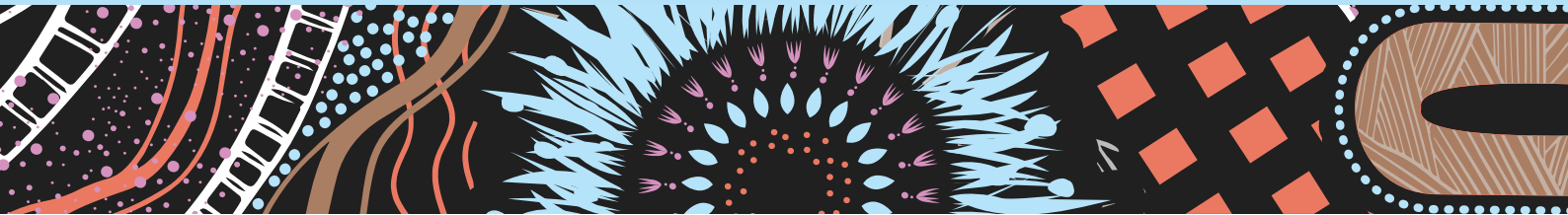# Connection to community

Summary paper

This paper is a summary of the *Connection to community* publication by Pat Dudgeon, Abigail Bray, Shol Blustein, Tom Calma, Rob McPhee, Ian Ring and Rose Clarke. This publication was commissioned by the Australian Institute of Health and Welfare and published on the Indigenous Mental Health and Suicide Prevention Clearinghouse. It can be accessed online at <www.indigenousmhspc.gov.au>.

Some people may find the content of this report confronting or distressing. If you are affected in this way, please contact **13YARN (13 92 76)**, **Lifeline (13 11 14)** or **Beyond Blue (1300 22 4636)**.

Key findings

- Aboriginal and Torres Strait Islander communities experience disproportionately high suicide rates (ABS 2021), which are increasing despite efforts by governments to decrease them.

- Community-related risk factors for suicide include loss of identity, and exposure to traumatic stressors and intergenerational trauma associated with cultural dislocation brought about by colonisation.

- Healthy connections to community involve a range of protective factors against suicide, including:

    – support networks

    – community-controlled services

    – self-governance

    – Language use

    – strengthened resilience

    – increased social and emotional wellbeing

    – engagement with cultural activities, ceremonies and organisations (PM&C 2017).

- Programs and interventions that incorporate cultural continuity, preserving traditional culture through strengthened connections to community, underpin a strong identity that contributes to wellbeing.
- The evidence base for Indigenous suicide prevention in Australia is under-developed, particularly as it relates to the benefits of connection to community. This is in part due to the lack of appropriate program evaluations, including funding for evaluations of programs.

What we know

Colonisation continues to impair the wellbeing of many Aboriginal and Torres Strait Islander communities. Together with the removal of children from families and communities, colonisation has resulted in the transmission of trauma across generations. The impact of colonisation is seen worldwide in the vulnerability of indigenous peoples to suicide (WHO 2014).

Colonisation is recognised as the overarching social determinant of psychological distress such that there is 'one critical social determinant of health, the effect of colonisation' (International Symposium on the Social Determinants of Indigenous Health 2007:30).

Social and emotional wellbeing (SEWB) is the foundation of physical and mental health for Indigenous Australians. It is central to culturally safe and successful suicide prevention in Indigenous communities. SEWB comprises 7 interrelated domains: body, mind and emotions, family and kinship, community, culture, Country, and spirituality (Dudgeon et al. 2017). Harmonious and healthy connections across all domains ensure optimal SEWB.

Importance of connections to community

As well as being a key domain in the SEWB model, connection to community is an important source of resilience for Indigenous Australians (Milroy 2006). The National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Social and Emotional Wellbeing 2017–2023 (National Strategic Framework) (PM&C 2017) describes connection to community as follows:

Community can take many forms. A connection to community provides opportunities for individuals and families to connect with each other, support each other and work together (PM&C 2017:8).

Cultural community connectedness, which builds a sense of cultural identity, is known to reduce suicide (Gibson et al. 2021; Ridani et al. 2015). Indigenous communities experience disproportionately high suicide rates (ABS 2021), which are increasing despite efforts by governments to decrease them. Risk factors for suicide include:

- mental health challenges, socioeconomic crisis, 'exposure to other suicides', self-harm, and suicidal ideation (SCRGSP 2020:66)
- community-related risk factors such as loss of identity and practices and exposure to traumatic stressors and intergenerational trauma associated with cultural dislocation (Productivity Commission 2020a)
- lack of cultural continuity – that is, Indigenous self-determination over aspects of culture and community (SCRGSP 2020).

Cultural continuity

Cultural continuity has been defined as 'the integration of people within their culture and the methods through which traditional knowledge is maintained and transmitted' (Auger 2016). It refers to place-based pathways that revitalise Indigenous self-determination in communities (Dudgeon et al. 2021). There is increasing evidence that cultural continuity reduces suicide and suicide-related behaviour (Currie et al. 2019; Currie et al. 2020; Gibson et al. 2021; Hallett et al. 2007; LaFromboise et al. 2006). Indeed, it is recognised as a primary suicide prevention factor (PM&C 2017).

A key protective factor of cultural continuity is the support of identity through the revitalisation of community-based cultural practices. It involves the collective, community-based transmission of cultural activities and place-based ways of being, doing and knowing across generations (Dudgeon et al. 2021).

The protective benefits of cultural continuity have been well-documented (ATSISPEP 2016; Busija et al. 2020; Chandler and Lalonde 1998; Gibson et al. 2021; Jongen et al. 2020; Prince et al. 2018; Yap and Yu 2016) and include:

- reductions in youth suicide

- strengthening cultural identity and self-continuity

- intergenerational communication and the transmission of cultural knowledge through the empowerment of Elders

- the restoration of supportive peer relationships

- family thriving

- language reclamation, cultural revitalisation, and increased collective social and cultural capital.

There is also evidence that cultural continuity enables connections to community that enhance wellbeing (Chandler and Lalonde 1998; Currie et al. 2020; Sánchez-Moreno et al. 2020). Truth-telling also promotes cultural continuity, builds identity and community connections. It is central to building strong communities (Dodson and Leeser 2018).

Strong connections to community – together with the recognition of cultural continuity – have been identified as the program mechanism or theory supporting the complex interventions into Indigenous suicide prevention that strengthen resilience and increase SEWB (ATSIPEP 2016).

Following their development of indicators of cultural connectedness, Gibson and colleagues (2021) identified a significant relationship between cultural (community) connectedness and suicide rates. A cultural social capital index helped measure the cultural connectedness of areas, with the index measuring aspects such as participation in cultural events, ceremonies, and community activities. The lowest one-third of areas, as ranked by the index scores, were compared with the highest ranked two-thirds of areas. They found that areas with low levels of cultural social capital had an 80% higher age-adjusted suicide rate. Conversely, areas of high cultural social capital had a 44% lower suicide rate, reflecting the protective nature of community connections when they are mediated by, or are, an expression of cultural connection (Gibson et al. 2021:516). Further research is needed, particularly to provide a greater understanding of protective factors.

Examples of risk and protective factors to healthy connection to community are included in Box 1.

> **Box 1: Examples of risk and protective factors to healthy connection to community**
>
> Risk factors
>
> - family feuding
> - lateral violence
> - lack of local services
> - isolation
> - disengagement from community
> - lack of opportunities for employment in community settings
>
> Protective factors
>
> - support networks
> - community-controlled services
> - self-governance
> - Language use
> - engagement with cultural activities, ceremonies and organisations.

Source: National Strategic Framework (PM&C 2017:8).

The authors also itemised pathways for connecting to community from a review of the cultural continuity literature, see Chapter 7 of the *Connection to community* publication.

Cultural determinants of health and wellbeing

Cultural determinants of health represent those factors that promote resilience, foster a sense of identity, and support good mental and physical health and wellbeing for individuals, families and communities (Department of Health 2017).

Focusing on cultural determinants is part of a strengths-based approach to suicide prevention. The strengthening of cultural determinants has a protective effect on SEWB, reducing the risk of suicide and suicide-related behaviours (ATSISPEP 2016).

Family, kinship and community are overlapping SEWB domains. Wellbeing and healthy community functioning are strongly correlated (Biddle 2011).

Suicide clusters

Exposure to the death by suicide of someone in the community is recognised as a form of community trauma that is linked to increased risk of suicide and self-harm. Dudgeon and colleagues warn of the danger of suicide clusters forming in highly interconnected communities, with suicides having a widespread impact: 'with ripples of loss, grief and mourning throughout the community and beyond' (Dudgeon et al. 2012:45).

A suicide cluster involves multiple suicides that occur closer in time or place than would normally be expected using statistical inference or community expectation (Hawton et al. 2019). Trauma caused by suicide is intensified in Indigenous communities because of their close bonds and frequent geographic isolation.

Sustainable postvention involving holistic trauma-informed SEWB support is necessary to prevent the risk of suicide clusters and the transmission of intergenerational trauma. Postvention interventions should be locally driven and designed, focusing on the needs of the community (ATSISPEP 2016; Dudgeon et al. 2017).

Relevant policies, programs and initiatives

Policies

Reform of the mental health system in Australia is underway. Proposed directions are outlined in Vision 2030: Blueprint for mental health and suicide prevention (Vision 2030: NMHC 2020), which calls for a whole-of-government, community-based person-led and person-centred mental health system. Indigenous governance is vital to 'effective outcomes' in the delivery of these reforms (NMHC 2020:23).

Vision 2030 aligns with a SEWB approach that supports strengthening connections to community, whereby:

* Mental health is addressed in its full social context.
* Communities are at the centre of identifying their needs, designing responses and delivering care.
* Anyone at risk of or living with a mental health issue has access to affordable, evidence-based care in their own community.
* People play a central role in their care and the choice, design and delivery of services that support them (NMHC 2020:6).

A SEWB approach is adopted in the delivery of mental healthcare and suicide prevention, through recognition of the social, emotional, spiritual and cultural, physical, economic and mental wellbeing of the individual (NMHC 2020:7).

A new Indigenous suicide prevention strategy, the revised National Aboriginal and Torres Strait Islander Suicide Prevention Strategy 2021–2031 is scheduled for release in the near future.

Several other policies focus on an Indigenous-led approach to mental health reform. More detail on the Australian Government, state and territory frameworks and strategies is available in Chapter 4 and Appendix A of the Connection to community publication.

Programs and initiatives

The paper examined 7 Indigenous therapeutic programs, all of which were Indigenous-specific. The programs are not exclusively focused on enhancing the participant's connection to community; rather, these programs recognise the interdependent nature of the 7 domains of SEWB and that it is not practical (nor useful) to design programs that focus only on one of the SEWB domains. Many of the programs address ways of overcoming the social determinants that contribute to suicide and suicide-related behaviours.

Table 1: Details of programs and evaluations

Name and brief description	Location / Indigenous-specific?	Evaluation
Telling Story Helps participants identify skills, knowledge and wisdom they possess to navigate and respond to problems in their own lives and those impacting family and community.	Western Australia and Northern Territory Indigenous-specific – yes	Not formally evaluated
Youth Empowerment and Healing Cultural Camp Healing camps strengthen connection to community, family and Country and develop leadership skills and cultural knowledge.	Dampier Peninsula, Western Australia Indigenous-specific – yes	Shadforth and Shadforth 2018
National Empowerment Project An Indigenous-led research project designed to build community capacity by empowering people and strengthening cultural wellbeing and social and emotional wellbeing.	Metropolitan and regional locations across New South Wales, Victoria, Queensland, Western Australia, South Australia and Northern Territory. Indigenous-specific – yes	Mia et al. 2017
Kalka Healing: Healing starts with you Kalka Healing is an Indigenous-led and developed suicide prevention program that provides workshops that are practical, at the grassroots level, and culturally sensitive.	Northern Territory Indigenous-specific – yes	Tighe and McKay 2012
Alive and Kicking Goals Community-led youth suicide prevention project that aims to prevent suicide through football and peer education, one-on-one mentoring and counselling.	Kimberley, Western Australia Indigenous-specific – yes	Tighe and McKay 2012
Keeping Place and Media Project An initiative to record the stories, places, languages and perspectives of families and languages groups in the Kimberley, Western Australia.	Kimberley, Western Australia Indigenous-specific – yes	Not formally evaluated
GREATS Youth Services GREATS (Great Recreation, Entertainment, Arts, Training and Sport) Youth Services is a core service provider of Malala Aboriginal Health Service to young people aged 10–20 years.	Maningrida, Northern Territory Indigenous-specific – yes	Healthcare Management Advisors 2016

What works

Best practice evaluations

The Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Program (ATSISPEP) at the University of Western Australia has identified factors that are common to successful, whole-of-community, on-the-ground, whole-of-government approaches to suicide prevention to develop an evaluation framework (ATSISPEP 2016).

The Evaluation Framework suggests the following criteria to evaluate the quality of suicide prevention activities. Activities should:

• assist in Indigenous capacity building

• prioritise Indigenous knowledge and experience

• respect cultural values

- recognise Indigenous rights and self-determination

- facilitate cultural strengthening

- facilitate and promote Indigenous leadership and governance

- foster genuine partnerships and community engagement

- promote healing.

The Evaluation Framework is intended as both a process guide and a 'cultural audit' for applying Indigenous evaluation principles and indicators to specific populations, issues, and community and organisational contexts (CBPATSISP n.d.(b)).

Key features of effective programs and interventions

Best practice programs and services should be concerned with self-determination and community governance, reconnection and community life, and restoration and community resilience.

Key features of effectiveness and best practice of the programs listed in Table 1 were identified by the Centre for Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention assessments and program-specific formal evaluations (CBPATSISP n.d.(a); Shadforth and Shadforth 2018; Mia et al. 2017; Tighe and McKay 2012; Healthcare Management Advisors 2016). These features included:

- Programs took a strengths-based approach.

- Programs were tailored to the local context, customs and languages, and worked in conjunction with community members and community organisations to support the effectiveness of the programs.

- Programs were developed by Indigenous people for Indigenous people and led by Indigenous people.

- Programs involved effective strategies that targeted suicide prevention, often coordinating and collaborating with mental health, drug and alcohol, and health sectors.

- Building strength and capacity in Indigenous communities, including a capacity to support regional and local coordination of suicide prevention.

- Engaging and culturally appropriate community activities for youth strengthened their cultural identity, creating a sense of belonging to their community.

- Programs involved teaching and learning between Elders and young people.

Less effective programs

Lessons have been learnt about what does not work:

- Programs are not effective when they lack Indigenous governance over the design, implementation and evaluation.

- Interventions that implement only a clinical, individualistic approach to suicide prevention have limited success with Indigenous Australians.

- Programs that are not place-based face barriers to implementation and evaluation.

Conclusions

The benefits of connection to community and cultural continuity are well recognised. But the evidence base for suicide prevention programs is underdeveloped.

Deaths by suicide are the 'tip of the iceberg' of psychological distress and suicide-related behaviour impacting communities. Data about such behaviours are needed to design and implement effective suicide prevention strategies. Culturally safe ways to gather data on such behaviour are needed.

Data from communities affected by suicide clusters are also needed to support whole-of-community intervention strategies. It is not known what characterises communities in Australia marked by dramatically elevated suicide rates and suicide clusters and what distinguishes them from communities where suicide is effectively unknown.

More information is needed on protective elements of SEWB. The SEWB and resilience of communities with low to non-existent suicide have not been adequately researched to understand protective mechanisms that can be transferred to other communities.

Indigenous designed and validated measures of health-related quality of life are also needed to evaluate the impact of interventions and programs aimed at increasing resilience and wellbeing in communities.

References

ABS (2021) Causes of death, Australia, ABS website, Australian Government. *https://www.abs.gov.au/statistics/health/causes-death/causes-death-australia/2020*

ATSISPEP (Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project) (2016) Solutions that work: what the evidence and our people tell us. Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project Report, ATSISPEP website, accessed 28 April 2021. *https://www.atsispep.sis.uwa.edu.au/__data/assets/pdf_file/0006/2947299/ATSISPEP-Report-Final-Web.pdf*

Auger MD (2016) 'Cultural continuity as a determinant of indigenous peoples' health: a metasynthesis of qualitative research in Canada and the United States', International Indigenous Policy Journal, 7(4), doi:10.18584/iipj.2016.7.4.3*.*

Biddle N (2011) 'Measures of Indigenous wellbeing and their determinants across the lifecourse', CAEPR Online Lecture Series, accessed 9 November 2021. *https://caepr.cass.anu.edu.au/measures-indigenous-wellbeing-and-their-determinants-across-lifecourse*

Busija L, Cinelli R, Toombs MR, Easton C, Hampton R, Holdsworth K and McCabe MP (2020) 'The role of Elders in the wellbeing of a contemporary Australian Indigenous community', The Gerontologist, 60(3):513–524, doi:10.1093/geront/gny140.

CBPATSISP Clearing House (Centre for Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention) (n.d.(a)) Prevention, CBPATSISP website, accessed 8 September 2021. *https://cbpatsisp.com.au/clearing-house/best-practice-programs-and-services/programs-for-preventing-youth-suicide*

CBPATSISP Clearing House (Centre for Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention) (n.d.(b)) Best practice evaluation, CBPATSISP website, accessed 8 September 2021. *https://cbpatsisp.com.au/clearing-house/best-practice-evaluation*

Chandler MJ and Lalonde CE (1998) 'Cultural continuity as a hedge against suicide in Canada's First Nations', Transcultural Psychiatry, 35(2):191–219, doi:10.1177/136346159803500202.

Currie CL, Copeland JL and Metz GA (2019) 'Childhood racial discrimination and adult allostatic load: the role of indigenous cultural continuity in allostatic resiliency', Social Science and Medicine, 241:112564, doi:10.1016/j.socscimed.2019.112564.

Currie CL, Copeland JL, Metz GA, Chief Moon-Riley K and Davies CM (2020) 'Past-year racial discrimination and allostatic load among indigenous adults in Canada: the role of cultural continuity', Psychosomatic Medicine, 82(1):99–10, doi:10.1097/PSY.0000000000000754.

Department of Health (2017) My Life My Lead: Opportunities for strengthening approaches to the social determinants and cultural determinants of Indigenous health, Department of Health, Australian Government, accessed 22 June 2021. *https://www.health.gov.au/resources/publications/my-life-my-lead-report-on-the-national-consultations*

Dodson P and Leeser J (2018) Truth-telling. Constitutional Recognition: Final report, Joint Select Committee on Constitutional Recognition relating to Aboriginal and Torres Strait Islander Peoples, accessed 23 November 2021. *https://www.aph.gov.au/Parliamentary_Business/Committees/Joint/Former_Committees/Constitutional_Recognition_2018/ConstRecognition/Final_Report/section?id=committees%2Freportjnt%2F024213%2F26675*

Dudgeon P, Cox K, D'Anna D, Dunkley C, Hams K, Kelly K, Scrine C and Walker R (2012) Hear our voices: community consultations for the development of an empowerment, healing and leadership program for Aboriginal people living in the Kimberley, Western Australia: final research report, Telethon Institute for Child Health Research: Aboriginal Health, Perth, WA. *https://www.researchgate.net/publication/232275608_Hear_our_voices_Community_consultations_for_the_development_of_an_empowerment_healing_and_leadership_program_for_Aboriginal_people_living_in_the_Kimberley_Western_Australia_-_Final_research_report*

Dudgeon P, Bray A, D'Costa B and Walker R (2017) Decolonising psychology: validating social and emotional wellbeing, Australian Psychologist, 52(4):316–325.

Dudgeon P, Blustein S, Bray A, Calma T, McPhee R, Ring I (2021) Connection between family, kinship and social and emotional wellbeing. Produced for the Indigenous Mental Health and Suicide Prevention Clearinghouse. Cat. no. IMH 4. Canberra: AIHW. *https://www.indigenousmhspc.gov.au/publications/family-kinship*

Gibson M, Stuart J, Leske S, Ward R and Tanton R (2021) 'Suicide rates for young Aboriginal and Torres Strait Islander people: the influence of community level cultural connectedness', Medical Journal of Australia, 214(11):514–518, doi:10.5694/mja2.51084.

Hallett D, Chandler MJ and Lalonde CE (2007) 'Aboriginal language knowledge and youth suicide', Cognitive Development, 22:392–399, doi:10.1016/j.cogdev.2007.02.001.

Hawton K, Hill NTM, Gould M, John A, Lascelles K and Robinson J (2019) 'Clustering of suicides in children and adolescents', Lancet Child and Adolescent Health, 4(1):58–67.

Healthcare Management Advisors (2016) Suicide prevention in Aboriginal and Torres Strait Islander communities: learnings from a meta-evaluation of community-led Aboriginal and Torres Strait Islander suicide prevention program, University of Western Australia, Perth.

International Symposium on the Social Determinants of Indigenous Health (2007) Social determinants and Indigenous health: The international experience and its policy implications, Adelaide, Report for the Commission on the Social Determinants of Health. *https://bvsms.saude.gov.br/bvs/publicacoes/indigenous_health_adelaide_report_07.pdf*

Jongen CS, McCalman J and Bainbridge RG (2020) 'A systematic scoping review of the resilience intervention literature for Indigenous adolescents in CANZUS Nations', Frontiers in Public Health, 7:351, doi:10.3389/fpubh.2019.00351.

LaFromboise TD, Hoyt DR, Oliver L and Whitbeck LB (2006) 'Family, community, and school influences on resilience among American Indian adolescents in the upper midwest', Journal of Community Psychology, 34:193–209, doi:10.1002/jcop.20090.

Mia T, Dudgeon P, Mascall, C, Grogan, G, Murray B and Walker R (2017), 'An evaluation of the National Empowerment Project Cultural, Social, and Emotional Wellbeing Program', Journal of Indigenous Wellbeing: Te Mauri Pimatisiwin, 2(2):33–48.

Milroy H (2006) The dance of life. Retrieved from: *https://www.ranzcp.org/practice-education/aboriginal-torres-strait-islander-mental-health/the-dance-of-life*.

NMHC (2020) Vision 2030; Blueprint for mental health and suicide prevention, NMHC, Australian Government, accessed 4 November 2021. *https://www.mentalhealthcommission.gov.au/mental-health-reform/vision-2030/blueprint*

PM&C (Department of Prime Minister and Cabinet) (2017) National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing, PM&C, Australian Government, accessed 10 June 2021. *https://www.niaa.gov.au/resource-centre/indigenous-affairs/national-strategic-framework-mental-health-social-emotional-wellbeing-2017-23*

Prince J, Jeffrey N, Baird L, Kingsburra S and Tipiloura B (2018) Stories from community: How suicide rates fell in two Indigenous communities, The Healing Foundation, Canberra, accessed 28 October 2021, accessed 9 November 2021. *https://healingfoundation.org.au/stories-from-community*

Productivity Commission (2020a) Mental health report, no. 95, Productivity Commission, Australian Government, accessed 9 November 2021. *https://www.pc.gov.au/inquiries/completed/mental-health/report*

Ridani R, Shand, FL, Christensen H, McKay K, Tighe J, Burns J and Hunter E (2015) 'Suicide prevention in Australian Aboriginal communities: a review of past and present programs', Suicide and Life-Threatening Behaviour, 45(1):111–140, doi:10.1111/sltb.12121.

Sánchez-Moreno E, Gallardo-Peralta LP and Leyton C (2020) 'The social gradient in mental health and well-being for indigenous older adults living in rural areas: a cross-sectional comparison with rural non-indigenous population in Chile', Journal of Aging and Health, 33(5–6):287–289, doi:10.1177/0898264320979201.

SCRGSP (Steering Committee for the Review of Government Service Provision) (2020) Overcoming Indigenous Disadvantage: Key Indicators 2020, Productivity Commission, Australian Government. https://www.pc.gov.au/research/ongoing/overcoming-indigenous-disadvantage/2020

Shadforth G and Shadforth S (2018) 'YEaHCC (Youth Empowerment and Healing Cultural Camp): A youth suicide prevention initiative at a grassroots level to lead real action and mobilise change amongst those who are continuously being affected by the impacts of suicide across the Kimberley region', [unpublished conference presentation], 2nd National Aboriginal and Torres Strait Islander Suicide Prevention Conference, Perth.

Tighe J and McKay K (2012) 'Alive and Kicking Goals!: Preliminary findings from a Kimberley suicide prevention program', Advances in Mental Health, 10(3):240–245, doi:10.5172/jamh.2012.10.3.240.

WHO (World Health Organization) (2014) Preventing suicide: A global imperative, WHO Press, Geneva. https://www.who.int/publications/i/item/9789241564779

Yap M and Yu E (2016) Community wellbeing from the ground up: A Yawuru example, Bankwest Curtin Economics Centre Research, accessed 23 June 2021. https://bcec.edu.au/publications/community-wellbeing-ground

Cover art
Data & Diversity
Created by Jay Hobbs
Meriam-Mir and Kuku Yalanji man