

ABORIGINAL AND TORRES STRAIT ISLANDER SPECIAL ISSUE:

CULTURE, STRENGTH, AND
SELF-DETERMINATION IN
SOCIAL WORK.

Inside this issue:

VALE LINETTE HAWKINS AND PATRICIA FRONEK: Read the tributes inside | **PAGE 8**

NEW APPROACHES TO OUT-OF-HOME-CARE OF ABORIGINAL AND TORRES STRAIT ISLANDER CHILDREN: One Aboriginal community-controlled organisation's approach | **PAGE 21**

PROFESSIONAL IDENTITY: Reflections on a lifetime of renewal and shaping one's professional identity | **PAGE 24**

AND MORE



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of Social Workers

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NEXT EDITION

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AASW Members whose articles are published in *Social Work Focus* can claim time spent to research and prepare them towards CPD requirements, specifically Category 3.

MANAGING EDITOR: Amanda Weavers

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ACKNOWLEDGEMENT OF COUNTRY

We respectfully acknowledge the past and present Traditional Owners and ongoing Custodians of the land. We pay our respects to their Elders past and present, their ancestors and their families.

Join us on social media:



Contents

REPORTS

National President's Report From the AASW National President	2
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CEO's Report Advancing Social Work Excellence: AASW's Vision for 2025 and beyond	3
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NEWS

Reconciliation Action Plan	4
Member Spotlight: Prof. Tina Brodie	6
Highlights from the Australian Social Work Journal	7
Vale: Dr Linette Hawkins, Dr Patricia Fronek	8
LearnX Awards	10

FEATURE ARTICLES

Why social workers need to understand and undertake Aboriginal and Torres Strait Islander Mental Health First Aid (AMHFA)	11
Advocacy update	14
Spotlight: meet your new board directors	16
An Indigenous strengths-based theoretical framework (extract)	17
Member spotlight: Nathan Ryan	18
On Demand Learning and Continuous Professional Development	19
Sharing the care: one Aboriginal community-controlled organisation's approach to out-of-home care of Aboriginal and Torres Strait Islander children	20
Raising the profile of social work	22
Navigating professional pitfalls: the crucial role of AASW professional indemnity insurance and public and products liability insurance	23
Reflections on a lifetime of renewal and the shaping of one's professional identity	24
Professional news & views	26

From the AASW National President

Julianne Whyte OAM

Welcome to 2025.

Hello, I would like to introduce myself as your new National President (since November 2024), I'm Julianne Whyte.

I'm CEO, Director, and founder of a not-for-profit charity that's dedicated to delivering disability, aged care, social work, and social impact programs. With over 45 years of experience in health, community services, community development, policy creation, program implementation, and research, I've seen firsthand the difference we can make. I'm also an Accredited Social Worker and currently wrapping up my PhD. In 2017, I was honoured to receive an OAM for my work in palliative and end-of-life care. I'm also a proud member of the Australian Institute of Company Directors.

As National President of the AASW, an important part of my role is to support social workers to address the ongoing social injustices faced by Aboriginal and Torres Strait Islander peoples and communities. There is still much work to be done.

The AASW is committed to standing alongside Aboriginal and Torres Strait Islander peoples and supporting

people in achieving their aspirations and goals. We must also acknowledge our profession's past involvement in injustices and racist policies. As we continuously learn from this history, we strive to foster relationships that embody respect, honesty, the right to self-determination, transparency, and knowledge-sharing with Aboriginal people and Torres Strait Islanders.

Being part of a board where four out of eight members identify as Aboriginal or Torres Strait Islander people is enriching. Our board represents all members, and a diversity of experiences and perspectives help ensure we are reflecting our member's needs and the interests of the communities we work with.

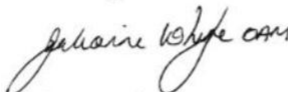
One aspect of this work is evident in our publications, like Social Work Focus, highlighting social work with and by people who identify as Aboriginal or Torres Strait Islander. These articles have also proven to be the most popular among our readers.

This issue continues these vital discussions, and I want to highlight

a few pieces: AJ Williams-Tchen, a prolific contributor, offers an insightful discussion in his article "Why Social Workers Need to Understand & Undertake Aboriginal & Torres Strait Islander Mental Health First Aid (AMHFA)." This article delves into an innovative area of our work and provides excellent insights. We also journey to South Australia to explore member Professor Tina Brodie's experience in Aboriginal health and wellbeing, and to Western Sydney to explore member Nathan Ryan's work with the community focusing on Aboriginal mental health.

The hard work of the AASW Board, staff, and Aboriginal and Torres Strait Islander members - including those who volunteer their time - has made progress possible. I look forward to our continued efforts to achieve more.

Warm regards,



Julianne Whyte OAM



JULIANNE WHYTE OAM

AASW National President

Muriel Wymarra is a Torres Strait Islander born and raised in Gimuy-Walubarra Yidi lands. She has cultural connections throughout the Torres Strait and Cape York Peninsula. Muriel is an AASW board Director.

As someone actively researching, it is important to note that a lot of discussions and social work scholarship that prescribes models of professional helping, when working alongside Aboriginal and Torres Strait Islanders, often generalise by grouping the two cultures together to identify as Indigenous Australians. The identity of both cultures is often blurred, and in danger of being lost, due to their perceived similarities, shared history of colonisation and experiences of social issues that continue to impact both groups.

We know that Indigenous Australians, encompassing Aboriginal peoples and Torres Strait Islanders, represent a rich tapestry of cultural diversity shaped by thousands of years of unique histories and traditions. For example, while Torres Strait Islanders share certain commonalities with Aboriginal peoples in Central Australia, such as deep connections to the land, storytelling practices, and a focus on community kinship, other aspects are more unique to each culture. For instance, Torres Strait Islanders have a seafaring culture strongly influenced by their island

geography, with practices like fishing, canoe-building, and maritime navigation central to their way of life.

I would like to commend the AASW on this issue and the work they have done over the last twenty years in reconciliation. As we move into the future, we recognise there is a long way to go.

Muriel Wymarra

Advancing social work excellence: AASW's vision for 2025 and beyond

Welcome to this special edition of *Social Work Focus*

Greetings as we step into 2025!

Great momentum following the highly successful International Conference on Social Work in Health and Mental Health (ICSWHMH), which saw a remarkable turnout of 1,172 attendees, the AASW continues to elevate Australian social work globally.

We were honoured to feature Professor Tom Calma AO delivering a keynote on Aboriginal and Torres Strait Islander health and mental health, alongside Dr Elsie Galloway's impactful presentation, "Stepping into the Sacred: Building Partnerships of Maternal and Social Care with First Nations' Women of the Northern Peninsula Area," which received enthusiastic feedback from our attendees.

AASW proudly supported the participation of four Aboriginal and Torres Strait Islander individuals through our sponsorship program, further enriching the conference experience. With the success of ICSWHMH behind us, we now eagerly anticipate our upcoming Social Work Symposium later this year.

Since our last update, a significant milestone has been reached, with the launch of the new Australian Social Work Education Standards (ASWEAS) in late 2024. This launch followed extensive consultations involving students, graduates, academic professionals, placement providers, employer groups, industry representatives, and an Aboriginal and Torres Strait Islander focus group. From 1 January 2025 new providers will be required to accredit programs using the ASWEAS 2024 and existing providers will commence 1 January 2026.

In this edition, we reflect on the achievements of the 2023-2024 Reconciliation Action Plan (RAP), which has now concluded. Looking ahead, we are committed to launching our new Innovate RAP on 1 July 2025, featuring initiatives that will span the next two years.

As we begin what promises to be a year of optimism for positive change, achievement, advocating for social work

and enhancing public safety remain top priorities for AASW leadership. With South Australia set to introduce the Social Workers Registration scheme from 1 July, our efforts to secure registration for the profession across all Australian states and territories continues. Stay tuned for updates on our forthcoming campaign activities in the months ahead.

Warm regards,



Cindy Smith



CINDY SMITH

Chief Executive Officer

Reconciliation Action Plan

Dr Susan Green is a Galari woman of the Wiradjuri nation and the Association's Aboriginal and Torres Strait Islander Director. Susan is Chair of the Association's Constitution Review Committee and Chair of the Association's People and Culture Committee.



DR SUSAN GREEN

AASW Aboriginal and Torres Strait Islander Director

In December 2024, I was proud, with the AASW Board, to reaffirm and expand our Apology statement to Aboriginal and Torres Strait Islander communities, on the 20th Anniversary of the Apology.

The Apology statement recognised the role of social workers in the Stolen Generations and the legacy of colonial violence, urging our profession to reflect, take accountability, and commit to justice and anti-colonial practice.

There is so much we can do in our lives every day to make positive steps towards reconciliation. It's crucial that AASW has a clear commitment and action plan.

AASW has had a Reconciliation Action Plan (RAP) since November 2013, and is developing a new Innovate RAP which we'll have in place for the next two years. I am particularly proud of efforts over the

last year to work with senior leaders on the effects of racism, development of a process to measure the implementation of outcomes of the RAP and efforts to better engage current Aboriginal and Torres Strait Islander members to include their voices in this process. We are keenly aware that a lot of work remains.

The AASW is committed to working alongside Aboriginal and Torres Strait Islander peoples, supporting their aspirations, and recognising the diversity of voices within these communities. This is reflected in our leadership, with four Aboriginal and Torres Strait Islander social workers currently serving on the AASW Board: myself as the Aboriginal and Torres Strait Islander Director, Jessica Russ-Smith, Muriel Wymarra and Bindi Bennett as Directors. Their leadership is an essential part of our

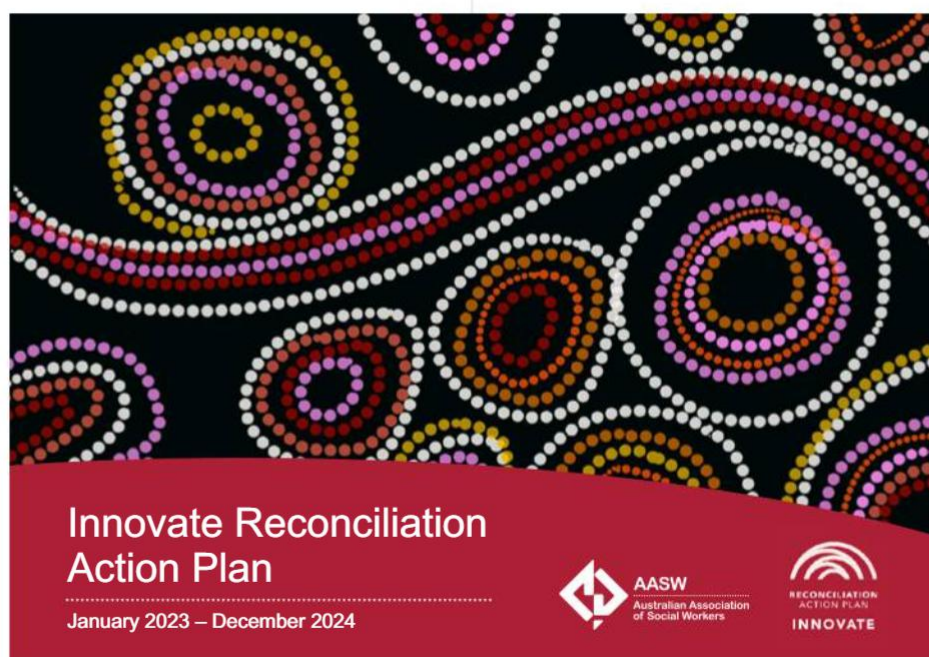
ongoing commitment to ensuring Aboriginal and Torres Strait Islander voices are heard and represented across the Association.

As we approach the conclusion of our current Innovate Reconciliation Action Plan, we reflect on the significant progress made over the years, while also acknowledging the ongoing challenges.

Outcomes from our Innovate Reconciliation Action Plan 2023–2024

2023 HIGHLIGHTS:

- Consulted with Aboriginal and Torres Strait Islander stakeholders including our Aboriginal and Torres Strait Islander members and external organisations to develop guiding principles for ongoing engagement
- Updated induction processes to include reference to reconciliation and the RAP in onboarding processes and maintained across our workforce
- Identified and developed relevant practice resources for our Aboriginal and Torres Strait Islander members
- Contributions from Aboriginal and Torres Strait Islander peoples were invited during the revisions to our Code of Ethics and Practice Standards



- To increase opportunities for contributions and participation of Aboriginal and Torres Strait Islander members across publications, an edition of Social Work Focus is now dedicated to Aboriginal and Torres Strait Islander topics
- The Australian Social Work journal dedicated a Special Issue to solely centring and voicing Aboriginal and Torres Strait Islander peoples and authors.

2024 HIGHLIGHTS:

- Consulted with Aboriginal and Torres Strait Islander focus group in the development of the Australian Social Work Education and Accreditation Standards (ASWEAS)
- Participated in Reconciliation Australia's biennial Workplace RAP Barometer
- Encouraged participation in the national mentoring program of both Aboriginal and Torres Strait Islander mentors and mentees, resulting in successful pairing
- Ensured all relevant policies and procedures were reviewed with a lens of cultural safety and appropriateness, in line with best practices and emerging knowledges
- Continued to promote reconciliation at our events including national conferences, symposiums and CPD offerings
- AASW has expanded its capacity to increase the representation of Aboriginal and Torres Strait Islander people in CPD offerings. Currently,

there are 17 titles available in the On Demand training library that specifically focus on Aboriginal and Torres Strait Islander perspectives

- Provided four scholarships for Aboriginal or Torres Strait Islander members to attend AASW's International conference
- Continued to build relationships with influential stakeholders such as parliamentarians and government agencies to support reconciliation outcomes. We also encourage

involvement in our advocacy sphere of influence by having members include their voice in our advocacy work.

AASW is liaising with Reconciliation Australia to create a new Innovate Reconciliation Action Plan which will be released in July 2025.



A Reconciliation Action Plan (RAP) is a structured framework that guides an organisation's efforts towards reconciliation, focusing on building respectful relationships, enhancing opportunities, and driving positive change for Aboriginal and Torres Strait Islander communities.



Member spotlight: Professor Tina Brodie

Professor Brodie is a member of the Australian Association of Social Workers (AASW) Accreditation Council and the Indigenous Allied Health Australia Research Advisory Committee. She is also a 2024 Fellow of the Melbourne Poche Centre for Indigenous Health.

Social Work Focus interviewed Professor Brodie, as told to Dr Matt Loads.

Professor Tina Brodie (BSW (Hons) GradCertCouns, PhD) is an Aboriginal woman with connections to the Yawarrawarrka and Yandruwandha peoples of South Australia. She currently holds the position of Pro Vice Chancellor Aboriginal Leadership and Strategy at the University of South Australia. Additionally, Tina has affiliations with Wardliparingga Aboriginal Health Equity at the South Australian Health and Medical Research Institute (SAHMRI) and the University of Adelaide's Faculty of Health and Medical Sciences.

With over 17 years of experience in Aboriginal health and wellbeing, Tina has worked in a variety of roles across research, education, clinical practice, project management, and leadership. Her expertise spans social work, counselling and psychotherapy, Aboriginal and Torres Strait Islander community engagement, and Indigenous methodologies. Tina's research focuses on Aboriginal and

Torres Strait Islander social and emotional wellbeing, mental health, and the social determinants of health.

Throughout her career, Tina has been deeply committed to culturally responsive social work practices, particularly in addressing the ongoing challenges faced by Aboriginal and Torres Strait Islander communities. Her work has been shaped by her personal experiences, and she believes social work is critical in addressing systemic inequities, such as colonial violence, racism, and the disproportionate impact of social issues on her community. She emphasises the importance of culturally responsive social work at both the individual and systems levels to promote wellbeing and support positive change.

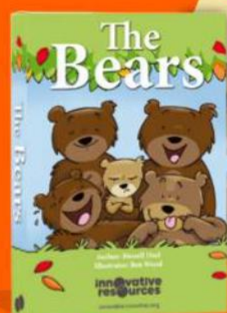
In the past five years, Tina has focused predominantly on Aboriginal and Torres Strait Islander health research, specifically exploring social and emotional wellbeing and the social determinants of health. She has always drawn on her social work training and clinical experience to challenge Western biomedical approaches to health care.

By working closely with communities and health services, Tina aims to generate practice-based evidence for models of care that are more responsive to the social and cultural needs of Aboriginal and Torres Strait Islander peoples.

Looking ahead in 2025, Tina is excited about the growing recognition of social work, particularly in light of upcoming developments such as the discussion of social work in the federal election, the introduction of social worker registration in South Australia, and new social work research projects. These developments highlight the increasing value of social work in addressing the pressing challenges within communities.

Tina also advocates for the growing number of Aboriginal and Torres Strait Islander social workers, encouraging them to recognise their worth and value within their communities. She reminds individuals considering a career in social work that it offers diverse opportunities and provides essential tools, skills, and resources to support families and communities.

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ABOUT THE AUTHOR

Susan Gair is the current Editor of *Australian Social Work*, and Adjunct Associate Professor at James Cook University, Townsville, Queensland.

Highlights from the Australian Social Work Journal

Australian Social Work has recently highlighted a range of research looking at social work and Aboriginal and Torres Strait Islander communities. AASW members get [free access to this journal](#). Take advantage of this today.

INVITED COMMENTARY

Aboriginal Children in Aboriginal Care: A New Approach to Self-determination in the Care and Protection of Children by Muriel Bamblett.

Embarking on a journey towards Guardianship takes courage. It requires resilience and resolve to make difficult decisions that the community might not always agree with, but these decisions are necessary and right.

Following legislative amendments to section 18 of the Children, Youth and Families Act 2005, the Aboriginal Children in Aboriginal Care program in Victoria provides authorised Aboriginal Community-Controlled Organisations with the legal responsibility for Aboriginal children or young people who have been placed on a Children's Court protection order. The aim of the program is for Aboriginal people and organisations to have authority and control over decisions that affect their children.

FEATURED ARTICLES

The Non-Indigenous Educator Teaching Australian Aboriginal Content in Social Work Education by Bindi Bennett.

Social work in Australia requires educators to teach skills, knowledge, and Aboriginal ways of knowing, doing, and being to ensure graduates are culturally responsive and potential allies when working with Aboriginal peoples and communities. This education should include an accurate teaching of Australian Aboriginal history and sharing of Aboriginal knowledge.

Currently, non-Aboriginal educators are more likely to teach Aboriginal content, which can foreclose opportunities for Aboriginal educators. On the surface, this appears to be a continuation of colonialism, where

white privileged groups speak for, speak about, and occupy the educational spaces related to Australian Aboriginal peoples and other minority racial groups. This article explores the experiences of non-Aboriginal educators and examines how social work education can contribute to the processes of decolonisation, creating culturally responsive practitioners.

Indigenous Data Sovereignty: What Can Yarning Teach Us? by Luke Cantley.

Yarning is a trusted, culturally integral way of creating new knowledge, distinct from focus groups. This reflection piece by an Aboriginal researcher, using Indigenous Standpoint and auto-ethnographic approaches, explores how yarning interfaces with Indigenous data sovereignty.

Through themes of deep listening, tension, relationality, and power—drawn from memories and lived experiences—the article argues that yarning upholds the rights of Indigenous data sovereignty. It enables intimacy, connection, and recognition of cultural knowledge holders.

[Access Australian Social Work through MyAASW to read more.](#)

Vale



DR LINETTE HAWKINS

2024

Dr Linette Hawkins is recognised nationally and internationally as a leader in social work field education.

It is with a heavy heart that we share the sad news of the passing of Linette Hawkins, our Adjunct Research Fellow, for Social Work, Community and Human Services in the Institute of Education, Arts and Community at Federation University. Many of our staff and students have got to know Linette over the past years as our Adjunct Research Fellow.

We have been extremely fortunate to have had Linette's wisdom, expertise and nurturing guidance in the development and operation of a robust social work field education teaching program here at Federation University.

She has guided the social work field education of over 2,000 social work graduates in Victoria as well as leading ground-breaking innovations, including the introduction of off-site supervision and standardised learning assessment plans, in current use throughout Victoria. Many of our excellent sessional field education staff have been recruited and supported by Linette.

Linette has made a profound contribution to the social work and

community development discipline. Linette's most recent inspirational book is *Recontextualising Social Work*, co-edited with Jacques Boulet from Borderlands.

Linette is remembered as an excellent researcher and writer, and Professor Jenny Martin and Linette were just about to launch a study on gender equality in higher education together that Jenny will continue in Linette's memory.

Jenny Martin

Like many of my colleagues, it was with extreme sadness and shock that I learnt of Linette's passing. Linette worked in the social work team at RMIT University for many decades, first at Philip Institute and then RMIT. I had the honour of working with Linette for 15 years and everyone knew she was the go-to field education person for anything field-ed related.

Linette's networking skills were legendary, and she knew everyone in the field, a walking historian for all things social work, social work education related and the AASW. In the time before universities had huge 'work integrated learning' teams, Linette did it all. She was a most genuine person and not only talked the talk, but walked

the walk, with her fierce social justice beliefs and love of social work guiding her practice.

Linette was at the forefront of the Victorian Combined Schools of Social Work - a committee which existed to ensure that all social work placements were shared amongst the Universities and relationships between the social work academics were strong and respectful. That was Linette. After leaving RMIT several years ago, Linette was in huge demand from organisations and other Universities for her experience and skills. Linette always had projects on the go, research, writing, networking - she never stopped. Linette was also an intensely private person and would not want me going on here, but I will always see her walking through the halls of RMIT in her black flowing dresses, with her 'touch of green' scarves and green nail-polish. She will be very much missed.

Christine Craik

Photo courtesy of Victoria Ponsford.



DR PATRICIA FRONEK

26 May 1960 - 18 July 2024

As a practitioner, researcher, and educator Dr Patricia Fronek was deeply committed to social work values including social justice, human rights, and respecting and valuing the worth and self-determination of all people, especially women and children in surrogacy and adoption.

This obituary honours the outstanding professional achievements of Dr Patricia Fronek, a career-long member of the AASW. Tricia graduated from the University of Queensland with a Bachelor of Social Work in 1981 and a Doctor of Philosophy in 2009. She worked in various social work roles in Queensland Health over many years, most recently in the Spinal Injuries Unit at the Princess Alexandra Hospital. She was appointed to Griffith University in 2010 and was the first Program Director for social work at the Gold Coast campus.

She was passionate about social work's value to society and research-informed public policy as opposed to policy informed by ideology, personal opinions or political influence. Tricia's service to the profession included terms as President of Australian & New Zealand Social Work & Welfare Education & Research (ANZSWWER)

and creator and producer of Podsocks (the podcast for social workers on the run).

Tricia's research focused on children's rights in intercountry adoption and surrogacy, social work in health emergencies, disability, and social work education. She published over 50 academic papers, books, and book chapters, plus many reports, submissions, book reviews, conference presentations, and blogs. The journal *Nature* (Futures series) published her sci-fi story *The Interruption* in 2012 (<https://www.nature.com/articles/482268a>).

Tricia's work as a leading voice for ethical intercountry adoptions aimed to ensure better alignment with international standards on the rights of children to care and protection. She was a consultant to the Government of Cambodia, UNICEF and the Child Identity Protection organisation in drafting policy for the prevention of family separation, foster care, and adoption from 2016 to 2020. Based on her professional and academic experience, Tricia was a member of the international group that led the drafting of the Verona Principles, published in 2021, for the protection of the rights of the child born through surrogacy. Tricia's contribution to Verona was leading the drafting of Principle 5

on pre-surrogacy protections and Principles 7, 8 and 9 on consents from different parties. She also served as academic advisor for the National InterCountry Adoption Advisory Group for the federal Attorney-General's Department.

Patricia was dedicated and tireless in her advocacy efforts on children's rights. She is fondly remembered by many colleagues and will be greatly missed by her friends and family.

Clare Tilbury, Lynne Briggs and Patricia Dorsett.

Photo courtesy of Griffith University.

LearnX Awards

AASW's CPD has been honoured with three prestigious 2024 LearnX Awards, in November 2024.



Platinum Winner
Best Talented Team
for our AASW Learning & Development Team



Platinum Winner
Best EdTech
for the AASW Mentoring Program



Diamond Winner - Best Learning Model for Blended Learning (Industry Specific)
for the AASW "Introduction to Best Practice for Supervision" Learning Program

The LearnX Live! Awards is an international program that recognises excellence in learning, development, and talent management across various industries. Established in 2008, the awards celebrate innovative projects and solutions that deliver best-practice learning and business value. It's not a coincidence that these are some of our most popular programs.



Photo left to right: Chand Wickramanayake, James Kapuranovski, Helen Garard, Chintan Bharwada, Vijay Mathpal and Olákúnlé Adégbólá celebrating the win in November.

AASW CELEBRATES

These remarkable achievements highlight the dedication and innovation of our Learning & Development Team, the steadfast guidance and support of AASW Leadership, and the invaluable contributions of over 90 facilitators, presenters, and subject matter experts.

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FEATURE ARTICLES

Why social workers need to understand and undertake Aboriginal and Torres Strait Islander Mental Health First Aid (AMHFA)

AJ WILLIAMS-TCHEN

Award-winning social worker, AMHFA instructor and Wiradjuri man AJ Williams-Tchen is often asked, "Why is there a specific MHFA course for Aboriginal people?" This article is his response.

ABOUT THE AUTHOR



AJ Williams-Tchen (Wiradjuri) is an award-winning social worker, youth worker and nurse with over 30 years of experience in Aboriginal health and mental health. He was the AMHFA Program Manager at MHFA Australia from 2010-2016.

He founded Girraway Ganyi Consultancy in 2005. He provides AMHFA, MHFA, Cultural Awareness, and Cultural Mentoring in schools and workplaces and a range of reconciliation services. He is also a podcaster. AJ was awarded the AASW 2021 Aboriginal Social Worker of the Year and the 2023 Allied Health Social Worker of the Year, and is a 2024 Victorian Australian of Year nominee.

I have been an AMHFA Instructor for the past 16 years. This month (August 2024) I facilitated my 838th course. I have trained over 9,450 participants nation-wide. Participants have been First Nations people (clients, Elders, family members, community members and health professionals) and non-Indigenous people (allies, family members and health professionals). Although all participants come to these courses with a variety of experiences (lived experience of mental unwellness, being a loved one caring for a person with lived experience, carers, health professionals, and mental health professionals), the three most common themes that I see is that most participants:

1. have low mental health literacy around First Nations people
2. that culturally specific, trauma-informed care in terms of initial responses and actions to assist remain unknown or not acknowledged in practice
3. that First Nations participants report experiencing high incidents of culturally unsafe practices by non-Indigenous health / mental health professionals despite workers experience and level of knowledge in mental health in general.

Let's explore each one of these a little further.

In Australia, according to BeyondBlue (2024) around 1 in 2 people will struggle with their mental health during their lifetime; 1 in 4 people will be affected by anxiety disorders; 1 in 7 people will be affected by depression; and 1 in 6 people will have suicidal thoughts within their lifetime.

Page et al. (2022) explains that "Indigenous peoples in Australia have up to 3.3 times greater prevalence of common mental disorder diagnoses than the general Australian population" and AIHW (2024) explains that "First Nations male rates of suicide are 2.6 times that of non-Indigenous males", and "First Nations female rates of suicide are 2.5 times that of non-Indigenous females". It is because of these alarming figures that such organisations as Livingworks, Centre for Rural & Remote, and Mental Health First Aid Australia have developed specific First Nations courses around mental health, suicide, gambling and NSSI.

It is often reported by First Nations people (lived experience & family) that emergency departments in hospitals, community health services, and at times Aboriginal Health Services, are not culturally safe environments for unwell First Nations people.

Historically, not all health and mental health professionals have been trained in mental health, nor have they undertaken First Nation specific cultural awareness training. Many nurses, doctors and social workers who attend my trainings will state to me that during their initial training they had very little learnings in mental health, as well as very limited training in working with Aboriginal and / or Torres Strait Islander patients.

They do acknowledge that trainings received often relate to social determinants and statistics around health and wellbeing of First Nations people, but very little or nothing was taught to them around practical and basic skills in working with or communicating with Aboriginal people, and their families. This is often results in miscommunications, inappropriate questioning, shaming and blaming of the client and / or their family, client and family walkouts, mistrust of service and support provision, as well as a willingness to seek out professional support when future episodes of mental unwellness occur.

Lack of cultural awareness also raises issues around knowledge of actual First Nations histories, and how recent this history actually is. Many professionals cite transgenerational trauma being a result of "Stolen Generation issues" and / or "as a result of colonisation". I am not downplaying either of these responses. I will however question whether true and effective trauma-informed practices can occur if professionals working with our communities are just focusing on these two as historical events.

Transgenerational trauma for individuals in 2024 is also caused by the stories told today by the actual real life experiences of family members who are still alive right now, who have experiences of life on missions and reserves, have had their children forcibly removed (as these practices lasted way into the mid-70s), have had negative experiences themselves with hospitals and health professionals, and have had their own personal "removal" from family, community and culture. These current stories and experiences shared within families contribute to a current wave of trauma: one that is often overlooked by professionals resulting in responses and actions that

are not culturally safe or appropriate in nature, in content and in alignment with trauma-informed theory and practice.

As health / mental health professionals who work in mental health and have been trained in psychology, we may at times forget that our clients have not been trained in this. First Nations people often report that health professionals talk to them in professional terms, using medical and psychological jargon and do not explain clearly diagnoses, treatment plans, follow-up instructions or referral pathways. Without this knowledge clients do not follow through on things such as follow-up appointments. We as social workers need sometimes to learn how to "unclinicalise" how we speak to First Nations clients or clients whose English may not be their first language.

Many times in courses, I have stopped a Mental Health Social Worker or Psychologist as they explain to the group what psychosis is. I often state, "I understand you because I have 30 years of experience in mental health ... but I want you to explain it me as if you were talking to an Aunty in the community, who has bought her unwell grandson in to see you." I would say that at this point most of the workers look at me, smile and say, "I now get what you are saying." If there is an Aboriginal Elder in the room or an Aboriginal participant, they are often the first ones to jump in and say things like, "Just like AJ said, this is exactly what happens."

What I personally really like about the First Nations-specific Mental Health First Aid courses:

- › Aboriginal & Torres Strait Islander Mental Health First Aid Edition 3.1 (2 day course)
- › Youth Aboriginal & Torres Strait Islander Mental Health First Aid (2 day course)
- › Talking about Suicide: AMHFA (5 hours)
- › Talking about Gambling: AMHFA (5 hours)
- › Talking about NSSI: AMHFA (5 hours)

is that they are designed to be delivered only by First Nation MHFA Instructors (for cultural knowledge and safety reasons) and are to be delivered

in a yarning style that is suitable for community, family and allies. They are not clinical courses in any way, nor are they cultural awareness courses for non-Indigenous people.

They provide evidence-based, Delphi-studied guidelines in assisting an Aboriginal person or Torres Strait Islander person who is experiencing a mental health crisis, or experiencing a worsening of a known condition, and providing culturally appropriate communication techniques to help the person in a crisis and / or to get them to professional support.

Each course uses the Action Plan (ALGEE) to highlight the "how to have conversations", and depending on which course, works through the disorders of anxiety, depression, substance use, eating disorders, psychosis, gambling, suicide and non-suicidal self-injury. Case discussions, videos, stories shared, and activities have all been endorsed by Aboriginal people involved in the Delphi-Studies, direction and filming of videos, and the development of the training manuals and workbooks.

The First Nation-specific MHFA courses are a way to learn how to break down mental health literacy so that non-professional Aboriginal people and Torres Strait Islander people can understand and participate in the patient journey, as a service user / client or a person undertaking a MHFA discussion.

A few quotes from mental health professionals who took my latest course follow:

💬 I thought I understood trauma-informed practice, but without understanding the recent history of Aboriginal people I think I often miss where the true trauma is coming from.
(Psychologist 1)

💬 After doing this course, I realised how culturally unsafe I may be in my practice. Sure I am the first to admit that I don't know what I don't know ... but doing this course I realised how much I didn't know.
(Psychologist 2)

💬 I become so entrenched in my work talking to other professionals about mental illness and always

talking in discipline-orientated speech. This course was an eye opener in realising that some of my client's non-compliance might actually be a result of something that I have actually done or said or not done or said.

(Mental health social worker 1)

“ This course showed me the real understanding of the history of social work with community. I cannot just expect to walk in as a social worker and have a First Nation family want to work with me, no matter how desperate the situation may be. I understand so much more of how the history of my own profession has caused trauma with families, yet by acknowledging this upfront in myself and learning new ways to work can help reduce the trauma and current fear of First Nations patients and family. I have learnt so much in this course.

(Mental health social worker 2)

If you have not done an AMHFA course, think about doing one soon. MHFA is just a conversation, but it can be a conversation that can save lives. AMHFA is specific for First Nations people who have a traumatic past, currently live with trauma, have higher rates of mental illness, are less likely to seek professional help, and when they do, need culturally appropriate trauma-informed care, support and information. Mental Health First Aid Australia is the author of all of the above-mentioned courses. I am a Licensed MHFA Instructor who is permitted to deliver not only the First Nations-specific courses, but all Standard and Youth versions. The 14-hour courses can be delivered face to face, and there are Blended (e-Learning and Instructor-led) modes of delivery. To do a MHFA course, including any of the above, go to the MHFA Australia website at www.mhfa.com.au.

REFERENCES

AIHW (2024) Deaths by suicide among First Nations people, Suicide & self-harm monitoring, <https://www.aihw.gov.au/suicide-self-harm-monitoring/data/populations-age-groups/suicide-indigenous-australians>, accessed 8 August 2024.

BeyondBlue (2024) Learn about mental illness, <https://www.beyondblue.org.au/mental-health>, accessed 7 August 2024.

Page IS, Ferrari AJ, Slade T, Anderson M, Santomauro D, Diminic S. Estimating the difference in prevalence of common mental disorder diagnoses for Aboriginal and Torres Strait Islander peoples compared to the general Australian population. *Epidemiol Psychiatry Sci*. 2022 Jun 21;31:e44. doi: 10.1017/S2045796022000233. PMID: 35726614; PMCID: PMC9228582.

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Advocacy update

The AASW is committed to driving meaningful change through our advocacy, addressing key social issues and championing the vital role of social work in our communities.

We're advocating for:

- National registration of social workers via NRAS
- NDIS advocacy and social worker recognition
- Call for full implementation of Family Violence Royal Commission recommendation 209
- Better Access industry Liaison Group
- Private health insurance
- Support for greater regulation of social workers in primary care
- National Dementia Clinical Guidelines
- Advocacy on compensable schemes
- AMHSW survey
- Development of submission for Australian Government Review of PHNs

REGISTRATION

The national registration of the social work profession remains a key priority for the AASW. Social workers delivering services to South Australian service users will be required to register under the Social Workers Registration Scheme from 1 July 2025. The registration scheme is overseen by the Social Workers Registration Board of South Australia, part of the Government of South Australia. You can find updates on the scheme on their website here. [Social Workers Registration Scheme](#)

To include social workers in NRAS, Australian state and territory health ministers and heads of health departments must agree that the

profession meets established criteria for inclusion in the scheme. We have been working on collating evidence to meet the criteria as specified by government. [Australian Health Practitioner Regulation Agency - Policy directions and guidance](#)

The AASW is engaging with Health Ministers and other related stakeholders to seek their endorsement to initiate this process.

This includes making submissions to the *Independent review of complexity in the National Registration and Accreditation Scheme*, led by Sue Dawson. Crucially, the review will consider how the NRAS can expand and grow to meet future needs. A final report is expected to be handed to health ministers in April 2025. Further information: [Independent review of complexity in the National Registration and Accreditation Scheme | Australian Government Department of Health and Aged Care](#)

NATIONAL INSURANCE DISABILITY SCHEME (NDIS)

In September 2024, the AASW established a working group to provide guidance to the AASWs on the major changes being implemented by government to the NDIS scheme to return to its original vision and reduce costs.

- Advocacy meetings with the Minister's Advisor for NDIS (Dec 2024); the Hon Bill Shorten MP (Dec 2024) and CEO, Service Design & Improvement, NDIA to raise member concerns about barriers to working effectively with NDIS participants.
- Development of new resources to support members to advocate directly to NDIA planners and

coordinators social workers to understand the scope of social work in participant care.

- Making submissions relating to the new legislative framework to implement the changes, NDIS pricing reform, Foundational Supports, NDIS registration requirements and new practice guidelines.

FAMILY VIOLENCE

In November 2024, the AASW called on the Victorian minister to commit to the full original implementation of Recommendation 209 of the Royal Commission into Family Violence.

In 2016, the Royal Commission's final report called for *mandatory minimum qualification requirements for specialist family violence practitioners to hold a Bachelor of Social Work or equivalent qualification*.

Letters have been written to the Minister for Prevention of Family Violence and requesting a meeting. AASW advised that it is more than eight years since the commissioners handed down their report and we are concerned the Victorian Government has signalled it is walking away from its obligation for specialist family violence workers to be appropriately qualified.

BETTER ACCESS INDUSTRY LIAISON GROUP

For AMHSWs, the integrity of the MBS mental health items for the Better Access scheme and Mental Health Treatment Plans (MHTP) are important to ensure patients are referred to, and receive, the mental health care they need.

The AASW is a member of the Better Access Industry Liaison Group, which has been established by the Australian Government to provide advice on the proposed legislative changes to the MBS mental health items to commence from 1 November 2025. More information about these changes can be found here: [Mental health](#)

Key focus areas for AASW include the following changes:

- MHTP review and mental health consultation MBS items being removed and replaced with the use of general attendance items
- Patient can only be referred for treatment under Better Access by a GP if they attend their registered MyMedicare practice or their 'usual GP'. This is concerning as many people do not have a 'usual GP' nor are registered for MyMedicare, for many reasons
- Concerns regarding the mental health assessment tools used by GPs to enable them to refer patients to the most appropriate service.

PRIVATE HEALTH INSURANCE

The AASW has consistently advocated to Private Health Funds of the value that AMHSW bring when they are included as providers of mental health services for members with extra's cover.

This advocacy resulted in the AASW signing an Ancillary Services Deed with the Australian Regional Health Group (ARHG) in late 2024. ARHG is the voice of private health care for regional Australians and provides an ancillary provider accreditation service for its 30 member funds. This arrangement enables AASW to work with more private health funds to recognise AMHSWs and pay benefits for mental health services provided by AMHSWs. Currently we have Phoenix Health Fund, St Lukes Health Insurance and TUH - Teachers Union Health Fund on board.

SCOPE OF PRACTICE REVIEW

AASW welcomed one of the findings in the Scope of Practice final report, released in November 2024, that social work should be a priority profession for strengthened regulation.

The Federal Minister for Health and Aged Care commissioned the report to investigate how health professionals could work to their full scope of practice in primary care. The review was a recommendation of the *Strengthening Medicare Taskforce*.

The AASW made multiple submissions to the review. We argued that the inclusion of social workers in NRAS is the most effective and foundational reform that would support social workers to work to their full scope of practice.

The final report identified social work as one of seven priority self-regulated profession for strengthened regulation. The other six self-regulated professions are: dietitians, sonographers, audiologists, exercise physiologists, speech pathologists and counsellors.

NATIONAL DEMENTIA CLINICAL GUIDELINES

Monash University has reached out to the AASW to participate in the review of the 2016 NHMRC approved Australian Clinical Practice Guidelines and Principles of Care for People with Dementia. This is a two-year project that engages multidisciplinary clinicians, experts, consumers and organisations across the spectrum of care for people with Dementia.

The AASW together with a group of members are providing input into the guidelines development process through a range of consultation webinars and targeted meetings. Engagement is important as this impacts the work of social workers across aged care and NDIS.

ADVOCACY WITH COMPENSABLE SCHEMES

The AASW met with stakeholders from several worker's compensation schemes and transport accident schemes to advocate on behalf of social workers and Accredited Mental Health Social Workers. Key issues raised include fee parity with other mental health service providers and recognition of scope of practice and value of service provision within these schemes.

Phoenix Australia will be undertaking a Mental Health Maturity Assessment of TAC's approach to supporting clients with mental health complexities. Outcomes are expected October 2025. The AASW are keen to engage with this process. Please get in touch with the [social policy and advocacy team](#) if there is something you would like to discuss.

AMSHW SURVEY

We are inviting AMHSW members to influence our advocacy by contributing to the working group for the Accredited Mental Health Social Worker survey in 2025. This survey is vital for collecting updated evidence and data that underpins our policy and advocacy work for AMHSWs. Find out more and take part [here via an EOJ](#).

HAVE YOUR SAY ABOUT THE AUSTRALIAN GOVERNMENT REVIEW OF PHNS

Primary Health Networks (PHNs) were established by the Australian Government in 2015. PHN policy settings have not changed significantly since they were established. The Department of Health and Aged Care is initiating a [review to examine the PHN Program business model](#) in the context of the changing operating environment and to ensure it is fit for purpose.

The AASW will be developing a submission. To find out more or provide your input, log on to MyAASW [here](#)

The AASW is dedicated to driving meaningful change through our advocacy efforts, addressing key social issues, and championing the essential role of social work in our communities. We will continue to keep you informed on our progress in these important advocacy initiatives, and let you know about chances to get involved.

Have your input via 'Have Your Say' in MyAASW. The AASW Social Policy and Advocacy team regularly post opportunities for you to inform our work and provide feedback.

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Spotlight: meet your new board directors

Bindi Bennett was elected as a new AASW board member, and **Chris Hannan** as the new National Vice President in November 2024.



Professor Bindi Bennett is a Director of AASW and a Gamilaroi woman from Northern NSW, currently living and working on Jinibara Country in Queensland. She is a social justice scholar, activist, and passionate advocate for cultural responsiveness in social work. Bindi has over 17 years of experience in mental health and youth health, advocating for young people from disadvantaged backgrounds. She is a former member of AASW's National Research Committee and has been involved in academia since 2013. Bindi is dedicated to promoting diversity, inclusion, and representation within social work, particularly for Aboriginal and Torres Strait Islander peoples and other diverse groups. As a tutor for First Nations students, she helps foster self-belief and guides them toward success in the profession. Bindi believes lived experience is crucial in deconstructing barriers and creating more equitable systems.



Chris Hannan is the National Vice President of AASW. Raised on a property in Queensland, she now lives in a small village near Hobart, Tasmania, where she is raising her two children. With almost 25 years as a social worker, Chris has worked across various sectors, including government, not-for-profit, and private practice. She has a background in mental health, disability, and family violence, and is a passionate advocate for social work, particularly regarding pay parity and social work registration. Chris stands for a diverse, inclusive AASW that values all members and fields, and she is committed to ending student poverty and ensuring a transparent, accessible AASW. Her personal experience as a family violence survivor and carer shapes her advocacy for social justice.

Learn more about the AASW board [here](#).

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An Indigenous strengths-based theoretical framework (extract)

JACOB PREHN

This article (extract here) highlights the urgent need to shift from deficit-based thinking to a strengths-based approach when engaging with Indigenous Australians in practice, policy, and research. It introduces a framework that respects Indigenous cultures and fosters culturally safe, strength-based practices. For social workers, this approach is essential in challenging colonial legacies and ensuring respectful, empowering collaborations with Indigenous communities.

To understand the deficit narrative surrounding Indigenous people in Australia, it is essential to delve into its historical origins and underlying purpose. In Australia, the persistent structure of colonisation seeks to justify its existence by marginalising Indigenous people and constructing narratives that depict them as “inferior” compared to white Anglo-Celtic Australians (Wolfe, 1999). This distorted justification finds its basis in perilous settler-colonial ideologies, including concepts of racial hierarchy, social Darwinism, and whiteness (Dudgeon, Wright et al., 2014; Frankenberg, 1993; Moreton-Robinson, 2004). The deficit narrative and damaging characterisation of Indigenous people have been central to the relationship with Anglo-Celtic “settlers” and, later, other Western Europeans, and non-Indigenous Australians.

One notable example where the deficit narrative played a purposeful role is evident in the intersection of oppressive colonial legislation with deficit narratives, specifically seen in the forced removal of Indigenous children from their families, commonly known as the “stolen generation” (Dodson & Wilson, 1997). The belief that Indigenous families were incapable of adequately caring for their children has been one of the most profoundly damaging deficit narratives. The process of forcibly separating Indigenous children from their families to assimilate them into white,

non-Indigenous Australian society is documented in the Bringing Them Home report (1997).

A second example of deficit narratives concerning Aboriginal people, propagated by the predominately white non-Indigenous Australian nation-state, is evident in contemporary policy (Fogarty, Bulloch et al., 2018). For instance, the “Closing the Gap” initiative focuses on health and wellbeing disparities between non-Indigenous society and Indigenous people (Bond, 2005). Interestingly, in Aotearoa (New Zealand), a similar policy framework was abandoned in the 1990s in favour of a strengths-based approach to improve health and wellbeing outcomes and challenging the Western European deficit narrative regarding Māori (Comer, 2008). However, in Australia, as Fogarty, Lovell et al. (2018, p. 2) explain: “There has been far less work in the Australian context on the subtlety of deficit discourse, the elements of its construction and reproduction, or its potential impacts on the health and wellbeing of Aboriginal and Torres Strait Islander people”.

Some scholars have scrutinised the adverse effects of a deficit approach on the health and wellbeing of Aboriginal and Torres Strait Islander people. Thurber et al. (2020) emphasised the issues associated with a deficit approach in statistical research, as

it contributes to the construction of damaged identities that become self-fulfilling prophecies. Further, Fogarty, Bulloch et al. (2018) and Fogarty, Lovell et al. (2018) have delved into how deficit discourses persist in policy and impact areas such as health and wellbeing. To counter the deficit narrative surrounding Indigenous people in Australia, scholars propose the adoption of a strengths-based approach to reframe and provide solutions to the problems at hand.

To keep reading log in to [MyAASW](#).

Appendices and references available through Australian Social Work via [MyAASW](#).

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Member spotlight: Nathan Ryan

Social Work Focus interviewed Nathan and we were intrigued with his journey, as told to Dr Matt Loads.

Nathan Ryan's journey into social work is a staggered one. In 2019, he was working with St Vincent's Hospital's after-hours homeless health team, running clinics across Sydney's inner west. "We saw people with complex needs—physical and mental health issues—and provided specialist referrals," he explains. Initially pursuing a Bachelor of Liberal Studies to meet prerequisites for a graduate certificate in psychology, Nathan discovered social work along the way. "I completed the first semester in 2019 and loved it. By early 2020, COVID had arrived, and the rest, as they say, is history."

His placements were equally transformative: one at the Children's Court Clinic in Parramatta, where he became the first Aboriginal social work student, and another at WEAVE Youth Services. Despite the challenges posed by COVID restrictions, he embraced telehealth supervision and engagement, cementing his commitment to the profession.

As a proud Tubbagah Wiradjuri person from Dubbo, Nathan felt a deep calling to support Aboriginal people in mental health. "I wanted to combine my mental health background with social work to work more effectively with Aboriginal people," he shares. The desire to be part of a profession that values its members also drew him to the AASW.

Since joining the profession, Nathan has been based in Sydney, where he now works as a mental health officer at the Aboriginal Legal Service (ALS) in Redfern. "Redfern has a long history of Aboriginal resistance and self-determination. It's an honour to

work in a place with such deep cultural and historical significance," he says. Urban practice comes with its own challenges. "Sydney is an expensive place, and the gap between powerful and powerless structures is stark. Gentrification has displaced many Aboriginal people. It's heartbreaking to see clients struggling to stay in the communities they love."



I wanted to combine my mental health background with social work to work more effectively with Aboriginal people.

For Nathan, reflective practice is crucial. "It's something I engage in daily, whether in the moment or after events. Supervision—both internal and external—has been essential for navigating the realities of urban discourse," he explains.

To those considering urban Aboriginal mental health, Nathan offers heartfelt advice: "Respect the resistance movements born out of places like Redfern. Take things slow—acknowledge that others may not fully understand the cultural context. And never skip an Acknowledgement of Country; it's a powerful way to challenge the 'no voice' discourse."

In his role, Nathan works tirelessly to enhance understanding of social work's impact. "I collaborate closely with

solicitors and clients at the ALS, attend forums with Legal Aid, and engage with local Aboriginal organisations. It's about connecting people to the support they need while amplifying the role of social work in the community."

In reflecting on his practice, Nathan underscores the importance of community engagement. "While Sydney is vibrant and diverse, there's an elephant in the room—where are the Aboriginal people? Many are either in jail or have been pushed out of Redfern." Through his work, Nathan is driving change and ensuring that the voices of Aboriginal people are heard in an increasingly urbanised landscape.

•

On Demand Learning and Continuous Professional Development

Focus on Aboriginal and Torres Strait Islander content in AASW's on demand library.

Our learning library offers specialised topics on working with Aboriginal and Torres Strait Islander peoples facilitated by experts from the community.

It is part of over 180 titles and topics designed for social workers and allied health practitioners, accessible anytime and anywhere, all available through the enhanced AASW On Demand Learning platform.



Cultural Responsiveness Program

The AASW has sourced a learning package from Indigenous Allied Health Australia (IAHA) to provide social workers with accessible CPD in cultural awareness and cultural responsiveness. This course offers two levels of learning with a total of 10 hours of CPD across the package.

CPD Hours: 10
★★★★★ 4.7/5 stars
(feedback from members)

"This was exceptional training and should be mandatory for social workers."

AASW member

De-colonising Social Work: Whiteness as Risk in Practice

CPD Hours: 1.5
★★★★★ 4.1/5 stars

Inclusive and Empowering Aboriginal Child Protection Practice

CPD Hours: 1.5
★★★★★ 4.6/5 stars

Working with Older People Who Experienced Childhood Trauma in 'Care'

CPD Hours: 1
★★★★★ 4.7/5 stars

Working with Aboriginal and Torres Strait Islander People and Communities

CPD Hours: 1.5
★★★★ 4/5 stars

Weaving Stories Family Violence Program

FREE
for
members

In this compelling recording, Lee George discusses the Weaving Stories: Our Women's Journey of Healing program. This family violence program centres on culturally safe and trauma-informed approaches to working with Aboriginal and Torres Strait Islander women.

The program is led by Lee George, a Wulgurukaba woman from Yubanun country, Magnetic Island in North Queensland, who has been a practising social worker since 2009.

Postcards from Practice: Learnings from Practice with Violence, Abuse and Trauma

CPD Hours: 0.5

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Be Brave, Make Change: Examples from Rural, Regional, and Remote South Australian Social Work Practice

CPD Hours: 1

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The Impact of Social Work in Rural, Regional, and Remote Areas

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Stay'n Deadly and Stay'n In: An Innovative Model of Care to Ensure Aboriginal Patients Receive Health Care

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Cultural Responsiveness: Yarning and Dadirri as a Skill Set for Social Work

CPD Hours: 0.5

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Sharing the care:

one Aboriginal community-controlled organisation's approach to out-of-home care of Aboriginal and Torres Strait Islander children

CHAY BROWN, MAREE CORBO, STEVE AXTEN, SAMANTHA JEFFREE, SAMANTHA SWAN, KAY WASON, SIDDHARTH SHARMA, SHARON AUSTIN & SHINE TILTSEN



ABSTRACT

This article critically examines safety and innovation in out-of-home care, with a particular focus on addressing the entrenched overrepresentation of Aboriginal and Torres Strait Islander children and young people in the child welfare system. Grounded in the practical insights of safe house workers and managers, the purpose of this article is to share an innovative practice case study—the Tangentyere Safe House in Alice Springs, Northern Territory, Australia. As a case study within an Aboriginal Community-Controlled Organisation, Tangentyere Safe House emerges as a site for understanding the confluence of cultural safety, familial connections, and strategies to mitigate overrepresentation. Key themes explored include promoting cultural safety and supporting connections with the family of origin. Through a methodological lens that privileges practice-based knowledge, this article captured the on-the-ground experiences of those actively engaged in child safety. The findings underscore the innovative practices employed by Tangentyere Safe House in navigating out-of-home care within an Indigenous context to argue for a holistic and culturally informed approach to child protection interventions, drawing attention to the practical strategies employed by safe house workers. The article showcases the central role of Aboriginal Community-Controlled Organisations in providing care alongside families in out-of-home care.

IMPLICATIONS

- The innovative approach of the Tangentyere Safe House highlights the importance and unique role of Aboriginal Community-Controlled Organisations in out-of-home care.
- The role of Aboriginal Community-Controlled Organisations should be formally recognised in the Aboriginal and Torres Strait Islander Child Placement Principle hierarchy.

Frontline safe house workers' knowledge and expertise regarding Aboriginal and Torres Strait Islander children in out-of-home care can inform all stakeholder involvement including police interventions.

EXTRACT

Key Components of Tangentyere Safe House Approach

TCAC approach is deeply rooted in self-determination, community control, and a human rights perspective on child welfare. The aim of the Safe House Approach is to keep children connected to their community and culture, embodying the principle that it is a right to be brought up within one's community. This approach is captured through the following practices and principles:

- **Collective Care and Relational Practices:** shifting towards a collective care model prioritises the wellbeing of children and fosters a positive work culture among carers. This collective care approach is grounded in the recognition of the importance of the safe house team's stability and wellbeing, as it directly impacts the care experience for the children.
- **Structuring Safety:** trust and safety within the team and with the children through relational approaches, such as shared meals and individual support sessions, is practised. This is supported by the development of resources to educate children and carers about their rights and the system they are in.
- **Bringing Staff Along:** carers are empowered through training in therapeutic practices and building their capacity to provide effective care. Safe house workers' safety,

wellbeing, and professional development is invested in, out of recognition that they are central in the children's lives. Through this approach, a family-like atmosphere is created.

- **Culture in Everything:** cultural elements are integrated into all aspects of care, from physical surroundings to activities, to reflect the cultural identity of the children. Culture and healing are intertwined, so the safe house workers regularly plan and engage children in activities like bush trips, storytelling, and art. One example is the "Passing down the knowledge" event where children are taken out bush to spend time on Country with Elders undertaking cultural activities.
- **Replication of Familial Structures:** a rostered model of care mirroring familiar childrearing structures within Aboriginal communities has been adopted. The emphasis is on stability in the carer team, with diverse age groups and a mix of men and women providing care.
- **Sharing the Care:** the safe house advocates for family involvement in the care of children, and, through doing such, challenges historical practices of undisclosed locations and limited family access to children. For example, families are often invited to the safe house to see where their children will sleep, and to spend time.
- **Belonging and Connection:** the safe house maintains a focus on reconnection to community and family reunification as vital aspects of the care journey. The safe house workers provide opportunities for connection and community engagement, as well as providing a nurturing sense of belonging for children in care. One such example was taking families to the local town pool so they could enjoy recreation together.
- **Child's Voice in Decision Making:** children are actively involved in decisions about their care, recognising their agency and autonomy. Workers create opportunities for children


to express their needs and experiences, fostering a sense of security and belonging.

Key Lessons and Considerations

- Our reflection practice and discussions, as safe house workers and managers, revealed several key lessons and considerations for OoHC with Aboriginal and Torres Strait Islander children. In the following themes we present what we as Tangentyere Safe House workers and managers value and believe are central to our work and to addressing the overrepresentation of Aboriginal and Torres Strait Islander children in OoHC

To read further conclusions and analysis on this case study please head to [MyAASW](#) to access Australian Social Work.






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Raising the profile of social work in Australia

Results are in from the AASW's first public education campaign, "Don't Wait," launched mid-2024, which highlighted the unique ways social workers contribute across numerous fields and aimed to raise the profile of social work across Australia. The results have been outstanding - the campaign was seen more than 2.2 million times.

Promoted on social media platforms, we further extended our reach as partner organisations and individuals shared the content across their own platforms. This cross-promotion amplified our message nationwide, effectively engaging the public and healthcare providers.

Featuring real social workers from diverse areas of practice, we created three core videos to address distinct goals:

- "Social Work: We're Here for You" introduced social work as a vital, supportive profession, showcasing the range of fields in which social workers make a difference

- "Mental Health: We'd Love to Help" targeted mental health support specifically, encouraging those in need to seek referrals to social workers
- "Join Us - We Get It" invited social workers to join the AASW, strengthening the profession's collective voice.



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The scale of our reach underscores the campaign's effectiveness in reaching new audiences and educating the public about the vital role of social workers.

"Don't Wait" marks a significant step in raising the profile of social work across Australia, connecting communities with the resources they need and supporting the valuable work of social workers. This campaign has laid a strong foundation for further efforts to increase understanding and respect for the social work profession, especially in the health sector.

You can view the [Don't Wait](#) campaign on AASW's website.

AASW is currently liaising with national broadcasters aiming for the campaign to be aired (at no fee) as community service announcements. We'll keep you updated.

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Navigating professional pitfalls:

the crucial role of AASW professional indemnity insurance and public and products liability insurance

All AASW members benefit from comprehensive Professional Indemnity Insurance and Public and Products Liability Insurance as part of their membership package. This insurance provides essential financial protection against claims for injury or property damage arising from professional activities. It's a safeguard that every social worker should prioritise, as highlighted by member Emma Carter's* recent experience. Ensuring your membership does not lapse means you are protected.

Emma faced a significant challenge when a health centre mistakenly listed her as a psychologist on their website, a serious breach of national regulations. Due to a recent home move, she missed critical correspondence from the Australian Health Practitioner Regulation Agency (AHPRA) requesting correction. Subsequently, she received a more severe notice. A breach like this could potentially lead to legal repercussions and substantial fines (up to \$30,000).

"I've never called myself a psychologist, and I didn't even know the clinic had listed me that way until I got the letter," Ms Carter said.

Fortunately, Emma's AASW membership was active, ensuring her access to Berkley Insurance Australia, the AASW's specialist insurer. With their support, Emma swiftly addressed the issue by obtaining a legal letter

to rectify the erroneous listing. This intervention not only resolved the situation but also shielded Emma from the significant costs and stress associated with legal proceedings.

"I thought I had let my AASW membership lapse in the move craziness, but thanks to a lucky bout of late-night payments, I had forgotten I was paid up and could talk to the AASW insurance people," She said.

In the last calendar year alone, several AASW members have utilised this insurance to access funds between \$30,000 and \$40,000 (AASW members receive Professional Indemnity Insurance cover of up to \$20m and Public & Products Liability Insurance coverage of up to \$30m). Underscoring its critical importance in today's environment. Whether facing inadvertent errors or external challenges beyond their control,

social workers can rely on AASW's insurance to provide timely support and protection.

Emma's story demonstrates why maintaining continuous AASW membership is a priority. It ensures uninterrupted access to vital benefits like public liability insurance, which can make all the difference in reducing professional risks. By staying current with your membership, you not only safeguard your career, but you also uphold your commitment to delivering quality care to your community with peace of mind.

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*Names and some details have been altered to protect privacy.



AASW members receive up to \$20 million in Professional Indemnity Insurance and up to \$30 million in Public and Product Liability Insurance through Berkley Insurance Australia, with policies arranged by Sear Insurance Brokers. Policies taken directly can cost up to \$1,500 per year.

Reflections on a lifetime of renewal and the shaping of one's professional identity

In this article the author reflects on her encounters with immigrants and Aboriginal people in her journey to become, and practise as, a social worker.

ABOUT THE AUTHOR



Pamela Trotman, Adjunct Professor at CDU, an Accredited Mental Health Social Worker and an AASW Life Member, is in her fifty-fifth year of social work learning and practice, much of it at the cutting edge of new directions in social policy, requiring a "pathfinder" approach to her practice. She remains committed to the challenges of finding the "way forward" amidst often conflicted and fraught sociopolitical dynamics.

She is committed to acknowledging and respecting Aboriginal and Torres Strait Islander ways of Being, Knowing and Doing.

I was born into a world rocked by global conflict and the struggle to restore peace and order between and across nations with the establishment in 1945 of the United Nations. My childhood and youth were peppered with firsthand accounts of Dutch underground resistance against the Nazis, and Australian participation in conflicts in El Alamein, Kokoda Trail and of life in Changi Prison, all told by the fathers of my friends. My own father had been in Darwin when the Japanese dropped bombs. In those postwar years we learned about the atrocities in European concentration camps and met people who had survived them as evidenced by the numbers tattooed on their arms.

The outside world came to our town, a White settlement on the lush Liverpool Plains as new arrivals from Europe and Britain settled amongst us in response to the Government's "populate or perish" policy to counter the feared "Yellow invasion" from the north. On the edge of our prosperous community lived the local Aboriginal people, non-citizens in their own land until 27 May 1967. Their homes, (humpies) were rough-hewn structures and, for most townspeople, where they lived represented a no-go area. Our family had forged some connection with the Aboriginal people as they

walked past our home. This connection privileged us children as visitors to their "community". There I witnessed what it was like to be an Aboriginal person in a White-dominated society. Even to my young eyes this discrepancy based on skin colour was wrong.

Fast forward to 1965. I gained entry to the University of NSW's Social Work course and later won a cadetship with the then NSW Child Welfare Department where I visited their institutions, which were predominantly filled with Aboriginal children. I voted for the first time in the 1967 Referendum which gave citizenship to Aboriginal and Torres Strait Islander peoples. I felt proud to be an Australian. Post the referendum the sociopolitical landscape changed as governments began the process of operationalising the referendum by establishing a range of instrumentalities and services.

Early in 1971, a year after I graduated, my boss called me into his office to announce that I was to be transferred to a special unit set up to provide emotional and social support to Aboriginal young people from the country brought to Sydney for work and study. In announcing this he literally said, "There's a group of Boongs; go social work them." The message was clear; he had scant (or no) respect

for Aboriginal people or social work. That marked four years of incredibly intense engagement with the Sydney Aboriginal community, mostly found in the inner-city suburbs long regarded as slums.

Each day I ventured into that world unafraid because of my previous encounters with the community in my hometown. I was White, Welfare (my employer) and "There", which meant I often suffered the brunt of peoples' frustrations, mostly verbal. As much as I was cursed, I was never in any real danger, though on one occasion I was advised by one of the young female activists that I was "first on the Black Power's death list." Thankfully, she added, "when we get organised," and they never did. Years later we met up when I reminded her of her assertion to which she responded, "Pam, you were the only one who never hit back."

In those years in Redfern, I saw the establishment of the first Aboriginal Medical Service and Legal Services, the formal beginnings of Aboriginal empowerment and recognition. In the latter part of my time in Redfern I began to encounter former Aboriginal state wards, left to their own devices once they turned eighteen. This became my first encounter with what was to become known as the Stolen Generations and, decades later, would mark my return to direct work with Aboriginal people.

REFLECTION 1

Without doubt those years shaped me as a professional and as a person. Forced to confront the embedded power and privilege of my Whiteness when matched with the disempowerment of the Aboriginal people I encountered, I started to experience what it was like to "live in two worlds", an everyday reality for most Aboriginal people. The more I learned to move between each world, without denying or negating the validity of the "other", the more I encountered my own humanity. And with that, the inalienable reality of our shared humanity, with all its imperfections. I could acknowledge but not accept the ugliness of "Whiteness" as a dominating world view and began to find ways to act to counter that ugliness, which at

times put me at odds with those of my "White" community.

In 1989 I moved to the Northern Territory, which reactivated my awareness of the discrepancies between White privilege and Aboriginal disadvantage. Those earlier professional experiences forever etched into my professional psyche the notions of "respect for difference", a person's right to be "self-determining" and, moreover, what constitutes "professional integrity", especially the notions of accountability and transparency, all elements of the AASW Code of Ethics. These latter two enabled me to navigate the often-fraught world of Aboriginal Affairs as a White social worker.

By being "accountable" for my actions, I readily accepted reproachments from Aboriginal elders who took pity on me and chided me for my transgressions. I later realised that they only bothered to do this when they believed the White person would listen. They became my cultural guides and mentors. A commitment to being "transparent" in my practice unwittingly proved to be an effective professional positioning of oneself as it was seen as being authentic, which served to build trust across the cultural divide. It also meant that I did not have to pretend to be other than who/what I am: a middleclass, White social worker, which, by implication, meant that I had to constantly reflect on how my professional identity served to shape who I was and how I practised.

RENEWAL AND PROFESSIONAL IDENTITY

Much of Australia's last twenty-five years have seen a focus on reconciliation and the formal acknowledgement of the ongoing harm done to Aboriginal families and communities by the policies of forced removal of Aboriginal children. The 1997 Bringing Them Home Report documented the suffering and its impact on Aboriginal and Torres Strait individuals, families and communities and concluded that the policies were a breach of human rights. It, and the 1992 Mabo Case, contributed to the nation-wide movement for Reconciliation, which is considered to have begun on 28 May 2000 when

250,000 people marched across Sydney Harbour Bridge in support of reconciliation.

One of the recommendations from the Bringing Them Home Report was for a formal apology. It would take a decade before that apology was forthcoming as the then Prime Minister John Howard steadfastly refused to apologise. I recommenced working directly with Aboriginal people on 30 April 1999, the day Justice O'Laughlin ruled that the Gunner/Cubillo Stolen Generation case against the Australia Government should proceed. The work was with Danila Dilba Medical Services Emotional and Social Wellbeing Service, which had been set up as a direct result of the Bringing Them Home Report when Howard committed 64 million dollars to provide counselling services to members of the Stolen Generations and their families.

For seven years, I was embedded once again in an Aboriginal community, privileged to be able to contribute my skills and knowledge to individual and collective healing. Core social work principles of respect for difference, social justice (including actions to right wrongs) and self-determination reflected my sense of professional self and identity. I may have been applying a range of Western therapeutic approaches not exclusive to social work, but those principles helped to shape how I applied therapies so they had relevance to clients. In turn the clients also shaped me and how I practised as I began to incorporate awareness of Aboriginal cultural constructs into my practice and actively invited clients to work with me to shape an approach to make it work from them.

I became active on the NT AASW Branch Management Committee and later served on the National Board and the Reconciliation Taskforce as I used knowledge and wisdom gleaned from my work to help shape the AASW's Reconciliation Action Plans.

REFLECTION 2

Reconciliation Action Plans are now common amongst most organisations, companies, and government instrumentalities. Kevin Rudd's apology on 13 February 2008 stopped the nation marking a pivotal

point in Australia's psycho-political landscape. But the divide remains as evidenced by the results of the 2023 Voice Referendum. We, as a nation, have yet to grapple with the legacy of colonisation and to do our collective healing via a process of truth telling. How that will be done in such a divided

environment remains a national challenge. It is probable there will be a role for social work in that process.

As I write these musings I have the chance to reconnect with the woman who more than half a century ago declared I was number 1 on the Black

Power death list. Perhaps we may be able to reconnect and in so doing join in mutual respect and regard, and walk together in a collective effort of Truth Telling and Reconciliation – a process of renewal as a nation and as a people.

Professional news & views

A NEW ERA FOR SOCIAL SERVICES IN VICTORIA

The introduction of the Social Services Regulation Act 2024 has brought significant changes to how social services operate in Victoria, aiming to better protect vulnerable individuals. At its core, the Act has established the Social Services Regulator, an independent body now separate from the Department of Families, Fairness and Housing. Led by Jonathan Kaplan, the Regulator's role is to ensure organisations providing social services meet new Social Service Standards. This represents a shift from fragmented oversight to a unified framework that simplifies registration processes and enforces consistent quality across the sector.

Kaplan has been proactive in engaging with service providers across Melbourne and regional Victoria, fostering partnerships to achieve the best outcomes for service users and prevent harm, neglect, and abuse.

[Read more.](#)

FIRST NATIONS DISABILITY FORUM

In July 2024, all governments agreed in principle to the Disability Royal Commission's recommendation to set up a First Nations Disability Forum. This forum would allow First Nations people to have a say in decisions affecting them. Governments have committed to working with First Nations people to explore options for creating the [Forum](#) or another shared decision-making approach. Closing date for submissions is 25 February 2025.

[Read more.](#)

WORLD SOCIAL WORK DAY THEME ANNOUNCED

World Social Work Day, to be held on 18 March, centres on the theme "Strengthening Intergenerational Solidarity for Enduring Well-being."

This theme showcases the role of fostering connections and mutual respect among different generations to build resilient societies, promote

environmental sustainability, and facilitate the sharing of wisdom for a brighter future.

It emphasises that caregiving is a collective responsibility, transcending traditional gender roles, and highlights the importance of intergenerational collaboration in addressing economic and environmental challenges. The AASW is planning a range of events and activities to celebrate the day, keep an eye out for Insider newsletter for updates.

[Read more.](#)



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AASW Mentoring Program 2025

Apply today for the 2025 program, but be quick – applications close Friday 28 February.

Run annually from April to September, the award-winning AASW Mentoring Program facilitates a formally structured program that pairs a member mentor with a member mentee, and enables member social workers to participate in a program that seeks to resolve, develop, or advance a member's interests.

The program provides a forum for social workers at all stages of their careers or professional journey to develop an on-going mentee / mentor relationship with another social worker facilitated by regular meetings and discussion of matters relating

to professional or personal challenges, in a supportive framework.

The program's purpose is not to facilitate a participant to find work through their partnership but instead foster knowledge sharing, insights and learnings which can co-facilitate each other's objectives for joining the program.



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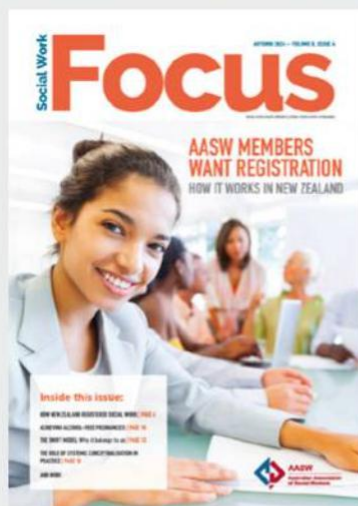
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Social Work Focus

ADVERTISING

Social Work Focus is the Australian Association of Social Workers' Member magazine. It is published four times a year and is accessible to Members through MyAASW in the flipbook style.

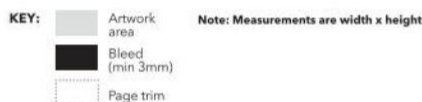
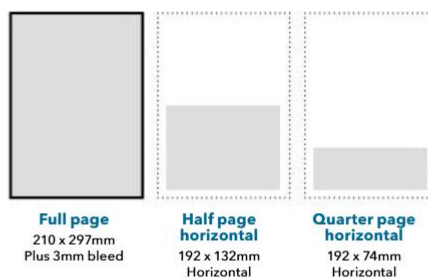
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April/May	28 March 2025	Week commencing 14 April 2025
June-August	27 June 2025	Week commencing 14 July 2025
September/October	29 August 2025	Week commencing 15 September 2025
November/December	24 October 2025	Week commencing 10 November 2025



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