

Social and Emotional Wellbeing

Holistic Health

"Aboriginal health does not (just) mean the physical wellbeing of an individual, but refers to the social, emotional, and cultural wellbeing of the whole community... Health care services should strive to achieve this (whole-of-life) state where every individual is able to achieve their full potential as human beings and must bring about the total wellbeing of their communities."

National Aboriginal and Islander Health Organisation, 1979

The National Aboriginal Health Strategy (1989) and Ways Forward report (1995) used this definition of health to further develop holistic Aboriginal and Torres Strait Islander understanding of wellbeing – or what is now commonly described as social and emotional wellbeing (SEWB).

SEWB incorporates an ecological, collectivist perspective of self that is intrinsically embedded within family, community and extended kinship and clan group networks. Connection to land, culture and spirituality shape these networks. Mental wellbeing is an important component of SEWB, but needs to be viewed as only one component of health that is inextricably linked to the social, emotional, physical, cultural, and spiritual dimensions of wellbeing.

This view of health requires pathways of healing to be in harmony with a holistic world-view. Healing for Aboriginal and Torres Strait Islander peoples is often viewed as a collective and relational process

involving physical, social, emotional, mental, environmental, and spiritual wellbeing.

Indigenous knowledge systems are life-affirming and fundamental to restoring vital connections to the domains of SEWB. While there is great diversity in the way these dimensions of wellbeing are manifest in the knowledge systems of different Aboriginal and Torres Strait Islander groups and Indigenous people's worldwide, this broad understanding of health and healing is shared by many Indigenous peoples across the world.

National Mental Health and SEWB Framework

The National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing (2017) is the community-endorsed, guiding national document that defines the evolving understandings of SEWB among Aboriginal and Torres Strait Islander peoples and communities.

The National Aboriginal Health Strategy (1989) underpinned the development of nine principles by Indigenous SEWB experts in consultation with communities. These principles are the foundation of culturally safe and responsive work with Aboriginal and Torres Strait Islander peoples.

Programs adopting these principles are more likely to be successful in supporting the health and wellbeing of Aboriginal peoples and communities.

Principles

The nine guiding principles for the SEWB Framework are drawn from the Ways Forward report to emphasise the holistic and whole-of-life definition of health held by Aboriginal and Torres Strait Islander peoples.

Aboriginal and Torres Strait Islander **health** is viewed in a **holistic** context, that encompasses mental health and physical, cultural and spiritual health. Land is central to wellbeing. Crucially, it must be understood that when the harmony of these interrelations is disrupted,

Self-determination is central to the provision of Aboriginal and Torres Strait Islander health services.

Culturally valid understandings must shape the provision of services and must guide assessment, care and management of Aboriginal and Torres Strait Islander people's health in general, and mental health in particular.

It must be recognised that the experiences of **trauma and loss**, present since European invasion, are a direct outcome of the disruption to cultural wellbeing. Trauma and loss of this magnitude continues to have inter-generational effects.

The **human rights** of Aboriginal and Torres Strait Islander people must be recognised and respected. Failure to respect these human rights constitutes continuous disruption to mental health. Human rights relevant to mental illness must be specifically addressed.

Racism, stigma, environmental adversity and social disadvantage constitute ongoing stressors and have negative impacts on Aboriginal and Torres Strait Islander peoples' mental health and wellbeing.

The centrality of Aboriginal and Torres Strait Islander **family and kinship** must be recognised as well as the broader concepts of family and the bonds of reciprocal affection, responsibility and sharing.

There is no single Aboriginal or Torres Strait Islander culture or group, but numerous groups, languages, kinships, and tribes, as well as **ways of living**. Furthermore, Aboriginal and Torres Strait Islander people may currently live in urban, rural or remote settings, in traditional or other lifestyles, and frequently move between these ways of living.

It must be recognised that Aboriginal and Torres Strait Islander people have great **strengths**, creativity and endurance and a deep understanding of the relationships between human beings and their environment.



Over several years this SEWB diagram was collectively discussed and supported by Aboriginal and Torres Strait Islander people in many forums across Australia.

Self

The sense of self is grounded in a collectivist perspective that understands self as intrinsically intertwined with family and community.

Stronger connections to culture and Country builds individual and collective identities. Empowerment, pride and strong identity contributes to a sense of self and feeling whole.

Expressions and Experiences

The SEWB domains are inter-related and at play in most situations, this model artificially separates the domains to address them conceptually, but to understand the domains is to acknowledge their interconnectedness. The diversity of cultures and histories among Aboriginal peoples influence the expressions and experiences of SEWB between and within individuals. There are also variations between traditional and contemporary expressions of the domains.

Over the life span there is an ebb and flow of change as risk factors disrupt connections and protective factors restore and strengthen connections. Resilient and empowered individuals and communities maximise the benefits of protective factors and minimise exposure to risk factors.

Determinants of Health

- Outside of these domains of wellbeing are several important structural determinants that shape the dynamics of power, human rights and justice, and the access and distribution of resources – all of which are central to shared historical experiences of trauma and resistance among Aboriginal and Torres Strait Islander peoples.
- These structural determinants include not only the more well understood influence of social determinants of health, but also the influential role of cultural systems of knowledge, law and practices, the impacts of past government policies experienced by whole cultural groups and communities (or conversely, the extent to which communities have managed to resist and withstand these impacts), and the political determinants linked to retaining or loses of land, control of resources, and the rights of self-determination and sovereignty.
- As with the inner domains of SEWB, there is much variation and differences with regards to how communities both experience and are impacted by these structural level factors, currently and historically.
- Determinants have a concurrent and cumulative impact on wellbeing. Aboriginal trauma is predominantly a result of historical government policies associated with colonisation and unresolved political issues of self-determination and sovereignty. Life stressors arise from contemporary experiences of deep and entrenched disadvantage, social exclusion and systemic racism. Understanding and healing the

impacts of historical, political and social determinants is central to wellbeing.

- Solutions to these issues lie beyond the capacity of the health sector and require multi-dimensional, strengths based approaches to care. Culturally appropriate responses prioritise harmony and balance in individual, family, community and society wellbeing (including community control and human rights), rather than symptom reduction. This speaks to the necessity of culture-informed and trauma-informed care and services.

Connection to Body and Behaviors

Includes normal biological markers of physical health such as diet and exercise.

Disruptions include smoking and chronic communicable diseases and exclusion from health systems.

Restoration can include sports, hunting and gathering, traditional diets and medicines, and accessing services.

Connection to Mind and Emotions

Extends beyond mental health, to include recognising culture-bound disorders and the importance of positive emotions, self-confidence and experiencing of joy, rather than just the absence of the disorder.

Disruptions including threats to safety, cultural trauma symptoms and racism.

Restoration includes accessing supports, education, truth telling and recognition of human rights.

Connection to Family and Kinship

Includes the importance of family and group relations, kinship attachment systems of reciprocity and caring, gender and age roles, including respect for Elders and heritage.

Disruptions include removal of children from their families.
Restoration includes connecting with family history, strong parenting and family programs, spending time with Elders and developing healthy relationships with significant others.

Connection to Community

Includes cultural structures of responsibility and obligation, social inclusion and relationships. Community cohesion and community-based cultural revitalisation strengthen cultural identity.

Disruptions include lateral violence, family feuding and isolation.
Restoration includes self-determination and community-control, and utilising community to be engaged with others and as a place to give and seek support from others.

Connection to Culture

Includes cultural expression (yarning, ceremony, fire, art, dance, song, storytelling); cultural knowledge (language, protocol, sociocultural norms, lore, moral and ethical practices) and cultural identity (pride, belonging, values).

Disruption includes cultural genocide and cultural clash.
Restoration includes learning about, involvement and participation in cultural expression and knowledge.

Connection to Country (*land*).

Includes a deep experience of belonging to Country, there is a traditional or spiritual association to kin and culture and a contemporary yearning to heal country.

Disruptions include dispossession of land. Restoration includes returning to land as a way of healing body, mind, spirit, reconnecting with community and cultural renewal.

Connection to Ancestors (*spirituality*)

Includes knowledge and belief systems, the Dreaming, and cultural healing practices and value of wisdom and hope.

Disruptions include the impact of mission life and assimilation. Restoration includes accepting evolving expressions of Indigeneity and expressions of spirituality coexisting with Christianity or mindful practices that enable peace and balance.