Making visible the invisible: Aboriginal forensic mental health

The health of Aboriginal and Torres Strait Islander people in Australia remains a crucial priority to address because the burden of disease and injury in the Aboriginal population is far higher than that for non-Aboriginal Australians.[1] Those of us who work in Aboriginal mental health continue to experience disillusionment and frustration at systems that keep shifting responsibility for the enormous inequities in Aboriginal mental health, and consider solutions to address these inequities as viable only through political intervention and control. Nowhere are the problems more apparent than in the criminal justice system where Aboriginal and Torres Strait Islander Australians are grossly overrepresented, accounting for about 30% of adult prisoners in Australia although they make up only 2% of the Australian population.[2,3] Many Aboriginal and Torres Strait Islander Australians cycle between prison and the community with their needs unmet. The high rates of short-term repeated incarceration have a multitude of negative health effects for Aboriginal families, communities, and wider society.[4]

Fewer Aboriginal than non-Aboriginal people report having received any help with mental health problems before imprisonment.[5] This finding is consistent with evidence that Aboriginal Australians do not access mental health and drug and alcohol services in the community at a level consistent with their need.[6] Aboriginal and Torres Strait Islander people in prison have high rates of mental health problems and alcohol and substance use problems and of morbidity and mortality after release.[5]
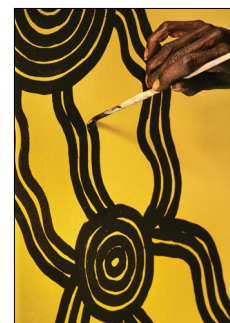
Many Aboriginal and Torres Strait Islander people who come into contact with the criminal justice and health systems have experienced multiple life stresses and levels of trauma, including intergenerational trauma and the legacy of colonisation.[4] Prolonged exposure to repeated trauma is now recognised to have a profound effect on the way people feel, think, act, and relate to others.[7] A trauma-informed approach recognises that some people's disturbed behaviours are manifestations of distress and trauma, and that it is important to avoid traumatisation or reactivating traumatic experiences.[7] In particular, traumatised people might have huge difficulties trusting others.[8] Is it therefore not surprising that many Aboriginal people and their families do not trust mainstream services and do not conform to norms of so-called compliance?[7]

The challenge is for health services to engage effectively with Aboriginal and Torres Strait Islander people to meet their health needs both in the community and in prison. It is now time for a new approach—a paradigm shift by mental health services in their understanding of the importance of engagement and the necessity of trust between services and Aboriginal communities.[7] Services have long equated engagement with compliance and adherence to the so-called sick role. People are expected to want the services and in return for that service to unquestioningly take the advice and treatment provided. Any failure to comply and be grateful can lead to rejection and being labelled as difficult. The question of trust is rarely given consideration when engaging Aboriginal people; this, we believe, has seriously compromised the effectiveness of service provision.[8]

A project conducted in Perth (the capital of Western Australia) with Aboriginal families living with serious mental health issues identified their lack of trust in the mainstream system as the core problem. The lack of trust is due in part to the ongoing negative portrayal in society of Aboriginal culture, itself perceived by some non-Aboriginal Australians as the problem.[9] An engagement intervention was developed and has proven to be very effective for establishing trust. It involves the recruitment of Aboriginal Elders to work in partnership with mainstream service providers to educate them on the Aboriginal worldview.[10] Elders are educating mental health sector leaders, clinicians, and senior management on the positive aspects of Aboriginal culture. As one participating Elder stated, ''See us as your cultural carpenters; we'll help shape you for this work. By the end, you won't know yourselves!''

Engagement of Elders as cultural consultants has been important for both the teaching of cultural knowledge and the contribution to the building of intellectual capital to the services. Service executives now recognise and acknowledge the unique status of the Aboriginal Elders and see them as their peers.[10] The Looking Forward Project has shown that when Aboriginal people and service providers meaningfully work together in the community, trust is established and sustained. Genuine and meaningful relationships are now present and, as a consequence,

fear is dissipating, trust is growing, and mainstream services are being more proactive in their response to the mental health needs of Aboriginal people.[10] If this can be replicated in prisons as mental health services develop, the opportunity to enhance the effectiveness of services to Aboriginal people will be realised.

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