



Building Bridges: Learning from the Experts

Building bridges to implement successful
life promotion and suicide prevention expertise
across Aboriginal communities

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Centre for
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Abstract

The *Building Bridges: Learning from the Experts* report describes the implementation and findings of a community based suicide prevention initiative. The project aimed to use the experience and knowledge of the Yarrabah community as a model for other Indigenous communities for the establishment of effective and sustainable community-based approaches to building resilience, reducing suicide risk exposure and reducing self-harm. Several empowerment strategies had been developed in Yarrabah following a cluster of suicides in the 1990s (the Yaba Bimbie Men's Group, the Family Well Being Empowerment program and the Life Promotion Officer). Under the Building Bridges Project these strategies were employed within the communities of Hope Vale, Kowanyama and Dalby. Sharing of knowledge through formal events and informal communication provided a means by which the knowledge, skills and experience of each community was strengthened.

In order to enhance the understanding that informed these actions, an accompanying series of in depth interviews were undertaken which canvassed community members' perspectives and views about suicide. An Innovative IT/multimedia program, which was also grounded in community empowerment processes, complemented and provided a record of community experience which helped to inform community understandings of suicide and recovery.

In addition to documenting the implementation of this project, it also discusses the various challenges encountered which have valuable implications for future Indigenous community based suicide prevention programs that use an empowerment approach.

Executive Summary

The Building Bridges Project was funded by the National Suicide Prevention Strategy (NSPS) as a multi-faceted approach to empowering four Aboriginal communities. It was designed to enhance individual, family and community resilience, reducing the risk of suicide and self harming behaviours as well supporting community recovery processes when confronted with such events.

A unique feature of this project was its focus on shared learnings between communities while recognising that each community has individual needs and priorities. This initiative was able to work from and build upon the positive experience of one community, Yarrabah, in developing community strengths in the face of the negative impacts of a number of suicides in the past. Drawing on the skills and knowledge gained in Yarrabah, the project was able to facilitate the implementation of community empowerment processes associated with the Family Well Being Program and Men's Groups to build resilience, replacing self harm as an option with positive life promoting skills.

The distinctive feature of this initiative has been the promotion of horizontal learning between and amongst communities, who despite having quite different local priorities share a legacy of historic and continuing disadvantage. Each element of the project was grounded in community with local capacity building able to be enhanced through the sharing of knowledge, experience and skills across communities. Working in the ex-Deed of Grant in Trust (DOGIT) communities of Yarrabah, Hopevale and Kowanyama in Far North Queensland and Dalby a rural community in south-western Queensland, the Building Bridges project was able to employ empowerment processes which crossed geography and community character.

The innovative Health Information Technologies Network (HITnet) has been a valuable component of this project, working with the Yarrabah community in the development of production of a 'suicide prevention' module for touch screen kiosks and DVDs with experts in the field of suicide prevention. With a focus on fostering communication of messages of purpose and identity to young people, the module was designed not only for incorporation in the existing kiosks in the communities, but also in Lotus Glen Correctional Facility in North Queensland and Goondir Health Service in Dalby.

Consistent with the project's conception, the objectives have been to:

- Support leadership and collaboration among local men in suicide prevention.
- Harness the capacity of the Family Well Being (FWB) Program to develop life promotion skills in the broader community.
- Obtain a better understanding of the meaningfulness and dimensions of suicide and self harming behaviours, the situations and warning signs that specifically indicate risk and the recovery experience of Yarrabah.
- Foster participation and communication of messages of purpose and identity to young people.
- Collate and communicate information to community in an empowering way.

Importantly, in a practical way each of these objectives and associated processes has been inter-related. Given the interactive nature of these elements, the report has been structured to provide an integrated narrative. As a consequence the objectives are presented in a grouped rather than a numerically sequential format.

The Building Bridges project has been auspiced by the Centre for Rural and Remote Mental Health Queensland (CRRMHQ), in collaboration with community controlled health services (Gurriny Yealamucka in Yarrabah, Apunipima Cape York Health Council, and Goodir Health Services in Dalby). University partners in alphabetical order include the, Griffith University's Australian Institute for Suicide Research and Prevention (AISRAP), James Cook University (JCU), University of Queensland (UQ) and University of Southern Queensland (USQ) Centre for Rural and Remote Area Health (CRRAH). Other partners have included Queensland Health and the Royal Flying Doctor Service (RFDS).

The CRRMHQ has been responsible for the administrative and financial accountabilities, including ensuring that progress reporting has been delivered in compliance with funding requirements. Throughout the project, James Cook University and the University of Queensland had primary responsibility for implementation in Yarrabah, Hope Vale and Kowanyama, while the University of South Queensland had responsibility for implementation in Dalby. Gurriny Yealamucka, a community controlled health service in Yarrabah, Queensland Health in Hope Vale and the Kowanyama Council in Kowanyama auspiced their respective local projects, supporting the project officer with supervision, office space and in kind support.

HITnet, led by the University of Queensland, has been responsible for the collaborative development of the interactive media, through kiosk and iDVD, in meeting the objective of fostering participation and communication of message of purpose to young people. AISRAP is responsible for evaluation of the project, and has worked alongside the project teams in a consultative capacity.

Implementation

Implementation of the Building Bridges Project saw each of the core objectives met, working within a framework based on the principles of empowerment and processes which facilitate inclusion and sharing of knowledge, skills and experience. Each of the communities individually and collectively achieved significant outcomes.

Achievements included:

- Establishment and support of project officers within Hope Vale, Kowanyama, Dalby and Yarrabah, able to work collaboratively within their communities and with each other in a knowledge sharing culture
- Support of local leaders through the Men's Group in each community in Far North Queensland and local services in Dalby. Through such leadership it was possible for men to recognise and address local risk factors using a solution oriented approach
- Provision of training in Family Well Being and establishment of a core group of qualified facilitators able and active in working locally in groups and with individuals. This included sharing their knowledge through their day to day ways of relating to and working with people.
- Facilitation of knowledge sharing across communities and between project officers in formal events, informal communication and relationship building. Importantly it became evident early in the Project that each community had knowledge and experience to share which enhanced the outcomes for all those involved.

Throughout the Building Bridges Project each element came together in a holistic way, reinforcing and building capacity for positive action. The integral relationship between the capacity building processes of the men's groups, the understanding and skills of the Family Well Being Program and the knowledge sharing provided strong evidence of the way in which the Project was able to empower the communities to identify and take positive action to support factors and address risk factors for suicide in their own communities.

Working with communities, it was possible to draw out understandings of suicide and self harm through the sharing of personal experiences of those touched by such events. This included understandings of causes of suicide from a personal and individual level and at a community level. Further it was possible to explore the consequences for individuals and the community, perceptions of suicide and the messages that it carries. The importance of culture, family and relationships was reaffirmed as integral to a solution focus.

The establishment of the "*Buluru Yealamucka - Healing Spirit*" was an outcome of an intensive community effort enabled through the sharing of individual stories of healing. Participation by local people in the design, production and content of the module was the key to its success in delivering positive messages consistent with the principles of empowerment and solutions. The placement of the touch screen kiosk in Lotus Glen, a corrective services institution in Far North Queensland, and its consequent endorsement from Queensland Corrective Services, complemented the success of such technologies in the communities.

There is a need to appreciate that the way in which individual communities respond to and work together will be and is different. It is not possible to extrapolate from one community to another. Empowerment processes therefore cannot be understood as a linear model, but rather one in which different routes emerge within and between communities. It is for this reason it is not possible to establish or project specific outcomes in any particular time frame, nor can comparisons of achievements between communities be used as a measure of meaning or impact. It is about processes that can be transferred rather than solutions, as these are unique to each community. The knowledge sharing is then a part of the process for individuals and communities.

Challenges

The Building Bridges Project faced a number of challenges throughout its life. Delays necessitated by relationship building, recruitment and retention of local project officers, delivery of Family Well Being Training and the quite different community environments all impacted on the implementation processes. It is essential to acknowledge that building relationships is critical and this requires time. This includes establishing connections and relationships within the community in a way which is engaging and galvanises local leadership to move forward.

Funding was inadequate to meet core costs associated with training regimes, with the development of *Buluru Yealamucka - Healing Spirit*. Similarly working with multiple communities was highly intensive and required the commitment of time and resources by the university partners in supporting the work being done at the coal face by project officers.

An important learning from the Building Bridges Project has been the logistical demands of working with multiple leadership groups, which include the four universities involved in project planning and implementation. There is general agreement that future endeavours will be enhanced through the explicit allocation of responsibility and resources for a coordination role.

Opportunities

Given the short-term funding for this complex community-based project, the sustainability of empowerment strategies has been an important outcome for this project. Each participating community has agreed that the project offered valuable opportunities to connect with other communities and share knowledge. They would like to maintain and expand the knowledge sharing process to other communities, and to work at higher advocacy levels to influence policy frameworks. Each community had demonstrated a commitment to making arrangements to maintain the men's group positions and to continue performing the local men's group coordination roles. This provides evidence of the value placed on the project officer positions by communities.

With a core group of skilled and experienced facilitators already established within these communities, there is a real opportunity to support the processes and strategies used in this Project to continue not only within these communities but beyond. However, there is a need for ongoing resources allocated to supporting collaboration between communities through lateral knowledge sharing, or to extend this process to other places.

HITnet and Multimedia Technologies

The growth of HITnet through the life of the NSPS Building Bridges Project provides opportunities to utilise this resource to provide information to Indigenous populations across the country. Now that this is a mature system with network reach and depth in terms of content production, a challenge for HITnet is to work with content-commissioning entities to enhance evaluation capacity in order to better understand its impact and cost effectiveness. The popularity of this communication medium in particular settings, specifically within the Queensland correctional system, suggests that it will function similarly in other states and in the Youth Justice system. At the time of writing, the first kiosk to be located in a psychiatric unit of a general hospital, with a significant Indigenous patient base, is being deployed in Cairns Base Hospital. Consequently, there are opportunities to better understand the relationship between medium, message and setting in order to refine the capacity to best reach and influence self-harm vulnerable populations, such as prisoners, psychiatric patients, and young people. The capacity to multi-platform messages across different delivery modes, for example touchscreen, mainstream and Indigenous media, iDVD, mobile phone applications and the web, will provide further opportunities for a more nuanced awareness of what works best, where, and for whom.

In addition, the HITnet involvement in the NSPS Building Bridges Project generated a number of collateral outcomes with potential for further development to realise self-harm prevention potential. For instance:

- Valuable documentary footage from *Buluru Yealamucka* is archived (only around 10% of filmed interviews was included in the final module). There is support from residents of Yarrabah to produce a feature-length documentary film, suitable for adult viewing on television, DVD, web and potentially for entry into film festivals. Without dedicated funding, this opportunity has not been explored further.
- Valuable documentary footage from *Voices from Yarrabah* is archived (in Canada and Australia). This is being adapted for teaching purposes by Canadian colleagues. However, there is further potential to incorporate it into the feature-length documentary of *Buluru Yealamucka*.
- There is the potential to work in other Indigenous Australian communities with similar histories of resilience and renewal – for instance the Tiwi Islands and the Kimberley – to produce a more compelling documentary, one capable of illuminating the ‘active ingredients’ across all places.
- *Buluru Yealamucka* highlights the power of true stories – when well told and creatively shared – providing the opportunity to approach other sensitive and contentious issues around social responsibility in the same way.
- The *Frame of Mind* workshop conducted with NSPS participants in Dalby in 2009 has created demand for work in discrete communities in Cape York. These opportunities may be taken up over time as funding is found.

This Project has broken new ground in implementing and disseminating successful Indigenous suicide prevention activities, building on and extending effective local responses to self-harming behaviours that have been developed in one model community: Yarrabah.

It has extracted critical elements of a community-driven process, expanded these activities, and enabled horizontal knowledge transfer of risk-reducing and resilience-enhancing strategies and activities through partner organisations to Aboriginal communities in Far North Queensland South West Queensland and a correctional facility in which the majority of prisoners are Indigenous.

Horizontal knowledge transfer has drawn on existing solutions and expertise: including from Yaba Bimbie Men’s Group, Family Well Being Empowerment, the Life Promotion Officer project. It has employed understandings of how knowledge is communicated across Indigenous families, communities and institutions, such as meetings, workshops, training, networking, as well as innovative IT and multimedia approaches.

This initiative has supported the target communities’ capacity to define and implement recovery and suicide prevention activities.

“ Working with communities, it was possible to draw out understandings of suicide and self harm through the sharing of personal experiences of those touched by such events. ”

1 Introduction

Project Overview

The Building Bridges Project was funded by the National Suicide Prevention Strategy (NSPS) as a multi faceted approach to empowering four Aboriginal communities. It was designed to enhance individual, family and community resilience, reducing the risk of suicide and self harming behaviours as well supporting community recovery processes when confronted with such events.

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Drawing on the skills and knowledge gained in Yarrabah, the project was able to facilitate the implementation of community empowerment processes associated with the Family Well Being Program and Men's Groups to build resilience, replacing self harm as an option with positive life promoting skills.

The distinctive feature of this initiative has been the promotion of horizontal learning between and amongst communities, who despite having quite different local priorities share a legacy of historic and continuing disadvantage. Each element of the project was grounded in community with local capacity building able to be enhanced through the sharing of knowledge, experience and skills across communities. Working in the ex-Deed of Grant in Trust (DOGIT) communities of Yarrabah, Hopevale and Kowanyama in Far North Queensland and Dalby a rural community in south-western Queensland, the Building Bridges project was able to employ empowerment processes which crossed geography and community character.

The innovative Health Information Technologies Network (HITnet) has been a valuable component of this project, working with the Yarrabah community in the development of production of a 'suicide prevention' module for touch screen kiosks and DVDs with experts in the field of suicide prevention. With a focus on fostering communication of messages of purpose identity to young people, the module was designed not only for incorporation in the existing kiosks in the communities, but also in Lotus Glen Correctional Facility in North Queensland and Goondir health Service in Dalby.

Consistent with the project's conception, the objectives have been to:

- **Support leadership and collaboration among local men in suicide prevention.**
The aims set out for this objective have been to increase connectedness to family and community, support personal resilience and problem solving skills, support good physical and mental health, support men's spiritual or religious faith or sense of meaning and purpose to life, support community and social integration and address suicide risk factors in men's group meetings. Further, the project sought to build on existing relationships to address the issues of men in prison as a specific high risk group.
- **Harness the capacity of the Family Well Being (FWB) Program to develop life promotion skills in the broader community.**
Through this program the outcomes being sought were to assist people to gain understanding and skills to take greater control of their lives and situations at individual, family, group and community level. Further the FWB Program supports community and social integration, connectedness to family and community, and a strong spiritual or religious faith or a sense of meaning or purpose to life. This focus extends to life promotion and suicide prevention.
- **Obtain a better understanding of the meaningfulness and dimensions of suicide and self harming behaviours, the situations and warning signs that specifically indicate risk and the recovery experience of Yarrabah.**
This objective was achieved through the collection of stories and identifying themes, which assist communities to recognise risk and promote skills for effective response.
- **Foster participation and communication of messages of purpose and identity to young people.**
Working with the Yarrabah community, this objective involved the development and implementation of touch screen modules for use in school and the community.
- **Collate and communicate information to community in an empowering way.**
Linked to each of the complementary objectives, this aspect of the project was designed to enable communities to be active partners in the collection and interpretation of local information on self harm and related activities of both positive and negative nature from their local organisations. Using this information, the aim has been to enable community groups and health services to identify priorities and gain confidence in their own understanding of the issues to guide planning.

Importantly, in a practical way each of these objectives and associated processes are inter-related. The overall aim of the project has been to establish effective and sustainable community based approaches to building resilience, reducing suicide risk exposure and reducing self harm in Indigenous communities.

Project Partners

The Building Bridges project has been auspiced by the Centre for Rural and Remote Mental Health Queensland (CRRMHQ), in collaboration with community controlled health services (Gurriny Yealamucka in Yarrabah, Apunipima Cape York Health Council, and Goodir Health Services in Dalby). University partners in alphabetical order include the, Griffith University Australian Institute for Suicide Research and Prevention, James Cook University, University of Queensland and University of Southern Queensland Centre for Rural and Remote Area Health. Other partners have included Queensland Health and the Royal Flying Doctor Service.

The CRRMHQ has been responsible for the administrative and financial accountabilities, including ensuring that progress reporting has been delivered in compliance with funding requirements. Throughout the project, James Cook University and University of Queensland had primary responsibility for implementation in Yarrabah, Hope Vale and Kowanyama, with University of South Queensland having responsibility for implementation in Dalby. Gurriny Yealamucka, a community controlled health service in Yarrabah, Queensland Health in Hope Vale and the Kowanyama Council in Kowanyama auspiced their respective local projects, supporting the project officer with supervision, office space and in kind support.

HITnet, led by the University of Queensland, has been responsible for the collaborative development of the interactive media, through kiosk and iDVD, in meeting the objective of fostering participation and communication of messages of purpose to young people. The Australian Institute of Suicide Prevention and Research (AISRAP) is responsible for evaluation of the project, and has worked alongside the project teams in a consultative capacity.

Final Reporting Arrangements

Given the complexity of this project, in terms of the various elements of implementation, multiple sites, multiple project teams, and processes, it was decided that final reporting would be best served by adopting two layers of reporting.

This overarching final document provides essential accountability in compliance with the requirements of the Schedule to the Agreement with the CRRMHQ. More extensive detail of the theoretical frameworks and evidence base for this initiative is found in the individual reports prepared by the University of Queensland, James Cook University, University of Southern Queensland and HITnet and appended to this report. This approach is intended to meet the dual needs of providing a concise account of the project, its achievements, challenges and outcomes and documenting a more in depth understanding of the rationale, processes and learnings gained from the Participation Action Research (PAR) approach which underpinned this initiative. Accordingly, it is emphasized that the suite of final reports is intended to meet quite different reader interests and needs. Taken together, these reports provide a comprehensive appreciation of the Building Bridges project and its implications.

Outline of Final Report

Given the interactive nature of the objectives and processes involved in the Building Bridges Project, the report has been structured to provide an integrated narrative. As a consequence the objectives are presented in a grouped rather than a numerically sequential format.

Part 2 of this report presents the context for this project and evidence base upon which it has been grounded. This overview provides an appreciation of the key elements and environment for the Building Bridges initiative. The appended institutional reports provide an in depth explanation of this framework. Part 3 documents the implementation of the Project through Men's Groups, Family Well Being and Knowledge Sharing processes. Part 4 documents the learnings from the 'stats and stories' – that is the voice of the people in the community about suicide, its prevention and recovery. Part 5 outlines the processes which were adopted in the development and completion of the HITnet multimedia component of the Project. Part 6 provides a collective view of the challenges which were experienced and the implications for both the implementation of the project and the long term outcomes that can be achieved. This reporting reflects the long term commitment which is essential to achieve long term reduction in risk factors and to build resilience within such communities.

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A unique feature of this project has been its focus on shared learnings between communities while recognising that each community has individual needs and priorities.

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2 Project Context

The theoretical basis for the Building Bridges Project is located within literature concerned with addressing the social determinants of health. One of the most critical psycho-social factors influencing health inequalities is the amount of control people have over their lives including whether they are part of an integrated social network and whether they have access to supportive relationships. The aim of this project has been therefore to build on empowerment processes by which individuals, families, groups and communities gain increased control over their lives. Further, the Building Bridges Project put in place a multi faceted approach in which individual and community learnings and tools could be shared across communities. Most significantly, unlike other programs which work within a top down model, the Building Bridges approach was grounded in a bottom up approach in which communities were able to determine how each element of the project would be interpreted and used in a local setting.

The Yarrabah Experience

The Yaba Bimbie Men's Group was formed in February 1997 in response to community concern about a series of suicides and suicide attempts in the mid 1990s. Gurriny Yealamucka, Yarrabah's community controlled health service, auspiced the establishment of the men's group which articulated its vision as *"Men taking their rightful role in the community, encompassing the spiritual, mental, emotional and physical aspects of life"*. The Family Well Being Program was introduced to the Men's Group in 2001.

The success of Yaba Bimbie in influencing men's health, addressing justice issues, supporting cultural activities and providing positive role models has been well recognised. Members of Yaba Bimbie have been invited to visit with other communities in Central Australia and Palm Island to share their experiences and provide support, albeit on a relatively ad hoc basis. This project is designed to create opportunities to build strong relationships between communities over the three year period.

Complementing the work of Yaba Bimbie Men's Group, the training and facilitation activities of the Family Well Being Program enabled men to identify the underlying causes of Yarrabah men's problems associated with a lack of cultural identity, spirituality and values. Addressing these foundational factors was believed to be critical for addressing such community issues as suicidal ideation, domestic violence, alcoholism and family relationship issues. The role of the Men's Group is seen as being of critical importance. In a personal communication to a project team member, a community member said:

"I reckon Men's Group plays an important preventative role. Life promotion attends to the immediate crisis because it is set up to provide crisis response. This is necessary in any crisis situation. But Men's Group is for long process of bringing respect and confidence back to men. To show men that they are not alone and is OK to seek help. Men's group is for prevention."

The experience of Yaba Bimbie Men's Group in the context of the last decade suggests the importance of adopting a long term empowerment approach to complex social and emotional well being issues such as suicide. Although it is not possible to ascribe the significant reduction in suicide over the twelve year period as being a result of any one process, there is a strong community belief that these successes made a valuable contribution to reducing the incidence of suicide. The Building Bridges project then was designed to provide the opportunity for Aboriginal people across communities to share their stories and experience and to support each other in developing an understanding of processes and approaches that can be effective in their own communities.

Men's Groups and Family Well Being Program Role in Community Empowerment and Suicide Prevention

There are Men's Groups in Indigenous communities through Australia, with the 37 in New South Wales (personal communication with Michael Woods, 2009) and 20-25 in Queensland (personal communication Lyndon Reilly, 2008). There is considerable diversity in the composition, priorities and operation of the Men's Groups, but they share a common purpose to empower men, support and provide role models for young Indigenous men, and to address the issues identified as being relevant to poor health, diminished well being and social dissatisfaction in Indigenous communities.

Men's Groups provide men with a culturally safe space for healing, personal development and to encourage and empower them to reassess, review and reestablish their roles in the family and in their community. Owned and managed by men themselves, Men's Groups may also elect to take on a community welfare role, offering family support, counselling and support for men in prison and to address broad community issues.

The Family Well Being Program (FWB) was established by the Aboriginal Development, Employment and Training Branch in Adelaide, South Australia. The aim of the program is to enable participants to gain greater understanding of themselves and their situation and to reflect, analyse and solve problems. In the process participants also become more aware of their leadership potential and are able to take greater control and responsibility in their lives. Its multiple impacts and effectiveness in empowering Indigenous people has been extensively documented.

FWB is a personal development course conducted in five stages, with each stage delivered as a thirty hour stand alone workshop, or as a series of weekly meetings. Each workshop is delivered by two FWB facilitators. Completion of all five stages of the program provides participants with a nationally accredited qualification in counselling. With a focus on communication, problem solving, conflict resolution and complementary life skills, this program has the valuable feature of being developed by Indigenous people and is grounded in their personal experiences, needs and solutions.

Knowledge Sharing: Collate and communicate information to community in an empowering way

Knowledge sharing between and amongst the four communities involved in this project was seen as a critical component of the empowering process. Given the experience of Yarrabah Men's Group and community leaders, it was expected that Yarrabah would take a lead role the sharing process. By providing structured support and a commitment to the process, the knowledge sharing was intended to offer a space for relationship building as well as sharing skills and experience in establishing and maintaining men's groups. Collectively these strategies were intended to assist the project communities in creating a culturally safe environment to define and commit to a pathway for individual, group and community change.

Importantly, knowledge sharing was a critical process for the project teams themselves. Project officers working in communities and project leaders from the universities also required and benefited from knowledge sharing sessions. Sharing the experiences, challenges and issues emerging in each of the communities provided a valuable component of project development and implementation.

Knowledge sharing within the communities was also an implicit component of the Participatory Action Research (PAR) process of the Building Bridges Project. In practical terms, PAR involves members of the group or community generating relevant knowledge to address the issues of priority concern to them. With the assistance of project leader facilitation, participants are supported in generating a systemic framework for understanding local situations and drawing out possible courses of action. Again, this provides a valuable means of knowledge sharing both within the local community and between communities. Importantly, PAR employs reflective processes to enable participants to recognise successes and achievements and to provide a vehicle for promoting and supporting positive change. As with other elements of Building Bridges, PAR offers a complementary tool for empowerment.

However, project partners were cognisant of the fact that a dangerous trap can occur when people seek to commodify interventions and communities. The part of the experience that is important is finding solutions and, therefore, empowering strategies, such as Building Bridges, are about process. The horizontal information sharing creates links for learning and for exchanging information with other communities that have been able to move forward. Nonetheless project partners recognise that there are differences between communities, particularly DOGIT communities and the Indigenous communities in urban areas. It is essential therefore to be cautious about extrapolating from one community to another.

Innovative IT/multi media approaches

Health Information Technologies network (HITnet) develops and installs creative media solutions to reduce Indigenous health inequalities. Working to improve individual and community agency and control, HITnet is concerned with improving health literacy through autonomous learning, digital inclusion by providing democratic technology access, participation in creative expression, and enhancing social inclusion and connectedness.

A significant aspect of the HITnet development process is the participation of community members not only in content, but also in performance and production. The highly inclusive processes adopted by HITnet means that community members are involved from conceptualisation and planning through participation and filming. In the broadest sense, HITnet is interactive from conceptualisation to finalisation. In this way, HITnet needs to be appreciated as being more than the production of multi-media materials by relevant experts, but rather a community partnership leaving within the community skills and knowledge beyond the final product of an interactive module.

Given the highly sensitive nature of suicide and its meaning for individuals, families, groups and the community as whole, this aspect of the project required special skills in respect of such impacts. Equally there was a need to ensure that care was taken to avoid presenting messages that were potentially able to be misinterpreted or offensive.

On the basis of these complexities, particularly in a cross cultural context, the collaborative approach between community members, HITnet team, content advisors and the production company was critical. Importantly HITnet works within an empowerment framework, characteristic of the project as a whole, with the focus on solutions.



The HITnet team filming on location at Yarrabah

Linkages with Suicide Prevention

The processes employed in the Building Bridges Project contribute to suicide prevention in terms of both prevention and recovery.

The concept of personal resilience refers to an individual's capacity to adapt and respond positively to stressful situations. Building resilience takes as its reference point the dynamics by which an individual moves between situational hope and despair, individual resilience and vulnerability, and the potential to take one's own life. The premise for introducing the FWB program within Building Bridges was that the conflict resolution and other life skills, process of critical reflection, improved communication with loved ones, increased confidence and sense of hope are connected to those dimensions of personal control or resilience. Through FWB participants are better able to reduce the risk of suicide by engaging with friends and family for support, use coping strategies and applying problem solving strategies effectively to work through difficulties.

Men's groups play a dual role of promoting social cohesion and working to shift social norms in Aboriginal communities. The north Queensland groups offered a justification for men interested in change to gather support, take greater control, and build respect and responsibility. Through values statements (described by Yarrabah's Men's Group as "*Do's and Don'ts*"), men's groups have assisted community men to consider what it means for them to take their "rightful place" and to change their behaviour accordingly. The presence of an established men's support group, with whom trust has been established and whose values have been made explicit improves access for those in need of help. It also consolidates their sense of social connectedness.

As noted in the *LIFE Research and Evidence in Suicide Prevention* the pathways that lead to suicide involve background factors which span a range of variables, from the individual to macro-social factors and include exposure to trauma, family, socio-economic and cultural factors. These background factors contribute to suicidal behaviours by influencing individual susceptibility to mental health problems, substance abuse, anxiety disorders and antisocial and offending behaviours. In the short term it may be difficult for programs like men's groups and FWB to have an impact on the many serious stresses present within an environment of disadvantage, those 'macro-social factors'. Nonetheless, the Building Bridges project demonstrates that the ways in which men's groups and FWB was integrated into community development practice positively affected the vulnerabilities and resourcefulness that individuals and the community are able to bring to crisis and conflict situations.

Basic Profile of Participating Communities

The individuality of each community emerged through the planning and implementing of the Building Bridges Project. The following thumbnail sketches of each community provide a superficial picture of these different environments.

Yarrabah

Yarrabah is located on the coast approximately 50 kilometers south of Cairns and separated by the Yarrabah Range. The Gunggandji and Yidingi people lived in the land around Yarrabah prior to European settlement. The community is now made up of 80% stolen generation people from about 40 different tribes. With a population of 3,000 Yarrabah has a number of local services including a local pre-school, primary and part secondary school. The Gurriny Yealamucka Health Service serves the people of Yarrabah offering men's, women's and children's health programs, health promotion, youth crime prevention and suicide prevention. The JCU, UQ and HITnet teams had established a prior relationship with the Yarrabah community who were supportive of the project and the community's intended role.

Hope Vale

Hope Vale is located approximately 47 kilometers north of Cooktown. It was the first community to be granted DOGIT status in 1986. The traditional owners are the Guugu Yimirrthur people. The community of approximately 1200 people is home to a mix of traditional owners and people moved into the area including the Yidhuwarra (traditional owners of Barrow Point, Flinders Island, and the South Annan), the Bagaarmugu, Muunthiwarra, Juunjuwaara and Muli peoples plus the Gan Gaarr and Bulgoon peoples to the south, the Kings Plain's Thukuun Warra and the Sunset Yulanji peoples in the Maytown area.

Prior to this project, men in the Hope Vale community met in response to local political issues and local leaders took on an advocacy role in relation to government initiatives Queensland Health workers and the local clinic supported the establishment of a Men's Group in 2007. Although the impact of the welfare reform agenda dissipated the group's focus, prior to this it had been proactive in relation to men's health issues and broader social determinants of well being.

Hope Vale community was invited to participate in the Building Bridges Project based on prior collaboration with JCU and UQ including delivery of the FWB for adults and in adapted format for children. The program was delivered prior to this project in April 2001-August 2003, and again in 2006, primarily by the Apunipima Cape York Health Service. The lack of a local health service or appropriate local organisation had compromised the ability to employ a local worker. However, JCU reported that there was strong community support for the program.

Kowanyama

Kowanyama is located on the Mitchell River, approximately 300 kilometers south of Weipa. The community has a population approximately 1400, with the most of the community having traditional ties with the area. A Men's Group was initiated by a member of the Royal Flying Doctor Service in 2003, with a consistent program of activities until 2008, when the RFDS officer was promoted. The lack of funding for a local coordinator prior to this project necessitated the 'fly in-fly out' service. Involvement of the Kowanyama community in the Building Bridges Project offered a number of benefits. Although there was a cluster of suicides in the community in 2000, the community also has a high level of capacity associated with stable governance, a historically functional justice group, and functional relationships with a real economy through the pastoral industry. Kowanyama had no previous engagement with the JCU or UQ teams or the Family Well Being Program.

Dalby

Dalby is regional town located 210 kilometers north west of Brisbane and 85 kilometers west of Toowoomba. With a population of approximately 10,500, Dalby has an Aboriginal population of approximately 1000 in the town and immediate environs. The Aboriginal population includes the Western Wakka Wakka, Barunggam, Mandandanji and Bigambul peoples. However, the Dalby community is substantially different from the Far North Queensland communities. Within Dalby there are only a small number of traditional owners who reside in the community and Aboriginal people are in the minority as compared to the Far North Queensland communities in which the Aboriginal people are the majority. Aboriginal people coming to Dalby come from other communities within the region and there is no overarching connectedness across family linkages. The inclusion of Dalby within the Building Bridges Project provided a valuable opportunity to work with a substantially different community and to be able to draw learnings as a result of such differences. The Centre for Rural and Remote Area Health at the University of Southern Queensland had an established relationship with the Goondir Health Service. This relationship offered a basis for building forward with Aboriginal people living in the area. However, the lack of any Men's Group or any prior exposure to the Family Well Being Program meant that there was meager precedence from which to build.

Lotus Glen Correctional Centre

Lotus Glen Correctional Centre is located 25 kilometers south of Mareeba and approximately one hour drive from Cairns. The Centre accommodates high and low security prisoners from Cairns and its hinterland, isolated communities and Torres Strait Islands. Its prisoner population is generally comprised of between 60 to 65 per cent Aboriginal and Torres Strait Islander people.

Summary of Community Environments

As can be seen from these short profiles, the communities involved in the Building Bridges Project each had their own strengths, challenges and differences. It is these differences which provided the opportunity to extend the empowerment processes associated with this project and through Participatory Action Research, identify influences and impacts across quite different situations.

“

Men's groups play a dual role of promoting social cohesion and working to shift social norms in Aboriginal communities.

”

3 Implementation of the Building Bridges Program

Project Structure

This section describes the essential structure adopted for implementation of the various elements of the Project including Men's Groups, Family Well Being Program and Knowledge Sharing. In describing this structure, it is relevant to identify the various participants in a manner which differentiates the roles that were played and the inter-action between the various participants. For the purposes of this discussion, participants from each of the universities involved are identified as project leaders. This is differentiated from the project officers who were employed within each community and worked at the coal face of the community.

Consistent with the framework of empowerment processes, the Building Bridges Project focused on development of individual capacity which in turn links strongly with community and group empowerment. Accordingly, a community project officer was established within each community. The role of the local project worker was to build and support the local men's groups, to deliver the Family Well Being program, to address issues related to prevention and self harm and the underlying protective and risk factors for suicide. Acting as facilitators, the project officers worked with participants to refocus their stories from a framework of negativity and blame towards one which had vision, hope and solutions. The extent to which the solution focused approach was visible in changes to individuals, groups and the community was seen as an indicator of the effectiveness of this approach.

The project officer positions varied over the course of the program. Changes were in some part a consequence of the ability to recruit and retain individuals within the role and to some extent a reflection of the program capacity. In Yarrabah the position was full time, although circumstances led to a number of individuals being involved in this position. In Kowanyama and Hope Vale the project officer position was a half time appointment. Within Dalby two positions were created which enabled the project to employ project workers with an appropriate mix of skills and experience. The Project Coordinator, a full time position and a male project worker, a part time position, worked collaboratively with both Aboriginal people and service providers in the Dalby community.

Each of the project officers were supported by a project leader from the relevant university team, being USQ for the Dalby project and JCU for the Yarrabah, Kowanyama and Hope Vale projects. The role of the project leaders varied over time and circumstance including providing a variety of supports for community based project officers. This included working with project officers to establish knowledge sharing teams which were inclusive of members from the Men's Groups, FWB facilitators and other key community stakeholders such as appropriate to each community. Project leaders were also responsible for:

- Consulting with the four communities to secure support from relevant agencies and key contacts, identification of potential auspice organisations and recruitment of project staff;
- Planning and logistical arrangements for knowledge sharing events ;
- Coordinating the development of knowledge transfer toolkit which included multiple resources;
- Collection of data through structured PAR support questions with documentation of processes; and
- Provision of quarterly and final reporting.

Project leaders from JCU also took a lead role in the delivery of training strategies. Although suicide prevention training was provided in Yarrabah and Mental Health First Aid training in Hope Vale was outsourced, JCU was responsible for delivery of the Family Well Being Program in Cairns, Dalby, Yarrabah and Hope Vale. By providing the program to project officers they were able to facilitate the FWB program with individuals and groups in the communities. In total a core group of FWB train the trainer facilitators completed all stages whilst some community people completed components but not all stages of the program. In addition, JCU and UQ project leaders provided project officers with training in PAR processes.

In structural terms, the management of the project was achieved in a collaborative approach based upon a committee structure. Three committees were formed, the composition varying in accordance with the committee's function. The evaluation committee, for example, included a representative from AISRAP, the organisation responsible for the evaluation. At the same time, the implementation group also included project officers working within the communities. Finally the strategic planning group was limited to JCU, USQ, UQ and Queensland Health as the primary leaders of the project.¹

“ Consistent with the framework of empowerment processes, the Building Bridges Project focused on development of individual capacity which in turn links strongly with community and group empowerment. ”

1. The JCU team note in their reporting that due to the lack of funding for FWB training for project officers and the need to provide support over the four sites, additional resources were required. Accordingly the UQ staff supported two of the community project officers and additional funding was sourced from Queensland Health.

**Objective 1:
Support leadership and collaboration among local men
in suicide prevention**

The development and support of men’s groups was expected to be a primary vehicle by which the Building Bridges initiative would support leadership and collaboration within and between men in the different communities. However, it is essential to acknowledge that the differences between communities and the extent to which there was or had been previous experience with men’s groups impacted on the outcomes. Equally these differences provided an important learning with respect to the way in which such groups and processes operate in quite different environments. This translated into a practical and defining issue for the Dalby initiative which is discussed in greater detail below.

Men’s Groups - Far North Queensland Communities

There was considerable diversity in the characteristics and implementation of the men’s groups in the different community settings. These differences are summarized in Table 1 below.

Table 1: Characteristics of Men’s Groups by Community

	Yarrabah	Hope Vale	Kowanyama
History	Yaba Bimbi started February 2007; Partnership with universities commenced 2001; 2 workers recurrently employed.	Men’s Health Group coordinated through Clinic since 2007. Ad hoc advocacy group in response to community issues.	Men’s Group coordinated by RFDS since 2003 (RFDS no longer involved).
Meetings / Week	Two meetings per week	Intermittent	Three meetings per week.
Focus of Meetings	Community men’s group Catch up meeting for men mandated from court.	Issue based advocacy.	<ul style="list-style-type: none"> • Community men’s group. • Domestic violence group for men mandated from Court. • Spiritual group with Church.
Age of Participants	25-44	45-54	25-44
Priority of Men’s Groups during Project	<ul style="list-style-type: none"> • Personal development and leadership training. • Lack of local employment and men’s activities such as the establishment of a family area at the local pool. 	<ul style="list-style-type: none"> • Welfare Reform process, the role of the Families Responsibilities Commission. • School truancy and student behaviour management. • Alcohol abuse and anger. • Suicide prevention for young people, sharing traditional knowledge, restoration of the church and involvement in the choir. 	<ul style="list-style-type: none"> • Delivering a domestic violence program to men mandated by the Court. • Addressing suicide attempts. • Development of a men’s shed. • Incorporation of the group. • Developing a youth group and spiritual group. • Promoting men’s issues through BRACCS radio and the production of a DVD.

As seen in the comparisons above, the men’s groups while differing in priorities and dynamic, shared a common thread of issue identification and a solution focus.

Appreciation of the Dalby Experience

Because the Aboriginal people living in and adjacent to Dalby had no previous experience with men's groups or other empowerment oriented initiatives the work of the Dalby project had a different starting point. Further, the community differs from the Far North Queensland communities in quite profound ways, with no substantive connectedness across the diverse Aboriginal population. As a consequence, there was a need for the project officers to establish a foundation from the beginning rather than being able to build on the precedence which existed in other communities. To establish this foundation, the Project Coordinator needed to focus the initial stages of the project on building relationships within the local Aboriginal community and identifying opportunities to link with established local services and organisations as well as local events and meetings. Despite these efforts and the distribution of information about the project, engagement of local Indigenous men in participating in the project was extremely challenging, as described below.

In considering why engagement was not being achieved, the USQ project team concluded that it was the fundamental differences between Dalby and the Far North Queensland communities which made implementation processes not able to be applied as a fixed template. Issues impacting on the Dalby community generally were found to relate to local politics which is largely family based, the limited number of traditional owners living in the community with many different families from other communities within the region, a culturally diverse community in which Aboriginal people are a minority and a disconnection amongst Aboriginal people between those employed and those who are not. These challenges were captured by Dalby people in talking about the community and project. Comments included such thoughts as:

"I think in Dalby we don't have a close knit community It is torn apart by racism, divisions, no sense of ATSI people together like St George, they have longer established tradition and the elders are committed, their community impressed me by their solidity and connectedness and sense of we are in this together we don't have that in Dalby hoping that guys in the community be used to bring about change and greater solidarity in Dalby community... we need a figure here in the town, a murri person who can bring the various groups together we are in this together lets pull together rather than separate groups"

"The differences that we started to know about and as the project progressed that the Dalby community were different and we could not understand why then we realised that in the Dalby community the Aboriginal people are classed and seen as the minority group whereas in the communities in the North such as Yarrabah, Kowanyama and Hopevale the Aboriginal community up there are seen and classed as the majority of people and the same applies down this way with Oakey and St George hence, St George have been closely knitted along time now unlike Dalby"

The cumulative impact of these factors has been the need for considerably more time and effort to develop the relationships which were pre-existing in the other communities.

Importantly, although the Dalby project did not see a progression to a men's group in the shape which approximated that found in the Far North Queensland communities, it would be wrong to conclude that engagement was not achieved; rather it was achieved through alternative routes. This has been an important learning in terms of recognising that it is the principles which underpin processes for engagement and empowerment that must be well understood rather than a specific sequence or format. It is through this fundamental understanding that each community or group can be supported to pursue approaches that meet the needs and character of the local environment.

Objective 2: Harness the capacity of the Family Well Being (FWB) Program to develop life promotion skills in the broader community.

The Family Well Being Program needs to be understood in terms of its ability to facilitate change through empowerment of individuals and the ability of individuals then to transfer the skills and knowledge from the program to the wider community. The process of personal empowerment through confidence and skills is achieved through an incremental approach. Stage One enables participants to identify and reflect on their needs, strengths and weaknesses. Stage Two focuses on 'using inner qualities to make positive change'. Stage Three enables participants to understand and appreciate the healing process. Understanding of relationships was a strong focus of the Fourth Stage. During the Fifth Stage participants were able to apply personal skills in facilitation. Throughout the training process the sharing of experience, stories and quite often painful topics is able to occur in a secure and trusting environment. From this process participants were able to develop the confidence and skills specific to their communities. Successful completion of the five stages provided project officers with the qualification required to facilitate FWB. They were also able to integrate FWB principles and methods into their work in other ways, for example when providing individual counselling and support.

Participation in FWB Training

JCU project leaders delivered FWB training over nine week long workshops over a twelve month period from June 2007 to June 2008. Participants included project officers, community members and other service providers. Participation rates across the stages varied to some extent with some individuals being involved in some but not all stages. Of those participants there was a mix of both men and women and of Indigenous and non Indigenous people. For example there were some 16 participants in the stage one training in Dalby of which most were professionals involved in service delivery to Indigenous clients. Table 2 (following) provides a profile of NSPS project team participation and completion rates for FWB training.



Family Well Being (FWB) Program trainees

Table 2: NSPS Project Team Participation Rates

FWB Stage	Stage 1	Stage 2	Stage 3	Stage 4	Stage 5
Completion	33	22	14	15	16
Males	7	7	5	4	5
Females	20	10	9	11	11
Unidentified	6	5	0	0	0
Indigenous	26	22	10	12	13
Non Indigenous	1		4	3	3

Training Feedback

To appreciate the impact of FWB on individual participants and the wider community it is essential to capture the reflections of those involved.

Participants were able to provide feedback at the end of each stage of the FWB training. A number of common themes emerged from this feedback. The ability to share personal experiences and stories in a safe setting was highly valued throughout the training program and for some acted as a catalyst for change. At the completion of Stage One, this was articulated by one participant in terms of:

“The group agreement set a really good ground for people to work from, to be confident that they could speak from positions that they had never spoken before and they believed they would respected for what they shared”.

A second common theme emerging from feedback was that of enriched understanding of both themselves and their own ability to make positive change as a consequence of such understanding and greater self esteem and confidence. This was expressed by one participant who reflected that:

“The course helped me to become more aware of what is happening around me, why it’s happening and how I could make it better for people. It also helped me to understand things that had happened in my own life and way to create positive change.”

A third theme which emerged from participant feedback was the way in which the process itself and the ability to deal with painful topics and uncomfortable topics, while empowered to decide what and what not to share, had been healing and empowering. This was succinctly reflected by one participant as FWB *“taught me to look at myself and that we can let go of the past and move forward”.*

Integration FWB into Community and Practice

An important outcome from the FWB training was the ability for participants to bring back the knowledge, skills and experience to their own communities. This ultimately occurred within quite different contexts as relevant to the individual communities. Two of the project officers who had completed the training had facilitated training in their own communities with both men’s group members and health service staff. Some participants were able to apply their learning and skills in working with individuals.

Within Dalby, the project officer experienced ongoing challenges not only with engagement, but also with retention of individuals within the project. For example, although 3 people from the original 16 continued training to build up a team of facilitators, ultimately only one person remained available in the community. At the same time, the difficulties of engagement, as experienced with men’s groups, continued to be a challenge. Recognising the need to rethink how to best move forward, the project officer refocused her approach by developing a robust relationship with the Stolen Generation Counselling Service and Queensland Government child safety workers. Out of this relationship, the project officer was able to make a difference by employing FWB principles and processes in working on a one to one basis with families in need. This ultimately proved to be a highly valued and effective approach to integration of FWB in an environment quite different from Far North Queensland.

Similarly, FWB principles were employed by project officers in the Far North Queensland communities both through application in their day to day ways of relating to and working with people, both in groups and with individuals. Further, people were then able to draw from the experience and apply it within their own difficult situations. Reducing the risk of violence, resolving self harming behaviours, and resolving conflict were all found to be direct benefits emerging from the application of FWB in the community.

Importantly reflections by the project officers about the situations in which they had applied FWB in their daily lives demonstrated not only their own confidence in drawing on their own leadership and strengths, but equally their ability to translate and transmit this same learning to others in the community. This was articulated by the Yarrabah project officer who observed:

“Seeing the men in Men’s Group using the steps in FWB as alternatives to avoid problem situation which provided positive outcome.”

Objective 5: Knowledge Sharing

Knowledge sharing across the communities was a fundamental component of the project design. Although the initial intent was that Hope Vale, Kowanyama and Dalby communities would have the opportunity to learn from the Yarrabah experience, it became readily evident that each of the communities had relevant and useful knowledge and experience to share with the others. *The central role of culture underpinned all knowledge sharing experiences.*

The knowledge sharing experiences were hosted by each of the communities during the project's life, with each community having an opportunity to share both their experiences and unique aspects of their communities. Visiting culturally significant sites, meeting with elders and traditional owners, speaking with local services and sharing cultural experiences all formed an implicit facet of the knowledge sharing experience.

Importantly, as the work of each of the project officers, the men's groups and communities progressed there was increasing capacity for shared learning, inspiration and the identification of opportunities to establish stronger links across communities to share the learning. This was well reflected by the decision to invite people from other communities to participate in the final two knowledge sharing sessions in 2009.

Sharing the Yarrabah Experience - Establishing a Vision, Values and Purpose

Over the seven year period in which the Yaba Bimbi's Men's Group worked in partnership with JCU and UQ a number of activities and processes were adopted which were designed to promote empowerment and enhance the group's capacity. The establishment of a vision statement, articulating values and a strategic plan was a powerful process for the group. From this framework the group was able to secure recurrent funding for two men's group worker positions and a range of locally appropriate projects. The knowledge sharing process created a means by which this experience was able to be shared with other communities.

Yarrabah leaders' presentation, which was included in the tool kit, and support to Kowanyama and Hope Vale in developing their own draft vision statements, action plans and value statements (Do's and Don'ts) were all grounded in the values and principles underpinning the FWB program. As throughout the Building Bridges Project, each element came together in a holistic way, reinforcing and building capacity for positive action. The integral relationship between the capacity building processes of the men's groups, the understandings and skills of the FWB program and the knowledge sharing provided strong evidence of the way in which the project was able to empower the communities to identify and take positive action to support protective factors and address risk factors for suicide in their own communities. This is illustrated by the draft vision statement of the Kowanyama men's group as well as by the range of issues that communities brought to the knowledge sharing forums.

In Kowanyama the draft vision statement was *"To enhance our role as leader/partner in the family and community context by providing a safe place to become physically, spiritually, emotionally and socially well in ways that are culturally appropriate."*

Cultural Knowledge: Connecting with Family, Clan and Places

The importance of knowledge sharing for Aboriginal peoples was highlighted early in the project in a meeting of the Steering Committee in January 2007. Project officer Father Les Baird articulated the importance of reconnection with family and relationships which knowledge sharing engenders. The importance of knowledge sharing as a vehicle for strengthening Aboriginal culture also therefore had a dimension of reconnection with place and community. These dual aspects of the knowledge sharing process were articulated at the June 2008 knowledge sharing by a Kowanyama man who noted: *"Get all men to talk to each other and boys to operate as one to keep the culture strong (dance and making artifacts)"*.

At the next meeting in November 2008 similar thoughts were shared by a participant who observed that: *"There is a need to connect kids back to places, It has been really important for me to be able to get back up to Kowanyama and Coen where my people come from. When I went to Dalby I was upset by how people didn't know where they had come from"*.

Supporting Young Men to Connect with Culture, Community and Positive Modeling

One issue of common concern across the communities was a desire by men to better engage with young men whether through men's groups or youth projects. Although the actions taken by men differed across the communities, the cross community meetings provided a valuable space for sharing their different approaches.

In Hope Vale there was a strong focus on cultural activities and connecting young people to their culture. The men's group actively pursued a wide range of activities. Men worked with Queensland Health in addressing drug and alcohol issues among young people, with the schools in teaching traditional cultural activities, and with the Life Promotion Officer in developing activities involved in the youth suicide prevention program. The Men's Group worker also engaged with school staff to discuss the Family responsibilities Commission mandate about children's attendance and barriers that might exist to their attending. This experience was presented by the project officer at the knowledge sharing sessions.

A Kowanyama participant in the June 2008 knowledge sharing meeting captured the importance of such horizontal information sharing saying,

"The most significant part of this presentation was that I learnt a lot and see a lot of good opportunities that us men of Kowanyama can learn, show respect and teach our younger kids to look after ourselves and better ourselves for the future."

Similarly, the Yarrabah team, reflecting on the presentation, noted the mutual benefits for the children and the school, and importantly the way in which the Hope Vale Men's Group provided a positive role model for young men in their community.

Documenting Community Knowledge Sharing Events

In a practical sense it is difficult to capture in any quantitative manner the dynamic or learning dimensions of the knowledge sharing events. Similarly, it does not meaningfully reflect the way in which such events translated into subsequent informal sharing which occurred beyond such events or the ways in which the shared learnings were able to contribute to the empowerment of individuals and communities.

It is relevant nonetheless to provide a summary of the nine formal knowledge sharing events which were hosted during the project and in particular the quite diverse ways in which knowledge, culture and learning was shared. However, to effectively appreciate the scope and nature of such events, a description of one such event is provided in detail.

Table 3 – Overview of Knowledge Sharing Events

Date	Host Community	Participants
Oct 2007	Yarrabah	Yarrabah and Hope Vale
Nov 2007	Yarrabah	Yarrabah and Kowanyama
March 2008	Dalby ¹	Dalby and Hope Vale
June 2008	Kowanyama	Yarrabah, Hope Vale, Kowanyama
June 2008	Hope Vale ²	Yarrabah, Hope Vale, Kowanyama
Aug 2008	Dalby ³	Yarrabah, Hope Vale, Kowanyama, Dalby
Nov 2008	Yarrabah ⁴	Yarrabah, Hope Vale, Kowanyama, Dalby
March 2009	Dalby ⁵	Yarrabah, Hope Vale, Kowanyama, Dalby
May 2009	Cairns ⁶	Yarrabah, Hope Vale, Kowanyama, Dalby 96 men from north and south Queensland

The notes below reflect the quite different types of experiences that the knowledge sharing events offered:

- 1 People met with health organisations and inter-agency network, participated in a sporting workshop, youth motivational speaker and Lutheran College
- 2 People met with local organisations and development a draft vision statement, visit to cultural site and testimonials
- 3 Met with local Aboriginal organisation and elderly men's group
- 4 Visited Menmuny Museum, local organisation, visit to Green Island, met traditional owners
- 5 100 men from Cunnamulla, Cherbourg, Mackay, Dalby, Warwick, presentations on FWB from Yarrabah and Hope Vale
- 6 Knowledge sharing sessions from each of the project sites, FWB topics, a consultation session to inform the first National Men's Health Policy, an information session from Dr Mark Wenitong about the risk factors for Indigenous men's health and how to protect our health, and from Peter Sargeant about the Men's Shed initiative and how it can help men's groups.

Case Study 1: A knowledge sharing event

The Kowanyama knowledge sharing meeting took place from the 9 to 13 June 2008. Four men drove from Yarrabah to Cairns to catch a flight to Kowanyama on Monday 9 June. Three men drove from Hope Vale, a 9 hour, 4-wheel drive journey across Cape York. University and RDFS support people hitched a ride on the RFDS flight on Wednesday and arrived for the key meeting. On Tuesday, the men recovered from their long journeys at the local guesthouse and were welcomed by Kowanyama men's group members and local services. They were driven around the community and surrounding wetland landscape.

The Wednesday men's group meeting provided the main focus for the event. The visiting men, 22 local men and a group of students from the local school were welcomed by the men's group Chairman and the project officer. They described the Kowanyama Men's group as providing weekly sessions for up to 50 men, having a committee and working towards incorporation to enable them to independently apply for funding. They also described a partnership with Men's Shed Australia and the Kowanyama Aboriginal Shire Council to convert the community hall into a Men's Shed (men's place). Men from Hope Vale and Yarrabah reflected that this was an exciting project and they would make steps to also set up a Men's Shed in their communities when they got home. Hope Vale men then responded by sharing their men's group activities and issues including involvement in the schools in response to the new welfare reform process, counseling men during hunting trips and their views about incorporation. Yarrabah men shared their personal testimonials and views including the importance of the father and son relationship, and Yarrabah's story of community action in response to suicide.

Then the RFDS officer and Yarrabah project officer facilitated a brainstorming session to develop a Kowanyama men's group vision statement, objectives and activities. A vision statement, four draft objectives and a set of values by which a Kowanyama man could enhance his role as leader in the family and community were identified from the brainstorming process. Still in draft form, these were:

Vision:

To enhance our role as leader/partner in the family and community context by providing a safe place to become physically, spiritually, emotionally and socially well in ways that are culturally appropriate.

Objectives:

To provide programs for personal and leadership development in the family and community context

- *Establish a safe place for men to take time and refocus their lives*
- *Establish socio-emotional and spiritual well being healing programs*
- *Aboriginal tradition and culture.*

Kowanyama Do's and Don'ts

DO's

- Look after your family
- Drink sensibly
- Encourage good behaviour
- Respect one another
- Show love to family and others
- Help others who need help
- Make yourself available to help
- Encourage kids and build them up
- Obey rules
- Take responsibility for kids

DON'Ts

- Don't argue with your missus
- Don't put one another down
- Don't get drunk
- Don't fight, try and talk about your issues
- Don't disobey the law
- Don't neglect your kids
- Don't put your kids down

Following the knowledge sharing meeting, the Kowanyama project officer reflected:

“Kowanyama Community just had concluded a most inspiring workshop, the first of its kind from the Yarrabah and Hope Vale men’s group reps which proved to be a very helpful and productive workshop. Through their sessions of yarnning and knowledge sharing, Kowanyama men’s group was able to state their “Mission Statement” and also to work through “Objectives and Activities” that will be stepping stones for our men of Kowanyama to move forward and to address issues in the Physical, Mental, Social and Spiritual areas of life. The setting up of the “Do’s & Don’ts” as a code of behaviour was new to our men! With the implementation of the “Family Well Being” program this will help point the Community in the right direction to deal with and address issues on Personal, Family and Community levels in a holistic and balanced way”.

The Yarrabah facilitator reflected:

“I am very pleased with the Knowledge Sharing workshop at Kowanyama. The project officer for Kowanyama worked tirelessly to ensure that men were available to attend the workshop. The Kowanyama Aboriginal Council has given (P.O.) all the support he needs to help men of Kowanyama. I am thankful for the groundwork done by (RFDS officer) in talking to men about their issues and recording this information. I am told that there are 50 men who attend men’s group and this is great to know, however approximately 30 men attended the workshop at various time and it was excellent to have the support of the chairman of the Men’s group and is also active on various other organizations including being a councilor on the Shire Council.

The outcome has been fantastic as each men’s group from the three communities shared and gained ideas from each other to improve their men’s group, for example the idea of Men’s Shed is being followed up by Hope Vale and Yarrabah will now come on board to establish partnership with Men’s Shed. ...Also new relationships have been forged and the establishment of new networks with the three communities. Overall there were much learning and exchange of knowledge from three communities. A strong network has been established and we are looking forward to visits to Hope Vale, Dalby and Yarrabah”.

Kowanyama participants reflected that the most significant part of the presentation was:

- *that I learnt a lot and see a lot of good opportunities that us men of Kowanyama can learn, show respect and teach our younger kids to look after ourselves and better ourselves for the future.*
- *That so many people had the opportunity to get up and speak about their experience and perspectives. That everyone listened to each other. That the school kids came and were present with men talking business.*
- *Sharing positive stories about personal journey, supporting each other meeting other men and being honest.*
- *Networking with other communities and seeing more youth coming along.*
- *Us coming together as one and sharing the stories.*
- *The men’s group program going ahead and getting the recognition it deserves.*

Knowledge Sharing Across Project Officers

Creating an opportunity for project officers to share information and knowledge was also an important dimension to the implementation of the Project. To facilitate this process, quarterly face to face meetings were convened bringing together community based project officers and other key community stakeholders with project leaders from James Cook University and University of Queensland. Working collaboratively, the group addressed both administrative and content related issues. This included:

- Agreeing on templates for reporting;
- Information about suicide risk and protective factors;
- Delivery of community specific programs;
- Organising community visits; and
- Developing a master action plan for the project through integration of community level action plans.

In addition to the quarterly meetings, regular contact including teleconferences with the project officers provided a means by which information could be shared on a collaborative basis. For example, the project officer in Dalby initiated a number of the processes which were subsequently adopted by the other communities. A number of promotional flyers were developed and distributed across the communities for recruiting people into FWB program and men’s group activities. Project workers in other communities were encouraged to use these to foster consistency across the project particularly within the Aboriginal communities.

The Project Officer from Dalby highlighted the importance of knowledge sharing between project officers in saying the following:

“Working, living and breathing the project since 2006 we have come across a lot of brick walls, difficulties and challenges but nevertheless, we have manage to keep going through the processes time and time again and making these specific to our particular region and community. Most importantly we as the workers on the ground have been able to support each other by sharing our personal views and opinions, knowledge and feelings and in a safe environment and network. This process has been valuable because it has allowed us to reflect on a regular basis but to also create strategies and develop new ones as they were required.”

Conclusion

Although communities had different priorities, men acknowledged their common issues of advocating for empowerment of Aboriginal men as leaders within their communities for culture and language, strengthening identity, addressing issues related to alcohol and drug abuse, unemployment as a cause of low self esteem, boredom and lack of money and the need for education and training. At the November 2008 knowledge sharing event, men agreed to develop an advocacy group with a representative from each community and a shared vision. They also agreed that two more communities should be brought into the knowledge sharing process. The view summed up by one Hope Vale person in saying,

“I think we have all recognised that getting together like this is important and that we want to expand the program to include more communities. We need to be committed to it, and even if there was no funding to go ahead with it anyway. We need to work out that vision. This is important for us all.”

The two final regional knowledge sharing forums deserve special mention. Project officers and men's group leaders in both southern and northern Queensland decided that it was important to invite men's groups from across their regions to share knowledge including the empowerment model and family well being. To this end, in addition to the project sites, the Dalby Forum (March 2009) attracted approximately 100 men from Cunnamulla, Cherbourg, Mackay, Dalby and Warwick. The Cairns Forum (May, 2009) attracted 87 men from locations including Papua New Guinea, Thursday Island, Northern Peninsula area of Cape York, Darwin, Cooktown, Cairns, Wujal Wujal, Mossman, Mt Isa, Atherton, Innisfail, Townsville, Cherbourg, Stradbroke Island and Brisbane in addition to the project sites.

In a pre-evaluation questionnaire of the Cairns forum, men identified four main expectations from the event. These were to:

- obtain information about men's groups, the Family Wellbeing Program, men's health, men's issues and culture
- network and share (get and give) ideas about what is and isn't working in other communities;
- develop or adapt Indigenous men's projects; and
- put Indigenous men's issues on government agendas and advocate for resources. Participants said that they expected to use the skills and knowledge gained within their families, work and communities.

Post-forum feedback indicated that the four expectations were all met including participants providing policy recommendations towards the National Men's Health Policy. Comments included:

“Got to build on my networks and met some really great people (some of them I see as movers and shakers). The issues raised were more than what I anticipated and I look forward to more of this kind of gathering.”

“It was good to see all different age groups at the forum”.

“I got to find out more info about men's groups in other communities; I got to network with them, find out some programs they are running in their communities. Also got to catch up with old friends. All my expectations were met, plus more.”

“Information presented was first class. Some good ideas and frameworks to take back to community.” “To me, the forum met beyond all my expectations as we on the Tableland are just starting out, and I am surprised to find the men's group are all over Australia.”

The final outcome from the Men's Knowledge Sharing Forum is the production of a 16 minute DVD which shows the highlights from the Forum. It will be distributed to participants and Men's Groups. At the time of finalising this report the DVD was still being edited.

Longer Term Implications

The Project outcomes indicate that empowerment strategies have substantial potential as a strategy for suicide prevention in Indigenous communities. The life-skills the Building Bridges project officers developed through participation in FWB, men's groups and knowledge sharing were disseminated to others through a ripple effect. Generally, those undertaking FWB had the opportunity to reflect on themselves, their relationships, identity, basic human needs and personal boundaries. After this process they were able to consider how their own learnings have relevance to others both in their personal relationships and their work.

Given the nature of empowerment and the need for long term support, the FWB/Men's Group approach is a longer term strategy to suicide prevention. An important outcome of the Building Bridges Project has been an opportunity to set the foundation for longer term sustainability, beyond June 2009. Central to sustainability is the need to identify locally-relevant organisations willing to integrate the FWB/Men's Group/Women Group approach into their core business and provide space and organisational support, such as seeking new funding to continue the work beyond the life of the current project.

Following ten years working with the James Cook University and University of Queensland on the basis of project funding, Gurriny Yealamucka was able to acquire Commonwealth Government support in the form of ongoing funding for four positions dedicated to FWB and men's and women's groups. Other communities are keen to adapt and extend Yarrabah's strategies. The men's knowledge sharing forums in Dalby and Cairns demonstrated a commitment by Building Bridges Project sites to expose other men's groups to the empowerment and knowledge sharing framework, and their response indicated a huge unmet need for support of these community-led approaches. All three north Queensland communities saw sufficient value in the project officer positions that they are willing to commit scarce resources to maintaining the men's group positions and continuing to perform the local men's group coordination roles.

Given the additional challenges experienced in the Dalby site, the impact of the Building Bridges program has particular significance – not only because of the linkages made with other communities but equally within the local community. Given the barriers to engaging the Aboriginal community in Dalby, the focus of community development through local service relationships reflected the profound impact that a locally appropriate strategy can have, as compared to working from a fixed template. This is well reflected by the Mental Health Coordinator from Stolen Generation Counselling Services within Goondir Health Services who reported:

"... the program has raised awareness with stuff on suicide prevention strategies it has allowed and encouraged people to talk about suicide openly... The delivery of Mental Health First Aid has been tremendous, black on track program is great, it has had a 'ripple effect' in our community and having you being a part of the service overall... Suicide is being talked about within the community, they have come right around, done a 360 and when asked the question do you have suicidal ideations? Workers now do not have problems asking this question, whereas, too many psychologists and counsellors' are afraid to ask this question...

This project has given us the confidence to look at the needs of the community more broadly across the Goondir Health Service region for instance we have identified the need to scope and develop Aboriginal & Torres Strait Islander Mental Health standards, this project has made it a more prominent issue that we are trying to address, this can guide Aboriginal & Torres Strait Islander counselling agencies, service, workers not too rely solely upon non-Aboriginal & Torres Strait Islander standards. This type of work is needed more in more communities."



The Project outcomes indicate that empowerment strategies have substantial potential as a strategy for suicide prevention in Indigenous communities.



4 Objective 3: Obtain a better understanding of the meaningfulness and dimensions of suicide and self harming behaviours

This section of the report provides preliminary information that was collected in meeting the terms of reference of Objective 3 of the Building Bridges Project, i.e. to obtain a better understanding of the meaningfulness and dimensions of suicide and self-harming behaviours, the situations and warning signs that specifically indicate risk and the recovery experience of Yarrabah.

The recovery experience of Yarrabah was examined by the HITnet team in preparing the “*Buluru Yealamucka - Healing Spirit*” module for the touch screens. A series of interviews were conducted at the commencement of the project which examined different people’s perspectives of the experience. The product of this work presents these voices and an understanding of how Yarrabah people viewed their “healing of spirit”.

It is important to focus on the initial learnings and contributions of the three communities of Dalby, Hope Vale and Kowanyama. In contrast to Yarrabah which had nearly 10 years of experience of an actively visible research partnership with James Cook University and the University of Queensland which involved Men’s Groups and the Family Well Being Program through previous projects, little information had been systematically collected on people’s perspectives of suicide in the other three communities.

The extreme sensitivity of this work, which involved talking about one of the most painful of any human experiences, and one which is known to have the potential of becoming ‘contagious’, required that a gradual process of building trust which would generate a safe space for sharing. It was also essential to ensure safety was maintained before, during and after the interviews and focus groups. Application of an appropriate framework for information collection was critical to ensure validity of the resulting understandings. Given the need for participant safety, the best way forward for this objective was to nest the objective within the activities and networks established through the Family Well Being Training and the work of the community based workers and Men’s Groups.

The information represented here is a preliminary report on a complex web of themes emerging from interviews and focus groups that captured voices and views of over 90 residents of these communities. The primary importance of this work was to maximise opportunities for sharing of information within the project teams and communities to inform the empowerment and capacity building processes that were happening throughout the project.

Rationale for this Work

While Yarrabah’s story was important as a starting point, there were major differences in all communities and groups involved in this study. The purpose of this activity was to engage, involve, understand and document the perspectives of people in the other communities of both protective, resilience factors and of suicide promoting factors. This included exploring the influences that continue to promote suicide as an option (suicidal ideation), solution (suicidal attempts and completed suicides) and a communication (what they believe suicide accomplishes for them). It aimed to help ensure that the Project as a whole was focused on replacing self-harm and suicide with life promoting influences that facilitate exercise of healthful choices and control of destiny. In many ways this work served to monitor the pulse of the broader community and its response to the Project activities.

Methodology

The context of this aspect of the Building Bridges Project was the Family Well Being and Men’s Group interventions. Accordingly, the knowledge and skill of officers in the principles of FWB was instrumental in establishing effective working partnerships with all those in the community who would inform the process of interview and focus groups.

Preliminary visits were made to each community. Meetings with project stakeholders ensured that there were common understandings and established a framework for ensuring that processes were appropriate, empowering and culturally safe.

The information collection process was also discussed in the Implementation Steering Committee, where it was decided that, rather than individual stories about suicide experiences, “yarning circles”, or a focus group approach, was the most appropriate and efficient means to allow people to share the information. It was also decided that one-on-one “yarns” with selected informants would be an option made available for those who couldn’t or didn’t feel comfortable sharing in a group session.

Thus, through the consultative planning processes, a decision was made to gather information in a format that was not individual stories of suicide but rather as a framework of information with immediate use to the knowledge sharing activity that formed the core of the Project. This information focused on the communities’ views on what is suicide and self harm, their understandings of the causes of suicide and greater awareness of how communities are affected following a suicide death. The aim was to inform safer practice, preferred solutions, ways forward toward primary prevention and supporting recovery to prevent contagion. The number of focus groups, interviews and total number of people informing the project and the dates of the visits are detailed in table following.

Table 4: Collection of Information

Number of Informants and Means of Participation	Dalby	Hope Vale	Kowanyama
Number of Focus Groups	5	5	1
Number of In-depth Interviews	0	8	2
Total Participants in Focus Groups and Interviews	20	39	6
Participants in other settings (Forum)	n/a	25	4
Total Informants	20	64	10

Support of Project Officers and Community Workers

Project officers and community workers played an important role in engaging participants in this aspect of the project. Making initial contact with possible participants and organising focus groups were important contributions given their local knowledge as well as ensuring that all aspects of Building Bridges was owned by communities.² The thoughts and understandings provided by informants was de-identified prior to being shared with the project teams and communities. Major underlying themes and contexts have been identified and extracted.

2. It is important to note that all participants were provided with in depth information and provided written (informed) consent prior to participation, in accordance with accepted ethical practice.

Findings

The underlying themes and contexts extracted from the interviews were presented, with additional details contained in the JCU / UQ report appended.

a. Causes of suicide at an individual and interpersonal level

Individual and interpersonal experiences that contribute to suicide include stress and tension, hopelessness, relationship breakdown, past abuse, abandonment, loss, feeling uncared for, feeling stuck, discouraged, misuse of alcohol and/or drugs and related issues, not belonging, violence - both being a victim and being a perpetrator of violence, feelings of shame, no help or don't know where to go, black magic, oppression and inequality, personal and cultural identity issues and feeling overwhelmed. The following are some examples of participants' words in describing this situation:

"I reckon from my own views that a lot of people have those thoughts because, probably breakdowns of relationships, could have to do with a lot of things, relationships, employment,... feel helpless."

"Drugs, alcohol, the situations, the circumstances. Because they don't work either and they..."

"Very unfair to this community, and in the mean time our kids think, aw we'll kill ourselves, who gives a stuff... nobody cares!"

"...and alcohol too, would have a big part in that too, like fighting, being drunk and saying the wrong thing and then.... Well that's like, the latest one, was caused by drunkenness and arguments and then they went and did it."

b. Causes of suicide at a community level

Community-level causes of suicide are understood to include: a lack of rules, norms and clear guidelines; the essence of community eroded; nobody cares, erosion of strengths; injustice, vulnerability and the persistence of lateral violence (which includes gossip, "put-downs", rejection, judgment) of community members against each other.

"Nobody cares in this town! None of the people care in this town. No one does. People just continue on killing themselves, continue on taking drugs, and continue on selling them."

"That's what I'm saying, it's a communication breakdown between the whole community."

"they're doing it to each other, they go home and do it to their family, then smash their house up and bash you up if you don't listen. That's what we're copping in the end... they're (elderlies) just about dying of the aching in their hearts because their kids are dying before them."

"Ever since they (white people) landed here, they saw Aboriginal people, they didn't understand or acknowledge that we had our own way, we had our own music, dance, tradition, everything, we were fathers in our rights, but they said terra nullius, they deplete our food sources, everything. They didn't understand that. They still don't."

c. Consequences of suicide(s) at an individual, interpersonal and community level

Suicide events cause or exacerbate high levels of underlying stress, stigma, frustration, feelings of helplessness, guilt, blame, overall sense of loss, loss of energy, gossip, shame at a personal, community and cultural level as well as a painful and poorly understood grieving process. It is associated with a feeling that no one cares, powerlessness, retribution, anger and fear. Suicide appears to cause endless questioning amongst survivors of why did it happen, why didn't we realise it was going to happen and what could have been done to stop it.

"the community feels very sad, hurt, sometimes friends can blame themselves for not being there for them. And that 'we should have talked more often', or 'we should have listened', or if they went out hunting the person probably asked to go and they said 'oh there's no room' then they blame themselves for not taking that person."

"yeah, well when it happens, it's still a shock.... I wonder why they did that. The two that I'm talking about, I knew them two. So it was a big shock to me."

d. Perceptions of suicide

Suicide is perceived as contagious, unstoppable, a cry for help, a method of manipulation, a choice when there is no other choice, an example of doing quickly what many are doing slowly in other self-destructive ways such as with alcohol, drugs and violence. Self-harm was identified as a "practice for suicide" or "psyching themselves up."

"but that person has nowhere else to turn to, but to do something to himself just to get away from all this [family fighting]."

"she's screaming for help, nobody will help... she's hanging herself all the time, psyching herself up. It's because of what happened to her."

"like you hear about people, like so and so tried to hang themselves or whatever. But yeah, it's a thing you hear quite often. Just through talk."

e. Messages carried by suicide

Based on interviews, the messages that linger on after a suicide which occur in a community and pervade people's thoughts are of: helplessness (we can't); community is unwell (sick), there is dislocation within the community, an alarm signal ("our kids are killing themselves"); and finally, that in the existing circumstances, suicide is as acceptable option.

"the alarm signals have already been rung. We have suicidal tendencies already happening. We've had a couple of suicides in this community already. This is within the last 2 years and we've been screaming at the government for a rehabilitation centre..."

"the adults are over here, we are over there, there is no place for us."

"then they say to themselves, 'people hate me', my own family hates me too, will might as well just go."

f. Family

Interviewees expressed a focus on the importance of family as both a protective factor and a contributory factor, i.e. families as tight networks, families as a place of meaning, the need and importance of connections versus the reality of parenting as a responsibility. A number of series of suicides within families were highlighted which has amplified feelings of loss, guilt and shame among the survivors.

"family means a lot to Aboriginal people... they're with you right up until the day you die. They're with you, they see you every time... family is always there."

"helpless like, they've got a family but they just can't get what they need for their family... they can't provide what's best for their family and they're trying..."

"You want me to take your around... community is families, who've been here for years. And people who have just come... we have to come together, we have to involve these families"

"...I've never stopped, I've seen hope... yes I've seen changes on and off, but like I said once an Aboriginal person is labeled here... it's because my family is right here... I've got a little girl stepping into high school next year, she's very good... I am hoping that something good will happen for her... I've been hoping, [my son] is educated too and he's in jail. I've been hoping the same thing."

g. Services

Services were sometimes described as "doing more harm than good" and communication breakdown (between the services, the service delivery and the people) occurs often. Top-down services delivered by Aboriginal community members were sometimes seen to create confusion, to add to the interpersonal conflicts and ultimately to community tension. At times there is a feeling of jealousy and being judged leading to unhealthy relationships with people trapped in bully, victim and rescuer roles. People described how their needs weren't being met at the same time as service providers feel their efforts are not appreciated. Disillusionment and cynicism trap both "sides" in disempowering cycles, perpetuating and compounding feelings of distrust, frustration, anger, helplessness and ultimately hopelessness ("what's the use?").

"Yeah because with that, 'no one helps me', with all the programs and what we've got to offer, we've always went to them. And they still sat there and bad-mouthed us. You can only do so much really."

"... then they try so many times to get a job that pays well like with the council, but they are always knocked back, they feel helpless like you know they are trying their best and they get picked on by partners or other members, 'you're useless, you can't do anything... 'and that's what really upsets them too, they say, 'I'm trying my best but nobody wants to employ me.'"

h. Solutions or ways forward

Interviewees suggested that the way forward involved jobs, building relationships with businesses; having more services and resources to address problems; coming together in the community; for people to "get out there and fight for our kids", stop sitting back; providing choices; listening to community people for bottom-up solutions; taking responsibility; being part of action for change; recognising and building on strengths; and giving and receiving as a means to healing from pain.

"...I was just going to say, we had a yarn about the difficulties we faced, and at the end of the day we seemed to have achieved what we set out to do. And I think taking the time to listen and get the feel of what the community wanted, you know like as in following protocols I suppose, and not just coming in there and saying, 'we want ten people to come to this, if you come we'll give you this, this and this... I think we will have positive outcomes... community now realise that ... they can be involved in the process, make the decisions. Come empowered to make change."

"To prevent suicide and alienation and all that stuff, we've got to somehow build community, build family, build systems, build networks... really want to inculcate Aboriginal values and enable people.... But somehow we've got to learn to build community again, build family again."

Brief Summary of Emerging Stories of Suicide and its Prevention

Preliminary analysis of the interviews and focus groups has revealed that people consistently view suicide as a consequence of a multitude of issues that affect residents at an individual, interpersonal and community level. People feel extremes of stress and tension in their lives, where unhealed grief, loss and anger from the past has created a present in which people can be overwhelmed with conflict, pain and isolation. They clearly see alcohol and/or drug use overwhelming a sense of rules, norms and guidelines creating a community environment of hopelessness and feeling stuck, discouraged and disconnected. One of the common responses to these feelings is people lashing out at each other with gossip, "put-downs", rejection and judgment which are increasingly understood as lateral violence, where unanswered questions become fuel for anger, fear and shame.

Suicide was described by many as a contagious and unstoppable, causing people to feel totally helpless to overcome. Many reasons for suicide were described, from a cry for help to a method of manipulation to simply a lack of choice when dealing with having no place.

While existing services were often not described in a positive light, family was seen to play a central role in all dimensions of suicide, from causes, to consequences to prevention. The tight family networks were described on the one hand as playing an important role in giving people meaning and identity in their lives; but also recognised as a place where feelings of loss, guilt and shame become amplified and inescapable.

Despite the intensity of difficulty, people were able to see that there was a great deal of potential in people becoming active in addressing these issues. There was energy in people's descriptions about a better future where people come together, be listened to, take responsibility and make good choices. They could envision their community as a place where there are jobs, good relationships with businesses, more services and well spent resources, where people's strengths are recognised and developed. Giving and receiving were seen as means to healing and stopping suicide.

It is evident from the information collected that many dimensions of suicide risk and the reduced presence of protective factors are seen by community members as intimately linked to the experience of intergenerational grief and loss that reaches back to European settlement. There has been a lack of access to processes that have promoted recovery from loss and disempowering experiences that have stood in the way for people to gain strength through community driven processes. This has contributed to existing levels of confusion of meaning and purpose among young people. These are deeply felt issues that people need time and space to come to understand and use as a learning experience an opportunity for growth.

Discussion and Linkage with the Broader Building Bridges Project

The activities associated with consultation, interviews and focus groups were shaped by the PAR approach adopted across the project. In the conduct of these "yarning circles", working positively was a safe and more empowering way forward, rather than requiring people to focus on their negative experiences. The interview and focus group processes, as well as the content that was shared, raised awareness in a safe and contained manner and enabled reflection on possible solutions. Furthermore, the usefulness of the information collected was repeatedly confirmed during discussions with the Project Officers and leaders.

Past cultural disenfranchisement and social and health inequalities have resulted in feelings of frustration, being trapped, helplessness, victimisation, and powerlessness. Alcohol and drug abuse, lateral violence, relationship tension and violence are sometimes seen as coping mechanisms and suicide and self harm can be a direct result of such factors. This was considered particularly true in a context and culture in which one's personal identity is intricately linked to kinship networks. The consequences of suicide at the individual and group level then serve to perpetuate and aggravate the cycle of disempowerment, as confirmed by the themes emerging from the interviews and as illustrated in figure 1.

Figure 1: Suicide and self-harm within a cycle of disempowerment



Figure 2: Protecting against suicide within a cycle of empowerment



This figure suggests a circular progression of negativity. As suicides occur, emotions of helplessness and hopelessness are exacerbated. This may result in alcohol and drug use as a coping mechanism, which in turn may involve a range of antisocial behaviours. These situations can result in severe social and emotional pain which create a condition in which suicide is seen as the only way out. Accordingly, suicide prevention and external services that don't involve building local capacity and strengthening family and community are unlikely to achieve long term change. Building on the strengths and working *with* communities toward bottom-up solutions resonated throughout the interviews. This cycle of empowerment (illustrated above), on which this project was based, is focused on life promoting factors rather than a deficit model of preventing risk factors for suicide.

5 Objective 4: Foster participation and communication of messages of purpose and identity to young people.

The Health Information Technologies network (HITnet) develops and deploys creative media solutions to reduce Indigenous health inequalities. HITnet seeks to improve individual and community agency and control through four interrelated objectives: improving health literacy through autonomous learning; digital inclusion by providing democratic technology access; participation in creative expression, and; enhancing social inclusion and connectedness.

Since its inception in 2001, the HITnet team has worked with Aboriginal communities, health experts and a team of production experts to develop health information. Topics have included such diverse issues as diabetes and joint problems, child health, alcohol use and sexual health. The different forms of media and the presentation options that these offered have continued to be developed. By the commencement of the Building Bridges Project, HITnet had expanded in terms of content (modules), presentation (including didactic, interactive narrative and serious game approaches), extent (national), and delivery platforms (interactive touch screen and practitioner-mediated iDVD health promotion resources). HITnet has also taken on a role coordinating a national network of new media initiatives in Indigenous health (NIHNMF – the National Indigenous Health and New Media Forum).

Inclusive processes associated with working with Aboriginal community members is understood as a powerful approach to the development of HITnet modules, in terms of the quality of content and for the knowledge, skills and experience that the community is able to gain from the process.

In depth details associated with production issues, budgetary consideration and information gathered through trace data (records of usage) are contained in the HITnet report appended.

A Community Owned Approach

Suicide and self harm is an issue of such power that care was mandatory to avoid presenting messages that could be misinterpreted or which may have been offensive, an issue that is particularly challenging in a cross-cultural context. Given that the touch screens aim to reach the general population – including health sector workers, people at risk, relatives of people who are at risk or may have died by suicide, children and those who are simply curious – it was decided that the format should focus on prevention and should not be graphic or explicit in relation to self harm. Further, because a touch screen is NOT a resource accessed at times of crisis but, rather, when users have time to spare and reflect, it appeared more reasonable to provide information that users – invested in the subject as members of communities affected by suicide – could draw on to respond to self harm as a community issue.

Early in planning it became evident that very different perspectives were arising from the community reference group and the content expert group, the latter clearly taking a clinically-oriented risk factor and crisis response approach (which would not easily be integrated into a public access module given the abovementioned factors save that, importantly, it provided a means to be clear about what NOT to present). The community representatives, by contrast, focused on the broader social context. Because of the particular history of the community of Yarrabah in responding to a wave of suicides from the late 1980s to the mid-1990s, it was decided that the approach should be to present information that provided kiosk users (most of whom would be in other communities) with information drawn from experience about what assisted in overcoming and moving on from the tragedy of suicide – a focus on solutions.

As a consequence, the proposed format shifted to a 'documentary' style that would present real people (rather than graphic representations and information) reflecting on different levels of this recovery process. From HITnet past experience, it was clear that this should be interactive and allow for 'chunks' of information to be accessed (rather than a lengthy, linear narrative). This having been decided, a further evolution of ideas proceeded as the architecture of the module developed, iteratively, through community consultations, resulting in a suite of 'interview' segments across three areas, as well as a more 'traditional' section providing basic information. The resulting sections are:

- Developing personal skills: Stories of personal recovery
- Strengthening community action: Stories of community leading the way
- Creating healing environments: Stories of community renewal
- A helping hand: More ways to find help and information.

This evolutionary process was captured in the project notes of Lucinda Gamble of Frontier Documentaries, the producer of the module:

The initial concept for the project was to make 8 short films. This then got changed to approx 8 doco interviews. Through the workshops and Ernest and Helen's interview wish list this then became six community members from Yarrabah who had been touched by suicide either by death of a loved one or through personal stories of self-harm as well as another six interviews of community members who have been impacted by suicide via their profession. The interviews were intended to be conducted in a chain-like method with the first interviewee interviewing the second person to be interviewed, the second interviewing the third etc this idea was replaced with a core film crew as the concept developed beyond the initial more intimate concept.

The production company ... collaborated on the concept, the brief and subsequently developed a scoping document and budget. The initial scope as discussed above, became for a series of 12 films; six personal and six community-based, each film being three to five minutes in duration. In the end we ended up with 6 personal stories, 4 professional stories and 4 community leader stories so a total of 14 stories. The films were to be edited, collated and delivered as a touch-screen module, also downloadable by web as well as an interactive iDVD version. What we always underestimate is the impact on community when they get involved in these types of projects. Community engagement is VERY high, which is essential to the success of the project. All interviewees and my core crew said they felt profoundly about their participation and the purpose of the project to help others struggling with issues connected to suicide.

Supporting Participation from Concept through Production

In parallel to the finalisation of the module format and architecture the project team consulted with Yarrabah representatives through Gurriny Yealamucka to identify community members who could be interviewed for the module. Although the intent was to adopt a solution-generating and community recovery focus, the possibility of raising painful memories and causing emotional distress was recognised. This was discussed openly with participants and arrangements for support made. Furthermore, it was recognised that the production of this resource necessarily involved a tension between creating a module that would be informative without being emotionally intimidating, while asking participants to consider events that could be highly charged and profoundly distressing. This raised complex challenges in relation to 'testimony' versus 'performance'.

To help address these issues within a cultural context, participants were invited to participate in a four day workshop run by Dr Roger Parent of Campus St Jean at the University of Alberta, whose work in the semiotics of art and culture has informed the development of a range of cultural competency tools in various international settings.³

Through this process of engagement with community members, there was further refinement of the module. The concept of a 'healing pool' was added as well as the imagery of "Guyula", the Seahawk, the emblem of the Gurriny Yealamucka Men's Health group. These became the opening imagery of the final module.

Importantly, the production process was used in a planned way to transfer media skills. Filming⁴ was scheduled for three days per week over a six week block with some contingency built in to allow for any cultural issues (e.g. sorry business) or bad weather as most of the production was to be shot outdoors in the surrounds of Yarrabah. The involvement of a local focus group and local production assistants (who became the core film crew) brought local knowledge to the production, kept the production team informed of community happenings, ensured attention to cultural issues and community 'representational balance', and provided introductions to community members who might be interested in sharing their story.

Although the extensive preproduction planning enabled most contingencies to be anticipated, on the day much of the 'struggle for balance' fell to the film producer, Lucinda Gamble, who commented:

The community and producer were keen to ensure the collection of stories were a balanced representation of gender and of community groups (church, traditional, political, personal stories and professional stories). The balance can be upset by the inclusion of just one interview. The producer constantly had to check the balance of interviewees - exacerbated by participants opting out or the project expanding to accommodate new interviewees.

'Scope Creep' also became problematic resulting in ten versions of the scoping document to refine and in some cases to expand the concept. This significantly impacted on the budget for which Frontier Documentaries absorbed some of the variations and the HITnet program paid for others.

Editing

At this stage the final title, '*Buluru Yealamucka - Healing Spirit*', was accepted as a result of brainstorming by the focus group, production team and HITnet. Senimelia Kingsburra from Yarrabah contributed the artwork.

Just as the master iDVD was received by HITnet to review and sign-off, events in Yarrabah occurred as a consequence of which (and after local consultation) it was decided to replace one interview. Dr Mark Wenitong agreed to serve as a replacement due to his longstanding involvement with Yarrabah community. This brought the additional benefit of an external perspective from an Indigenous health professional.

Delivery

The resulting deliverable was a set of 14 films of three to five minutes in length that fell into categories of personal stories, professional stories and community stories. The set of interviews contained self-help slides with information about the Family Wellbeing Program and resources available by web or free phone call.

Launch and Deployment

'*Buluru Yealamucka - Healing Spirit*' was successfully launched at the Creating Futures Conference opening celebration at Yarrabah in 20 September 2008. The large size of the module required that it be downloaded from the HITnet server and manually installed onto each kiosk via a CD which occurred at all sites (Yarrabah, Dalby, Hope Valley, Kowanyama and Lotus Glen) between June and August 2008.

3. This is being edited in Canada as a resource - *Voices from Yarrabah* - will be made available for training purposes after it has been cleared by participants. It will, however, also serve as a digital record and 'performative' evaluation tool.

4. Just prior to the shoot it was decided to film the production in aspect ratio 16:9 for wide screen viewing for greater quality. This impacted the budget as the edit suite had to be upgraded from 4:3. It also later impacted the iDVD graphics as the templates were all sized to 4:3 and the backgrounds needed to be enlarged to 16:9.

Lotus Glen and Corrective Services

The Lotus Glen kiosk was installed in August 2008 and, through negotiations with Corrections Queensland representatives, placed in the Health Centre. It has not been possible to obtain prisoner feedback, but the following comments were provided by a key member of the nursing staff who facilitated installation and operation⁵:

The Hitnet kiosk was very well received at Lotus Glen Correctional Centre by the offenders. Initially offenders were reluctant to use it as it was new and different. Once one used it, the word spread quickly. Nursing staff encouraged its use by demonstrating how to use it.

Positives: *It was placed in the waiting room in the Health Centre which enabled the offenders to easily access it. Offenders found it easy to use. There were relatives and friends of offenders on the site which encouraged them to use it. Singing and music was an attractive feature. Information was relevant. Culturally appropriate.*

Negatives: *Placed next to officers' station and this resulted in them turning it off as it was annoying them. Low tolerance by officers. Power outages in storms resulted in it shutting down. If this happened when I wasn't there then it stayed off until I returned to work.*

I think that the Hitnet Kiosk is an excellent resource for all offenders, indigenous and non indigenous. The Health centre is being rebuilt at LGCC and it would be more beneficial to locate it in the new waiting room which will be isolated from the officers. This will enable the offenders to discuss the issues raised e.g. use of condoms etc, without the officers listening and making comment.

On the basis of observed use of the Lotus Glen kiosk, HITnet was subsequently contacted through Corrections Queensland to supply an additional eleven kiosks (ten for adult prison settings, and one to go in a youth detention centre). These will be installed by June 2009 in:

- Arthur Gorrie Correctional Centre
- Borallon Correctional Centre
- Brisbane Correctional Centre and Brisbane Women's Correctional Centre
- Capricornia Correctional Centre
- Maryborough Correctional Centre
- Townsville Men's Correctional Centre and Townsville Women's Correctional Centre
- Wolston Correctional Centre
- Woodford Correctional Centre
- Brisbane Youth Detention Centre

Enthusiasm for this project from the health sector in Corrections Queensland has been such that Dr Alan Richards (Senior Director – Offender Health Services) has prepared a presentation on the implementation of Indigenous health kiosks in the Queensland Corrections system at the Justice Health in Australia conference convened by the Public Health Association of Australia (Melbourne, April 6-7, 2009). Dr Richards has also given the following impression of the kiosk at Lotus Glen⁶:

The HITnet Kiosk was installed in Lotus Glen Correctional Centre in Mareeba in early August 2009. The installation was strongly supported by the Management of the centre. Lotus Glen has the highest proportion of indigenous prisoners of any Queensland Correctional Centre (approximately 80%). The current location is not ideal being sited in an open area next to the officers station. The Kiosk has, however, been very popular with the indigenous prisoners and is used regularly throughout the day. While a formal evaluation of its use had not been conducted to date, it is clear from observing prisoners using the kiosk that they engage with the kiosk, that they appear to enjoy using it, and that sometimes several of them will all use it together. Having observed the prisoners interacting with the kiosk, I believe that it is a very effective way of engaging with this client group, and have committed Offender Health Services to installing these kiosks in each secure correctional centre in Queensland in the next six months.

Corrections content production

HITnet content deployed on Corrections Queensland kiosks will include all material thus far produced. Because of the health priority accorded to sexual health, particular relevance was identified with respect to the two existing narrative sexual health modules *Put it on* and *Kayai Girl*. There will be a total of five modules available on sexual health by 2010.

In addition, Corrections Queensland has contracted HITnet to produce and deploy a module specific to Indigenous prisoners. For this module an approach and module architecture similar to *Buluru Yealamucka* will be used involving vignettes with prisoners and health practitioners, and incorporating an on-screen feedback survey. To this end, HITnet is working with University of Queensland researchers involved in the *Passports to advantage* project which is seeking to improve prisoners' post-release service access and social inclusion. Finally, HITnet is in discussion with Lotus Glen management regarding the possibility of generating local content with prisoners, and deploying on the kiosk at that site.

5. Christian Rowan, personal communication, March 2009

6. Personal Communication, March 2009

Informing Objective 3: Obtain a better understanding of the meaningfulness and dimensions of suicide and self harming behaviours, the situations and warning signs that specifically indicate risk and the recovery experience of Yarrabah

In creating the touch screen module the editing process removed around 80% of the interviews recorded at Yarrabah as described in 5.1 preceding. Nonetheless it was recognised that the material edited out contained important information that could contribute further to the qualitative research being undertaken at Yarrabah as part of the NSPS project. Accordingly, permission was sought to provide the full interviews for that purpose). The following is a brief comment in relation to this material ⁷:

The Buluru Yealamucka video recordings were integrated as part of the overall data collected to inform Objective 3 of the Building Bridges Project, that is to "Obtain a better understanding of the meaningfulness and dimensions of suicide and self-harming behaviours, the situations and warning signs that specifically indicate risk and the recovery experience."

These video recordings captured the experience of key community members and leaders during the suicide crisis of their community. The stories recount their efforts to bring community members together to address the crisis and find ways forward. The interviewees from diverse backgrounds offered crucial insights on the centrality of culture in identity formation and how the collective experience of loss, marginalisation and de-legitimisation of culture is expressed in a contemporary struggle through negative social interactions that can produce suicidal crisis at the individual level. Hence, the way forward of re-legitimising culture through school and other traditional activities and strengthen positive social capital can potentially resonate with broader Indigenous groups both in Australia and the Americas.

Additional value and learning will be gained from the experience of the interactive workshops with Dr Parent and which were filmed. As Dr Parent reports ⁸:

Since that time, I have been working with our research personnel at the U. of A. on securing adequate funding for postproduction of this vital project. With the full support of my dean, Dr. Marc Arnal, I am preparing a grant submission to the University of Alberta's Teaching and Learning Enhancement Fund (TELEF) in order to integrate the documentary project into a comprehensive series of learning resources. Voices from Yarrabah will also play a prominent role in our international research network on intercultural training. We are expecting a decision with respect to this request in early 2010. Review of existing literature conclusively demonstrates the importance of documentaries and audio-visual resources in fostering cultural literacy and intercultural awareness. Voices from Yarrabah will provide unique insight into the potential of modern communicative technology for fostering cultural resilience and capacity building. In this sense, HITnet's initial 2007 support will give rise, I believe, to a documentary that will attract international attention. The final product will further confirm the cutting-edge creative work currently being accomplished by Ms. Travers and her team in terms of health literacy and cultural development.

Frame of Mind

The *Frame of Mind* Mental Health Program was a program conceptualised to assist in delivering core mental health training to Queensland Health (Cape York Health Service District) clinical and non-clinical health practitioners. It expanded to become a vehicle for engaging with the local community. With two successful *Frame of Mind* programs behind HITnet, the program started to take a life of its own, with requests to host them in other remote and rural areas nationally.

In late March 2009, HITnet worked closely with University of Southern Queensland Toowoomba and Goodir Health Services Dalby to host another variation of this interactive health education program on behalf of NSPS. Twelve community members from the communities of Kowanyama, Yarrabah, Hope Vale and Dalby/Toowoomba attended the 3-day interactive health education workshop. The first day saw the delivery of the educative components, and by mid afternoon the group of community members was working closely with the team's artistic staff to create a song around the education deliverables and issues relating specifically to their own Indigenous communities. Day two saw the final tweaking of the song, and on the third day, the sound recording studio at the University of Southern Queensland, was used to create the professional audio track named "The Spirit". Each community was presented with an acoustic guitar for participation in the event and a giveback from HITnet, NSPS, Goondir and USQ. This most recent release of the song can be downloaded from: www.hitnet.com.au/thesprit/thesprit.mp3.

A participant of the *Frame of Mind*, Mr. Robbie Deemal commented: *"This was a really fun and engaging working, totally different to what I've done previously in my community. My personal spirits feel uplifted, and hope that we can run a Frame of Mind in my community; Hope Vale at some stage soon..."*

7. Arlene Laliberte, personal communication, March 2009

8. Personal communication, April 2009

Outputs and Outcomes

Outputs

The module development, production and deployment was fully achieved by 30th June 2008. The interactive module was complemented by the iDVD master and 100 copies were distributed with an accompanying advice for facilitators. Touch screen installation and uploading of the module was completed by June 2008. Additional outcomes were achieved which added value to the project with respect to both process and content. These included the expansion of the program to all Queensland Government Correct Services facilities and the production of the "Healing Spirit" track produced by the communities which captures the community message in a musical platform.

Systems are in place for the collection of data on the use of the modules at each kiosk. Given the short period of time between installation of kiosks and the module, current data covers only a limited period. It did however bring to the fore the need for refinement of the electronic data collection technology which is currently being finalised. Irrespective of these limitations preliminary data demonstrates the use of the kiosks generally and access to *Healing Spirit* more specifically.

Outcomes

The Building Bridges HITnet component has confirmed that it is possible to make an engaging, widely-available, electronic resource on a subject of intense sensitivity. This has been possible through a process that is capacity building for the Indigenous participants. Further, by supporting its availability through a widely distributed touch screen network and other electronic platforms it is possible to reach remote settings, and to monitor its use in real time. This project has also demonstrated that it IS possible to create culturally acceptable resources about self harm – an issue of intense sensitivity. Indeed, as the film producer, who has extensive experience working in Indigenous settings, commented⁹ "The most compelling part for project roll out was communities WILLINGNESS to share their stories."

This platform for the delivery of innovative new media-based health promotion DOES reach target populations, is engaging for certain populations (for instance, inmates of correctional facilities) and can be sustained in challenging environments.

This approach, which foregrounds the voices of Indigenous community members and privileges narrative style, allows for less mediation and manipulation in communication with the ultimate recipients. In comparison to 'conventional' health promotion practice (print or workshop-based), digital media approaches have direct benefits for participants (through reflection and representation) and enable wider use of the primary resource (for instance through touch screen access, mediated iDVD use) as a training resource, in documentary production, as a collateral source of qualitative data, and as a tangible record for communities themselves. In this way it serves, inter alia, as feedback and a check on the messages conveyed and the integrity of the project.

New opportunities have also emerged as a direct result of the processes employed through the HITnet initiative. These include:

- Valuable documentary footage from *Buluru Yealamucka* is archived (only around 10% of filmed interviews were included in the final module). There is support from residents of Yarrabah to produce a feature-length documentary film, suitable for adult viewing on television, DVD, web and potentially for entry into film festivals. Without dedicated funding, this opportunity has not been explored further.
- Valuable documentary footage from *Voices from Yarrabah* is archived. This is being adapted for teaching purposes by Canadian colleagues. However, there is further potential to incorporate it into the feature-length documentary of *Buluru Yealamucka*.
- There is the potential to work in other Indigenous Australian communities with similar histories of resilience and renewal – for instance the Tiwi Islands and the Kimberley – to produce a more compelling documentary, one capable of illuminating the 'active ingredients' across all places.

Buluru Yealamucka highlights the power of true stories – when well told and creatively shared – providing the opportunity to approach other sensitive and contentious issues around social responsibility in the same way.

9. Lucinda Gamble, personal communication, March 2009

6 Challenges in Building Bridges and Opportunities

Project challenges: Far North Queensland Experience

Along with the outcomes achieved by Building Bridges there were a number of challenges encountered along the way. They revealed the fragility of community capacity, reiterated the long term nature of skills development and the need to provide substantial, ongoing support for those working on community based suicide prevention strategies. The experience in Yarrabah provides a good discussion point for these issues. The rationale for focusing on these challenges is to share lessons learnt and thereby contribute constructively to the design of future community-based suicide prevention initiatives.

a. Yarrabah's capacity to lead the project

Yarrabah's experience in dealing with suicide, established partnerships and its familiarity with the Family Wellbeing program culminated in an agreement that it would take on the role of Building Bridges community leader. A key assumption was that Yarrabah possessed the requisite corporate memory regarding the processes which had been critical to the development of its men's group, as well as the expertise and FWB facilitator capacity to meet the project objectives in a timely fashion. In particular, the Building Bridges proposal assumed that Yarrabah's full-time project officer (in collaboration with veteran Men's Group leaders) would take a lead role in knowledge sharing about men's group processes. However, each of the key Yarrabah men's group leaders was unable to be involved due to illness, family reasons and alternative employment. As a consequence, the Building Bridges Project ultimately needed to engage staff without knowledge of FWB or Men's Group corporate memory. As a consequence there was a need to recruit a new project officer, but also provide on-site FWB training and support to rebuild the local Men's Group infrastructure. Hence, at the point at which the other community project officers had completed the FWB program, the newly recruited project officer at Yarrabah had not. As a result, planned project activities had to be postponed while the project officer underwent 'catch-up' training.

b. Delays in recruitment and implementation of strategies

Prior to recruitment of a local project officer in Hope Vale and Kowanyama, negotiation was required with community organisations to engage an auspice agency for the project. In Hope Vale, the Queensland Health clinic agreed to auspice the project, whereas in Kowanyama, the local Council adopted this role. Overall, delays in the establishment of project officer positions significantly postponed the co-ordination of men's groups and knowledge sharing processes.

The building of relationships and observance of cultural protocols also had an impact on the process of implementation. The Yarrabah project officer, the first to be appointed, felt that the right protocol was to wait for the other communities to invite the team to their communities. Bringing people together to participate in FWB provided an opportunity for people from different communities to network and discuss the details of the knowledge sharing protocols and their expectations in a way that respected different points of view.

c. Capacity to facilitate FWB

One of the issues which arose during the Building Bridges Project was a partly unmet expectation that the newly trained project officers would become independent facilitators within the two year Project timeframe. This proved overly ambitious as it overlooked a number of factors which influence an individual's capacity to take on what is a personally demanding and ethically complex role. Successful negotiation of community and clan politics, FWB group dynamics and responding to the needs of individual participants requires considerable skill and practice. Additionally, those participating in FWB often have a wealth of relevant life experience though limited past opportunities for formal education. For many who have successfully completed FWB but no previous experience in the role of facilitator or teacher, the prospect of delivering training in their own community can be daunting. The immediate benefits of participation in FWB are personal and include an enhanced capacity to provide support to others, usually initially on one-to-one basis. Developing the capacity to facilitate FWB should be considered a long term goal.

Empowerment is an essentially organic and flexible method of social change and community action. A community development practitioner adopting empowerment methods engages the community and then follows the path which strengths create. This strength may be reflected in an expression of interest by community groups or by an individual call for help and support. Empowerment strategies are community

rather than practitioner driven. They respond to community identified priorities. For those with many years of experience providing health and other services to Indigenous Australians, this community-led dynamic may represent a paradigm shift. Although completion of FWB provides the tools required to engage in empowerment based community development strategies, it is also true that newly qualified FWB counsellors are beginning practitioners, embarking on a process of professional development.

In many professional disciplines progression from novice, through to competence, proficiency and finally to expert takes years of practice. It is a process which generally assumes interaction with more advanced practitioners. Similar principles apply to the skills associated with empowerment and community development strategies, particularly in politically and culturally complex settings. This is a long term pathway, which requires mentoring by experienced practitioners and a commitment from employers to provide the necessary support. This applies to the Building Bridges approach which recognises that skill development and confidence must be understood as long term goals.

d. Presence and role of women at men's group meetings/activities

The project officers supported community-based collaboration with women. One expressed the view at the Yarrabah knowledge sharing meeting in November 2008 that men's group activities have "been changing men's lives", and "when that happens, the lives of families and kids are changed." In Hope Vale, the project officer said that men and children seem to be benefiting the most and that women and family were missing out. To overcome this, he suggested a community women's group should be formed and noted that prominent community women were having discussions about how to strengthen families and community. In Yarrabah, men's group workers collaborate on some activities with the Women's group workers, including delivery of FWB, camping trips with men, women and children, the Healthy Children Health Check program, Men's & Women's Health Promotions, Domestic Violence month activities, Mental Health activities and a Gambling Awareness program.

There are nonetheless limits to collaboration across genders. This was tested when the men's project officer was invited to deliver a domestic

violence program to a mixed group. Part of the challenge was how to appropriately intervene in violent relationships. Women were invited to attend a domestic violence meeting by men who had previously heard the presentation and felt it should be shared. The meeting was also attended by a worker from a service agency. While the feedback from women in attendance was positive, project leaders, the service provider and community project officers expressed concerns that many women were 'invited' from a position of disempowerment by the men and that this dynamic might have shaped their perceptions of the material delivered. In particular, there was concern that women were responding to the demands of a dominant male, rather than being given the opportunity to explore possible alternative ways of being in a relationship.

e. Responding to suicide and self-harm

During the project, incidents of self harm, suicide attempts and completed suicides occurred in all communities. Due to the close-knit nature of communities, these incidents affected the project staff. In Yarrabah, for example, three deaths in a two-month period during late 2007 led some key project staff to take bereavement leave. A planned knowledge sharing meeting was cancelled after the second death and activities were put on hold while a time of grieving was observed. There were nine attempted suicides recorded (7 of these were females) in Kowanyama between January and the end of March 2008.

In response, the project officer, with the support of the local priest, formed a call out team to attend after-hours suicide attempts. He identified a challenge to reporting suicide related issues is fear that reports would lead to unwanted Government interventions. With the closure of the Kowanyama alcohol canteen and end of the wet season, the Kowanyama project officer reported that suicide attempts and talk of suicide diminished and the incidence of domestic violence also declined.

Project officers in Yarrabah and Hope Vale attended Mental Health First Aid training and in Kowanyama Suicide and Self harm prevention training was provided. Subsequently a Hope Vale community leader observed that local people had begun to identify the project officer as a source of information regarding suicide and mental health issues. Some families had identified alcohol as a problem and were engaging with the project officer on how they could decrease their alcohol intake.

f. Involvement of Life Promotion Officers (LPO)

During its suicide crisis in the mid 1980s to mid 1990s, Yarrabah obtained funding from Queensland Health for two Life Promotion Officer positions. It was envisaged that these officers (employed by Yarrabah Council) would contribute to the knowledge sharing processes. Unfortunately, they did not see this as part of their job description and on this basis they were not involved in the project. This was not the case however in Hope Vale with the Life Promotion Officer being involved in the project. As this project draws to completion, negotiations to transfer the Life Promotion Officer positions to the Gurinny Yealamucka, should help to integrate these positions into relevant social health programs.

g. Sustainability

Given the short-term funding for this complex community-based project, there is an issue of how the empowerment strategies implemented during the project could be sustained into the future. Project leaders from the Universities visited all three Far North Queensland communities to discuss this issue with the project officers. All agreed that the project has offered valuable opportunities to connect with other communities and share knowledge. They would like to maintain and expand the knowledge sharing process to other communities, and to work at higher advocacy levels to influence policy frameworks.

Within the two-year project each community had demonstrated a commitment to making arrangements to maintain the men's group positions and to continue performing the local men's group coordination roles. However, there were two identified gaps. Firstly, there are no ongoing resources allocated to supporting collaboration between communities through lateral knowledge sharing, or to extend this process to other places. Secondly, there are no resources to maintain the support and PAR processes for program improvement and documentation.

Project challenges: The Dalby Experience

The Dalby experience was considerably different from that in the Far North Queensland communities involved in Building Bridges Project. This presented challenges unique to Dalby and has particular implications for the rolling out of similar initiatives in more urbanised areas. In practical terms this project confirmed that it is essential to be cautious about extrapolating from one community to another.

a. Dalby Context

Not only was the Dalby community isolated by geography, but equally by context. The Aboriginal people in Dalby had not previously experienced any of the project processes that members of the other communities had. There was also no current or historic experience with either men's groups or Family Well Being. As a consequence, the starting point for this site was considerably disadvantaged compared to the other communities.

Because of this contextual difference, it was significantly more difficult to recruit local people to participate in activities and programs. It became readily apparent that considerably more time and effort was needed with respect to local community development and further across the region. This was made more difficult by the challenges in engaging and gaining long term support from local service providers. Accordingly, there was a need to work closely with those people and stakeholders who were positive about the initiative and to work collaboratively to progress future planned activities and programs.

b. Working to a Challenging Time Frame

The Dalby Project Officer noted in final reporting that working with communities cannot be rushed, and this is particularly important in addressing such complex and sensitive issues as suicide and suicide prevention. Given the Dalby environment the time frames and expectations for the project were unreasonable. At the same time, given the achievements to date it is important to ensure that processes continue to build on this foundational work. Additional time is needed to:

- Interview more community members in Dalby;
- Interview those who have experienced suicide, attempted suicide and self-harm;
- Work more with community people at the local level around their local issues, resources and solutions; and
- Enhance local capacity and build opportunities.

c. Support of Local Services

Support from the Stolen Generation Counselling Service and the Goondir Health Service was highly valued. However discussions with the services indicated that lack of engagement is not uncommon in the Dalby area. For example, efforts were made early in the project to obtain data and information from these service regarding mental health, suicides, attempted suicides and self-harm data. However, such information is not being captured in the computer database, which was confirmed by medical staff who acknowledged that they had not maintained information on these concerns. Overall it was not possible to access data from any services from the Dalby community. However, the Project Officer stressed that such hurdles can be cleared by processes that take the necessary to work alongside with people in the community and services locally and regionally, building relationships and being involved. This requires efforts that are unconstrained by traditional program time limits but ultimately enable program goals to be achieved.

Project Challenges: HITnet Experience

The limitations of the HITnet arm of the Building Bridges Project are related to conceptualisation, implementation and evaluation, each of which has had implications for the wider NSPS project and to the HITnet component specifically.

a. Conceptualisation

Underpinning the project as a whole has been a commitment to the importance of sharing experience as a mechanism for reducing the risk of suicide and promoting recovery on an individual and community level. This relates to ideas of horizontal rather than vertical information and experience flow, with implicit assumptions regarding the 'content' of such information and 'sources'.

For the Building Bridges Project the 'content' relates to processes of empowerment through men's groups, Family Wellbeing participation and involvement in Buluru Yealamucka production and to moving on from experiences of suicide related trauma. The 'sources' were particular groups – specifically, members of the community of Yarrabah – who had, as a community, experienced a large number of suicides and developed local responses.

In terms of suicide, it may be questioned whether this approach has conflated suicide prevention and suicide response or recovery. Specifically: Should lessons in relation to prevention best be sourced from communities such as Yarrabah that have suffered this tragedy many times (and responded), or from communities where suicide has been uncommon or remains unknown? In relation to HITnet, this was exemplified by the difficulties encountered (despite extensive preparation of participants) in maintaining a focus on solutions and recovery rather than trauma and the pain of loss – problems which were ultimately dealt with through the editing process.

b. Implementation

The logic of the Building Bridges Project presumes a synergistic effect of coordinated initiatives in improving outcomes relevant to suicide prevention. In relation to the HITnet component of the project this was not achieved. To illustrate, it had been expected that the Buluru Yealamucka module would be informed by local beliefs and understandings of self harm derived from qualitative work undertaken elsewhere in the project. However, this information was not available until the end of the project.

Whether that had negative consequences is unclear. There is a counter view that developing the content de novo with participants was itself empowering. Regardless, there remained very little interaction between HITnet and the other arms of the project, either in relation to touch screen modules or use of iDVD resources. This limitation reflects problems of structure and governance for the project as a whole which, in practice, supported parallel processes rather than coordination and cooperation.

c. Evaluation

It is not possible to assess interactive effects across the project as a whole. The only trace data relevant to this question revealed that the Buluru Yealamucka module use was a lesser proportion of total module use in intervention compared to non-intervention sites, although this difference was not significant.

In relation to HITnet specific evaluation limitations, the delayed deployment of kiosks and the challenges of supporting remote IT limited the collection of trace data. Furthermore, the available data provides information regarding module use rather than the influence of participation (in module production) and resource use (kiosk and iDVD) on knowledge, attitudes and behaviour. The influence of participation and exposure on the target issues is, consequently, inferential.

Opportunities

Men's Groups, Family Well Being and Knowledge Sharing:

Given the short-term funding for this complex community-based project, the sustainability of empowerment strategies has been an important outcome for this project. Each participating community has agreed that the project offered valuable opportunities to connect with other communities and share knowledge. They would like to maintain and expand the knowledge sharing process to other communities, and to work at higher advocacy levels to influence policy frameworks. Each community had demonstrated a commitment to making arrangements to maintain the men's group positions and to continue performing the local men's group coordination roles. This provides evidence of the value placed on the project officer positions by communities.

Given the establishment of a core group of skilled and experienced facilitators within these communities, there is a real opportunity to support the processes and strategies used in this Project to continue not only within these communities but beyond. However, there is a need for ongoing resources allocated to supporting collaboration between communities through lateral knowledge sharing, or to extend this process to other places.

HITnet and Multi Media Technologies

The growth of HITnet through the life of the NSPS Building Bridges Project provides opportunities to utilise this resource to provide information to Indigenous populations across the country. Now that this is a mature system with network reach and depth in terms of content production, a challenge for HITnet is to work with content-commissioning entities to enhance evaluation capacity in order to better understand its impact and cost effectiveness.

The popularity of this communication medium in particular settings, specifically within the Queensland Corrections system, suggests that it will function similarly in other states and in the Youth Justice system. At the time of writing, the first kiosk to be located in a psychiatric unit of a general hospital (with a significant Indigenous patient base) is being deployed in Cairns Base Hospital. Consequently, there are opportunities to better understand the relationship between medium, message and setting in order to refine the capacity to best reach and influence self-harm vulnerable populations (prisoners, psychiatric patients, young people...). The capacity to multi-platform messages (across different delivery modes – touchscreen, mainstream and Indigenous media, iDVD, mobile phone applications and the web ...) will provide further opportunities for a more nuanced awareness of what works best, where, and for whom.

In addition, the HITnet involvement in the NSPS Building Bridges Project generated a number of collateral outcomes with potential for further development to realise self-harm prevention potential. For instance:

- Valuable documentary footage from Buluru Yealamucka is archived (only around 10% of filmed interviews were included in the final module). There is support from residents of Yarrabah to produce a feature-length documentary film, suitable for adult viewing on television, DVD, web and potentially for entry into film festivals. Without dedicated funding, this opportunity has not been explored further.
- Valuable documentary footage from Voices from Yarrabah is archived (in Canada and Australia). This is being adapted for teaching purposes by Canadian colleagues, however, there is further potential to incorporate it into the feature-length documentary of Buluru Yealamucka.
- There is the potential to work in other Indigenous Australian communities with similar histories of resilience and renewal – for instance the Tiwi Islands and the Kimberley – to produce a more compelling documentary, one capable of illuminating the 'active ingredients' across all places.
- Buluru Yealamucka highlights the power of true stories – when well told and creatively shared – providing the opportunity to approach other sensitive and contentious issues around social responsibility in the same way.
- The Frame of Mind workshop conducted with NSPS participants in Dalby in 2009 has created demand for work in discrete communities in Cape York. These opportunities may be taken up over time as funding is found.

Horizontal knowledge transfer has drawn on existing solutions and expertise (including Yaba Bimbie Men's Group, Family Well Being Empowerment, the Life Promotion Officer project) and employed understandings of how knowledge is communicated across Indigenous families, communities and institutions. This initiative has supported the target communities' capacity to define and implement recovery and suicide prevention activities. Essentially, the Building Bridges Project has created opportunities for Aboriginal communities to expand their capacity for reducing risk and enhancing protective factors through local and inter-community knowledge sharing. It is this opportunity that can still be realised.