

## Week 9 – Working with First Nations Peoples:

### Relationships and making connections:

- Important to ask the client who their mob is (when did your family come to be in Australia, and what's your heritage), and where they are from (which country they were born in, and what country they live on).

### Privilege & oppression:

- *Stephanie Nixon (2019)* proposed a **coin model** as a way of thinking about privilege and oppression. In the coin model, each system of inequality is conceptualised as a different coin.
- At the top of the coin, you have advantage others do not. You did not earn it, and you have it because of who you happen to be.
- The coin itself is the social structure that produces and maintains inequality (e.g. sexism, racism, ableism). Coins do not represent the behaviours of good or bad people, but rather they are societal level norms or structures that give advantage or disadvantage regardless of whether individuals want it or are even aware of it.
- At the bottom of the coin, you sit in the space of oppression. You have disadvantage others do not. You did not earn it, and you have it because of who you happen to be.
- Whilst unearned advantage can be difficult to see, unearned disadvantage is highly visible to those who experience it.
- You might not know that a coin exists if you hold a position of privilege, but if you find yourself at the bottom of a coin you know that that coin exists.
- The goal is not to move people from the bottom to the top of the coin, because both positions are unfair. Rather, the goal is to dismantle the system (remove the coins) that cause these inequities.
- "Privilege isn't about what you've gone through, it's about what you haven't had to go through (*Janaya Future Khan*).
- **Intersectionality** refers to the intersecting systems of inequality which produce new and complex patterns of advantage and disadvantage. Not all coins are the same size – that is, different systems of inequality will matter more or less in different contexts and depending on their intersections with other patterns of inequality.
- Being **oblivious to our privilege** does not equate to innocence. These coins are created both intentionally and unintentionally by the people at the top of the coin. The impact of people at the top of the coin being oblivious can be deeply dehumanizing, harmful and violent towards those at the bottom of the coin. A lack of awareness about the top of the coin also means a lack of recognition of societal influences that have helped elevate people on top of the coins to reach their professional, economic or social positions. It leads people who are there to presume that they are there due to individual merit. E.g. white privilege can lead to an irrational sense of entitlement, expertise and access.
- **To dismantle these coins/systems**, it requires people that find themselves at the top of the coin to re-orient their motivation from "I wish to help those that are less fortunate" or "I wish to use my expertise to reduce inequalities for marginalised groups" to commitments and action, to understand their role in upholding the systems of oppression, and to learn from and be guided by the expertise of

marginalized groups who understand the impacts of these coins. It includes working to build insight amongst others in positions of privilege, and mobilising collective action under the leadership of those at the bottom of the coin.

- **Discussions of privilege** can lead to faulty assumptions of innocence, and counterproductive attention to guilt. Stephanie Nixon rejects both of these notions as unhelpful patterns. A more productive strategy is to recognize the feelings of guilt, and to swiftly reframe the guilt as responsibility deriving from complicity. Embracing responsibility then gives rise to action to resist the dominant norms that sustain systems of inequality – known as practicing critical allyship. Within this approach, allyship isn't an identity, but an ongoing practice. A **key practice** for those who finds themselves at the top of the coin is to understand that there is a coin, that it has two sides, and that they occupy the position of unearned advantage/privilege at the top of the coin.
- It is important to develop the capacity to ask and answer questions such as “in which ways did I benefit from settler privilege, and in which ways did my actions today reflect and therefore reinforce the coin of settler colonialism?”.

### Centring first nations people:

- Racism impacts many people who live in Australia.
- This country is founded on racism. Processes of colonisation and dispossession of First Nations peoples are ongoing.
- Racism disproportionately impacts the health of First Nations people.
- Culturally safe healthcare improves experiences and care for all people.

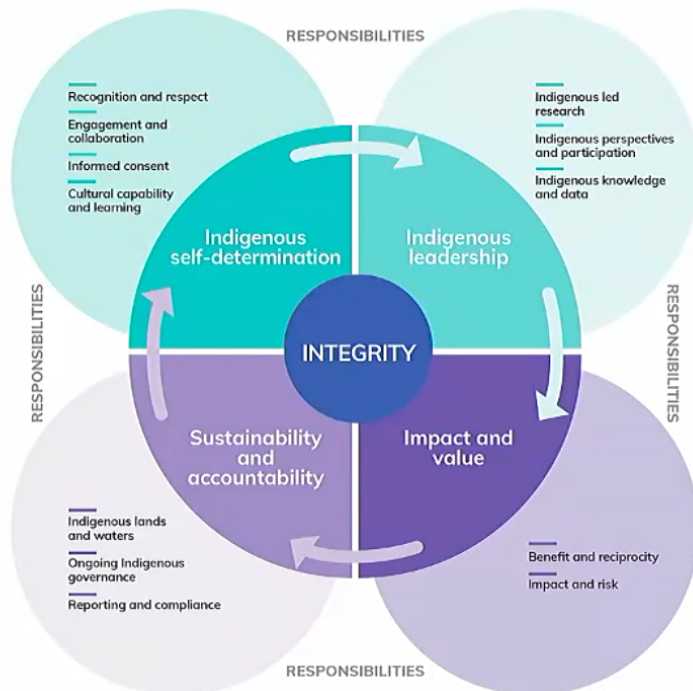
### APS ethical guidelines:

- 1. Respect and justice** – consider cultural differences, intergenerational trauma, racism, cultural responsibilities. Collaboration in care.
- 2. Informed consent** – consider language and cultural difference when seeking consent.
- 3. Competence** – consider cultural and contextual factors that influence social and emotional wellbeing. Your service needs to meet the cultural needs of the individual. You should be aware of and challenge your own biases and assumptions.
- 4. Psychological testing and assessment of Indigenous clients** – consider factors that influence the assessment process – cultural difference, place, people, power. Consider the appropriateness of the assessment – engage with First Nations peoples.
- 5. Research** – should be a consultative and collaborative process. The idea of ‘Nothing about us without us’ – research should come from First Nations voice, it should be community led.
- 6. Provision of psychological services in the area of mental health** – create space and respect First Nations lived experience. Engage in cultural safety and critical consciousness training.

- Cultural safety is determined by the First Nations person themselves who are accessing a service. You cannot deem a service to be culturally safe yourself.

## The AIATSIS research ethics framework:

# The AIATSIS research ethics framework



The AIATSIS research ethics framework is structured around four principles:

1. Indigenous self-determination
2. Indigenous leadership
3. Impact and value
4. Sustainability and accountability.

At the centre of these principles is the core ethical value of integrity and acting in the right spirit.

Each principle gives rise to responsibilities that are elaborated under the following headings:

- recognition and respect
- engagement and collaboration
- informed consent
- cultural capability and learning
- Indigenous led research
- Indigenous perspectives and participation
- Indigenous knowledge and data
- benefit and reciprocity
- impact and risk
- Indigenous land and waters
- ongoing Indigenous governance
- reporting and compliance.

## Holistic concepts of health and wellbeing:

- No definitive way to define health and wellbeing across cultures.
- There are differences regarding how these constructs are linguistically and culturally understood, and experienced.
- Physical, psychological, social, spiritual, and cultural wellbeing of an individual/community.
- Prioritise and emphasise wellness, harmony and balance rather than illness and symptom reduction.
- Recognise past events may continue to impact on wellbeing today.

### Nine guiding principles that underpin SEWB

1. Health as holistic
2. The right to self-determination
3. The need for cultural understanding
4. The impact of history in trauma and loss
5. Recognition of human rights
6. The impact of racism and stigma
7. Recognition of the centrality of kinship
8. Recognition of cultural diversity
9. Recognition of Aboriginal strengths

*Created by SHRG,<sup>1</sup> adapted from Swan and Raphael<sup>7</sup>*

### **Aboriginal social and emotional wellbeing framework:**

- Considers the self as inseparable from culture, family and community.
- SEWB (social emotional wellbeing) centres the self, but has 7 spokes around it (connection to land, connection to culture, connection to community, connection to family/kinship, connection to mental wellbeing, connection to physical wellbeing, connection to spirituality/ancestors). If one of these spokes of the wheel isn't working, the wheel cannot function properly.
- On the outside of the wheel are social determinants of health (e.g. housing, education and employment), historical determinants (e.g. trauma, grief & loss experienced by Indigenous communities as a result of colonisation), political determinants (signify the unresolved issues of self-determination and sovereignty for First Nations people), and cultural determinants (e.g. cultural identity, connection to family & community).
- Mental ill health and mental disorders are often viewed as stemming from SEWB disturbance and disconnection.

### **Connection to body:**

- Relates to an individual's understanding of, connection to, and relationship with, their physical health.
- A strong connection may involve maintaining a healthy diet, and engaging in regular PA. It may also involve the individual not being diagnosed with any chronic physical health conditions.
- Examples of questions that could be used to assess connection to body include: what is your understanding of your physical health, do you have any physical health concerns, do you live a physically active lifestyle, do you see physical health and staying active as important?