



PSYCHOLOGISTS BOARD OF THE NORTHERN TERRITORY	
TITLE: INDIGENOUS CLIENTS POLICY	
EFFECTIVE DATE: 17 MAY 2004	REVIEW DATE: 17 May 2005

POLICY

The Board endorses the Australian Psychological Societies, Indigenous Clients Policy.

APS INDIGENOUS CLIENTS POLICY

The Australian Psychological Society (APS) recognises that Aboriginal and Torres Strait Islander (indigenous) cultures and people occupy a special place in Australian society as the original cultures and people of Australia. Although current-day expressions of those cultures are diverse in many respects, they all share a common, unique place in Australian society as manifestations of its indigenous cultures.

Membership of those indigenous cultures is not prescribed by biological or life-style characteristics, as is often thought to be the case by non-indigenous Australians, but is a matter of individual and indigenous community affirmation.

Indigenous peoples both individually and collectively, have been deeply disadvantaged by the European settlement of Australia. Contact between these indigenous and European cultures has resulted in the alienation of indigenous rights to cultural autonomy and to land ownership, and of the basic human rights of many indigenous people.

Consequently, psychological solutions to the current-day work, health, educational and social issues confronting indigenous people are likely to be unsuccessful, unless political, legal and social solutions for the restoration of their cultures and individual human rights, privileges and dignity are also found. Therefore, the APS gives unequivocal support to the need for reparation of relationships between non-indigenous and indigenous people, to action which in its view and in the view of indigenous people restores their human rights and privileges, and to all informed attempts to address the substandard living conditions that exist in many indigenous households and communities.

In the past much of the research and many of the professional practices and procedures in the area of psychology have been ineffectual because they have not been sensitive to the cultures, customs and knowledge of indigenous people. The indigenous psychologies of these cultures inform the mainstream of psychology about the nature of indigenous behaviour and experience. Consequently, the study of

these indigenous psychologies through research and other forms of scholarship is encouraged, as is formal training in psychology of indigenous people who may then facilitate the study and applications of their psychologies in the mainstream of psychology and participate in psychological research with and the delivery of services to indigenous people and communities. Courses of training in psychology should have a component on indigenous cultures, customs, histories and culture contact that provides all psychologists in training with knowledge about these cultural milieux of psychological research and practice.

The APS, to address these concerns, has endorsed the following guidelines as general principles to be followed by its members who are engaged in the training of psychologists, and in research with or provision of services to indigenous people.

Guidelines for Psychological Research that Involves Indigenous People as Participant Subjects

The APS is aware of concerns among indigenous people and some non-indigenous researchers that some psychological research in the past has not duly recognised the need for proper, informed consultation between research psychologists and host, indigenous communities and participant samples. Consequently, indigenous people generally have a perception of themselves as contributors to, but non-recipients of, the benefits and knowledge that are the results of that research. Much research is seen to be irrelevant to indigenous people's needs, problems and issues, to be unrepresentative of research needs laid down by indigenous organisations and groups, and to contribute minimally, if at all, to the quality of life of these people. Such research is unacceptable to indigenous elders and communities.

In order to ensure that there is proper informed consultation between research psychologists and host, indigenous communities, families and individual participants:

- research psychologists should follow the NHMRC Guidelines on Ethical Matters in Aboriginal and Torres Strait Islander Research (Appendix);
- they should be aware of the human research ethics policies of the APS and of their institution, organisation, funding source or other participant bodies, and should follow procedures for obtaining ethical clearance for their research project, if such procedures exist.
- In the absence of such procedures, it is the research psychologist's responsibility to be acquainted with and follow the appended NHMRC Guidelines and, when necessary, to seek advice from other researchers or from indigenous representative organisations to ensure that the Guidelines are implemented effectively.

General Guidelines for Provision of Psychological Services to Indigenous People

The APS endorses the following, general guidelines for psychologists who are required to provide services for indigenous people:

- psychologists should be aware of any relevant research pertaining to provision of psychological services for these people;
- they should take into account ethnicity and culture when making professional judgements about, and dealing directly with, indigenous clients;
- they should be aware of, and show due acknowledgment of and respect for, the value systems and authority structures operating in the indigenous communities for whom they provide services; they should conduct their practice in a manner and, where possible, in an appropriate language medium with which indigenous clients feel comfortable;
- they should have an awareness of the socio-political issues that might adversely affect the well-being of indigenous clients and the effectiveness of the services provided;
- they should be aware of the impact of their own beliefs, stereotypes and communication rules on their interpretation of the behaviour of indigenous clients, they should document in their records and reports those cultural, linguistic and other social factors that might be relevant to the provision of services to an indigenous client, they should clearly inform indigenous clients of their client rights, and the means by which those rights might be safeguarded; and
- they should react in an appropriate manner against any prejudice or discrimination by other persons that is directed at an indigenous client.

Guidelines for Psychological Testing of Indigenous People

Problems have existed when psychological tests developed overseas or in Australia for use with non-indigenous populations have been used in research or professional practice with indigenous people. In some instances those problems arise from tests containing information and involving test procedures that are culturally unfamiliar for indigenous test-takers. In other instances, tests that have been shown to be sensitive to cultural variation no longer provide up-to-date test norms for indigenous groups.

The language

of the test and test instructions may also be unfamiliar for indigenous test takers and hence disadvantageous for them when it comes to the interpretation of their test scores.

Similar problems pertain with the use of psychological tests for educational, vocational selection, neuropsychological and clinical purposes. There are currently

no known psychological tests that have been developed specifically for use with indigenous people and that provide current-day norms and measurement statistics for indigenous test takers.

However, in some circumstances psychologists are required to employ psychological testing for research or professional purposes with indigenous people. In those circumstances, it is recommended that:

- testers should have a sound understanding of the test, including limits to its use in non-indigenous communities. Caveats on test interpretation should be noted when the reliability and validity of individual and group test results for indigenous test takers are considered;
- they should be aware of the extent to which the test to be used has already been used with indigenous people and of any problems arising out of its usage with those test takers. The relative benefits of the test, other similar, available tests, and other methods of assessment should be considered prior to the test's administration;
- they should know specifically why the test has been requested and about the uses to which the test results will be put;
- consequently, they should require as part of any referral and should provide as part of the information on which the test taker's consent to participate in testing is based a statement about the aspects of psychological functioning that are to be tested and the uses that will be made of the test results;
- in addition, they should incorporate into the informed consent procedures an appropriately worded explanation of the testing procedures to be used;
- they should obtain as much biographical, social and cultural information about the test taker as is possible and appropriate under the circumstances surrounding testing;
- in order to make best use of that background information, they should have some knowledge about the indigenous contexts of the test taker's behaviour which has led to testing;
- where they consider that they are lacking sufficient background cultural knowledge about the behaviour under investigation or about the test performance itself, then they should take all reasonable measures to obtain that information, being mindful of their ethical obligations to the test taker;
- they should address uncertainties regarding the appropriateness of questioning prior to testing through consultation with indigenous health workers or psychologists with relevant, prior experience;
- they should not rely solely on test results. Particular caution should be exercised where tests have not been extensively tried with indigenous people and where test norms for those indigenous populations are non-existent. In all circumstances

test results should be combined with other forms of psychological assessment, and with the use of everyday-life indicators of the focal behaviour, where the latter are available, prior to the interpretation and use of test results.

Guidelines for Conducting Other Forms of Assessment with Indigenous People

Research and other evidence suggest that indigenous styles of interpersonal interaction differ noticeably from those interaction styles found among non-indigenous people. Such differences may adversely affect the outcome of all forms of psychological assessment and in particular the outcome of a clinical interview. Psychologists providing assessment services to indigenous persons should appraise themselves of the particular interpersonal communication styles and customs occurring in those indigenous communities for which assessment services are provided, and should be aware of the following factors that may bear upon the outcome of psychological assessment:

- the use of appropriate nomenclatures for reference to people of indigenous and non-indigenous descent;
- appropriate forms of greeting and leave taking;
- gender differences in interpersonal communication, particularly as they affect communication with persons of the other gender;
- the cultural use of questioning as a method of information acquisition;
- respect behaviour, particularly as it affects inter-generational communication;
- the importance of elders and land custodians;
- the use of personal names, including taboos associated with their use;
- non-verbal communication styles, including eye contact or non-contact, ways of expressing emotion, and posture;
- public displays and other behaviours that are likely to result in feelings of embarrassment and shame; and
- other factors, such as the nature of previous interpersonal contact between the service recipient and other non-indigenous providers that might influence the recipient's participation in the assessment.

Provision of Psychological Services in the Area of Mental Health

There is extreme concern about the levels of mental ill-health that are known to exist in some indigenous communities and increasing concern about the relationship that exists between ill-health and mental ill-health in those communities. The concerns have focused on the stressfulness of substandard living conditions, chronic depression, substance misuse, domestic violence, child physical and sexual abuse, adult assault and

sexual assault and suicide and other forms of self-harm. Some evidence is available about the incidence and manifestation of transcultural and culture-specific psychiatric disorders amongst indigenous populations, but there is an absence of analysis of the suitability of major current systems of clinical diagnosis for accurately diagnosing indigenous mental ill-health.

- In the absence of such analysis psychologists should be aware of and be sensitive to both cultural and milieu factors associated with indigenous mental ill-health;
- in particular, they should be familiar with national health and mental health policies and initiatives which are designed to direct services for indigenous persons and communities;
- they should be aware of reports of major public enquiries into matters concerning indigenous health and mental health, and psychological well being; they should be aware that some indigenous clients are at major risk in terms of suicide and other forms of self-harm in particular circumstances;
- they should take responsibility for implementing management procedures that reduce the risk of self harm occurring in accordance with Appendix G of the Code of Professional Conduct: Guidelines Relating to Suicidal Clients;
- they should be aware that individual counselling of indigenous clients must be sensitive to the client's wider responsibilities to kin, elders and community that operate in these indigenous cultures; and
- they should be aware of any indigenous counselling programs and services that are available in their local area and make use of those services as appropriate and necessary.

Guidelines for Education and Training in Psychology

In order to ensure that there are psychological services that meet the needs of indigenous people, education and training in psychology should include a segment on indigenous studies which addresses:

- indigenous cultures and customs, including indigenous communication styles;
- the history of contact between indigenous and non-indigenous people in Australia;
- the appended NHMRC Guidelines;
- procedures for consultation with indigenous communities and representative groups;
- indigenous knowledge about the psychological functioning of indigenous people, including the nature of their emotional experience and views of self, and

sociocultural factors that positively and negatively affect their psychological health and well-being;,

- research studies into indigenous psychological functioning, including where appropriate the shortcomings of the methodologies they have adopted;
- the development of policy in the areas of indigenous health and mental health; and
- these APS Guidelines.

It is strongly recommended that: indigenous studies segments in psychology education and training be developed in consultation with local indigenous groups; where possible, such education and training should be directed and provided by indigenous people with appropriate training and experience; the teaching of indigenous knowledge and customs, the history of contact between indigenous and non-indigenous people and, indigenous policy initiatives be undertaken and directed by indigenous people themselves; and that support and encouragement be available to indigenous students who wish to pursue further professional studies in psychology.

In addition: provision should be made within continuing professional education, practicum and supervision guidelines for recognition of culture learning activities undertaken by psychologists and psychologists in training in indigenous communities and family groupings.

Summary Responsibilities of Professional and Research Psychologists

The APS *Code of Professional Conduct* requires that "psychologists shall refrain from offering work or advice beyond their professional competence" (Clause IIb). Knowledge of: the original, indigenous cultures of Australia; the psychological functioning and personal psychological needs of people from those cultures; the cultural and other milieu factors that underlie those needs; and ways of applying that knowledge in psychological research with and psychological services for indigenous people, is essential for professional competence in all research and professional services where indigenous people are the consumers. Consequently, psychologists who are likely to be involved in such research or service provision have a professional responsibility to obtain such knowledge.

Alternatively, they should refrain from such work and refer indigenous consumers to psychologists who are considered by indigenous people to be sufficiently knowledgeable in this respect to be able to undertake the research or deliver the services, and who are also otherwise competent to provide the services required.

APPENDIX

NHMRC Guidelines on Ethical Matters in Aboriginal and Torres Strait Islander Research

Executive Statement

The general ethical principles in the area of research on Aboriginal and Torres Strait Islander health are not different from those that apply to any research where human experimentation is undertaken. The NHMRC Statement on Human Experimentation and Supplementary Notes as published from time to time covers these. This document should be used in conjunction with these guidelines.

The Medical Research Ethics Committee (MREC) of the National Health & Medical Research Council (NHMRC) believes that research programs involving Aborigines and Torres Strait Islanders and Aboriginal and Torres Strait Islander communities require particularly sensitive attention to ethical issues.

Guidelines Concerning Aboriginal and Torres Strait Islander Health Research

In assessing a research proposal involving study of Aboriginal and Torres Strait Islander individuals or communities, an Institutional Ethics Committee (IEC), in addition to assessing whether the proposal conforms to the NHMRC Statement of Human Experimentation and Supplementary Notes, shall satisfy itself that:

Consultation

1. In the preparation of the research proposal, the researcher has sought advice not only from State, Territory and Federal Aboriginal and Torres Strait Islander Health agencies, but also from local community controlled Aboriginal and Torres Strait Islander health services and agencies.
2. The Aboriginal and Torres Strait Islander community, or appropriate community controlled agency able to represent the Aboriginal and Torres Strait Islander group which is the focus of research, has indicated that the research being proposed will be potentially useful to the community in particular or Aboriginal and Torres Strait Islanders in general, and will be conducted in a way that is sensitive to the cultural and political situation of that community.
3. The researcher has obtained written documentation of consent from the communities in which it is proposed to conduct research. In such circumstances, informed consent should be shown to have involved:
 - (a) provision of information in a form accessible to community members and able to be readily understood by them. This information should have included details of the collection and analysis of data, and the drafting and publication of reports. It should also list any potential costs to the community as well as potential benefits; face-to-face discussions with community groups and individuals concerned wherever possible;

(b) the allowance of sufficient time for the community and the individuals concerned to assimilate and respond to the information offered;

(c) demonstration of a process for obtaining free consent from individuals as well as written evidence of consent by the community-at-large;

(d) provision of information to participants that consent may be withdrawn at any time.

Community Involvement

4. Members of the Aboriginal and Torres Strait Islander community being studied will be offered the opportunity to assist in the research and will be paid for the assistance, and the funds to support that assistance should be included specifically in the research budget proposal. Specifically, Aboriginal and Torres Strait Islander women, as advised by the community, will be involved when research deals with women's or children's health issues; and the specific cultural and social needs of Aboriginal and Torres Strait Islander men will be similarly recognised.

5. The researcher has accounted for any resources, which may be made use of in the conduct of the research, has costed these in the research proposal, and has demonstrated a process for reimbursing the community and/or individuals for any such costs.

6. The researcher recognises the right of the community to request further information about aspects of ongoing research, and accepts that changes in research protocols, procedures or methodologies will require further negotiations with the community and consent for that change by the community or an agency nominated by the community. The IEC must also be notified and be given the opportunity to approve changes to the research protocol.

7. The researchers and IEC's must observe the requirements for surveillance of research set down in Supplementary Note 1 of the NHMRC Statement on Human Experimentation and Supplementary Notes, as published from time to time.

Ownership and Publication of Data

8. Following completion of data collection and analysis, and before any publication or presentation of these data, a summary of the findings will be reported to the community as a whole. Details of findings relevant to their health or well-being will be confidentially conveyed to individuals who participated together with counselling as appropriate.

9. If a researcher wishes to use the information or blood or tissue samples gathered in the course of research for any purpose other than that for which consent was obtained, further permission must be sought from the community. The return of identifiable raw data, its destruction, or secure storage on completion of the research, should be negotiated with the community, or its nominated representative or agency, prior to the commencement of the research.

10. Results will not be published in a form, which permits identification of individual subjects. Results, which identify a particular Aboriginal or Torres Strait Islander community, will not be published without permission from that community or from a community-controlled agency able to represent that community.

11. Pictorial material will be made only with the consent of the local community and will be handled in accord with their wishes.

12. Proper acknowledgment will be given to individuals and communities who took part in the research.

13. Wherever practicable, Aboriginal or Torres Strait Islander assistants who contributed to the research will be involved in the preparation of publications and will be acknowledged. Publication acknowledgment shall be in accordance with the NHMRC Statement on Scientific Practice.

14. Should the media solicit comments from researchers, once their work is in the public arena, researchers should first seek the consent of the community concerned. All comments to the media should be sensitive and professional and should be restricted to the research issues under consideration.