UNESCO Observatory Multi-Disciplinary Journal in the Arts

Guest Editors

Mike White

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Dr. Sarah Atkinson

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International perspectives on the
development of research–guided practice
in community–based arts in health

UNESCO Observatory
Multi-Disciplinary
Journal in the Arts

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ABOUT THE E-JOURNAL

The UNESCO Observatory refereed e-journal is based within the Graduate School of Education at The University of Melbourne, Australia. The journal promotes multi-disciplinary research in the Arts and Education and arose out of a recognised need for knowledge sharing in the field. The publication of diverse arts and cultural experiences within a multi-disciplinary context informs the development of future initiatives in this expanding field. There are many instances where the arts work successfully in collaboration with formerly non-traditional partners such as the sciences and health care, and this peer-reviewed journal aims to publish examples of excellence.

Valuable contributions from international researchers are providing evidence of the impact of the arts on individuals, groups and organisations across all sectors of society. The UNESCO Observatory refereed e-journal is a clearing house of research which can be used to support advocacy processes; to improve practice; influence policy making, and benefit the integration of the arts in formal and non-formal educational systems across communities, regions and countries.

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UNESCO
OBSERVATORY
Multi-Disciplinary Research
in the Arts

POSTERA CRESCAM LAUDE

International perspectives on the development of research-guided practice in community-based arts in health

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THEME

Health has become a recurrent topic in discussion of the role of the arts in society, fuelled by a growing body of research into links between culture and flourishing. In community arts in particular there has been a widespread development of projects addressing health issues. This is a distinct area of activity operating mainly outside of acute healthcare settings and is characterised by the use of participatory arts to promote health. There are indications that this work is developing in response to health needs of communities in differing cultures and healthcare systems around the world, but so far there is little mutual knowledge or connection of the work at an international level.

This issue aims to draw together well-researched case studies of community-based arts in health projects from different parts of the globe. Each case study should explain the motivation for the work undertaken and its sensitivity to context and cultural diversity, the partnership structures and ethos developed in its delivery, and the research methodologies used. Submissions are particularly invited that reflect multidisciplinary knowledge of the application of arts development to health and flourishing communities from the perspectives of applied arts, public health, anthropology, social geography, education and other disciplines.

Giving Shape to Experience in an Urban Aboriginal Community: the Ngala Nanga Mai (We Dream) pARenT Group Program

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ABSTRACT

The Ngala Nanga Mai pARenT Group Program is an arts based community health program for young parents of Aboriginal children situated at an Aboriginal Community Health Centre in Sydney and run by the Sydney Children's Hospital. The program emerged through the community's commitment to support young families facing adverse environmental factors, cultural dislocation, isolation, intergenerational grief and loss and lower levels of access to mainstream services that often underlie poorer health and social outcomes for Aboriginal parents and children.

This paper details the development and implementation of this participatory arts based program, which aims to increase social and emotional wellbeing, access to services, health literacy, empowerment strategies and educational opportunities among participants.

The program is based on the transformational capacity of art and embraces the values of a democratic and participatory learning framework. Through arts based exploration of identity and belonging, participants express the multifaceted experiences that shape their lives, and gain an understanding of how this impacts on their health and that of their children. The program has emerged from the local context and created its own iconography to define and strengthen the social and cultural dimensions initiated by the group. These initiatives have enhanced participants' capacity for agency and transformation, personally, in the group itself and in the community.

The process and impact of the program has been captured through a formal evaluation using a mixed methods, reflexive approach including qualitative data from semi-structured interviews, focus groups, testimonials and quantitative data collected using the Growth and Empowerment Measure (Haswell et al. 2010), a validated measure of psycho-social empowerment and wellbeing. This evaluation demonstrated that art-making and cultural literacy enhances the flourishing of young parents and their Aboriginal children in a way that is both empowering and transformative.

INTRODUCTION

The Ngala Nanga Mai pARenT Group Program (the program) is a community health program, established in 2009 for young parents of Aboriginal infants and children. The program utilizes group art-making sessions as a tool for engagement and building confidence, and aims to positively influence young parents and their families by providing educational and social networking opportunities and health knowledge to facilitate access to health services. It is run by the Sydney Children's Hospital Department of Community Child Health.

Reflecting an ecological model of child development (Bronfenbrenner 1979; Silburn et al. 2006; Valentine et al. 2007), the program operates using a strengths-based strategy to address social isolation as well as child outcomes. It aims to empower participants, who range in age from 18 to 40 and includes two carers who are grandmothers, with community connectedness, educational opportunities, health knowledge and to facilitate early intervention and regular access to primary and community health. This is assisted by the program's location within the clinic facility at the local Aboriginal Community Health Centre, which is located about 15 km from the centre of Sydney, New South Wales.

The program has used an interactive participatory action approach to guide activities over its first three years of operation. This approach has also informed the program's two-stage evaluation by medical students from University of New South Wales (UNSW), under the supervision of the Muru Marri, the Indigenous Health Unit in the School of Public Health and Community Medicine (Osborne 2011; Osborne et al. 2012; Freeman et al. 2012). The UNSW Human Research Ethics Committee and the Aboriginal Health and Medical Research Council approved the evaluation. Program participants have given their free prior and informed consent for their stories and art works to be published here.

ABOUT THE PROGRAM

IMPLEMENTATION AND LAUNCH OF THE PROGRAM

Increasingly there is a call for more in depth description of what programs do, and how they do it, to guide others interested in developing or enhancing existing programs and to assist research that examines the impacts of programs on the health and wellbeing of participants. For example, in a systematic review of the effectiveness of mentoring programs with high risk groups, Tolan, Henry, Schoeny and Bass (2008:5) identified "a remarkable lack of description of key features or basic program organization" among reports used for the analysis. This paper seeks to contribute to filling this gap, particularly with respect to Aboriginal programs that utilise art as a tool for engagement and empowerment.

The idea for the program was born when a local Aboriginal Health Education Officer from Sydney Children's Hospital was undertaking antenatal and early childhood home visits with the Early Childhood Health Nurse and observed that many mothers felt isolated from social support. Prior to the commencement of the program, local parents had access to an informal parent playgroup, paediatric clinics and a dedicated Aboriginal midwifery service, but access amongst younger mothers was noted to be poor.

At the time of the evaluation, a relatively high proportion of people living in the area self-identified as Aboriginal (approximately eight per cent compared to the New South Wales state average of two per cent. (NSW Government, 2006). Of those, 21 per cent were aged between 15 and 29 years, which is five per cent greater than in the non-Aboriginal population. Furthermore the community was relatively young, with 30 per cent of the 2006 population aged 0-14 years. Teenage pregnancy was relatively high, which as has been noted elsewhere is both a product and perpetuation of socio-economic and health inequalities, thus justifying a community health program tailored to young parents. (Osborne 2011; Osborne, Fitzpatrick, Haswell, Zwi, Callaghan & Jackson Pulver 2013).

After discussion amongst service providers and the community, seed funding was obtained to provide a program dedicated to younger mothers and their Aboriginal children. Although the intention was to employ an Aboriginal Program Officer (PO), several rounds of unsuccessful advertising resulted in the appointment of the present incumbent, who is not Aboriginal, but who has been significantly mentored and supported with cultural guidance and supervision by the Aboriginal Health Education Officer. This included, in the initial stages, an informal walkabout of the local area and generous sharing of her personal story of growing up and living in this community. This not only facilitated a trusting partnership, but also provided valuable insights into the historical, political and social context of the community in which the project would unfold.

Open to teenage carers of children from the local Aboriginal community, participation in the parent group was voluntary with numbers of participants per session ranging from 5 to 20. There were no prescriptive rules but a broad code of behaviour evolved as the group matured and developed.

Naming of the group was important in the formation of a collective identity and sense of ownership. After the program had been running for a few months, participants decided to change the name from 'Aboriginal Teenage Back-to School Program' to 'Ngala Nanga Mai', which means 'We Dream' in the Sydney Language, known also as Dharug and Iyora (Troy 1994). The name captures the aspirational character of the group and its identity as an Aboriginal specific program. A logo was designed by participants and translated into its present form by a professional graphic designer.

Figure 1: The program logo designed by participants.

WHAT HAPPENS AT THE PROGRAM?

The program comprises three main aspects: arts, education and health. Each aspect has its own schedule of activities. All three aspects of the program contribute individually and collectively to the aims of the program (to empower participants with community connectedness, educational opportunities and health knowledge, and to facilitate access to health care).

Figure 2: The program activities link to the aims of the program and are broadly divided into Health, Education and Social Connectedness through Art.

AIMS: the program aims to empower young parents and their families by providing educational and social networking opportunities, and highly accessible health services	
	Activities
Health	– Paediatric clinics & referrals Social worker engagement through attendance at program – Informal visits by health professionals – Monthly Health Talks – Midwifery Clinics – Speech Therapy Clinics – Yoga & Meditation sessions
Education	– Weekly Mentoring sessions – Partnership with TAFE OTEN – Participant led leadership sessions – Related service providers visits (legal services, housing) – Consultation with participants in development of Aboriginal specific health resources – Invited participation in ceremonies, openings & lectures (Sorry Day, TAFE OTEN, exhibitions & launches) – Swimming lessons for children
Social connectedness through Art	– Community & cultural event attendance (funerals, International Women's Day, White Ribbon Day) – Holding art exhibitions & workshops – Cultural Literacy Program including museum excursions, theatre performances & social and cultural outings (NAIDOC and Community Family Fun Days)

The group meets twice-weekly for sessions of approximately 3.5 hours. The group room is used for art centred activities and is the 'home' of the program. Other activities flow into a small study room where participants meet with their education tutor. The children play in the playground area under the supervision of employed childcare workers and the health clinics take place in the adjacent clinic rooms. All the activities are collectively housed at the Aboriginal Community Health Centre.

Participants, who are recruited through local service provider networks and word of mouth, are assisted in attending the program by a dedicated bus. An important part of the sessions is the preparation and provision of food. Many participants and their children have not eaten when they arrive at the Centre and sharing food occurs prior to any other activities taking place.

A SAFE SPACE FOR BEING AND GIVING SHAPE TO EXPERIENCES

One of the first challenges in initiating this program was to establish a safe space (Social Justice Report 2011; Bin-Sallik 2003; Nguyen 2008; Brascoupé & Waters 2009). Purpose-built in consultation with the local community, the local Aboriginal Community Health Centre had already established itself as a culturally appropriate site for the delivery of health services. This proved to be a powerful launching platform for the program, and also allowed the program to benefit from community representation on forums that already existed to guide local health service delivery; representation which continues to this day.

The second key challenge was to introduce the idea of art-making into the space in a way that would not be overwhelming to first time visitors. This was achieved by bringing in a range of art materials, such as crayons, acrylic paint, collage materials, gumnuts, tree pods, buttons and assorted fabrics, glue and various supports on which to work. The intention was to provide participants with a wide range of choices with which to experiment, to be as non-prescriptive as possible and to adopt a responsive approach from the outset (White & Robson 2009).

At this early stage, the PO would sit at the table and make simple things to share as potential participants entered the space. The focus was on 'being' rather than 'doing', which involved showing up at the appointed time, arranging the space (tables and chairs), sorting and preparing art materials, and laying out interesting objects and resources on the table for perusal and contemplation. The PO did not intend to make distinct, completed art objects but rather to demonstrate, quietly, the conditions for creating art works – the readying of mind, body and soul as a kind of meditative preparedness, which precedes art-making. Often the PO would scribble, experiment with a specific medium, read aloud or engage in conversations, thus sharing and being responsive to what unfolded in the process. In this way, the room setting reinforced the values of an inclusive learning circle and provided a non-hierarchical opportunity for dialogue (Brascoupé & Waters 2009).

Participants and first time visitors could enjoy the spatial setting of the room, peruse written texts, look at a range of images or engage with other people, in the room. This created a comfortable and stimulating environment for engagement and creativity.

Figure 3: Gathering around the table with participants & children.

Figure 4: Children often join their mothers at the table and participate in art–making.

CREATING STRUCTURE AND FLOW

Once a safe space and regular participation was established, and following further consultation with stakeholders, an opportunity for an eight week film making project was offered through the Aboriginal Education Officer at the local TAFE (Training and Further Education) Aboriginal Training Unit. This Aboriginal Education Officer was themselves from the local community and was a strong advocate for empowerment through education. Participants made a short film, which introduced them to the processes of filming and editing techniques. The subject matter, *Significant Objects*, was generated through group discussions, written exercises and group art-making activities. Participants filmed and interviewed each other and explored their identity and history whilst speaking about the meanings and values of their chosen objects of significance.

Central to a responsive approach is that 'Practitioners propose the vision and structure for the arts activity but maintain an open mind for collaborative, friendly working that respects the experience, skills, advice and contribution of others' (White & Robson 2009:7). The approach informed the next project, a *Mandala Making Project*,

which was self-directed in that it allowed for a choice of materials, and could take as long or as short as participants wished. It challenged some assumptions about art-making, as the support was a circular rather than rectangular sheet of paper, and the art materials were both traditional and found/from nature (such as leaves, seeds and tree bark fragments). It also suggested a cultural dimension with the circle as an encompassing universal symbol. The table was laid with objects from everyday life that had circularity at their centre – clocks, shells, seeds, flowers, patterned fabric and paper, and culturally diverse art images that use the circle as part of their visual language. In addition, a short hand-out on mandalas and their historical use was available.

This project asserted that whatever was brought into the group had a history, a meaning and a context that was important. The materials and subject matter were carefully considered, and communicated some of the values that were important in establishing this group. Participants were invited to engage with materials and to reflect on what was brought into the learning environment.

Figures 5 & 6: Mandala making project created opportunities for self–reflection and sharing to create common ground amongst participants.

Figure 7: Film making project offered opportunities to learn new skills and explore themes of identity and history.

Although the structure of the sessions was fairly informal, it was important to establish a ritual for the sharing of important information. The 'Check In' ritual evolved slowly and enabled all participants to be heard and to address common concerns whilst establishing direction and continuity for the sessions. The tension between structure and flow was articulated by some participants, with some feeling that the 'Check In' ritual created too formal an ambience and others welcoming the structure and the value of a designated time to share ideas before individuals commenced their own projects and work. Later on in the development of the ritual, and as natural leaders emerged within the group, individual participants put their hand up to run these 'Check In' rituals and added their own flavour and tone to the ritual. Later on in the group's evolution, this process would provide a valuable backdrop for dealing with conflict in the group and ensured that the natural leaders emerging could take up more formal conflict management roles in the group. The modelling of predictability and consistency accords with evidence of their protective effects amongst children whose development is characterised by adversity (Odgers & Jaffee 2013:38). Also, noteworthy is the group's developing practice of mindfulness. Presently, as part of the 'Check In' activities, a Buddhist bell is sounded to signify the formal start of this ritual, which is followed by the reading of the Acknowledgment of Country (a statement offered to show awareness and respect for the traditional Aboriginal and Torres Strait Islander owners of the land on which a meeting or event is being held, and recognising the continuing connection of Aboriginal and Torres Strait Islander peoples to their Country) (Reconciliation Australia 2010). During a recent group reflection, the use of a bell and its symbolism, has been the topic of discussion. Given its historic association with incarceration in missions and settlements, the use of the bell is not presently being used. An alternative is yet to be decided upon.

VALUING INDIVIDUAL, GROUP AND COMMUNITY VOICES

Throughout this paper reflective conversations are cited to capture the voices of participants. These conversations arose in different contexts including during the group sessions and as part of the development of texts for specific exhibitions and in evaluations of the program.

It was always acknowledged that program participants simultaneously belonged to a broader community and that the notion of 'community' itself required some interrogation. Once a group of regular participants was created and a sense of an emerging identity of the program was established, the group began to explore the wider context within which it was situated.

Planning for an art exhibition in a public space was a significant turning point as it moved the group from the private space of the Health Centre to a public community space, namely the local Museum, where the community was invited to celebrate in the achievements of the group. The exhibition was also shown at the Sydney Children's Hospital. Working with the curators of these spaces in a professional and respectful way to display the art works and write suitable stories and poems to accompany them was a valued learning experience articulated in numerous testimonials, in which participants often expressed their growing confidence and sense of accomplishment in their art practice, as suggested below:

'At the start I doubted myself and would often say that I couldn't paint, Because I never had, but the more paintings I done and finished the more satisfied with myself I became to feel. I found that the more effort/concentration I put into a painting then the more I liked the finished product. I've moved from doing just dot paintings, to experimenting with oil crayons and paints, to scenery paintings of trees and rivers. All of which I have never done before this group.'

Figures 8, 9 & 10: Multi venue exhibitions at local Museum and Sydney Children's Hospital.

THEORETICAL UNDERPINNINGS

With its roots in social justice, informal education methods, community engagement and collaboration this program falls within the tradition of arts in community health (Guetzkow 2002; Ontario Arts Council 2002; Smith 2003; White & Robson 2009). White and Robson (2009:5) set out five values that contribute to best practice in this field: participants come first; a responsive approach; upholding values; feedback and evaluation; good management and governance. These values, which are described in detail by White and Robson (2009), provide the guiding principles for the program and appear to contribute to an environment conducive to transformation (Osborne et al. 2013; Haswell, Blignault, Fitzpatrick & Jackson Pulver, 2013).

THE ROLE OF ART IN TRANSFORMATION

The underlying values and beliefs about art in any community arts health project shape not only the kind of art produced, but also the environment that is created within which art is interpreted and valued. The program seeks to develop an arts practice that is transformative on a personal as well as a group and community

level. The making of art in itself does not necessarily facilitate change and can be a tool of oppression that inhibits personal freedom (Pollock 1988; Emberley 2007). Many first time participants said how they were 'not good at art' and 'didn't like art', recalling negative art experiences at school. It is essential therefore to examine what conditions, values and practices in art-making promote an ideology of transformation and empowerment (Tsey et al. 2003; Tsey et al. 2010).

Underpinning the art practice of the program is the understanding that both the making and reception of the art object are of equal value and constitute the main business or purpose of arts and community health. Art 'happens' not exclusively within the confines of an art object, but also significantly in the process of its making and reception (Moxey 1994).

Within the program an art work is seen to exist in the interactions that emerge from the engagement with materials and their subsequent impact on the participants. Participants in the creative process act not only as makers but also as viewers of their own and others' work. Furthermore, the space they occupy, the relationships they foster, the quality of their interpersonal interactions as well as their state of being, all constitute the art work in this program.

Figures 11 & 12: The group takes shape.

Moving toward complexity

- Individual focus
- Focus on self
- Personal stories - internal dialogue
- Solitary

- Group focus
- Collaborative
- Negotiation
- Conflict
- Compromise
- Multiple voices - shared stories
- Social skills

Responding to conversations amongst participants by providing enriching exposures has led to some transformational experiences. One such conversation revolved around identity and the experience of being an Aboriginal person in all its simplicity and complexity. This prompted a visit to the Art Gallery of New South Wales, with its significant permanent collection of Aboriginal and Torres Strait Islander Art. The Aboriginal Curator was keen to meet the group. None of the participants or their children had ever been to the Gallery and were treated to a personal tour of the shell work collection produced in their own community over many years, building their sense of pride, connectedness, identity and history. This visit became the first of many such 'cultural literacy' excursions that enabled discussions about art practice to be broadened and deepened as the group grappled with questions about the nature and purpose of 'Aboriginal Art' traditionally and within a contemporary context. These discussions resonated with participants in relation to their experiences of being 'other' in mainstream Australia and the relative value of tradition in our contemporary lives.

Situating art practice in an historical continuum where traditions endure and innovations emerge is an important aspect of the art-making practice in the program. To this end, it has been important to visit collections in museums, galleries and universities locally. The notion of continuity and change was thus considered in relation to art-making practices, to participants' sense of connection to things past (and lost) and to their contemporary urban context.

Figures 13, 14 & 15: Participants experiment with a range of art materials, including acrylic paint on canvas, emu eggs and weaving.
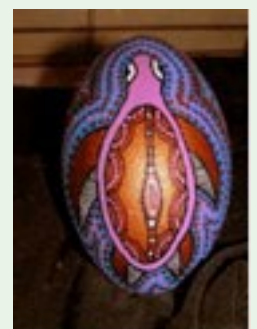
THEMES THAT CONNECT: CULTURE, HISTORY, IDENTITY AND BELONGING

Over time, a number of themes that frame and connect the program have emerged. These themes include inclusivity, identity, loss, conflict and transformation. They are noteworthy because of the frequency of their recurrence in a range of different evaluative methods and reflective practices, including, observations, conversations, art works, testimonials and formal evaluations undertaken.

INCLUSIONS AND EXCLUSIONS

Many discussions at the group revolved around the issue of inclusivity and exclusivity. These discussions have emerged around gender, identity, loss and conflict.

The issue of gender arose early on. Traditionally Australian Aboriginal and Torres Strait Islander peoples have had a clear division in both sacred and secular domains

between 'Men's business' and 'Women's business' particularly in regards to health issues and gender specific body parts and functions. (Purdie et al. 2010). Whilst the program was initially profiled as a parent group, the majority of participants were mothers or female carers. However, a few fathers regularly attended the group and one in particular took advantage of the educational mentoring, registered for a course and has since found employment as an Aboriginal Education Officer. However, there was always a tension between whether or not the program should be exclusively for women's business and raises the issue of whether or not child health and wellbeing and community connectedness can be achieved by women alone. The theme of inclusivity/exclusivity also played out in relation to staff, service providers and activities as well as potential and existing participants.

With growing confidence, the group increasingly determined what partnerships were established, including research partnerships, what linkages with services were sought, and who was included, whilst always returning to the principle and value of inclusivity. It became evident that establishing partnerships was important in facilitating community connectedness and ensuring the sustainability of the program (VicHealth 2006; Australian Government NHMRC 2006). Developing linkages and partnerships within the broader community acts as a safety net for sustainability and also fosters collaboration with other services that address the social determinants of health, such as housing and employment.

'... I'm 19 yrs old and I have a 14 and a half month old baby boy... although it's only on 2 days a week, on those 2 days I am more happier than the rest because we've both become quite attached to every body there and there has not been even once where I didn't feel welcomed or comfortable. And not meaning sound like I'm over exaggerating but it gives us a reason to get out of bed on those days it's on.' (Participant)

IDENTITY

Linked to the theme of inclusivity/exclusivity is the self-representation as Aboriginal people in the group. A great deal has been written on the subject and it has emerged as a powerful locus for exploration and empowerment within the group (Grossman 2003). Many debates emerged on identifying as Aboriginal, Aboriginal art and cultural practices, and Aboriginal Health services. As a non-Aboriginal person, supported by the Aboriginal Health Education Officer, the PO was herself immersed in learning and self-reflection about identity and a sense of place within the context of an Aboriginal Community. The main navigational tool for cultural concepts and practice was through the daily interactions with participants, Aboriginal staff, community members, Elders and local stakeholders. The value of internal delineations of Aboriginality rather than any designations imposed from the outside was often emphasised (Gorringe, Ross & Fforde 2011).

At one point during the evolution of the group, participants started to ask questions pertaining specifically to Aboriginal cultural and artistic practices. These included, among others:

• What symbols are used to represent specific ideas and concepts?

• What totems represent my family?

• What does or should Aboriginal art look like?

• Who can make Aboriginal art?

• Is dotting an exclusive aesthetic signifier in Aboriginal art?

In response, we developed cultural literacy activities that included the provision of Aboriginal resources such as children's literature, art books and an Aboriginal map of Australia, which is prominently displayed in the group room. These resources and activities enhance the participants' sense of place and belonging. As one participant reflected: *'I think that art plays an important role with the families that attend the group that helps them connect to their culture and community in a way that they haven't experienced in this time "the 21st century".'*

LOSS

The theme of loss has emerged in the program, whether in relation to personal loss of agency through circumstance or self-belief, actual loss of loved ones, removals from family, loss of cultural knowledge, loss of a sense of place and belonging and hence social capital, or loss experienced through recent events such as the Stolen Generations (generations of Aboriginal children removed from their families and communities under government policies), to name but a few (Wanganeen 2010). As

one participant said, *'I like art because we have lost so much of our culture I find it is a way of connecting with our Aboriginality. We don't have our language, we still have some dance but so much has been lost. Art is our way to talk our stories.'*

In addition, the group has initiated and experienced a number of ideas and projects that have failed to materialise. Whilst this has often led to disappointment, it has also been a valuable opportunity to draw on the group's collective power in coping with loss. By contrast, such loss allows the group to appreciate and acknowledge the projects that do come to fruition and to celebrate these successes. This group experience can be extended to individual personal experiences where disappointing outcomes eventuate.

The experience of loss is necessarily also the experience of change. Through the experiences of loss in a supportive and sustaining environment, participants have managed to harness their individual and collective capacity to endure these changes and celebrate newfound insights and experiences.

Figure 18: Following discussions in the group about the impact of the Stolen Generations on their community, Link–Up NSW (an organization working with Aboriginal people who were separated from their families as children) visited the group. Participants subsequently embarked on a collaborative painting on the Stolen Generations. Whilst previous collaborative paintings were completed and sold, generating funds for the group, this painting remains 'unfinished'.

CONFLICT

All groups experience conflict, which if managed effectively, can facilitate new strengths, build resilience and foster leadership. This has been the experience in the program. Conflict in the group has occurred in many different ways including amongst participants, between participants and staff, amongst staff, as well as external to the group yet impacting within it.

Well documented as a response to conflict is 'lateral violence', which

> *'... describes the organised, harmful behaviours that we do to each other collectively as part of an oppressed group; within our families, within our organisations and within our communities. Lateral violence is the expression of rage and anger, fear and terror that can only be safely vented upon those closest to us when we are being oppressed. Those who oppress us do not hear nor do they assist us in changing the oppression therefore its unsafe for us to speak to them'* (Frankland cited in Gooda 2011a).

Conflict within the group was understood and discussed amongst participants as a form of lateral violence, recognizing that:

> 'The first step towards exerting control over an issue is giving it a name. It is a way of exercising agency and responsibility for our communities. Naming lateral violence in itself becomes an action of prevention' (Gooda 2011b).

As well as adopting an open dialogue within the group to voice conflict and tensions, conflict management tools have been introduced to enhance individual and collective skills in its management. The group nominated a person within the group to manage specific conflicts as they arose within the group. The protocol the group devised was that conflict that is not appropriately or successfully managed within the group room is moved to a private and adjacent room at the Health Centre by the nominated "conflict resolution person" for further discussion. This also avoids exposing children who move fluidly in and out of the group room to "unhealthy" levels of escalating emotions as a result of conflict.

TRANSFORMING OURSELVES, TRANSFORMING OUR COMMUNITY: OPPORTUNITIES FOR EDUCATION, LEADERSHIP AND TRANSFORMATION

The participatory arts experiences facilitated in the group provide valuable opportunities for the development of techniques, the mastering of skills and risk taking within defined and increasingly familiar constraints. The transferal of the processes of manipulation and transformation from the individual to group or community domains is a gradual and evolving process (Zimmerman 1995), and is consonant with ecological or multilevel empowerment (Tsey et al. 2010). One participant expressed how the group had supported her in clarifying her goals and making changes in her life. She said: *'Doing the course 'Community Service Work' [TAFE OTEN] has been a dream of mine since I was 13, but I didn't think it could be possible because I didn't go all the way through school, and it wasn't til I came to the group that now I know what I want to do in life.'*

The partnership with the TAFE provided a framework for participants to pursue a range of studies of their own choosing and to benefit from one-on-one sessions with a designated educator. To date thirteen participants have enrolled in courses and two participants have graduated with formal qualifications in the area of Community Services. Of these, one has commenced another higher level course and the other has gained full-time employment.

The positive flow-on effect of this learning environment is significant. Participants engaged in formal studies have often used the group sessions to present projects they are working on and receive feedback. The challenges, frustrations and successes are shared and celebrated. The increased sense of agency and self-esteem experienced by these participants flows into the group as they assume greater leadership roles and find stronger voices as a result of their personal achievements. Naturally, this increased capacity can be confronting for some in the group and needs careful management in order not to prove divisive.

There are many other examples of empowered initiative, agency and leadership that have emerged. There have been instances of specific support for individuals experiencing challenges in their lives, support for individual participant's ideas or projects, and increased voluntary participation related to the administration, promotion and management of the program.

As the reputation and credibility of the program has grown, many services and professionals have approached the group to seek connection and advice. These include legal services, community projects, an early intervention program, researchers, academics, advocacy and volunteer organisations and youth programs. In some cases, this has evolved into a formal partnership. In this context the program has served as a platform for transformation within the broader community by connecting and facilitating partnerships between services and more broadly.

Given sufficient opportunities for self-reflection, participants have enthusiastically lifted their gaze further afield. In an early example, the group created a collaborative art work to raise funds for victims of the 2010-2011 Queensland floods.

The first overtly political project occurred in 2013. Together with Australians for Native Title and Reconciliation NSW, the project titled *Underexposed*, focused on constitutional recognition for Australia's First Peoples and documents important women in the community, whilst exploring the medium of photography. The project comprised workshops, discussions with leading people in this field, as well as a multi-venue exhibition, public speaking engagements, media promotion and weekly blog (ANTaR NSW & NNM 2013).

Figure 19, 20 & 21: Developing texts to accompany photographs for the Underexposed exhibition.

With growing confidence and a capacity to look beyond the familiar environment, the program also embarked on a collaborative exhibition of Jewish and Aboriginal artists at a public venue in Sydney. This was held during NAIDOC Week celebrations in 2013. National Aborigines and Islanders Day Observance Committee (NAIDOC Week) celebrations are held across Australia each July to celebrate the history, culture and achievements of Aboriginal and Torres Strait Islander peoples. As part of this exhibition, the group engaged in ceramic and mixed media art workshops with invited guest Jewish and Aboriginal artists and visited the Sydney Jewish Museum and Boomalli Aboriginal Artists Co-operative, one of Australia's longest running Aboriginal owned and operated art galleries. As one Jewish artist expressed, '… *working with Ngala Nanga Mai has given me a unique opportunity to expand my art practice and extend it into the Australian context, with its own history of prejudice and ongoing pain'.* As a result of this partnership, and the shared experiences of working across cultures and histories, participants have expressed a greater mutual awareness and understanding of themselves and others.

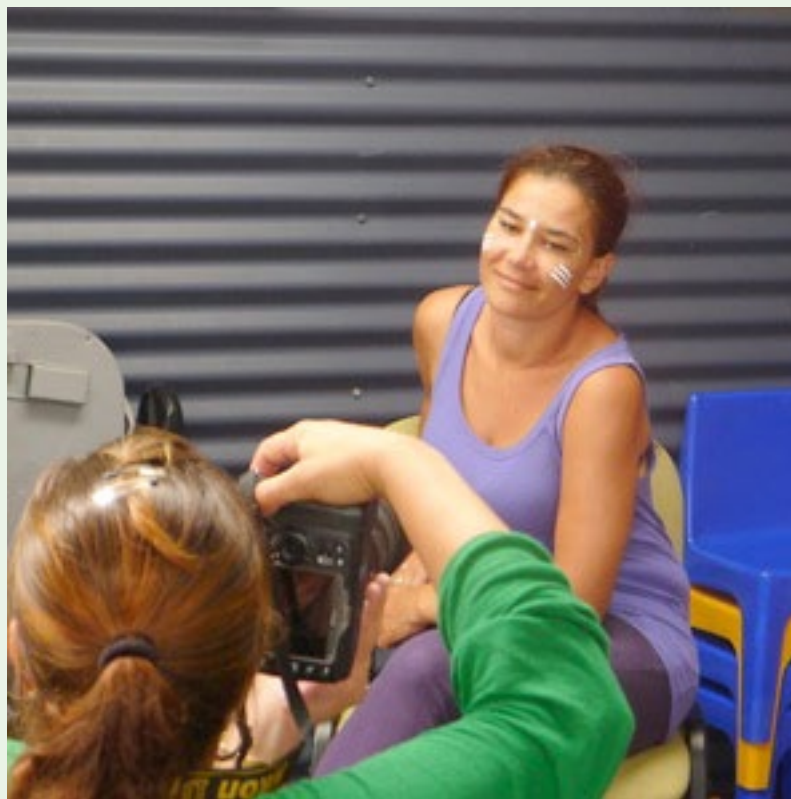*Figure 22: Experimenting with photography for the Underexposed exhibition.*

Figure 23: Learning circle commences for Aboriginal and Jewish artists collaborative exhibition We Dream, We Speak.

Figures 24, 25 & 26: As part of the We Dream, We Speak exhibition, Aboriginal and Jewish artists collaborated on a ceramic work, that was installed centrally at the exhibition.

Figures 27 & 28: The We Dream, We Speak exhibition was attended by friends, family and community members of exhibiting artists.
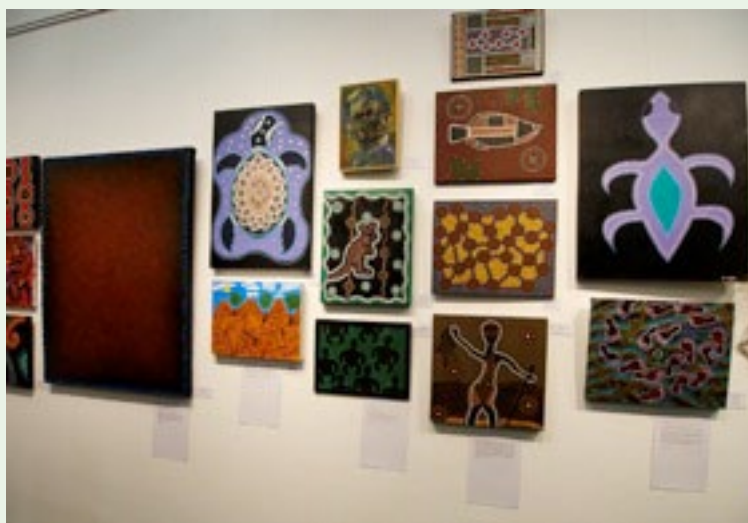
REFLECTION AND EVALUATION

An important part of the program evaluation is self-evaluation and self-reflection. This is encouraged and facilitated with both participants and service providers through conversations around the group table and in developing stories and texts.

Related to this, an important aspect of the creative process is the articulation of ideas and self-reflection through language. From the outset, participants were encouraged to share their art-making with others in words. Facilitative questions were modelled to foster an environment of sharing and responding in a supportive and non-judgmental way. This was further developed during the first exhibition of works where participants produced texts that wove together their thoughts and experiences about the group and their work. This took the form of autobiographical texts, reflections on the individual's experience of the group, explanations of art works, speeches delivered at the opening of the exhibition or poems generated in response to art works.

'I love making art, for me art is more than a way to escape, but it offers me a way to express those feelings about life, my family, my community, and my culture. Art also helps me stay focused and concentrate (which is something I'm sure most mothers have difficulty with).' (Participant)

As a result, many of the participants are confident to discuss the meanings of their art works. To support the interpretative skills of the group, learning processes on the formal elements of art as well as historical, cultural and social themes were developed. This has evolved to participants desire to develop writing skills as well as job application skills.

EVALUATION

A formal evaluation under the direction of Muru Marri, UNSW, used participatory processes to explore whether the program was meeting its aims (Osborne 2011; Freeman 2012). The evaluation methodology included a reflective and mixed methods approach, enriched by a review of the relevant literature. The qualitative component consisted of semi-structured interviews, 'yarning circles' [focus groups] and testimonials. The quantitative component examining service level data and individual transformation using the Growth and Empowerment Measure (GEM), a validated measure of psycho-social empowerment and wellbeing (Haswell et al. 2010). Results and methodology of this research are presented elsewhere (Osborne et al. 2013). The UNSW Human Research Ethics Committee and the Aboriginal Health and Medical Research Council approved the study. Both the qualitative and quantitative data indicated that regular participation in the program was associated with substantial positive change in many aspects of participants' lives with particular gains in the following domains of personal growth and empowerment:

- Social connectedness; feeling admired

- Self-confidence; feeling skillful and able to make change

- Meaning and purpose (identity, spirituality, ability to change)

- Aboriginal identity and sense of belonging, and

- Increased commitment and motivation to help others.

Results suggest that many of the external factors stimulating stressful emotions continued to persist within the participants' lives yet they felt better able to cope with these challenges (Osborne et al. 2013). In addition to these psycho-social gains, the evaluation revealed that participants in the program engaged regularly with the community health service, addressing the aim of access to health services. The consistent picture emerging from the interviews, the GEM scores and the service utilization profiles provides evidence that the program has enhanced the participants' capacity for agency and transformation in shaping their own lives and, likely, that of their children.

'This program has helped me become a better mother and person. Before being part of the program I felt lost and without support. This group has shown me the way to improve life for myself, my partner and my children.' (Participant)

Greater sense of citizenship is demonstrated by the group's desire to reach outwards, e.g., the fundraising for victims of the Queensland floods, volunteering, organizing benefit nights, talking to their families and others about issues like political identity and recognition, public speaking, donating money to the children's hospital and planning to establish a mentoring program for younger mothers.

While the program's impact and potential is increasingly clear, the evaluation has also revealed the many challenges to its continuity into the future. Despite the range of demonstrated impacts and achievements within a short time, the program, like most of its kind, remains vulnerable without certainty of long-term funding at appropriate levels (Haswell et al. 2013). This restricts its capacity as a program to flourish and grow to meet the needs of the many more young parents who continue to face isolation and lack of support.

CONCLUSION

The process of giving shape to experience through art-making and cultural literacy programs in the program is complex. It requires a multi-pronged approach to the many domains, namely art, education and health, which make up the program's core business. Through the art-making activities and cultural literacy programs, which provide opportunities for empowerment and leadership, the program supports and enhances the flourishing of urban parents of Aboriginal infants and children in a way that is both empowering and transformative. For this transformation to be maximized, it will require further and ongoing collaboration and alignment with all stakeholders within the system, including policy makers, funders, researchers, health practitioners, educators and designers of health services. Evaluations have provided evidence and an in depth understanding of the program's capacity to empower young parents, but its long-term capacity and reach will ultimately depend upon secure funding and resources.

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