. It’s about the accidental journey of an angry young man from Darwin who got into pub fights at the drop of a hat and who eventually found himself in Adelaide studying social work.

Emeritus Professor MaryAnne Bin-Sallik suggested that Micky could have written a tome about the positive and wonderful things that the academic journey afforded him. Instead he decided to write about the challenges, frustrations, and the blocks he had to overcome to reach his goals in the hope that it would inspire others to take up the challenge of realising their full potential.

For more details on purchasing this book email Dr Adams at: mickadams47@gmail.com

**ALTA Conference information**

The official program will be launched July 1st. on their website: [https://uit.no/prosjekter/prosjektsub?p_document_id=467281&sub_id=467319](https://uit.no/prosjekter/prosjektsub?p_document_id=467281&sub_id=467319) including information about the keynotespeakers and more about Alta and Norway as destinations.

Registration and payment and practical information will be also be available on the website.

And yes... for all of our social media fans, there is a Facbook site: [https://www.facebook.com/Alta-2017-UiT-The-Arctic-University-of-Norway-508117312714332/?fref=ts](https://www.facebook.com/Alta-2017-UiT-The-Arctic-University-of-Norway-508117312714332/?fref=ts)
WORLD FIRST NATIONS TRADITIONAL KNOWLEDGE CONFERENCE


VENUE: Brisbane Convention & Exhibition Centre
South Brisbane, QLD; Australia

COST: $880 (inc. GST) Early Bird: $660 (inc. GST)

Early Bird Registration & payment must be received by Tuesday May 31, 2016. Dinner & Entertainment: $60 (inc. GST)

This conference will create a culturally safe space for discourse on World First Nations ways of knowing and ways of doing. It will also explore the multifaceted social, emotional, spiritual, environmental and political issues impacting on the lives of First Nations People's in today’s evolving society.

SOME KEYNOTE PRESENTERS

Te Raina
Atareta Ferris
Ngati Kahungunu,
Ngati Raukawa and
Ngai Tahu
(New Zealand)

Dr Gregory Phillips
Waanyi and Jaru
(Australia)

Darlene Auger
Woodland, Cree
and Saulteaux
(Canada)

Dr Otrude Moyo
Ndebele and Mnyayi
(Zimbabwe)

Professor Gracelyn
Smallwood
Birrigubba and South
Sea Islander
(Australia)

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