

MI Fellowship™ practice framework: Working with Aboriginal and Torres Strait Islander people

It is well recognised that Aboriginal and Torres Strait Islander (ATSI) people have poorer health and mental health outcomes than the general population. Working with people from ATSI communities requires culturally respectful engagement, a holistic understanding of wellbeing, genuine engagement with families and commitment to building partnerships with local communities and leaders.

1.1 MI Fellowship's principles in working with Aboriginal and Torres Strait Islander people

When working with people of ATSI backgrounds, we will:

- Acknowledge the impacts of racism and social disadvantage on the well-being of ATSI people and be aware of inequalities of power and privilege
- Recognise existing frameworks of healing within Indigenous communities, including the importance of culture and spirituality in relation to well-being
- Support self-determination and enable individuals and families to take a lead in decision making and support processes
- Build partnerships with local community organisations and leaders in the development and delivery of culturally safe and effective services.

1.2 Evidence base for MI Fellowship's approach to working with Aboriginal and Torres Strait Islander people

Evidence shows that many of the strengths and resources that support well-being for people from ATSI backgrounds featured in traditional Aboriginal culture, and include: a collective sense of self that is reinforced by kinship networks; beliefs and customs around healing; and physical and spiritual connectedness with the land.

This holistic understanding of well-being is key to working effectively with people from ATSI backgrounds.

To support culturally competent practice, an acknowledgment of strengths and expertise within the community should be combined with critical reflection on practice and commitment to helping communities and individuals build capacity for self-determination (Purdie et al, 2010).

1.3 Features of MI Fellowship's approach to working with Aboriginal and Torres Strait Islander people

MI Fellowship will:

- Promote a culture of critical reflective practice and provide support for staff to develop cultural competence
- Offer culturally-appropriate assessment and involve specialist ATSI services where appropriate in considering what the person and their family need
- Recognise the centrality of family and kinship networks and welcome involvement and input from important people in a person's life, such as healers
- Wherever practicable, adapt practices, tools and physical environments in response to cultural needs
- Create a welcoming environment through the use of language, images and physical spaces
- Work in partnership with local ATSI communities and leaders to build relationships, address stigma and develop shared approaches to mental health
- Involve people of ATSI backgrounds in the development, planning and evaluation of services.

1.4 References

Purdie, N, Dudgeon P, Walker R, 2010, *Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice*, Commonwealth of Australia.

Community Recovery Model

People affected by mental illness have the right to create a good life: making a home, engaging in meaningful work or learning, and building good relationships with friends, family and people in their community.

MI Fellowship's Community Recovery Model recognises that real and lasting recovery does not occur in isolation, and can be best achieved by working at three levels to:

- promote recovery and positive change for people with mental illness
- assist families and friends to build resilience
- create welcoming communities.

