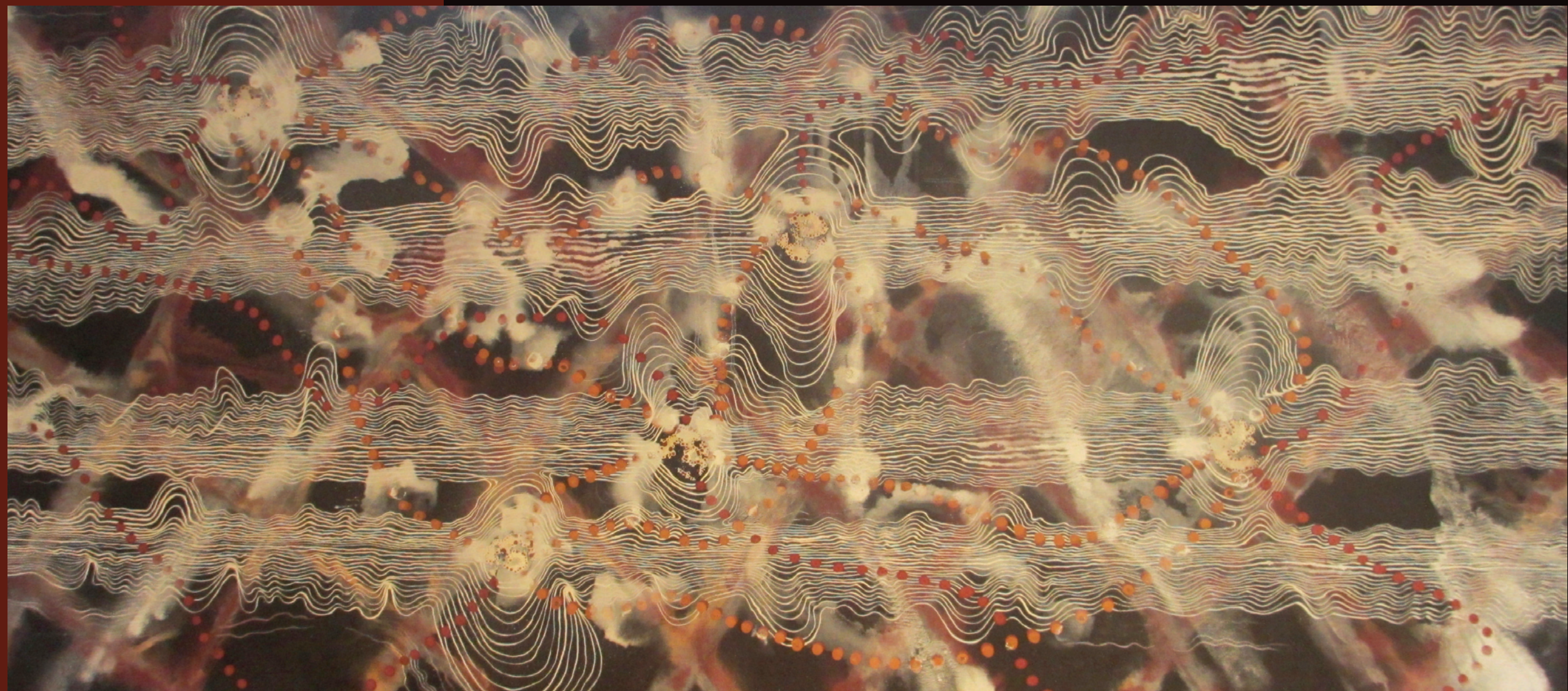




POST GRADUATE CERTIFICATE IN FAMILY THERAPY TRAINING FOR ABORIGINAL CHILD, FAMILY AND HEALTH WORKERS



Report on the Third Training Cohort Gippsland 2010

'Every Indigenous person in Koori organisations working in family services should have the opportunity to do this course. The context of the course is fantastic...'



‘Empowerment by Degrees’

This DVD tells the story of an innovative training and capacity building program that delivers a university accredited post graduate qualification, followed by two years of clinical supervision and workforce development.

Training has been delivered regionally in Victoria and in metro Melbourne.

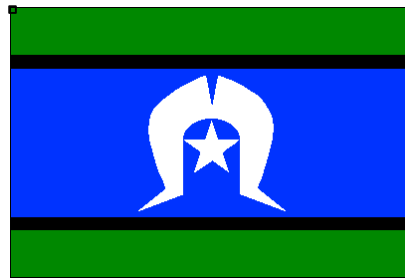
Cultural safety for all has been the cornerstone of this program.

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The Bouverie Centre acknowledges the traditional custodians of the land on which our organisational building stands – the Wurundjeri people of the Kulin Nation.

We pay respects to the Elders past, present and future, and extend that respect to all Indigenous Australians. Further to this we would like to acknowledge this research occurred on Wurundjeri, Wathaurong, Yorta Yorta and Gunnai/Kurnai land.

The Bouverie Centre strongly supports the Australian Parliament's action of apologising to the Stolen Generations of Australia and acknowledges the traumatic legacy experienced by Indigenous people and Community.

This research report was funded through a grant awarded by the Victorian Department of Human Services to The Bouverie Centre and La Trobe University.

Report prepared by: Robyne Latham, Indigenous Researcher, of the Indigenous Program, The Bouverie Centre, La Trobe University 2011.

Note: The word Aboriginal, which is employed throughout this written document, refers to both Aboriginal and Torres Strait Islander people. This report refers to Aboriginal peoples and Communities (plural) in acknowledgment of the diversity of all Aboriginal peoples and Communities throughout Victoria. This report further acknowledges that these communities have different histories, political dynamics, social situations, cultural characteristics, as well as economic and administrative resources.

'The Gap'



This egg tempera painting titled 'The Gap' (H 2070mm x W 930mm) is dedicated to the 52 Aboriginal and Torres Strait Islander graduates of the post Graduate Certificate in Family Therapy, Bouverie Centre, La Trobe University. The work also pays homage to the professional body of Indigenous family therapists, The Aboriginal and Torres Strait Islander Family Therapy Network, founded in August 2011. The first five training locations Shepparton, Geelong/Ballarat, Gippsland, Mildura and metro Melbourne, are identified by the five circular motifs and the lines radiating from these centres. The layered patternation that connects the five locations identifies the statewide linking, networking and communication between the Aboriginal and Torres Strait Islander family therapists. It also refers to communication of the family therapists with their services, their client base and their Communities.

Artist: Robyne Latham

Artwork Copyright: Robyne Latham

Report cover designed by: Anna Liebrecht

Front cover Copyright: The Bouverie Centre

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THE GIPPSLAND REPORT 2011

**POST GRADUATE CERTIFICATE IN FAMILY THERAPY TRAINING FOR ABORIGINAL
CHILD, FAMILY & HEALTH WORKERS**

THE BOUVERIE CENTRE, LA TROBE UNIVERSITY

Robyne Latham in collaboration with The Bouverie Centre's Indigenous Program

Acknowledgments

This research project was funded by a grant awarded by the Department of Human Services to The Bouverie Centre, La Trobe University.

This research report would not have been possible without the support and contributions of all our graduates, the Executive Management Group, the Project Advisory Group, the Co-operative Inquiry Group and many significant others.

Community Acknowledgments

BADAC: Ballarat and District Aboriginal Co-operative

BCFS: Ballarat Child and Family Services

GEGAC: Gippsland and East Gippsland Aboriginal Co-operative

GLCHS: Gippsland Lakes Community Health Services

GVCHS: Goulburn Valley Community Health Services

Njernda Aboriginal Corporation, Echuca

Ramahyuck District Aboriginal Corporation, Sale

Take Two Berry Street, The A Team

Rumbalara Aboriginal Co-operative, Shepparton

VACCA: Victorian Aboriginal Child Care Agency

Wathaurong Aboriginal Co-operative, Geelong

The Executive Management Group

The role of the Executive Management Group, established in September 2007, has ensured the progress of the project according to agreed timeframes and milestones, as well as negotiating changes to project delivery in accordance with Aboriginal Community consultations and feedback from the Project Advisory Group and Co-operative Inquiry Research Group. Membership has included DHS Indigenous Initiatives Unit and The Bouverie Centre 2007-2011.

Department of Human Services (DHS)

Melinda Moore & Nerida Sutherland (2007-08)

Tom Voigt (2008)

Peter Leslie & Mike Millar (2008-09)

Trish Berry (2009 ongoing)

Mary McKinnon (2010)

The Bouverie Centre

Dr Colin Reiss (2007-08)

Dr Jeff Young (2009 ongoing)

Associate Professor Amaryll Perlesz (2008 ongoing)

Dr Kerry Proctor (2007 ongoing)

Dr Kitty Vivekananda (2007)

The Project Advisory Group

The Project Advisory Group comprising Indigenous and non-Indigenous representation from mental health and community health, the ACCOs, Take Two, Berry Street and DHS was formed in early 2007. Representation on the Advisory Group was sought via the Aboriginal Child and Family Service Network. Membership has included:

Nerida Sutherland (DHS, IIU) (2007-08)	Jane Harrison (SNAICC) (2009)
Shaun Coade (Take Two Berry Street) (2007-08)	Aunty May Owen (2010 ongoing)
Ron James (Rumbalara) (2007-08)	Uncle Jim Berg (2010-11)
Sue Williams (Rumbalara Family Services) (2007-09)	Dr. Karen Adams (2010-11)
Colleen Marion (Western Region Gathering Place) (2008)	Kim Horton (DHS, IIU) (2010 ongoing)
Tony McCarthy (Stolen Generation) (2008)	Alyson Ferguson (GEGAC) (2010 ongoing)

The Bouverie Indigenous Program

Dr Kerry Proctor	Manager, Indigenous Program
Banu Moloney	Lecturer in Family Therapy, non-Indigenous co-trainer
Shaun Coade	Manager of Aboriginal Service Development, Take Two, Berry Street. Cultural Consultant and Indigenous co-trainer
Jana Kelly	Indigenous Family Therapist, Cultural Consultant and Indigenous co-trainer
Fiona McIlwaine	Lecturer in Family Therapy, non-Indigenous co-trainer
Robyne Latham	Indigenous Researcher (2008-2011) and Program Consultant (2011-ongoing)
Jacqui Sundbery	Family Therapist undertaking PhD research into the training and support needs of Indigenous Alcohol and Other Drug Workers

The Co-operative Inquiry Group

The Co-operative Inquiry Group is constituted by Indigenous and non-Indigenous academic and research representation. Membership has included:

Associate Professor Amaryll Perlesz,
The Bouverie Centre (2007 ongoing)

Associate Professor Priscilla Pyett, Onemda
VicHealth Koori Health Unit, The University
of Melbourne (2007-09) and LTU
(2010 ongoing)

Dr Kerry Proctor, The Bouverie Centre
(2008 ongoing)

Banu Moloney, The Bouverie Centre (2008
ongoing)

Dr Kyllie Cripps, Onemda VicHealth Koori
Health Unit, The University of Melbourne
(2008-10)

Professor Margot Schofield, School of
Public Health, LTU (2008)

Annette Jackson, Knowledge Manager,
Take Two Berry Street (2008)

Associate Professor Margarita Frederico,
Head, School of Social Work and Social
Policy, LTU (2008)

Jane Harrison Take Two Berry Street and
SNAICC (2008)

Robyne Latham, Indigenous Researcher,
The Bouverie Centre (2009 ongoing)

Jacqui Sundbery, The Bouverie Centre
(2010 ongoing)

Mary Whiteside, LTU (2010 ongoing)

Dr Jeff Young, The Bouverie Centre
(2010 ongoing)

Further Particular Acknowledgments

Dr Jeff Young, Director, The Bouverie Centre, LTU

The staff of The Bouverie Centre

Gary Thomas, Director, Equity and Student Support Services & Director, Indigenous Education, LTU

The Bouverie Centre would also like to acknowledge the in-kind support of the Lowitja Institute, Australia's National Institute for Aboriginal and Torres Strait Islander Health Research.

EXECUTIVE SUMMARY

*If you've come here to help me, you're wasting your time. But if you've come because your liberation is bound up with mine, then let us work together.*¹

Australian Aboriginal Elder Lilla Watson

¹ <http://www2.hawaii.edu/~daniel/quotes.html> sited 4th May 2011.

Executive Summary

Our challenge for the future is to embrace a new partnership between Indigenous and non-Indigenous Australians. The core of the partnership for the future is closing the gap between Indigenous and non-Indigenous Australians on life expectancy, educational achievement and employment opportunities.²

The need for Australian universities to attract more Aboriginal students into the world of academia through to graduation is well documented.

The post Graduate Certificate in Family Therapy was delivered by The Bouverie Centre, La Trobe University. It has successfully created pathways in both recruiting and supporting Indigenous students through their university studies. This report addresses the historical background and the research findings of the first university level postgraduate qualification in family therapy training delivered rurally to Aboriginal and Torres Strait Islander students. This educational initiative is the first ever provided in Victoria and indeed nationally.

In late 2006, the Department of Human Services, Children & Family Services Division – Indigenous Initiatives Unit (IIU) engaged The Bouverie Centre to develop and implement a family therapy training program for Indigenous child and family workers employed by, or working closely alongside Aboriginal Community Controlled Organisations (ACCOs), and other Indigenous health workers in Victoria. The aim of the training program was to increase the capacity of Aboriginal Child and Family Workers (CFWs) to better meet the needs of Aboriginal and Torres Strait Islander families in Community.

In January 2008, The Bouverie Centre's Indigenous team held extensive consultations with Aboriginal Community and the Project Advisory Group affiliated with The Bouverie Centre. From this consultation process it was eminently clear that the Aboriginal Community wanted a university award level qualification, over and above any other training program. La Trobe University responded to this need and actively supported the enrolment of Aboriginal students into a Graduate Certificate of Family Therapy. This is a postgraduate qualification which assumes an undergraduate bachelor degree or the equivalent in acknowledging prior learning, according to the Australian Qualifications Framework. The training was developed and delivered by The Bouverie Centre, La Trobe University, in partnership with Take Two, Berry Street. Ten Aboriginal students successfully completed the training in the Shepparton region in 2008, a further 9 students graduated from the Geelong and Ballarat region in 2009, and 14 from the Gippsland region in 2010. A further 8 students have completed training in metropolitan Melbourne, and 11 students are currently undertaking training in the Mildura region.

² http://www.hreoc.gov.au/social_justice/health/statement_intent.html The Prime Minister, the Hon. Kevin Rudd MP. Apology to Australia's Indigenous Peoples. 13th February 2008. Sited 29th August 2011.

This report details the outcomes and recommendations arising from the successful completion of the third round of training in the Gippsland region 2010, with the summarised results from the first round of training in Shepparton in 2008 and second round of training in the Grampians region (Ballarat) in 2009.

This success in training Aboriginal and Torres Strait Islanders, particularly in the area of health, significantly contributes to closing the Indigenous health and knowledge gap. Moreover, this tertiary education model forecasts the potential for this initiative to be replicated in other faculties, within universities Australia-wide.

Training Outcomes over the first three Training Cohorts

Thirty-three students formally graduated from this training, with the completion rate over the three training cohorts of 87%. Of the Indigenous students enrolled over the three cohorts of students, 93% graduated.

Table 1: Enrolments and completion rates for Indigenous and non-Indigenous students in first three cohorts

Cohort	Indigenous enrolments		Indigenous completions		Non-Indigenous enrolments		Non-Indigenous completions		Total enrolments	Total completions	
	N		N	%	N		N	%	N	N	%
Shepparton	10		10	100	-		n/a	n/a	10	10	100
Ballarat	7		7	100	4		2	50	11	9	82
Gippsland	12		10	83	5		4	80	17	14	82
<i>Total</i>	29		27	93	9		6	67	38	33	87

Key Findings from the Gippsland Training

- Graduates from the Gippsland training cohort identified a hand-in-glove fit between the guiding values and principles of Aboriginal and Torres Strait Islander Community with those of family therapy.
- This is the first training cohort to suggest improvements to the training model.
- This training cohort included ACCO program managers along with their staff. Both staff and managers reported advantages and disadvantages with this student composition.
- Having Indigenous role models, paving the path by leading the way, has a positive impact on what others perceive they too can achieve.

Key Outcomes from the Gippsland Training

- The academic success of the graduates has improved the students' confidence to undertake further academic training.
- As a consequence of having 14 graduates in the Gippsland region, a professional family therapy network and inter-referral process has evolved in this region.
- Improved professional network has developed between mainstream and Indigenous organisations as a consequence of this training.
- There is potential for this training model to be developed for other First Nation countries, such as New Zealand.
- Several graduates in the Gippsland training cohort have developed a vision for a Regional Family Therapy Service
- As a result of the training, managers in the Gippsland region are working toward funding initiatives for designated family therapy positions
- The formation of an Indigenous family therapy professional peak body is necessary.

Recommendations from all three Training Rounds

1. That secured and recurrent funding is sourced from State and Federal Governments, to accommodate the post Graduate Certificate in Family Therapy training costs, to be delivered to all eligible Indigenous CFWs within their community, Victoria-wide.
2. That links with DHS, DoH, the participating ACCOs, and mainstream organisations employing Aboriginal health and child and family workers, and The Bouverie Centre are nurtured and developed. It is recommended that Indigenous Elders and Indigenous researchers and key stakeholders in DHS and La Trobe University be invited to the Advisory Board to consult, advise and further consolidate the capacity of the post Graduate Certificate in Family Therapy.
3. That the 'Black and White Approach' continues to be employed in the delivery of this training program.
4. That research of future training cohorts is maintained to document the impact of the training in the workforce and the workforce development needs of the graduates. It is therefore recommended that further research funding is sourced and an Indigenous trainee researcher employed in a 0.4 position at The Bouverie Centre.
5. That La Trobe University trial the 'Black and White Approach' as a training model, for Aboriginal and Torres Strait Islander students, in other faculties such as education, nursing and social work.
6. That the Indigenous Family Therapy Team devise, develop and deliver a Train the Trainer program, specific to the training model of the 'Black and White Approach'.
7. That a statewide Indigenous Victorian Family Therapy Professional Body be established, as a chapter of the Australian Association for Family Therapists.



Gippsland Graduates and Indigenous Program Training Team 2011



**Graduates from the
Ballarat/Geelong and
Shepparton training cohort**



Graduates from the Shepparton, Ballarat/Geelong and Gippsland training cohorts

RESEARCH REPORT

To us, health is about so much more than simply not being sick.

It's about getting a balance between physical, mental, emotional, cultural and spiritual health.

Health and healing are interwoven, which means that one can't be separated from the other.³

Dr Tamara MacKean,

Australian Indigenous Doctors' Association

³ http://wiswei.com/quotes/index.php?option=com_content&view=category&layout=blog&id=41&Itemid=59 sited 4th May 2011.

Introduction

The Bouverie Centre's Indigenous post Graduate Certificate in Family Therapy is a landmark education initiative, set amidst the National Indigenous⁴ Reform Agreements 2008, led by the Australian Government, to end Indigenous disadvantage. This innovative, resource-intensive and high impact training program, developed and delivered by La Trobe University (LTU), contributes to closing the gap for Aboriginal and Torres Strait Islanders. The training program recognises the considerable knowledge and skills of child, family and mental health workers in Aboriginal and Torres Strait Islander Communities.

The education initiative is located amidst major policy, practice and legislative changes in Victoria. The *Growing Victoria Together* (2005) and *A Fairer Victoria* (2008) outlined the State government's reform agenda, for providing both better quality and more responsive child and family services. Simultaneously the White Paper, *Protecting Children – the Next Steps* (2005) and the two Acts, the *Child Wellbeing and Safety Act* (2005) and *The Children, Youth and Families Act* (2005), were to establish a contemporary approach to respond to vulnerable and at risk children and their families.

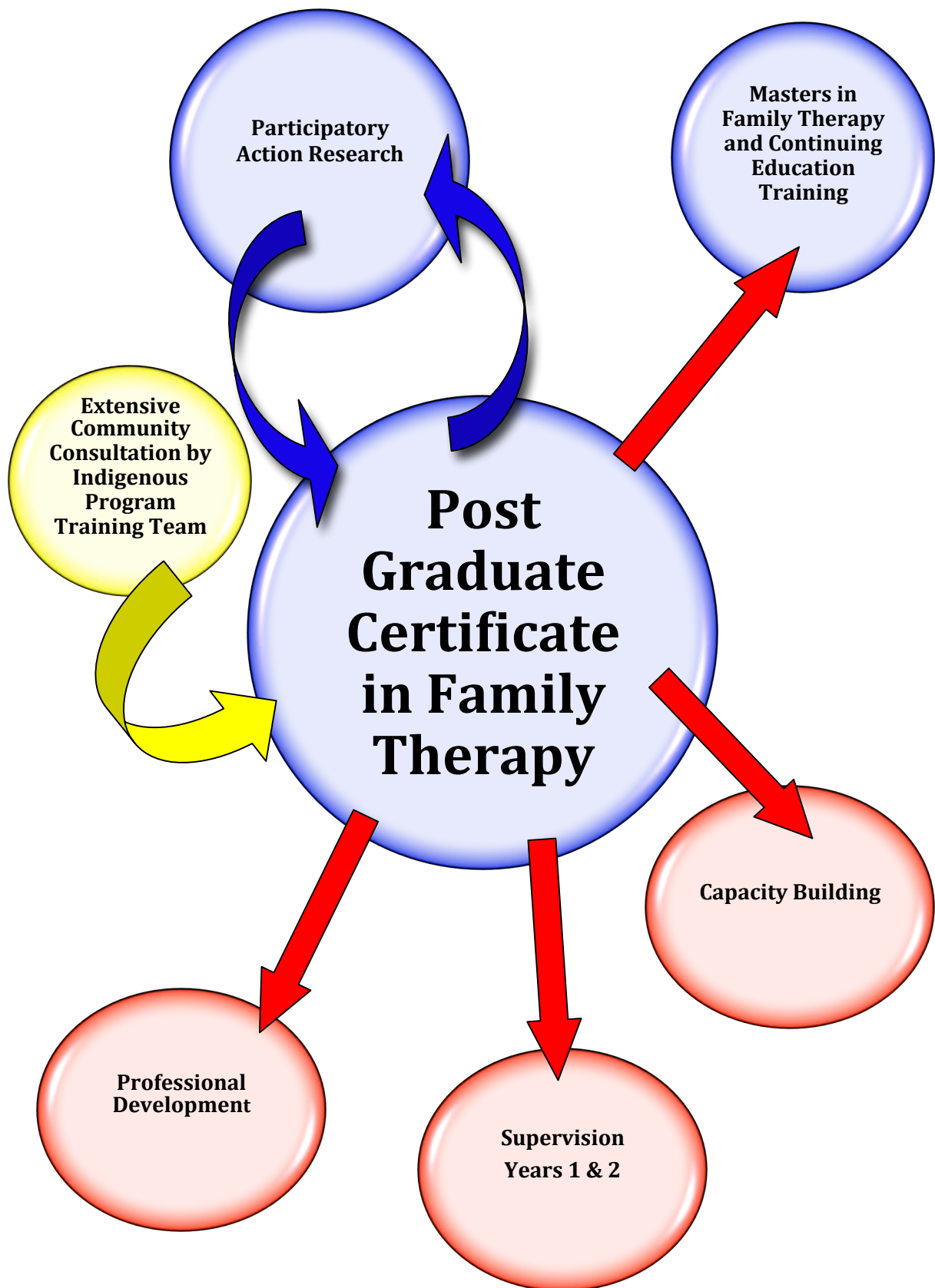
In late 2006, the DHS Children & Family Services Division Indigenous Initiatives Unit (IIU) engaged The Bouverie Centre to develop and implement a family therapy training program for Indigenous child and family workers (CFWs) employed by, or working with ACCOs and other Indigenous health workers in Victoria. The aim of the training program was to increase the capacity of Indigenous CFWs to better meet the needs of Aboriginal families across Victoria.

In 2008, after extensive consultation and advice from the Aboriginal Community and the Project Advisory Group, the original training package proposed by The Bouverie Centre at the request of DHS was upgraded to a postgraduate degree qualification. The Bouverie Centre negotiated this modification with LTU, who then actively supported the enrolment of Aboriginal and Torres Strait Islander students, in this postgraduate qualification. The training was further developed and delivered by The Bouverie Centre, LTU, in partnership with Take Two, Berry Street.

This report focuses on the outcomes and recommendations arising from the research and evaluation of The Bouverie Centre's post Graduate Certificate in Family Therapy, from 2008 – 2010. The first three training cohorts were delivered rurally in Shepparton, Ballarat/Geelong and Gippsland, and were funded by the Department of Human Services, Child Youth and Family Unit (DHS-CYF).

The written reports of Shepparton training 2009 and Ballarat/Geelong training 2010 were previously presented to DHS (Proctor 2009, Latham 2010). This report includes a brief summary of the outcomes of the Shepparton and Ballarat/Geelong training, but will primarily demonstrate for the first time the research findings from the Gippsland training.

⁴ The word Indigenous is employed and inclusive of Aboriginal and Torres Strait Islander peoples.



The Training Model of the Post Graduate Certificate in Family Therapy

Program Description

This program delivers postgraduate training in Family Therapy to Aboriginal (and some non-Aboriginal) child and family workers statewide. The program was developed to deliver far more than just the postgraduate qualification.

As the diagram on the previous page demonstrates, extensive Community consultation between regional ACCOs and other services involved with the training and The Bouverie Centre's Indigenous Program training team precedes the training. This consultation process affords the opportunity to identify and respond to concerns from ACCO managers and prospective students of the training program. Such concerns may include the academic status of the training, the assessment requirements or the participatory action research process. This consultation process along with the research processes subsequently position this training within the context of that region's Aboriginal Community.

Role of Indigenous Trainer

The role of the Indigenous trainer is primarily to ensure the cultural safety of the student group by establishing a safe environment, which in turn facilitates a positive learning experience. Having an established cultural network with an ear to the ground, the Indigenous trainer is aware of and thereby mindful of recent events within Community that may adversely impact upon the students individually or as a group.

The Indigenous trainer translates mainstream ideas and theories for the student group. Similarly, the Indigenous trainer translates Aboriginal social and cultural protocols and practices for the non-Indigenous trainer. The Indigenous trainer is a powerful role model for the students since their academic success challenges the social stereotype that Indigenous people don't achieve at a tertiary level. This stereotype is insidiously pervasive and can be influential from both a mainstream and an Indigenous perspective.

By thus creating a level playing field of equity and parity, teaching and learning perspectives are explored by the Indigenous and non-Indigenous trainers. Their differences within this context are negotiated and respectful resolutions are found. This negotiated process models the possibility and potential of successful collaborative partnerships between Indigenous and non-Indigenous people.

Role of non-Indigenous Trainer

The role of the non-Indigenous family therapist/lecturer is primarily to ensure the delivery of the academic course content, to facilitate the group learning processes, including role-plays and skills development demonstrations, and to continue to offer clinical supervision and workforce implementation of skills for two years following the completion of the postgraduate training. This is done within the construct of the Black and White Approach, employing a strength-based approach founded on adult learning principles. (Refer to page 35 for a thorough exploration of the Black and White Approach.)

The follow-up supervision supports capacity-building of the graduates, in both mainstream and Indigenous health settings, and positions graduates with the opportunity to become full members of the Australian Association of Family Therapists (AAFT)⁵. Since the conclusion of the third training cohort, three of the graduates have successfully enrolled in the Masters in Family Therapy. Further to this, several graduates have participated in The Bouverie Centre's mainstream continuing education workshops.

Partnerships

Partnerships with The Bouverie Centre's Indigenous Program training team primarily include the Department of Human Services' (DHS) Child Youth and Families Division and the Aboriginal Community Controlled Organisations (ACCOs). The ACCOs have recruited and endorsed the workers involved in the training. The Bouverie Centre, as part of La Trobe University (LTU), has ensured that the workers met the Recommended Prior Learning (RPL) in order to be eligible to enrol in the post Graduate Certificate in Family Therapy.

In line with the DHS training guidelines and in consultation with the Shepparton and regional ACCOs involved in the training, it was agreed that the inaugural cohort of students would be solely Indigenous.

With the second cohort of students in the Ballarat and Geelong area, the Ballarat and District Aboriginal Community Controlled Cooperative (BADAC) requested of DHS and The Bouverie Centre that some of their non-Indigenous workers, who were an integral part of Aboriginal Community, be eligible for the training. The Bouverie Centre's Indigenous Program training team supported and endorsed the request, and subsequently negotiated with DHS that the composition of the student cohorts be determined on a region by region basis, decided by the participating ACCOs of that region, with the proviso that:

- the non-Indigenous students were selected by the ACCO manager;
- the students were perceived to be part of and working within the Aboriginal community in the specific regions; and
- the number of non-Indigenous students in any training cohort remains less than 30% of the student group.

This percentage of non-Indigenous students was arrived at through research findings presented by the Indigenous Program training team to DHS. The DHS's responsiveness to listen and respond to the request of BADAC, via The Bouverie Centre's Indigenous Program training team, reinforced and consolidated a successful three-way partnership.

The Bouverie Centre and Take Two, Berry Street, have also established a strong partnership. Take Two is a state wide service, which provides a therapeutic response to infants, children and young people, who are also clients of Child Protection. These children and young people have frequently suffered neglect and abuse. Take Two has a dedicated Aboriginal Service Development team,

⁵ AAFT: To gain full membership of AAFT, 50 hours of supervision must be demonstrated.

consisting of Aboriginal and non-Aboriginal clinicians, providing services to Aboriginal and Torres Strait Islander children, families and Communities.

In partnership with VACCA, Shaun Coade, the manager of Take Two's Aboriginal Service Development Team, developed a five-day training program, named 'Yarning Up on Trauma' (YUT). This trauma training package, initiated in 2006, continues to be delivered Australia-wide. It is important to acknowledge that YUT training was developed with a 'black and white approach with Aboriginal and non-Aboriginal trainers working together' (Coade, Downey & McClung, 2008). The YUT training course content, together with additional assessment tasks, is an integral part of the post Graduate Certificate in Family Therapy.



The inaugural Indigenous Family Therapy Network Forum, August 2011

Summary of the First Two Training Cohorts

Shepparton 2009

Consultation with Community⁶ and the ACCO managers in Shepparton and Echuca by The Bouverie Centre's Indigenous Program training team⁷, prior to commencement of training, was critical to the success of this training program. Thorough consultation in turn impacted on the successful recruitment of this first cohort of students and a decision was made to hold the training off-site. Community and the ACCO managers decided that all students in this training would be Indigenous, consistent with the DHS funding guidelines. The Shepparton training in the post Graduate Certificate in Family Therapy resulted in significant changes around graduates' clinical practice and their professional relationships, both within their ACCOs and within mainstream organisations.

The success of the training hinged on the Indigenous Program training team's willingness to both 'listen' and 'hear' the Indigenous students' experience of the training and their on-going experience of participating in the group. The two trainers in the Shepparton training team were an Indigenous Cultural Consultant (who simultaneously undertook the training) and a highly experienced non-Indigenous academic and family therapist. On the advice of the Cultural Consultant, good healthy food became very much a part of the training days.

The collaborative teaching methodology, between students and trainers, became integral to the development of a safe learning environment. This teaching pedagogy and the safe learning environment, founded on adult learning principles, resulted in a 100% students retention and graduation rate. This training ameliorated prior educational experience for the students, as these comments show:

The training has challenged me academically and it's also challenged me in what I learnt at Uni, specifically around mental health. It has changed my course of thinking; even though I have worked in a family therapy narrative way ... it has challenged my thinking around what I need to do differently. Even though I work in a systemic, didactic approach... [the training] has challenged me when I think about the work that I have done in the past.

I see benefit for Aboriginal communities around this course, around family therapy, and what the participants can actually deliver and give back, and the skilling-up [of] people to do the work that we need to do to improve Aboriginal families. The training is delivered in a black and white approach, it's grass roots, it's within Community. The focus of the family therapy is about this community, and what needs to be taught to the participants by their involvement. We have empowered them and we have given them ownership of this course and we have supported them through this. I think that is what has worked in this course. I think that, that would not happen if this was done at La Trobe University. These fellas [the student cohort] probably wouldn't have even lasted the first month. I think that's the beauty of it, to be able to deliver it within Community. (Indigenous consultant and trainer)

⁶ Aboriginal and Torres Strait Islander Community is referred to as Community.

⁷ At that time the Indigenous team consisted of a non-Indigenous Manager and two trainers, one being Indigenous.

In the Shepparton cohort of students, ten students enrolled; all were Indigenous and all 10 successfully graduated in the post Graduate Certificate in Family Therapy 2008. This equates to a 100% graduation rate for Indigenous students.

The Bouverie Centre's Indigenous team actively supports capacity-building and has provided Shepparton graduates with two years of supervision. Through negotiation with the Victorian Association of Family Therapists (VAFT)⁸, all graduates from this and subsequent training are afforded at no cost, provisional membership of VAFT. Upon conclusion of 50 hours of supervision over a two-year period, graduates are eligible for full membership of VAFT. The Australian Association of Family Therapists, (AAFT), the newly formed peak body of Australian Family Therapists' offers the graduates of this training the same opportunities for membership, both provisional and full membership.

People need to know what we have done. (Successfully completing tertiary training). All our high profile people are sports people, but there are lots of others of us out there. The media don't promote them because '*the most dangerous thing in the world is an educated black*'. The most dangerous thing in the world **IS** an educated black" Look out!!! Here comes trouble!... It's great that this training has been offered to workers to broaden their skills, because the more educated we get the more dangerous we are!!

(An Indigenous graduate playfully expressing the sense of pride and power an education can offer)

Ballarat 2009-10

Once again the Indigenous Program training team initiated the Ballarat and Geelong training with extensive consultation with Community and ACCO managers. ACCO managers in these Communities requested some of their CFWs who were non-Indigenous be afforded the opportunity to attend the training. These non-Indigenous workers were part of Community, possibly married to Indigenous people with Indigenous children. This inclusion of non-Indigenous students into the training necessitated an adjustment to the DHS funding guidelines.

I think the thing that has made it a good learning environment has been the people involved. That is from the students to the people who are running the course. From day one it has been about providing that safe and comfortable environment for everyone to thrive and learn. It's not just, here is a start line, whoever gets across the line first, 'Congratulations', it's about getting everyone across the line and what can we all do to better support that.

This major change in the Ballarat and Geelong training cohort was negotiated in a three-way partnership between DHS, the ACCOs and The Bouverie Centre and resulted in an alternative student selection criteria, whereby one-third of the student cohort applying for and included in the training were non-Indigenous, yet part of Indigenous Community. It was the ACCO managers who

⁸ VAFT; The Victorian Association of Family Therapists Inc is committed to the development and advancement of leadership and excellence in Family Therapy through fostering professional competency and integrity.

selected the non-Indigenous students to attend the training. The Indigenous students of this training cohort supported the decision and reported that the inclusion of non-Indigenous students enriched the learning process.

I think to move forward, both Indigenous and non-Indigenous people have to be moving together so there does need to be that element of non-Aboriginal people in this course. If it (were purely an) Aboriginal group I guess it would work well but I think it is going to work better with both in the room because....it's hard to explain but I know as Aboriginal people we can make a difference, but we can only do so much. It needs to be a joint path that everyone is walking and that involves all cultures. It's not just about how this group is going to go and thrive out there, it's about everyone.

Again the training was held off-site and good healthy food was very much a part of the training days.

A second major change to this training cohort was the addition of the Indigenous researcher to the Indigenous Program training team. Due to a late inclusion to the Bouverie staff team, and thereby a late inclusion to the Shepparton training cohort, the Indigenous researcher was not involved in the Shepparton training.

The Indigenous researcher participated in preliminary training days with the students. This afforded her acceptance as part of the Indigenous Program training team and paved the way for the research of the Ballarat/Geelong cohort of students.

The training model employed in Shepparton was again used with the Ballarat/Geelong cohort of students. Students again commented the experience of this training ameliorated previous educational experience.

This form of learning had been less like a classroom structured setting, so for me this has been a lot more relaxed, friendly and definitely more supportive. I think it is very different to a lot of the education I have previously done. This is a really wonderful thing because, if all education could be this way, people probably wouldn't leave school early; they would be supported to continue.

In the Ballarat and Geelong cohort of students, 11 students enrolled, of whom 9 were Indigenous and 2 non Indigenous. One non Indigenous student did not complete the written requirements of the course. One non Indigenous student withdrew due to illness. This equates to an 82% graduation rate of all students, with a 100% graduation rate of Indigenous students.

As with the Shepparton students, the Indigenous Program training team provided two years follow-up supervision in Ballarat, and provisional membership of AAFT, formally VAFT, with the option of full membership upon the completion of the 50 hours of supervision.



Graduates from Shepparton, the first training cohort

REFLECTIONS OF THE RESEARCHER

*Australia will become a model for other global communities ... I see
Australians coming together from all walks of life, especially
Indigenous and non-Indigenous Australia, for a better tomorrow.
We need to look into one another's point of view.⁹*

Mandawuy Yunupingu

Aboriginal School Principal and Musician

Reflections of the Indigenous Researcher March 2009

⁹ http://wiswei.com/quotes/index.php?option=com_content&view=category&layout=blog&id=48&Itemid=66 sited on 10th of May 2011

The researcher was fortunate enough to attend the Family Therapy Congress in Portoroz, Slovenia from the 4th to the 7th of March 2009, funded by CRCAH¹⁰. The title of the conference was:

Reconciling Differences: Can Family Therapy Help Heal the World? The researcher noted in her reflective journal at the time: ‘Why not try to heal the world! What a deadly¹¹ title for a conference’?

This is a very brief synopsis of her experience of the conference. From her report to CRCAH after the conference, she expressed two major realisations:

From the privileged position of this global perspective, I recognised similarities in the reoccurring and intergenerational patterns of trauma in other First Nations which had endured colonisation. These countries included South Africa, Canada and the Americas. The conference dissertations that addressed trauma and the radical dislocation of families, communities and cultures, repeatedly linked the impact of colonisation and post-colonisation with the poor malaise of Indigenous families. From this global viewing point, I saw the repeated patterns of poor health in First Nation families as a predictable and inevitable consequence of colonisation. Though a sad realisation it was also a liberating realisation, as it reframed the problem of ‘Aboriginal Australia’ squarely at the feet of the enduring impact of Colonisation.

This evidenced what I knew but now I saw this reframe transfigure to a fact.

*Secondly, that the Bouverie Centre’s Indigenous Program training team and LTU can confidently position itself on the global stage. We can ‘**stand up proud and strong**’ as being be at the cutting edge of Indigenous Family Therapy training, within a global context. No-one I spoke with at the conference had heard of, nor knew of a postgraduate family therapy training program, dedicated to training Indigenous child and family workers. Further to this, a thorough literature search has also not uncovered a family therapy training program delivered in Community, for Indigenous health workers.*

¹⁰CRCAH: Cooperative Research Centre for Aboriginal Health.

¹¹ Deadly is used colloquially in Indigenous culture and carries the meaning of that’s fantastic with some degree of gravitas.

RESEARCH FINDINGS FROM THE GIPPSLAND TRAINING 2011

*You white people are so strange. We think it is very primitive for a child to have only two parents.*¹²

Aboriginal Elder

¹² <http://www.memorable-quotes.com/australian+aboriginal+elder,a108.html> sited 4th May 2011.

The Gippsland Training

The third training program was held in the Gippsland area. This training was again initiated with lengthy Community consultation. The decisions identified in the previous two research reports, which contributed to the success of the training in both Shepparton and Ballarat/Geelong, were maintained. These included holding the training off-site, with one-third of the students being non-Indigenous and endorsed and selected by their ACCO managers. The training model was again based on adult learning principles and deep listening to the students' experiences by the trainers. The Indigenous researcher was introduced from the outset of training. Good nourishing food was again very much a part of the training day. One major change in this training cohort was the inclusion of ACCO managers with their staff. Again two years of follow-up supervision by the Bouverie Indigenous Program training team was offered to the graduates of the training.

Of the 17 students who enrolled in Gippsland, 12 were Indigenous and 5 were non-Indigenous. One non-Indigenous student withdrew due to pregnancy and two Indigenous students withdrew half way through the course for personal reasons. All 14 remaining students graduated, with a graduation rate of 83% for the Indigenous students.

Research Question

Is a post Graduate Certificate in Family Therapy for Aboriginal and Torres Strait Islander child and family workers a qualification that will be of benefit to and improve service delivery to Indigenous Communities in rural Victoria?

Method

The research used the following methods of data collection throughout the training:

- Pre-training questionnaires.
- Session Evaluation Forms completed by the students after and/or during each session.
- An Appreciative Inquiry Workshop¹³ conducted with students, by the researcher.
- Student 'spoken essays'¹⁴ documenting the students' self-reported learnings, which result from the training. These essays are part of the assessment requirements of the post Graduate Certificate in Family Therapy¹⁵.
- A weekly journal of reflections, collated by the co-trainers throughout the training.
- Journal reflections kept by the researcher while attending training sessions.
- Minutes from the Indigenous Program Team meetings, the Advisory Group and CIG meetings, 2010 and 2011.

¹³ Appreciative Inquiry is a process that invites people to learn and transform themselves, their relationships, their organizations, and communities through personal stories of accomplishment and aspiration. It begins with identifying the best of "what is" in order to pursue dreams and possibilities of "what could be." <http://appreciativeinquiry.case.edu/intro/whatisai.cfm>

¹⁴ As part of the assessment requirements of the course, students are required to 'speak' about their learnings and the impact of the training upon their work with families. These 30-minute interviews were then transcribed and given back to the students to edit and submit a 2,500-word essay based on the transcription of their spoken words.

¹⁵ Students have given their permission to use 'de-identified' quotes for this report.

Each week the researcher collated the evaluation forms from the workshop, with findings forwarded via email to the Indigenous consultant and the trainer. This afforded the opportunity for the trainers to respond to immediate and pending issues impacting on the student group. Such immediate issues included:

- pinpointing an area needing clarification in the next workshop;
- problems with the training room; and
- changes to the catering menu.

On four occasions during the training sessions, the researcher collated the themes surfacing from the weekly evaluation forms and relayed this information to the students, either in person, or via Shaun Coade, the Cultural Consultant. In effect the students received 'feedback on their feedback', to confirm with the students the accuracy of the trends perceived by the researcher.

The researcher also facilitated an Appreciative Inquiry (AI) Workshop, spread over two half-days. This type of workshop is a 'strengths-based approach' to research. The AI workshop helped to create a collective document based on the students' experiential practice knowledge that was used to implement their ideas within their organisation and without the need for additional funding.

Ethics

Ethics approval was granted by the La Trobe University Human Ethics Committee and the Department of Human Services, Human Research Ethics Committee.

Findings

The Gippsland students, like the graduates from the previous two cohorts, commented that the experience of this training ameliorated previous educational experience. The Gippsland students greatly appreciated and valued the opportunity for follow-up supervision and the subsequent potential for capacity building in their Community:

I think what I would really need from my organisation to support me as a family therapist when I complete the training, would be actual supervised practice.

There is a need for the supervision to be maintained to develop a professional mob of Indigenous family therapists.

As with the graduates of the Ballarat/Geelong training the graduates of this training cohort identified an improvement in their professional confidence in managing the change between working cultures from Indigenous to non-Indigenous service providers and clients, and vice versa.

I don't work any differently with my white families as what I do with my Aboriginal families. I think that if you get it right for the Aboriginal families then you have it right for all families.

During the Gippsland training the Indigenous Cultural Consultant clearly identified the training model as the 'Black and White Approach'. (The naming, complexity and integrity of the 'Black and White Approach' is explored in greater detail in the following pages.)

Several New Research Findings Surfaced From This Training Round

Aboriginal Values and Principles

Graduates from this training cohort identified a hand-in-glove fit between the guiding values and principles of Aboriginal and Torres Strait Islander Community with those of family therapy:

How similar to the practices of a family therapist around the story telling and the conversation around working with families. This all sits really comfortable within how we operate and how I operate around supporting families.

It is so important to have integrity and work ethics to make an impact within an organisation that you work; to make important decisions concerning families and their children, I've been raised up to have compassion and respect for those around me. That is why Family Therapy would help in my role as an Aboriginal Family Decision Making convener.

One of the Child Protection workers said to me the other day, 'I've spent six months with this family and the fellow hardly talks ... but there was a different atmosphere when we had the meeting and everything was great. He spoke, and he spoke at length, he spoke how he felt about his children, about his partner, about his relatives, so it was just great.

I said: It's how you approach things!

Improvements to Training Model

Of the three training cohorts, this is the first to suggest improvements to the training model. This may be attributed to the safety and ownership of the training program the students experienced in regard to the 'Black and White Approach' or possibly the inclusion of managers in the training.

The students suggested the 'Black and White Approach' could be improved with the inclusion of video and role-play demonstrations specifically targeting the day's skills development. Graduates identified the need to address, explore and integrate the overlap of the Yarning Up on Trauma Training unit with the Family Therapy training.

In terms of what could be explored more, the trauma theory on its own is really, really interesting and it's really great... and the same with the family therapy, but I think there really is that need to explore how the two overlap.

I suppose the training was a lot of word information, it would have been good to ... (and I'm using that Yarning up on Trauma training) ... but have some videos or some examples of papers you have presented and role plays where we could be observers.

Further skills developments pertaining to the closure of counselling sessions were also identified:

I would have liked to have seen some videos or see you guys do more demonstrations because even the language, we have to change.

I would have liked to touch a little bit more on how to finish working with families, when to close. I think as a professional I gauge that pretty well anyway, but a little bit of reassurance and a little bit of guidance on how to finish working with families constructively so that you're not bringing in further trauma or damage or disconnection.

Inclusion of ACCO Program Managers and Staff

What was very different in this training cohort was the inclusion of ACCO program managers along with their staff within the training program. Staff and managers reported both advantages and disadvantages with this student composition.

I find I am more supportive and aware that I have to take care of myself because of the work we do. I have a manager that is saying, 'You take today off because you have just dealt with child abuse'.

The feedback that I have got from people is that they couldn't express themselves to the manner that they wanted because their managers and other people of influence were in the room with them.

During this course I have employed five new staff to work at the residential unit I manage and I find that my style of training them has changed significantly, so that is a recommendation for other people to try this training and upgrade their management skills.

Indigenous Role Models

Having Indigenous role models paving the path by leading the way has a positive impact on what others perceive they too can achieve. The Bouverie Centre employed one of the graduates from the Ballarat/Geelong training cohort, in a trainee family therapist and cultural consultant position, within the second Indigenous Program training team. Her attendance at some of the training days in the Gippsland training round had a positive impact on the students.

Was great to have [a graduate] attending and to see the other Aboriginal people [who] have done it and succeeded very good encouragement for the rest of us.

Outcomes from the Gippsland Training

There were a number of very rewarding outcomes from the Gippsland training which reflect the skills and confidence of the graduates as well as their vision of ways to improve services for their Community.

Continuing Education

The academic success of the graduates has improved their confidence in undertaking further academic training. Subsequently Graduates are seeking continuing education and training opportunities, to further expand their skills and knowledge base.

I'm surprised about how much I want to learn and how much I want to give it at the age I'm at now. I don't want to stop working with my mob at 65. I just want to be able to keep doing this because I know that one day I'm going to be a wise old man.

Also having you guys [trainers] come down and deliver refresher courses just to remind us of new learnings that have been found and new ways of delivering family therapy would be awesome.

A young girl disclosed her horrific circumstances and it never would have happened if I hadn't have done the training. She made leading comments that I picked up on, because of the training, [previously] I wouldn't have seen the signs. It was so beneficial doing this training to helping that young girl, and she's kicking goals now, because it gave me the chance to link her in with services that can help her.

Professional Network

As a consequence of there being 14 graduates in the Gippsland region, a professional family therapy network and inter-referral process has evolved in this region. Clients are now being referred to family therapists who specialise in specific client groups.

If one of our therapists has got a client that they need help with, we have this pool of therapists that we can call on. And we can say [to a fellow worker], 'I think this bloke might be more suited to you, your style of therapy'. And we can do that within our community. I think that's going to be one of the biggest advantages of what we've got going on here. I think we can pull this off straight away without further funding.

Improved professional work between mainstream and Indigenous organisations

An improved professional working relationship has developed between mainstream and Indigenous organisations, as a consequence of this training.

The impact on the organisation having done this course has been positive in regards to the status of qualified workers and the recognition from peers in the mainstream services to the extent that I have been getting more referrals and we are getting more clients. As a result more mainstream service providers are linking into us, so we are now consolidating more in partnerships, whether it be family mediation or, for example with CASA if they are not getting anywhere with a client, they will ring us to come sit with them to work with them to support this client.

My ideal way of working in the local community as a family therapist, would be that as part of the healing service, to have a family therapy service that works in conjunction with our healing service, so that then we can work together a men's time out place, so then that can be attached to men's therapy. The healing service would be a family service and an environment where they both come together and work at reconnecting families, mediation or whatever the case would be needed. But men would have their own place so they can be secure and safely to tell their story, the women have their own place and then at the healing service the family come together.

International Potential

There is potential for this training model to be developed for the international market.

I'm really excited because you know I can see from my perspective, being a Maori, in Aboriginal land over here in Australia, I can see this type of training working in New Zealand. I would like to come and talk to my mob in New Zealand about what this training does, from not only my perspective of a Maori working in Aboriginal society, but also from an Indigenous person's point of view and how it's going to work sitting alongside mainstream. I think it's fantastic.

Regional Family Therapy Service

Several graduates in the Gippsland training cohort have developed a vision for a Regional Family Therapy Service.

We need a more comfortable environment to be able to do family therapy, and a trained receptionist who has an understanding of family therapy.

I would like to see just a place for our family therapy people to be like rooms that you can't hear anything – sound-proofed.

We would build our facility away from GEGAC¹⁶, although that is a GEGAC initiative so that families can come and talk to family therapists with anonymity, so that there's no stigma attached to 'I saw you at the co-op and you were going into that building'. So it's away somewhere so that people can have that safe, 'in confidence area' they can talk about their

¹⁶ Gippsland and East Gippsland Aboriginal Cooperative.

family life and what's going on for them. Also to have every person in the course, maybe have a mirrored room so that people could come and watch what you're doing and learn from you and take note of the different skills that you are using to engage that family.

My ideal workplace would be out there in the community whether it's in the park sitting at a park bench, or whether it's at their place or whether it's down the beach. I'm able to take the Dad out, or take the family out and spend a few hours with them, and get to know them and to put the supports in place and the needs for them. No but my ideal place would be not in an office.

Designated Family Therapy Positions

As a result of the training, managers in the Gippsland region are working toward funding initiatives for designated family therapy positions within their health service.

One of the things that I'm really working towards its getting identified family therapist positions within the unit.

I think there's going to come a stage where we are going to look at Lakes, we need one fully funded position in Bairnsdale, we need one fully funded position in Orbost, applying for funding to have fully committed therapists working, not just as part of your job, to have people fully functional as full-on therapists.

To be able to set someone up in each area, I think takes this training program and what we've done, to a whole new level where we're using this to really benefit the Community with well trained people.

Every Indigenous person in Koori organisations working in family services should have the opportunity to do this course. The context of the course is fantastic and should be put out there to mainstream service providers, social workers, counsellors and DHS workers to provide an opportunity and resource so they get an understanding of how Indigenous people operate, work and why things are in a particular way.

The formation of an Indigenous Professional Peak Body

Students identified a growing need for an Indigenous family therapy professional peak body to be established in Victoria:

A support network of the participants of family therapists coming together once every couple of months to see how we are all travelling, what we can do to support each other and have ourselves linked up so, that if a family isn't working I can refer them on to someone else, a therapist from GEGAC.

As well as supervision it would be good to get with other people who have finished this course, see how they are going, what has worked well and what failures have they had.

OUTCOMES AND RECOMMENDATIONS FROM THE FIRST THREE TRAINING COHORTS SHEPPARTON, BALLARAT, GEELONG & GIPPSLAND: 2009-2011

*Each of us is unique. We are different. We are all Australians and call this home. Let us rejoice in our diversity and difference because it is they that will enrich us. It is who we are and where we want to be that will ultimately give us the strength, wisdom, inspiration and the generosity to get the job done.*¹⁷

Patrick Dodson

Aboriginal Elder

¹⁷ http://wiswei.com/quotes/index.php?option=com_content&view=article&id=86:each-of-us-is-unique&catid=47:people&Itemid=65
sited 4th May 2011.

Outcomes from the first three Cohorts

Training Outcomes

Thirty-three students formally graduated from this training, with the completion rate over the three training cohorts of 87%, and a **93% graduation rate for the Indigenous students**.

In the Shepparton cohort of students, 10 students enrolled, all were Indigenous and all 10 successfully graduated in the post Graduate Certificate in Family Therapy 2008. This equates to a 100% graduation rate for Indigenous students.

In the Ballarat cohort of students, 11 students enrolled, of whom 9 were Indigenous and 2 non Indigenous. One non Indigenous student did not complete the written requirements of the course. One non Indigenous student withdrew due to illness. This equates to an 82% graduation rate of all students, with a 100% graduation rate of Indigenous students.

In the Gippsland cohort of students, 17 students enrolled, of whom 12 were Indigenous and 5 were non-Indigenous. One non Indigenous student withdrew due to pregnancy and two Indigenous students withdrew half way through the course for personal reasons. All 14 remaining students graduated, with a graduation rate of 83% for the Indigenous students.

Table II: Enrolments and completion rates for Indigenous and non-Indigenous students in first 3 cohorts

Cohort	Indigenous enrolments	Indigenous completions		Non-Indigenous enrolments	Non-Indigenous completions		Total enrolments	Total completions	
	N	N	%	N	N	%	N	N	%
Shepparton	10	10	100	-	n/a	n/a	10	10	100
Ballarat	7	7	100	4	2	50	11	9	82
Gippsland	12	10	83	5	4	80	17	14	82
<i>Total</i>	<i>29</i>	<i>27</i>	<i>93</i>	<i>9</i>	<i>6</i>	<i>67</i>	<i>38</i>	<i>33</i>	<i>87</i>

The 'Black and White' Training Approach

'Black and White Training Approach' is the term which has come to describe and encapsulate the training methodology developed over the three training rounds, from Shepparton, to Ballarat/Geelong and to Gippsland. The training model has the following identified characteristics:

1. **Two trainers, one being an Aboriginal Cultural Consultant trained in family therapy (Shaun Coade) and the other a non-Indigenous trainer and family therapist (Banu Moloney) with extensive training experience in academia.** Integral to the success of the training was the combined approach of the two trainers, both

with specific areas of expertise, combining their skills in guiding the students through the training program.

It was great the way that Banu would explain a theory and then Shaun would add the cultural lens to that particular theory. I thought that was great – it was actually a privilege to experience that.

The delivery was good because they simplified it. Even though Banu spoke about the big words, or the therapeutic words, she turned that around to simplify that and same with Shaun.

I believe that Banu and Shaun together made it easier for us to learn, Banu using her academic style of teaching and Shaun understanding that we don't speak or think like that.

This course has been amazing. I would like to thank Banu and Shaun for their patient approach and sharing their stories with all the participants. The course enabled me to grow firstly as an individual and enhanced my skills within the workplace. You have provided me with understanding of the holistic approach to working with individuals, families and the community. It has been a privilege to know your team. I would like to thank our peers for trusting and sharing experiences during training. This learning journey is one that I will always remember for the experience, challenges, frustrations, hope and knowledge.

2. **Both trainers held a profound awareness of the possibility of past negative educational experiences for the Indigenous students, and indeed all the students.** The trainers encouraged transparency and discussion around the impact of these past experiences and this acknowledgment and openness of discussion in turn created a safe learning environment.

Shaun understood the 'shame job'¹⁸ factor and made sure that no-one felt dumb, this I think is a very important understanding when teaching Koori people, and feel that it was a very positive and inclusive experience to have both an Aboriginal and non-Aboriginal trainer teaching us.

¹⁸ 'Shame job.' A widely used Aboriginal phrase to express the shame an individual may feel and subsequently how this may reflect on all in stereotyping Community.

In the students' spoken word essays, several commented on the non-Indigenous trainer as having said on several occasions, 'There are no stupid questions'.

In this course, the ethics and the training, the questions that you're asked ...there's no silly question and there's sometimes there's no right or wrong question.

- 3. The training was located in the students' rural Community.** As a direct consequence of Community consultation, prior to every training round, locating the training within the students' community was imperative to the success of the training, and became characteristic of the Black and White Approach.

The benefits of learning with both black and white teachers that can bounce off each other, to not only also teach in the Community ... but to also learn [from] the community and people that they are teaching. I'm not sure if it would have had the same result if we had to travel to the course, opposed to having the course travel to us.

- 4. The training was located away from all students' workplaces.** After consultation with ACCO managers and prospective students, it was decided to locate the training away from the students' workplaces to afford the students the opportunity to fully commit to all one-day workshops, free from unexpected interruptions.

I give all the credit for my good learning experience to the trainers, and their choice of venue, they knew how to make learning an enjoyable and positive experience.

The learning environment was fantastic, I love Ramahyuck Farm and so it was an added bonus for me to attend training in such a peaceful, tranquil place.

- 5. Facilitated by the Cultural Consultant, the students in each training cohort negotiated an agreed set of rules to establish and maintain respect in and of the students and the trainers.** This agreed set of rules created the foundation for a safe learning environment. Creating a safe learning environment in turn ameliorated some students' previous educational experiences.

The learning environment was the best thing, the benefits of learning from each other in a relaxed and peaceful atmosphere with great food.

What I have found the most challenging is getting the essays and assignments done again being thought of as being incompetent and unsure of what others will think if I get it wrong, I struggled with this all through school and the other courses I have done.

- 6. The training was delivered using adult learning principles drawing on the students' strengths and prior knowledge.** Imperative to gaining and maintaining the respect of all students and particularly the Indigenous students was to work from a strengths-based approach. Acknowledging students' prior knowledge and wisdom, and the cultural impact of this knowledge was intrinsic to the success of the training program.

I think that it's fantastic to get recognised for the skills that you've already got, and to build all those things.

The highlights of the training for me was I suppose a number of things, one was describing the work we have done in language from an academic standpoint ... so understanding that there is an academic term for some of the work that we do. Also affirming some of the work we do is ... like before we found out about what a family therapist does, we were already practising some of those principles and some of the types of expression and some of the practices in a very naive but similar way, which is based on for us around cultural processes of engagement.

Everyone was treated equal. This was the same when other Bouverie staff came up for a visit, everyone made everyone feel comfortable. This made the training fantastic.

7. The training was characterised by a reciprocity of learning between trainers and the students.

As a result of this reciprocity of learning, the trainers learnt from the students and the students learnt from the trainers. This parity and equity in recognising and respecting prior knowledge and wisdom of both the trainers and the students is now firmly embedded in the characteristics of the Black and White Approach.

The non-Indigenous trainer recognised the importance of

Acknowledging cultural differences as well as individual differences, for example, asking 'is there something that is missing here that is important to include from a cultural perspective?' Acknowledging, validating and including differences [is hugely important] from a cultural perspective, from a colonised and an individual perspective.

8. To address and reconstruct the power of the written word through re-writing texts in culturally congruent language. The non-Indigenous trainer encouraged students to rework the written academic text during the classroom discussions.

This would be achieved through the use of a data projector, with the trainer re-writing the new culturally appropriate text on the slides with the students' co-operation. This re-wording and re-working of the text would position the day's theory within an Indigenous context, thus affording the students the opportunity to own the theory, relate it to their knowledge base and to simultaneously learn the academic genre of family therapy. The non-Indigenous trainer also learnt from this exchange of cultural processes and knowledge.

The way Banu changed things on the slide suited me. That's new to me, that way of teaching where you change the slides. Banu and Shaun developed that themselves and I think it would be great to do it with mainstream students as well. It's a great way of learning actually.

It validated our comments to watch Banu put our comments into the computer and then see them up on the screen. It made you realise that what you were saying was valid input.

9. All training workshops were accompanied by healthy food. It is very much a part of Indigenous culture to share and to share food is particularly important to 'oil the day'.

Also having our food supplied was really good. He's done such a good job of making sure that there was enough food and drinks, which satisfied everyone.

Good healthy food, morning tea, lunch and afternoon tea, with consideration of dietary needs (e.g. diabetes) was great.

10. Providing feedback from the previous week's learnings was important to the students.

Summarising the theory or learnings from the previous week's training positioned the students to reconnect with the training content.

Giving feedback the next week on what came out of the previous week's sessions ... was really good to trigger us and remind us for the next session. I found that practice a really good one.

I felt safe, and at the start of the next week we would debrief on the week before, look at how people were travelling and what supports can be offered.

11. Collecting feedback on their weekly evaluation forms and responding to student requests

played an important role. The summary findings of the weekly evaluation sheets were fed back to the trainers on a weekly basis. This feedback from the students, to the researcher and back to the trainers, was then discussed with the students at the beginning of the next training day, enhancing safety in the learning environment. In one training cohort both the venue and the catering were changed in response to the students' feedback.

[The] echo [in the room], too much. Air-conditioner too loud, but it's hot without it on.

12. Awareness and consideration of the impact of external events upon the student is integral to the success of the training (e.g. births, deaths and cultural events, such as NAIDOC week). It is imperative in all cultures to be mindful of external impacts upon the student, but this is even more pronounced within the context of Indigenous Community.

There was a whole lot in our family, we had three deaths of family members within weeks of each other and the overarching grief and trauma that was associated with that took us out of being able to participate and engage for a long time.

The group was a friendly one, was great to have a couple of babies born throughout the[course] which helped to relax people and not set the environment as so much as a school type study, it was all fun learning.

My mum passed away in February and I was not in the best frame of mind for the weeks that followed but the other people that were at the course and the ongoing support they gave was amazing. Previously we had to do the genogram; my Mum was still around when we did the genogram.

13. The inclusion of non-Indigenous people in the training, endorsed by the ACCO manager, had a positive impact upon the training and subsequently in the working environment. Had non-Indigenous workers, who were intrinsic to their Indigenous Community and their Indigenous work setting, been excluded from this training program, conflict within the workplace and within Community may have resulted. Listening to ACCO managers and truly hearing what they were saying managed this possibility. The inclusion of non-Indigenous students subsequently enriched the training.

I am just presuming that our way of looking at it from an Aboriginal perspective is the only way and hearing [from non-Indigenous students] how you describe things around a relationship or an incident, I think 'Oh, I hadn't thought about it like that'. Or you bring another lens and a different picture of how things are being seen that I may not have considered, so for me the student mix is really valued because in some of our families are blended families, like the partner may be non-Indigenous or from another culture.

I think it was good because it wasn't one-sided, actually, everyone in the room had their own opinions, so that was good. I think if we were all Indigenous it might have got one-sided and your focus again would have been down one path and it would have been an Indigenous path.

I think that the main thing is they brought their knowledge in what they've been through, and what they're going through. That would make a big impact on whether you're non-Indigenous or Indigenous. So to have that non-Indigenous person and Indigenous person there would gel because there's not one view. They did complement each other in their approaches, in the work ethics and stories they told.

It was from an Indigenous and non-Indigenous perspective and showed the professionalism of how the two can work together to achieve the same goal.

14. Providing follow-up supervision for two years after the training has benefited the graduates.

This follow up supervision has both re-enforced the learnings of the training and has supported the growth in confidence of the graduates.

I think what I would really need from my organisation to support me, as a family therapist when I complete the training, would be actual supervised practice.



The Gippsland students and The Bouverie Centre Indigenous Program Team



Gippsland Students' Community Forum and Theatre of the Living

Impact of the Training in Community: Capacity-building

Capacity-building in ACCOs has been strengthened and influenced as a result of the training

- Two ACCOs in the Gippsland region have indicated a commitment to the development and implementation of a local model of family therapy delivery, employing the graduates in positions that will enable them to utilise their family therapy skills.
- An ACCO in the Shepparton area plan to capacity-build specific positions for Indigenous family therapists, designated eventually for two male and two female positions. One of the graduates has already been employed for one day per week as a family therapist (2011).

There has been major capacity-building within Community for the graduates of the Certificate in Family Therapy

- An Elder from the Ballarat/Geelong training is now in private practice and is a consultant in schools in Geelong.
- A graduate from the Ballarat/Geelong training has been employed in The Bouverie Centre in a trainee family therapist position. She has taken the position of Cultural Consultant in the Indigenous Team's second training team. She has now begun her MA in Family Therapy.
- A graduate from the Shepparton training round has moved from Take Two Berry Street, Shepparton to the Kinship Program at Rumbalara ACCO, with increased regional responsibility.
- A graduate from the Ballarat/Geelong training moved from AFDM (Aboriginal Family Decision Maker) Convener, BADAC to Senior Policy Advisor in DHS. She has since resumed a position as an AFDM in a regional posting.
- A graduate from the Gippsland training cohort went from an AFDM position in his ACCO to a regional AFDM position, involving a higher level of responsibility.
- A graduate from the Gippsland training cohort created a promotional DVD around Domestic Violence. He believes he would never have tackled such a difficult subject prior to the training.
- A graduate from the Ballarat/Geelong training went from a family support position at Wathaurong ACCO to the Lakidjeka Program, VACCA, Geelong.

Growth in Confidence

As a result of the training graduates describe themselves as being more confident and comfortable within both Indigenous and non-Indigenous professional settings.

When I started this course [...] I just didn't want to be there, and then I said why am I doing this? ... But it only takes one person to make a change, and it only takes one family to make a change. Add to that, to their relatives, to their extended family, to the community. But just now I'm glad I did it. The course just helped me a lot. Now my confidence within me has grown, and other people have noticed it, I'm not shy.

Subsequent to the graduates experiencing themselves as being more confident, they furthered this growth in confidence when they presented their learnings of the training at the 8th World Congress 2010, Participatory Action Research and Action Learning Conference held in Melbourne.

Strengthening Community networks

The post Graduate Certificate in Family Therapy training is providing an avenue to higher education, thus supporting a professionalised Indigenous workforce.

- Two graduates from the Gippsland training and one from the Ballarat/Geelong training have begun their MA in Family Therapy.
- A Shepparton graduate is commencing undergraduate studies in social work.
- A Ballarat graduate is commencing undergraduate studies towards a psychology degree.
- Three graduates are prospective students in the Graduate Certificate in Narrative Therapy.
- Several graduates are attending Bouverie Continuing Education.

A newsletter for graduates has been published

- The first edition was circulated in November 2010.
- A second edition is currently being compiled.

Two Elders now sit on the Project Advisory Group

- The importance of having two Elders on the Project Advisory Group cannot be underestimated. Their presence and involvement in an advisory role signifies an endorsement of the intent of the training.
- One of these two Elders is a graduate of this training.
- It is culturally respectful for the Indigenous Program training team to invite Elders to the Project Advisory Group.

The importance of managers undertaking the training has enormous consequences and potential for capacity-building within Community. Managers hold positions of influence to create and support family therapy specific positions.

Implications of this Training for La Trobe University

This training program soundly positions LTU towards achieving their intended Indigenous Education Statement 2010,¹⁹ 'to produce high quality graduates and to promote equity in access in higher education', particularly for Indigenous Australian communities.

Further to this The Bouverie Centre and LTU have employed an Indigenous researcher and an Indigenous family therapist at The Bouverie Centre, consequently supporting LTU's commitment to recruit 35 Indigenous staff over a 5-year period.

¹⁹ <http://www.latrobe.edu.au/indigenous/documents/Indigenous-education-statement-2010.pdf>: sited 11th April 2011.

RECOMMENDATIONS

When you get an education, honey child, no one can take it away from you.²⁰

Mary Latham

²⁰ Mary Latham. Mother of Indigenous researcher Robyne Latham.

Recommendations from the three Training Rounds

Recommendation One:

That recurrent funding is sourced and secured from both State and Federal Governments, to accommodate the costing of the post Graduate Certificate in Family Therapy training, such that two rounds of training can be delivered every three years, to all eligible Indigenous CFWs within their community, Victoria-wide.

There is a need for the post Graduate Certificate in Family Therapy training to be delivered in all regions statewide to further establish and sustain professional development, equity and parity for all Indigenous child and family workers. The statewide delivery of the training will subsequently sustain the growth of an Aboriginal family therapy professional body.

I enjoyed [the training] because it was good to see so many of our local Community members doing it. [The training] is going to have far-reaching effects on community by having professional, well trained people out there.

Graduates and Advisory Group members have raised concerns around both State and Federal governments making a genuine and ongoing commitment to this training program, post the success of the original training which was funded through a DHS pilot program. The development of a statewide professional network of Aboriginal family therapists will impact on 'closing the gap'.

This course, and the trauma training especially, has helped me further my skills in working with children who live away from their birth family. The course has given me the ability to understand the real impact and cost to a child, through not only the events that led them into being placed in Out of Home care, but also through being removed from their families and often times moving multiple times once in foster care.

This course has given me invaluable skills to help the child and their new carers come to terms with these issues and to build the foundations to establish safety and stability so that the child can heal and become ready to return home when the time is right.

Recommendation Two:

That links with DHS, DoH, the participating ACCOs, and mainstream organisations employing Aboriginal health and child and family workers, and The Bouverie Centre are nurtured and developed to further a reciprocity of understanding.

All graduates of this training have reiterated that consultation with Community, Indigenous health organisations and mainstream health organisations (with relevant state and federal funding bodies) is critical to closing the health and education gap for Indigenous people. With the intent of bridging the cultural divide between Indigenous and non-Indigenous knowledge systems, it is recommended that Indigenous Elders, Indigenous researchers, graduates of the training and key stakeholders in DHS and La Trobe University be invited to the Advisory Group to consult, advise and further consolidate the capacity of the post Graduate Certificate in Family Therapy.

The story below illustrates the complexity of the collision of the cultural divide between the two knowledge systems.

She [a government worker from a mainstream org] had an amazing incident where this little 5yr old [Aboriginal] girl who wanted to sleep with her. ... [The government worker] is not Aboriginal, so she freaked out all night and was really threatened by that. So [the government worker] did this incident report about this little girl, who just needed a cuddle. [She] did sleep with her older sister at home and so, [because] she was just separated from her sister and just saw this Aunty [meaning the government worker] as someone who was a person she was to have a [trusting] relationship with. Like sleeping, knowing that someone else is there, just so she [the little girl] can get to sleep. Explaining to her [the government worker] that we have had six kids in the bed and you'd have two adults, the bigger kids until you get to the baby in the middle, and so getting her to understand that [this is a cultural norm].

So the learning for us [the Aboriginal CFW] was about the stuff around Child Protection and how to not create conflict around the behaviour of their staff, so they weren't seen to be compromising the children ... what that means it's suddenly been a really good conversation to have with DHS and Child Protection around cultural practices that are normal stuff for us within our workplace. Also making sure that they just don't presume that just because I have three kids sleeping with me, I am going to molest them all, so treat people with dignity and respect. So those are the big things that we have introduced into the workplace.

Recommendation Three:

That the 'Black and White Approach' is employed in the delivery of the post Graduate Certificate in Family Therapy for Indigenous Child and Family workers.

This recommendation is evidenced by:

- 93% graduation rate of Indigenous students;
- the employment of a graduate from the Ballarat/Geelong training cohort at The Bouverie Centre, as a cultural consultant and trainee family therapist;
- expansion of The Bouverie Centre's Indigenous Program training team to include two training teams;
- three graduates of the training have enrolled in the Masters in Family Therapy;
- 100% of graduates identified an improved professional confidence in both Indigenous and non-Indigenous organisations; and
- graduates of the training program attend continuing education programs at The Bouverie Centre and maintain their links with mainstream workers and their family therapy training through participation in these courses.

I found the teachers to be a wealth of experience and exceptionally accommodating. The learning environment was entirely more accessible than normal university study and was more practical and skills focused. As such I took far more out of it than I would have by attending lectures and feel as if I now have a new set of skills that I can actually use, rather than just

discuss. These skills will help me and my clients realise that tragedies and triumphs don't exist in isolation and by stepping back and taking a look at everything you can find the answers to the issues and better identify the strengths within the person/family to help deal with these issues.

It is further recommended that the trainers incorporate more role-plays and video demonstrations to the training and establish a greater link between the Yarning Up on Trauma Training and the Family Therapy training.

Recommendation Four:

That research of future training cohorts is maintained to document the impact of the training in the workforce and the workforce development needs of the graduates. It is therefore recommended that further research funding is sourced and an Indigenous trainee researcher employed in a 0.4 position at The Bouverie Centre.

The initial seeding funding from the DHS pilot project did not include funding for a formal research process to be conducted. LTU and The Bouverie Centre committed the funds to employ Robyne Latham as the Indigenous researcher. She has since evaluated and prepared the reports on the effectiveness of the training. Sufficient funding was not available for her to look at support and capacity-building of a statewide Indigenous family therapy body. It is therefore recommended that further research funding is sourced and an Indigenous trainee researcher employed in a 0.4 position at The Bouverie Centre to:

- obtain practice-based evidence pertinent to rural and metropolitan workforce support needs;
- assess the needs surrounding the continuation of capacity-building of emerging Indigenous family therapists; and
- determine ideal family therapy service provision, on a region-by-region basis, in consultation with Community, ACCO managers and graduates, to identify and meet the needs of that region.

Just imagine if this program is permanently funded and we put through 40 graduates a year, in 10 years imagine how many Indigenous people are going to be out there working with Indigenous families ... that's got to bring change! That's stunning, that's revolutionary!

Recommendation Five:

That La Trobe University trials the 'Black and White Approach' as a training model for Aboriginal and Torres Strait Islander students in other faculties, such as education, nursing and social work.

Throughout all three training cohorts, graduates have identified the 'Black and White Approach' to training as significantly different from any other training they have attended and that this has

directly influenced the high student retention rate. The high retention rate is attributed to the training model being grounded in:

- an expectation that students will succeed;
- a systemic and comprehensive model that is supportive of both the trainers and the students;
- providing two trainers in the delivery of the training, one an Indigenous Consultant and the other a non-Indigenous trainer;
- the training being delivered in Community; and
- the recursive evaluation and feedback of the training, on a session-by-session basis, thus tailoring the training to the needs of each student group.

Having a training that is focused on and around Aboriginal people and culture is much better ... you don't find the need to explain yourself when talking about Community and you don't need to get protective around what you say, so there is no judging.

Also with an Aboriginal trainer there it makes for a relaxing and comfortable environment.

Recommendation Six:

That the Indigenous Family Therapy Team devise, develop and deliver a Train the Trainer program, specific to the training model of the 'Black and White Approach'. This training program would include an:

- introduction to Family Therapy theory and practice;
- exploration of the principles and practices underpinning the 'Black and White Approach'; and
- experiential foundation and development of the interpersonal skills required for the successful implementation of the 'Black and White Approach'.

Recommendation Seven:

That a statewide Indigenous Victorian Family Therapy Professional Body be established, as a chapter of the Australian Association for Family Therapists.

The need for an Indigenous Victorian Family Therapy Professional Body is evidenced by the identified needs:

- of graduates to belong to a professional Indigenous Family Therapy body, consistent with non-Indigenous professional bodies;
- to support graduates as emerging family healers, consistent with non-Indigenous professional bodies;
- for an Indigenous Victorian Family Therapy body to advocate in both mainstream and Indigenous organisations on behalf of family healing and therapeutic practices;

- to hold an annual Indigenous Family Therapy Forum, for all graduates of the training²¹ (the Inaugural Forum was held on the 2nd and 3rd of June 2011); and
- to continue to collate, publish and distribute a quarterly newsletter, to all graduates and current students, with the intention of the publication developing into a professional Indigenous family therapy journal.



Gippsland Students' Community Forum and Theatre of the Living 2010.

²¹ The Ballarat/Geelong Report's sixth recommendation (point 2) page 25.

Notes

Notes