



## **Defining Indigenous Social and Emotional Wellbeing and Mental Health**

It has been suggested that the term 'social and emotional wellbeing' is preferred by Indigenous people because it offers a less 'loaded' term to describe 'mental health/illness'. However, rather than just an euphemism to avoid the stigma associated with mental illness, AIPA believes the term 'social and emotional wellbeing' should be seen as an Indigenous concept that differs in important ways to non-Indigenous concepts of 'mental health'.

The Social Health Reference Group (SHRG) for the National Aboriginal and Torres Strait Islander Health Council and National Mental Health Working Group - responsible for developing the *National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Well Being 2004–2009* - drew a distinction between the concepts of 'social and emotional wellbeing' used in Indigenous settings and the term 'mental health' used in non-Indigenous settings:

*'The concept of mental health comes more from an illness or clinical perspective and its focus is more on the individual and their level of functioning in their environment.*

*The social and emotional wellbeing concept is broader than this and recognises the importance of connection to land, culture, spirituality, ancestry, family and community, and how these affect the individual'* (SHRG, 2004:9).

Social and emotional wellbeing (and 'mental health' as a subset of this) forms part of the holistic view of health:

*'Aboriginal and Torres Strait Islander health is viewed in a holistic context that encompasses mental health, and physical, cultural and spiritual health. Land, family and spirituality are central to well being. It must be recognised that Aboriginal and Torres Strait Islander peoples have great strengths, creativity and endurance and a deep understanding of the relationships between human beings and their environment. The centrality of Aboriginal and Torres Strait Islander family and kinship must be recognized as well as the broader concepts of family, and the bonds of reciprocal affection, responsibility and caring.'*

*'Self-determination is central to the provision of Aboriginal and Torres Strait Islander health services. Culturally valid understandings must shape the provision of services and must guide assessment, care and management of Aboriginal and Torres Strait Islander people's health, mental health problems in particular' (SHRG, 2004:10).*

**Risks** to the social and emotional wellbeing of Aboriginal and Torres Strait Islander people have been identified as:

*'Social and emotional wellbeing problems cover a broad range of problems that can result from unresolved grief and loss, trauma and abuse, domestic violence, removal from family, substance misuse, family breakdown, cultural dislocation, racism and discrimination, and social disadvantage' (SHRG, 2004:9).*

**Protective factors** for Indigenous social and emotional wellbeing have been identified as connection to land, culture, spirituality, ancestry and family and community. These factors can serve as a unique reservoir of resilience and recovery in the face of adversity and moderate the impact of stressful circumstances on social and emotional wellbeing at the individual, family and community level. Land is central to social relationships and the spiritual and emotional wellbeing of Indigenous individuals, families and communities. To fully understand social and emotional wellbeing it is necessary to understand the cultural dimensions of wellbeing.

## **The Impact of Systemic Racism on Indigenous Social and Emotional Wellbeing**

Many of the factors that Indigenous people have identified as impacting on their social and emotional wellbeing appear to be a result of what is described as systemic or institutional discrimination, which occurs when policies / procedures / laws serve to disadvantage a specific group or limit their rights. Although often viewed as neutral and sometimes acceptable, the application of beliefs, values, presumptions, structures and processes by the institutions of society (economic, political, social or cultural) can result in differential and unfair outcomes for particular groups.

Policy and practices that discriminate unfairly in their *effect, impact* or *outcome*, irrespective of the motive or intention, amount to unfair discrimination. Systemic discrimination is thus measured by outcomes and results rather than intentions: it is not necessary to examine the *motives* of the individuals involved but to instead examine the *results* of their actions. Disproportionately high levels of reporting and investigating neglect and abuse of children, poor quality primary health care, excessive incarceration of alcohol users and others and restricted access to early intervention in the primary mental health system, all appear to be contributing to a risk chain that will need a multi-systemic approach to break.

As systemic discrimination is built into the normal working relationships of institutions, its perpetuation requires only that people continue 'business as usual'. The eradication of systemic discrimination requires much more than good will, it requires active review of the assumptions and practices by which the institution operates, and revision of those found to have discriminatory results. Clearly there is an urgent need for a range of government departments and services to acknowledge the social and historic context of discriminatory conduct, and to audit their policies to identify those practices that are impacting disproportionately on Aboriginal and Torres Strait islander people and adding to psychological distress.

More about the determinants of Indigenous social and emotional wellbeing can be found in AIPA's paper (in press): *Living on the Edge: Social and Emotional Wellbeing and Risk and Protective Factors for Serious Psychological Distress among Aboriginal and Torres Strait Islander People*, Discussion Paper No. 10, Cooperative Research Centre for Aboriginal Health, Darwin.

### **References**

Social Health Reference Group (SHRG) (2004). *National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and*

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