



Aboriginal-led Early Support Programs for Children, Young People, Families and Communities: A Review of the Evidence Base

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Snapshot

- It is generally accepted within Aboriginal communities that Aboriginal Community Controlled Organisations (ACCOs) are best placed to understand, design, and deliver services that respond to the needs of their communities. However, there is limited information on what evidence exists about the characteristics, implementation and impact of Aboriginal-led programs designed to improve the wellbeing of Aboriginal families and communities.
- The Department of Communities and Justice (DCJ) commissioned Gamarada Universal Indigenous Resources Pty Ltd to conduct an evidence review on Aboriginal-led early support programs and services to improve the wellbeing of Aboriginal children, young people and families.
- The review involved an electronic database search, a grey literature search and community outreach to elicit other sources of evidence regarding community services and programs. Inclusion and exclusion criteria were applied to ensure that the evidence related to Aboriginal designed and delivered early support programs only.
- The combined search strategies identified 79 evidence sources after inclusion and exclusion criteria had been applied. Those resources were then culturally appraised using a Cultural Lens Matrix.
- Evidence that was rated highly through the cultural appraisal was analysed to identify eight common features of Aboriginal-led early support programs: Community designed or co-designed; community-led; cultural safety; strengths-based, culture-affirming approaches; trauma-informed and healing-focused; holistic, wraparound components; collaboration and coordination with mainstream services; and flexible delivery.
- The review highlights the need for deeper inquiry within Aboriginal communities to ascertain the meanings and applications of ‘standards of evidence’; further research on what wellbeing means from an Aboriginal worldview and what programmatic features restore wellbeing; and building a strong evidence base of culturally-desired outcomes and effective restorative practices.



Introduction

The intent of this review was to develop a stronger understanding of the evidence that is available for Aboriginal-led and designed early support programs. The scope of the review includes programs and services available across Australia or for specific communities in one or more states.

This Evidence to Action Note describes evidence found on Aboriginal-led early support programs for Aboriginal children, young people, families and communities. Two approaches were used to assess the evidence – the first was to categorise the evidence according to type of evidence, and the second was to culturally appraise each individual piece of evidence identified from Aboriginal peoples’ perspectives, using a Cultural Lens Matrix. Eight themes were then identified from a full text review of the sources of evidence rated highly in the cultural appraisal.

The evidence review was undertaken by Gamarada Universal Indigenous Resources Pty Ltd, a 100% Aboriginal owned and operated consulting firm.

Why is this important?

It is critical we work towards a child and family support system that is better equipped and more responsive to the needs of Aboriginal children, families and communities. This requires greater valuing of culturally informed approaches generally, and greater investment in the design, implementation and evaluation of Aboriginal-designed initiatives.

As noted by SNAICC (the Secretariat of National Aboriginal and Islander Child Care):

Too often, locally designed approaches driven by organisations working in the Aboriginal and Torres Strait Islander child and family services sector are undervalued due to a lack of documented evidence. This results in programs being implemented with an international evidence base that are ineffective in the context of Aboriginal and Torres Strait Islander communities¹.

This review aims to identify and consolidate a broad range of evidence on early support programs which were designed, led and delivered by Aboriginal people for Aboriginal people, and to assess this evidence according to culturally informed criteria, including ethics and cultural validity from an Aboriginal perspective. This is an innovative approach to conducting an evidence review which does not rely on the traditional scientific hierarchy of evidence. The findings will be taken back to community to make decisions about further work needed to capture the evidence relating to Aboriginal-led programs.

¹ <https://www.snaicc.org.au/sector-development/monitoring-and-evaluation/> (accessed 27 October 2023)



What did the evidence review find?

Method

An Aboriginal-led Project Reference Group was established to provide guidance, advice and subject matter expertise for its implications on Aboriginal communities. The Project Reference Group determined the scope and research question for the review, and screening criteria for inclusion and exclusion.

The evidence review was guided by the question: ‘What is the standard of evidence on early support programs and activities designed or delivered by/with Aboriginal communities in Australia?’

A rapid evidence review method was used to search and culturally appraise evidence from the year 2013 onwards and relating to Aboriginal and/or Torres Strait Islander people in Australia. Programs developed in other countries and adapted for delivery in Australia were included in the review only where they were co-designed with or adapted by Aboriginal people.


A community outreach exercise was also undertaken to invite early support service providers and other organisations to submit evidence in order to ensure that evidence not available from the commonly used electronic databases and grey literature was included.

The Evidence Portal [Technical Specifications](#) were not used in conducting this evidence review. This was to allow the review to identify a broad range of evidence and specifically culturally-appraised evidence which may not be captured by traditional evidence reviews using the hierarchy of evidence. The evidence was categorised according to type of evidence. The types of evidence included in the review were:

- Systematic reviews (with or without meta-analysis)
- Randomised controlled trials (RCTs)
- Quasi-experimental design studies (QEDs)
- Dismantling studies
- Non-experimental quantitative studies, using methods such as analysis of program data
- Qualitative studies, using methods such as focus groups, interviews, observation, case studies
- Literature reviews, including scoping reviews
- Aboriginal practice, such as: Authority / expert reports; Anecdotal experiences; Aboriginal art and outcomes displayed through artistic expressions; Interviews, yarning circles, gamna, dadirri, focus groups, participant observation, photovoice.

The search strategy returned the following results:

- **Rapid preliminary search of academic and grey literature using Google:** A total of 27 resources were identified that met the inclusion and exclusion criteria. These resources were all included for data extraction.

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- **Electronic database search:** The initial electronic database search revealed a total of 378 resources. These resources were subjected to an initial duplicate scan and abstract screening using the agreed inclusion and exclusion criteria. After duplicate removal and screening, 23 resources remained for data extraction. A further 4 were excluded for other reasons, with 19 results remaining for data extraction.
 - **Grey literature search:** This was conducted in Google and produced 3,268 results (including duplicates and sponsored links). The majority were screened out as they did not meet the inclusion criteria. After screening, a total of 21 resources were included for data extraction.
 - **Community outreach:** 25 resources were submitted in response to the community outreach invitation. After discussion and unanimous decision by the Project Reference Group, 12 were determined to meet the inclusion criteria.

A total of **79 resources** passed the screening process and were subjected to a full text review by the research team.

Cultural Lens Matrix

The Aboriginal researcher from Gamarada conducted a cultural appraisal of each individual piece of evidence using an abridged version of the Cultural Lens Matrix.

The Cultural Lens Matrix is a framework developed by Aboriginal researcher Professor Megan Williams for assessing the extent to which evidence is effective in conveying Aboriginal peoples' perspectives, is of ethical quality and is culturally valid.

The Cultural Lens Matrix appraisal process involves reviewing each individual evidence source and assessing it according to the themes and characteristics listed in the matrix. Characteristics in the theme lists of the Cultural Lens Matrix were adopted from key documents about rights, principles and protocols of Aboriginal and Torres Strait Islander and other Indigenous peoples. Using and meeting these are essential for research to effectively convey values and meanings from Aboriginal and Torres Strait Islander peoples' perspectives.

The reviewer scored each evidence item against the following criteria: 1) quality (whether the study adhered to Aboriginal ethical guidelines, particularly Aboriginal governance); 2) potential for impact (whether the study adhered to Aboriginal beliefs and cultural priorities; and 3) generalisability (the ability to transfer study or program components to other communities), on a scale 0 to 3 (0 representing 'none', 1 representing 'low', 2 representing 'medium' and 3 representing 'high'). The scores for each of the three criteria were added to produce an overall score out of 9, with 9 being the highest cultural appraisal rating of the evidence.

The research team then re-explored the full text of each resource that was given a high rating (7 or above), to identify common themes.

Key Findings

Of the 79 resources found in the review, 31 were rated as ‘Highest’ on the Cultural Matrix Lens rating scale; 14 were rated as ‘High’; seven were rated as ‘Medium-high’; 14 were rated as ‘Medium’; seven were rated as ‘Low-medium’; and six were rated as ‘Low’.

The following eight common themes were identified among the highly-rated evidence about Aboriginal-led early support programs designed for Aboriginal children, young people, families and communities.

Theme	Description
1. Community designed or co-designed	<p>Several studies highlight the importance of community leadership and direction, community ownership and community knowledge in programs for Aboriginal children and families. Co-designing programs means non-Indigenous people providing support without ‘taking over responsibility’ or ‘telling Aboriginal people what to do.’ It can include developing ways of working together to ensure programs resonate with the beliefs, values and frames of reference of specific communities and that indicators of success are adapted accordingly. Each Aboriginal community may need adaptations specific to their cultural frameworks, that also build on local protocols, priorities and strengths.</p>
2. Community-led	<p>The existence of Aboriginal governance and staff, and/or the involvement of respected community leaders or elders can lead to increased program participation, satisfaction and other positive intervention outcomes.</p> <p>Resources published by SNAICC routinely stress that community-controlled services are best for engaging and supporting Aboriginal children, families and communities. The ability to engage in strong relationships, understand and holistically respond to a community’s needs are more likely to be derived from local Aboriginal staff, voluntary workers and management.</p> <p>Program or service participants also tend to feel more at ease and experience less of a sense of prejudice, stereotyping or power imbalance with Aboriginal community-controlled services than with mainstream, universal services.</p>
3. Cultural safety	<p>“Culturally safe” defines an environment which is safe for people, where there is no assault, challenge or denial of</p>

	<p>their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience, of learning together with dignity, and truly listening (Ekkerman et al., cited in Williams, 1999).</p> <p>Prentice et al.'s (2017) participatory research study reveals multiple barriers to service access, including justice system deterrents, prejudice, social taboos, shame, and a lack of culturally appropriate services. It also highlights the importance of recognising and addressing the complex interplay of historic, social, and cultural factors influencing service access. The study advocates a whole community approach, cultural safety and the provision of more healing spaces. Research participants stated that they wanted accessible online resources that provide anonymity, promote connection to culture and facilitate a healing process through drawing on Indigenous knowledge and strengths.</p> <p>There is evidence that increasing Aboriginal-organised gender-specific and youth-specific safe spaces promote social and emotional wellbeing among women, men, children and young people. Participants generally report enhanced feelings of emotional security in such spaces to explore challenges, address self-victimisation and lateral violence, and improve their life skills.</p>
<p>4. Strengths-based, cultural-affirming approaches</p>	<p>Evidence from this review suggests that there may be a link between wellbeing outcomes (such as a strong sense of identity, resilience and confidence) and a sense of community, belonging, and strong connection to culture.</p> <p>The evidence focuses on programs and services that incorporate Aboriginal social structures such as wider kinship networks, elder mentors and role models, and ways of sharing knowledge and wisdoms such as “going out bush” (connecting to country), circular learning, yarning, relationships-strengthening activities, dadirri discussion methods, lore, traditional art, food, dance, songlines, music and storytelling, and even the use of native languages.</p>
<p>5. Trauma-informed and healing-focused</p>	<p>The evidence highlights the importance of programs and services acknowledging the impacts of intergenerational trauma as well as ongoing experiences of racism and stigma. Studies reviewed recognise the significance of cultural restoration and revival in the healing process.</p>

	<p>They also focus on prevention practices with features that address the ontology of intergenerational trauma and cycles of disadvantage and harm that prevail across First People populations.</p>
<p>6. Holistic, wrap-around components</p>	<p>The evidence includes programs that integrate multiple, wrap-around components to provide more holistic services for Aboriginal participants.</p> <p>Munro’s (2012) study of early intervention strategies for Indigenous children and their families describes key ingredients as: culturally competent service provision, multi-component approaches such as group-parent education and home visits, equitable access to services, provision of transport, flexible service delivery, ensuring a long lead-in time to consult appropriate Indigenous people on implementing the program, the importance of engaging families when they first make contact and, where appropriate, the use of bilingual staff in program design and delivery. It also highlights the importance of including Aboriginal families in evaluation during and after the intervention.</p>
<p>7. Collaboration and coordination with mainstream services</p>	<p>Emerson et al.’s (2015) study of ‘Good Beginnings’ notes that education and early years interventions, implemented in collaboration with Aboriginal communities and properly adapted to their settings, hold the potential to produce significant long-term positive effects on health and wellbeing. However, implementation without collaboration is unlikely to realise these benefits.</p> <p>Collaboration could be in the form of bi-directional warm referrals between services or having partner services co-located for easier access and integration of case management. It could also be in the form of interdisciplinary teams including Aboriginal health workers and elders, such as the programs described by Emerson et al. (2015) where a team works with families over two years, targeting risk factors of particular concern to the community. Respected community leaders deliver education programs and sustained home visiting programs that complement universal maternal and child health services as well as specialist supports to address key determinants of child health, such as maternal smoking, alcohol and drug use.</p>

8. Flexible delivery	Particularly in remote communities, the evidence indicates that services and programs may be strengthened by being more flexible in delivery. In practice, this may mean expanding the window for clinic scheduling, providing outreach as well as centre-based services and the use of diverse communication strategies including traditional storytelling, visual storyboarding and yarning.
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Limitations

By taking a broader and more inclusive view of evidence than many of the existing reviews of early support programs and using a variety of search strategies, this review has been able to capture a wider range of evidence. The following limitations in the review must be noted:

- Only programs and practices supported by some kind of documentation are included. Therefore, the review does not include evidence for programs lacking documentation.
- The review did not conduct a critical appraisal of the evidence about outcomes, and therefore further investigation is required to assess the strength of the evidence regarding the effectiveness of the programs.

Where to from here?

The report recommends community co-designed, community-led, culturally safe, strengths-based, culturally-affirming, trauma-informed, healing-based, holistic, coordinated and flexible early support programs for Aboriginal children, youth, families and communities.

This review of the evidence base for Aboriginal-led early support programs revealed the complexities of seeking generalisable ‘standards of evidence’ for Aboriginal programs, because they do not operate in isolation from local community context factors. The report provides a culturally appraised evidence base for service planning, with a call for deeper community engagement to assess what makes programs effective from the community’s point of view.

The report also suggests that further research is needed on what wellbeing means from an Aboriginal worldview, how Aboriginal communities assess wellbeing and what programmatic features restore wellbeing.

This review provides an independent, culturally appraised body of evidence available for Aboriginal-led and designed early support programs that can be applied to service planning and design.