



Cultural, Social and Emotional Wellbeing Programs with Aboriginal and Torres Strait Islander people in the justice system

Post-doctoral fellow: Dr Ee Pin Chang

Co-investigators: Prof Pat Dudgeon (Bardi), Dr Joan Chan, Dr Jemma Collova

Community co-researchers: Angela Ryder (Noongar), Carolyn Mascall, Gillian King (Noongar)

Collaborators: [Kimberley Aboriginal Medical Services](#), [Centacare Kimberley](#), [Langford Aboriginal Association](#), [Danila Dilba Health Service](#)

With assistance and support from the Western Australian Department of Justice

Evidence gap

Aboriginal and Torres Strait Islander people have the longest continuing cultures in the world with over 65,000 years. Suicide was not known prior to colonisation (Hunter & Milroy, 2006). Colonisation has contributed to ongoing systemic discrimination and disadvantages including an over-representation of Aboriginal and Torres Strait Islander people in the justice system.

Despite making up 3% of Western Australia's population, Aboriginal and Torres Strait Islander people account for 42% of Western Australia's prison population (ABS, 2024a, 2024b). This over-representation was highlighted in the landmark Royal Commission into Aboriginal deaths in custody (Commonwealth of Australia, 1991), and more recently, the Pathways to Justice report (Australian Law Reform Commission, 2017). The Pathways to Justice report suggested that prison programs that promote connection to culture and strengthen family relationships may address the high recidivism rates; it recommended trauma-informed and culturally appropriate prison programs that are developed with, and delivered by, Aboriginal and Torres Strait Islander women, for Aboriginal and Torres Strait Islander women (rec. 11-1). Aboriginal women are one of the fastest growing population groups in the Australian prison system (Calma, 2004), where 78% of Aboriginal female prisoners, compared to 30% of non-Aboriginal female prisoners, had a prior imprisonment (ABS, 2024a).

Proposed research program and outcomes

The Cultural, Social and Emotional Wellbeing (CSEWB) Program and the Kimberley Empowerment, Healing and Leadership Program (KEHLP) are trauma and culturally informed programs co-developed with Aboriginal psychologists and community co-researchers, based on the Social and Emotional Wellbeing (SEWB) model (Gee et al., 2014). Importantly, the principles underlying these programs align with factors highlighted in the Solutions that work: what the evidence and our people tell us, Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project (ATSISPEP) report (Dudgeon et al., 2016).

The SEWB model is a strengths-based and holistic health framework that reflects the dynamic interrelationships between the self, the domains of wellbeing and the historical, political, cultural and social determinants of health, as experienced by Aboriginal and Torres Strait Islander peoples. These programs aim to enhance social and emotional wellbeing and resilience as a suicide prevention strategy, by restoring healthy connections to the seven domains of the SEWB model (Fig. 1).



Figure 1. Social and Emotional Wellbeing model, adapted from Gee et al., (2014)

The 12-session CSEWB Program was delivered and evaluated for the first time in the justice system, with Boronia Pre-Release Centre for Women (Boronia), in Perth, Western Australia. We adopted an Aboriginal Participatory Action Research (Dudgeon et al., 2020) approach which privileges the voices of Aboriginal and Torres Strait Islander peoples. To ensure respectful and ethical engagement with Aboriginal and Torres Strait Islander people, research must be conducted with, not on or to, Aboriginal and Torres Strait Islander people. This necessitates a rigorous ethics application process for research involving Aboriginal and Torres Strait Islander people (NHMRC, 2018), and requires ethics approval by an Aboriginal Ethics Committee: Western Australian Aboriginal Health Ethics Committee (WAAHEC) in Western Australia and Menzies School of Health Research in Darwin, Northern Territory.

Impact of research

Our evaluation of the CSEWB Program with Boronia consisted of administering pre- and post-program 5-item Kessler Psychological Distress Scale and Stories of Most Significant Change. The thematic analysis of participants' responses to Stories of Most Significant Change revealed themes of resilience, sense of empowerment and hope for the future; these findings were validated against self-reported reduction in levels of psychological distress on completion of the 6-week CSEWB Program. The findings have been published in the special issue of the [Medical Journal of Australia](#) on centring Indigenous knowledges, in partnership with the Lowitja Institute.

The proposed implementation of the CSEWB Program in Darwin has met with unanticipated delays, partly due to a lengthy and intense ethics approval process. Furthermore, data collection from the evaluation of the KEHLP with West Kimberley Regional Prison was initially delayed by a moratorium imposed on prison research due to COVID-19, as well as ongoing threats of non-participation and/or withdrawals due to COVID-19 symptoms, transfers, early parole, and prison operational issues due to staff shortages. Although the evaluation of the CSEWB Program in Darwin and KEHLP in WKRP has been delayed, we expect the findings of Boronia to be replicated in these evaluations as the programs are culturally informed and co-developed with Aboriginal and Torres Strait Islander peoples and based on the SEWB model.

Due to these unanticipated delays, I have had the privilege of being involved in other research and advocacy activities, which align with the theme of the proposed research of addressing the over-representation of Aboriginal and Torres Strait Islander people in the justice system.

We were invited to contribute to an [opinion piece](#) in the Conversation on the impact that locking up kids has on mental health and recidivism (Finlay, Chang et al., 2022).

Impact of advocacy activities

Aside from the proposed research agenda, a highlight of my fellowship is assisting in the provision of Expert Witness Statements for coroner inquests into Aboriginal (suicide) deaths in custody. An appropriately and adequately conducted coroner inquest, from the perspective of the family of the deceased, facilitates healing from grief and loss, and prevents further suicide within the family and community of the deceased. The impact of this advocacy is demonstrated in the following excerpts from the findings of coroner inquests relating to the deaths in custody of [Mr Blanket](#) and [Mr Inman](#):

*Cultural support of Indigenous prisoners*²²¹

120. In a detailed report provided to the Court, Professor Pat Dudgeon AM (with assistance from Dr Ee Pin Chang) outlined her views on culturally safe prison care for Aboriginal people. The report referred to the importance of culturally safe programs in prisons, and “*the visible representation of Aboriginal and Torres Strait Islander staff*”.²²²
121. After reviewing the materials in the Brief, Professor Dudgeon expressed the opinion that the care provided to Mr Inman was not culturally safe, noting that Mr Inman should have had access to (and have been supported by) Aboriginal clinical and peer support staff.²²³
122. Professor Dudgeon also noted that the disparity between Mr Inman’s self-reporting when asked about his mental health, and what he was telling his family and partner:

May suggest that Mr Inman did not feel supported by the prison staff to enable him to share his concerns with the staff who provided him care.²²⁴

132. I strongly encourage both Acacia and DOJ to carefully review the recommendations outlined in Professor Dudgeon's report.²³⁵ At the inquest, Mr Cade confirmed that the report had been provided to the SPGU, and that their general response was:

The department acknowledges the impacts of historical factors on Aboriginal and Torres Strait Islander people and notes Professor Dudgeon's recognition of culturally safe approaches for (ATSI) people in our care. The department has drafted an (ATSI) suicide prevention strategy based on the National Aboriginal and Torres Strait Islander Suicide Prevention Strategy 2013, which is undergoing internal review by (ATSI) business areas.

The department will continue to develop this strategy, taking into consideration coronial recommendations provided in response to Mr Inman's inquest to support a culturally responsive approach to suicide prevention for ATSI people in our prisons.²³⁶

Further to the coroners' findings, the Centre of Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention has been consulted by the Suicide Prevention Governance Unit (SPGU) and I attended a workshop on the development of an Aboriginal Suicide Prevention Strategy by the SPGU.

The following comment by the coroner highlights the importance of this SPRF research: culturally-informed programs that restores cultural connections of Aboriginal and Torres Strait Islander people. This is especially critical within the justice system where connections to other domains of SEWB are disrupted, including connections to family, community, and Country.

139. It is also possible that had the culturally safe care referred to in Professor Dudgeon's report been available at Acacia, Mr Inman's life journey may well have been different.²⁴⁰

The following correspondences demonstrate the impact of a recent expert witness statement provided for the coroner inquest into an Aboriginal suicide death in custody. As the inquest findings have not been handed down, the name of the deceased has been withheld.

Re: Aboriginal Death in Prison Custody | Expert Opinion Enquiry



Rosaleen Jeffries <rosaleenj@justice.c

To Patricia Dudgeon; Ee Pin Chang

Cc Jason Hesse

Reply

Reply All

Forward



Thu 13/06/2024 1:57 PM

If there are problems with how this message is displayed, click here to view it in a web browser.



The solicitors involved in the inquest into the death of **ALBERT WILSON** would like to acknowledge the impactful expert report you and Ee Pin Chang prepared for the National Justice Project in relation to the **ALBERT WILSON** coronial inquest. Your expertise was invaluable to our legal team and the report was considered to be of the highest quality and depth.

On behalf of George Newhouse and the National Justice Project, please see the [attached letter](#) as further recognition of our appreciation.

Thank you for your consistent support.

With kind regards,

ROSALEEN JEFFRIES (she/her)

SOLICITOR



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Our ref: GN:JH: 22006
Contact: Jason Hesse and Rosaleen Jeffries

13 June 2024

Professor Patricia Dudgeon
School of Indigenous Studies
University of Western Australia
35 Hackett Drive
Crawley WA 6009

By email: pat.dudgeon@uwa.edu.au
Cc: ee.chang@uwa.edu.au

Dear Professor Dudgeon,

PRO BONO SUPPORT: THANK YOU FROM NJP

On behalf of the National Justice Project (NJP), I extend our sincere appreciation for the exceptional pro bono legal assistance you and Ee Pin Chang provided in us in our preparation for the recent coronial inquest proceedings into the death of [REDACTED]. Your generosity not only alleviated a financial burden on our firm in obtaining expert reports whilst ourselves acting pro bono but also enabled us to advocate more effectively on behalf of our client.

Your expertise in the fields of cultural safety, suicide prevention and Aboriginal deaths in custody proved to be indispensable in our case. Your analysis shed light on complex issues, significantly strengthening our position and ensuring that critical aspects of the case were thoroughly examined, particularly FASD through the lens of cultural safety.

Your insights informed our legal strategy and we are hopeful that the Coroner will consider them thoroughly in his findings. My colleague Rosaleen Jeffries, a solicitor that was involved in this recent inquest, will update Ee Pin Chang when the Coroner's findings are handed down and provide your team with a copy of his report once it is made public.

Thank you once again for your invaluable assistance. We look forward to the possibility of working together in the future to continue our shared commitment to justice and equality and, remain grateful for your invaluable support.

Yours sincerely,

A handwritten signature in black ink, appearing to read "George Newhouse".

George Newhouse | CEO & Principal Solicitor
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Reflections:

I have Chinese heritage and was born and bred in Singapore. My grandparents migrated from China to Singapore. Chinese people form the majority of up to 75% of Singapore population while I was growing up and being educated in the Cambridge curriculum; I attended all-girls school from year 1 to 10. I have therefore never experienced the oppression and discrimination that Aboriginal and Torres Strait Islander people have experienced, and continue to experience, in their own land. While I try to be mindful of my privilege, an education in psychology has taught me that humans are fraught with blind spots and biases. I therefore do not profess to know, much less understand, the reality of Aboriginal and Torres Strait Islander people's daily struggle with discrimination and disadvantages.

Justice and equity have been my passion. It has therefore been a tremendous privilege to be involved in this research program and advocacy activities, under the guidance of Prof Dudgeon. Her experience, expertise and passion for the wellbeing of Aboriginal and Torres Strait Islander people have been inspiring. I would also like to express my gratitude to the National Suicide Prevention Research Fund for supporting this research program.

My post-doctoral journey has highlighted the transformative impact of decolonising research and worldviews. It has taught me that research itself, with its prescribed research agenda, timelines, evaluation and expected outcomes, can be oppressive when conducted within colonial worldviews and evaluation paradigms. Culturally appropriate research ensures respectful engagement with, and returns the leadership and governance back to, Aboriginal and Torres Strait Islander people. To be impactful in closing the gap in health outcomes, research involving Aboriginal and Torres Strait Islander peoples must benefit Aboriginal and Torres Strait Islander people; otherwise, it becomes merely an academic exercise. Importantly, ethical research involving Aboriginal and Torres Strait Islander people must respond to the needs and priorities of communities, which takes precedence over planned or proposed research agenda. This necessitates stepping beyond the confines of the proposed research agenda and timeline, where evaluation of outcomes may not conform to mainstream and colonial research evaluation paradigms.

Every effort was made to ensure that the proposed research agenda and timeline was co-designed with Aboriginal and Torres Strait Islander people; in reality, the research program requires more time and effort, partly due to the challenges of conducting research with people in custody while adhering to restrictions imposed by the prison system. Regardless, the National Suicide Prevention Research Fund's Post-Doctoral Fellowship funded critical efforts towards building the capacity of community co-researchers and partners of collaborating Aboriginal Community Controlled (Health) Organisations, which I am hopeful will have endearing benefits beyond this fellowship period.

The Centre of Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention is committed to the proposed research agenda and will continue to engage with Danila Dilba Health Service, Kimberley Aboriginal Medical Services and Centacare Kimberley, to ensure that the proposed research aims and objectives are met.

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