Nanko-walun Porlar Nomawi: Wellbeing for Children and Families

(Child Adolescent Mental Health Services, South Australia)

TheMHS award submission 2017

Description of service

Nanko-walun Porlar Nomawi, was funded by SA Health at Murray Bridge to deliver culturally appropriate social and emotional wellbeing services to Aboriginal children and families at risk of engagement with the child protection system. The program has been developed in close consultation with the local Aboriginal community and Aboriginal workers within mainstream agencies such as Families SA and DECS student wellbeing services. It has been formally evaluated with positive outcomes by SACHRU (2012) and commended by the Aboriginal Health Council for its cultural appropriateness and acceptability to the Aboriginal Community (2014).

The program is delivered within a framework which is informed by a historical understanding of the impacts of colonisation and continuing racism on the Aboriginal community, and by local community knowledge and interest in the experiences of individual families as they engage with mainstream systems, all of which have a significant effect on their health and their ability to seek assistance for their children.

Principles of the program include:

Core principles

- Respect and an openness to explore power differences and the impact of unintended racism is primary.
- Development of community, agency and individual trust through responsive attuned service provision, and positive role modelling.
- Direct access to workers to facilitate referrals. A choice is provided re mainstream, Aboriginal or combined service provision, and any kinship sensitivities are discussed.
- Program flexibility
- Accountability to community
- Clear negotiation of program, expectations and boundaries
- Commitment to ongoing training and supervision, including cultural supervision within team.
- Use of culturally appropriate language to assist with engagement and ongoing connection.

Examples of interventions provided

Key Interventions currently used in NPN

- Individual counselling, parent coaching, cultural artefact and art groups, narrative journaling, kinship work, cultural camps, system navigation, cultural consultation, supporting inpatient stays, co-working with partner agencies
Response to award criteria

1. Evidence of a significant contribution to the field of mental health on a local, state or national level.

This very strong culturally connected program has developed into a state leader in mental health. It has grown into being an integral part of the Aboriginal community in Murray Bridge, supporting and developing their approach to mental health and wellbeing for children and young people. It is well recognised by not only the Aboriginal community, but also by local partner agencies, paving the way for collaborative working between agencies and with local Aboriginal people. This local and cultural grounding gives the program its strength and broader recognition.

Development of trust in the program by the Aboriginal community has been a central element of program success. This trust in the program has meant that Aboriginal families will approach workers for assistance including when suicidal, and are supported and able to more readily engage with CAMHS clinicians and psychiatrist for treatment of more serious mental health concerns. Program workers are also often a conduit to assist individuals and families to access partner agencies.

The program has developed flexibly in response to feedback and consultation with local Aboriginal community, and shaped by the skills of the Aboriginal workers employed. It has adopted the holistic approach to mental health (social and emotional wellbeing) preferred by Aboriginal people while maintaining access to clinical assessment and treatment when needed.

Development of a culturally acceptable model of service provision based on a social and emotional wellbeing framework that is now informing and contributing to CAMHS and state Aboriginal program service development more broadly.

2. Evidence of innovation and/or recognised best practise

The program has been and is recognised as innovative in a number of ways.

Connecting with and having a pride in culture is seen as integrally connected to social and emotional wellbeing. The use of cultural artefact making (photo below), art and music groups in combination with "yarning circles" to engage children and young people, and facilitate them discussing concerns in their lives, has been a particular strength which was recently commended by EQuIP quality surveyors at Women’s and Children’s Health Network in February 2016.

The surveyors also commended the adaptation of Narrative approaches into a journal format for client use within counselling sessions.

The program was also recognised with an SA mental health award in 2016 (media coverage attached).

The program is also well recognised by partner agencies as having a strength in co-working and in joining relevant agencies along with young people and their carers to provide holistic care.
3. Evidence of participation of mental health consumers in the planning, implementation and evaluation.

As an Aboriginal program, we accept a broad definition for ‘mental health consumer’ and respectfully suggest that this criterion is best included and covered within criterion 4 where we cover the strong relationship with the local Aboriginal individuals and community.

4. Evidence of Partnerships and Linkages (collaboration for continuity between organisations).

This program has worked closely with Aboriginal community to develop culturally appropriate ways of working to build trust with Aboriginal families. It focuses on developing and affirming cultural connection and identity, to strengthen social emotional wellbeing and a sense of pride in children and young people, and links strongly with its partner agencies to expand its reach and effectiveness.

The program is accountable to a steering group comprising an Aboriginal Elders representative, Aboriginal workers from a range of human service agencies, Child Protection and Education Managers, program staff and manager. This group met frequently in the initial stages to guide development, and continues to meet 2-3 times per year to discuss community issues, and program initiatives. Program workers also attend the Aboriginal Youth and Family Network (AYFN). Ongoing accountability to the local Aboriginal community is an essential aspect of this program.

At an operational level, groups are held in a range of schools and at a local Cultural Centre. The program has also worked with non-government agencies to hold camps allowing connection to "Country" and input from Elders.
Support to parents is also offered at a family or group level through a Children’s Centre and Schools. Workers have also made presentations to school staff on the impact of trauma and racism for Aboriginal students, and on supporting student grief reactions in times of tragedy.

Workers have assisted their local CAMHS team and other agencies plus Education staff in understanding cultural issues impacting on Aboriginal clients and community through consultation and mediation, thus enhancing service provision and client options. Workers are directly accessible to the Aboriginal community for referral and consultation through mobile phones, and provide assertive follow up for missed appointments and flexible appointment arrangements through home and school visits across the region. Workers are mindful of kinship relationships and offer choice re workers, and mainstream CAMHS. This has increased accessibility and built trust.

5. Verification and evaluation of the program’s effectiveness

Objectively measured outcomes for this program are difficult to report, however the workers have identified the following:

- Increased trust from local Aboriginal community in CAMHS and help-seeking shown by direct approaches of parents and young people for assistance. Increased mental health knowledge within Aboriginal community through training and psycho-education

The percentage of Aboriginal clients registered to CAMHS in the last year was 29% compared to approximately 10% 5 years ago. (This does not include the many informal clients accessing group programs.) This is a significant achievement in increasing access and service provision given that Aboriginal children are more than twice as likely as others to develop mental health difficulties.

40 young people were seen in November 2016, with 3 new referrals. Data demonstrates the flexible response from the program with no waiting time for services. In November 2016, the average time from referral to contact was less than 24 hours.

- Increased understanding of the impact of racism and of cultural and community issues for mainstream CAMHS clinicians and psychiatrist/registrar in team

Workers have participated and presented in conferences and workshops at local, state and national level with the aim of increasing awareness and understanding.

- Provision of longer term counselling and psychiatry for high risk Aboriginal children under the guardianship of the minister due to greater cultural choice of key worker who provides a therapeutic "fit" for the child/young person

During a 3 month reporting period there were 4 renotifications to child protection. The average time in the program is 10-11 months, and in November 2016, 10% of program clients were under the Guardianship of the Minister.

- Strong collaborative arrangements supporting Aboriginal student attendance in schools and connection with parents, working through Aboriginal Community Education Officers and School Counsellors
In a 3 month reporting period, there were 143 contacts demonstrating co-working with education.

- Frequent close liaison with Child Protection re Aboriginal clients and families.

  In a 3 month reporting period, there were 19 contacts with Child Protection. As above, 10% of program participants in November 2016 were under Guardianship of the Minister.

- Older boys in the program previously engaged with youth justice, now transitioning into vocational pathways.

  In a 3 month reporting period, there were 5 program contacts with a youth detention facility and 3 contacts with Aboriginal Legal Rights.

- The program was recognised as outstanding in the February 2016 Australian Council of Healthcare Standards (ACHS) accreditation of CAMHS and Women’s and Children’s Health Network SA.

Excerpt from ACHS survey report

“The Aboriginal workforce at Mt Barker has been extremely successful in their engagement of young Aboriginal consumers. The workers commented that they are available to assess and support the individual and family as sole workers or in collaboration with the non-Aboriginal workers. If the individual and/or their family voice that they do not want the Aboriginal worker involved they can remain as a support for the non-Aboriginal clinicians. At the Murray Bridge South Primary School 20 young boys participated in program of painting their own Didgeridoo and learning how to play them. The boys asked to be able to play at the end of year school celebration. It was filmed and the boys reported feeling stronger, proud and connected from the experience. Another project through the Mt Barker CAMHS is the development of an age, developmental and culturally appropriate journal "My Life My Journey" that guides the consumer, at their pace through the processes of identifying their strengths, goals, dreams, hopes and supports. The Aboriginal worker, supporting this journey includes progress notes in the journal and the consumer routinely evaluates their perception of their progress. This initiative, reflective of the Dulwich Narrative Approach was a result of a 2-year Diploma course for Aboriginal Health Workers through the Nunkin Warin Yuntie college. The surveyors suggest that other Aboriginal Workers across the region be offered access to this training which enabled participants to develop practical strategies to assist the young Aboriginal consumers to reflect and understand their journey. The journal is currently being adapted for a range of age groups including adult.”

- The program has been positively recognised by SA Health with additional funding provided in 2017 to replicate in the northern metropolitan area of Adelaide.
Conclusion

CAMHS in South Australia are incredibly proud of this program. It has grown and developed with the Aboriginal community and partner agencies in response to a huge need to support growth and pride in the social and emotional wellbeing of young Aboriginal people in Murray Bridge. The program has bridged the divide between ‘clinical’ care provided by mainstream mental health services which are often treated with a high degree of suspicion, and the Aboriginal community. The community has an ownership of the program which has demonstrated its responsiveness and flexibility to meet their needs. The program has achieved tangible outcomes in terms of client numbers, community connection, agency co-working, but less tangible is the place of trust that the program holds with the local Aboriginal community which underpins all their positive outcomes.

Referees

Removed for privacy
Reconnecting families

BY EMMALIE BALNAVES-GALE

THE Murraylands is now host to another award winning mental health service.

Nanko-walun Porlar Nomawi (NPN), aimed at improving the wellbeing of local indigenous youth, has been named winner of the Mental Health Excellence and Innovation award.

The workers assist Aboriginal youth across the district to reconnect with their culture and reduce the risk of involvement with child protection or youth justice.

Regional Manager of Hills Murraylands Child Adolescent Mental Health Service Robyn Duckworth said the award was a “real affirmation of working in culturally acceptable ways”.

“It’s very exciting that different approaches to mental health are being acknowledged,” she said.

The team accepted their award at Adelaide Oval on Tuesday, October 11.

Team coordinator Lesley Saunders said her role was extremely rewarding and the award gave them gratification that their unique approach was working.

“We have these great jobs where we enjoy coming to work every day to support young people and their families,” she said.

“It’s all about keeping families together and keeping them strong, and its great to see applying our cultural knowledge and experience is working.”

She said the team worked to reconnect youth with aspects of their culture that had been lost.

“We’ve had culture embedded in us from when we were young but it isn’t as strong as it used to be among youth,” she said.

For Harley Hall, the strongest affirmation came from watching his “young fellas” improve.

“It’s great to get acknowledged by mainstream services but for me it’s more about seeing the kids develop,” he said.

“I used to be in court every Tuesday with some of my boys but now they are returning to school, utilising the Independent Learning Centre or getting work.”

Harley Hall said the service was taking children “back to their roots”.

“We relate to the work of our ancestors and their culture to connect with the children,” he said.
EXPERIENCE: Nanko-walun Porlar Nomawi workers Harley Hall and Leslie Saunders with their recent accolade for supporting Indigenous youth.