## Strengthening our cultural safety in mental-health care



## **Professor Helen Milroy**

We all have stories about someone in our Mob who felt unwelcome or misunderstood when trying to get help for their mental health. Maybe it was a friend who didn't return to a clinic because the staff didn't get where they were coming from. Maybe it was an aunty or uncle who felt judged or even faced racism when they were at their most vulnerable. These experiences have taught us a hard truth: mainstream mental-health services haven't always been safe or respectful places for Aboriginal and Torres Strait Islander people

Cultural safety in mental-health care is something our hearts have long yearned for. But what does it truly mean? In simple terms, cultural safety means that when we walk into a clinic or hospital, we feel safe to be ourselves. Our culture, identity and history are respected at every step. There's no fear of racism or misunderstanding. Instead, we're met with open minds and hearts. Cultural safety is about trust – knowing that the people caring for us truly "get" who we are and what we've been through. It's the opposite of a one-size-fitsall approach. It's care that fits us, designed with our input and honouring our ways.

## The TIMHWB project

Right now, I'm thrilled to be leading an exciting effort to bring these ideas to life — the Transforming Indigenous Mental Health and Wellbeing (TIMHWB) project at the University of Western Australia. Together with my colleague, Professor Pat Dudgeon, we're uniting Aboriginal voices from across the country to reshape the mental health system. TIMHWB flips the script: instead of outsiders telling us what's best for our mental health, it puts Aboriginal communities in the driver's seat — our voices lead the way, and professionals walk alongside us.

Our project teams have been yarning with Elders, youth, healers and community workers to gather wisdom on what truly works. We're also working closely with universities and hospitals to turn that wisdom into action. The message is clear: nothing about us without us. By codesigning solutions, TIMHWB ensures that the changes in mental-health care aren't just token gestures – they're deep, genuine shifts rooted in what our people have said we need. (For more about this project, you can visit the TIMHWB website. This project isn't just happening in boardrooms or research labs – it's happening on the ground in our communities, where everyone, from young ones to Elders, come together to talk about mental health in a comfortable setting.

As one of the participants in our project powerfully shared:

"Because the spaces that we want don't exist yet. This place where you can come and just go, "I don't have to explain my whole culture to you. I don't have to explain anything."

Community voices will be shaping the future of therapy, crisis support, and even



Professor Helen Milroy, second from left, with Angela Watson, Rene Kulitja and Alison Caroll from the Ngaanyatjarra Pitjantjara Yankunytjatjara (NPY) Women's Council.

the design of mental-health facilities (imagine clinics with outdoor yarning spaces and paintings by local artists instead of cold white walls).

The story we're writing together is one of healing, hope and empowerment. There is a saying we hold in our hearts: "strong culture, strong people". By making cultural safety the cornerstone of mental health care, we are strengthening the spirit of our people. As one participant in our study described the intersection of culture, spirituality and mental health:

"And my history, what people don't understand is that as Aboriginal people, we've got spiritual, cultural and then there's mental health. I've been through the three of them. Spiritual is my everyday life. Cultural is my everyday life because I'm Aboriginal. Mental health is affected when people don't believe me that what I'm going through is cultural or spiritual."

We're ensuring that no one has to choose between getting help and staying true to who they are. And we're proving that when you respect and include Aboriginal and Torres Strait Islander peoples in creating solutions, amazing things happen.

## Making services safe

For many of us, trust has been broken in the past by systems that didn't value our voices. Years of trauma, racism and neglect have made our people understandably cautious. That's why rebuilding trust is so important. To do that, services should listen to our community, involve us in decisions, and actively fight racism within their walls. Words aren't enough — we need action that we can see and feel. When a service shows it's willing to change — like hiring more of our people, training staff in our cultures, or partnering with Elders — we notice. Each positive experience spreads by word of mouth. Bit by bit, trust grows. And with trust, more of our people feel okay about reaching out for help when they need it.

A big part of making services safe is confronting racism wherever it shows up. This means more than just saying

"everyone is welcome". It means actively being anti-racist – calling out discrimination and prejudice whenever they occur and making sure staff at every level understand the impact of racism on our wellbeing. When a mental-health professional understands intergenerational trauma and the strength of our survival, they're less likely to judge and more likely to show compassion. And when we see a service stand up against a racist remark or policy, we feel a shift – it tells us, this place respects us. Cultural safety and anti-racism go hand in hand. You can't have one without the other. Our vision is that one day our kids and grandkids can seek help without bracing themselves for ignorance or bigotry.

Working together is the only way forward. Our community-controlled health organisations – like Aboriginal Medical Services – have always been safe harbors. They are run by our people, for our people, and they know how to create a welcoming space. By partnering with them, hospitals and clinics can learn practical ways to be culturally safe. This might mean having cultural consultants or liaison officers available or adopting models of care that were developed by Aboriginal communities. As expressed thoughtfully by a community member in our study:

"There needs to be more Aboriginal people working in mental health. You need to be direct about how Aboriginal people don't give eye contact... And if you don't give eye contact, it doesn't mean that it's bad body language. They need to have cultural awareness. If there's no Aboriginal workers, there needs to be cultural awareness that we find eye contact intimidating."

It certainly means involving community representatives in planning and governance. When we see our own leaders at the table deciding how programs run, we feel confident that our needs won't be brushed aside.

Our ancestors navigated by the stars and found pathways where none seemed

possible. In the same way, we are forging a new path for mental wellbeing – one grounded in culture, connection and community leadership. The current system was never designed with us in mind, and tinkering at the edges is not enough. What we need is deep, structural transformation. This new path is about walking together with mutual respect: Elders, young people, health workers and community organisations, side by side.

In the end, cultural safety in mentalhealth care isn't just a policy or a project it's a promise. A promise that we will no longer be treated as outsiders in our own country's healthcare system. A promise that our children and grandchildren will grow up with services that celebrate their identity and support their wellbeing in equal measure.

Together, drawing on the strength of our cultures and the resilience of our communities, we are building a healthier, stronger future. And that is something we can all look forward to with pride and optimism.

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This article is part of a series by authors from the Centre of Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention at the University of Western Australia.