Purpose of these guidelines

These guidelines describe how members of the public should provide first aid to an Aboriginal or Torres Strait Islander person who may be developing a mental illness or experiencing a mental health crisis. The role of the first aider is to assist the person until appropriate professional help is received or the crisis resolves. These guidelines are designed to accompany the series *Guidelines for Providing Mental Health First Aid to an Aboriginal or Torres Strait Islander Person.*

Development of these guidelines

The following guidelines are based on the expert opinions of Aboriginal clinicians from across Australia, who have extensive knowledge of, and experience in, mental health.

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How to use these guidelines

In these guidelines the word *Aboriginal* is used to represent all Australian Aboriginal and Torres Strait Islander people.

These guidelines are a general set of recommendations about how you can help an Aboriginal person who may be experiencing a mental illness or developing a mental health crisis. Each individual is unique and it is important to tailor your support to the person’s needs. These recommendations therefore may not be appropriate for every person. It is important to acknowledge that Aboriginal communities are not all the same; they may differ in their understanding, approaches and treatment of mental illness. Be aware that the individual you are helping may not understand mental illness in the way that you do. Try to be familiar with their way of understanding.

Also, the guidelines are designed to provide first aid in Australian Indigenous communities and may not be suitable for other cultural groups or for countries with different health systems.
Learn about the person’s culture and their concept of mental illness

A person’s culture plays a very important role in the way they understand and talk about health, ill-health and go about seeking help from friends, family or professionals. Aboriginal people understand mental health within a broad context of health and wellbeing, which includes concepts of social and emotional functioning. Sometimes, therefore, symptoms of mental illness are understood within Aboriginal communities as part of a person’s spirit or personality, and not conceptualised as a form of treatable mental illness.

If you are providing mental health first aid to Aboriginal people who are not from your own community, you should always be culturally competent, and always practice cultural safety (see boxes below).

Know what is normal, and what is not, in the person’s culture

When assisting someone outside your own culture or community, it is very important that you take into consideration the spiritual or cultural context of the person’s behaviours. Be aware that it is common for the experiences of Aboriginal people (such as seeing spirits or hearing voices of deceased loved ones) to be misdiagnosed or mislabelled as mental illness when they are not in fact ill. Fear of misdiagnosis can be a strong barrier to help-seeking for Aboriginal people. For these reasons, you should take great care not to simply assume that the person is developing a mental illness or suffering a mental health crisis.

Know what is culturally appropriate communication

When approaching someone outside your own culture or community to discuss their mental health, be aware that what is a respectful way to communicate with the person (including body language, seating position and use of certain words) may differ from community to community and region to region, especially between rural and remote areas. In some communities, for example, eye contact is considered as staring, and may make the person feel as though they are being judged.

Begin by having a yarn with the person. Spend time with them and let them know that you are worried about them. Ask the person where they would be most comfortable to have a yarn, be aware that confined places may cause the person anxiety and outdoors might be more relaxing. Ask for the person’s permission before asking about sensitive topics, but suggest that they may feel better once they have spoken about their problems. Be careful not to falsely imply that by talking about mental illness the person’s problems will go away. Instead, just reassure the person that you care and want to help.

When discussing your concerns, use simple and clear language. Avoid asking lots of questions and speaking to the person in a patronising manner. Allow for periods of silence while the person considers what you have said and allow them plenty of time to tell their story.

If family members are present, expect that they might answer some questions on behalf of the person. Avoid asking questions that might embarrass the person in front of their family and friends and remember never to criticise members of the extended family in front of the person. If you think that it might make the person more comfortable, ask them if they would like to find another safe area to talk away from family and friends.

Remember that it is more important to make the person feel comfortable, respected and cared for, than to do all the ‘right things’ and follow all the ‘rules’ when communicating with an Aboriginal person. Importantly, if the person finds it too hard to talk about their problems, you should respect that.

Do not shame the person, their family or community

The concept of shame is very important within many Aboriginal communities and can be a barrier to help-seeking. Shame may also be caused through not practicing cultural safety.

Be aware of what language and behaviours cause shame within the person’s community. Understand how the person you are helping might feel shame if you behave a certain way or use certain words. In some communities, for instance, talking about mental illness can cause individuals to feel shame and therefore, it might be helpful to stick to discussing behaviours and feelings, rather than talking about labels such as “depression” or “psychosis”. Also understand how the community in which you are helping might feel shame. In some more traditional communities and can be a strong barrier to help-seeking. Shame may also be caused through not practicing cultural safety.

CULTURAL COMPETENCE

Being culturally competent when providing mental health first aid involves:

• Being aware that a person’s culture will shape how they understand health and ill-health
• Learning about the specific cultural beliefs that surround mental illness in the person’s community
• Learning how mental illness is described in the person’s community (knowing what words and ideas are used to talk about the symptoms or behaviours)
• Being aware of what concepts, behaviours or language are taboo (knowing what might cause shame)

Please be aware that these guidelines are not exhaustive, and although they may assist you in providing first aid within Aboriginal communities, they alone will not make you a culturally competent first aider.

All MHFA guidelines can be downloaded from www.mhfa.com.au2.
communities, for example, insisting that the person go and see a non-Aboriginal health worker might be shameful to the community, as it implies that their own ways of healing are inferior to others.

Also be aware that Aboriginal people might feel societal shame, for example, as a result of historical factors such as dispossession of Aboriginal land and domination of culture. It is important to understand that even if you don’t do anything to offend the person, shame might affect their behaviour. For instance, some Aboriginal people may be afraid of attending a hospital because, historically, being admitted to a hospital with a mental illness caused shame on family and community.

**CULTURAL SAFETY**

Practicing cultural safety means:

- Respecting the culture of the community by using the appropriate language and behaviour
- Never doing anything that causes the person to feel shame
- Supporting the person’s right to make decisions about seeking culturally-based care

**Use community and family supports**

Establishing a network of support for an Aboriginal person is a very important step in helping them resolve their mental health crisis, especially if access to professional support or mental health services is limited.

If you are worried about the person’s safety, or if the person is experiencing a crisis, be persistent in trying to get the person help and support from others. Make sure you have a yarn with them about how they would like to be helped.

Try to get the person’s family involved in supporting them until they get better, but in doing so, you must uphold the person’s right to confidentiality. Unless you are worried that there is a risk of harm to the person or harm to others, you should have the person’s permission before seeking help from family or other community members.

Another way to be supportive is to encourage the person to build personal relationships with people who they can trust, respect and turn to for support or assistance when feeling unwell. A good source of support for the person might be a youth worker at a community centre, an Aboriginal mental health worker, a respected Elder, or community liaison or police officer. Also, discuss with the person what their interests and activities are and encourage participation in any group activities that will help them to develop feelings of purpose, belonging and achievement.