Lateral violence within the Aboriginal community in Adelaide, South Australia: From dilemmas to strategies

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Declaration

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Abstract

This thesis critically examines the concept of lateral violence in the Aboriginal community in Adelaide, South Australia. Lateral violence describes how members of oppressed groups direct their dissatisfaction inward, toward themselves and those less powerful within their community. Lateral violence is believed to be an issue within Indigenous communities in Australia; however there is limited research to verify this as lateral violence is a relatively under researched area. Moreover, this term has been applied to Indigenous communities in Australia with little consultation. This research draws on theories of oppression, racism, stigma, social representation, coping, and identity to critically analyse and evaluate the concept of lateral violence (see chapter 1). In order to understand lateral violence in the local South Australian context and listen to Aboriginal people’s voices on the topic, two studies were conducted for this research utilising an Indigenous methodology as a guiding framework with a mixed methods approach combining quantitative and qualitative methods (see chapter 2).

Study 1 draws primarily on interviews with 30 local Aboriginal participants examining their understandings and ideas about lateral violence. Prior to the interviews most participants (n=21) completed two wellbeing scales. These were the Kessler-5 (K-5) which measured levels of psychological distress over the preceding four weeks, and the Negative Life Events scales (NLES) which measured the levels of negative stressors for a person over the previous 12 months. These scales were utilised to gain insight into participants’ wellbeing and association with experiences of lateral violence. A thematic analysis was utilised to draw out participants’ themes on lateral violence.
The results from the wellbeing scales indicated that overall participants were moderately distressed with just under a third (29%) scoring in the high to very high category of psychological distress. Those who scored high on psychological distress corresponded with a high number of life stressors. Further, many participants with high distress levels relayed traumatic and distressing extracts of lateral violence and were exposed to a number of negative life events. Interviews with participants identified 16 overall themes that were drawn upon when talking about lateral violence. This can be grouped into three broad recurring themes that included: perceptions and labelling of lateral violence; detrimental effects of lateral violence; and coping strategies and prevention of lateral violence. These broad themes correspond to chapters 3, 4 and 5 respectively.

Study 2 was an evaluation of six preventing lateral violence workshops conducted in five organisations, predominantly in Adelaide from March to June 2014. The evaluation incorporated two phases with phase 1 utilising a quantitative pre, post and three-months post survey with 72 participants attending the workshops. The quantitative questionnaires were analysed utilising SPSS with descriptive and non-parametric statistics. The results for the survey demonstrated a significant increase and/or maintenance of participants’ knowledge, understanding, and prevention strategies for lateral violence. In phase 2 of the study, follow-up qualitative interviews were conducted with seven participants three months after the workshop. Thematic analysis identified five recurring themes in the interviews in relation to improvements to workshops and strategies to prevent lateral violence. Study 2 incorporates chapters 6 and 7.

It is hoped that by increasing awareness of lateral violence and its effects, this research will contribute to the prevention and reduction of the incidence of lateral violence within
Indigenous communities in Adelaide and elsewhere in Australia. Given that many participants drew on a number of coping strategies to deal with lateral violence, it is anticipated that such information will benefit individuals, community, governments and funding agencies to support future research, education and community services in order for Aboriginal people to heal and to prevent lateral violence.
Acknowledgements

Undertaking this thesis was by far one of the biggest challenges in my life. It was a process that seemed endless, but I am glad there were many patient and supportive people urging me past the finish line.

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To my large family, my two beautiful children, Treena and Jackson, and husband Stan who continuously inspire me to achieve but unfortunately had to put up with my grumpiness to finish.

I would like to thank Dr Diane Brown who edited earlier versions of journal articles for publication and the final draft of my thesis in accordance with the *Australian Standards for Editing Practice* (2013, 2nd edition.) and national guidelines for editing/proofreading higher degree research theses.
Thesis structure

This thesis is formatted as a *thesis by publication* which is permitted under the guidelines of the University of Adelaide Graduate Centre.

There are five analytical chapters written in manuscript format. Two of the articles have been published in journals and one is currently under review. The manuscripts differ slightly to the published articles (see appendices 10 and 11).

Each analytical chapter has its own detailed methodology and research approach. Therefore there is not an overall methodology section in this thesis. The methodology discussed in chapter 2 relates to the principles of an Indigenous methodology.

For improved flow of the overall thesis, the references (in-text citations and footnotes) will be accumulative rather than specific to each chapter. A final reference chapter is included towards the end of the document.

I have chosen this format because I wished to share my work in relevant journals with peers and the Aboriginal community as soon as practical. I was encouraged to pursue this topic by many in the Aboriginal community who assisted in providing feedback and support.
Publications

Work contained in this thesis has been published elsewhere, as follows:


A statement of authorship will precede each of the five chapters which indicate the publication status of these chapters.
Conference presentations


Terminology

Cultural descriptors: Aboriginal, Aboriginal and Torres Strait Islander and Indigenous are typically used interchangeably within Australia.

How this terminology is used in this thesis is described below.

The term Aboriginal is predominately used in this research about Aboriginal people in Adelaide, South Australia. From experience, many people use this term rather than Indigenous to describe themselves in South Australia.

Furthermore, the term Aboriginal is used in many documents as either a stand-alone term which implies that the information relates to Aboriginal people only, or it is used generically to encompass both Aboriginal and Torres Strait Islander people.

Aboriginal and Torres Strait Islander is used to describe both Australian groups and this thesis will use these categories when referenced by another source. More recently, the term Indigenous has replaced Aboriginal and Torres Strait Islander as identity categories. Indigenous is the international word used by the United Nations to describe collective groups. Hence this term will be used to describe both groups in the thesis.

Regional names are often used to collectively identify Indigenous people. For example: Koori (NSW); Murri (Southern QLD); Noongar (WA, South-West); Nunga (SA); and Anangu (central regions – SA/NT). These terms are mainly used by Indigenous people and not generally by non-Indigenous people. These terms will be used in this thesis when referenced.
Aboriginal people will also use their or other local language group names such as Kokatha, Kaurna, etc. These names will be used in this thesis when referenced.

In this thesis, terminology for those other than Aboriginal and Torres Strait Islander is non-Aboriginal or non-Indigenous, Anglo-Celtic or “white” people depending on the context of use.
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Chapter 1: Literature Review

Overview of lateral violence

There are many forms of interpersonal violence that have existed and still exist in the world today amongst all members of society (World Health Organisation [WHO], 2014). Violence has been defined as “the intentional use of physical force or power, threatened or actual, against oneself, another person or against a group or community, that either results in or has a high likelihood of resulting injury, death, psychological harm, mal-development or deprivation” (WHO 2002, p. 5). Violence can have specific labels depending on the type displayed. These commonly include physical assaults, threats, sexual violence, family violence, domestic violence, suicide and bullying to name a few. Lateral violence, a recently applied label, describes violence and disruptive practices within oppressed groups and directed toward each other (Roberts, Demarco, & Griffin, 2009).

The concept of lateral violence originated in the early literature on colonialism from Africa (i.e. Fanon, 1963, 1967) and from Latin America (i.e. Frere, 1970). It was broadly argued that colonial practices were oppressive and were used to de-power and control the original or first nation people. Fanon (1963) argued that white colonialism imposed a false and degrading existence on its black victims, and as such power and control ensured conformity and an inferior status. Thus internalisation of this inferior status created an inferiority complex which resulted in infighting. Furthermore infighting became apparent when the colonised groups attempted to mimic the oppressor and took on the values and behaviours of the oppressors, and in turn adopted the violent behaviours amongst members of their own group (Fanon, 1967).
Divide and conquer was also a well-known strategy used by imperial and colonial powers to control and weaken empowered and collective people by enabling mutual mistrust, and this approach was used particularly towards Indigenous people (Posner, Spier & Vermeule, 2009).

Over the past three decades the concept of lateral violence was adopted within the nursing industry to describe their experiences of infighting and disruption. Other labels used in nursing to describe the same concept include *horizontal violence* (Roberts et al., 2009; Roy, 2007) and *eating their young* (Stanley, Dulaney, & Martin, 2007; Stokes, 2010). Some of the behavioural manifestations amongst nurses include bullying, disruption and negativity with the effects of: psychological distress and threats to patient safety; and decreases in nurse morale and retention (Walrafen, Brewer & Mulvenon, 2012). Such behaviour has had implications for patient safety and health care.

Indigenous communities in Canada have described lateral violence as the manner in which people in positions of powerlessness covertly and overtly direct their dissatisfaction toward each other, themselves and those in powerless positions (Native Counselling Services of Alberta [NCSA], 2008). Lateral violence has been linked to the oppressive experiences of residential schools: many Canadian Indigenous people were removed from their homes and placed in residential schools where they were subject to violence and abuse. Lateral violence was hidden and has only recently been exposed via recent research and discussion. In a report exploring student-to-student abuse within Canadian residential schools, it is argued that “it is good medicine to begin to look at and publish some of the ‘hidden’ or ‘difficult’ or ‘silent’ legacies of residential schools experience in a safe way in order to gain a better understanding of some of the challenges facing First Nations, Inuit and Metis communities” (Preface by Garnet Angeconeb in Bombay, 2014, p vii).
In Australia lateral violence is linked to the oppressive and intergenerational situation of colonisation. Through domination, racism and oppression, all aspects of Aboriginal people’s lives and culture were fragmented, disrupted, and controlled. Resistance to this cultural dislocation was met with further disempowerment that has become multigenerational and continues to be evident today (Australian Human Rights Commission[AHRC], 2011a, 2011b; Glover, Dudgeon & Huygens, 2005; Gorringe, Ross & Fforde, 2009; Langton, 2008; Milroy, Dudgeon & Walker, 2014; Watson, 2009). To attempt to overcome the damaging effects of colonisation, processes of decolonisation are now a priority for Indigenous people. According to Strelein and Tran (2013) “the business of decolonisation involves engaging with former colonial laws, policies and practices in order to create a ‘space’ for Indigenous peoples to express their unique identities, cultures and ways of knowing” (p. 19). In Australia it is also about understanding systemic oppressive processes and the consequences, which in turn affirms the legitimacy of a people’s ancestral culture and therefore encourages cultural renewal and potentially social transformation (Glover et al., 2005).

**Characteristics and behaviours of lateral violence in Indigenous communities**

Derrick (2006) highlights three key characteristics of lateral violence amongst Indigenous people of Canada: firstly, that Indigenous people can repeat the original oppression they experience by oppressing those around them; secondly, there is a focus on the negative in another Indigenous person or group; and thirdly, the use of collective cooperation to attack or undermine another person or group is common. Some of the specific behavioural manifestations include gossip, jealousy, bullying, shaming others, exclusion, ignoring, sabotage, verbal attacks, family and organisational feuding, blaming others, financial
greediness, and physical and sexual attacks (Bombay, 2014; Derrick, 2006; Equay-Wuk, 2012). Even though overt violence such as physical violence is included, the most commonly described behaviours associated with the term lateral violence include covert forms in Australia (AHRC, 2011b; Wingard, 2010). Coffin et al. (2010) has shown that covert behaviour such as bullying is rife amongst Aboriginal people in some communities in Midwest Western Australia, particularly amongst children. They found that in semi-structured and non-directional interviews, people of all ages chose to discuss the bullying of Aboriginal children by other Aboriginal children, rather than by non-Aboriginal children.

**Naming and dissemination of lateral violence in Australia**

It is uncertain whether the term or label of lateral violence is an accepted one to use for and by Indigenous people to describe infighting or *intra-cultural violence* in Australia. The prominence of the term coincides with the attendance of many Indigenous people from Australia at the Healing Our Spirit Worldwide (HOSW)\(^1\) conference in Alberta in 2006 where lateral violence within Canadian Indigenous communities was discussed, and in which many Australian Indigenous people participated. Yet, the label appears to have been applied with little consultation about whether it fits the Australian context.

The social psychological process of labelling a social phenomenon, such as lateral violence, can be understood within a social representations framework. Moscovici (1988) argued that the need to classify, compare and explain persons, objects and behaviours and to objectify them as part of their social background is a fundamental human cognitive process (Moscovici, 1988). People naturally *anchor* unfamiliar, new or strange ideas/concepts into existing ideas or social

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\(^1\) HOSW is an international conference for Indigenous peoples of the world to discuss issues and initiatives for health and healing.
representations. This is done by attributing meaning to concepts from existing and culturally accessible information. In other words people strive to make the unfamiliar familiar. Once a concept becomes familiar it is then transformed into a concrete, tangible and common sense reality (Augoustinos, Walker & Donoghue, 2014). This concept/idea can also become less visible over time and people reach a point where there is longer differentiation between the objects with which we align concepts (Moscovici, 1988). In other words, objects, perceptions, events and behaviours become normalised once they have become socially represented and consensually shared (Augoustinos et al., 2014).

Thus when this process is applied to the labelling of lateral violence, the label becomes familiar when it is compared to existing information about infighting, it is then conventionalised and becomes common sense. However, if the label doesn’t fit with existing information or is unsuitable, such as a label associated with the word violence, other suitable labels may be found to rectify the information or its meaning until it fits. Once a common sense or tangible label is applied to a concept it can open doors to greater awareness and learning which in turn can lead to change, improvements and progress. However, if the concept of infighting is normalised in the community without the expression of a new label it can remain hidden with little change.

The terminology of lateral violence has thus far been disseminated within Indigenous communities via various methods including workshops, articles, research, Facebook, emails, conversations, and the sharing of information at both national and community levels. Information about lateral violence has appeared in various news mediums such as the Koori Mail (Coyne, 2011); AHRC e-news (Gooda, June 2011; Oct, 2011); various websites such as Lateral love Australia, Koorreen enterprises (2015), and Creative spirits (2016). The
information and messages have been predominately instigated by Aboriginal leaders and/ or elders identifying lateral violence as a problem that needs to be identified and addressed within Indigenous Australian communities. Furthermore the previous Aboriginal Social Justice Commissioner Mick Gooda formally named lateral violence as a significant issue within Aboriginal communities (AHRC 2011a; 2011b, 2012).

**Where lateral violence is located in Australia**

The literature on lateral violence suggests that it is pervasive within the Aboriginal community – that it is everywhere such as in the home, community, schools and workplace. Lateral violence is believed to exist amongst Aboriginal men, women and children, including the vulnerable and the powerful (Langton 2008). Bennett (2014) argues that it is rare for Aboriginal participants to be living in an environment without lateral violence.

Lateral violence has been identified in places that include: Facebook, which has become a tool of scrutiny and surveillance in which both lateral violence and racial vilification are prevalent (Montgomery, 2014); the native title process where Aboriginal people can turn against each other for valuable land resources and access to traditional lands (AHRC, 2011b; Gooda, 2011a, 2011b); Aboriginal community corporations where internal disputes constituted the third most prevalent class of Indigenous corporate failure (Office of the Registrar of Indigenous Corporations (ORIC), 2010); the arts industry where lateral violence has potentially been perpetrated in three areas including (a) among individual art practitioners and managers (b) within the organisational governance structure, and (c) Indigenous funding bodies (Cook, 2012); and Australia’s university sector, between Indigenous academic, professional and general staff (National Indigenous Unit of NTEU, 2011). The pervasive nature of lateral
violence means that lateral violence is inescapable, intense and chronic within Indigenous communities and industries and can thus become normalised.

Related and central features of lateral violence

Racism and oppression in Indigenous communities

The main form of oppression directed towards Indigenous people is racism. Racism has been conceptualised as operating at three levels: Institutional racism is when there is differential access to goods, services and opportunities in society by race which is normalized, sometimes legalized and often manifests as inherited disadvantage; individual or personal racism is about prejudice and discrimination; and internal racism is described as the acceptance by members of stigmatized groups of negative messages about their own abilities and intrinsic worth. Racism manifests as an embracing of whiteness, self-devaluation (i.e. racial slurs as nicknames), resignation, helplessness and hopelessness (Jones, 2000). All these forms of racism continue to exist in Australia toward Aboriginal people. Studies that look at experiences and perceptions of racism suggest that Aboriginal people experience racism everyday via verbal and/or physical behaviours, discrimination, cultural domination and rejection from mainstream society (Dudgeon, 2000; Glover et al., 2005; Mellor, 2003).

Societal or institutionalism racism has recently been examined through the concept of whiteness which looks at power and privilege from white dominant spheres within society and how such privilege is used to maintain the status quo. By ignoring white privilege within society disadvantaged and/or minority groups continue to be oppressed and blamed for their circumstances (Riggs, 2007). Another form of blaming the victim through racist societal processes is denial. Babacan (2008) indicated that the denial of racism fails to validate victims’
experiences and transfers the blame from the perpetrator to the victim. This sense of blaming has major consequences for the self-worth and wellbeing of victims. Once these and other forms of racism are internalised by Aboriginal people the consequences can be dire. Dudgeon (2000) indicates that “aggression turned inwards” can lead to acts of suicide, self-mutilation, alcohol abuse and depression within the Aboriginal population and contributes to intra-cultural violence (lateral violence), which means that Aboriginal people hurt the people closest to them (p. 69).

The most recent Reconciliation Barometer in 2014 found that “more Indigenous people, than non-Indigenous people experienced racial prejudice in the last six months with the most common being verbal abuse or physical violence”. Reconciliation Australia indicates that this significant gap in daily realities underlines a key stumbling block in the relationship and impediment to reconciliation (Reconciliation Australia 2015a, p. 15).

Reconciliation between Aboriginal people and the general Australian population has been a salient political issue in the last two decades (AHRC, 2011a). For example, the 2014 Reconciliation Barometer indicated that 96% of Indigenous people and 64% of non-Indigenous people believe the relationship between these cohorts is important (Reconciliation Australia, 2015a). One example of relationship building is the National Roundtable on Racism (2009). This was a forum to assist in combating racism (see also Dudgeon, Milroy & Walker, 2014a). Hence relationship building is extremely important as research on racism in Australia has

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2 On 1st and 2nd June 2009, over 40 leading researchers and academics from across Australia met at the University of Western Australia Boatshed in Perth, for a roundtable discussion focused on research concerning racism towards Aboriginal and Torres Strait Islander Australians. The roundtable was instigated by Dr Pat Dudgeon, who saw it as one way to renew the momentum for combating racism. They developed the Boatshed Racism Roundtable Declaration (National Roundtable on research and racism toward Indigenous Australians, 2009).
highlighted major adverse effects that racism has on Indigenous health, wellbeing and mental health (Awofeso, 2011; Paradies, 2006b).

**Trauma and the intergenerational effects of normalisation**

The type of trauma experienced by Indigenous people in Australia is generally referred to as intergenerational trauma (Atkinson, 2002) and/or collective trauma (Krieg, 2009; Ratnavale, 2007). In the Native American context, it is generally referred to as historical trauma (Evans-Campbell, 2008; Willmon-Haque & BigFoot, 2008). In all cases, this trauma is described as a process that started from colonisation, and is prolonged, cumulative and intergenerational. Furthermore such trauma means that Indigenous people are continuously vulnerable and at risk to new trauma on an everyday basis (Krieg, 2009; Ratnavale, 2007). Ratnavale (2007) indicates that some of the behavioural effects of collective trauma are: loss of connection to self, surroundings and other people; deep mistrust of self and others; and violence and abuse at many levels. Such violence and abuse can have significant trauma reactions and can become normalised in communities. For example, in Canada, Bombay (2014) indicates that constant exposure to trauma and abusive behaviours amongst Aboriginal students at residential schools contributed to the modelling and normalisation of abuse that affected generations of children and adversely impacted their return to their communities. Research by Coffin, Larsen and Cross (2010) in Aboriginal communities in Midwest Western Australia exemplifies how intergenerational effects of trauma manifested as bullying and can become normalised. The research found that for Aboriginal children and young people, bullying was attributed to learned behaviour. This was passed down from parental trauma, which impacted on their capacity to care for their children and inappropriate modelling at home through the behaviour of older siblings, or by observing domestic violence. This can create an environment where
Aboriginal children oppress other Aboriginal children within a cycle of interpersonal violence and bullying (Coffin et al., 2010).

Identity

Indigenous identity appears fundamental to Indigenous people (Clark, 2000). However, it is complex, multifaceted, and aligned with socio-historical constructs and discourses (Paradies, 2006a). Indigenous identity has been constructed and used throughout Australia’s political history to help direct government policies and actions toward Aboriginal people. Aboriginal people, for example, were categorised into blood quantum of full blood, half caste, quarter caste, quadroons or octoroons in order to direct certain government policies or practices, often with devastating outcomes. For instance, under the Assimilation policy, those not categorised as full blood were those reportedly removed from family and culture and expected to merge with mainstream society.

Aboriginal identity continues to be on the political and legal agenda with the questioning of Aboriginality and authenticity common in a context of racism and oppression within Australia. For example, Andrew Bolt (Australian journalist) publically questioned the authenticity of many light skinned Aboriginal people. He indicated that “white Aborigines” are “people who, out of their multi-stranded but largely European genealogy, decide to identify with the thinnest of all those strands and the one that’s contributed least to their looks” (Bolt 2009, p. 1). Despite his assertions and quest for freedom of speech, his comments were judged to be in breach of 18c of the Racial Discrimination Act, as Justice Bloomberg was satisfied that fair-skinned Aboriginal people were likely to be offended, insulted, humiliated or intimidated by the insinuations in newspaper articles (Quinn, 2011). Gelber and McNamara (2013) indicate that the political and public ramifications of the Bolt case are that it reproduces
mischaracterisations of a *real Aboriginal*, which is about skin colour and disadvantage. These mischaracterisations of identity have also been framed in terms of a *deficit discourse* that originated during colonisation, tied to notions of deficiency rather than how Aboriginal people saw themselves (Fforde, Bamblett, Lovett, Gorringe, & Fogarty, 2013).

This view of the real or ideal Aboriginal person is not only represented by non-Aboriginal people but also by Aboriginal people and is at the heart of debates around the authenticity of identity and lateral violence within Aboriginal communities themselves (Gorringe et al., 2009). It follows that if Aboriginal people do not conform to this ideal view, they can be undermined in many ways, such as social exclusion or being insulted. For example, Gorringe et al. (2009) indicate that words or phrases such as *coconut* and/or *textbook black* are commonly used to undermine someone’s identity.

Moore (2008) refers to this ideal or stereotypical view of Aboriginality as *identity politics* where Aboriginal culture is represented as typical, traditionally oriented, internally homogenous, linked to the past and where its members are in solidarity. Moore is critical of leadership structures that propose cultural loss and discrimination as the major cause of social dysfunction within communities, and that the solution is to “re-affirm, revitalise, recover and remain true to the monolithic originary culture and self” (2008, p. 652). The ideal view ignores and does not recognise the contemporary Aboriginal person, who may be cosmopolitan, tertiary educated, works with or is associated with government and has assets; yet they are not assimilated and have a comfortable Aboriginal identity (Moore, 2008). This corresponds with statistics that reveal many Indigenous Australians fail to conform to such an idealised view of

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3 Calling or referring to another Aboriginal person as a *coconut* means you are accusing them of being black on the outside and white on the inside. This corresponds to having white or mainstream values and behaviours.

4 Calling or referring to another Aboriginal person as a *textbook black* means that you are accusing another Aboriginal person of being too educated to be an Aboriginal person.
Aboriginality. For example, about 90% of Aboriginal people do not speak an Aboriginal language as the main language spoken at home, yet over half (63%) identify with a particular clan, tribal or language group or mission (AIHW, 2015). Moore (2008, 2009) concludes that Aboriginal people who adhere to the discourse of the idealised Aboriginal may not embrace life with all its multiplicity, ambiguity and dynamism, choices and identities. Thus, failing to address identity politics in the context of finding solutions to Aboriginal issues is maintaining dysfunction and the status quo.

One’s identity can also be confirmed or undermined via social media such as Facebook or other cyber activities, an avenue that is dominated by young people. It is the most used form of communication between youth aged over 13 and around half of all youth between 8 and 11 years access and use some form of social media (Radoll, 2014). Facebook has many positive aspects and can enhance and affirm Aboriginal identity by establishing connectedness and cultural belonging through networking aspects of pre-contact culture, such as language, sharing of practical rituals, information about kin or mobs that have been lost, photographic displays and so on (Lumby, 2010). However, Facebook was also viewed as a destructive tool among Aboriginal youth, as it provides an avenue to question Aboriginal authenticity by imposing penalties for the actual or perceived faking of Aboriginal identity (Lumby, 2010).

**Silencing and stigma**

According to Freire (1970), exhibiting a culture of silence is common in oppressed groups. This culture is believed to be destructive as it inhibits its members from critically looking at their world or collaborating with others. Hence oppression can operate to silence Indigenous people, communities and or suppress sensitive topics. The silencing of particular issues avoids scrutiny and criticism from the dominant community who can be quick to judge and/or blame
the victim. In this sense silencing methods are a way of self-preservation and protection because once information is made public, then an individual or group can become vulnerable to outside influences (Gorringe et al., 2009). Others argue that silencing isn’t only about the fear of vulnerability but also about maintenance of power that is hidden and firmly embedded within its own structure (Bennett, 2014; Cook, 2012).

Violence appears to be one of the sensitive topics in the Aboriginal community in Adelaide, in which a code of silence is prevalent. This has also been seen in family violence (Human Rights and Equal Opportunity Commission [HREOC], 2006) where women’s voices, that speak out against family violence have been silenced, not supported (Smallcombe, 2004) or ostracised (Price, 2009) from their Aboriginal communities. An Aboriginal person who speaks up about sensitive topics, such as violence, in a public forum can be subject to reprisals which are similar to those against whistle blowers (Gorringe et al., 2009). Even if the silence is broken and people speak out, these issues may not be listened to particularly when being addressed at official and political levels (Sutton, 2001). As such, speaking up may be a deterrent. Despite this code of silence, Gorringe et al. (2009) suggest that “naming the elephant in the room” and having the courage to call bad behaviour out is critical to addressing sensitive issues such as violence and abuse (p. 10).

However, once information or a particular label of violence reaches public scrutiny it becomes prone to stigmatisation and prejudice. Link and Phelan (2001) indicate that processes of stigma expose social differences that are often applied to certain individuals and concepts. For example, colour difference of one’s car is not important, but one’s skin colour is of significance. Categorisations and labels apply to stigma and once a label is applied, a person can be linked to a set of undesirable characteristics, stereotypes and experience status loss.
Further, labels can also signal a separation of *us and them*. Link and Phelan (2001) conclude that stigma exists when elements of labelling, stereotyping, separation, status loss, and discrimination occur together in a power situation that allows stigmatisers to prosper. This power, referred to as *stigma power* (Link and Phelan, 2014) can be hidden and misrecognised processes that serve the interests of stigmatisers, as part of a privileged social system.

In a study Phelan, Link and Dovidio (2008), indicated that stigma and prejudice are shown to be the same concept when linked to the labelling of concepts and phenomena. This means that once the labelling of a concept, an individual or group has occurred differences are established and the social salience to those differences becomes evident with power distinctions (Green, Davis, Karshmer, Marsh, & Straight, 2005). Thus applying labels to violence and lateral violence can mean that Aboriginal violence is differentiated from mainstream Australian violence and therefore stigmatized. Aboriginal people are victim blamed, seen as deficient, further problematized and depowered. Such labelling of violence can then attract the attention of the media, can be misrepresented and further stigmatised. Therefore how information is framed and problematized by the media can compromise inequitable health and living outcomes by the process of victim blaming which can excuse societal responsibility and assistance. Hence masking or labelling issues as only Aboriginal problems will simply maintain the status quo (McMurray, 2011). For example, violence against women and children in Aboriginal culture attracts disproportionate media attention, situating the problem as one of Indigenous culture, which is not only racist but compromises future planning (McMurray, 2011).
Triggers for lateral violence

Conflicts and differences in communities

Lateral violence appears to be triggered by many internal tensions within communities which cause further trauma by dividing individuals, families and communities (Gorringe et al., 2009). Derick (2006) suggests these triggers are based on differences in communities including one’s socio-economic status, education level, physical appearance, sexual orientation, gender, and culture. To illustrate, blood quantum and biological/genetic differences in eyes, hair, and skin colour are often used by Aboriginal people to determine one’s authenticity to identify and Aboriginality. Coffin et al. (2010) indicate that children can turn on each other for being different such as being too light skinned or having pronounced Aboriginal features. Thus they can be seen as not being Aboriginal enough, or too Aboriginal and as such, can get picked on. Bennett (2014) indicates that difference in skin colour for Aboriginal people with light skin attract both lateral violence from Aboriginal people and racism from the broader population. She argues that lateral violence for Aboriginal people is about the justification of their skin colour and identity, and at times non-acceptance, which can result in lack of tolerance and exclusion. This can provoke feelings of confusion, hurt, and disappointment about having to prove your Aboriginality to your own community. This may be even more anxiety producing if the “light skinned” Aboriginal person knows little about culture or family and/or were part of policies that assisted in separating the family from community. Racism from non-Aboriginal people is about disbelief, if one is not physically recognised as Aboriginal. However, once Aboriginality is understood by non-Aboriginal members they receive the judgement and antagonism, as do other Aboriginal people via racism.
A similar phenomenon to that described above is the *acting white syndrome*. This has been described in the African American context as part of oppositional cultural theory (Fordham and Ogbu, 1986). The theory is about the concept of *acting white* via derogatory accusations by other black peers when a black person is perceived to have adopted white norms, values, attitudes and behaviours. In other words having “sold out” or abandoned their cultural heritage (Burrell, Winston & Freeman, 2012). This is a form of race-based bullying (Grantham & Biddle, 2014). There has been much research in educational settings that suggest that Black students will underperform academically, so as not to be accused of being white and that is at the heart of the Black-white achievement gap (e.g. Fordham & Ogbu, 1986; Grantham & Biddle, 2014). However, this phenomenon is controversial. Examples by Lundy (2003) suggest that black students are not trying to resist acting white but rather attempting to express their African essence. This is deemed a positive trait but unfortunately their grades suffer as a consequence in a white oppressive educational system. Tyson, Darity and Castellino (2005) indicate that dilemmas of high achievers aren’t specific to a particular cultural group. They suggest that oppositional cultural theory overlooked important similarities between the experiences of their informants and those of white students in which the burden of high achievement is a common experience.

*Differential access to resources, power and privilege*

Social determinants, such as low socio economic status, create division and difference which contributes to bullying behaviour (Coffin et al., 2010). As a disadvantaged and impoverished group, Aboriginal people fight for resources for survival. These resources can include access to education, employment, finances, and assets. Coffin et al. (2010) indicate that jealousy over possessions was of real concern. For example, Aboriginal people who are employed and well
educated can be pulled down by the community in a way that is similar to the *tall poppy*\(^5\) syndrome, described in the wider Australian community.

Access to power is also central to lateral violence. Power is inherent in systemic structures which legitimatise and perpetuate social inequalities. Langton (2008) indicates that Aboriginal people are often the victims of the system, which she calls “victims of vertical violence, and are entrenched in unequal power relations”. Aboriginal people will display “anomie and rage” from vertical violence and will then use this rage and frustration against themselves as an oppressed group, to turn on themselves and violate each other (Langton, 2008, p. 3). The power imbalance within Aboriginal communities is exhibited as “aggrandisement” by perpetrators (Langton, p.1). Gorringe et al. (2009) exemplify power in terms of entitlement, privilege, and money.

**Detrimental effects of lateral violence on wellbeing**

From the review of the literature thus far, it is clear that lateral violence is detrimental to the Indigenous community in Australia (see AHRC, 2011b). Overall health and wellbeing (Gorringe et al., 2009; Langton, 2008; Wingard, 2010) and psychological equilibrium (Kelly, Dudgeon, Gee, & Glaskin, 2009) are severely compromised by lateral violence. Yet the specific psychological effects of lateral violence have not been explored in detail. Some of the effects of lateral violence from a Canadian Indigenous perspective include feelings of shame, blaming and judging others, and a lack of trust in others (Derrick, 2006). Physiological signs such as sleep disorders, weight loss or gain, and depression (NWAC, 2015) also seem to be implicated.

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\(^5\) Tall poppy syndrome, an Australian cultural expression, describes a “disease” that feeds on the belief that anyone who appears to represent success, high ability, or admirable qualities must be attacked, demeaned, and cut down to the common level (Peeters, 2003, 2004).
Racism as a form of oppression within the Aboriginal community in Australia has been shown to be a contributing factor to wellbeing and mental health issues (Awofeso, 2011; Paradies, 2006b). Racism has served to disempower and control Aboriginal people. Hence feelings of powerlessness and dependency have been linked to poor health and life outcomes for Aboriginal people (Milroy et al., 2014). In contrast, having a sense of control over one’s life has been linked to better health outcomes.

**Resilience, coping and support for lateral violence**

**Resilience and coping with stress**

Aboriginal people are socially resilient and are celebrated as one of the oldest, continuous living cultures in the world. Yet Aboriginal people’s survival is rarely recognised in the literature as a significant source of resilience (Merritt, 2007). Aboriginal people continue to be resilient and have many resources that can protect them against risk factors. Protective factors include connection to land, culture, spirituality, ancestry, and family and community (Social health Reference Group [SHRG], 2004). However, multiple risk factors, such as unresolved grief and loss, trauma and abuse, domestic violence, removal from family, substance misuse, family breakdown, cultural dislocation, and racism and discrimination can psychologically overwhelm people who then struggle to cope and are likely to exhibit higher psychological distress (Kelly et al. 2009). The statistics for Aboriginal people indicate a proportionally high incidence of mental health (AIHW, 2015) and psychological distress (Australian Bureau of Statistics [ABS], 2016). There is a clear pattern whereby Aboriginal people with high to very high psychological distress levels reported a significantly higher than average number of life stressors than those with low or moderate psychological distress levels. Furthermore
Indigenous Australians have consistently shown a higher incidence of psychological distress than their non-Indigenous counterparts, ranging from 50% to three times higher (AIHW, 2009).

Therefore, the way Aboriginal people cope with psychological stress, racism and lateral violence is vital for survival, in building resilience towards wellbeing and mental health. Coping can be both at an individual and collective level. However, there is limited research which looks specifically at coping and support for Aboriginal people in Australia and certainly none that focuses specifically on stressors associated with lateral violence.

**Individualist vs collective coping**

Coping can be both at an individual and collective level. Hofstedt (1980) mapped 53 countries on four dimensions and found the most widely used dimension in differentiating cultures to be individualism–collectivism. However, there are differences in individualistic and collectivist coping styles. Individualistic cultures value independence and autonomy where the target of control is likely to be situated outside of the person. This means that individuals aim to change or control the external environment to cope. In collectivist cultures there is emphasis on group cohesion, interdependence and a connected sense of self where individuals have a desire for maintaining harmony and conforming to group norms. Thus individuals in a collectivist society aim to change themselves (their minds, emotions or behaviours) to fit the environment and to protect it (Chun, Moos & Cronkite, 2006; Weisz, Rothbaum & Backburn, 1984).

Much of the coping research and literature has been dominated by individualistic Western cultural paradigms (Kuo, 2011; Yeh, Arora & Wu, 2006) with four broad coping styles: active or problem-focused coping (i.e. confronting the problem); denial-disengagement or emotion focused coping (i.e. withdrawal); social support seeking; and positive reinterpretation (Mellor,
Research on collective coping emphasises cultural and social mechanisms as underlying the stress and coping process (Kuo, 2013). Australia as a whole has been seen as a highly individualistic culture (Hofstedt, 1980). Yet some subcultures in Australia are collectivist, such as Aboriginal people, where individuals are held together through kinship systems involving a shared sense of identity, responsibility, care and control (Milroy et al., 2014).

Collective coping responses can be: value-driven strategies (e.g. forbearance and fatalism); interpersonal based strategies (e.g. family and social support); culturally conditioned emotional/cognitive strategies (e.g. acceptance and avoidance); religion and spiritually grounded strategies (Fischer, Ai, Aydin, Frey & Haslam, 2010); respecting authority figures (e.g. elders, authority figures and traditional healers) and relational universality (e.g. belonging, reciprocal sharing, interconnecting and identifying with others) (Yeh, et al., 2006). Thus collective coping is conceptually broader than social support (Kuo, 2013).

Individuals will generally use a range of collective and individualistic coping strategies in their daily lives, whether they are from an individualist or collectivist society. Some forms of coping are deemed more functional than others. For example, Yeh et al. (2006) indicate that active and internal coping, which attempts to deal with problems by seeking support, taking concrete action or reflecting on possible solutions is deemed as functional and seen to result in positive consequences. In contrast, dysfunctional coping includes withdrawal, denial or repression, controlling feelings and having a fatalistic attitude, all of which result in negative consequences. However, Yeh et al. (2006) point out a bias towards problem-focused coping and personal agency which are concepts highly valued in individualistic cultures and therefore claims of functionality appear culturally based.
Forgiveness and punishment

Some researchers have suggested that another form of coping is forgiveness (Strelan & Covic, 2006). It follows that after individuals have been hurt they need to handle the aftermath. One possible response, among many, is to forgive the perpetrator. The forgiveness process can be enacted in relation to other forms of coping. For example, a study by Strelan and Wojtysiak (2009) of 170 Australian university undergraduate psychology students, found that students were more likely to use the approach coping strategies (i.e. problem solving) for general stressful events; and used approach and avoidance strategies (i.e. cognitive avoidance) for interpersonal hurtful events. In the study avoidance coping strategies were utilised earlier in the forgiveness process (impact stage) when there is an emotional upheaval, and approach coping strategies (i.e. reframe transgression or make plans to get over it) in the middle and later stages of forgiveness when things have settled. Moreover, a victim may decide to forgive when an offender does something constructive (i.e. make amends, apologise, show remorse, etc.). The victim will then re-evaluate the situation in order to recognise the value in their relationship which is deemed integral to forgiveness (Strelan, McKee, Calic, Cook & Shaw, 2013).

However, sometimes victims want some form of justice such as punishment. The preferred form of punishment in order to forgive is just deserts for the perpetrator, rather than revenge or retaliation and counter revenge, in which forgiveness is less likely to occur (Strelan & Van Prooijen, 2013).

This punishment process is different for payback processes within some Aboriginal communities, which is often translated as a vendetta or feud. When it is used appropriately, payback is a community sanctioned process that is part of customary law. It has very specific rules and is constituted by cultural reciprocity (Finnane, 2001). Therefore payback aims to expiate wrong doing and facilitate restitution. However, Finnane (2001) argues that payback
can become a confusing cultural process in communities and areas where collectivist responsibility has eroded to individual grudges involving violence and the community has little power to stop it. Despite this, Australian Courts now have a greater understanding and recognition of payback, particularly when it’s about restorative justice.

**Coping with racism**

Aboriginal people in Australia have had to endure and cope with racism for over 200 years. Mellor (2004), who interviewed a number of Aboriginal people about how they deal with racism, identified three broad styles of coping with racism which he labelled *defensive*, *controlled* and *attacking*. The *defensive* style (defend or protect the self) is a mix of strategies that include: passive behaviours (defeatist attitudes or resignation of the situation); active behaviours (avoiding future encounters or individuals, venues or situations); reinterpretation of the event (to lessen the impact of racism); social support, denial or not mentioning Aboriginal status in certain situations for equal treatment; and as a way to strengthen children to help them cope with racism in the future. The *controlled* style is primarily about maintaining self-control, that is, individuals can actively make choices not to be around or expend psychological energy on racism and thus may ignore racism. Finally *attacking* (control the environment/perpetrator) is about contesting racist behaviours, confrontation of some kind (i.e. educating the perpetrators through factual information), asserting identity and pride, or seeking external controls (i.e. calling on authorities, including supervisors or others deemed to have relevant power or knowledge to help sort it out).
Support

Support is significant in coping and is defined as resources provided to people in the context of formal and informal relationships usually made within an individual’s social network (Gottlieb and Bergen, 2010). The most common form is social support which is categorised as bonded and bridging support. Bonded relationships are those that occur between intimate associates and are often from homogenous backgrounds; and bridging relationships are between less intimate associates and are usually from heterogeneous backgrounds. A well-developed social network (Gottlieb & Bergen, 2010) or social capital (Brough, Bond, Shannon & Schubert, 2006) needs to include both bonded and bridging relationships in order to ensure adequate support to function. Social support via networking on Facebook has become popular, particularly among Aboriginal youth and the urban Aboriginal population. However, as discussed above, although it has become a site for kinship activity and continuity, it has also become a significant source of distress (Lumby, 2010; Montgomery, 2014).

A qualitative study with Aboriginal people in metropolitan Perth has reaffirmed the importance of bonded relationships within that community (Waterworth, Pescud, Braham, Dimmock & Rosenberg, 2015; Waterworth, Rosenberg, Braham, Pescud & Dimmock, 2014). Bonded relationships have many protective features and promote connectedness, identity, belonging, improved wellbeing and positive health outcomes (Brough et al., 2006; Waterworth et al., 2014). Kinship connections which are akin to bonded relationships are protective and lessen the physical and psychological burden of being part of a large group (Brough et al., 2006). Although bonded relationships are extremely important and they are maintained by family obligation, they can also be psychologically stressful. Hence, Aboriginal people can withdraw from bonded connections, such as immediate family, to protect themselves from potential physical or emotional harm (i.e. domestic violence). This withdrawal can contribute to
fragmented kinship affiliations, isolation, and a lack of social support and reduced opportunities to maintain and develop new bonded relationships. In terms of social engagement with non-Indigenous people (i.e. bridging relationships), there are also positive effects but it is often deemed as less important within the Aboriginal community. Such support is rarely incorporated outside of the Aboriginal community, unless it is via organisational support (Waterworth et al., 2014), but even this can be hindered by discrimination and negative stereotypes of Aboriginal people.

**Bystander support/non-support**

Bystander behaviour is linked to the literature on support. The bystander effect is understood as an individual’s intervention or lack thereof in emergency situations. An individual is less likely to respond to someone in crisis when large numbers of people are present, or if an individual responds she or he may have an extended delayed response. Yet, individuals may intervene if there is only one person present or when it’s an especially dangerous situation (Fischer et al., 2011). The reasons for this effect have been explained by several factors including diffusion of responsibility, pluralistic ignorance and or audience inhibition (Machackova, Dedkova & Mezulanikova, 2015). An Australian study of bystander responses to racist behaviours toward Aboriginal people by Neto and Pedersen (2013) indicated that the intention to engage in bystander anti-racism was significantly associated with: age (i.e. older people have higher levels of bystander anti-racist intentions and are more likely to intervene); political preference (i.e. people with right wing attitudes have lower levels of bystander anti-racist intentions and are thus less likely to intervene); gender (women are more likely to intervene); national identity (a stronger Australian identity is associated with less likely to intervene); collective guilt (more likely to intervene); empathetic concern (more likely to intervene); prejudice (less likely to
intervene); anger (more likely to intervene); and fear (less likely to intervene which may be due to fear of being judged by colleagues).

The bystander effect is also evident in the cyber world which means that when there are multiple witnesses to bullying there is less support or intervention for a victim. For example, Machackova et al. (2015) indicated that the effect was the same whether it was three or 10 or many more witnesses. Thus even a small virtual audience can influence one’s behaviour.

According to Thomas and Pederson (2015), bystanders are deemed as a potentially good resource to avert racism, especially when it is benign, or disguised as racist jokes or just having a laugh. Neto and Pedersen (2013) suggest educational interventions for young people, in particular, about how to effectively communicate with others about issues surrounding racism, to instil confidence in responding to bystander anti-racism and increase empathetic concern.

**Addressing lateral violence**

**Healing, empowerment and identity**

Healing and empowerment for Aboriginal people is necessary to address lateral violence. Healing for Aboriginal people has been described as a holistic process of physical, cultural, psychological and/or spiritual renewal to heal the wounds (Mackean, 2009). According to Milroy et al. (2014) healing and redress for Aboriginal people need to include processes of empowerment for self-determination and community governance; community resilience and restoration; and reconnection and community life. Importantly, reclaiming the history of the group and creating ancestral and community stories of connections to family and country can help to restore a sense of cultural continuity.
Healing and empowerment can occur at various levels with the most critically important starting point being individuals clarifying and or redefining their values and norms, which filter throughout the community for collective healing and goal setting (Dudgeon et al., 2014b). Furthermore empowerment needs to be strength based and on the premise that resources are available within communities. This is in opposition to health professionals and policy makers who attempt to “fix up” rather than channel strength from within Aboriginal communities and spaces (McCalman & James, 2006, cited in Dudgeon et al., 2014b). On an individual level, a strong sense of cultural identity, with strong family connections and knowledge about heritage are protective factors against the development of psychiatric morbidity (McKendrick, Brooks, Hudson, Thorpe & Bennett, 2013). An example of cultural renewal and identity on a community level in Adelaide is the cultural and language reclamation of the Kaurna language. This has meant the resurgence of identity and culture for the Kaurna people that enabled them to define themselves and transform their society in their own way rather than be defined by others (Amery, 2016).

**An appeal to address lateral violence**

An appeal to address lateral violence in Australia spurred the Australian Human Rights Commission (AHRC)⁶ to address Indigenous disadvantage within the National Human Rights Agenda by rebuilding relationships at three levels: between Indigenous people and the broader Australian community; between Indigenous people and governments; and within Indigenous communities (AHRC, 2011a). Racism is at the core of the first two levels with the third focusing on lateral violence, and on rebuilding and improving relationships specifically within Indigenous communities (AHRC, 2011a, 2011b).

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⁶ The former Aboriginal and Torres Strait Islander Social Justice Commissioner was Mick Gooda.
The literature suggests that Aboriginal people themselves (AHRC, 2011a, 2011b; BearPaw Media Productions, 2006; Gorringe et al., 2009; Langton 2008) rather than governments are best placed to fix lateral violence, and the internal conflicts and negative relationships within Indigenous communities. Aboriginal people have continually identified that what they need and want is to heal themselves and their communities. Communities need preventative and holistic healing processes that promote strong, resilient communities that focus on restoring social and emotional wellbeing (Dudgeon et al., 2014b). However, it is important that governments have a supporting role in providing structures and funding for necessary healing programs as well as removing existing structural and systemic impediments to healthy relationships within Aboriginal communities (AHRC, 2011a; 2011b). However, it is believed that funding opportunities over the last year have been compromised under the Indigenous Advancement Strategy7 (IAS) which appears to have disheartened many Indigenous people in addressing such issues (i.e. Brooks, 2015; Kerin, 2015; McInerney, 2015; Morgan, 2015; NACCHO, 2015; Peterson, 2015) A report after 12 months of deliberations and hearings indicates that the funding initiatives have been deeply problematic (NACCHO, 2016).

**Personal and community strategies for dealing with lateral violence**

Various articles have highlighted personal, professional and community strategies by Aboriginal people to deal with oppression, racism, trauma and lateral violence. Rebuilding relationship strategies, suggested by AHRC at the policy level, include zero tolerance to any type of abuse within Aboriginal communities and organisations such as bullying, harassment, intimidation and violence (AHRC, 2011b). Some articles advocate conversations, education

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7 The Indigenous Advancement strategy is where many individual programmes and activities have been streamlined into five broad categories in order for organisations to deliver important services in communities (Australian Government, 2015).
and community awareness of lateral violence (Atkinson, 2002; Bennett, 2014; Gorringe et al., 2009). For example, when working with trauma Atkinson (2002) believes education is fundamental to healing and utilizes a healing circle and the *dadirri*. The dadirri, which was first presented by Ungunmerr-Baumann (2002), is to listen deeply and connect with one’s inner spirit and soul. Coffin et al. (2010) indicate that the education system needs to cater for Aboriginal children, families and communities in Midwest Western Australia, in addressing bullying in the schoolyards, by providing peer support to parents and caregivers to assist in tackling the intergenerational impacts of trauma. Further, the authors advocate that systemic processes are needed to foster a community consciousness to reject violence and bullying as well as to address Aboriginal disadvantage.

Langton (2008) highlights some of the personal and collective tactics for lateral violence by women, particularly when bullied by men in work and community settings where “big bunda” (a lot of money) politics is linked to power. For example, strategies by women include holding meetings at places and at times that are inconvenient for men to ensure their limited attendance. Among Aboriginal men the Inteyerrkwe statement⁸ (2008) was developed and highlights their future roles as caring figures and apologizes to Aboriginal women for the hurt and suffering they have caused. It asks for support from the women to assist in moving forward together (Aboriginal Male Health Summit, 2008).

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⁸ The Inteyerrkwe statement was developed at the first Aboriginal male health summit in Alice Springs in 2008 by Aboriginal men.
Policy and legislative solutions

Lateral violence as a concept does not appear to have legal standing. However, bullying which is considered part of lateral violence has a number of avenues for complaints and redress. For example, action can be pursued under workers’ compensation legislation, anti-discrimination and harassment legislation, industrial legislation, occupational health and safety legislation and common law causes of action in contract and tort. The creation of the *Fair Work (FW) anti-bullying* jurisdiction now provides readily accessible external intervention into workplace bullying without applicants having to exhaust internal organisational processes. The literature on workplace bullying generally recognises bullying as “unreasonable behaviour that is repeated and highly detrimental and harmful to a person’s safety and wellbeing” (Worth & Squelch, 2015, p. 1016). On an individual level, the most common complaints associated with the effects of workplace bullying include stress, depression and lowered self-esteem, as well as physical symptoms such as muscular tension, headaches, nausea and stomach upset. At the more serious end, post-traumatic stress, trauma and suicide have been associated with workplace bullying (Worth & Squelch, 2015). Yet, Mellor (2004) indicates that the Indigenous people in his study were reluctant to use regulatory or legislative bodies for their complaints as they were seen as ineffective.

Online or cyberbullying has been an increasing problem and cyber safety is a growing concern, particularly for young people (Radoll, 2014). Now under the *Enhancing Online Safety Act 2015*, the Children’s e-Safety Commissioner was established as a complaints system for cyberbullying targeted at children and can direct large social media companies to remove offensive material (Young et al., 2016). However, defining and stopping bullying, whether in law, policy or research remains a challenge, despite good intentions (Worth & Squelch, 2015).
Therapeutic interventions and counselling

In order to cope and heal, Aboriginal people may seek counselling or therapy (group or individual) for a variety of social and emotional wellbeing issues. Within the Aboriginal community controlled sector there are a range of both Indigenous (50.9%) and non-Indigenous (49.1) counsellors providing counselling, support and advocacy (AIHW, 2016). Various types of therapies and techniques are utilised to engage Aboriginal people in counselling. These therapies can include narrative therapy which enables a process for clients to tell their story that is akin to storytelling in Aboriginal culture (Fredericks, 2006; Pratt, 2007). Another type is an adapted form of cognitive behaviour therapy (CBT) in which preliminary research is deemed to be suitable with Aboriginal people (Bennett-Levy et al., 2014). However, the suitability of CBT is still being reviewed and monitored (Dudgeon & Kelly, 2014). Art has also been considered a valuable tool in non-verbal therapeutic approaches in dealing with emotional and physical trauma for Indigenous people (Cameron, 2010); and Aboriginal traditional healing which incorporates physical and mental health has also been advocated. For instance, in Western Australia traditional healers work with the ngarlu (spiritual life force located in the stomach) on the premise that it has been weakened by colonisation and changes to lifestyle, which have contributed to dispossession, disempowerment, alcohol and drug use (Roe, 2010). In South Australia, traditional healers (Ngangkaris) provide similar healing in remote, rural and urban areas (in Adelaide) via a two way health care model (with Ngangkari and the health professional) (Panzironi 2013).

Aboriginal healing programs

Other national examples of healing and educational initiatives by Indigenous people for Indigenous people and community include: The We-Al-Li program (Atkinson, Nelson & Atkinson, 2010) to help heal trauma; The Seven Phases to Healing to work with loss and grief
and heal, anger and violence (Wanganeen, 2014); Aboriginal men’s healing such as the Red Dust healing initiative (Powell, Ross, Kickett & Donnelly, 2014) and the Mibbinbah Spirit healing program (Bulman & Hayes, 2011) to address issues of racism, trans-generational trauma, and loss of culture and identity, and endeavours to create safe spaces for men to heal. Women’s healing initiatives include the many Aboriginal family violence programs around Australia to safeguard and empower Aboriginal people such as the Nunga Mi:Minar service in South Australia (Snell & Small, 2009). A comprehensive review of Aboriginal healing programs has also been undertaken by the Aboriginal Healing Foundation (McKendrick et al., 2013).

**Cultural competence and safety**

Given the lack of specific and tailored resources for Aboriginal people’s healing, there is often reliance on mainstream health and mental health services which often fail to understand and address many Aboriginal healing issues. The effectiveness of therapeutic interventions conducted by mainstream services depends on the level of cultural competency, cultural safety and relationship building provided within the service.

As a response to cultural diversity in many countries, models of cultural competency have been developed in order to foster change at both individual and institutional levels. A model that has been used by the Australian Indigenous Psychologists Association (AIPA) for their positively evaluated cultural competence training for non-Indigenous therapists (AIPA, 2016) is the cultural development model (CDM) (Wells, 2000) consisting of six stages along a continuum. The first three stages are cognitive phases which incorporate learning and cultural knowledge acquisition. The latter three stages are based on affective processes of self-reflection, understanding and experience. These stages are: cultural incompetence which signifies a lack
of knowledge about cultural implications of health behaviour; *cultural knowledge* which is learning about the fundamentals of culture and their role in shaping and identifying health care behaviour; *cultural awareness* which is about distinguishing and understanding the cultural implications of behaviour; *cultural sensitivity* which integrates cultural knowledge and awareness into individual and/or organisational behaviour; *Cultural competence* which defines the routine application of culturally relevant interventions and practices; and *cultural proficiency* which is the integration of all the components of the CDM model into the organisational culture, and for individuals it is the mastery of cognitive and affective practices.

Cultural safety is a broader concept or framework and can include cultural competency. It extends beyond cultural awareness and sensitivity as it empowers individuals and enables them to contribute to positive outcomes (Bin-Sallik, 2003). Many organisations have embedded cultural safety (or alternatively, cultural respect) frameworks into their systems. One example is the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) which has embedded a cultural framework by including cultural competency training and principles for government and non-Aboriginal human service organisations (Frankland, Lewis & Trotter, 2010). Internal to VACCHO is a framework about taking responsibility for accessing Aboriginal rights to cultural safety which will lead to increasing the resilience of Aboriginal children, families and young people. What this means is that everyone has the right to feel good about themselves and their identities and to access their culture safely as Aboriginal people. Significantly, one of the key foundational issues for VACCHO with cultural safety is tackling lateral violence (Frankland et al., 2010).
Specific lateral violence healing and training programs

Programs specifically targeting lateral violence are common in the nursing industry in the United States. These are designed to empower nurses via forums through education, training, workshops and conflict resolution sessions (Ceravolo, Schwarz, Foltz-Ramos & Castner, 2012; Dulaney, Jacobs & Zager, 2010). Education and training is also provided in some undergraduate nursing programs in America to prevent lateral violence pervading the sector (Blair, 2013). In a similar vein, training programs on lateral violence appear to be increasing within Aboriginal communities in Canada and Australia and surfacing on websites. For example, in Canada Chameleon Strategies (2016) provide lateral violence workshops; and kweykwayconsulting (2016) uses restorative approaches for community wellness to prevent lateral violence. In Australia, examples include: Aboriginal cultural workshops (Ryan 2015) which conduct lateral violence workshops called the black poppy syndrome; and Koorreen Enterprises (2015) in Victoria which specialises in awareness and train-the-trainer workshops that counteract lateral violence called Lateral Healing. In Adelaide, local examples include: Kornar Winmil Yunti (2016) which provides opportunities, engagement and training about lateral violence for Aboriginal men; Lateral Love (2014) which provides information and regular newsletters and emails about lateral violence and lateral love; and Preventing Lateral Violence (PLV) workshops which is a one-day awareness and empowerment workshop delivered to various Aboriginal organisations in Adelaide (Clark, Glover & Butler, 2014).
Evaluations of Aboriginal programs are important to ensure good practice which is what all evaluations strive to achieve (Markiewicz, 2012). The importance of program evaluation becomes especially relevant when it is requested, owned and undertaken by Indigenous people (Hurworth & Harvey, 2012). At present there appear to be limited published evaluations for policy and programs concerning Indigenous people (Hunter, 2016; Productivity Commission, 2012). Further, there does not appear to be published evaluations of lateral violence interventions pertaining to Indigenous peoples in Australia. Yet, several published evaluations of lateral violence workshops have been conducted in the nursing field in the United States. One such example is by Dahlby and Henrick (2014), who conducted an evaluation of nurses from two nursing units before and after attending a one and a half hour training workshop on lateral violence. The instrument utilised was a modified version of the Lateral Violence in Nursing Survey (LVNS) (developed by Stanley, Martin, Michel, Welton & Nemeth, 2007b). There were 29 pre- and 25 post-test responses with the results indicating that the workshops resulted in a decrease in the frequency of lateral violence in the nursing units, better understanding of the causes and effects of lateral violence and assisted in developing healthier relationships within work units. Dahlby and Henrick (2014) suggest that these findings support other evaluations in the literature which find that awareness raising and teaching methods to combat lateral violence can be effective in decreasing the frequency and intensity of behaviours which constitute lateral violence.
The challenge of evaluating Aboriginal educational/awareness programs and workshops in Australia

Evaluation research for healing programs and interventions targeting Aboriginal people is not well-documented in Australia, in particular those that address social and emotional wellbeing (Healing Foundation, 2012). Many evaluations are also being conducted by non-Indigenous academics with an outsider’s evaluation framework, which can limit insider experience and knowledge (Price, McCoy & Mafi, 2012).

For example, Day and Francisco (2013) undertook a systematic review of interventions that had the potential to improve the social and emotional wellbeing of Indigenous people in Australia, from the available published research. However, they indicated that from 8,000 papers published only a small number of evaluations involved Indigenous participants and/or communities. The selected social and emotional wellbeing evaluations were then identified for screening for quality by the Maryland Scientific Methods Scale – a ranking system for research design according to strength of internal validity. Scores on this scale generally reflect the level of confidence that can be placed in the conclusions about cause and effect or certainty that any observed change is actually caused by a particular program or service. In the evaluations primarily those with quantitative methods scored a satisfactory rating on the Maryland scientific methods scale. Those programs that were evaluated using primarily qualitative methods were viewed as being low to very low on scientific rigour. Day and Francisco (2013) concluded that it is not currently possible to determine what might be considered evidence based practice for these interventions. Furthermore they acknowledge there are legitimate concerns about defining evidence in terms of criteria linked directly to quantitative evaluation methods, as they may not capture the holistic nature of Indigenous healing. This is a quandary; if interventions and evaluations are not conducted in a prescribed way by funding bodies they
may not be funded or supported. This does not allow for real change to happen within communities (Healing Foundation 2012).

**Research aims**

The quantity of published literature on lateral violence in Indigenous communities in Australia is limited with much of the available research being reported in the grey literature and accessed for this study.

The Grey Literature Network Service (2016) defines grey literature as

“a field in Library and Information Science that deals with the production, distribution, and access to multiple document types produced on all levels of government, academics, business, and organisation in electronic and print formats not controlled by commercial publishing, i.e. where publishing is not the primary activity of the producing body” (home page).

Grey literature constitutes a sizeable chunk of information pertaining to Indigenous people in Australia. This is in part due to limited journal publications by Aboriginal people and services in Australia. Instead Aboriginal people have extensively published their views in the grey literature category and as such material is rarely found in mainstream library collections (Rosewarne, 2009). The overriding aim of this thesis is to bridge the research and literature gap of explanation of the complexity and relational nature of lateral violence among Indigenous people in Australia, and to ensure that Aboriginal violence and perspectives are readily available to the widest possible audience.

Five specific aims that form the cornerstones of the current research are described below.
The research literature on lateral violence specific to the Australian Aboriginal context is minimal. Hence it is important to review the existing literature on this topic that is both published and in the grey literature. It is anticipated that this will add to the body of knowledge (conceptual, theoretical and experiential) on lateral violence in an Australian, and particularly South Australian, context.

The research in this thesis is specifically designed to examine how Aboriginal people themselves orient to the topic of lateral violence and understand the meaning of this concept. For example, does it resonate with their experiences, or is the concept simply another name for existing notions of community or family violence, or domestic abuse? Significantly, this thesis is designed to listen to the voices of Indigenous people themselves rather than focus solely on expert knowledge in this area.

Recent research has linked psychological distress and wellbeing in the Aboriginal community with racism and poor physical health. This thesis will explore the potential relationship between the experiences of lateral violence and psychological distress and wellbeing.

Whilst there are healing and/or educational programs and workshops for Aboriginal people in Australia there are only a few that focus on lateral violence. Furthermore Aboriginal training and healing programs are rarely evaluated let alone published. Hence it is important to review the literature on this topic in order to understand an evidence base of best practice and effective intervention strategies. As part of this process, Adelaide local and current preventing lateral violence workshops will be evaluated to understand their usefulness as an intervention tool to prevent lateral violence over time.
Lastly, this thesis will recognise Aboriginal people’s resilience and strength by identifying successful strategies utilised by Aboriginal people in their everyday lives to deal and cope with lateral violence. It is hoped that by sharing and disseminating this knowledge for others to consider, lateral violence can be curbed within Aboriginal communities.
Chapter 2: Indigenous methodology

Overview

This chapter has been written for many purposes. As this thesis is by publication, the stand alone methodology in each analytic chapter is sufficient to fulfil the requirements of the thesis. However, the limited space in these chapters/articles does not allow a thorough discussion about Indigenous methodology. Nor does it allow a space for my own critical reflections as an Indigenous researcher, which is central to an Indigenous methodology. Hence, this chapter will briefly detail some of the principle features of Indigenous research and methodology along with my positioning and critical self-reflexivity as a researcher.

Background

There has been a long history of oppressive research conducted on Indigenous people in Australia utilising dominant Western frameworks. Fredericks (2007) indicates that some of the research on Aboriginal people has been invasive to Aboriginal people’s lives and communities. This has been particularly relevant in psychology where oppressive research was used to inform various policies and practices that impacted on Indigenous mental health in Australia (Dudgeon, Rickwood, Garvey & Gridley; 2014). Indeed, as Smith (1999) points out, “research is one of the dirtiest words in the Indigenous world’s vocabulary” (p. 1). In order for research to be accountable and respectful of Indigenous people’s culture and knowledge, many Indigenous researchers have challenged dominant Western approaches. This challenge has progressed to a research paradigm that is inclusive of Indigenous knowledges and worldviews with the intent to guide Indigenous research and researchers into the future.

A significant literature on Indigenous methodologies has developed over the past 20 years that has originated from North America, New Zealand and Australia (e.g. Arbon, 2008; Kovach,
This is summed up best by Rigney (1999b) who points out that Indigenous researchers have been very active in seeking ways to disrupt the “history of exploitation, suspicion, misunderstanding, and prejudice” of Indigenous peoples (p. 117). In contrast alternative methodologies and approaches to undertake research that privilege Indigenous knowledges, voices, and experiences have emerged that reflect the social, material and spiritual conditions of Indigenous people’s lives.

Many of these Indigenous scholars have produced doctorate dissertations based on Indigenous methodological research. Indigenous methodologies as a guiding tool may not only be used for Indigenous research, but is potentially accessible to a range of audiences – both Indigenous and non-Indigenous people – as long as there is a grasp of the process. Even Indigenous scholars are not locked into utilising an Indigenous methodology and can choose to use other methodologies. For example, knowledge produced by mainstream positivist methods utilised by Indigenous researchers may still be crucial in the research process, as long as there is an acknowledgement that it is not the only way of knowing the world around them (Wilson, 2008). Thus Indigenous methodology is important because it can influence policy and shape practice in various contexts. Previously it was Western forms of knowledge that shaped the political arena rather than Indigenous knowledges or forms of inquiry (Kovach, 2009).

Understanding the terminology of an Indigenous methodology

In this section it is important first to clarify some of the terminology used in Indigenous approaches. For example, a paradigm seems to have many interchangeable words such as standpoints, worldview, framework, conceptual framework or epistemological framework and methodology – all of which can mean the same or mean different things depending on the
author and the context of the material. In general these words signify an overarching research approach that makes visible the way the world is seen. They represent the theoretical knowledge system that governs the research and gives researchers the tools to show how their methods are being aligned with a particular way of knowing (Kovach, 2009). A methodology also encompasses the integration of the knowledge system, the methods (tools, techniques and processes) and the purpose of the research. Smith (1999) indicates that an Indigenous methodology is made up of an Indigenous ontology (i.e. assumptions about the nature of reality), axiology (i.e. the nature of values), and epistemology (i.e. ways of knowing reality), that must be acknowledged and embraced. For Indigenous people, diversity (i.e. of language groups and of differences in the way they see the world, organize themselves in it, the questions they ask and the solutions they seek as Indigenous people) is also important to embrace. Wilson (2008) indicates that part of an Indigenous methodology and axiology is that we are mediators in the growing relationship between the community and whatever it is being researched. Another consideration for an axiology is that the community needs to own and lead its own research.

Metaphors can assist in further understanding Indigenous methods. For example, Wilson (2008) suggests that an Indigenous research paradigm is like a road map which signifies where you want to go: the method is the particular tools that you use to gather the information (the method of transport, i.e. the car, the bus, etc.). Fredericks (2007) indicates that the research methodology is about “laying out a path” (structure or plan) for the research which is found in an “external landscape” whereas the self is part of the “internal landscape” (p. 15).

**Tensions between paradigms and methods in Aboriginal research**

Indigenous research has largely been qualitative in nature and linked to the many forms of qualitative inquiry developed by critical, feminist, and postcolonial theories (Kovach, 2009). In
psychology, qualitative research is seen as both a method and a wider epistemological framework for conducting research. Within the broader framework, qualitative research considers multiple realities and a contextual integration of that knowledge in which meaning rather than measures is the central focus. There is a recognition that subjectivity is central to people’s views, perspectives, and frameworks for making sense of their world, their politics and their passions and carries over into the research process which is seen as a strength rather than a weakness (Braun & Clarke, 2013). Researchers will often integrate forms of qualitative inquiry in a multi-perspectival, multi-theoretical, multi-methodological approach or eclectic approach to social inquiry. This is considered as *bricolage* research which is slowing becoming accepted by the mainstream as well (Rogers, 2012). For example, in positioning herself in Aboriginal research, Dudgeon (2007) considers her research as “bricoleur” in nature as she is positioned between various paradigms (i.e. constructivism, feminist inquiry, and Aboriginal educational research) within a qualitative approach (p. 92).

Although qualitative enquiry is often positioned within an Indigenous methodology, it may not be a straightforward fit, especially if there is a tension between Indigenous and Western concepts. For example, Kovach (2009) indicates that she had difficulty when trying to fit tribal (localised Canadian Indigenous) epistemology into Western cultural conceptual rubrics. Many Indigenous scholars refute the need for a complete rejection of Western empirical approaches: rather, there is a need for deconstructing and decolonizing these dominant approaches (Smith, 1999). The tension appears paramount at the methodological level between Aboriginal worldviews and Western worldviews, particularly positivist views, rather than with research methods per se (i.e. qualitative and quantitative). To exemplify this tension, Roy (2014) indicates that positivism has an emphasis on decontextualisation that leaves little room for the concept of relatedness that is at the core of Aboriginal ontologies. The constructivist ontology of relativism, that argues that reality is socially constructed and that multiple standpoints on
reality can simultaneously exist, is somewhat more amenable to the Aboriginal ontological premise of relatedness.

Many authors argue that methods of qualitative and quantitative inquiry can be used simultaneously. However the suitability of approaches will depend on many factors such as the questions being asked within an Indigenous methodology (Roy, 2014), or the alignment with counterhegemonic work such as that undertaken in feminist methodologies, cultural and anti/postcolonial studies, critical race theory, and other critical approaches (Smith, 2005). It seems that suitability of methods needs to encompass openness, flexibility and be contextual and accommodating to Aboriginal perspectives and purposes (standpoints) (Roy, 2014; Weber-Pillwax, 2001). Furthermore some scholars (e.g. Botha, 2011; Cameron, Andersson, McDowell & Ledogar, 2010) suggest that the use of mixed or multiple methods enables a more comprehensive insight into the complexities of most issues in the social sciences.

**Central features of an Indigenous methodology**

**Incorporating the three Rs**

Accountability of the three Rs of respect, reciprocity and relationality, is at the forefront of an Indigenous methodology (Arbon, 2008; Martin, 2008). It follows that the researcher has a vested interest in the integrity of the methodology (respect) and also needs to form a respectful relationship with the ideas being studied (e.g. how and why I decided to study this topic, and some of the factors that influenced my point of view). This respectful relationship is realised if the results are reciprocated (reciprocity) for discussion and deliberation in the community.

An Indigenous paradigm comes from the fundamental belief that knowledge is relational and should be shared with all creations (i.e. people, animals, land, and the cosmos). Relationality
also conjoins time and logic which are all circular within an Indigenous context. This is in contrast to a linear form of time and logic central to Western worldviews which are considered illogical to Indigenous understandings. Identity for Indigenous people is grounded in their relationships with the land, with ancestors, past and present, and with future generations who come into being on the land. Thus relationship accountability or axiology is the accountability to the community and the universe. Therefore the research and researcher must be connected or be part of a community and set of relationships (Wilson, 2008). Martin (2003) indicates that the necessity of our relationship or relatedness with our ancestors and the people around us every day is important; even if we don’t know them, we still need to relate to them. This relatedness enables trust with people and community when conducting research, especially when one is using a research framework in which relational ontology, epistemology and methodology are necessary conditions.

Relationality also applies to the relational balance between Western systems and Indigenous ways of knowing, being and thinking. For example, Wilson (2008) indicates the relational nature of particular qualitative methods means that questions, quotes and themes should not be removed from their context as the themes need to be relational. Wilson (2008) adds that it is not always possible to know both the context and definition. The closer you get to focusing on an idea, you can lose the context and the more you pay attention to the context, you lose the definition or focus. Thus it is important to make the two relational and both accountable.

The relational nature of the research enables an insider approach which is the enabling of the positioning and understanding of relationality of Indigenous researchers (Weber-Pillwax, 2001; Wilson, 2008). An insider approach is the understanding of subjectivity in research where there is a lifetime of learning, experiences and analysis. The outsider approach is in line with an objective or an “Other” stance whereby outsider interpretations are constituted through a different lens or perspective. Indigenous people have a long history of being studied by
outsiders and an outsider approach is one in which expert knowledge of the “Other” is presumed (Smith, 2005, p. 87).

For an Indigenous methodology an emphasis on learning by watching and doing is salient. This means that participant observation can be an ongoing process in various settings such as the home, work and community. It is about building rapport and trust; relational accountability; and reciprocal and respectful relationships. In contrast, Western approaches using observational techniques use unobtrusive methods for objectivity which are believed to not influence those being observed or the context. This separates the researcher and the researched, resulting in disconnect between the research, the participants and the topic. The researcher must be accountable and build upon the relationship between the ideas and participants (Wilson 2008). Relationality also attributes to a shared sense of ownership of the research project. Although the researcher can claim that it is his or her project, one cannot claim ownership when there have been many contributors and relationships that progressed it (Wilson, 2008).

**The positive and solution focused nature of Indigenous research**

In Australia, Indigenous people are viewed within a deficit or problematic discourse (Fforde et al., 2013). An Indigenous methodology rejects such an approach and attempts to focus on empowerment and capacity building, especially in mentoring and creating spaces and support for new approaches to research and new examinations of Indigenous knowledge (Smith, 2005). Wilson (2008) adds that it is not necessary to dwell on Indigenous struggles or the powerlessness to change situations, but rather to focus on assertion and achievement. Moreover, it is acceptable to acknowledge the struggles but to focus on “where do we go from here to get over the negative stuff” (Wilson, 2008, p. 107). This means that Indigenous methodologies are cumulative and look for solutions to problems (Martin, 2003). For example,
focusing on health rather than illness can be contrasted to Western research practices that emphasise deficits, critique, and deficiencies (Wilson, 2008).

This appears especially in literature reviews within a Western paradigm based on critiquing and finding fault with another’s work, which in turn is believed to lift your own work. Wilson (2008) argues that it is not culturally appropriate to criticise or judge other people’s work (i.e. research paradigms, methods or techniques) as all ideas are judged through relationships, and one cannot know other’s relationships, therefore all ideas are equally valid. He further adds that this is a form of lateral oppression which is when you oppress other’s ideas to lift your own, and it can contribute to tearing people apart. This notion corresponds with the current research on lateral violence in Adelaide in which oppression nurtures difference and fault finding, which in turn contributes to infighting within communities. Thus by helping build upon strengths, ideas and relationships between people (within and between groups), there is room to overcome some of the differences and discrepancies.

**Vulnerability in Aboriginal research**

A sense of isolation and vulnerability is somewhat common for Indigenous people in academia and research. Kovach (2009), for example, revealed her struggle to balance an oral based knowledge system with the academic world. She felt vulnerable when conducting and defending her research. She also felt vulnerable disseminating and publishing her work in the academic world. Nevertheless, Kovach (2009) concluded that the more awareness you have about Indigenous knowledge, the richer your own experiences become and you contextualise your own experiences which lessens the sense of isolation.
Vulnerability is intrinsic to understanding ethical standards. Smith (2005) suggests that Indigenous perspectives challenge researcher reflection in two significant ways: first, Indigenous communities share with other marginalised and vulnerable communities a collective and historically chronic experience of research as the Object; and second, researchers also share the “research as expert” representation of who they are. It is an experience that Indigenous communities associate with colonialism and racism, with inequality and injustice (p. 101).

Furthermore, there may be vulnerability in relation to how Indigenous knowledge is represented by Indigenous people. Smith (2005) indicates that currently an Indigenous way of knowing may be different to that of ancestral ways of knowing, several hundred years ago, yet presently it is still a valid way of knowing. It provides access to a different epistemology, an alternative vision of society and an alternative ethic for human conduct. Research should therefore not be an interrogation of whether the way of knowing is pure or authentic but whether it is the means through which Indigenous people have made sense of their lives and circumstances.

**Positioning myself in the research**

**Introducing myself**

It is important to provide a voice about who I am. I have many identities but my Aboriginal identity is central to and relates to my other identities as a woman, mother, aunty and wife. I am an Aboriginal woman with cultural ancestry of Kokatha and Wirangu language groups on the West Coast and in the desert regions of South Australia (hereafter SA). My Aboriginal ancestry stems from my mother’s side and my father’s side is Anglo-Celtic heritage – original
descendants from Britain in the late 1800s who resided in Tasmania as free settlers and convicts. I live in two worlds and consider myself bi-cultural, yet my identity is Aboriginal as I grew up within my Aboriginal culture and large kinship structure. My mother, grandparents and great-grandmother were attached to Koonibba mission. This is a Lutheran mission on the West Coast of SA where Aboriginal people were placed from surrounding areas as part of various policies, directed at Aboriginal people in SA.

My father, as a non-Aboriginal man, was a friend and advocate for many Aboriginal people. He was well respected by both Aboriginal and non-Aboriginal people in Andamooka, the town in which he spent most of his adult life. My father met my mother in the context of hanging out with Aboriginal people in Port Augusta, South Australia. I see this as my father coming into Aboriginal culture rather than my mother leaving Aboriginal culture. I was born in Port Augusta and have spent most of my life (from 1975 to today) in Adelaide on Kaurna country. Adelaide is my home and is a place where much of my immediate family live. I have seven siblings, many cousins (who are also my siblings), two biological children, a husband, many step children and several who call me nana. My grandparents, uncles and aunties, all bar one aunty, have passed on and our one surviving aunty is a family treasure. My generation is now becoming the family elders and taking responsibility for passing on cultural knowledge. I continue to have a strong sense of family and connection and try to ensure the younger ones are culturally informed, and connected to each other as well as culture and the environment. I am now in my early 50s and from the moment I left school at 18 my various forms of employment have been to service the needs of the Aboriginal community. This has been to assist people into employment and education and as a clinical psychologist to assist Aboriginal people’s psychological wellbeing. As a researcher and lecturer I continue to assist with education and in providing a service to primarily other Aboriginal people with my research.
Paradigm orientation

As an Aboriginal researcher I have links to various paradigms such as constructionism, feminist approaches, and cultural studies to name a few. These paradigms overlap and advocate for multiple realities which are socially, experientially constructed realities (ontology), and where the researcher and researched are interactively linked as well as share the perspectives of those who have been oppressed within society. Like Dudgeon (2007), I may be undertaking research that is bricoleur or eclectic, even if my main goal has been to undertake an Indigenous research paradigm. However a bricoleur approach within qualitative research is typically described as multi-perspectival, multi-theoretical and multi-methodological (see Rogers, 2012). My method within this research is mixed methods, utilising both quantitative and qualitative approaches to collecting and analysing data. Various authors (i.e. Botha, 2011; Cameron et al., 2010) suggest that multi-method approaches are suitable within an Indigenous methodology depending on the questions asked.

My associations with the topic of lateral violence

Lateral violence is a phenomenon that I have experienced all my life within the Aboriginal community, but it was normalized and hard to see. It was present under many different names within my local Aboriginal community such as black politics or big bunda (big money) politics (see Langton, 2008). I was told when I was younger that “this is the way we do business”. Yet I was uncomfortable even then about the business but who was I to question it? It came to my attention as a significant issue within our community when I heard it discussed at the Healing Our Spirit Worldwide (HOSW) conference, in Alberta, Canada in 2006. The discussions were led by many Canadian Indigenous leaders who were seeking to challenge and prevent lateral violence. The concept resonated with me, along with some colleagues at the HOSW
conference, and we felt compelled to share the information with the Aboriginal community in Adelaide. The sharing began as informal yarns and transgressed to a formal process of undertaking workshops for the Aboriginal community in Adelaide in 2007. Initially the workshops were developed in collaboration with the Cooperative Research Centre for Aboriginal Health (CRCAH) (now called the Lowitja Institute). Although this national affiliation ceased, the workshops continued in Adelaide. Delivery of the preventing lateral violence workshops (PLV) has been conducted by two Aboriginal facilitators on each occasion (current facilitators: myself [Yvonne Clark], Karen Glover\textsuperscript{9}, and Stan Butler\textsuperscript{10}). Currently the workshops have continued by demand and have expanded interstate.

These workshops have been positively appraised via local community feedback and will be the subject of formal evaluation as part of this thesis. Prior to the start of the evaluation process of the research in 2014, 15 preventing lateral violence (PLV) workshops were delivered in Adelaide catering for approximately 300, primarily Aboriginal participants. Prior to the evaluation, the workshops generated conversations about lateral violence, and the gaps and need for resources to name a few. The pursuit of a PhD was a natural consequence of these initial workshops and productive conversations with the local Aboriginal community. I wanted to listen, learn, document and formally represent the views of others and provide sufficient resources to the community in the form of journal articles, and improved educational practices such as the refined workshops. Further recommendations from participants will also be pursued as part of this research.

\textsuperscript{9} Karen Glover is a Ngarrindjeri woman. She attended the HOSW conference in 2006. She co-developed the information sessions and workshops and co-facilitates many sessions.

\textsuperscript{10} Stan Butler is an Arrernte /Gurindji man living in Adelaide and assists with facilitation of the workshops.
The fit between my research and an Indigenous methodology

In a similar fashion to other Indigenous researchers I have felt a sense of vulnerability during the duration of my PhD. This has been primarily related to the research itself, the methodology or paradigm; the sensitivity of the topic of lateral violence; public exposure of my reflections; and publishing articles in the world of academia. Yet accountability is paramount and I wanted to ensure that my methodology would be accountable.

The notion of decolonizing the mind (Ngugi, 1998; Smith, 1999, 2012) which conveys that the conquerors not only imposed control over the country, but also on the minds of its subjects which continues to be evident today. Hence the need for decolonizing processes. In his writings, Ngugi (1998) indicates that Imperialism distorted African realities by turning normality upside down. Thus I have continually reflected upon this dichotomy of the colonizing–decolonizing process and asked myself where my normality or reality is placed and has it been distorted? I can potentially draw on many examples, but one from the previous discussion about “how we do business” is when I viewed lateral violence as a normal part of Aboriginal community life. I do not want to dwell on this perception, but I want to balance my two current worlds in which one is part colonizer and the other part colonised and how this is reflected in my research. Whether or not I am successful with this balance is uncertain. However, I feel secure in my knowledge about my Aboriginal community and culture and confident to conduct my research with an Indigenous methodology as a guide.

I am a clinical psychologist and a lecturer in psychology. In gaining such qualifications I learned about empirical epistemologies and methods in my undergraduate years. I am not opposed to such approaches and will utilise them when needed, but there was an intuitive pull towards qualitative methods within a constructivist approach. This appears to fit with
Indigenous methodologies. Thus for this process of reflection, it is important to intertwine academic with personal knowledge which is instrumental in an Indigenous methodology. The language of knowledge production has been confusing (i.e. epistemology, axiology, ontology etc.). And yet, I have grasped many of the central features of an Indigenous methodology in which I have attempted to ground my research. As I continue to learn about an Indigenous methodology, my future research may be somewhat different to the research contained in this thesis.

I believe I have brought a holistic approach to the topic of lateral violence. I have attempted to do this by incorporating both quantitative and qualitative methods of analysis to ensure I capture the complexity of the topic. As with academics who write on the topic of Indigenous knowledges I can certainly feel the tension and squirm as I try to balance the different methods into an Indigenous framework of relatedness. The quantitative approach utilises wellbeing scales that have been validated with Aboriginal groups in Australia to measure their health status. I will also use a quantitative time series (pre, post and three months post) surveys to measure the outcome of the preventing lateral violence workshops. The survey has also been refined over time as part of previous feedback sheets completed by participants involved in the (PLV) workshops in Adelaide. The questions asked in these surveys relate to changes in understanding and putting in place strategies to prevent lateral violence over time.

This method was specifically chosen in order for quantitative data to represent the study and to use it to talk to those who subscribe to an objective and quantitative measures approach to research, and whom may influence or control resources to support community intervention. This is also complemented by qualitative interviews and a thematic analysis in order to draw out more information and contextualise the quantitative data. Both methods (quantitative and
qualitative) incorporate a process that provides a bigger picture of the story of lateral violence in Adelaide.

Further consideration of the thematic process of analysis was whether I am decontextualising material when drawing on themes and reproducing dominant western forms of knowledge in which relatedness is omitted (Martin, 2003). My aim and emphases of a thematic approach is to understand and convey Indigenous participants’ worldviews, meaning, and diversity as well as ensuring the voices of Aboriginal people are prominent in the research. Although presenting themes involves extracting excerpts from interviews I have attempted to always contextualize this back to the individual’s story, which contributes to a collective and relational story about lateral violence in Adelaide.

The importance of Indigenous processes, knowledge and voices to drive the research, such as the voices of Aboriginal participants, research assistant, researcher and PLV workshop facilitators have been undertaken. Thus in applying respect, reciprocity and relationality, participant’s voices will be privileged, listened to, reflected upon and interpreted appropriately with an *insider* rather than *outsider or other* approach. It has been important that I engage in research with Aboriginal people, provide cultural safety and respect, relevancy and thus context to the material (Rigney, 1999a). I believe I have achieved this based on the level of trust I have received from participants to move forward with the personal stories they have shared. I asked participants if they wanted to see their transcripts, or have further involvement in the research, to which some replied: “I trust you to do it”. Similar to Martin (2003), I am amazed at the level of trust I established with my participants when I was conducting my research. I largely attribute this to the relational ontology, epistemology and methodology used in this research.
The pseudonym process can also be a contentious one. Dudgeon (2007) chose to identify participants by a letter of the alphabet in her thesis rather than providing pseudonyms, “a pretend name”, which is reminiscent of colonial oppressive practices of replacing Aboriginal names with European names (p. viii). Wilson (2008) points out that ethics within a dominant system generally disallows the naming of participants. He suggests that it can be unethical to not name participants, particularly if they are an elder whose role is to pass on information. Wilson (2008) further adds that this is a form of disrespect regarding the relationship that was built with the elder and their knowledge. Wilson utilizes dialogue between various Indigenous scholars to share knowledge. In response to naming people in research “Stan” indicates that using their real names depends on the nature of the knowledge, and it should not be a blanket yes or no. Therefore we need to make a decision about appropriateness and be accountable (Wilson, 2008, p. 116). From my research perspective I felt it was appropriate to use pseudonyms as a way to portray participants as people rather than numbers or letters. This way of naming also enabled participants to discuss a sensitive and personal topic without being identified and participants in the study accepted this. On reflection, perhaps I should have provided more choices. It might have been better, for example, to ask participants how they wanted to be portrayed and if they wanted to be identified, given that some participants were in an elderly age category. A dilemma for me was that I could not formally acknowledge participant contributions by name. I still feel obliged to let people know of my appreciation for their contributions to the research, partnering with me and educating others on the topic of lateral violence within the community. I could not have written this thesis without their assistance which encompasses a shared sense of ownership. Yet, this was a sensitive topic and I believe confidentiality empowered people to have their say about the topic and in this instance would continue to abide by the dominant ethical rules.
A central feature of an Indigenous methodology is ensuring that there is a positive or solution focused emphasis to the research. Although I reiterate and acknowledge Indigenous disadvantage and further discuss the effects of trauma, racism, colonisation and lateral violence, it is in the context of finding solutions and drawing on participant’s resilience and empowerment. A further consideration is the literature review process. I did not undertake a systematic literature review for a number of reasons. Firstly, there was limited information in the literature about lateral violence and it was disguised under many names in the past and potentially hard to search with library tools. Secondly, I wanted to tell a story about lateral violence and follow wherever the literature took me. This is a subjective process which, as discussed earlier, is relevant for an Indigenous methodology. Furthermore in telling a story in the literature, I did not overly critique others work, as information is accumulative. I was not comfortable with a critical approach and, as explained by Wilson (2008), criticizing others to lift your own work is a form of lateral oppression. Given that my thesis is on lateral violence, I did not want to display hypocrisy by oppressing others within the literature. I preferred to engage in a story about where lateral violence came from and where it has taken us, and how we help solve it and utilize a naturalistic process of digging around for information. And besides, the digging process was necessary, given there is dearth literature on lateral violence.

My last point is how I intend to reciprocate my research back to the Aboriginal community in Adelaide. My research did not have a reference group, nor was I accountable to a particular community and thus it has been difficult to feed information back to a consistent group. I have attempted to feed research outcomes back to those involved in the research and whilst this has been useful; many participants have been transient and therefore unable to be reached over time. I have built a relationship with many involved in the research and they have provided great feedback and encouragement. Reciprocity has been and will continue to be on a broader level of education, continuing to provide resources to the community via quality articles and
refined workshops. I chose to do a thesis by publication in order to provide immediate resources to the community. It is also hoped that the refined workshops and evaluation will also assist in attracting new resources that will in turn benefit the Aboriginal community in Adelaide.

**Summary and conclusion**

In conclusion, although the literature on Indigenous methodologies was sometimes confusing, once a path was cleared the process began to make sense. On self-reflection I came to understand that I have intuitively followed an Indigenous methodology in much of my past work and have pursued this methodology in my current research. The process of unpacking an Indigenous methodology and linking it to various aspects of my own research has enabled me to appraise my strengths and understand the areas in need of improvement. As I continue to research and further understand the concepts involved in Indigenous methodologies, any future research may be undertaken differently from the research reported in the present thesis.
# Statement of Authorship

**Title of Paper**
What's in a name? Lateral violence within the Aboriginal community in Adelaide, South Australia

**Publication Status**
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- Accepted for Publication
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- Unpublished and Unsubmitted work written in manuscript style

**Publication Details**

## Principal Author

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<td>Performed the literature review, called for and collected data (interviews with participants), interpreted data, wrote manuscript and acted as corresponding author.</td>
</tr>
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<td>Certification:</td>
<td>This paper reports on original research I conducted during the period of my Higher Degree by Research candidature and is not subject to any obligations or contractual agreements with a third party that would constrain its inclusion in this thesis. I am the primary author of this paper.</td>
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## Co-Author Contributions

By signing the Statement of Authorship, each author certifies that:

1. the candidate’s stated contribution to the publication is accurate (as detailed above);
2. permission is granted for the candidate to include the publication in the thesis; and
3. the sum of all co-author contributions is equal to 100% less the candidate’s stated contribution.

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<tr>
<td>Contribution to the Paper</td>
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Chapter 3: What’s in a name? Lateral violence within the Aboriginal community in Adelaide, South Australia

Abstract

This chapter presents a thematic analysis of the naming and framing of lateral violence within the Aboriginal community in Adelaide, South Australia. Lateral violence is a relatively under-researched area within the Aboriginal community, yet this term has been applied with little consultation. Interviews with 30 Aboriginal participants examining their understandings of lateral violence identified five themes relevant to the labelling and acceptance of the term *lateral violence*. By drawing on theories of oppression, social representations, stigma and racism, many of the themes indicate the importance and relevance of an overarching label of lateral violence to describe the infighting behaviours that have been normalised within the Aboriginal community. Assurance of a label makes the concept of lateral violence tangible and therefore able to be addressed. Despite this labelling, awareness of the concept of lateral violence in Adelaide appears relatively low. Resistance and opposition from the Aboriginal community to lateral violence appear to be associated with the stigma and prejudice attached to “violence”. Such a word can potentially render all Aboriginal people as intrinsically violent and therefore blameworthy, which can alleviate any responsibility for dealing with this chronic problem in broader society.

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11 The front page of the journal article published that corresponds with this chapter can be found in Appendix 10. The PDF has been inserted and can be accessed in the thesis when in electronic form.
Introduction

Recent understandings of lateral violence in Australian Indigenous communities have been largely influenced by Canadian Indigenous interpretations and experiences of lateral violence (AHRC, 2011b). The term is believed to exist within many Indigenous communities worldwide with the common causal explanations being oppression, colonisation, racism and intergenerational trauma (Bombay, 2014; Derrick, 2006; Native Women’s Association Canada [NWAC] 2015). According to Native Counselling Services of Alberta (NCSA) (2008) lateral violence is described as the way powerless people covertly and overtly direct their dissatisfaction inward, toward each other, themselves and those less powerful.

Some of the behavioural manifestations of lateral violence include gossip, jealousy, shaming others, verbal and physical attacks, sabotage and bullying (BearPaw Media Productions, 2006; Derrick, 2006; Equay-Wuk, 2012; NWAC, 2015). Accordingly, such behaviours can be triggered by differing levels of money, social status and education within communities, one’s blood quantum and links to culture and physical characteristics such as skin, eye and hair colour. The effects include feelings of shame, a blaming mentality, lack of trust in others, and negative judgments within communities (Derrick, 2006) as well as physiological outcomes such as sleep disorders, weight loss or gain, and depression (NWAC, 2015).

In the South Australian context this inward dissatisfaction and infighting within Aboriginal communities is referred to as lateral violence. The literature on lateral violence also signifies colonisation and oppression as contributory factors for lateral violence in the Aboriginal community (AHRC, 2011b; Gorringe, Ross, & Fforde, 2009; Langton, 2008; Wingard, 2010). Colonisation in Australia has resulted in the fragmentation of Aboriginal cultures and the disenfranchisement of Aboriginal people. Australia’s history of colonisation was founded upon
draconian and racist laws and policies which acted to control Aboriginal people and render them powerless. These laws and policies have had detrimental, cumulative and intergenerational effects on Aboriginal people which continue to this day (Coffin, Larson, & Cross, 2010; Glover, Dudgeon & Huygens, 2005; Watson, 2009).

The concept of lateral violence originated from early theorists in Africa (e.g. Fanon, 1963, 1967) and from Latin America (e.g. Freire, 1970). They argue that colonial practices were oppressive and were used as a power base to control the original or Indigenous peoples. They suggest that colonised groups attempt to mimic the oppressor and take on the behaviours as well as the values of the oppressors and in turn adopt violent behaviours that can be used amongst members of their own group. Discussions on colonialism often correspond with discussions on decolonisation. For example, Fanon (1967) viewed his writing as a decolonising instrument for liberation with the possibility of making changes for the better for black people in Africa. In Australia a decolonisation process enables Aboriginal people to come to grips with the colonial past by better understanding its damaging effects and consequences of oppression by the dominant culture. According to Strelein and Tran (2013) the “business of decolonisation” is done by engaging “with former colonial laws, policies and practices in order to create a ‘space’ for Indigenous peoples to express their unique identities, cultures and ways of knowing” (p. 19). Glover et al. (2005) indicate that decolonisation is about understanding the systemic consequences which in turn affirms the legitimacy of a people’s ancestral culture and therefore encourages cultural renewal and potentially social transformation (Glover et al., 2005).

It is uncertain when the term lateral violence was actually applied to Indigenous people in Australia. However, its introduction appears to have coincided with the attendance of many
Indigenous people from Australia at the Healing Our Spirit Worldwide (HOSW) conference in Alberta in 2006 where lateral violence within Canadian Indigenous communities was discussed. Many Australian Indigenous people participated in these discussions. Post conference the word about lateral violence appears to have spread amongst some Indigenous people and communities in Australia via various forums such as conferences, articles, websites, Facebook and emails. Furthermore the current Aboriginal Social Justice Commissioner Mick Gooda has formally named lateral violence as a significant issue within Aboriginal communities (AHRC, 2011b; AHRC, 2012; Gooda, 2011). In addition, information and awareness of lateral violence are being disseminated in South Australia via the Preventing Lateral Violence (PLV) workshops12 and in other education forums presented nationally (i.e. Koorreen Enterprises, 2015).

The phrase lateral violence has also been used in the nursing industry over the past three decades. Other labels such as horizontal violence (Roberts et al., 2009; Stokes, 2010) and eating their young (Stanley et al., 2007; Stokes, 2010) also apply to the nursing industry. Lateral violence is believed to be rife amongst nurses and is the name given to disruptive practices that members of an oppressed group, such as nurses within the medical and health sector, engage in towards members of their own group (Roberts et al., 2009). Moreover, nurses deal with their feelings of powerlessness and frustration by directing their dissatisfaction towards each other. Such behaviour has had implications for patient safety and health care. Consequently, there has been much activity around education and strategies for prevention of lateral violence in the nursing sector, particularly in the United States of America. This includes prevention programs in some undergraduate nursing programs (Blair, 2013) and in

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12 Preventing lateral violence, one-day workshops, have been delivered predominately in Adelaide since 2007. The facilitators (Yvonne Clark, Karen Glover, and Stan Butler) have formed a consortium and deliver the workshops on an ad-hoc basis and on request.
other training and workshops on lateral violence and conflict resolution (Ceravolo et al., 2012; Dulaney et al., 2010).

Whether or not lateral violence is the most suitable or even meaningful label to be applied to infighting behaviours of Indigenous people in Australia is uncertain. Even though there are conceptual and behavioural parallels of lateral violence between those in the nursing industry to Indigenous peoples, there appear to be vast differences, most notably in the type of oppression. For Indigenous people racism is the most common form of oppression, whereas in the nursing industry it appears to relate to professionalism and sexism. Furthermore, the oppression faced by Aboriginal people has its roots in colonialism, is intergenerational and applied to Indigenous people in all contexts and not just in the workplace. This means that lateral violence is inescapable, intense and chronic within Indigenous communities.

The labelling of any concept, such as lateral violence, is a fundamental human cognitive process and can be understood within a social representations framework. Moscovici (1988) indicates that social representations involve the content of everyday thinking and ideas that give rationality to religious beliefs, political ideas and the connections that people create. Social representations then make it possible for people to classify, compare and explain persons, objects and behaviours and to objectify them as part of one’s social background (Moscovici, 1988). He uses the term anchoring to describe a process which enables people to cope, accept a novel, strange or unfamiliar idea or perception that is incorporated within existing ideas or social representations (Moscovici, 1988). In other words, people strive to make the unfamiliar familiar by searching for meaning in what is already known. People also classify and name the unfamiliar by comparing it with existing information/ experiences that are familiar and culturally accessible. When made familiar an abstract notion, idea and/or
information are transformed into concrete and common sense realities (Augoustinos et al., 2014).

Once a concept or idea is objectified it becomes less visible and people reach a point where there is no longer a differentiation between the objects with which the concept was originally aligned and they become ordinary and common sense (Moscovici, 1988). In other words, people normalise objects, perceptions, events and behaviours once they have become socially represented and accepted (Augoustinos et al., 2014). Even though there is a need to turn the strange into something familiar (to objectify); there can be tensions within the unfamiliar and it is these tensions that prevent mental conditioning from taking over completely with the existing information, allowing readjustments to the information or model to occur. Tensions or discrepancies assist in reinvigorating and bringing new and different ideas to the surface (Moscovici, 1988).

Two further essential components to Moscovici’s theory are that firstly, he proposes two types of realities: the reified, the world of science which is the logical and rational form; and the consensual which is the realm of common sense. These realities are about understanding different ways of viewing the world and how it is socially represented to construct reality (Moscovici, 1988). Despite this, scientific and expert knowledge is often seen as valid and therefore given precedence even though consensual reality is more accessible to people. Secondly, Moscovici’s theory includes a slow germination of ideas, particularly if they are ideas or labels that have broader implications. He suggests that a longer period of gestation may be required before right or wrong inferences can be drawn (Moscovici, 1988).

Thus we apply this process to the labelling of lateral violence; if the label is unfamiliar we may compare it to existing information about infighting, and if it fits we conventionalise it and it
becomes accepted and common sense. If the label doesn’t fit with existing information we may search for other labels, or try and adjust the information or its meaning until it fits. Once a common sense or socially acceptable label is applied to a concept it can open doors to greater awareness and learning which in turn can lead to changes, improvements and progress. On the other hand, if the concept of infighting is normalised in the community without the expression of a new label it can remain resistant to change. Thus the importance of labelling in relation to change is vital.

Even though the naming and framing of concepts is inherent and perhaps consensual, it can be an issue, particularly if a label is associated with a word that has negative connotations such as violence. It has been well established that as a victim, perpetrator or witness, violence is an issue within Indigenous communities in Australia and occurs at an alarmingly high rate (ABS, 2008; Snowball & Weatherburn, 2008). The term violence can be confusing as it is often seen as physical violence rather than in its covert forms. According to the Australian Human Rights Commission, violence as it is referred to in lateral violence, also includes covert practices such as emotional, social, economic and spiritual violence (AHRC, 2011b). Furthermore labels with violence can attract the attention of the media. How information is framed and problematized by the media is of concern and can compromise inequitable health and living and enable a process of victim blaming. This can excuse societal responsibility and assistance, and may limit the linking of other risk and co-morbid factors influencing an issue. Therefore masking issues as Aboriginal problems will simply maintain the status quo (McMurray, 2011). For example, violence against women and children in Aboriginal culture attracts disproportionate media attention, situating the problem as one of Indigenous culture, which is not only racist but compromises future planning (McMurray, 2011).
The problematizing of Aboriginal practices and people has occurred since colonisation and continues to occur through current stigmatisation and labelling of various issues. Link and Phelan (2001) indicate that five components of stigma are labelling, stereotyping, separation, status loss and discrimination, all within the context of power differentials. Phelan, Link, and Dovidio (2008) established that stigma and prejudice are shown to be the same concept and therefore both linked to the categorisations and labelling of concepts and individuals. What this means is that once a label is applied, a person or situation can be linked to a set of undesirable characteristics, stereotypes and experience status loss. Further, labels can also signal a separation of *us and them*. The labelling process exposes social differences or power differentials which Link and Phelan (2014) refer to as *stigma power*. This power is often hidden – misrecognised processes that serve the interests of stigmatisers and part of a social system that gets them what they want.

Another related issue to labelling, stigma, prejudice and media influences is the silencing of the Aboriginal community when sensitive issues are discussed. Gorringe et al. (2009) posit that silencing of particular issues occurs to avoid scrutiny and criticism from the broader community. It seems that silencing methods may be a way of self-preservation and protection because once information is made public, an individual or group can become vulnerable to outside influences. Violence is a stigmatising topic and therefore a code of silence has developed around family violence (HREOC, 2006). Some women’s voices, in particular, that speak out against violence have been silenced, or not supported (Smallacombe, 2004) or ostracised from the Aboriginal community (Price, 2009). According to Freire (1970) maintaining a *culture of silence* is common in oppressed groups and indicates that silencing is destructive as it inhibits its members to critically look at their world or to collaborate with others. He stresses that it is important for oppressed people to develop a critical consciousness.
in order to recognise that this culture of silence is created to oppress. Despite this issue, even when the silence is broken and people speak out against violence in communities they may not be listened to, particularly when being addressed at official and political levels (Sutton, 2001), and as such speaking out may be a deterrent.

In summary, the labelling of lateral violence is important and essential in order to understand it and challenge the infighting behaviours within Indigenous communities. However potential stigmatisation and prejudice when using words such as violence could mean that violence (i.e. physical violence) may be seen as intrinsic and exclusive to Aboriginal people and therefore different to violence in other sectors of society, sanctioning further stigmatisation, oppression and depowering by the mainstream population.

Thus a label, such as lateral violence, could potentially provide unwelcomed social attention, which would be in addition to the everyday racism faced by many Aboriginal people in Australia (Mellor 2003; Reconciliation Australia, 2015b; Stolper & Hammond, 2010). To avoid such scrutiny some of the important issues which need to be discussed and addressed within Aboriginal culture could be silenced. Thus the Aboriginal community may not speak out against lateral violence as it will bring more disempowerment and oppression. Furthermore lateral violence could be reported as another Aboriginal problem and mask a broader societal problem and therefore alleviate any responsibility. The focus and blame on one sector in society can divert the attention away from other sectors of society.

There is a paucity of research specific to information on lateral violence in Indigenous communities in the Australian context. Much of the information is via websites and grey literature which is a useful starting point. Grey literature includes unpublished and informal
sources such as non-conventional or unpublished documents such as government reports, memoranda, conference proceedings to name a few. The Grey Literature Network Service (2016) defines grey literature as

“a field in Library and Information Science that deals with the production, distribution, and access to multiple document types produced on all levels of government, academics, business, and organisation in electronic and print formats not controlled by commercial publishing i.e. where publishing is not the primary activity of the producing body” (home page).

Grey literature constitutes a sizeable chunk of information pertaining to Indigenous people in Australia. This is in part due to limited journal publications by Aboriginal people and because Aboriginal people have extensively published their views in the grey literature category. This means that such material is rarely found in mainstream library collections (Rosewarne, 2009).

Thus the broad aims of this study are to draw on understandings of Aboriginal participants’ knowledge and experience of lateral violence within Aboriginal communities in Adelaide and to add to a larger body of published information on lateral violence. A specific focus in this chapter is to discuss the labelling process of lateral violence and whether the term has resonated with Aboriginal people.

**Research approach**

**Indigenous framework**

Engaging in an Indigenous framework is important and needs to embrace cultural safety and respect, have relevance and incorporate Indigenous worldviews (Rigney, 1999a). It is also about acknowledging and embracing Indigenous people’s ontology (i.e. assumptions about the
nature of reality), epistemologies (i.e. ways of knowing reality), axiology (i.e. the nature of values) and diversity (i.e. of language groups and of differences in the way they see the world, organize themselves in it, the questions they ask and the solutions they seek as Indigenous people) (Smith, 1999, 2012).

It has been well recognized that there has been a tension between Western and Aboriginal approaches to knowledge (Martin, 2003). However, this congruence has primarily been with Western positivist approaches rather than other approaches/ viewpoints/ paradigms which may be deemed more open, flexible and contextual to research (Roy, 2014). It seems that the suitability of an approach is dependent on the types of questions asked (Roy, 2014) or whether the paradigm is flexible enough to accommodate Aboriginal perspectives and purposes (Weber-Pillwax, 2001).

By understanding an Indigenous framework and accommodating a flexible approach, the participants in the study are the subjects of their experience and not the objects of this research. The research will convey the importance of an Aboriginal researcher to acknowledge Indigeneity and how this might influence the research. This is more than reflexivity, which is an essential approach that makes explicit deep-seated views and judgments that can affect the research process (Carpenter, 2010). In this process an Aboriginal researcher is not simply a native informant\textsuperscript{13} (Baker, 2012), but reflects their positioning and status, and how the information is understood, given Aboriginal cultural, community and family connections in Adelaide. Thus this is not a process of an objective researcher grounded in positivism but one whereby an Aboriginal researcher has an insider approach and lived the life of many of those

\textsuperscript{13} Baker discusses the notion of the native informant at length in her book and it has many contexts. A broad understanding is an Indigenous person who passes on information about Indigenous matters to the wider community as a “go between” (Baker, 2012).
who are participants, and who will use this knowledge and experience to inform interpretations and therefore determine meaning with participants. At the same time outsider input via supervisory and collegial input of the material is vital and will assist in further rigor.

**Procedure**

Prior to commencing the research, ethical approval was received from both the Aboriginal Health Research Ethics Committee (AHREC) in December 2012 and from the University of Adelaide Human Research Ethics Committee in May 2013. Once approved an invitation flyer was circulated through word of mouth, post and email with a request to pass on the information creating a snowball effect via Aboriginal work and personal networks (see Appendix 1). An information sheet was distributed to those who enquired and/or volunteered to be interviewed. The information sheet provided background information on the researcher, the supervisors, the research, rights and responsibilities of involvement, risks, and incentives (see Appendix 2).

Prior to interviews participants were given information about counselling services (see Appendix 9) and reassured they would be assisted or encouraged to seek help, if they became distressed during or after their interview. Participants were interviewed about their experiences, understanding and knowledge of lateral violence. The interviews included the following broad questions: “What do you know about lateral violence?” or “What’s your understanding of lateral violence?”; “Can you tell me about some of your experiences (individual, family or community) of lateral violence?”; “How has it affected you (family and community)?”; “What have you done to stop or curb lateral violence in the past?”; and “What would you like to see happen to make changes in the community?”. The interview duration ranged from 15 minutes to an hour, and they were audio-recorded and transcribed. On request transcripts were sent back to participants to check and/or endorse. Brief demographic information, such as gender,
broad educational and age categories, were also collated on participants and utilized as part of the study.

Analysis
The transcripts were de-identified and participants given pseudonyms to maintain confidentiality and anonymity. The material was then coded using NVivo10 qualitative software and analyzed using a thematic process, which aims to report patterns and themes emerging from the interview data (Braun & Clarke, 2006, 2013). Thematic analysis is regarded as a useful method for investigating an under researched topic (Braun & Clarke, 2006, 2013) such as lateral violence. The underlying method of eliciting themes was via six -phases including familiarisation of the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes and data analysis. The end result is a rich description of both recurring and unique patterns in the data set across all interviews in this study.

Findings

Demographic information
There were approximately 50 enquiries and expressions of interest for the project, resulting in 28 interviews with 30 Aboriginal participants who resided in Adelaide. Two interviews were with two participants who wanted to be interviewed together. The majority of participants were female (63%), and overall 47% of the participants had gained a university level education with 73% of females amongst those with the university level education. The ages of participants ranged from those in their early 20s to 60 and can be seen in Table 3.1 below. The most common age bracket was the 41-45 age category (40%) who were predominately female (75%). About 13% of participants were in the younger age bracket of 30 years and under. The
majority were over the age of 41 years (approximately 67%). There were three participants (10%) in an older age bracket (late 50s to middle 60s). Whilst this is not the formal age of an elder within the Aboriginal community, it is substantial given that there is an early and high mortality within this community (ABS, 2009).

Table 3.1. Age distribution of participants

<table>
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<th>Female</th>
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<td>2</td>
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<tr>
<td>26-30</td>
<td>1</td>
<td>1</td>
<td>2</td>
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<td>3</td>
<td>4</td>
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<tr>
<td>36-40</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>6.7%</td>
</tr>
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<td>41-45</td>
<td>3</td>
<td>9</td>
<td>12</td>
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<td>46-50</td>
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<td>2</td>
<td>3</td>
<td>10%</td>
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<td><strong>19</strong></td>
<td><strong>30</strong></td>
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**How the term ‘lateral violence’ is spreading**

Most of the participants had heard and were aware of lateral violence. However, just over a third (36%) were unfamiliar with or had become aware of the term only recently. For example, two participants indicated they first heard of lateral violence when they saw the project flyer and then made enquiries.

Many who were aware of lateral violence prior to interviews gained this understanding from local or national workshops, educational forums and/or social media outlets such as websites,
emails, blogs and Facebook. For example, many participants had received regular information on lateral love (described as the flipside of lateral violence) through social media posted by Brian Butler\textsuperscript{14} and associates.

The workplace was the most common site in which participants heard about lateral violence (approximately 47\% of participants) via collegial communication and with access to resources. Unfortunately the workplace was also described as a place where many participants experienced lateral violence, particularly if they worked with other Aboriginal people.

**Themes from interviews**

*Overview of themes*
Although many themes emerged from the rich data gathered in interviews, this chapter focuses specifically on the themes and patterns of information about the labelling of lateral violence and whether the term resonated with participants’ experiences of infighting: whether lateral violence is a suitable term to use. Five interrelated themes are presented and discussed, each capturing a distinct perspective regarding the labelling and acceptance of the term.

*Understanding the concept before a label*
Several participants described and identified a particular set of behaviours and attitudes associated with infighting within the Aboriginal community. They reported that once the label of lateral violence (or maybe even any label, as highlighted by Rachel below) was attached to

\textsuperscript{14} William Brian Butler & his niece Nicola Butler are the individuals behind the Lateral Love\textregistered{} & Spirit of Care for all Humankind 2012–2022 Campaign.
infighting it became real to them and validated their experiences. Some participants described a sense of relief to finally have a label to name these experiences. The examples below demonstrate this awareness and relief once the issue was actually categorised and labelled as lateral violence.

Rachel (age category 31-35): Yeah the term [lateral violence] but then when I did learn about it I thought ‘oh my gosh this makes so much sense’ and puts a name to what we already know ...so it doesn't matter how it’s labelled really as long as it’s labelled and to address it and maybe people will think twice about it, yep.

Eve (age category 31-35): So having that name for it [lateral violence] I guess has been helpful because I don’t know what we sort of called it [before].

Judy (age category 41-45): I was fascinated by it [lateral violence]. I thought, like many, that it put a name to things we had experienced or participated in and felt a sense of relief.

These extracts suggest that without a label the concept of lateral violence was abstract and vague. Prior to the labelling participants may have been uncertain of what lateral violence actually was, or what to call it or whether it really existed. In these extracts we can see, as Moscovici’s (1988) theory of social representations would suggest, how providing a name or label to a set of identified behaviours facilitates its representation and understanding in everyday common sense. The relief of having a name to identify the social problem also provided participants with the prospect that lateral violence can finally be addressed. The evidence here suggests how a once new and unfamiliar label (lateral violence) is anchored to a
familiar and existing repertoire of knowledge and experiences (infighting) that slowly come to
represent and make concrete a social problem that needs to be addressed.

_The label of lateral violence fits our experiences_

Several participants alluded to the label of lateral violence resonating with their experiences.
They typically indicated this by launching into a lengthy discussion of their own experiences of
lateral violence within their communities. It appeared that many participants were comfortable
with using the label and could show that it was a good fit for what is happening in the
community, having integrated the term into their everyday descriptions and experiences of
infighting within their communities.

Freda (age category 41-45): ...so that’s when I first came across lateral violence – it
started to get me thinking about [it]. We got the same issues here but it’s just a normal
sort of thing for Aboriginal people. We didn’t have the term, didn’t know anything
about lateral violence...what is this and I thought “that is so true” about our mob.

Kelly (age category 41-45): I think we all have experienced lateral violence, either at
home, or in our communities or at work.

Rita (age category 56-60): ...I found when I was considered as an equal [to a non-
Aboriginal person in mainstream society] ... lateral violence showed it’s ugly self
through my own communities and my own industry, particularly in competition for
positions ...and it’s sad, it’s really sad...first of all it was hard for me to acknowledge
that that is what is happening because I’d like to, I like to think that our people were
you know, loving.
Participants in these extracts actually describe how the unfamiliar term of lateral violence has now become familiar and tangible to those who use it. With such familiarisation, the label was used to describe many experiences of lateral violence leading to conversations about such experiences plus a realisation that it is destructive within family, communities and in the workplace.

A concern expressed by Freda is that lateral violence has become so normalised in Aboriginal communities that people don’t even know they have committed, or been involved in lateral violence. Moreover the infighting behaviours are so ingrained that communities may be oblivious to these behaviours. As described by Moscovici (1988) the labelling or naming of a social phenomenon enables people to talk about it, and to generate new knowledge and understanding.

*Bring it out in the open to start dealing with it*

Participants argued that unless a social problem is named or made tangible it can’t be dealt with. This argument is demonstrated in the extracts below.

_Judy (age category 41-45)...I felt really excited and hopeful that it [lateral violence] was out and that it was a problem. Talking about the elephant in the room, so to speak._

_Eve (age category 31-35): There was actually a name albeit wherever it [lateral violence] came from, but there was actually a name that we're able to sort of start sitting down and having conversations._
Russell (age category 36-40): ...But it [lateral violence] needs to be familiar, the wording, so if you had a campaign with that word[s] on it, and you know...

Rachel (age category 31-35): If I had a wish list I would make lateral violence more of a household name ‘cos [we are] naming it. It’s like domestic violence that gets a name; it gets a name and people understand well hang on yeah these things are happening, its domestic violence, it’s not on.

In terms of a social representation process, by making the unfamiliar label of lateral violence familiar and tangible, it can now be addressed. There was a sense of excitement in the interviews that seemed to be about both the label and being open about addressing it within the Aboriginal community. As discussed above in the previous narrative the infighting had become normalised and accepted as everyday life. Consequently, participants may have felt trapped and labelling may have offered freedom to progress.

Silencing methods may have also ensured that infighting behaviours were hidden from the broader society. For oppressed groups silencing methods are common, and thus naming something that has been chronic and detrimental to the community may also be liberating for many. A labelling and awareness process can draw out everyday champions who want to address lateral violence and make a difference for healing and intervention.
We had our own labels before ‘lateral violence’

Prior to the labelling of lateral violence some Aboriginal participants had used their own words to describe the infighting and oppressive behaviours within their local communities.

Paul (age category 41-45): It wasn’t called lateral violence back then; it was just everyone turning on each other...um “defiance”... everyone fought each other...just “fucking up”.

Ben (age category 18-25): Psychological warfare.

Leanne (age category 51-55): They have heard of [lateral violence] but they don’t know it’s here. So I have given the theme “above the line, below the line”.

Rachel (age category 31-35): It's similar to the tall poppy syndrome that kind of, I guess the meanings associated with that term, somebody made it sound very similar and from what I've seen around just internalised depression, that sounds a bit similar as well [as] taking it out on each other as a first point ‘cos we're like each other, we're like ourselves, we're each other.

Belle (age category 31-35): I always just referred to it as fighting crabs in a bucket type thing before I heard lateral violence.

In these extracts a number of labels were used to describe a similar concept of infighting such as “defiance”, “fucking up”, “jealousy”, “psychological warfare”, “above and below the line”, “tall poppy syndrome”, “internalised racism”, and “fighting crabs in the bucket”. The
participants represent diversity within the community in that they were from different age
groups and generations, different language groups, and different locations within Adelaide and
some were born in different states. Yet all were describing the same broad phenomenon with a
local label. There is no doubt that many more labels would have been used. For example, in the
1980s the label of “black politics” comes to mind, particularly from a work environment in an
Aboriginal context in Adelaide. Other labels noted are the “Black poppy syndrome” (Ryan,
2015). It appears that as soon as a common label was socially represented participants could
readily tie the concepts (their old label and the new label of lateral violence) together. The
initiative of one overarching label, or a common name that many can relate to, may ensure a
broad level of understanding, involvement and action to curb or minimise infighting and
promote more agreeable relationships and interactions.

**No it doesn’t fit – we need a ‘proper’ name for it other than lateral violence**

In contrast to participants who accepted and welcomed the label lateral violence, there was also
some opposition displayed by some participants in some contexts. They indicated that the
concept of lateral violence does not adequately fit community ideas and experiences of
infighting. More specifically, participants who objected to the word violence held that position
because of potential negative connotations for the community. This disapproval can be seen in
the extracts below.

*Lila (age category 56-60): People didn’t like the word violence within [the government
department the participant worked for]. I remember having the conversation and you
[indicating me on a previous occasion] said “call it what it is” and to me it’s violence.*
Lila: For me it didn’t matter what we called it. If the majority wanted to call it this or that or lateral violence I would go along with it ‘cos for me it’s about, I am not the only one whose gonna get abuse[d]. Hey it’s not just me: the whole committee decided to call it [name of alternative to lateral violence deleted so as not to identify the participant or department]… a consensus was made.

Rita (age category 56-60): But for us to stop doing that [lateral violence] I think we have to reintroduce it…introduce a very elementary … word so that people can identify with it...see what I believe is there’s a lot of people that still don’t know what it [lateral violence] is...Well what would I suggest as another name? Well I haven’t really thought about it, but more a name that I guess suggests that we need to identify it with something closer to home, you know, and even though it extends into some violent behaviour, that’s not how it starts out.

Rita: … it’s a feeling right now, we need to put a name, a proper name to it, and they [the Aboriginal community] need to put a proper solution to it that we own, and that’s really all I wanted to say.

Daisy (age category 46-50): I think it’s good in that it gives people words to understand what’s going on, and you know how divide and conquer can then become lateral violence… the marginalised people will attack each other but I think sometimes it’s a bad thing ‘cos it’s negative wording... It therefore oppresses a marginalised people more; it’s like a badge they wear... so it’s not keeping it in the positive.
Although the labelling process of infighting was considered extremely important, precisely what the label signifies and represents and how it is used was considered equally important. In the extracts above, participants are oriented towards a concern that the label could potentially be used by mainstream society to further stereotype all Aboriginal people as violent. As Daisy explains there is always the risk that lateral violence becomes a “badge” that Aboriginal people wear, perhaps indicating “violent person”. Clearly, Aboriginal people do not need to be further stigmatised for behaviours related to colonisation, oppression, trauma and disadvantage. A label such as lateral violence may then be seen as intrinsic to Aboriginal culture, enabling a victim blaming approach which in turn excuses mainstream society from any responsibility or culpability.

A label for infighting could be framed in a constructive way that captures some of the positive behaviours of Aboriginal people. From the first author’s experience labels such as *intra-cultural respect* and *lateral respect* have been in circulation to describe positive approaches to prevent lateral violence within the Aboriginal community in Adelaide and South Australia. Both Daisy and Rita also wanted a label framed positively to capture the positive or “loving” side of Aboriginal people but they didn’t offer any suggestions.

The responses above infer that a two-pronged approach to naming infighting might be preferable. Reference was readily made to lateral violence when participants talked about negative experiences of infighting (see for example Rita in theme 2) but they also used or wanted to use alternative labels that were more positive when they were oriented towards solutions. For example, within the lateral love website and campaign, infighting is still referred to as lateral violence and lateral love is used in a context for solution focused responses to
lateral violence. Similarly in Victoria the term *lateral healing* is used to counteract lateral violence (Koorreen enterprises, 2015).

**Summary and discussion**

This chapter has drawn on participants’ understandings, concept formations and experiences of lateral violence in order to consolidate information and to add to a body of knowledge on lateral violence in the Australian context.

Many participants in this study welcomed the concept of lateral violence and described how the label was useful in making sense of their experiences. On the other hand, there were also participants who opposed the label and believed it didn’t resonate with what was happening in their communities. This appeared to be related to the negative connotations associated with the word violence being attached to a label. Such a label could mean that Aboriginal people are further stereotyped.

Even though naming and categorising a social issue is an intrinsic human process; there are potential ramifications from the media and the mainstream population when a label has the potential to stigmatise and fuel any existing prejudice and racism. The awareness campaigns for domestic and family violence have been widespread, but these may have undergone the same process of uncertainty and scrutiny, particularly as society stereotypes the primary form of violence as physical. As with the definition of lateral violence, family violence includes a definition of psychological and emotional violence – not only physical violence. The potential for stigma and prejudice toward Indigenous communities is of real concern despite

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15 A definition of family violence accommodates the complex interlinking and intergenerational nature both within family and community. The violence includes physical, sexual, emotional, social, financial abuse (Lumby & Farrelly, 2009) and cultural and spiritual abuse (Australian Human Rights Commission, 2006).
the fact that violence and its many forms – whether it be intra- or inter-group violence – exist throughout the world. This potential for stigma and prejudice is likely to cause fear and uncertainty within Aboriginal communities. It is also a possible factor as to why awareness of lateral violence has been slow in proliferating in Aboriginal communities and action towards prevention, minimising or stopping lateral violence in communities has been rare.

To return to a previous question asked about whether lateral violence was the most appropriate label to describe infighting within the Aboriginal community, overall, the responses were generally “yes”. This is despite the limitations and stigma discussed, as highlighting lateral violence experiences and making the label tangible was nonetheless deemed very important by participants. This also meant that lateral violence is no longer a secret and/ or normalised to individuals and Aboriginal culture. Before the label many participants gave lateral violence a convenient or local name to help make the infighting process concrete; but an overarching label, such as lateral violence, can ensure that Aboriginal people are consistent and work together to find effective solutions. Such a label is consistent with other labels such as domestic and family violence which are readily used within the Aboriginal community.

If lateral violence remains an overarching term there is nothing to stop local labels being used or to introduce other labels, particularly those associated with prevention and healing initiatives. The examples of lateral love and lateral healing have provided positive ideals to move towards preventing lateral violence. Thus perhaps two alternative labels can be used – lateral violence as the destructive force and lateral love or lateral healing (or an alternative positive label) – as the mending force.
Lastly, it is important to note that Aboriginal voices and literature were prominent and privileged in the study. The number of participant responses was both surprising and pleasing. This says something about the willingness for voices to be heard, despite lateral violence being a sensitive and perhaps hidden/reluctant topic within Indigenous communities. Recruitment was via contact with familiar networks and a snowballing effect which appeared to attract many highly educated females in the mature age category (41-55 years of age). This period of life is also considered an age of responsibility for many Aboriginal woman who take on a grandmother or overseeing role within the family and Aboriginal community. These demographics mirror the researcher’s profile and this may have attracted participants from a similar background. Given the demographic profile of the participants, it should be emphasised that this research does not make any claims to generalisability of the sample.

The introduction of the term lateral violence in Aboriginal communities was relatively slow, from 2006 with its spread and uptake over approximately nine years. Moscovici (1988) indicated that some ideas take longer when there are associated implications. In this study approximately a third of participants were vague about or unfamiliar with the term lateral violence and its meaning. Thus this study may have empowered and been a voice for some people to find out and speak out about lateral violence in Adelaide and to not remain silent. Moreover, a process of comfort, confidentiality and anonymity may have also been a factor in participants’ motivations to be part of the study, as they could speak out without being identified and therefore in relative safety. Furthermore a strength of the study was the insider approach by the primary researcher, which enabled connection and deeper understanding due to contextual knowledge and exchange. This approach is well considered in an Indigenous methodology.
Statement of Authorship

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<td>Performed the literature review, called for and collected data (interviews with participants), interpreted data, wrote manuscript and acted as corresponding author.</td>
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**Co-Author Contributions**

By signing the Statement of Authorship, each author certifies that:

i. the candidate's stated contribution to the publication is accurate (as detailed above);

ii. permission is granted for the candidate to include the publication in the thesis; and

iii. the sum of all co-author contributions is equal to 100% less the candidate’s stated contribution.

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Chapter 4: Lateral Violence in the Aboriginal community in Adelaide: It affects our identity and wellbeing

Abstract

The term lateral violence describes how members of an oppressed group direct their dissatisfaction inward. This paper reports on qualitative interviews with 30 local Aboriginal participants in Adelaide, South Australia. This was in order to explore understandings, awareness, experiences, and effects of lateral violence. Most participants completed two questionnaires (the Kessler-5 and Negative Life Events scales) to gain further insight into their wellbeing and its association with experiences of lateral violence. Overall, four major interpretative themes emerged from interviews: the predominantly covert and insidious nature of lateral violence; the relationship between racism and lateral violence; challenges to identity as acts of lateral violence; and the destructive effects of lateral violence on wellbeing. The wellbeing scales indicated overall that participants’ psychological distress was in the moderate range, with 29% scoring in the high/very high psychological distress range. Many of the participants with high distress levels relayed traumatic narratives of lateral violence and were exposed to a number of negative life events. It is hoped that by increasing awareness of lateral violence and its effects, this will assist in preventing the incidences of lateral violence incidences within Indigenous communities.

16 A shorter version of this chapter/article has been published: Lateral violence within the Aboriginal community in Adelaide: It affects our identity and wellbeing (Clark, Augoustinos & Malin, 2016). Journal of Indigenous Wellbeing: Te Mauri-Pimatisiwin, 1 (1), 43-52. The front page of the journal can be found in Appendix 11. A PDF has been inserted into the document and can be accessed in the thesis in its electronic form.
Introduction

Lateral violence

Lateral violence refers to the ways oppressed and powerless people covertly and overtly direct their dissatisfaction inward, toward each other, and those less powerful than themselves (NCSA, 2008). The term lateral or horizontal violence has been applied to nurses, as an oppressed group in the nursing industry for at least four decades (Ceravolo et al., 2012). The concept of lateral violence for Aboriginal people is relatively recent in Australia and its introduction appears to coincide with Australian Indigenous involvement at the Healing Our Spirit Worldwide conference (HOSW) in Alberta in 2006 (Clark & Augoustinos, 2015) and in information conveyed through the Aboriginal Social Justice Commissioner about lateral violence (AHRC, 2011b).

Within Aboriginal communities in Australia, lateral violence is believed to exist within families and communities including the vulnerable and the powerful (Langton, 2008). Lateral violence appears to have a broader focus than domestic and family violence, in that it can include any member within the Aboriginal community at local and national levels. Lateral violence amongst Aboriginal people has also been recognised in various industries in Australia such as: the Aboriginal corporate sector and organisations (ORIC, 2010); the university sector (NIU/NTEU 2011); the Arts sector (Cook, 2012); the health sector amongst Aboriginal health workers (Winsor, 2001); and in the native title process where Aboriginal people can turn against one another for valuable resources and land (AHRC, 2011b; Gooda, 2011a, 2011b).

Lateral violence has its roots in colonisation and includes a spectrum of behaviours such as gossiping, jealousy, bullying, shaming, social exclusion, family feuding, organisational
conflict, physical violence (AHRC, 2011b), verbal attacks, sabotage, harassment, intimidation, backstabbing, threats, and blaming others (Derrick, 2006; Equay-Wuk, 2012). The effects of lateral violence have reportedly contributed to a blame mentality, lack of trust in others’ judgments (Derrick, 2006), as well as physiological signs such as sleep disorders, weight loss or gain and depression (NWAC, 2015).

**Features related to lateral violence**

*Trauma, distress and wellbeing*

Trauma overlaps and is often implicit in the literature associated with lateral violence. The type of trauma associated with Indigenous people in Australia is transgenerational (Atkinson, 2002) or collective trauma (Krieg, 2009; Ratnavale, 2007). This type of trauma is usually described as a process that started from colonisation, is prolonged, cumulative and intergenerational where Aboriginal people are continuously vulnerable and at risk to new traumas on an everyday basis (Krieg, 2009; Ratnavale, 2007). Bombay (2014) notes that for Aboriginal Canadians constant trauma within residential schools contributed to the modelling and normalisation of abuse that affected generations of children and adversely impacted their return to their communities. Colonisation is also believed to play a part in the widespread and devastating effects on the physical, social and emotional wellbeing and mental health of Indigenous people (Dudgeon et al., 2014b). Two domains of social and emotional wellbeing, psychological distress and stress, have been measured as high to very high within Indigenous communities. These measures also signify a significantly higher than average number of stressors (with high distress) than those with low or moderate psychological distress levels (AIHW, 2009). Furthermore, Indigenous
Australians have consistently shown a higher prevalence of psychological distress than their non-Indigenous counterparts up to almost three times higher (AIHW, 2015).

**Oppression, power and racism**

Historically, Fanon (1963) argued that white colonialism imposed a false and degrading existence to its black victims, and used power and control to oppress and ensure conformity and an inferior status. Internalisation of this inferior status created an *inferiority complex* which contributed to infighting. Similarly, in Australia, conformity was through racist laws, policies and practices associated with colonisation directed at Aboriginal people. This resulted in the development of feelings of powerlessness which have had detrimental, cumulative and intergenerational effects on Aboriginal people (Glover et al., 2005; Paradies, 2006b). Racism has been generally conceptualised as operating at three levels: *institutional racism* occurs when there is differential access to goods, services and opportunities in society which are normalised, sometimes legalised and often manifest as inherited disadvantage; *individual or personal racism* is about prejudice and discrimination; and *internal racism* is described as the acceptance by members of stigmatised groups of negative messages about their own abilities and intrinsic worth. This manifests as an embracing of *whiteness*, self-devaluation (i.e. racial slurs as nicknames), resignation, helplessness and hopelessness (Jones, 2000). All these forms of racism continue to exist in Australia toward Aboriginal people today (Dudgeon, 2000; Reconciliation Australia, 2015a; Stolper & Hammond, 2010) and as a result, feelings of powerless continue. For example, a recent study by Paradies and Cunningham (2012) found that amongst a nationally representative group of Indigenous Australians, almost a third (28%) reported feeling powerless as a reaction to racism.
Research on racism in Australia has highlighted major adverse effects on Indigenous health, wellbeing and mental health (see for example Paradies, 2006b; Paradies & Cunningham, 2012). In a study on the effects of racism in urban Adelaide, Ziersch, Gallaher and Bentley (2011) found that besides the negative physical and mental health effects of racism, these effects extended from vulnerability to violence and hampered access to valuable resources. Furthermore when oppression and racism are internalised, the effects can be devastating and this has been described as “aggression turned inwards” (Dudgeon 2000, p. 69). This process of internalisation can lead to acts of suicide, self-mutilation, alcohol abuse and depression within the Aboriginal population. And this contributes to intra-cultural violence which means that Aboriginal people hurt the people closest to them.

**Identity**

Indigenous identity is fundamental, complex, multifaceted, and aligned with socio-historical constructs and discourses (Paradies, 2006a). Indigenous identity has been constructed and used throughout Australia’s political history to help direct government policies and actions toward Aboriginal people. Aboriginal people were categorised into blood quantum (“full blood”, “half caste”, “quarter caste”, “quadroons” or “octoroons”) in order to direct certain government policies or practices, often with devastating outcomes. For example, under the assimilation policy, those not categorised as full blood were those reportedly removed from family and culture, to merge and become absorbed into white Australia (HREOC, 1997).

Aboriginal identity continues to be on the political and legal agenda with the categorisation and questioning of Aboriginality common in the context of racism and oppression within Australia. For example, the Australian journalist Andrew Bolt publically questioned the authenticity of many light-skinned Aboriginal people (Bolt, 2009) and he was later judged in breach of 18c of
the *Racial Discrimination Act 1975*. Gelber and McNamara (2013) indicate the political and public ramification of the Bolt case is that it reproduces mischaracterisations of a “real Aboriginal”, which is about skin colour and disadvantage. This view of the real or idealised Aboriginal can be represented by both Aboriginal and non-Aboriginal people and at the heart of debates around the authenticity of identity within Aboriginal communities themselves. Moore (2008) refers to this as *identity politics* where Aboriginal culture is represented as typical, traditionally oriented, internally homogenous, linked to the past and where its members are in solidarity. This ideal view ignores and does not recognise the contemporary Aboriginal person who may be cosmopolitan, tertiary educated, works with or is associated with government and has assets; yet they are not assimilated and identify comfortably as Aboriginal (Moore, 2008). This coincides with statistics that many Indigenous Australians fail to conform to such an idealised view of the “real Aboriginal”. For example, about 90% of Aboriginal people do not speak an Aboriginal language as the main language spoken at home, yet over half (63%) identify with a particular clan, tribal or language group or mission (AIHW, 2015). Thus, failing to address identity politics in the context of finding solutions to Aboriginal issues is maintaining dysfunction and the status quo. Fforde et al. (2013) suggest that identity has been framed in terms of a *deficit discourse* that originated during colonisation where constructed truths about Aboriginal people were tied to notions of deficiency rather than how Aboriginal people saw themselves.

**The present study**

Given that lateral violence is a relatively new term applied to Aboriginal people for an *age old problem*, there is limited information and literature in Australia directly relating to lateral violence. There is often reliance on Canadian Indigenous literature, overlapping literature that
is central to lateral violence such as trauma, oppression and racism and grey literature. Grey literature has been defined by the Grey Literature Network Service (2016) as

“a field in Library and Information Science that deals with the production, distribution, and access to multiple document types produced on all levels of government, academics, business, and organisation in electronic and print formats not controlled by commercial publishing i.e. where publishing is not the primary activity of the producing body” (home page).

Furthermore, there is virtually no information on the effects of lateral violence and how it may affect wellbeing and Aboriginal identity. Thus, this research aims to contribute to the limited literature on lateral violence in Australia as well as explore the possible associations amongst lateral violence, stress and psychological distress and identity for Aboriginal people in Adelaide. Thus it is hypothesised that lateral violence is a major impediment to Aboriginal people’s identity and wellbeing in ways that are similar to racism and trauma.

**Research approach**

**Indigenous framework**

When engaging in research with Indigenous people an Indigenous framework is necessary to endorse cultural safety and respect, provide relevancy and thus context to the material (Rigney, 1999a). Such a framework is intended to embrace Indigenous people’s ontology, axiology and diversity (Smith, 1999, 2012). The positioning and understanding of relationality of Indigenous researchers and the use of an insider approach (Wilson, 2008) are also important features. This approach to gaining knowledge is in stark contrast to Western empiricism. Yet some Western research approaches/methods which are considered more open, flexible and
contextual can complement Aboriginal perspectives and purposes (Weber-Pillwax 2001). Thus the qualitative, thematic methodological approach adopted in the present study seeks to understand and convey Indigenous participants’ worldviews, meaning, and diversity as well as ensuring that the voices of Aboriginal people are prominent in the research.

Participants

There were approximately 50 expressions of interest in the project with 30 Aboriginal participants consenting to take part in the study. Inclusion criteria were identification as Aboriginal and/or Torres Strait Islander, being 18 years old or over and residing in Adelaide. Of the 30 participants the majority were female (63%). Ages ranged from early 20s to mid-60s. About 13% of participants were in the younger age bracket (30 years and under) and 10% were in their late 50s to mid-60s. Many of participants were between the ages of 41-45 (40%). Furthermore almost half (47%) of the participants in the study had a university level education.

Materials: Wellbeing scales

Before the interviews most participants (N=21) were administered two questionnaires, the Kessler-5 (K-5) and negative life events scales (NLES), that measured aspects of their wellbeing. Nine participants did not fill out questionnaires for various reasons such as English being a second language and having a preference to yarn rather than fill out forms. The K-5 asked whether during the past four weeks participants felt: nervous, without hope, restless or jumpy, whether everything was an effort, and so sad nothing could cheer them up. The five response options included: all of the time; most of the time; some of the time; a little of the time; and none of the time. A total score under 5 indicated no distress, 5-11 low to moderate distress, 12-25 high to very high distress and greater than 25 extreme psychological distress.
The NLES asked, from a list of 15 events, whether participants had experienced: serious illness; serious accident; death of a family member or close friend; divorce or separation; not being able to get a job; losing a job; alcohol related problems; drug related problems; seeing fights or people beaten up; abuse or violent crime; trouble with police; a gambling problem; a family member sent to jail; overcrowding at home; and discrimination/racism. Respondents indicated yes or no to each event. The yes scores are added to indicate the level of negative stressors affecting a person (see Appendix 3 for wellbeing scales).

The K-5 and the NLES have been utilised as part of the NATSIH survey and used widely within Indigenous communities. The K-5 has been shown to be a robust measure (Cunningham & Paradies, 2012). The NLES was also evaluated as performing well within a diverse range of Aboriginal and Torres Strait Islander populations (Kowal, Gunthorp & Bailie, 2007).

**Procedure and analysis**

Prior to commencing the research ethical approval was gained from the SA Aboriginal Health Research Ethics Committee in December 2012 and from the University of Adelaide Human Research Ethics Committee in May 2013. In order to recruit both Aboriginal and Torres Strait Islander participants an invitation flyer, with a request to “chat” about lateral violence, was disseminated via various email networks with a request to pass on the information through the SA Aboriginal grapevine (see Appendix 1). An information sheet was then distributed to those who enquired and/or volunteered to be interviewed which provided background knowledge on the researchers, the research, rights and responsibilities of involvement, risks and incentives (such as $50 gift vouchers) and so forth (see Appendix 2). Preceding the interviews participants were provided with information about counselling services and assurances of
support upon distress (see Appendix 9). Demographic information, such as gender, age, and educational background, were collated for all participants.

The interviews included the following broad questions: “What do you know about lateral violence?”, “What’s your understanding of lateral violence?”; “Can you tell me about some of your experiences of lateral violence?”; “How has it affected you (family and community)?”; “What have you done to stop or curb lateral violence in the past?”; and “What would you like to see happen to make changes in the community?”. The interviews ranged from 15 minutes to an hour, and were audio-recorded and transcribed. All participants were asked if they wanted to view the transcripts prior to analysis and only one participant requested this.

Transcripts were then de-identified to maintain anonymity and confidentiality of participants. Pseudonyms were assigned to all participants including names mentioned in transcripts. The data was entered, then coded using NVivo10 qualitative software by searching for similar words or phrases across transcripts and categorising into nodes to create initial themes for reviewing as per a thematic process. A thematic analysis aims to uncover patterns and themes in the interview data. Eliciting the themes occurred via familiarisation with the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes and producing the report (Braun & Clarke, 2006, 2013). The end result was a rich description of both the recurring and unique patterns in the data set across all the interviews in the study.
Findings

The wellbeing scales

Participants (n=21) who completed the K-5, obtained an average score of 10.33 with a standard deviation (SD) of 5.8. This indicates that overall, participants’ psychological distress was at moderate levels (but reaching a high stress level). Seventy-one percent scored in the moderate (5-11) range and 29% scored in the high/very high range of psychological distress (12-25).

The overall mean of the NLES was 5.8 (stressors) with the SD being 3.3. Five participants (24%) experienced between 2-3 stressors, 11 (52%) between 4-8 stressors, and 4 (19%) experienced more than 8 stressors. Of the 6 (29%) participants who scored in the high/very high range for psychological distress (K-5), 4 participants had relatively high stress with 6 or more life stressors with 1 participant having 13 stressors.

Table 4.1 shows the frequency for those who responded “yes” to particular stressful events. The most prevalent stressful event was racism and discrimination (52%), followed by drugs and alcohol (calculated together) (45%), serious illness (43%), and witnessing or being involved in violence and abuse (38%).
Table 4.1. NLES frequency and percentage of each item in the last year (n=21)

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>Yes (%)</th>
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<tbody>
<tr>
<td>1  Serious illness</td>
<td>9</td>
<td>43</td>
</tr>
<tr>
<td>2  Serious accident</td>
<td>4</td>
<td>19</td>
</tr>
<tr>
<td>3  Death of family member or close friend</td>
<td>7</td>
<td>33</td>
</tr>
<tr>
<td>4  Divorce or separation</td>
<td>4</td>
<td>19</td>
</tr>
<tr>
<td>5  Not able to get a job</td>
<td>9</td>
<td>43</td>
</tr>
<tr>
<td>6  Lost job</td>
<td>8</td>
<td>38</td>
</tr>
<tr>
<td>7  Alcohol related problems</td>
<td>9</td>
<td>43</td>
</tr>
<tr>
<td>8  Drug related problems</td>
<td>10</td>
<td>48</td>
</tr>
<tr>
<td>9  Seeing fights or people beaten up</td>
<td>9</td>
<td>43</td>
</tr>
<tr>
<td>10 Abuse or violence</td>
<td>7</td>
<td>33</td>
</tr>
<tr>
<td>11 Trouble with police</td>
<td>5</td>
<td>24</td>
</tr>
<tr>
<td>12 Gambling problem</td>
<td>6</td>
<td>29</td>
</tr>
<tr>
<td>13 Member of family sent to jail</td>
<td>6</td>
<td>29</td>
</tr>
<tr>
<td>14 Overcrowding at home</td>
<td>3</td>
<td>14</td>
</tr>
<tr>
<td>15 Discrimination/racism</td>
<td>11</td>
<td>52</td>
</tr>
</tbody>
</table>
Themes from interviews

*Overview of themes*
Many participants had heard of lateral violence prior to interviews and sought information to further understand it (see chapter 3 or Clark & Augoustinos, 2015). Many participants recognised lateral violence as a problem, and linked it to colonialism. The study elicited many themes but those identified in this analysis specifically focus on the nature of lateral violence, racism, identity and its effect on wellbeing.

*Lateral violence: overt or covert behaviour?*
Lateral violence was primarily viewed in terms of covert behaviour towards the self and others such as bullying, cyber bullying, spreading rumours, gossiping, shaming and jealousy. A few participants viewed lateral violence as overt, which corresponded with their experiences of being on the streets, in prison or exposed to violence. The two accounts below exemplify covert and overt behaviours respectively.

*Maggie (age category 46-50):* Well the infighting, the bullying...gossiping about people...putting people down; spreading rumours, gossiping is the same thing, shaming people, trying to keep people in their place. Know your place in the world...like... for anything; having a hierarchy in place and knowing your place in that system.

*Paul (age category 41-45):* I saw my cousin get killed...they [Aboriginal community members] ran him over. They didn’t go to jail. But that is back in the 80s... [it was] over who ever took the carton of beer and who grew plants [marijuana] ’cos they all grew dope back then...And you get all aunties, cousins...they all rah rah and it turns too big. They drink too much...then it happened...He [the perpetrator] washed the car
the next day and he got one year [in detention] ...then my brother got killed by someone too, Aboriginal [person] ...once my brother got killed my whole family was destroyed...

Although much of the literature includes definitions of both overt and covert forms of lateral violence, most participants described covert forms such as that described by Maggie. Facebook was often seen as a destructive tool to perpetrate covert violence. This may be because physical violence is often categorised separately under abuse, violence, or related to the criminal system (AIHW, 2015). Paul’s overt experiences were traumatic. Paul was one of the participants who scored extremely high on both the K-5 and NLES and has been seeing a regular counsellor for his trauma.

It can be argued that covert forms of lateral violence behaviour appear to be the “hidden” or “safe” option, and are less likely to be detected and identified as forms of violence given their non-criminal status. Perhaps lateral violence in its covert form is similar to modern forms of racism, which are seen to align with increasing social taboos against expressing blatant and hostile racist remarks. Just like subtle and covert forms of racism, covert lateral violence can be just as damaging, given its insidious nature (see for example Augoustinos, Tuffin & Every, 2005; Pedersen & Walker, 1997).
**Racism is at the heart of lateral violence**

**Overview**

Racism featured strongly in many participants’ accounts. At least 53% referred to racism or racist behaviours in the interviews. Although racism was often described as being perpetrated by non-Aboriginal people, at times it appeared difficult to distinguish between racism from non-Aboriginal or other Aboriginal people. In this section two subthemes emerged that explored relations between Aboriginal people and mainstream/government systems and amongst Aboriginal people themselves.

**Racism can fuel lateral violence**

Racism perpetrated by non-Aboriginal Australians and systems can trigger lateral violence and has a profound effect on Aboriginal peoples’ lives as can be seen from the accounts below.

*Molly (age category 51-55):* ... the lateral violence in communities is fuelled or coordinated by white people, I reckon, the first thing... whether it’s a principal or a manager of a program... They are told to identify those key players in the community. There is no such thing...as proper community consultation as it is always done with these key players. That’s what I was saying before about playing them against each other. Because let’s just say that one is coming to all the meetings and the other ones are having these issues over here. They will focus on that person. It’s almost like grooming so. If these guys come to the meeting and they decide against what the others have been deciding, the non-Indigenous person will manipulate that person and start making meetings for when he is not around and start turning them on each other.
Maggie (age category 46-50): And to me it’s like they [the governments] will chuck a couple of scraps at the people and they all fight for it, and because that’s all they got...Yeah because they don’t have much money or much resources they all want that bit...Conquer and divide.

Racism is implicit in the accounts above. Both Molly and Maggie indicate that racism and white systems or people utilise a “divide and conquer” strategy. In Molly’s account non-Aboriginal people deliberately manipulate community protocol. This tends to fuel and contribute to lateral violence as families or individuals then fight or treat each other in ways that are detrimental. Maggie indicates how white systems deliberately provide limited resources to Aboriginal people in order to divide the community, who then compete with each other for scarce resources. Divide and conquer is a well-known strategy used by imperial and colonial powers to control and weaken empowered and collective people by enabling mutual mistrust and was used particularly towards Indigenous people (Posner et al., 2009). Thus it appears as relevant today as it did in the past.

Racism between Aboriginal people (within group prejudice/racism)

The behaviours generally associated with lateral violence were sometimes referred to as racism amongst Aboriginal people as identified in the two accounts below.

Dianne (age category 26-30): ...I think that was the big eye-opener for me... to put lateral violence on it, it just gave me a whole other spin to it. And it kind of gave it its proper name. Like, it...I thought it was racism, but I...it wasn’t really...it was my people, against me. And when I finally saw that...the link between the two, that kind of
affirmed me, and I went, “Okay, I know what that is...and I don’t want to be a part of it.”

Ben (age category 18-25): ...I had something happen to me not that long ago from my manager who is Aboriginal. She said some racist remarks to me like “I am a white cunt” and "I am going to destroy you and take this ...group off you". She had some drug and alcohol problems, she was intoxicated at the time... [I] had been working for two years and didn’t know she felt like that ‘cos of my skin colour and that destroyed me.

The terms racism and lateral violence were sometimes interchangeable in participants’ discussion. This is evident in Dianne’s account where she indicates that before her awareness and knowledge of lateral violence she had referred to this behaviour as racism. Interestingly, she expresses relief that there is a more appropriate label for such infighting. Ben’s categorisation of his manager’s remarks as racist appears to be in reference to the colour of his skin. As Bennett (2014) argues, the questioning of one’s authenticity as an Aboriginal person based on skin colour is not limited to non-Aboriginal people: it is a common feature of lateral violence within and between Indigenous peoples.

**Stripping away each other's identity**

**Overview**
Identity was a recurring theme in participants’ accounts. How identity is judged and questioned by other Aboriginal people in the community was a major concern for these participants and was perceived as a form of lateral violence. This judging of identity included the colour of one’s skin, access to cultural knowledge and practice, and aligning with white values,
behaviours and organisations. Challenges to one’s Aboriginal identity took the following forms below.

You’re too white to be Aboriginal

The categorisation of Aboriginality through blood quantum refers to physical appearance and skin colour as is evident in the two extracts below.

_Dianne (age category 26-30):_ ...Because I’m lighter [skinned], I don’t look Aboriginal...I get a lot of people coming into this agency and if they’re sort of grumpy or they haven’t got a good service they’d say, “Oh well, I thought this was an Aboriginal agency.” And I always feel like I have to defend my culture, and I always feel like I have to work harder... So it’s just...it’s something that I’ve always grown up with, and I think that’s why I’m so against it [lateral violence], because I’ve only just sort of, in the last couple of years, found it [that it was actually lateral violence]...like, sort of put a name to it, and said, “This is what it is.” I always thought it was something to do with me. But it’s not...it’s...I should be proud of who I am, and I’m proud that my dad is Aboriginal, and I’m proud that my mum’s Irish...and they’re both just as important to me. But that doesn’t mean that my Aboriginality is less than someone else [‘s].

_Daisy (age category 46-50):_ It’s like, you know and it always reminds me of going back to assimilation days when awful words like half-caste and quadroon and things like that were used. But now we are just doing it to ourselves. Like white people used to do it [and] now we are doing it, we’re coming up with those sorts of names ourselves and its really derogatory and unhelpful.
The two respondents were challenged by other Aboriginal people about the colour of their skin and indicate how they have found ways to cope with its debilitating effects. Coping for Dianne has been through pride of culture and ancestry, and for Daisy by understanding the past historical discourses and colonial policies that sought to distinguish Aboriginal people’s identity based on blood quantum. Colour and physical appearance continue to be used as a test or validation of Aboriginal identity. This is consistent with the research literature (see Bennet, 2014) and everyday experience (see Bolt, 2009) and is a form of social exclusion and denigration that many Aboriginal people have to deal with on a daily basis.

Siding with the white side

Participants talked about how values, behaviours and practices that were viewed as predominantly “white” were used to judge one’s Aboriginal identity and its authenticity. Again this kind of personal criticism was viewed as hostile and damaging to one’s wellbeing. Examples of this type of criticism are seen below.

Belle (age category 31-35): Well I think sometimes it’s just... a good example is just you don’t want to dress up sometimes because you feel people will say... “you think you’re white” or “you think you’re better than them”... Or when you get a job or you’re working...And they’ll still say, “Oh you think you’re white.” So I always thought it was because I was lighter skinned but now I realise it doesn’t matter. You could be dark as anything.

Judy (age category 41-45): People putting people down...and community “you married a white fella”, “you wear makeup”, “your kids are in private school”. All those values
that say you are less Aboriginal than me are in my opinion feeding back into those old colonial policies... ...I am fair skinned and not from these lands and I always thought it was just personal. That it was me or that I internalised things and thinking if only I were darker or only if I was Narungga [Aboriginal people of the Yorke Peninsula] and then I realised I wasn’t alone. Those dark-skinned sisters experienced lateral violence as well.

These accounts demonstrate how being accused of being white is associated with how you dress, work aspirations, relationship choices, values and ambitions. The process of calling other Aboriginal people white is synonymous to being a traitor, despite the colour of one’s skin. Consequently Aboriginal people can be referred to as “coconuts” (black on the outside, white on the inside) and “textbook black” (educated) (Gorringe et al., 2009) or other derogatory names. This is similar to the acting white phenomenon described by African Americans where accusations of being white are propelled when one is perceived to align too closely to white culture (Burrell, Winston & Freeman, 2012; Grantham & Biddle, 2014).

It’s not only about identity – it’s about any vulnerability

Even though one’s identity was a trigger for lateral violence, other triggers were associated with any perceived vulnerability, deficit, or benefit of another Aboriginal person.

Lila (aged category 56-60): I am very vulnerable and I reckon its ‘cos of the lateral violence I have grown up with. I left SA ‘cos of it... I hated it here in SA. I really truly don’t trust the Aboriginal community. The individuals, I think we are not allowed to have an opinion, you get shot down. You [are] not allowed [to] give positive feedback
to people about their work, you get shot down, and you get an incident report. You get complaints about you. I have learnt how to deal with that now... Yeah I always worked in Aboriginal Affairs [within government] all my life... This is the first time I have worked in an Aboriginal [community controlled] organisation and I don’t like it at all.

Daisy (age category 46-50): You might have some tertiary qualifications other [Aboriginal] people don’t... then they will start to weigh up what else can we look at your deficits and we will drag you down so there is always this being measured up.

In these accounts of perceived success, having an opinion and tertiary qualifications were all seen to attract negative criticism. Lila’s account highlights how she disengaged with her community and Aboriginal organisations in order not to be subjected to and vulnerable to such forms of lateral violence. Lila was also one of the participants who scored high on the psychological distress scale. Western values of success, professionalism and materialism was associated with whiteness. Such constructions have the capacity to produce differentiations between “the haves” and “have nots” within communities which is often a source of conflict and tension. This corresponds with literature on bullying in Aboriginal contexts (Coffin et al., 2010).

*Lateral violence is destructive and affects wellbeing*

Many participants acknowledged the destructive nature of lateral violence, how it affects wellbeing, and the desperate need for solutions and restitution. The accounts below exemplify the destructive effects of lateral violence.
Freda (age category 41-45): Then I started to think about my own personal experiences around lateral violence, family violence and it just got me thinking that it’s like a “bug that eats our people and community and destroys people”. Doing the work with the [name deleted] program – getting people together and talking groups you know, talking about the program and lateral violence. People started talking, how we gonna try and fix this and talk to our mob about [it]?

Maggie (age category 46-50): Huge [link between lateral violence and social and emotional wellbeing] ... Yeah you hear of young people suiciding and if you are continually shamed every day, or you are continually put down...you can’t be your full potential that you are meant to be in this world, so naturally it’s going to affect you.

Kelly (age category 41-45): Yeah, whether that’s from gossip, or whether it’s from you know...yeah, just sort of like your involvement it can be really...it can be petty but it can be ongoing, and whether that’s...that thing, when that’s happening that’s going to sort of like prevent them...you know, they don’t think about it when it’s happening, they don’t really understand they just, you know, they want to be connected, everyone wants to be happy but they don’t understand how everyone’s different and they can experience...they take it differently, people can take it differently and really internalise it, I suppose, they can’t really...they can sort of feel uncomfortable, they can make themselves sick because of [silence].

Freda highlights lateral violence as a soul destroying bug and tries to get people to talk about it. Maggie’s account demonstrates the toll of being put down constantly by other Aboriginal people which hampers your potential as a person. Kelly’s reference to becoming sick because
of the effects of lateral violence is also illustrative. Kelly was a participant who also scored high on the K-5 with many life stressors on the NLES. Thus, she was talking from her own experiences of trauma. This coincides with literature on trauma and vulnerability (Krieg, 2009).

**Summary and discussion**

This study was significant in that it provided a voice about lateral violence by Aboriginal people in a local context. Firstly, the engagement of a number of participants actualises the willingness for voices to be heard, despite lateral violence being a sensitive and perhaps difficult topic to discuss within Aboriginal communities. Thus this study may have empowered some people to speak out about lateral violence and particularly its effects. Moreover, a process of comfort and safety may have also been a factor in participants’ motivations to be part of the study as they could speak out anonymously.

Secondly, given there is very little research on lateral violence, particularly the effects of lateral violence within the Australian Indigenous community, this research will contribute greatly to the literature, and potentially assist with attracting resources and further research interest. By demonstrating the detrimental effects on identity and wellbeing a focus on solutions for the prevention of lateral violence is timely. Furthermore strategies for coping and the prevention of lateral violence are discussed further in the next chapter that will also add substantially to the literature.

In summary lateral violence is a relatively recent term applied in Australia to explain infighting within oppressed Indigenous communities. Along with racism, lateral violence is predominantly attributed to the damaging effects of intergenerational trauma which has its roots in colonialism. Racist policies and practices provided fertile ground for the internal
denigration and division of Aboriginal people. One way this division continues is through lateral violence where the oppressed becomes the oppressor.

Although behaviours associated with lateral violence (i.e. bullying) can be found in populations all over the world, within oppressed minority groups such behaviours can become intractable and normalised which can hamper solutions for change. As the analysis above demonstrates, lateral violence refers to both overt (physical) violence and covert (i.e. emotional and psychological) behaviours. Yet covert behaviours have the potential to cause significant psychological distress, particularly when it is internalised. It appears to parallel modern forms of racism which are covert, subtle and insidious.

The means to perpetrate lateral violence amongst Aboriginal people is to look for actual, perceived or created vulnerability, deficits or benefits. The most common trigger is linked to one’s identity that can be challenged and stripped away via notions of blood quantum (i.e. the colour of one’s skin, [or] physical appearance). Having an education, being well-renumerated or simply enjoying material assets can expose one to suspicion of wanting to be white – such a desire is considered inauthentic. This contributes to being put down, bullied, ostracised, called white or other names, such as coconut. Judgements of inauthenticity by both Aboriginal people and non-Aboriginal people are linked to an ideal view of Aboriginality and a deficit discourse, which is about being “black”, traditionally oriented, problematic and a victim. If Aboriginal people hold to such views of Aboriginality, then this becomes the measure by which people are considered more or less and therefore exposed to lateral violence. Thus defining Aboriginality in such a limited way excludes the complexity and multiplicity of diversity and identity, and traps Aboriginal people into thinking and behaving in certain ways about how they should be
as Aboriginal people. Therefore accepting diversity and different identities can potentially assist in hampering lateral violence and provide a freer and greater sense of wellbeing.

The average number of life stressors for participants was almost six, which seemed relatively high with racism and discrimination rated as their major source of stress. Approximately a third of the participants scored high on psychological distress, which corresponds with the national level of Aboriginal people who have high psychological distress. Such distress and high number of stressors appeared to be linked to the more traumatic stories associated with lateral violence. Yet most participants indicated (via the K-5) they were hopeful for the future, despite the stressors and distress.

The relational aspect of racism, trauma, identity, wellbeing and lateral violence are evidenced by the experiences of the participants and subsequent themes, the literature and the wellbeing scales. This preliminarily analysis supports the hypothesis that lateral violence is a major impediment to identity and wellbeing in similar ways to trauma and racism.

The topic of lateral violence has not undergone a significant education process in Australia. Thus the implications from the findings of this research are that they can be used for community education and awareness to assist with prevention and healing. As lateral violence is an under researched area, there are many areas that could be explored. For example, a replication of the study outside of Adelaide could be useful. Furthermore lateral violence occurrence could be added to the NLES to gain a wider perspective on its prevalence nationally.
# Statement of Authorship

**Title of Paper:** Coping and prevention of lateral violence in the Aboriginal community in Adelaide

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## Principal Author

**Name of Principal Author (Candidate):** Yvonne Clark

**Contribution to the Paper:**
Performed the literature review, called for and collected data (interviews with participants), interpreted data, wrote manuscript and acted as corresponding author.

**Overall percentage (%)**
85%

**Certification:**
This paper reports original research I conducted during the period of my Higher Degree by Research candidature and is not subject to any obligations or contractual agreements with a third party that would contraincite publication in this thesis. I am the primary author of this paper.

**Signature**

**Date:** 16/12/16

## Co-Author Contributions

By signing the Statement of Authorship, each author certifies that:

i. the candidate's stated contribution to the publication is accurate (as detailed above);

ii. permission is granted for the candidate to include the publication in the thesis, and

iii. the sum of all co-author contributions is equal to 100% less the candidate's stated contribution.

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**Contribution to the Paper:**
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Helped to evaluate and edit the manuscript.

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Please cut and paste additional co-author panels here as required.
Chapter 5: Coping and prevention of lateral violence in the Aboriginal community in Adelaide

Abstract

The term lateral violence describes how members of oppressed groups direct their dissatisfaction inward. This inward deflection has been associated with the Aboriginal community in Adelaide, South Australia and has been shown to be destructive. Interviews with 30 Aboriginal participants examining their ways of dealing with and strategising to prevent lateral violence in the community have been presented in a thematic analysis. Overall seven major interpretive themes emerged from these interviews: education is central; support provides unity; champions and role models are essential; culture and identity are empowering; avoidance of Aboriginal spaces by Aboriginal people can be protective; lateral violence can be challenged; and positively reinterpreted. Given that many participants drew on a number of coping strategies to deal with lateral violence, it is hoped that such information will benefit individuals, community, governments and funding agencies to support future research, education and services within communities in order for Aboriginal people to heal and prevent lateral violence in the future.
Introduction

Lateral violence and disempowerment

Lateral violence is a form of overt and covert dissatisfaction and disruption among members of oppressed groups (NCSA, 2008). Within Indigenous groups, overt physical violence coupled with covert behaviours such as bullying, harassment, gossip and sabotage have been found (AHRC, 2011b; Derrick, 2006) along with the stripping away of each other’s Aboriginal identity (Clark, Augoustinos & Malin, 2016). Lateral violence within Aboriginal communities in Australia is linked to intergenerational and collective trauma that has its roots in colonialism. From colonisation Aboriginal people's lives were undermined and controlled through government policies and actions resulting in ongoing racism and oppression. Appeals and resistance were met with further disempowerment that has become multigenerational and continues to be evident today (Milroy et al., 2014).

Feelings of powerlessness and dependency have been further linked to poor health and life outcomes (Milroy et al., 2014). The effects of powerlessness in relation to lateral violence have reportedly contributed to a blame mentality, lack of trust in others’ judgment (Derrick, 2006), jealousy over possessions (Coffin et al., 2010) as well as physiological symptoms such as sleep disorders, weight loss or gain and depression (NWAC, 2015). In contrast, having a sense of control over one’s life has been linked to better health and life outcomes, wellbeing and prosperity in many areas of Aboriginal life (Milroy et al., 2014).
Healing, training and empowerment

Disempowerment has meant that many Aboriginal people are in a continual state of healing, which has been described as a holistic process of physical, cultural, psychological and/or spiritual renewal (Mackean, 2009). According to Milroy et al. (2014), healing and redress for Aboriginal people needs to include processes of empowerment, community governance, resilience, restoration and reconnection with community life. Importantly, reclaiming the history, ancestry and community stories of family and country help to restore a sense of cultural continuity. One such example of cultural renewal in Adelaide is the cultural reclamation of the Kaurna language, which has enabled the Kaurna people to define themselves and transform their society in their own way rather than be defined by others (Amery, 2016).

Healing and empowerment can occur at various levels, starting with individuals clarifying and/or redefining their values and norms which permeates the community for collective healing and goal setting (Dudgeon et al., 2014b). Furthermore empowerment needs to be strength based and resourced by tools within communities. Thus, training and information on lateral violence appear to be increasing within Indigenous communities by Aboriginal people in Canada and Australia and appear on websites. Examples include: *Chameleon strategies* (2016); *kweykwayconsulting* (2016); *Aboriginal cultural workshops* (Ryan, 2015); *Koorreen enterprises* (2015); *Kornar Winmil Yunti* (2016); and *Lateral Love* (2014).
Coping, resilience and support

Collective vs individualistic coping

Incidence of high psychological distress (ABS, 2016), racism (Stolper & Hammond, 2010) and poor mental health (AIHW, 2015) in Aboriginal communities mean that coping is fundamental to survival. Much of the coping research and literature has been dominated by individualistic Western cultural paradigms (Kuo, 2011; Yeh, et al., 2006) with four broad coping styles: active or problem focused (i.e. confronting problems); denial-disengagement or emotion focused (i.e. withdrawal); social support seeking; and positive reinterpretation (Mellor, 2004). Some researchers (e.g. Strelan & Covic, 2006) also suggest forgiveness of a perpetrator as a coping mechanism. Research on collective coping emphasises cultural and social mechanisms as underlying the stress and coping process (Kuo, 2011). Collective coping responses or strategies can be: value-driven (e.g. forbearance and fatalism); interpersonal (e.g. family and social support); culturally conditioned emotional/ cognitive (e.g. acceptance and avoidance); religion and spiritually grounded (Fischer, Ai, Aydin, Frey, & Haslam, 2010); respecting authority figures; and relational universality such as belonging, sharing and identifying with others (Yeh, et al., 2006).

Individualistic cultures value independence and autonomy where the target of control is likely to be outside of the person. This means that individuals aim to change or control the external environment to cope. Collectivist cultures emphasise group cohesion, interdependence, connection, harmony and conforming rather than group norms. Thus individuals in a collectivist society aim to change themselves (their minds, emotions or behaviours) to fit the environment and to protect it (Chun, Moos & Cronkite, 2006; Weisz, et al., 1984). Individuals will generally use a range of collective and individualistic coping strategies in their daily lives,
whether they are from an individualist or collectivist society. Some forms of coping are deemed more functional than others. For example, Yeh et al. (2006) indicate that active and internal coping (i.e. seeking support, taking concrete action or reflecting on possible solutions) is functional, resulting in positive consequences. In contrast, dysfunctional coping (i.e. withdrawal, denial or repression, controlling feelings and having a fatalistic attitude), can result in negative consequences. However, Yeh et al. (2006) point out that there is a cultural bias towards problem-focused coping and personal agency, which are concepts highly valued in individualistic cultures.

Coping and resilience within Aboriginal communities

Australian Aboriginal people are regarded as a collectivist culture where individuals are held together through kinship systems involving a shared sense of identity, responsibility, care and control (Milroy et al., 2014). Examples of coping and resilience in relation to Aboriginal people in Australia have primarily been in response to racism (Mellor, 2004) and psychological stress (Kelly et al., 2009). Mellor (2004) indicated three broad themes of coping behaviours to deal with racism in his research which are defensive, controlled and attacking. The defensive (defend or protect the self) type includes: passive (resignation of the situation); active (avoiding future encounters or individuals, venues or situations); reinterpretation of the event (to lessen the impact of racism); social support; and strengthening children (to help them cope with racism in the future). Controlled (control the self) is primarily about ignoring (which is a choice to not respond). Finally, attacking (control the environment/perpetrator) includes: contesting racist behaviours; confrontation of some kind (i.e. educating the perpetrators through factual information); asserting identity and pride; or seeking external controls (i.e. calling on those in authority). Yet, Mellor (2004), indicates that the Indigenous people in his
study were reluctant to use regulatory or legislative bodies for complaints as they were seen as ineffective.

Coping in relation to psychological distress for Aboriginal people has been to identify risk and protective factors whereby protective factors shield against the effects of risk. Those who are psychologically overwhelmed or struggling to cope with multiple stressors are likely to effectively exhibit higher psychological distress (Kelly et al., 2009). Some of these risk factors include unresolved grief and loss, trauma and abuse, domestic violence, removal from family, substance misuse, family breakdown, cultural dislocation, racism, discrimination and social disadvantage. Protective factors include connection to land, culture, spirituality, ancestry, family and community (SHRG, 2004). These factors can serve as a source of resilience and can moderate the impact of stress on social and emotional wellbeing of an individual, family and community. Merritt (2007), amongst others, has argued that exceptional resilience has enabled many Aboriginal people to survive and be shielded against the devastating effects of colonisation and intergenerational trauma.

**Social support**

Coping in the form of social support is via bonded and bridging support. Bonded relationships are between intimate associates, who are often from homogenous backgrounds, and bridging relationships are between less intimate associates, usually from heterogeneous backgrounds. Both bonded and bridging relationships contribute to a well-developed social network (Gottlieb & Bergen, 2010).

Research on social support within an urban Aboriginal community in Perth has reaffirmed the importance of bonded relationships which provide many protective resources for wellbeing and
positive health outcomes (Waterworth et al., 2014). Furthermore, bonded relationships similar to kinship relationships promote connectedness, identity, and a sense of belonging and empowerment (Waterworth et al., 2015). However, in some circumstances, bonded relationships can have a negative effect and be psychologically stressful. For example, Aboriginal people can withdraw from bonded connections to protect themselves and immediate family, as the influences of extended family members and obligations can cause them physical or emotional harm. This withdrawal can contribute to fragmented kinship affiliations, isolation and reduced opportunity to develop new bonded relationships. Bridging relationships with non-Aboriginal people can also have positive effects, particularly if the interactions are with non-Aboriginal representatives from organisations that provide support, encouragement and information. Bridging contact with non-Aboriginal members are deemed less important within the Aboriginal community and rarely incorporated due to exposure to cultural distinctiveness, discrimination and racism, which may prevent Aboriginal people from accessing this type of social support (Waterworth et al., 2014; 2015).

Lumby (2010) indicates that another form of support is social networking on Facebook. Facebook is becoming a popular vehicle amongst urban Indigenous young people in order to build, display and perform Indigenous identities. Facebook acts as a modern site for kinship activities of continuity, connectedness and cultural belonging (Montgomery 2014). Facebook provides a means for both confirming Indigeneity by embracing some users but at the same time, denying Indigeneity by imposing penalties on others for faking or being perceived as faking (Lumby, 2010). Thus Facebook can be a tool of scrutiny and surveillance and can also be a platform for racial vilification external to communities (i.e. racism), and abusive and hateful messages from within (i.e. lateral violence) Indigenous communities (Montgomery, 2014).
Therapeutic interventions and counselling

In order to cope and heal, Aboriginal people may seek counselling and therapy for a variety of social and emotional wellbeing issues with the five most common being: depression, anxiety and stress, grief and loss, family or relationship problems, and family and community violence (AIHW, 2016). Various types of therapies and techniques are utilised to engage Aboriginal people in counselling. Some recommended therapies include: narrative therapy which enables a process of storytelling (Fredericks, 2006); an adapted form of cognitive behaviour therapy (CBT) (Bennett-Levy et al., 2014) where its suitability is still being reviewed and monitored (Dudgeon & Kelly, 2014); art therapy (Cameron, 2010); and Aboriginal traditional healing. In a Western Australian context traditional healers work with the ngarlu (spiritual life force located in the stomach) (Roe, 2010). In a South Australian context, traditional healers (Ngangkaris) provide physical and emotional healing in remote, rural and urban areas (in Adelaide) via a two way health care model (with Ngangkari and the health professional) (Panzironi 2013, p 176).

Other national examples of healing and educational initiatives by Indigenous Islander people include: the We-Al-Li program (Atkinson, et al., 2010) to heal trauma; the Seven Phases to Healing targeting grief and loss, anger and violence (Wanganeen, 2014); Aboriginal men’s healing such as Red Dust (Powell et al., 2014) and Mibbinbah Spirit (Bulman & Hayes, 2011) to address issues of racism, trans-generational trauma, and loss of culture and identity. Furthermore, women’s healing initiatives include Aboriginal family violence programs that aim to safeguard and empower such as the Nunga Mi:Minar service in SA (Snell & Small, 2009).
There is a lack of specific and tailored resources for Aboriginal people’s healing, and often the reliance on mainstream health and mental health services fails to understand and address many Aboriginal healing issues. Aboriginal people have continually identified that what they need and want in order to heal themselves and their communities are preventative and holistic healing programs that promote strong, resilient communities focusing on restoring social and emotional wellbeing (Dudgeon et al., 2014b). The success of therapeutic services also depends on cultural competency, cultural safety and relationship building. Cultural safety means that services must be culturally sanctioned so that everyone has the right to feel good about themselves and their identities (Frankland et al., 2010).

**Policy and legislative solutions**

Lateral violence as a concept does not appear to have legal standing. However, bullying, which is considered part of lateral violence, has a number of avenues for complaints and redress under various legislations and laws. The creation of the *Fair Work (FW) anti-bullying* jurisdiction, for example, provides readily accessible external intervention into workplace bullying without applicants having to exhaust internal organisational processes. However, defining and stopping bullying, whether in law, policy or research remains a challenge despite good intentions (Worth & Squelch, 2015). Online bullying and cyber-safety is a growing concern, particularly for young people. For example, the most common form of communication between youth aged over 13 is social media. And around half of all youth between 8-11 years access and use some form of social media (Radoll, 2014). Now under the *Enhancing Online Safety Act 2015*, the Children’s e-Safety Commissioner was established as a complaints system for cyberbullying targeting children and can direct large social media companies to remove offensive material (Young et al., 2016).
The current study

Lateral violence has been an under researched area within the Aboriginal context in Australia. Although there is increasing information and research on related concepts, such as racism, trauma, violence, family violence, and social and emotional wellbeing, very few Indigenous people have been consulted about lateral violence. Thus, this study aims to provide a voice about lateral violence from local Aboriginal community members in Adelaide.

Lateral violence may fit within the holistic healing and wellbeing framework for Aboriginal people, as it is a source of significant stress and can be destructive to one’s identity and wellbeing. Therefore it is important to identify ways of dealing and coping with lateral violence in order for Aboriginal people to gain a better understanding, and be empowered and protected from further distress.

Research approach

Indigenous framework

This research is informed by an overarching Indigenous framework which advocates for cultural safety, relevance and Indigenous worldviews (Rigney, 1999a) along with respect, reciprocity and relationality (Arbon, 2008; Martin, 2008). It follows that the researcher has a vested interest in the integrity of the methodology (respect) and also needs to form a respectful relationship with the ideas being studied. This respectful relationship is realised if the results are reciprocated and flow back to the community (reciprocity) for discussion and deliberation. Relationality or relatedness means that knowledge is relational and should be shared with all creations (i.e. people, animals, land, time, and the cosmos). Thus relationship accountability or
axiology is the accountability of the research and researcher to the community and the universe (Wilson, 2003).

Another feature of an Indigenous methodology is that it attempts to focus on empowerment and capacity building, especially in mentoring and creating spaces and support for new approaches to research and new examinations of Indigenous knowledge (Smith, 2005). Wilson (2008) adds that it is not necessary to dwell on Indigenous struggles or the powerlessness to change situations, but rather to focus on assertion and achievement. Thus this research attempts to focus on participant strength and coping abilities to prevent and combat lateral violence within communities. Such an approach will be driven by an insider approach. This approach is based on acknowledgement and experiences of Indigeneity and will be used in interpretations and analysis. At the same time outsider input via supervisory and collegial support is vital and will assist in further rigour.

**Participants**

Thirty Aboriginal participants consented to take part in the study. Inclusion criteria were identification as an Aboriginal and/ or Torres Strait Islander, 18 years of age or over and residing in Adelaide. The majority of participants were female (63%). Ages ranged from early 20s to mid-60s with about 13% falling in the younger age bracket (30 years and under) and 10% in their late 50s to mid-60s. Furthermore almost half (47%) of the participants in the study had a university level education.
**Procedure and analysis**

Ethical approval for the research was gained by both the Aboriginal Health Research Ethics Committee and the University of Adelaide Human Research Ethics Committee. A recruitment flyer, with an invitation to “chat” about lateral violence, was disseminated via various email networks with a request to circulate further (see Appendix 1). An information sheet was then distributed to interested people that provided background details of researchers, the research, rights, responsibilities, risks, and incentives (see Appendix 2). Prior to the interviews, brief demographic information, such as gender, age and educational background, was collated. Information was also provided about counselling services with assurance of support upon any distress (see Appendix 9).

The interviews included broad questions such as: “Have you heard about lateral violence?”; “What do you know/understand about lateral violence?”; “Can you tell me about some of your experiences of lateral violence?”; “How has it affected you?”; “What have you done to stop or curb lateral violence in the past?”; and “What would you like to see happen to make changes in the community?” The interviews ranged from 15 minutes to an hour, and were audio-recorded and transcribed verbatim. All participants were asked if they wanted to view the transcripts prior to analysis and only one participant requested to do so. The transcripts were then de-identified and pseudonyms were assigned to all names mentioned in transcripts to maintain anonymity and confidentiality of participants. The data were coded using NVivo10 qualitative software and analysed using a thematic approach (Braun & Clarke, 2013).
Findings

Themes from interviews

Overview of themes
As already indicated this analysis focuses specifically on ways of dealing with and coping with lateral violence within the Aboriginal community in Adelaide. Hence, many participants were aware of lateral violence before the interviews, and reflected on a range of strategies to cope with and prevent lateral violence at both individual and community levels, from both Western and collectivist perspectives. A common value was strength in unity. This is not surprising, as lateral violence is a segregating phenomenon that can isolate individuals, families and groups from each other.

Education
The most prevalent strategy for dealing with lateral violence discussed by participants was education and raising awareness. The participants learned about lateral violence both formally and informally through training, workshops, work colleagues, the internet and research papers. Participants were eager to build on their knowledge of lateral violence as well as to ensure others understood the damaging effects of lateral violence.

Formal training
Participants indicated that formal training, in the form of educational workshops can assist people to better understand lateral violence, its effects on individuals, families and communities, and to work towards strategies for prevention. The extracts below exemplify the need for lateral violence awareness training.
Lila (age category 56-60): I think the lateral violence training that we did has helped me understand it more. [If] I see somebody who behaves really badly, well that’s lateral violence. I see somebody else and I say that’s jealousy. I see somebody else and that’s incompetence. I can now separate it. That lateral violence training we did... it really did make a difference to a lot of people who came to the training. People talk about lateral violence more often than not... I have a lot of respect for the lateral violence training. It was like a breath of fresh air that came in. It’s a way we can make changes ’cos if we don’t work together we are never gonna improve. No matter what amount of funds they give us, no matter what fantastic technology they give an Aboriginal organisation, no matter... if we don’t work together we are never gonna make the changes... People were talking to communities and they were saying we need to do it [lateral violence training] here... I was just sad that it just wasn’t ongoing. I know you didn’t have the money and stuff.

Rose (age category 41-45): It would be good to learn a bit more about lateral violence... If you ever run a lateral violence workshop let me know, I will love to go.

These extracts identify that formal training is a feasible option for better understanding lateral violence. Reference was made to the Preventing Lateral Violence (PLV) workshops (Clark et al., 2014) which Lila had previously attended and Rose had heard about and was keen to attend. The workshop helped Lila distinguish lateral violence from other forms of violence which enabled conversations and better unity within the workplace. Both extracts above reiterate the need for workshops within the community as an education tool. Other workshops on lateral violence appear to be increasing around Australia (see for example Koorreen
Enterprises, 2015; Korner Winmil Yunti, 2016; Ryan, 2015) which reflect the increasing
demand for such workshops.

Understanding and awareness

It would seem that once participants understood lateral violence, it enabled a process of self-
awareness of values, behaviours and roles for preventing lateral violence within the
community. The extracts below exemplify this process.

Eve (age category 31-35): I think we are all probably a little bit guilty of being
perpetrators and exacerbating that [lateral violence], but for me personally I think with
the name of it actually created an awareness … of my own actions, how I may talk
about people, how I might even think about my community. So for me it really created
a self-awareness, which I think you’ve got to have that before you can create
community or any other sort of awareness...taking responsibility for our actions.

Kelly (age category 41-45): Accept people for who they are, really. I think, they should
really look at themselves inside, you know and really look at their values and… you
know, what do they believe in and, you know... they say they like to be respected and
this is how they like to be treated themselves, but if you’ve got a connection it can be
really hard...it prevents you from moving ahead… Own it…and you know, if you own it,
then...it needs to be clearly defined what it is and why you’re doing it. Why are you
doing it?

Both Eve and Kelly indicated the importance of critical reflection of one’s values, thoughts,
beliefs, actions and accountability. This assisted Eve to “create community” and for Kelly to
reflect “move ahead” and “own it”. Thus these participants hypothesised that such reflection allowed self-awareness, ownership of one’s actions, and improved community connections that assisted with fair treatment and respect amongst community.

This process begins with awareness and naming lateral violence (Clark & Augoustinos, 2015) through education, which can set in motion a process of self-reflection about one’s own experiences and responsibility in acknowledging lateral violence and accountability. This realisation process begins at the individual level to accommodate the collective community level. This is supported in the literature that indicates that individual change leads to community change (i.e. Dudgeon et al., 2014b).

**A lateral violence campaign**

Participants realised that education for the broader Aboriginal community and general population was needed to drive the message home about prevention of lateral violence as shown in the extracts below.

*Russell (age category 36-40):* I think the media and NITV...maybe do a commercial but...

*it has to be hard hitting, like see some of these drunk [sic] driving commercials...People need to understand what could come of lateral violence like suicide and all these other things... It needs to be put in their face. There needs to be some kind of shock value, shock education. Because if we sugar coat things people aren’t going to, it’s not gonna sink in. You need something that they’ll talk about in the community. “Oh, did you see that commercial?” or “Did you see that show on this and what happened.”*
Rachel (age category 31-35): I can see a campaign, it would be great but I can see little kids saying, “Oh I’m naming it now ’cos there's a name to it”...Yeah need someone to get out and do a lot more workshops around it in community...I'd love to see more like a stall at NAIDOC and Reconciliation Week and stuff like lateral love, lateral violence, learn, something like that. You know that Quit Smoking campaign and all that, it would be good to see. I know it costs a lot of money but it's so good for community and not just Aboriginal workers but Aboriginal community young, old, talking about lateral violence “Let's stop it!”....Yeah and have posters of local Aboriginal mob, it's got to be credible, it's hard 'cos we've all had our frustrations where we will all have fights with our family and that and you don’t want someone going “Oh hypocrite!”

Both Russell and Rachel supported a visual educational campaign including television, film, posters and visual displays at community events. They acknowledged the success of other campaigns on sensitive topics. Rachel, in particular, stressed the importance that the campaign be credible and foster community participation and ownership, be culturally safe and model respectful practices.

**Targeted lateral violence education**

Participants suggested that lateral violence needs to target both Aboriginal and non-Aboriginal communities. However, the future of Aboriginal communities lies with the next generation and therefore a focus on prevention and unity needs to start with young Aboriginal people, as suggested in the extracts below.

*Eve (age category 31-35): I think it would be very hard for a non-Aboriginal person managing Aboriginal people in a team to sit down and name that [lateral violence]. I*
guess it has to be promoted and talked about and spread about within the Aboriginal community, but I think you need non-Aboriginal people ... be aware of this because also it would stop non-Aboriginal people from perpetrating lateral violence as well, and you know they could do it quite innocently or non-intentionally, but that can happen ...

Maggie (age category 46-50): ... How do Aboriginal people do that [pull themselves up] ... Because the next generation shouldn’t have to wear lateral violence and shame...You know but now they’ve got a whole new ball game...they’ve got technology...Facebook and through the mobile phone.

Russell (age category 36-40): It needs to start with the young, ‘cos they need to educate their parents. That’s kind of ironic. It’s supposed to be the other way around, but the young ones need to go back into their community and educate their parents...

In these extracts Eve highlighted the need for raising awareness among non-Aboriginal colleagues to prevent inadvertent perpetuation of lateral violence. Both Maggie and Russell had concerns about the young community members and wanting to prevent the normalisation of lateral violence. Thus participants highlighted the importance of lateral violence education for all people, Aboriginal and non-Aboriginal, young and old, in the workplace and the community as well as in schools (as identified in other abstracts).

Confirming the findings of previous research participants also describe how Facebook and the mobile phone were avenues for both affirming and questioning the authenticity of Aboriginal identity, particularly amongst the young (Lumby, 2010; Radoll, 2014). The literature indicates
that practices of non-affirming identity can affect a young person’s self-esteem and contribute to adjustment problems (Phinney & Chavira, 1992). Hence, by targeting education towards the young, the intergenerational cycle of trauma and violence can be prevented and in turn be an avenue for accountability for parents to stop modelling lateral violence for their children.

**Support**

Four types of support were recognised by participants as central to coping with lateral violence: social and family; workplace; legal; and counselling support. Such support can assist to promote unity and work towards common goals within Aboriginal communities.

**Family and social support**

Support from family and community was salient, even though it can also be the most likely place where lateral violence occurs. The extracts below indicate the importance participants place on support within families and communities in response to lateral violence.

*Peter (age category 26-30):* Um try and support each other. I mean like if someone’s got a problem, try and help them out in the community and try not make it harder for them so they think about, you know, these people and their families as well... Um maybe try to explain to them the importance of sticking together. There’s a lot of bigger problems out there.

*Russell (age category 36-40):* And I feel that by then putting lateral violence on their siblings of all people they should be supporting...And I tell them that. They should be supporting each other... Not running each other down.
The participants alluded to the desire for family and community support consistent with the literature that indicates that bonded (kinship) support is more common than bridging support within the Aboriginal community (Waterworth et al., 2014). Peter reiterated the need to “stick together” for support, as the absent but implicit message is that the community is divisive. Russell indicated support rather than “running each other down”. Being put down and division are two aspects of lateral violence, and thus family and community support is vital to alleviate problems and strive for improved outcomes.

**Workplace support**

Many participants worked within an Aboriginal organisation or service where lateral violence was an issue and discussions about workplace support featured prominently in interviews. The two extracts below emphasise the importance of workplace support for improved outcomes.

*Beau (age category 36-40):* I mean personally here we’re pretty supportive of one another and I think we stand sort of united and I think should be within reason without...Yeah we all stick up and support one another and we can debrief.

*Kelly (age category 41-45):* What makes it work here is that everyone talks about it, you know, if they notice something they are on [to] it pretty quick and its open and ... [Non-Aboriginal] manager is really good with support in that way... And she’s really at the forefront with supporting Aboriginal workers here...it’s really good. And we have our own set groups and its specific for us to do, to work with the community ... clients that we work [with] here...it’s flexible but you can sort of like feel confident in working...
These narratives exemplified positive support within the workplace. Beau reiterates that when there is support there is unity amongst colleagues. Kelly indicates that an open and communicative environment with the support from a non-Aboriginal supervisor helped with unity, confidence and service provision. Thus these findings show that a supportive working environment is necessary and can utilise both bonded and bridging support (Waterworth et al., 2014, 2015).

Legal support

Many participants advocated for legal support avenues which could be via legislation, workplace policy or guidelines pivotal for combating lateral violence in the workplace.

Eve (age category 31-35): ... so I mean there probably has to be some guidelines around I don’t know...I think it would be good to have some guidelines around [lateral violence in] workplaces.

Brett (age category 51-55): ...You know, where I give the example of how the young girl was treating her mother [perpetrating lateral violence]. Even legislate against it as well...really it becomes a bit of a criminal offence.

Beau (age category 36-40): To me, we’ve just sort of gone through as an organisation, gone through a lot of our policies and still are continuing as part of our ...quality improvement stuff in making them more user friendly... So it’s pretty clear....approaching managers and following their bullying and harassment policy and stuff, so...
All three participants reiterated the need for legal avenues for prevention and stopping lateral violence, for example, by reviewing relevant policies and procedures for clarity. Where needed, relevant guidelines and codes of conduct could be developed to enable people to feel culturally safe and not be oppressed by the system, supervisors or other Aboriginal colleagues. Franklin et al. (2009) advocate for the alignment of cultural safety processes with workplace policy and practice.

It seems that lateral violence education needs to be inclusive of information on legal support, such as the *Fair Work* anti-bullying jurisdiction, and through the Children’s e-Safety Commissioner for cyberbullying. Yet it is difficult to know how many Aboriginal people will use these external sources. As discussed in the literature Mellor (2004) indicated that participants in his study felt that regulatory or legislative bodies were ineffective.

*Counselling support*

Many participants indicated that support from a culturally responsive counsellor or psychologist was important to alleviate distress associated with lateral violence.

*Kelly (age category 41-45):* ...*I have experienced lateral violence...you need to have someone you can talk with and someone that will listen, someone that understands it, so you know, like you’re not having to explain about it ... someone, you know, you go in there to their professional help to...that they can understand what you’re saying and how you experience, and if they have no concept of what you’re saying and you’ve got to explain it to them, you’re hitting a wall... They need to understand the cultural...and they need to be sensitive about that, and [if] they [the service] don’t have it... [and] they’re only going by textbook... [and] they haven’t lived it, they haven’t breathed it,
and they don’t understand it, and so, how can they really call themselves a counsellor if they’re not appropriate for what you’re saying?

Paul (age category 41-45): I got two actually; I got a psychologist through mental health... Now I get psychologists and getting it out. Dreaming about it. I saw people get shot but I was 19 years’ old when I saw them die but it seemed real, like it just happened… Counselling but not everyone will want to do that or even if it’s available. If you can’t do all that, go out for a nice walk or fish, have a good breather ...

The importance of cultural competence for counsellors was stressed by Kelly. Paul’s counselling was via an Aboriginal community controlled service which presumably includes cultural aspects. Without cultural competency and appropriate practices, counselling may be of little value to Aboriginal people. Many Aboriginal people in Adelaide pursue counselling services in the Aboriginal primary health care sector (AIHW, 2016). Within Aboriginal services, traditional healers (Ngangkari) may also be accessed. However, the scope of this article does not allow for a report on other counselling options utilised by Aboriginal people in Adelaide such as private, government or Employer Assistance Programs (EAP).

Avoidance of Aboriginal spaces

According to many participants avoiding or disengaging with family, community or Aboriginal workplaces was a common strategy in dealing with the effects of lateral violence.

Belle (age category 31-35): Yeah, I don’t want to be around black fellas because they’re all like this and .... But yeah, I’m very strong about that sort of stuff. I mean it’s easy to get like that when you’ve just really been slapped in the face by your own
people so I can understand that. They’re probably just venting, but that’s really sad to me when they’re like that…. Whilst I totally understood what they were saying and where they kept coming from, but I just thought I don’t want it to be like that. You should be able to be proud and you shouldn’t have to say that everyone’s like that and you don’t want to be around your own people or your own family.

Russell (age category 36-40): I’ve removed myself from family that sit around the kitchen table and gossip about people... it’s about removing myself from the mob and being surrounded by good people.

Leanne (age category 51-55): ...My uncle always told me “never work for a nunga [Aboriginal] organisation Leanne”. I said I will just try and keep on hearing that all over the years. I thought I would just try this job anyway then about three months ago it all started happening. God I should have listened to him. I am thinking it’s good being up there but you have to treat people how you expect to be treated yourself. It would be a happy place if we all work together. I don’t like [it] when people don’t work together, especially nungas [Aboriginal people in SA]. All want the same outcome.

These examples illustrate the active avoidance of people and places such as family, community and Aboriginal organisations. These narratives reveal that some people (Belle) avoid other Aboriginal community people in order to cope with lateral violence as excessive contact might mean taking on others’ detrimental behaviours. Some have disengaged (Russell) with family when they have perpetrated lateral violence and they try to engage with positive people. Some have been warned (Leanne) by others to avoid working in Aboriginal organisations because of lateral violence. The literature indicates that lateral violence is an issue within some Aboriginal
organisations and can threaten their survival (ORIC, 2010). Confirming the results of this project, research in Perth has also found that some participants removed or disengaged themselves from community in order to protect themselves. This consequently fragmented relationships, further isolating people (Waterworth et al., 2014, 2015).

**Become proud and strong in identity and culture**

Cultural maintenance, connections and identity for participants appeared essential and this was linked to empowerment and pride as can be seen in the extracts from narratives below.

*Beau (age category 36-40):* ...My mum was Aboriginal and sadly not with us anymore but my father, he was Swedish, so anyhow growing up with mum she struggled with alcoholism but she was still very passionate about her people and that we should stand up for our rights and be counted and all this type of stuff, so even though I was sort of unhappy with how I grew up around alcohol, violence, drugs and stuff like that I still absorbed her passion around Aboriginal rights, so from that like I still draw on that to this day to inspire [me] ...

*Dianne (age category 26-30):* I guess my real cling to my culture, it probably stems from, I lost my grandmother in 2008, and she was the one who I got all the culture from, and everyone went to her house, and she was sort of the matriarch of the family. So, I always looked up to her and if I had any questions, or if I was confused, or...I’d sit down and listen to her stories. And then she passed away, so I was kind of a bit lost for a little bit, and...I guess my strength comes from her, because I know that she would want me to be strong. So, I try and be true to her, and what she taught me, and try and use her strength...because she was a very strong Aboriginal woman, and I would be
lucky to be like her. So, I guess that’s my push...I want to be a strong Aboriginal woman, and I want to give young girls someone to look up to, too. So, I want to be strong like my grandmother, and then when my kids come along, I want them to be able to be like me.

Both Beau and Dianne explained how they drew cultural strength and inspiration from their Aboriginal ancestry in order to maintain their Aboriginal identity while at the same time acknowledging other non-Aboriginal ancestry. Beau absorbed his mother’s passion and recognised her importance despite her struggles with alcohol. Dianne accessed her culture and strength from her matriarchal grandmother and wants to continue her legacy by passing on culture and strength to the younger generation. Cultural maintenance and reclamation are extremely important to ensure this legacy continues for Aboriginal people as custodians for future generations (see Amery, 2016). When culture becomes lost or fragmented there can be feelings of grief and loss; but on the flip side there can be pride in what is retained and reclaimed, no matter how big or small. The literature indicates the important protective factors of cultural and ancestral renewal (Kelly et al., 2009).

**Role models and champions**

Participants also referred to role models and or champions of the cause to assist in preventing lateral violence within the Aboriginal community. These are highlighted in the extracts below.

*Eve (age category 31-35):* ...when we think about lateral violence I think the work that Brian Butler is doing is fantastic... Like I see his posts that he will put up on Facebook... loving words...there is always encouragement for our communities, but I think what’s the next step...and with him being an elder who’s going to be following in his footsteps;
who’s the next young champion... So for me a lot of the time we do need champions...whether it be wearing the t-shirts; flying the flag; whether someone is going to be vocal...getting the people out there who...I believe we have got such an untapped workforce. We have got many talented Aboriginal people who aren’t working for whatever reasons but for them to be able to volunteer, to be in a paid position, to want to have the kitchen table discussions, to want to have the backyard discussions and let’s talk about this and then formalise it...however, that happens in a way that other people can pick it up and go you know this is really great stuff that’s happening.

Rachel (age category 31-35): ...But we've got to role model all the elders and people my age and that too, got to role model it for our kids and nieces and nephews and stuff and each other.

Many participants identified Brian Butler as a strong formal advocate against lateral violence and in attempting to improve relations within the community by advocating for love rather than destruction. Concern was expressed by Eve, in particular, about who would step up, speak out and become champions when particular elders were no longer able to do so. The role modelling of positive behaviours and relationships to direct the younger ones in the Aboriginal community to prevent lateral violence was emphasised by Rachel. Both formal and informal avenues are needed, which included public forums as well as backyard discussions and role modelling. When there are controversial or sensitive topics, such as lateral violence within the Aboriginal community, silence can maintain the status quo. Yet there are always champions that will speak out regardless of the silence, even if it contributes to further stress and unwelcome attention. Gorringe et al. (2009) cautioned that those who break the silence to speak out against sensitive issues may face reprisals.
Challenging lateral violence

Participants indicated that challenging lateral violence was one way to curb it. Challenging behaviours were described in the context of respect rather than confrontation.

Leanne (age category 51-55): Yeah ‘cos there are two people in this organisation that use it [lateral violence] a lot. I have pulled one of them up and don’t expect to be spoken to like that. I actually put in a report to the manager three times. The first time I went to him and he said maybe she was having a bad day and I said it doesn’t matter. I don’t expect to be spoken to like that...It can make you out to be a bitch... I can’t help it. I was a mouse right through. But I am an adult now and in my 50s and if I don’t like something I will say it and say it nicely. They don’t like the boat being rocked, if I don’t like something according to my J&P, because my old manager said to use your J&P. I carry it around with me wherever I go and always reflect on it. As well as the work plan. I have a lot of tools to back me up.

Beau (age category 36-40): ...there’s no greater feeling... when you can put someone back in their spot without sort of bullying them or being really nasty, but with statistical evidence to go well actually did you know that blah, blah, blah...they’re quiet.

Rose (age category 41-45): This day I came in and a work colleague said “I have to tell you something. Something happened and I addressed it. ...They were talking about you. That’s right you are friends with Rose”... She said “Stop I don’t want to hear this rah rah rah.” Which is good on my part that she shut those people down and she said, “It was inappropriate and you shouldn’t be saying that about such and such [Rose].”
Participants utilised different strategies to confront lateral violence. Examples include Leanne who asserts her rights when disrespected and uses education by showing her J&P.\textsuperscript{17} She has reclaimed her power given that she was previously silent (i.e. a “mouse”). However when she challenges others, she is consequently met with reprisals and can be labelled a “bitch”. Beau finds a way to challenge people (“put someone back in their spot”) by presenting factual information rather than retaliating. Rose gave an example of collegial support from others who defamed her. Challenging is a problem solving skill that is positively evaluated as functional within individualistic societies (Yeh et al., 2006). In this case it is difficult to determine the level of functionality in relation to other coping skills presented by participants. Challenging was rarely discussed, but it appears to have empowered participants to assert their rights.

\textit{Turning a negative into a positive}

There were a number of participants who turned a negative into a positive. In other words they reframed negative information into positive information in order to lessen its impact. The extracts below exemplify this positive reinterpretation.

\textit{Ralph (age category 31-35): And I've learned stinking thinking and stuff like that ....}
\textit{Like when you're gonna think negative and that you're gonna do negative things... But now I um just take a negative and turn it into a positive. A lot of people want you to fail but you've just gotta, you've gotta keep soldiering on. You know in yourself that you're doing the right thing, especially in the Aboriginal community all over Australia.}

\textsuperscript{17} A J&P is the Job and Person Specification which is a description of the duties, qualifications, skills, experiences, knowledge and other attributes which a person must possess to perform the job.
Russell (age category 36-40): ...I’ve had blatant lateral violence and there have been times where I just go with it. ‘Cos I know that will annoy them more...And if they say something, I just say, “Yeah. Why are you stating the obvious?” That’s even lateral violence to myself to a certain degree. Like when somebody says, like, calls you a name [word deleted]... And I said, “Yeah, thanks for stating the obvious, like, as in a smart ass way...You know? They expect for me to get all defensive and blah, blah, blah and I always found that if I go with it, it actually annoys them more and then they’re more inclined to pull back. I did it a lot in school. [It is used to] ...take the power out of the words...So the power, we’re turning that word from a negative into a positive.

In these examples, Ralph relies on “stinking thinking” methods to guide aspects in his life. When people have negatively evaluated Ralph he reinterprets their efforts positively, which help him to keep “soldiering on”. Russell gets called derogatory names and takes “the power out of the words” when he turns the information back on the perpetrators rather than reacting negatively. Positive reinterpretation is a cognitive process and is described as one of the major coping skills in the general literature as well as a method used to protect oneself against racism (see Mellor, 2004).

Discussion

Overview

This article has drawn on participants’ resilience, strengths and abilities to cope and strategise to prevent lateral violence. Education and awareness was represented by participants as empowering and a key strategy in self-reflection and understanding the role one plays in sustaining or preventing lateral violence. This self-understanding enabled participants to take responsibility for making changes in their lives. This is indicative of collective cultures where
individuals change the self to protect the group or community. It also suggests the bonded and caring nature of Aboriginal people to ensure that Aboriginal people unite and heal as a group.

Social support via bonding and bridging modes were reported by participants, with bonding support being more prominent in their daily lives. This support assisted in sustaining culture, identity and unity, which are all important for wellbeing. However, there were instances of stress and lateral violence, which meant participants needed to protect themselves. They often did this by disengaging in various ways. Examples included not working in Aboriginal organisations, staying home, and deliberately staying away from the influences of other Aboriginal people. This appeared to be functional to protect the self and community from further disharmony, or as a form of resilience which propels one to seek out alternative and positive support from like-minded people (both Aboriginal and non-Aboriginal). Yet disengagement or avoidance may be a dilemma because if Aboriginal people disengage from community and culture their ability to maintain and pass on culture may be compromised. Disengagement could inadvertently add to lateral violence, particularly for the younger generation, where affirmation of identity is important and tested on a regular basis. Disengagement in the workplace could also be a dilemma where Aboriginal recruitment, particularly in Aboriginal services, is needed to ensure appropriate cultural service responses to the community.

Instead of disengagement, some participants ensured they were culturally grounded and took inspiration from elders, ancestors, family and role models from within the community for empowerment. Aboriginal people have different means to access culture depending on their circumstance. For example, many Aboriginal people were removed from culture and family through policies, and therefore access may be different to those who grew up with family and
community. Furthermore the reclamation of language and culture by individuals, families and groups is another means of coping with lateral violence by enhancing identity and pride.

Other ways of coping include standing up against lateral violence. This is done at various levels – as a leader, elder, champion of the cause, a positive role model, or individually to challenge lateral violence in daily life. Challenging is aligned with problem solving and seen as functional from an individualistic standpoint as participants felt empowered by this process. A final way to cope and lessen the impact of lateral violence was to reinterpret a negative into a positive, that is, “take the power” out of the words. This appears a helpful cognitive process, which is about changing the self to fit the environment, which is useful for collective societies.

Participants in this study displayed a range of skills consistent with both individualistic and collective coping styles. Many of their coping strategies appeared to correspond with Indigenous research on racism (Mellor, 2004) in order to protect the self, educate others and assist the younger generation to cope. This is not surprising, given that lateral violence is so divisive and damaging to wellbeing, as is racism. Thus the protective factors in this study serve as tools that empower and assist in lateral violence prevention. This broader education can ensure participants’ positive legacy can spread throughout the community.

**Implications for health policy intervention and further research**

There are many implications from this broad-based research which constituted a first attempt to have an in-depth dialogue with members of some of the Aboriginal community in Adelaide who were primarily female, in the mid-age bracket (41-50 years) and well educated. Firstly, it needs to be recognised and respected that Aboriginal participants volunteered to educate the broader population about lateral violence. As part of the overall study these participants have
assisted in endorsing the label of lateral violence (Clark & Augoustinos, 2015), and in situating lateral violence in a broader and holistic healing framework along with racism, trauma and wellbeing (Clark et al., 2016). Participants have now identified their coping skills, ideas and strategies which are a part of healing and as enablers to empower others. The message about lateral violence has been proliferating slowly within communities (Clark & Augoustinos, 2015). However a broad educational process has not yet been undertaken in many parts of Australia. The participants advocated for a broader educational campaign with resource materials, and educational and healing workshops to nurture the strengths within. Perhaps further research, exploration, replication is needed and further documented discussion on the topic of lateral violence could serve to encourage conversations, attract resources, and empower Aboriginal people to develop additional resources to contribute to the prevention of lateral violence within their families, workplace and community.

There are currently laws, policies and processes for complaints and restitution for bullying for both adults and children. However, protection from lateral violence as a whole concept is lacking. It appears that many organisations and government departments have policies, procedures and strategic frameworks but lack cultural frameworks. In the workplace, in particular, lateral violence prevention could be included within a cultural safety or respect framework. Franklin et al. (2010) recommended organisational realignment of current policies and processes with a cultural safety framework in order to ensure resilience, empowerment, and greater wellbeing for Aboriginal people. Such a framework would also rekindle Aboriginal values of cultural renewal, and sanction cultural competency training for non-Aboriginal staff. Thus, in the workplace, guidelines and processes aligned with cultural safety that include an understanding of and mechanisms for prevention of lateral violence promises to nurture unity,
resilience and wellbeing, which in turn can greatly add to an increased service to the community.
Statement of Authorship

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Name of Principal Author (Candidate): Yuwana Clark

Contribution to the Paper: Performed the literature review, called for and collated data (interviews with participants); interpreted data, wrote manuscript and acted as corresponding author.

Overall percentage (%): 85%

Certification:
This paper reports on original research I conducted during the period of my Higher Degree by Research candidature and is not subject to any obligations or contractual agreements with a third party that would constrain its inclusion in this thesis. I am the primary author of this paper.

Signature: [Signature]

Date: 20/11/16

Co-Author Contributions

By signing the Statement of Authorship, each author certifies that:

i. The candidate's stated contribution to the publication is accurate (as detailed above);
ii. Permission is granted for the candidate to include the publication in the thesis; and
iii. The sum of all co-author contributions is equal to 100% less the candidate's stated contribution.

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Chapter 6: Evaluation of the preventing lateral violence workshop in Adelaide, South Australia: Phase 1 survey responses

Abstract

Healing and education workshops are important resources to the Indigenous community in Australia: not only to assist in self-awareness but as a source of renewal and to regenerate ways to tackle difficult issues and situations within such communities. The one-day Preventing Lateral Violence workshop has been delivered in Adelaide since 2007 and received positive feedback. This paper focuses on an evaluation of a sample of six workshops conducted with five Aboriginal service providers in 2014 using pre, post and three months post workshop measures to determine the impact on participants. Questionnaires were administered to workshop participants to measure changes in awareness, understanding and knowledge of lateral violence as well as strategy development to prevent lateral violence in the future.

Analysis of quantitative data utilizing non-parametric tests revealed that the workshops were successful as an intervention tool at the completion of the workshop, and even three months after the workshop. The results indicated that participants understood and accepted the terminology, recognized and linked their experiences of lateral violence, understood the impact on self and others, and had an awareness of and developed strategies to combat lateral violence. The qualitative response to open-ended questions suggested that strategies were in place even after three months such as challenging lateral violence and educating others about lateral violence. Further comments indicated that the workshops were of great benefit to the community. The implications of these findings are discussed in relation to the long-term benefits of these workshops in preventing lateral violence.
Introduction

Lateral violence and related concepts

Lateral violence is believed to exist within many countries and communities throughout the world. The term is especially linked to oppressed and powerless groups who covertly and overtly direct their dissatisfaction internally, towards themselves and others within the same community (NCSA, 2008). For example, the nursing industry as an oppressed profession within the medical and health care systems, has used the concept of lateral or horizontal violence for at least the past three decades to describe the infighting behaviours of nurses (Roberts et al., 2009). Indigenous people have recently applied the term to describe infighting within their communities. This is particularly evident in communities in Canada (Bombay, 2014; Derrick, 2006; NWAC, 2015) and Australia (Gorringe et al., 2009; Langton, 2008; Wingard, 2010).

Lateral violence as a concept was influenced by early theorists such as Franz Fanon (1963, 1967) and Paulo Freire (1970) who emphasised infighting as one of the oppressive consequences of colonialism on Indigenous peoples in various countries. Within the Australian story of colonialism, various racist policies and practices disrupted and fragmented Aboriginal peoples and their cultures. Colonialism acted to divide, deny, control and oppress Aboriginal people and as a consequence caused considerable trauma (Atkinson et al., 2010). Racism, oppression and the effects of intergenerational trauma continues to have consequences for Aboriginal people to this day (AHRC, 2011b; Gorringe et al., 2009). A growing body of evidence has linked various forms of racism in Australia with outcomes of health, wellbeing and mental health problems within the Aboriginal community (Awofeso, 2011; Paradies,
Wellbeing and mental health outcomes have also been extensively linked to trauma and violence for Aboriginal communities (Atkinson et al., 2010; Krieg, 2009; Ratnavale, 2007).

Behaviours associated with lateral violence within colonised Indigenous communities include gossip, jealousy, shaming others, verbal and physical attacks, sabotage, bullying (BearPaw Media Productions, 2006; Derrick, 2006; Equay-Wuk, 2012; NWAC, 2015), and the stripping away of each other’s identity (Clark et al., 2016). Lateral violence can be triggered by disparities within communities. Such differences include: level of access and distribution of money and resources; one’s social status and education within communities; cultural affiliations; and one’s blood quantum (aligned with physical characteristics such as skin, eye and hair colour). The effects of lateral violence include feelings of shame, a blaming mentality and a lack of trust in others within communities, to name just a few (Derrick, 2006). These can also be associated with physiological signs such as sleep disorders, weight loss or gain, and depression (NWAC, 2015). Preliminary findings also suggest that experiences of lateral violence, directly and indirectly, affect wellbeing and appear to relate to general violence, racism and trauma (Clark et al., 2016) within the local Aboriginal population in Adelaide.

The health, welfare and distress levels of Indigenous people are critical in comparison to non-Indigenous people in Australia (Australian Institute of Health and Welfare [AIHW], 2015). For example, Indigenous adults are almost three (2.7) times more likely to report high to very high levels of psychological stress than non-Indigenous people. This continued stress can lead to conditions such as anxiety and depression which can impair quality of life. The most commonly reported stressors by Indigenous adults include: death of a family member (37%); serious illness (23%); unemployment (23%); mental illness (16%) and alcohol related problems...
(14%) (AIHW, 2015). Furthermore, about a quarter (26%) reported having access to mental health services for a mental health condition for the period 2012–2013 (AIHW, 2015).

Wellbeing and mental health is also heavily influenced by social health determinants which include socio-economic (i.e. education, employment), behavioural (i.e. smoking, alcohol consumption, diet), environmental (i.e. housing, overcrowding) (AIHW, 2015; Zubrick et al., 2014) and arguably political factors (e.g. funding, access to resources) (Gee, Dudgeon, Schultz, Hart & Kelly, 2014).

With the effects from all these potential influences on Aboriginal people’s lives, the need for healing, restitution, education and training becomes apparent within Aboriginal communities. For Aboriginal people, healing has been described as a process of physical, cultural, psychological and/or spiritual renewal with a holistic approach to treating wounds (Mackean, 2009). Many initiatives for wellbeing workshops have been specifically developed for Aboriginal people throughout Australia, by and for Indigenous people. Some initiatives are targeted toward particular groups such as men, women, stolen generations, youth and or the general community, whilst other initiatives are targeted toward particular problems such as family violence, trauma, drugs and alcohol addiction and lateral violence. Some examples of healing and educational initiatives include: the Seven Phases to Healing in South Australia which aims to heal loss and grief, anger, rage and general violence (Wanganeen, 2014); the We-Al-Li program (Atkinson et al., 2010) to heal trauma; the Red Dust healing initiative (Powell et al., 2014), and the Mibbinbah Spirit healing program (Bulman & Hayes, 2011) to assist Aboriginal men with violence. Women’s healing initiatives include the Aboriginal family violence programs that aim to safeguard, empower and to heal such as the Nunga Mi:Minar service in SA (Snell & Small, 2009). Workshops that specifically focus on the prevention of lateral violence as a specific issue in Australia include the Koorreen enterprises (2015) in
Victoria that specialise in awareness and train-the-trainer workshops that counteract lateral violence called *lateral healing* and which advocates cultural safety. In Adelaide, the *Preventing Lateral Violence* workshops (PLV) (Clark et al., 2014) are also delivered, and constitute the specific focus of the present evaluation which is expanded upon below.

**Development of the Preventing Lateral Violence workshops in SA**

The first author developed an interest in the topic of lateral violence from the Healing Our Spirit Worldwide (HOSW) conference in Alberta, Canada in 2006 where discussions about lateral violence were led by many Canadian Indigenous leaders. Resources from the HOSW conference were shared with Aboriginal work colleagues in South Australia via an information forum in 2007. This progressed to the development of one- and two-day workshops on lateral violence which have been refined and continue to be conducted on an ad hoc basis. Prior to this evaluation study, 15 workshops and or information sessions had been delivered in Adelaide catering for approximately 300, primarily Aboriginal participants since 2007. The 15 workshops were delivered across three government organisations, one non-government organisation (NGO) and one Aboriginal community controlled health organisation. One of the government organisations has made it compulsory for all staff working in Aboriginal services (both Aboriginal and non-Aboriginal staff) to undertake the one-day PLV workshop as ongoing training. Delivery of the workshops has always been conducted by two Aboriginal facilitators on each occasion.¹⁸

In the early stages, the SA workshops were developed in collaboration with the Cooperative Research Centre for Aboriginal Health (CRCAH) (now called the Lowitja Institute¹⁹). As part

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¹⁸ The current facilitators are Aboriginal trainers including Karen Glover, Yvonne Clark and Stan Butler.

¹⁹ Collaborations were with the then CEO Mick Gooda. Their current website is [http://www.lowitja.org.au](http://www.lowitja.org.au)
of a roundtable national process, a pilot two-day workshop was developed and delivered in South Australia in 2009. Although the national collaborations have now ceased, the current PLV workshops in SA include material developed during this collaboration with the Lowitja Institute. The material and format of the current PLV workshops include PowerPoint and video presentations, handouts, small and large group exercises, including a simulation (on history, assumptions, values and strategies), reflections and debriefing.

The one-day educational and awareness PLV workshop is the most requested of its type in SA and is currently promoted with the broad aim for attendees being to understand lateral violence in various settings (i.e. family, community and workplace); to understand where lateral violence comes from, the forms it takes, the effects on the community; and Aboriginal diversity of experiences. Further aims include: to enhance connections between people, and to work towards strategies to deal with and prevent lateral violence. The one-day PLV workshop doesn’t promote or include active healing processes, yet participants have reported healing effects and empowerment as a result of the workshops.

**Evaluations of interventions for lateral violence**

At present there appears to be no published evaluations of lateral violence interventions pertaining to Indigenous people. However, evaluations of lateral violence workshops have been conducted in the nursing field in the United States. For example, Dahlby and Henrick (2014) conducted pre- and post-test evaluation utilising a modified version of the lateral violence in nursing survey (LVNS) (developed by Stanley, et al., 2007b). There were 29 pre- and 25 post-test responses with findings indicating that the workshops resulted in a decrease in the frequency of lateral violence, a better understanding of the causes and effects of lateral violence, and the development of healthier relationships within participating work units.
Dahlby and Henrick (2014) suggest that these findings support previous evaluation literature in the nursing field, which reveals that awareness raising and teaching methods to combat lateral violence can be effective in decreasing the frequency and intensity of lateral violence behaviours.

**The challenge of evaluating Aboriginal educational/awareness programs and workshops in Australia**

Evaluation research for healing and education interventions targeted toward Aboriginal people is limited and not well-documented in Australia; these include interventions for social and emotional wellbeing (Healing Foundation, 2012) and government policy which often drives such programs (Malezer, 2012). Many evaluations are also being conducted with empirical frameworks which may not be the best option in Aboriginal contexts. Rather collaborative, participatory and transformative evaluations appear to be best suited to Aboriginal communities (Katz, Newton, Bates & Raven, 2016) in which self-determination lies at the core (Malezer, 2012). A further challenge is that non-Indigenous academics with an outsiders’ evaluation framework can limit the insider experience and knowledge (Price et al., 2012).

To further understand this issue, Day and Francisco (2013) undertook a systematic review of promising interventions that had the potential to improve social and emotional wellbeing in Australia, from published research on social and emotional wellbeing for Indigenous people. They indicated that of a total of 8,000 papers, only a small number of evaluations had been published that involved Indigenous participants and/or communities. The selected social and emotional wellbeing evaluations were identified for screening for quality by the Maryland Scientific Methods Scale – a ranking system for research designs according to strength of internal validity. Scores on this scale generally reflect the level of confidence that can be
placed in the conclusions about cause and effect, or certainty that any observed change is actually caused by a particular program or service. The evaluations with primarily quantitative methods scored a satisfactory rating on scientific rigour.

Those programs that were evaluated using primarily qualitative methods were viewed low to very low on scientific rigour. Day and Francisco (2013) concluded that it is not currently possible to determine what might be considered evidence based practice for these interventions. Furthermore they acknowledge that there may be legitimate concerns about defining evidence in terms of criteria that are linked directly to quantitative evaluation methodologies as they may not capture the holistic nature of Indigenous healing. A dilemma is that if evaluations are not conducted in a particular way, funding may be limited for the intervention, and this does not allow for real change to happen within communities (Healing Foundation 2012).

The current evaluation study

Previous feedback for the PLV workshops in South Australia, held between 2007 and 2014, aimed to explore levels of satisfaction with various aspects of the workshop. The findings from 212 feedback questionnaires indicated that the majority of participants were satisfied with the training. They grasped the complexities of lateral violence, recognised their victim and/or a perpetrator status, recognised the negative impact lateral violence has on the community and requested interventions to prevent it. The qualitative feedback to open-ended questions indicated that the workshops were relevant to the community and needed to extend further to more people and places. Overall, the feedback refined the workshops and provided confidence to continue the delivery of these workshops and indeed inspired the current research.
Despite the feedback, a formal evaluation process had not been undertaken to determine the overall effectiveness of the workshop to ensure its quality and long-term effectiveness. Literature on both lateral violence and program evaluation within the Indigenous context is limited, particularly from an Australian Aboriginal perspective. Thus it is timely to conduct a methodologically sound evaluation of the PLV workshops that assists in improving a community resource, as one that not only meets the needs of the funders, but also meets the needs of the community.

Overall the aim of the current evaluation is to formally measure the effectiveness of the PLV workshops. This is to ensure that the Aboriginal community in Adelaide has access to timely, relevant, engaging and culturally safe workshops. The evaluation will determine if there has been a change in awareness, attitudes, knowledge of participants, and whether lateral violence prevention strategies are considered and actioned within various family, community and employment contexts. Such information is vital for improvements to the workshops. A final and general aim is to expand the knowledge in the current literature on lateral violence and evaluations on Aboriginal programs in the Australian context.

Thus it is hypothesised that the workshops will provide participants in this study with an increase in knowledge, understanding and awareness of lateral violence which is maintained over time. It is also anticipated that the workshops will resonate with the experiences of participants, and empower them to build and develop strategies to curb lateral violence in their own everyday lives.
Methodology

Indigenous evaluation approach

Aboriginal evaluation methodology is a relatively new construct that closely resembles or is aligned with ethical guidelines for research within Indigenous communities (Price et al., 2012). As most evaluations of Aboriginal programs and workshops are primarily conducted by non-Indigenous evaluators, some guidelines include consideration of the four Rs when working within Aboriginal communities. These are: Respect for diversity, culture and ways of knowing and being; Relevance to inform social policy and good practice; Responsibility to ensure that there is a sensitive and well-informed cultural process; and Reciprocity for appropriate communication with Aboriginal people and dissemination of information at all steps of the evaluation process, beyond reporting requirements (Hurworth & Harvey, 2012; Markiewicz, 2012). Wilson (2008) recommends another R, Relational which indicates that all things are interconnected which include the evaluator, the participants, the environment and the cosmos.

Price et al. (2012) indicate that Aboriginal community ownership and empowerment for evaluations should be ideally done by Indigenous people, as they are the ones who are closely aligned to the information and context and have the communities’ interest at heart. Yet in the absence of this ideal, a non-Aboriginal evaluator should engage an Aboriginal mediator to provide community knowledge, insight, trust and communication with the community (Price et al., 2012). Without these considerations such research and evaluation will continue to be seen as the “Other” with outsider interpretations through a different lens or perspective (Smith, 1999, p 2).
**Indigenous research approach**

An Indigenist paradigm and methodology combined with a mixed methods approach incorporating both quantitative and qualitative methods of evaluation are utilised in the current evaluation to achieve a more holistic approach. This is modelled on: acknowledging and embracing Indigenous people’s ontology (i.e. assumptions about the nature of reality); epistemologies (i.e. the ways of knowing reality); axiology (i.e. the nature of values); and diversity (i.e. of language groups and of differences in the way they see the world, organize themselves in it, the questions they ask and the solutions they seek as Indigenous people) (Smith, 1999, 2012). Martin (2009) further indicates that an Indigenous ontology as a framework for the research is of central importance, otherwise research conducted by Indigenous people will simply be reproducing dominant western forms of knowledge. This emphasises the importance of Indigenous processes, knowledge and voices to drive the research, such as the voices of Aboriginal participants, researchers and workshop facilitators. Therefore along with applying the five R’s, Aboriginal voices will be heard, privileged and reflected upon. Interpretation will predominately be an insider or subjective approach rather than an outsider or Other approach. This will be complemented by more ‘objective’ data from the survey results.

**Procedure and recruitment**

Prior to commencement of this study ethical approval was obtained from both the South Australian Aboriginal Health Research Ethics Committee (AHREC) in December 2012 and from the University of Adelaide Human Research Ethics Committee in May 2013. Following this, six workshops on PLV within the Aboriginal community were delivered from March to June 2014 to five separate organisations. The primary researcher contacted the CEO/Aboriginal Manager/Senior person of nine Aboriginal Organisations or services via email
or letter in late 2013 and early 2014 about the possibility of delivering a PLV workshop for
staff within their organisation. The information provided to the organisations included
information about the lateral violence workshops, the research evaluation project and its
voluntary nature, and any financial costing (see Appendices 4 and 5). If no initial response
from the organisations was received a follow-up telephone call or email was sent.

Of the nine organisations initially contacted, five accepted the invitation. One of the accepting
organisations requested the delivery of two workshops to ensure that most staff could receive
the training. Of the five accepting organisations, two were Aboriginal community controlled
organisations, two were Aboriginal service delivery sections within the state government and
one was a Non-Government Organisation (NGO). Six workshops were delivered in Adelaide
from March 2014 to June 2014 with one delivered in a semi-rural location.

It was anticipated there would be between 15-25 participants per workshop. Recruitment of the
participants was an in-house organisational process. Some organisations recruited Aboriginal
staff only, whilst others recruited both Aboriginal and non-Aboriginal staff from various levels,
who worked within Aboriginal services. For example, one of the services recruited both
Aboriginal and non-Aboriginal staff in leadership roles. Another organisation had minimal
Aboriginal staff for training and allowed the researcher to invite other Aboriginal community
members to participate in their workshop to ensure adequate numbers. For this an invitation
was sent by the researcher to Aboriginal people in Adelaide who had previously registered an
interest in attending a PLV workshop.

For data collection from the six separate PLV workshops participants were asked to complete
the evaluation questionnaire three times. This was once immediately before commencing the
program, the *pre-evaluation* at the beginning of the day (time 1); once immediately after completing the workshop *post evaluation* at the end of the day (time 2) and once three months after the workshop, *3 months post evaluation* (time 3). The latter questionnaire was mailed by post or could be completed online via Survey Monkey, which was made available to participants via email link.

To assist with the administration of the data, workshops and to provide ethical distance between the primary researcher (who was also one of the facilitators) and the evaluation method, a Research Assistant (RA) was employed. The RA (an Aboriginal senior psychology female student) was the primary source of communication for the evaluation. The RA informed participants of the aims, background, method and voluntary status of the research, and distributed and collected pre- and post-workshop questionnaires. She also informed the participants of the three months post-workshop evaluation questionnaire. The RA assisted with any participant enquiries and also informed the participants of the follow-up voluntary interview for the study, which would occur after a three to four month interval and collected names of those interested in participating.

Once all the data were collected, the RA de-identified the questionnaires by placing the information into tables within their prospective organisational groups. The material was also matched (pre to post to three months post) via the participants month and year of birth and other demographic information where possible. The data were entered into SPSS version 22 by the researcher. Computation and further analysis was then conducted using the SPSS statistical package.
Analysis and questionnaires

Demographic information on gender, Indigenous status, age and educational background was recorded as part of the research. A quasi-experimental design with pre, post and second post-test with a three month interval was conducted which is a popular design for evaluation research of a community intervention (Biglan, Ary & Wagenaar, 2000). Questionnaires were utilised for this process.

As there were no standardized questionnaires or surveys about lateral violence in Indigenous communities, the previously used feedback survey for the lateral violence workshops in Adelaide was improved and adapted for use in the current evaluation. In the current evaluation survey a 5-point Likert scale measured the extent to which participants agreed or disagreed with statements about lateral violence. The survey modelled a typical design that explores behaviours, beliefs, attitudes, knowledge and attributes (Schofield & Knauss, 2010) and where lateral violence could be measured over three time periods (i.e. pre, post and three months post) (see Appendices 6 to 8).

There were many differences across the three surveys in terms of the types of questions and length of the surveys (see Appendices 6, 7 and 8). For example, in the pre workshop questionnaire there were 26 quantitative questions in total. The first eight questions were unique to the pre-workshop questionnaire requiring information about participant’s motivation and expectations of the workshop. In this survey no qualitative questions were asked. The post workshop questionnaire included 47 questions in total. The unique survey questions related to
participant satisfaction about the facilitators, the venue, delivery methods and general satisfaction which were of interest to the facilitators and participating organisations. The main qualitative question asked about hopes for change as a result of the training.

The three months post workshop questionnaire asked 34 quantitative questions. The unique questions asked about the delivery of workshop as well as participant satisfaction. The qualitative questions asked participants to reflect on the main behaviours of lateral violence, what changes they have made post workshop and ideas for further training.

There were 15 core quantitative questions or items in the “experiences, impacts and attributes” that were consistent across the three surveys and time frames. These were used in the final analysis to determine changes over time. An exploratory factor analysis was conducted but this method was not able to identify factors into relatable categories. Thus these 15 individual items were instead arranged into four meaningful and functional categories by the researchers that related to lateral violence. These included sections for terminology, experience, impact, and strategies. Questions and items posed within the terminology section aimed to determine the usefulness and appropriateness of the lateral violence term, as it is relatively new and has been applied to Aboriginal people within the Australian context with relatively little consultation (see Clark & Augoustinos, 2015). For example, “lateral violence is a useful term in understanding violence in the Aboriginal community”. In the experience section the questions focused on whether participants’ experiences resonated with the terminology and their own contexts. For example, “I realised that I have been a victim of lateral violence at least once”. The impact questions aimed to understand participants’ knowledge and awareness of the effects of lateral violence on individuals, the community and the workplace. For example, “I understand the impact of lateral violence on the community”. The strategies section enquired
about the awareness and knowledge of strategies and whether there was further strategy
development or action as a result of the workshop. For example, “I am aware of a range of
strategies to address lateral violence”.

The open-ended questions in the post and three months post surveys were also included in
order to understand participant’s views about lateral violence, the workshops and workshop
content in more detail. Open-ended responses were analysed using a thematic analysis (Braun
& Clarke, 2006, 2013) and presented following the quantitative survey results.

Results

Survey results (quantitative)

Sample
Overall, 72 people participated in the six workshops. Of these, 59 participants completed pre-
workshop questionnaires, 69 completed post workshop questionnaires and 25 completed three
months post workshop questionnaires. There were 58 participants who completed both the pre-
and post-evaluation questionnaires (response rate 81%). Of these, 23 completed the three
months post workshop evaluation (response rate 32%). Table 6.1 indicates that the majority of
the research participants were females (76%). Although there was a spread of people across
different age categories, almost half of the sample (47%) was between the ages of 31-45 years.
Almost two thirds of the participants were Aboriginal (71%), just over half (55%) had attended
university, and 25% had at least attended secondary school.
Table 6.1. Total sample demographics (n= 72)

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>17 (23.6%)</td>
</tr>
<tr>
<td>Female</td>
<td>55 (76.4%)</td>
</tr>
<tr>
<td>Age</td>
<td></td>
</tr>
<tr>
<td>18-30 years</td>
<td>13 (18.1%)</td>
</tr>
<tr>
<td>31-45 years</td>
<td>34 (47.2%)</td>
</tr>
<tr>
<td>51-65 years</td>
<td>25 (34.7%)</td>
</tr>
<tr>
<td>Education</td>
<td>LOW</td>
</tr>
<tr>
<td>Primary school</td>
<td>01 (1.41%)</td>
</tr>
<tr>
<td>Secondary school</td>
<td>18 (25.3%)</td>
</tr>
<tr>
<td>TAFE</td>
<td>07 (9.9%)</td>
</tr>
<tr>
<td>University</td>
<td>39 (55.0%)</td>
</tr>
<tr>
<td>Other</td>
<td>06 (8.4%)</td>
</tr>
<tr>
<td>Ethnicity</td>
<td></td>
</tr>
<tr>
<td>Aboriginal</td>
<td>51 (70.8%)</td>
</tr>
<tr>
<td>Non- Indigenous</td>
<td>21 (29.2%)</td>
</tr>
</tbody>
</table>

Pre, post and three months post comparisons according to participant demographics

Before commencing the primary analysis, participants’ responses were examined by differences in age, gender, Indigenous status and education. The 15 items were reduced to a single average score within each meaningful category (Terminology, Experience, Impact and Strategies) and this single score was then analysed with the demographic information over the three different time periods. The Kruskal-Wallis T-test comparison of means of the participants is detailed in Table 6.2.
Table 6.2. Comparison of means of pre, post and three month post evaluation according to the demographics for PLV (n=72)

<table>
<thead>
<tr>
<th></th>
<th>Pre evaluation</th>
<th>Post evaluation</th>
<th>3 month evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M (SEM)</td>
<td>P</td>
<td>M (SEM)</td>
</tr>
<tr>
<td><strong>Terminology</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-30</td>
<td>3.31± 0.24</td>
<td></td>
<td>3.75± 0.16</td>
</tr>
<tr>
<td>31-50</td>
<td>3.14± 0.10</td>
<td>0.522</td>
<td>3.80± 0.14</td>
</tr>
<tr>
<td>51-65</td>
<td>3.10± 0.13</td>
<td></td>
<td>3.76± 0.14</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>3.07± 0.11</td>
<td>0.504</td>
<td>3.82± 0.17</td>
</tr>
<tr>
<td>Female</td>
<td>3.18± 0.09</td>
<td></td>
<td>3.76± 0.10</td>
</tr>
<tr>
<td>Ethnic Group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aboriginal</td>
<td>3.19± 0.10</td>
<td>0.255</td>
<td>3.85± 0.10</td>
</tr>
<tr>
<td>Non-Aboriginal</td>
<td>3.06± 0.11</td>
<td></td>
<td>3.59± 0.15</td>
</tr>
<tr>
<td>Educ’n</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High</td>
<td>3.18± 0.15</td>
<td>0.862</td>
<td>3.67± 0.17</td>
</tr>
<tr>
<td>Low</td>
<td>3.16± 0.08</td>
<td></td>
<td>3.82± 0.10</td>
</tr>
<tr>
<td><strong>Experience</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-30</td>
<td>2.85± 0.29</td>
<td></td>
<td>4.11± 0.29</td>
</tr>
<tr>
<td>31-50</td>
<td>3.43± 0.11</td>
<td>0.120</td>
<td>4.17± 0.12</td>
</tr>
<tr>
<td>51-65</td>
<td>3.21± 0.21</td>
<td></td>
<td>3.92± 0.12</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>3.40± 0.19</td>
<td>0.693</td>
<td>4.18± 0.19</td>
</tr>
<tr>
<td>Female</td>
<td>3.23± 0.12</td>
<td></td>
<td>4.03± 0.10</td>
</tr>
<tr>
<td>Ethnic Group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aboriginal</td>
<td>3.46± 0.13</td>
<td>*</td>
<td>4.19± 0.11</td>
</tr>
<tr>
<td>Non-Aboriginal</td>
<td>2.91± 0.11</td>
<td>0.013</td>
<td>3.75± 0.10</td>
</tr>
<tr>
<td>Educ’n</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High</td>
<td>3.26± 0.21</td>
<td>0.891</td>
<td>3.93± 0.21</td>
</tr>
<tr>
<td>Low</td>
<td>3.28± 0.11</td>
<td></td>
<td>4.10± 0.13</td>
</tr>
<tr>
<td><strong>Impact</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-30</td>
<td>3.38± 0.42</td>
<td></td>
<td>4.62± 0.17</td>
</tr>
<tr>
<td>31-50</td>
<td>3.57± 0.18</td>
<td>0.557</td>
<td>4.52± 0.12</td>
</tr>
<tr>
<td>51-65</td>
<td>3.77± 0.24</td>
<td></td>
<td>4.53± 0.12</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>3.98± 0.26</td>
<td>0.068</td>
<td>4.63± 0.12</td>
</tr>
<tr>
<td>Female</td>
<td>3.46± 0.15</td>
<td></td>
<td>4.52± 0.09</td>
</tr>
<tr>
<td>Ethnic Group</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aboriginal</td>
<td>3.93± 0.16</td>
<td>**</td>
<td>4.65± 0.08</td>
</tr>
<tr>
<td>Non-Aboriginal</td>
<td>2.96± 0.18</td>
<td>0.000</td>
<td>4.26± 0.14</td>
</tr>
<tr>
<td>Educ’n</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High</td>
<td>3.88± 0.24</td>
<td>0.278</td>
<td>4.73± 0.10</td>
</tr>
<tr>
<td>Low</td>
<td>3.52± 0.16</td>
<td></td>
<td>4.51± 0.09</td>
</tr>
<tr>
<td><strong>Strategies</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-30</td>
<td>3.29± 0.34</td>
<td></td>
<td>4.26± 0.23</td>
</tr>
<tr>
<td>31-50</td>
<td>3.30± 0.16</td>
<td>0.999</td>
<td>4.45± 0.11</td>
</tr>
<tr>
<td>51-65</td>
<td>3.33± 0.24</td>
<td></td>
<td>4.47± 0.07</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>3.71± 0.27</td>
<td>0.089</td>
<td>4.63± 0.12</td>
</tr>
<tr>
<td>Female</td>
<td>3.16± 0.13</td>
<td></td>
<td>4.35± 0.08</td>
</tr>
</tbody>
</table>
According to the results no significant age or education difference appeared over the three periods. There were some gender differences with males having a greater understanding of the impact of lateral violence and a greater awareness and development of prevention strategies for lateral violence after three months. The most significant differences were between Aboriginal and non-Aboriginal participants over the three periods and across the categories (experiences, impact of lateral violence, and awareness and development of strategies). This means that Aboriginal participants had more direct experiences of lateral violence, greater understanding of its impact, and more awareness of and development of prevention strategies after three months compared to non-Aboriginal participants in the workshops.

**Pre and post questionnaire results**

Fifty-eight participants answered both the pre and post questionnaires. A non-parametric measure, the Friedman test for paired samples, was used to compare the means of pre and post evaluations (time 1 and 2). The negatively keyed items (items 2, 3, 4, 6 & 7) were reversed scored. The results are shown in Table 6.3.

<table>
<thead>
<tr>
<th></th>
<th>Aboriginal</th>
<th>Non-Aboriginal</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Ethnic Group</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aboriginal</td>
<td>3.53± 0.16</td>
<td>2.86± 0.13</td>
<td>0.090</td>
<td>0.123</td>
</tr>
<tr>
<td></td>
<td>4.46± 0.09</td>
<td>4.32± 0.08</td>
<td>0.123</td>
<td>3.7± 0.19</td>
</tr>
<tr>
<td></td>
<td>4.31± 0.16</td>
<td>3.7± 0.19</td>
<td>0.037</td>
<td><strong>P&lt; .01</strong>*</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Educ’n</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High</td>
<td>3.43± 0.31</td>
<td>3.27± 0.13</td>
<td>0.627</td>
<td>0.379</td>
</tr>
<tr>
<td></td>
<td>4.47± 0.19</td>
<td>4.43± 0.07</td>
<td>0.379</td>
<td>4.01± 0.15</td>
</tr>
<tr>
<td></td>
<td>4.39± 0.32</td>
<td>4.01± 0.15</td>
<td>0.198</td>
<td><strong>P&lt; .01</strong>*</td>
</tr>
</tbody>
</table>

Kruskal-Wallis test, 0.05 Confidence interval, **P< .01, *P<.05**
Table 6.3. Comparison of means for pre and post evaluation of PLV workshops (n=58)

<table>
<thead>
<tr>
<th>Questions</th>
<th>Pre evaluation</th>
<th>Post evaluation</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Terminology</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Lateral violence is a useful term in understanding violence in the Aboriginal community</td>
<td>3.63±0.12</td>
<td>4.23±0.12</td>
<td><strong>0.000</strong></td>
</tr>
<tr>
<td>2 Lateral violence does not adequately describe violence experienced by Aboriginal people</td>
<td>2.96±0.12</td>
<td>3.76±0.17</td>
<td><strong>0.000</strong></td>
</tr>
<tr>
<td>3 Lateral violence is a confusing term</td>
<td>2.98±0.11</td>
<td>3.23±0.17</td>
<td>*0.017</td>
</tr>
<tr>
<td>4 There are better ways of understanding Aboriginal violence than the concept of lateral violence</td>
<td>3.11±0.11</td>
<td>2.77±0.17</td>
<td>0.071</td>
</tr>
<tr>
<td><strong>Experience</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Lateral violence describes my experiences of violence as an Aboriginal person/ non-Aboriginal person</td>
<td>3.23±0.14</td>
<td>3.79±0.17</td>
<td><strong>0.000</strong></td>
</tr>
<tr>
<td>6 I have not seen lateral violence when it occurs in the workplace</td>
<td>3.45±0.15</td>
<td>4.15±0.14</td>
<td>0.174</td>
</tr>
<tr>
<td>7 I have not seen lateral violence when it occurs in the community</td>
<td>3.24±0.16</td>
<td>4.00±0.17</td>
<td><strong>0.005</strong></td>
</tr>
<tr>
<td>8 I realize that I have been a victim of lateral violence at least once (it happened to me)</td>
<td>3.67±0.18</td>
<td>4.29±0.14</td>
<td><strong>0.001</strong></td>
</tr>
<tr>
<td>9 I realize that I have been a perpetrator of lateral violence at least once (I have committed lateral violence)</td>
<td>2.87±0.16</td>
<td>3.71±0.18</td>
<td><strong>0.000</strong></td>
</tr>
<tr>
<td><strong>Impact</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 I understand the impact of lateral violence on individuals</td>
<td>3.64±0.14</td>
<td>4.49±0.09</td>
<td><strong>0.005</strong></td>
</tr>
<tr>
<td>11 I understand the impact of lateral violence in the workplace</td>
<td>3.67±0.14</td>
<td>4.54±0.08</td>
<td>*0.043</td>
</tr>
<tr>
<td>12 I understand the impact of lateral violence in the community</td>
<td>3.63±0.16</td>
<td>4.53±0.08</td>
<td>*0.015</td>
</tr>
<tr>
<td><strong>Strategies</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 I recognize the importance of preventing lateral violence from re-occurring in various contexts</td>
<td>4.00±0.16</td>
<td>4.61±0.10</td>
<td><strong>0.001</strong></td>
</tr>
<tr>
<td>14 I am aware of a range of strategies to address lateral violence</td>
<td>2.88±0.16</td>
<td>4.32±0.09</td>
<td><strong>0.009</strong></td>
</tr>
<tr>
<td>15 I currently have some skills and strategies to address lateral violence</td>
<td>3.06±0.17</td>
<td>4.31±0.09</td>
<td><strong>0.003</strong></td>
</tr>
</tbody>
</table>

Friedman test, 0.05 Confidence interval, **P<.01, *P<.05**
The results indicate that in general there were significant changes in awareness, knowledge and understanding of lateral violence for participants by the end of the workshop. This demonstrates that participants in general resonated with the terminology. However question 4 is an anomaly. This may be because the question is awkwardly worded and unclear as to whether it’s a positive or negative question. Question 6 was also an anomaly and surprising, given that the workplace is often a place where lateral violence occurs (see chapters 3 and 7). Responses to questions 7 to 9 suggest community insight and or experiences of lateral violence and these may have been as a victim and/or perpetrator of lateral violence. At the end of the workshop participants had a better appreciation of the impact and effect that lateral violence has on individuals, the workplace and the community. Lastly, participants recognised the importance of prevention of lateral violence, and were now aware of and developed strategies to address lateral violence after the workshops.

The results generally supported the hypothesis of an increase in awareness, knowledge and understanding of lateral violence at the end of the workshop, as there was a significant increase in agreement on most items at the completion of the workshop.

*Pre, post and three months post comparisons*

Twenty-three participants were matched on all three questionnaires for times 1, 2 and 3. A non-parametric test, the Friedman ANOVA was applied to compare the three time frames as per Table 6.4. The negatively keyed items were (2, 3, 4, 6 and 7).
The results when comparing the means of time 1 directly with time 3 indicates an overall increase. Such an increase is assumed to be as a direct result of participation in the lateral violence workshop. When comparing the means of the three time frames, the pattern of change indicate that awareness, knowledge and understanding have been maintained after three months. It appears that in the long term, participants resonate with the terminology, can relate to the experiences, and continue to understand the impact on the individuals, the workplace and the Aboriginal community. There is also recognition of prevention of lateral violence as well as the development of further skills to prevent lateral violence. This supports the general hypothesis that much of the information, awareness and skills development will either continue to increase over time and/or be maintained by participants.

The previous inconsistency identified in question 6 no longer appears relevant. Perhaps over time recognition of lateral violence in the workplace became evident. The major anomaly in the results of Table 6.4 relates to question 5. This warranted further investigation of the raw data which revealed a typing error in the replication of the three months post evaluation on Survey Monkey. The question only asked experiences of violence as an Aboriginal person. This appeared to exclude and skew the answers from non-Aboriginal participants who skipped the question or answered neutrally.
Table 6.4. Comparisons of means for pre, post and 3 month post evaluation of PLV workshops (n=23)

<table>
<thead>
<tr>
<th>Questions</th>
<th>Pre eval’n M (SEM)</th>
<th>Post eval’n M (SEM)</th>
<th>3 month post eval’n M (SEM)</th>
<th>P Value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Terminology</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1  Lateral violence is a useful term in understanding violence in the Aboriginal community</td>
<td>3.71±0.21</td>
<td>4.38±0.18</td>
<td>4.00±0.26</td>
<td>**0.003</td>
</tr>
<tr>
<td>2  Lateral violence does not adequately describe violence experienced by Aboriginal people</td>
<td>3.00+0.22</td>
<td>3.79+0.30</td>
<td>3.79+0.25</td>
<td>**0.008</td>
</tr>
<tr>
<td>3  Lateral violence is a confusing term</td>
<td>3.26+0.24</td>
<td>3.79+0.24</td>
<td>3.47+0.23</td>
<td>0.070</td>
</tr>
<tr>
<td>4  There are better ways of understanding Aboriginal violence than the concept of lateral violence</td>
<td>2.79±0.18</td>
<td>3.21±0.33</td>
<td>3.11±0.20</td>
<td>0.088</td>
</tr>
<tr>
<td><strong>Experience</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5  Lateral violence describes my experiences of violence as an Aboriginal /non-Aboriginal person</td>
<td>3.58±0.21</td>
<td>3.68±0.32</td>
<td>3.74±0.26</td>
<td>0.704</td>
</tr>
<tr>
<td>6  I have not seen lateral violence when it occurs in the workplace</td>
<td>3.50±0.24</td>
<td>4.45±0.17</td>
<td>4.00±0.18</td>
<td>**0.002</td>
</tr>
<tr>
<td>7  I have not seen lateral violence when it occurs in the community</td>
<td>3.19±0.27</td>
<td>4.05±0.29</td>
<td>3.71±0.22</td>
<td>**0.005</td>
</tr>
<tr>
<td>8  I realize that I have been a victim of lateral violence at least once</td>
<td>3.71±0.28</td>
<td>4.29±0.25</td>
<td>4.14±0.20</td>
<td>**0.007</td>
</tr>
<tr>
<td>9  I realize that I have been a perpetrator of lateral violence at least once</td>
<td>2.86±0.27</td>
<td>3.67±0.29</td>
<td>3.95±0.22</td>
<td>**0.003</td>
</tr>
<tr>
<td><strong>Impact</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 I understand the impact of lateral violence on individuals</td>
<td>3.76±0.23</td>
<td>4.62±0.11</td>
<td>4.38±0.11</td>
<td>**0.000</td>
</tr>
<tr>
<td>11 I understand the impact of lateral violence in the workplace</td>
<td>3.81±0.22</td>
<td>4.57±0.11</td>
<td>4.43±0.11</td>
<td>**0.000</td>
</tr>
<tr>
<td>12 I understand the impact of lateral violence in the community</td>
<td>3.81±0.25</td>
<td>4.62±0.11</td>
<td>3.38±0.11</td>
<td>**0.002</td>
</tr>
<tr>
<td><strong>Strategies</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 I recognize the importance of preventing lateral violence from re-occurring in various contexts</td>
<td>4.19±0.22</td>
<td>4.90±0.07</td>
<td>4.57±0.13</td>
<td>**0.002</td>
</tr>
<tr>
<td>14 I am aware/now aware of a range of strategies to address lateral violence</td>
<td>2.95±0.28</td>
<td>4.48±0.11</td>
<td>4.05±0.18</td>
<td>**0.000</td>
</tr>
<tr>
<td>15 I currently have/have developed (after the workshop) some skills and strategies to address lateral violence</td>
<td>3.33±0.28</td>
<td>4.57±0.11</td>
<td>3.86±0.20</td>
<td>**0.000</td>
</tr>
</tbody>
</table>

Friedman **P<.01, *P<.05
Post and three months post questionnaire results

There were twenty-three participants who answered both the post evaluation and the three month evaluation. In order to further explore and compare the changes between the times the Friedman test (non-parametric) was used to compare the post evaluation (time 2) with the three months post evaluation (time 3) survey results. As with Table 6.4 questions 2, 3, 4, 6 & 7 were reverse scored and question 5 has been omitted as the results were unreliable. The results of the analysis can be seen in Table 6.5.

The results suggest no significant differences in the means between post workshop and the three-month follow-up on all the questionnaire items relating to terminology and experience of lateral violence. Thus the gains in knowledge and understanding of lateral violence in these areas were maintained in the longer term (three months post workshop). However, there were significant decreases in the means for items pertaining to the impact of lateral violence, and in the awareness and development of preventative strategies. Despite this drop, the means were still well above those obtained at pre-workshop levels, demonstrating that overall, change in knowledge and awareness in these areas was maintained.
Table 6.5. Comparison of means for post and three months post evaluation of PLV workshops (n=23)

<table>
<thead>
<tr>
<th>Questions</th>
<th>Post evaluation M (SEM)*</th>
<th>3 months post evaluation M (SEM)*</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Terminology</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1  Lateral violence is a useful term in understanding violence in the Aboriginal community</td>
<td>4.42±0.16</td>
<td>4.04±0.24</td>
<td>0.058</td>
</tr>
<tr>
<td>2  Lateral violence does not adequately describe violence experienced by Aboriginal people</td>
<td>3.96±0.26</td>
<td>3.78±0.22</td>
<td>0.285</td>
</tr>
<tr>
<td>3  Lateral violence is a confusing term</td>
<td>3.36±0.24</td>
<td>3.29±0.23</td>
<td>0.166</td>
</tr>
<tr>
<td>4  There are better ways of understanding Aboriginal violence than the concept of lateral violence</td>
<td>3.28±0.27</td>
<td>3.24±0.19</td>
<td>0.782</td>
</tr>
<tr>
<td><strong>Experience</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5  Lateral violence describes my experiences of violence as an Aboriginal person/ non-Aboriginal person</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6  I have not seen lateral violence when it occurs in the workplace</td>
<td>4.29±0.20</td>
<td>3.92±0.20</td>
<td>0.059</td>
</tr>
<tr>
<td>7  I have not seen lateral violence when it occurs in the community</td>
<td>4.08±0.25</td>
<td>3.79±0.20</td>
<td>0.109</td>
</tr>
<tr>
<td>8  I realize that I have been a victim of lateral violence at least once (it happened to me)</td>
<td>4.38±0.22</td>
<td>4.25±0.19</td>
<td>0.096</td>
</tr>
<tr>
<td>9  I realize that I have been a perpetrator of lateral violence at least once (I have committed lateral violence)</td>
<td>3.83±0.27</td>
<td>4.08±0.21</td>
<td>0.796</td>
</tr>
<tr>
<td><strong>Impact</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 I understand the impact of lateral violence on individuals</td>
<td>4.63±0.10</td>
<td>4.33±0.10</td>
<td>**0.008</td>
</tr>
<tr>
<td>11 I understand the impact of lateral violence in the workplace</td>
<td>4.63±0.10</td>
<td>4.42±0.10</td>
<td>0.059</td>
</tr>
<tr>
<td>12 I understand the impact of lateral violence in the community</td>
<td>4.67±0.10</td>
<td>4.38±0.10</td>
<td>**0.008</td>
</tr>
<tr>
<td><strong>Strategies</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 I recognize the importance of preventing lateral violence from re-occurring in various contexts</td>
<td>4.92±0.06</td>
<td>4.58±0.12</td>
<td>**0.005</td>
</tr>
<tr>
<td>14 I am aware/now aware of a range of strategies to address lateral violence</td>
<td>4.46±0.11</td>
<td>4.04±0.16</td>
<td>**0.003</td>
</tr>
<tr>
<td>15 I currently have/have developed (after the workshop) some skills and strategies to address lateral violence</td>
<td>4.55±0.11</td>
<td>3.82±0.19</td>
<td>**0.000</td>
</tr>
</tbody>
</table>

Friedman 0.05 confidence interval, **P< .01, *P<.05
Qualitative information from the questionnaires (post and three months post)

Post questionnaires – responses and themes

There were 69 respondents who provided open-ended responses in the post-workshop questionnaires across the six workshops.

(1): How do you hope to make any changes in your life or your practice as a result of this training? For this question the response rate was 57%. Common themes and exemplars are provided below.

**Reflection and monitoring:** This theme highlighted self-awareness and understanding of one’s own thinking and behaviours in order to stop or minimise lateral violence and alleviate the effects of lateral violence on others. There also appeared to be a deeper understanding about why and how lateral violence becomes prominent. For example, “By watching my tongue and others and putting a stamp on it”, “acknowledge that some staff behaviour may be a result of their experience of lateral violence” and “be aware of impacts of lateral violence on others”.

**Naming and challenging lateral violence:** This theme highlighted the importance of naming lateral violence when it is witnessed, and then challenging to deter it. Examples include “name lateral violence when witnessed” and “call bad behaviour”.

**Further training and education:** Training and education was deemed important for the self and for others to understand the rationale and impetus of lateral violence behaviours. It was thought that this could help in improving and maintaining relationships in the community. For example,
“understand others better, have a perspective that allows me to take hurtful behaviours less personally, and hopefully respond in a more creative and non-laterally violent manner”.

(2). Any additional comments? For this question the response rate was 33%. Participants were very positive about the training workshop and the skills of the facilitators. They indicated that the workshops were well conducted, beneficial to the community and they were thankful for the training opportunity. Examples included, “excellent”, “I enjoyed the workshop overall”, “thank you”, and “it [the workshop] was really informative and beneficial”.

Three months post questionnaire responses and themes

Overall, 25 responses were received for the three months post evaluation questionnaires across the six workshops.

(1) What are the three main behaviours that you see as lateral violence? For this question 96% of participants responded. Responses portrayed lateral violence behaviours as covert, such as exclusion, undermining identity and community connections and credibility, putting each other down, bullying, gossiping and rumour mongering. This is consistent with the findings from chapter 4 in which participants predominately described lateral violence as covert.

(2). What changes (if any) have you made in your life or your practice as a result of the lateral violence training? For this question 76% of participants responded. Self-awareness, education and challenging were common responses to this question. This suggests that many of the intentions to stop and prevent lateral violence were actioned. Once participants engaged in self-awareness and monitoring of their own behaviours, it enabled them to stop perpetrating laterally violent behaviours such as gossiping and being negative to others and take action, for
example, “[I made] a conscious decision to not gossip or criticize colleagues and family members”. Educating others about lateral violence either formally or informally. For example, “I have informed others about lateral violence” and “[I] tried to name it as it occurs”.

(3). What additional training would you like to have or see developed in the future about lateral violence? For this question, 68% of participants responded. The main theme of a refresher workshop to brush up on skills, to further develop strategies and not fall back into old ways of perpetrating lateral violence was mentioned. For example, “I would like a half-day session following the first, to discuss strategies on how or ways to challenge laterally violent situations”. Other responses included that there be more frequent workshops and providing training to a broader audience. It was suggested that more training be provided to workplaces and that non-Aboriginal people be included, particularly those that work in the Aboriginal sector.

(4). Any additional comments? For this question, 44% of participants made varied comments such as “thank you”, “the facilitators helped create a pretty comfortable and safe environment which was so important when its covering a topic like lateral violence”, “really enjoyed the training”, and the “community role play exercise was very powerful”.

Overall participants’ comments were helpful and positive about the workshops’ delivery and content and it appeared to cater to the needs of the participants. Participants felt safe (emotionally) in the workshops to talk openly and honestly and this was reiterated in the quantitative questionnaire responses. For example, the post-survey questionnaire found that 99% (mean 4.8, SD 0.4) of participants agreed or strongly agreed that the “facilitators ensured the participants felt comfortable and safe”. Most importantly, participant intentions were
followed up with actions after three months. This suggests that participants are thinking and engaging in behaviours to prevent lateral violence in their personal lives, work and the community which is one of the main aims of the workshop.

**Discussion and conclusions**

**Overview**

This study has been important for a number of reasons. It provides information about the success of a resource within the Aboriginal community, particularly in Adelaide. The PLV workshops have assisted many Aboriginal people to understand the complexities associated with lateral violence and its effects over time. Most importantly, it has empowered people to take action to prevent lateral violence in their various contexts.

The workshops have been delivered in SA since 2007 to approximately 300 participants prior to the current evaluation and received positive and encouraging feedback to continue. They have been advertised primarily as an educational resource to raise awareness and preliminary development of skills for the prevention of lateral violence. Nevertheless, healing may be part of the outcome, as awareness and education is often the first step to renewal and healing.

The six PLV workshops utilised a pre, post and three months post quasi experimental design using both quantitative and qualitative questions to explore changes to awareness, knowledge and understanding of lateral violence. In the quantitative component, participants in general, resonated with: the terminology and the experiences of lateral violence; gained an understanding of the effects of lateral violence on the self, family and community; and developed skills to prevent lateral violence in various contexts, particularly in the short term.
Although the effectiveness of the workshops were statistically maintained in the long term, there appeared to be a tapering of participants’ understanding of the impact of workshops and in developing strategies for prevention of lateral violence over the time period. The qualitative information highlighted strategy changes such as self-reflection and monitoring of their own laterally violent behaviours and those of others; informally and formally educating others about lateral violence; and challenging and naming lateral violence when it occurs. The labelling and naming process has proven to be beneficial in accepting lateral violence as a legitimate concept, but also as a means to address it once it becomes tangible. These findings are consistent with previous findings (Clark & Augoustinos, 2015) where the importance of labelling lateral violence has been comprehensively discussed.

Given that it is rare for Aboriginal healing programs and workshops to be formally evaluated let alone published, this is a means to ensure Aboriginal people, the mainstream population and funding bodies will have resources that could potentially be supported for further development.

The aims of the research have been fulfilled in that the effectiveness of the workshops has been demonstrated. Furthermore the information provided here will add substantially to the literature on both lateral violence and on evaluation outcomes within Aboriginal communities. In addition, the utilisation of many Aboriginal resources and voices to guide and further develop the workshops is a notable strength. This means that Aboriginal people have the means to make changes and prevent lateral violence, but perhaps need further awareness and support to do so through educational programs such as the present one.

In terms of the workshops and the evaluation process, many aspects of an Indigenous methodology and the five R’s were incorporated. These are most notable in the respectful and
responsible conduct and delivery of the workshops and the evaluation process. As per a question identified in the post-workshop survey, participants felt culturally (emotionally) safe [N=70, min 3-max 5, X=4.81, SD .43]. The relevance and reciprocal nature of the evaluation has been described above. The reciprocal nature of communication was evident in that reports were provided to each Organisation with key results and further articles to be disseminated once published.

**Recommendations**

A number of recommendations were made for change to the program and other training needs. These were that the workshops should be offered to non-Aboriginal people working within the organisation and who work intensively with Aboriginal people. That further training is offered to support staff in their development of strategies and as a follow up, or refresher, to ensure that information is maintained and retained given that skills can dwindle over time. A package of workshops could be offered and could include extended or longer workshops which offer an additional healing component that enables participants to reflect and discuss some of their experiences in more depth or strategy development work. Other workshops could be aimed at facilitator training or train-the-trainer programs in order to increase the pool of facilitators. Such workshops can directly and indirectly cater for the needs of participants at various stages of development. This will help support community change over time.

At present, requests for these workshops occur via workplaces, so accessibility needs to extend to Aboriginal communities more broadly. Part of the reason for this is due to funding and it is hoped that funding requests will be made as an outcome of the research. Following this evaluation and once information has been fed back to community (participants and other interested people) there will hopefully be a hive of activity in making the much needed changes.
Lastly, it will be important to ensure that any future workshops have inbuilt evaluation to continue to monitor quality and make any necessary changes to the workshops in both the short and long term.

**Limitations of the study**

Whilst the required number of workshops was conducted, there were fewer participants than anticipated. The average number per workshop was 12, well below the 15-25 mark. Although non-parametric tests showed good results, they are not as robust as parametric tests. Despite smaller groups, it is worth considering continuity of smaller groups of about 15 participants to ensure intimacy and comfort which may have facilitated learning.

**Areas for further research**

The questionnaire used for pre, post and three months post was not standardised, nor could the items be grouped statistically via factor analysis. A questionnaire with standardised and validated questions could be further developed to capture aspects of lateral violence. This could be used as baseline measures over time and across organisations, and communities. Such surveys could potentially measure a decrease in frequency of lateral violence and the effectiveness of strategies. A good starting point could be to use some of the items within the current survey as well as explore other surveys, such as the LVNS (developed by Stanley et al., 2007), in order to develop a reliable and robust evaluation instrument to use within the Aboriginal community.
# Statement of Authorship

## Title of Paper
Evaluation of the preventing lateral violence workshop in Adelaide, South Australia. Phase 2 qualitative aspects.

## Publication Status
- Published
- Accepted for Publication
- Submitted for Publication
- Unpublished and Unsubmitted work written in manuscript style

## Principal Author

<table>
<thead>
<tr>
<th>Name of Principal Author (Candidate)</th>
<th>Contribution to the Paper</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yvonne Clark</td>
<td>Performed the literature review, called for and collected data (interviews with participants), interpreted data, wrote manuscript and acted as corresponding author.</td>
</tr>
</tbody>
</table>

- Overall percentage (%): 85%

## Certification
This paper reports on original research I conducted during the period of my Higher Degree by Research candidature and is not subject to any obligations or contractual agreements with a third party that would constrain its inclusion in this thesis. I am the primary author of this paper.

**Signature** [Date: 20/11/2016]

## Co-Author Contributions

By signing the Statement of Authorship, each author certifies that

i. the candidate’s stated contribution to the publication is accurate (as detailed above);
ii. permission is granted for the candidate to include the publication in the thesis; and
iii. the sum of all co-author contributions is equal to 100% less the candidate’s stated contribution.

<table>
<thead>
<tr>
<th>Name of Co-Author</th>
<th>Contribution to the Paper</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professor Martha Avgoustinos</td>
<td>Supervised the development of the work, gave advice on data interpretation and manuscript preparation and submission</td>
</tr>
</tbody>
</table>

**Signature** [Date: 20/11/2016]

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<tr>
<th>Name of Co-Author</th>
<th>Contribution to the Paper</th>
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<tbody>
<tr>
<td>Mericy Malin</td>
<td>Helped to evaluate and edit the manuscript</td>
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</table>

**Signature** [Date: 21/10/16]

Please cut and paste additional co-author panels here as required.
Chapter 7: Evaluation of the preventing lateral violence workshop in Adelaide, SA: Phase 2 qualitative aspects

Abstract

Lateral violence describes how members of oppressed groups direct their dissatisfaction toward each other. This inward deflection has been associated with Indigenous communities around the world and has shown to be destructive. The focus of this research concerns Aboriginal people in Adelaide, South Australia, as part of an evaluation of the preventing lateral violence workshops. The overall evaluation comprised both quantitative and qualitative components. This chapter reports on qualitative data, specifically, open-ended interviews with seven Aboriginal participants, post workshop. These interviews, examined their ways of dealing with lateral violence and strategies to prevent lateral violence in various contexts as well as suggestions for improving the workshops. Overall five major interpretive themes emerged from these interviews. Regarding improvement to workshops, interviewees recommended that the presentation encapsulate a broader audience; offer alternatives to a one-day workshop; and account for the potential vulnerability of participants. The other themes indicated that support is vital, and that people have the right not to change. The final theme draws on strategies to prevent lateral violence. The information complemented and provided a deeper understanding of phase one evaluation which was primarily quantitative. It is hoped that such evaluation provides robust evidence for workshops to improve and be maintained as a useful resource for the Aboriginal community to prevent lateral violence.
Introduction

Overview of the preventing lateral violence workshops and results from phase 1

The Preventing Lateral Violence (PLV) training is a one-day educational and awareness workshop generally targeted Aboriginal people for awareness and understanding of lateral violence in various settings (i.e. family, community and workplace). More specifically it is designed to uncover the historical aspects of lateral violence, the forms it takes, the effects on the community, and to work towards prevention strategies. Expected outcomes are to enhance the connections between participants and to equip them with strategies to deal with lateral violence. The workshops were delivered via multi formats such as: PowerPoint presentation; a DVD (BearPaw Media Productions, 2006); handouts of articles on lateral violence (e.g. Equay-Wuk, 2012; Gorringe et al., 2009; Wingard, 2010); interactive sessions; large and small group exercises and discussions; a group role play; scenario exercises; and a debriefing circle and reflections.

Phase one of the evaluation was primarily quantitative and utilised pre, post and three months post measures conducted during six PLV workshops. This evaluation aimed to capture the before, after and long-term effects of participants’ understandings, experiences, attitudes, and abilities to prevent lateral violence. Seventy two participants who attended the PLV workshops also volunteered to participate in the evaluation from March to June 2014. The PLV workshops were primarily conducted in Adelaide and hosted by government, non-government and Aboriginal community organisations. Overall, the evaluation found that workshops as an intervention were successful in changing participants’ knowledge, awareness and behaviours to prevent lateral violence, particularly in the short term. Although, participant changes were
largely maintained three to four months after workshops the effect of the workshop had slightly decreased.

This chapter summarises the second phase of this evaluation which consisted of follow-up interviews with workshop participants in order to examine in more detail the impact and effectiveness of the lateral violence workshop over time.

**Overview of concept of lateral violence**

Lateral violence is a concept which describes how oppressed and powerless people covertly and overtly direct their dissatisfaction internally, towards themselves and others within the same community (NCSA, 2008). Lateral violence is believed to exist within many oppressed communities and groups throughout the world. For example, the nursing industry describes lateral violence as the infighting behaviours of nurses who are believed to be an oppressed group within the medical and health care systems (Roberts et al., 2009). Recently the term has been applied to infighting behaviours within Indigenous communities in Canada (Bombay, 2014; Derrick, 2006; Native Women’s Association Canada (NWAC) 2015) and in Australia (AHRC, 2011b; Gorringe et al., 2009; Langton, 2008; Wingard, 2010). Within the Australian context, qualitative interviews with Aboriginal people in Adelaide, have indicated that lateral violence is primarily seen as covert, including behaviours such as gossip, shaming, jealousy, bullying and in some situations to undermine Aboriginal identity (Clark & Augoustinos, 2015). Such negative behaviours have been shown to be detrimental to Aboriginal health and wellbeing (Clark et al., 2016; Gorringe et al., 2009; NWAC, 2015).
Racism, oppression and trauma

Racism has been the primary form of oppression toward Aboriginal people in Australia since colonisation and continues today. The types of everyday racism occurring are, personal, institutional (or systemic), and internalised racism which can occur simultaneously (Jones, 2000). Many past colonial policies were influenced by Social Darwinism from 1859 which applied quasi-scientific theory to justify racist policies to segregate Aboriginal people from the broader population. These policies not only controlled Aboriginal people, but also divided them. Such colonial practices disrupted Aboriginal life and resulted in trauma that continues today as intergenerational trauma (Atkinson, 2002) and/or collective trauma (Krieg, 2009; Ratnavale, 2007). Such trauma has been described as prolonged and chronic, and along with racism, is occurring on a regular basis rendering Aboriginal people vulnerable to repeating cycles of trauma. In a study of 153 Indigenous participants on urban health experiences in Adelaide, the majority (64%) indicated they experienced informal and formal racism on a regular basis which affected their health (65%) (Gallaher et al., 2009).

As lateral violence is evident in oppressed groups, its effects may be prevalent in communities and within groups. There is evidence to suggest that the workplace is a significant site in which lateral violence occurs amongst oppressed groups. For example, in the health sector the plight amongst nurses in the workplace, particularly in the United States, has been discussed in the literature. In Australia, lateral violence has also been identified in the health system amongst Aboriginal health workers (Winsor, 2001). Further evidence of lateral violence in the workplace has found that within Aboriginal corporations and organisations more broadly, internal disputes constitute the third most prevalent class of Indigenous corporate failure (ORIC, 2010). This conflict and division within or between corporations, directors, officers and members, restricts the corporation from carrying out its objectives.
Resilience and support

Aboriginal people are socially resilient and celebrated as one of the oldest continuous living cultures. Yet Aboriginal people’s survival is rarely recognised in the literature as a significant source of resilience (Merritt, 2007). Furthermore studies on risk and protective factors such as connection to land, culture, spirituality, ancestry, family, and community (SHRG, 2004) has found that these protective factors act as a source of resilience, enabling Aboriginal people to survive in today’s environment (Kelly et al., 2009). Thus the way Aboriginal people cope with stress, racism and lateral violence is vital for survival and wellbeing. However there is limited research which looks specifically at coping and support for Aboriginal people in Australia and none that focuses on stressors associated with lateral violence.

The psychological literature on social support identifies both formal and informal relationships within an individual’s social network as important resources for health and wellbeing (Gottlieb & Bergen, 2010). Social support is classified as bonded and bridging support. Bonded relationships are those that occur between intimate associates who are often from homogenous backgrounds; bridging relationships are between less intimate associates and are usually from heterogeneous backgrounds. A well-developed social network (Gottlieb & Bergen, 2010) or social capital (Brough et al., 2006) needs to include both bonded and bridging relationships in order to ensure adequate support for health and wellbeing.

A qualitative study in metropolitan Perth, WA has reaffirmed the importance of bonded relationships within Indigenous communities (Waterworth et al., 2014). Such bonded relationships as a form of social support promotes connectedness, identity and a sense of belonging as well as providing many resources and protective factors for wellbeing and
positive health outcomes (Brough et al., 2006; Waterworth et al., 2014). Kinship connections are also seen as a way to share the physical and psychological burden of being part of a large group (Brough et al., 2006). Although bonded relationships are extremely important and maintained by family obligation they can be psychologically stressful. As a result, some Aboriginal people can withdraw from bonded connections to protect themselves and immediate family, as the influences of such extended family members can cause them physical or emotional harm (i.e. domestic violence). This withdrawal can contribute to fragmented kinship affiliations, isolation, a lack of social support, and reduced opportunities to develop new bonded relationships. There are also positive effects associated with engagement with non-Indigenous people (i.e. bridging relationships), although these are often deemed as less important within the Aboriginal community. These are however rarely incorporated outside of the Aboriginal community, unless via organisational support (Waterworth et al., 2014) and can be hindered by discrimination and perceptions of negative stereotypes (Brough et al., 2006).

**Bystander/silence**

Bystander behaviour appears to be related to support or more specifically, lack of support. Firstly, the bystander effect is understood as an individual’s intervention or lack thereof in emergency situations. An individual is less likely to respond to someone in crisis when large numbers of people are present, or if an individual responds they may have a delayed response. Yet, individuals may intervene if there is only one person as the audience or when it’s an especially dangerous situation (Fischer et al., 2011). The reasons for this effect have been explained by several factors including diffusion of responsibility, pluralistic ignorance and/or audience inhibition (Machackova et al., 2015). An Australian study of bystanders in response to racist behaviours toward Aboriginal people by Neto and Pedersen (2013) indicated intention to engage in bystander anti-racism was significantly associated with: age (i.e. older people are
more likely to have higher levels of bystander antiracism and are more likely to intervene); political preference (people with right wing views are likely to have lower levels of bystander anti-racist intentions and less likely to intervene); and gender (women are more likely to intervene). People with higher levels of national (Australian) identity, prejudice, and fear are less likely to intervene on behalf of outgroup members including Aboriginal people, while people with higher levels of collective guilt, empathetic concern and anger are more likely to intervene.

These bystander effects are also present in the cyber world: for example, there is less support or intervention against bullying in the presence of multiple witnesses (Machackova et al., 2015). Given that many young people access the cyber world (see Radoll, 2014) there are potential concerns about racism and antiracism. Neto and Pedersen (2013) highlight that young individuals may not feel well equipped to intervene or challenge in instances of racial prejudice. They suggest that educational interventions on how to effectively communicate with others about issues surrounding racism and other cultures generally may instil confidence in responding to bystander anti-racism. Bystanders are a good resource to avert racism that is often benign and disguised as racist jokes and just having a laugh (Thomas & Pederson, 2015).

**Types of coping**

Mellor (2004) looked at the different ways of coping by Australian Aboriginal people in dealing with racism and the stress it causes which may have relevance to the way Aboriginal people cope with lateral violence. In Mellor’s qualitative study of 34 Indigenous people from metropolitan Melbourne, a range of coping strategies (or taxonomies) were found and categorised into three broad areas: defensive coping, controlled and counter attacking. The defensive responses included ways of protecting oneself against racism by putting up with
racism and having a defeatist attitude or resignation; by avoiding it or reinterpreting a racist event so that it loses its power and effect; using social support to lighten the load of racism and make light of their experiences; and denial or not mentioning Aboriginality in certain situations for equal treatment. The controlled category of responses to racism involved maintaining self-control. That is, individuals actively make choices not to be affected or expend psychological energy by processing racism any further. The third category is counter attacking in order to change the source of racism through confrontation of some kind. For example, educating the perpetrator, presenting factual information, dispelling myths, calling authority figures, such as supervisors or the police or others who are perceived to have power and knowledge, to help sort it out.

Collectivist coping is often aligned with previous research by Hofstedt (1980) in which 53 countries were mapped on four dimensions with the most widely used in cross cultural research, being the individualism-collectivism dimension. Although Australia as a whole has been seen as a highly individualistic nation, many subcultures in Australia are believed to be collectivist with strong kinship relationships: Aboriginal cultures, for example, are viewed predominantly as collectivist cultures with strong kinships relationships (Milroy et al., 2014). Collective coping responses include: interpersonal based strategies such as family support where the family contributes strongly to identity and serves as a vital supportive and caring function for members; value-driven strategies such as fatalism, a tendency to believe that control may lie in contextual or external forces; forbearance where the desire to maintain harmony is prioritised over the desire to achieve or strive for personal gain; culturally conditioned emotional/ cognitive strategies such as acceptance and avoidance; as well as religion and spiritually grounded strategies (Fischer, et al., 2010); Other forms of collectivist coping include: intra-cultural coping which refers to the use of supportive networks comprised
of racially similar individuals, such as one’s family network or community based social groups (Waterworth et al., 2014, 2015); respect for authority figures, such as elders, and even Indigenous healers; and relational universality and inter-dependence where the individual relies on the community for support and a sense of belonging, reciprocal sharing and a sense of identity (Yeh, et al., 2006). Thus collective coping is conceptually broader than social support (Kuo, 2013).

**Cultural competence and safety**

As a response to cultural diversity in many countries, models of cultural competency have been developed in order to foster change at both individual and institutional levels. Wells’ (2000) cultural development model (CDM) consists of six stages along a continuum: *cultural incompetence; knowledge; awareness* (the first three are cognitive phases of learning and cultural knowledge acquisition); and *cultural sensitivity; competence and proficiency* (the last three are an affective phase based on self-reflection, understanding and experience). This model has been utilised within the Australian Indigenous Psychologists Association (AIPA) cultural competency training.

Cultural safety is a broader concept or framework in which cultural competency may lie. It extends beyond awareness and sensitivity as it empowers individuals and enables them to contribute to positive outcomes (Bin-Sallik, 2003). Many organisations have embedded cultural safety (or alternatively cultural respect) frameworks into their systems. One example is the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) which has embedded a cultural framework by including cultural competency training and principles for government and non-Aboriginal human service organisations, as an outside influence for cultural safety for VACCHO (Frankland et al., 2010). Internal to VACCHO is a framework
about taking responsibility for accessing Aboriginal rights to cultural safety which will lead to
increasing the resilience of Aboriginal children, families and young people. What this means is
that everyone has the right to feel good about themselves, their identities and their access to
culture as Aboriginal people. Finally one of the key foundational issues for VACCHO with
cultural safety, from the perspective of the local Aboriginal community, is tackling lateral
violence (Frankland et al., 2010).

**The current evaluation study**

There is a paucity of resources on lateral violence for Indigenous communities. For example,
there is limited information and educational workshops with evaluations attached to assist
Aboriginal people to understand and prevent lateral violence within their communities. Thus
the PLV workshop is a rarity and this type of formal education is timely. Hence an evaluation
of its aims and outcomes is also timely, given there do not appear to be many published
evaluations of Indigenous programs within Australia. Phase two of this evaluation study has
five broad aims (some of which are in combination with phase 1). These include: to evaluate
the effectiveness of the South Australian PLV workshops as a significant intervention program
by listening to participants’ views; describe the experiences of Aboriginal participants’
successful strategies in curbing lateral violence and building positive relationships; gain a
richer understanding of participants’ experience of the PLV workshop; listen to
recommendations for change to the workshops; and expand the knowledge in the literature on
lateral violence in the Australian context. It has already been determined in phase 1 that the
workshops were successful in increasing knowledge, understanding and awareness of lateral
violence. Phase 2 aims to explore what strategies participants put in place to curb lateral
violence and whether they have been helpful or successful in preventing lateral violence.
Research approach

Indigenous methodology

An Indigenist methodology frames this evaluation of the PLV workshops. Martin (2003) indicates that an Indigenous framework for the research is central, otherwise research conducted by Indigenous people will simply be reproducing dominant western forms of knowledge. An Indigenous framework has a number of recommended components including: cultural safety and respect (Rigney, 1999a); an acknowledgement and an embracing of Indigenous people’s ontology, axiology and diversity (Smith, 1999, 2012); positioning and understanding of relationality of information, participation of Indigenous researchers and using an insider approach (Wilson, 2008). Some western approaches/methods which are considered more open, flexible and contextual can complement Aboriginal perspectives and purposes (Weber-Pillwax, 2001). In this study a thematic and qualitative methodological approach was undertaken to seek to understand and convey Indigenous participants’ worldviews, meaning, and diversity as well as ensuring the voices of Aboriginal people are prominent in the conduct of the research.

Participants

Seven Aboriginal participants volunteered to be interviewed approximately three months after the workshops were conducted. Of the participants, 4 were female and 3 were male with an age range from 29-56 years.
Procedure and analysis

Prior to the commencement of this study, ethical approval was obtained from both the South Australian Aboriginal Health Research Ethics Committee (AHREC) in December 2012 and from the University of Adelaide Human Research Ethics Committee in May 2013. The voluntary participants had previously attended one of the six PLV workshops conducted from March to June 2014. An Aboriginal research assistant (RA) provided information, recruited and attended to enquiries about participating in the follow-up interviews at the end of each workshop (in person) and approximately three months after the workshops (via email). Participants were also informed of their rights and responsibilities about confidentiality and incentives (see Appendix 5).

During the interview the volunteers were asked broad questions by the primary researcher, such as “What did you get out of the training?” “Did it enable you to put strategies in place (big or small) for your workplace, family, personal life, community?”, and “If you were able to put strategies in place, were they successful or unsuccessful?” Participants were also encouraged to freely mention whatever they wanted about lateral violence in general and about the PLV workshops. Interviews ranged from 40 minutes to an hour, and were tape-recorded and transcribed verbatim. Interview transcripts were offered and sent to most interviewees to endorse and check for accuracy, before analysis. The transcripts were thematically analysed which involved a rich description of the recurring and unique patterns in the data set across all interviews. The underlying manner to elicit the themes was via a six-phase process which included familiarisation of the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and producing a report (Braun & Clarke, 2006; 2013). To assist with coding of the themes the NVivo10 software package for qualitative data was
utilized. This was achieved by searching for similar words or phrases across transcripts and categorising into nodes to create initial themes for reviewing.

**Results and discussion**

**Themes from interviews**

*Overview of themes*
Six themes were drawn from participant interviews about their experiences of lateral violence, their strategy building, and recommendations for improvements to the workshop. Many of these themes were consistent with information received in the qualitative responses in questionnaires from phase 1 of the evaluation. The themes are as follows:

*The preventing lateral violence workshops need to encapsulate a broad audience and be longer in duration*
Participants highlighted that the PLV workshops should be delivered to everyone, including non-Aboriginal people, and to a range of organisations such as schools, universities and government departments. Participants also recommended that the workshops should be longer than the current one-day duration. These points are reflected in the following extracts.

*Ralph (age category 35-40):*  
Yeah I believe it should be done in schools, workplaces, universities, everywhere, yeah so, everyone, every workplace in the whole of Australia should understand it....
Sophia (age category 25-30): ... I think that your course should be for non-Indigenous people as well as Indigenous

Beverley (age category 55-60): I think it’s another [day], the introduction training is one making you aware of it, recognising the subtleties of it. Even if it’s the next day or half a day...

Both Ralph and Sophia suggested a broad target audience for the lateral violence workshops to provide education and awareness. This aligns with the results from chapter 3 on strategies that indicated that lateral violence education needs to be more inclusive. The workshops were targeted primarily for Aboriginal participants. Some non-Aboriginal people were also invited to attend and this was at the discretion of the host organisation. According to the pre, post and three months post questionnaires, non-Aboriginal participants also benefited from the workshops (see phase 1, chapter 6).

Beverley indicated that the workshops need to be longer or incorporate some extra follow-up training to recognise some of the subtleties of lateral violence, and this was also consistent with the quantitative and qualitative findings in phase 1. For example, the quantitative findings indicated less understanding of the impact of lateral violence and strategy building in the long term. Such a result would justify follow-up training to maintain skills. The qualitative responses identified in phase 1 suggest that various workshops and components need to be developed and delivered as follow-up to the first workshop, interchangeable and adapted to various groups. For example, an educational component for the broader population could discuss broad theories of oppression and provide examples of various oppressed groups, including nurses, to understand the diversity and complexity of lateral violence. Furthermore
specific sections that relate and are particularly sensitive to Aboriginal people could be incorporated into a second day of training exclusively for Aboriginal people. Such interchangeable components could also be in collaboration with other training such as cultural competency training for non-Aboriginal people.

**Vulnerability of the lateral violence topic**
Participants indicated that lateral violence was a particularly sensitive topic that may make some people feel very vulnerable. In turn, this vulnerability might influence attendance at the PLV workshops. The extract below provides an example of this theme.

*Anita: (age category 41-45) Yeah. You know coming into that workshop I got a bit emotional about it because of my previous experiences, mostly in the workplace, so I was just, I suppose a bit nervous about going into this. It did initially bring up some emotions for me and I thought am I gonna be alright, am I gonna embarrass myself by losing it, you know, with other people around and I didn’t want to do it. I didn’t want to particularly share my story either.*

*Anita: ...I initially I felt terrified and I wanted to run a mile but after we started and you reassured me that no, this is all confidential, and I felt safe and relieved that I was there. I got a lot out of the workshop.*

This extract is an example of vulnerability and demonstrates the effects of lateral violence on one individual. Anita indicated that her previous exposure to lateral violence is emotional. She appears vulnerable to further exposure and has developed coping mechanisms to deal with lateral violence and trauma. Yet once she understood the confidentiality of the workshop and
that she didn’t have to share her story, she felt safe and engaged wholeheartedly. Vulnerability is a real issue and is an ongoing process for many Aboriginal people from the effects of collective and intergenerational trauma (Krieg, 2009; Ratnavale, 2007) and the daily stressors and psychological distress which is reportedly high in Aboriginal communities (Kelly et al., 2009). As a necessity, safety measures and confidentiality issues are discussed at length at the beginning of the workshops to generate emotional safety. A question on the post evaluation questionnaire about emotional safety indicated that most participants felt safe (emotionally) in the workshops [N=70, min 3-max 5, X=4.81, SD .43].

Support is vital

This theme highlights the lack of general support in the workplace from managers when one is experiencing lateral violence. The extracts below are from two Aboriginal people: a victim of ongoing lateral violence in the workplace and a manager who tries to manage lateral violence.

_Beverley (age category 55-60): _... Whether it’s an Aboriginal thing or not they [non-Aboriginal managers] still have a responsibility and that was something that wasn’t happening They weren’t managing their senior Aboriginal staff in that behaviour where if it was a non-Aboriginal person doing that sort of stuff or a similar thing, they would have pulled them up...They don’t want to be seen as racist, they don’t want to be seen as overstepping the mark and moving into territory that they don’t know about. I am just saying you gotta see this for what it is, it’s bullying and the behaviour is disrespectful behaviour that is being allowed to happen because they are vocal people in those positions._
Beverley (age category 55-60): ... [Tackling lateral violence] needs a group of people... to stand together and say that’s inappropriate. Behind the scenes we would talk about it. Say “Oh that shouldn’t have happened, how dare that person say that”. Collectively we would know that it was wrong, we would know that it was lateral violence but we weren’t in a position to be confident to stand up and know that somebody else would stand up with us and say yes that’s enough...In times where I had raised something, not another person raised anything. Nobody came up to me or stood up to say “I support Beverley in this”, that was inappropriate...They just want to stay neutral. We gotta have something in place that supports them to be able to do it.... hearing how some others had similar things happening in there [on the PLV training session], you know it’s not until you realise how many other people have been caught up in the same situation [dealing with lateral violence] and not really knowing what to do. That’s why I think we need to expand the knowledge of the experiences that people have.

Jeremy (age category 35-50): ...It’s [lateral violence] about putting each other down, the work that people do, not saying anything good about another person, you know they doing their best in their own ability to work, live, so like there that old term that Aboriginal people are like crabs in a bucket where we pull each other down. Where I work, I like to build these guys up, not to a point where they know everything but in an encouraging work environment. I don’t want them going to other Departments and saying we cop shit so listen to us.

Beverley revealed a reluctance to seek help from non-Aboriginal managers. This reluctance may stem from the “hands off” approach undertaken by non-Indigenous managers and leaders
and that “they don’t want to be seen as racist”. Moreover, it is common for non-Aboriginal people to be in these leadership positions, and there are no guarantees that these managers are culturally competent to work with and manage Aboriginal people and understand specific issues. Thus if lateral violence is not understood or recognised, normalised, ignored or not managed well, there are potential implications for the wellbeing of Aboriginal staff. Accountability of senior staff, policy, appropriate support and management are essential in combating lateral violence within workplaces to ensure a positive organisational culture.

Many of the workshop participants (in the current qualitative interviews and from phase 1) recommended that non-Aboriginal people attend workshops about lateral violence in order to better understand and support Aboriginal staff. Currently this is underway. For example, in one of the workshops, the senior Aboriginal leadership group (of that particular government department) ensured that half the participants were senior non-Aboriginal leaders.

A lack of collegial support also appeared to be an issue. For Beverley, lateral violence was a topic talked about behind the scenes amongst many Aboriginal colleagues, but the support for each other may not be forthcoming particularly in formal settings (meetings). The workshop did help Beverley to recognise that many others are also experiencing lateral violence but were silent. This provided her with a sense of relief and empowerment and assisted her to take some action to help prevent lateral violence prior to her resignation.

Silencing or bystander behaviour is a feature with oppressed people (Freire, 1970) and can elicit various fears of retribution and scrutiny (Gorringe et al., 2009). Thus silencing is not only about being quiet but it is also about inaction. The lack of formal collegial support may also be explained via a bystander effect that stipulates that when there are a number of colleagues
witnessing lateral violence there is less help or support. Such behaviours are believed to be due to diffused responsibility, ignorance or inhibition (shyness) (Machackova et al., 2015). In these situations it could also be that lateral violence has become so normalised (Clark & Augoustinos, 2015) it is less noticeable to confront, or that many people continue to be uncertain about what lateral violence is or that it even exists.

It appears that when lateral violence is occurring in the workplace non-responsiveness may warrant feelings of helplessness or burnout for Aboriginal staff and this could be concealed for a considerable amount of time, that is, until something shifts within the victim or the service which demands a reaction. This reaction could include any number of possibilities among vulnerable Aboriginal staff such as taking extended leave, resignation, or becoming ill. Although burnout was not explicitly discussed by participants, it may be relevant as burnout is related to high levels of stress (Roche, Duraisingam, Trifonoff & Tovell, 2013). Research has linked in-group gossip to burnout (Georganta, Panagopoulou & Montgomery, 2014) in which gossip is a feature of lateral violence and may have consequences for Aboriginal staff. A local example of Aboriginal staff burnout by Roche et al. (2013) found that many (approximately 1 in 10) Indigenous alcohol and other drug (AOD) workers experienced emotional exhaustion in South Australia which was comparable to the national figures. Burnout is generally characterised as chronic exhaustion, cynicism and a lack of personal accomplishment (Bakker & Costa, 2014). Thus individuals who experience burnout simultaneously experience high levels of chronic fatigue and distance themselves emotionally and cognitively from their work activities. This could be another reason for not supporting each other when lateral violence is occurring.
All of these workshops were conducted through organisational environments which presumably had various policies and practices, conventions, and legislation accessed internally or externally to guide worker conduct and protect staff within their organisation, such as bullying policies, codes of conduct, and legislation on discrimination and diversity. It is uncertain whether there are specific practices, conventions or strategies that deal with lateral violence within the participants’ workplaces. It is well understood that many workplaces also have access to counselling and support services often through their contracted Employer Assistance Program (EAP) which may be utilised by Aboriginal staff. However, it is difficult to determine the level of cultural competency of these counselling and support programs and whether they are familiar with lateral violence. Nevertheless, organisations can nurture a positive environment with increased levels of support and competency. According to Roche et al. (2013) such change requires both personal management and organisational system level attention and recourse.

The current one-day workshop discusses issues of support, particularly in relation to counselling support; but issues of managerial and collegial support are minimally discussed and limited to the scenario building exercises by the participants. Unless raised workshops do not cover topics such as bystander effect, silencing or burnout. The workshops do not encourage formal sharing of experiences because it is difficult to manage cultural safety. However, it appears that some participants can and do share their experiences informally. Thus an in-depth two-day workshop or follow-up session will allow time for participants to discuss and continue to conduct exercises that empower and steer them toward their own solutions.
It’s my right to say what I like

This theme aligns with a number of discourses that centre on freedom, freedom of speech and rights. The extracts below exemplify this theme.

_Beverley (age category 55-60): They themselves do not see that their behaviour is laterally violent, they do not see that they have been bullying, they don’t see that they have been disrespectful. It’s almost like a position that they have that to be able to progress Aboriginal business you gotta be aggressive, assertive, abusive before somebody will listen to you. There is a pocket of people that I have noticed in SA who have that sort of belief. For them over periods of time it has worked for them, even in the 70’s that activist behaviour, you had to stand up to fight for things for people to see where we are coming from. But there are people now who are still carrying that type of approach and I don’t think, in my mind, that’s the way to go…. But it’s a behaviour and I suppose if they keep getting reinforced with that and not challenged, they gonna keep on doing it… There seems to be no shame in it [perpetrating lateral violence], you know, [people think] they have a right to say those things to you._

_Ralph (age category 35-40):  But now everyone in the world or Australia has the right to do whatever they want, if they’re gay, if they drive whatever car they drive, or their beliefs, everyone has got their own right…_

Both Beverley and Ralph draw on the discourse that people believe they are free to assert their rights and to say and do whatever they like regardless of the consequences. For example,
Beverley links rights and Aboriginal radicalism to the struggle for freedom. This appears aligned with the fact that Aboriginal people were ignored, and not listened to for the greater part of Australia’s colonial history. And therefore they had to become radical and/or loud to be heard to gain justice and rights. Such radical behaviour appears prominent in the past around movements such as the Aboriginal tent embassy that was constructed on Australia Day 1972 (Reconciliation Australia, 2015b). Beverley asserts that current radical behaviour is a mixture of assertive, aggressive and abusive behaviours toward others. She equates such behaviours to lateral violence which has been allowed to flourish in a climate of people’s rights (to say what they like, to whomever they like, and whenever they like). This is despite policies, legal processes and laws (e.g. anti-discrimination laws and defamation) that may restrict people’s freedom of speech to protect other people.

Shame is also mentioned by Beverley and shame is an important concept within Aboriginal culture but can get construed in many ways. Shultz (2013) suggests that shaming is the guilt associated with the breaking of obligations. That is, when Aboriginal people can’t fulfil their cultural obligations (i.e. looking after family), guilt and conflict override and they continue on a cycle of shame. Lawrie (2010) links shame to oppression and “invasion”. She indicates that Aboriginal people have been forced to live with shame throughout colonial history and this shame is reflected in current situations such as confusion and loss of identity, jealousy, not fulfilling family obligations and traditional role discrepancies. She also indicates that shame is the “ugly cousin” to lateral violence and they “feed off each other”. In the lateral violence literature shaming others the effects of shame are seen as a manifestation of lateral violence (Derrick 2006).
Strategies to prevent lateral violence: “I have made some changes”

All of the participants indicated that they had engaged in change and implemented strategies to deal with or prevent lateral violence as a result of attending the PLV workshops. Some of these changes have been personal, reflective, educational and/or as a process of validation. The four extracts below highlight participant strategies.

Melissa (age category 51-55) I got a lot out of the workshop and have been more aware. Yeah I had discussions with others about it and try and challenge others in a relaxed way…I want to start talking more to my young nieces and nephews about it. I have started collecting information on lateral violence and might try and develop a project for them…because the DVD and reading stuff is too sophisticated for kids.

Ralph (age category 35-40): ...Since doing that course I have made, like, when I talk I just watch what I say because then, yeah, because you don’t realise you can do it 100, a dozen times a day, just the way you talk or body language… If its [lateral violence] around me and someone’s harassing someone I will say something to em. I would say “can you leave em alone” you know. Yeah it’s usually like the strong or the toughest person or it’s someone in control picking on a weakling or quiet or timid and I’ve always wanted to bat…if someone is timid.

Jeremy (age category 45-50): Well that role play [exercise] stuck with me for a long time. I come back to work …I looked at myself [and] I internalised it. I said ok, you do encourage a lot of people, I do that, I looked into the workplace and I realised I need to do it more…I need to do it more for me to my workers and you know there’s a lot of leave [taken by workers] and all that sort of stuff. Really making sure I was
compassionate, making sure I wasn’t caught in the system, where the system makes people accountable for too much leave, for too much, you know…think about some of the stuff they’re going through as Aboriginal people …Yeah, it’s so easy for a black fella to be caught up, if you come into a management position, to get put up in the system and forget these are my brothers and sisters here. They’ve still got these issues and I sort of got to get away. I found myself even distancing myself toward the workers when I have to discipline [in the past].

Sophia (age category 25-30): It made me realise bullying is a big thing and made me stop doing it at work… Most of the time I did it as a joke but I guess I hurt some people’s feelings and I knew how to stop…

Interviewer: Has anyone noticed?

Sophia: Yep, everyone thinks I am quieter now and not fun no more ‘cos I don’t tease or bully.

Interviewer: So the teasing part was that harmless or…

Sophia: A little bit, sometimes I was racist to people.

These narratives demonstrate the various changes participants made in response to the lateral violence workshops. Melissa started collecting material on lateral violence and started discussing it with others, especially the young ones. Ralph realised the need to be more cautious when talking to others as lateral violence can become normalised. Jeremy, from his self-reflection, was able to re-engage with his values, passion and empathise with other Aboriginal staff to support them adequately and remain grounded.
Sophia also embodied self-reflection, personal change and accountability. She understood that she was displaying some bullying and “racist” behaviour to colleagues and disguised it by “joking” and humour. After the workshop she said she decided to stop this behaviour at work. As a result, Sophia may no longer be seen as funny by her peers. Whilst Sophia chose to cease her humorous behaviour because she felt it had racist overtones, humour can play a positive role for many in the community and the workplace. The importance of humour for Aboriginal people is recognised in many ways for survival and as a stress release (Schultz et al., 2014) among both adults and children (Dobia & O’Rourke, 2011). Thus humour in the right context can be effective.

These extracts exemplify a broad scope of benefits from the workshops, and how these may have been actioned through initiatives and strategies such as support, self-reflection, education, anti-bullying, humour, the sharing of ideas, positive talk and empowerment to tackle and prevent lateral violence. Within an oppressed group that engages in lateral violence, people can unknowingly be either or both victim and perpetrator. It seemed that before the workshop many people sided with victimhood with less insight into their role as perpetrators of lateral violence (as evidenced from pre- and post-evaluations). After the workshop, participants appeared more comfortable in admitting they had perpetrated lateral violence and were willing to reflect on this and make the necessary changes. Furthermore in most of the extracts above, participants alluded to self-reflection which appears central for change. This is consistent with information from phase one (qualitative themes in post and three months post questionnaire) where participants became self-aware of their behaviours and those of others. Although participants have made various changes in their lives, as a result of a one-day workshop, longer workshops or follow-up sessions can assist in strengthening action and continue to empower participants to address lateral violence.
Discussion and conclusions

Overview

The aim of this study was to increase the literature on lateral violence, evaluate the effectiveness of the PLV workshop, listen to participants’ recommendations for improving the workshops and in particular, understand participant’s implementation strategies for preventing lateral violence. This qualitative aspect (phase 2) of the research has been able to identify some of the issues faced by participants when dealing with lateral violence on a daily basis. The interviews have shed light on many personal and procedural strategies to prevent lateral violence in their everyday lives and how to influence others. Those interviewed had experienced lateral violence as either recipients or perpetrators, or both in various contexts, and were therefore qualified to tell their stories and provide valuable advice and direction for improvement of the workshops.

In summary, the themes highlight the need for a broader audience for lateral violence training in particular non-Aboriginal work colleagues and supervisors, and that options should be made available for further training beyond a one-day workshop program. Given that Aboriginal people are considered vulnerable from intergenerational layers of trauma and racism, general and workplace support is vital. Participants in this study noted the lack of adequate support for Aboriginal people’s experiences of lateral violence from supervisors and colleagues in the workplace. Silencing or a bystander effect may account for the lack of Aboriginal collegial support when most needed. Finally, the notion of rights and freedom of speech appears to warrant some people behaving in a laterally violent manner.
Much of the information provided by participants was instrumental in suggesting directions and recommendations for the progression and improvement of PLV workshops. These include:

- Workshops need to be open to non-Aboriginal people;
- Accessible and affordable for the Aboriginal community;
- Offered for longer than one day; negotiated with the employer or community;
- And further support be provided for lateral violence after the workshops.

In accordance with participants’ central concerns about the sensitivity and vulnerability of the topic, support needs to be taken more seriously and cultural safety needs to be implemented to protect Aboriginal workers from lateral violence and discrimination. It is difficult to assess beforehand the level of vulnerability of those who attend the workshops and how they will respond to, or be affected by, the material presented and ensuing discussions. Hence more care and communication will need to take place to alleviate the potential stress and apprehension of participants. At present, careful consideration is given to participants’ emotional safety during discussions and debriefing in the workshops. They are informed about trauma triggers throughout the day as well as information provided about counselling services and EAP. Sometimes a counsellor is present (if negotiated with the employer) and the facilitator is always prepared to debrief participants outside of the room.

It is also challenging to know how many Aboriginal people are deterred from attending due to their vulnerability or fear. As many workshops are conducted in a work setting, the contact person (usually a senior staff member) is usually responsible for disseminating the information and recruiting participants. Despite this initiative, new considerations are to increase the dialogue between the facilitators and the contact person for enquiries and to enhance reassurance to participants. To assist with this initiative a depository (website) where participants can download information prior to the workshops could be made available. This may help to alleviate fears and to answer any initial questions.
Limitations of the study

Although one of the strengths of the evaluation of the PLV workshop is that it utilised a mixed methods approach, despite rigorous efforts to recruit participants; the limited number of participants for both the quantitative evaluation and qualitative interviews is a clear limitation of the current study. As the number of evaluations increases, the results will become more robust over time. Although seven participants were adequate for the qualitative interviews, more volunteers might have produced richer data. Furthermore selection bias may have been at play, as those who volunteered appeared in support of the workshops and viewed it positively, whereas those who didn’t benefit may have been deterred from volunteering. It would have been equally important to evaluate the information of those who potentially didn’t benefit from the workshops.

Areas for further research

It is increasingly recognised that there is a significant lack of research in Australia for evaluating education and wellbeing interventions targeted toward Aboriginal people (Healing Foundation, 2012). Hence, it is important that programs and interventions are subject to evaluation for their effectiveness in order to build evidence based practices. This two-phase evaluation has been timely to ensure robustness of the outcomes from an insider approach. However, for further rigour, longevity and workshop improvements, it will be important to continue to evaluate these workshops to ensure a large pool of information over time. Such continued evaluation and feedback is important for any new programs developed, including the current PLV one-day workshop.
Chapter 8: Overall conclusions

Overview of research

For this concluding chapter I will provide an overview of the research and reiterate how the overall aims of the thesis have been met. I will also discuss the core findings and implications of the research across the five analytic chapters as well as limitations and areas for further research.

The behaviours associated with lateral violence can be found in populations worldwide. However, within oppressed minority groups lateral violence can become intractable and normalised which can be destructive and hamper solutions for change. Lateral violence has been identified as being an issue within Indigenous communities, work organisations and institutions in Australia. Therefore it was important to focus on a topic that can be unmasked, and where there is potential for solutions for change and increased empowerment of Indigenous people.

The present research consisted of two major studies utilising an Indigenous methodology as a guiding framework. A mixed methods approach was applied to the data utilising both qualitative and quantitative approaches. Overall there were 102 voluntary participants involved across the two studies.

Study 1 was an exploratory study in order to better understand and report on lateral violence from Aboriginal people in Adelaide. This study primarily utilised qualitative methods to capture themes within the interviews with 30 Aboriginal participants. Overall 16 themes were drawn upon and can be grouped into three broad recurring themes that included: the labelling
of lateral violence (see chapter 3); detrimental effects of lateral violence on one’s wellbeing and identity (see chapter 4); and coping strategies and prevention of lateral violence (see chapter 5).

A quantitative component comprised the administration of two wellbeing scales, the Kessler-5 (K-5) and the negative life events scale (NLES) in which 21 of the 30 participants responded. The results from the wellbeing scales indicated that participants’ distress was at a moderate level (K-5), with just under a third (29%) of the participants scoring in the high to very high distress level. Furthermore the main overall stressors (NLES) identified by participants included racism and discrimination, drugs and alcohol, serious illness and violence. Those who scored high on psychological distress corresponded with a high number of stressors. These results are generally consistent with a national sample undertaken as part of the National Aboriginal and Torres Strait Islander Health (NATSIH) survey (AIHW, 2015) (see chapters 3 to 5). These are discussed along with other qualitative themes in Table 8.1.

The second study was an evaluation of six lateral violence workshops conducted in five organisations predominately in Adelaide (one workshop was held in a semi-rural area in SA). The evaluation of workshops was a testament to the organisations that participated in the program to ensure many of their staff were aware of lateral violence. In phase one, 72 participants completed a quantitative time-series survey (pre, post and three months post) (see chapter 6). The results of the survey demonstrated a significant increase in the short term and maintenance in the long term of participants’ knowledge, understanding and prevention of lateral violence. Phase 2 of this study, consisted of qualitative interviews with seven Aboriginal participants who attended one of the six workshops. The results of a thematic analysis provided in-depth information towards improvement of the workshops in that they need to be longer and
regular (i.e. follow up) in duration as well as be presented to a broader audience including Aboriginal, non-Aboriginal, young and old participants. The themes also elicited information on prevention strategies for lateral violence that applied in participants’ lives post workshops such as education and self-reflection (see chapter 7). These are discussed along with other qualitative themes in Table 8.1.

The overall number of themes from interviews in both studies was 21. Some of the themes were replicated across both studies. The themes provided much insight into lateral violence in Adelaide and may have broader implications for understanding other Aboriginal communities in Australia, and potentially have “transferability” (see Braun & Clarke, 2013, p. 281). The themes can be grouped into four broad categories that relate to the following: the perception and labelling of lateral violence; the characteristics and detrimental effects of lateral violence; coping, strategizing and actioning to prevent lateral violence; and recommendations for workshop improvements (see Table 8.1).

Overall, the findings from both quantitative and qualitative aspects of the research in studies 1 and 2 revealed that the term lateral violence was considered useful in understanding and describing general violence, or infighting by Aboriginal people within various contexts. The concept of lateral violence as described and discussed in the literature appeared to resonate with the majority of participants. By providing a concrete label to what previously had been largely unnamed, but normalised, the issue of lateral violence could be made tangible and visible and thus open to challenge and prevention.
Table 8.1. Overall qualitative themes from studies 1 and 2

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<thead>
<tr>
<th>Theme</th>
<th>Study</th>
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<td>Perception and understandings of lateral violence</td>
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<td>1. Understanding the concept of lateral violence before a label</td>
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<td>2. The label of lateral violence fits our experiences</td>
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<td>3. Bringing it out in to the open to start dealing with it</td>
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<td>4. We had our own labels before lateral violence</td>
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<td>Characteristics and detrimental effects of lateral violence</td>
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<td>5. No it doesn’t fit, we need a proper label other than lateral</td>
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<td>violence</td>
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<td>6. The covert and insidious nature of lateral violence</td>
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<td>7. The relationship between racism and lateral violence</td>
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<td>4</td>
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<tr>
<td>8. Challenges to identity as acts of lateral violence</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>9. The destructive effects of lateral violence on wellbeing</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Coping, strategizing and actioning to prevent lateral violence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Education is central</td>
<td>1&amp;2</td>
<td>5, 6&amp;7</td>
</tr>
<tr>
<td>11. Self- awareness is necessary</td>
<td>2</td>
<td>6&amp;7</td>
</tr>
<tr>
<td>12. Support is vital and provides unity</td>
<td>1&amp;2</td>
<td>5&amp;7</td>
</tr>
<tr>
<td>13. Champions and role models are essential</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>14. Culture and identity are empowering</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>15. Avoidance of Aboriginal spaces can be protective</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>16. Lateral violence can be challenged</td>
<td>1&amp;2</td>
<td>5&amp;6</td>
</tr>
<tr>
<td>17. Lateral violence can be positively reinterpreted</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Recommendations for workshop improvements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. The PLV workshops need to encapsulate a broad audience</td>
<td>2</td>
<td>6&amp;7</td>
</tr>
<tr>
<td>19. Vulnerability of the lateral violence topic</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>20. It’s my right to say what I like</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>21. I have made changes post workshop to prevent lateral violence</td>
<td>2</td>
<td>6&amp;7</td>
</tr>
</tbody>
</table>

The detrimental effects of lateral violence on Aboriginal people’s wellbeing and identity were highlighted in both studies (1 and 2), particularly in relation to oppression, trauma, identity and
mental health. Much of the literature states that Aboriginal people have the capacity and capability to work on their own issues to achieve successful outcomes. This is often described alongside a need for empowerment, education and healing to address such issues. Thus studies 1 and 2 highlighted a number of strategies for coping with detrimental effects, prevention and combating lateral violence in various contexts. Participants reported that many of the preventative strategies discussed in the workshops were initiated after attending the PLV workshops.

**Findings and outcomes in relation to the research aims and hypotheses**

There were five aims and a number of hypotheses for the research which have all been achieved and are highlighted below.

*Aim 1*: to expand and review the literature on lateral violence, particularly in the SA context. As part of this it was important to ensure that Aboriginal voices were privileged as part of the process. As part of the Indigenous framework, Indigenous researchers and authors were prominent in the reviewed literature. They provided insight and an insider approach to knowledge. Expansion of the literature on lateral violence has progressed significantly with two chapters already published, one chapter submitted for publication and two in the pipeline in the near future. The expanded literature will not only be accessible for educational purposes but it can potentially assist with attracting resources and further research interest.

*Aim 2*: to examine how Aboriginal people themselves orient to the topic of lateral violence and understand the meaning of this concept and relationship to other concepts. The importance of listening to Indigenous people themselves was vital rather than focusing solely on expert
knowledge in this area. As already emphasised, the study attracted many highly educated Aboriginal females in the mature age category (41-55 years of age). These demographics mirror the researchers’ profile and it is an age of responsibility when many Aboriginal women are in the grandmother age taking on an overseeing role within the family and Aboriginal community. The similarity in profile of the researcher and participants may have provided a sense of comfort and safety among this cohort to be interviewed. Therefore it should be emphasised that this research does not make any claims to generalisability of the findings.

Initially it was uncertain whether lateral violence was an accepted term within the Aboriginal community given it may have been applied with little consultation. There was some opposition to the label of lateral violence that corresponded with the word violence which is a word that can attract scrutiny and victim blaming from the broader population. Despite this issue there was resounding agreement and verification of the acceptance of the label of lateral violence in both studies. This makes it consistent with other labels such as domestic, family and community violence which are readily used within the Aboriginal community. Lateral violence serves as an overarching label that is broader than other labels in that it can be perpetrated amongst any Aboriginal person whether they be in the family or local or national Aboriginal community. It is not only found in the community but also in other places such as the workplace and institutions. The study also revealed that whilst lateral violence can be perpetrated via physical behaviours, it is primarily described as being covert in nature. This is similar to modern or institutional forms of racism which are primarily covert and therefore easier to hide, deny or silence. If lateral violence remains an overarching term there is nothing to stop local labels being used, particularly those associated with prevention and healing initiatives. The examples of alternative terms, such as lateral love and lateral healing, have
provided positive ideals to move towards preventing lateral violence within Indigenous communities.

This framework also suggests there can be use of both insider and outsider approaches depending on the aims of the study. This study utilised primarily an insider approach undertaken by the primary researcher which advocated for the engagement, connection, exchange and deeper understanding of participants’ contexts. This approach may have also facilitated a process of comfort and safety, and a possible factor for participants’ motivations to be part of the study. As part of the Indigenous framework Aboriginal personnel were involved in the current research (first researcher, research assistant, workshop facilitators in study 2). Further the number of local Aboriginal participants who volunteered to be interviewed or attended a PLV workshop was both surprising and pleasing and says something about the willingness for voices to be heard, despite lateral violence appearing to be a sensitive and perhaps a hidden/difficult topic to disclose within Indigenous Islander communities. Like Martin (2003), I was amazed at the level of trust established with participants in both studies. I also attribute this trust to using a research framework informed by a relational ontology, epistemology and methodology. These have been identified as necessary conditions in the conduct of culturally sensitive and appropriate research with Aboriginal communities.

**Aim 3**: to explore a potential relationship between experiences of lateral violence with psychological distress and wellbeing. Firstly, the literature identifies how oppressive processes affect social and emotional wellbeing and mental health in the Aboriginal community. Oppression which utilises processes of power and privilege to dominate is found in various settings, groups and professions worldwide. The literature indicates that concepts that derive via oppression will manifest similar destructive within-group behaviours. A parallel is the
example of lateral violence within an oppressed nursing profession. Oppression, in the form of racism towards Aboriginal people in Australia, has been prominent from colonisation and continues today along with intergenerational or collective trauma. It was well recognised by participants that racism and lateral violence were entwined. For example, the theme of *racism being at the heart of lateral violence* suggested a systemic process of *divide and conquer*. This is about dividing Aboriginal people, mainly through the dispersion of limited resources, which fosters competition and conflict. Hence the oppressed become the oppressors.

It has already been established that racism affects Aboriginal people’s mental health as well as Aboriginal identity. In the past, identity was part of policies and procedures that categorised Aboriginal people’s blood quantum from being full-blood Aboriginal to octaroons (nearly white). Today, identity is still based on notions of blood quantum, acculturation and/or acting white and affected by the questioning of authenticity by Aboriginal and non-Aboriginal people. This has been shown in various forums such as academia, the media and the mainstream community (see chapter 4).

Intergenerational and collective trauma is intrinsically linked to ongoing oppression from colonisation. In study 1, those who scored high on the wellbeing scales (with high psychological distress and/ or a large number of stressors) also reported traumatic experiences of lateral violence. Given the discussions above, there appears a relational nature amongst racism, trauma, identity, wellbeing and lateral violence. This initially supports the hypothesis that lateral violence is a major impediment to identity and wellbeing in similar ways to trauma and racism.
Aim 4: to identify the need for an evaluation of the PLV workshops in the Aboriginal community in order to understand an evidence base of best practice, effective intervention strategies and the usefulness of the workshop as an intervention tool to prevent lateral violence over time. The importance of healing and educational intervention programs for Aboriginal people’s wellbeing was highlighted in the literature. It was also specified that such Aboriginal intervention programs are rarely evaluated let alone published. Furthermore there are only a few workshops or interventions that specifically focus on lateral violence in the Aboriginal community in Australia, and no published evaluations were found in the literature in a systematic search. In South Australia, one-day PLV workshops have assisted many Aboriginal people to understand the complexities associated with lateral violence and its effects over time, as well as empower people to take action to prevent lateral violence. Consistent positive and constructive feedback from 2007 onwards has ensured its refinement, progression and continuation.

The evaluation of the PLV workshops incorporated two phases and the results from phase 1 supports the hypothesis that the PLV intervention was successful in changing participants’ knowledge, attitudes and understanding of lateral violence. Across the two phases, the qualitative investigation into preventative measures identified that education, either formally or informally, was seen as key to change. Education which also incorporated self-awareness was viewed as an important change agent for responsibility and accountability of one’s actions. It was also recommended that further awareness and community education beyond workshops take place to ensure a broader audience understand lateral violence through various mediums. Within the workplace it was emphasised that non-Aboriginal work colleagues and/or supervisors and managers may not understand lateral violence, take a hands-off approach and therefore not manage it well and/or inadvertently perpetrate it.
Aim 5: to highlight resilience and strength from within the Aboriginal community in Adelaide, in particular successful strategies to prevent the pervasiveness of lateral violence. Aboriginal people are often viewed in terms of a deficit discourse. This discourse and negative stereotypes are often reinforced by the multiple layers of disadvantage and disempowerment which in turn act as a source to maintain the stereotypes. Hence, awareness and education need to focus on the resilience of Aboriginal people with a recognition that Aboriginal people have the capability and capacity to prevent lateral violence within their communities, despite the continual forms of oppression which underpin lateral violence.

Information in relation to strategies for the prevention of lateral violence was a feature of both studies. Study 1 participants drew on potential prevention strategies and ways of coping to deal with lateral violence on a daily basis. Some examples include cultural connections, standing up to lateral violence, positive re-framing and avoiding lateral violence. Study 2 asked participants to draw on strategies after completing the PLV workshops. These included education, self-awareness and monitoring of the self, and challenging lateral violence to name a few. The strategies were practical and participants appeared to tap into their skills and abilities to actively tackle both lateral violence and racism (see Table 8.1).

Major implications and recommendations of the research

Several implications and recommendations can be drawn from the findings of this study which are summarised below.

First, it needs to be recognised and respected that Aboriginal participants predominately volunteered as a means to educate others about lateral violence across the two studies. As part
of the process there has been an endorsement of lateral violence as a label that represents infighting and/or broad based violence within the Aboriginal community. Further, lateral violence can be placed within a broader healing framework along with racism, trauma and wellbeing. This suggests that lateral violence can be tackled from a holistic perspective rather than by itself. Hopefully this means that it can be included in some of the major Aboriginal wellbeing surveys, such as the NATSIH survey. This survey periodically monitors and reports on Aboriginal health and wellbeing.

Second, the present research has identified a range of coping skills and prevention strategies that can educate and empower others to deal with lateral violence. Further education has been suggested as a form of self-awareness which has been the starting point for accountability of one’s role and behavioural change. A broader educational campaign has been suggested along with resource materials and educational and healing workshops to nurture both individual and collective strengths of Aboriginal people.

Cultural safety or respect frameworks were recommended with appropriate guidelines and processes to ensure lateral violence prevention is embedded in organisations to safeguard resilience, empowerment, and greater wellbeing for Aboriginal people, which in turn can greatly add to an increased service to the community.

There were many recommendations for the progression and improvement of PLV workshops. For example, the workshops need to be followed-up for participants to maintain and build of prevention strategies; open to both Aboriginal and non-Aboriginal people who work extensively with Aboriginal people; and accessible and affordable for the Aboriginal community. Improved communication is needed to increase the dialogue between the
facilitators and the contact person for enquiries and to reassure potential participants. The development of a depository (website) where participants can download information prior to the workshops was also recommended.

Lastly, it will be important to ensure that any future workshops have inbuilt evaluation to continue to monitor quality and make any necessary changes to the workshops in the short and long term. This will provide a much needed evidence base which can potentially attract future and ongoing resources to ensure the Aboriginal community has access to resources.

In conclusion, this research adds to the clarification and understanding of lateral violence and substantially adds to the scant literature in this area. It is hoped that by further increasing awareness of lateral violence and its detrimental effects, effective intervention strategies and resources, such as the lateral violence workshops reported in this thesis, can be put in place to assist in empowering Aboriginal people and reduce the incidence of lateral violence within the Aboriginal community in Adelaide and elsewhere.

**Limitations**

Several limitations associated with the research reported in this thesis should be emphasised. The broad-based exploratory research reported in study 1 constituted a first attempt to generate an in-depth dialogue with the Aboriginal community in Adelaide about a potentially sensitive topic. The participants who volunteered their time for this project were primarily female, between the ages of 41 to 50 years and well educated. Therefore further research, exploration and replication is needed on the topic of lateral violence with a more representative sample of Aboriginal people. Nonetheless the fact that 30 participants volunteered to take part in study 1 is indicative of the level of importance this issue has in the lives of Aboriginal people.
However, English was a second language for some participants which limited their full engagement with the project. For example, some were unable to fill out the wellbeing questionnaires. Therefore interpreters could be provided in future research to ensure wider participation.

There were rigorous efforts to recruit participants for the workshops by organisations but there were less participants than originally anticipated. The average number per workshop was 12, well below the 15 to 25 aimed for. Despite this, the overall number was sufficient for the study and surprisingly the smaller group arrangement appeared to bestow intimacy and comfort, which may have facilitated learning.

Although seven participants were adequate for the qualitative interviews in study 2, more volunteers might have produced richer data. Furthermore there may have been a self-selection bias as those who volunteered may have been those who mostly benefited and were positive about the workshops, as opposed to those who didn’t benefit and therefore may have been deterred from volunteering. It would have been equally important to evaluate the information of those who potentially didn’t benefit from the workshops in order to make necessary changes.

**Further research**

It can be argued that many of the findings and themes in this research about lateral violence will have some level of transferability to other Aboriginal communities in Australia outside of Adelaide. However, additional research and replication are required with supplementary documentation to determine this. Further discussion on the topic of lateral violence could serve to encourage conversations, attract resources, and empower Aboriginal people to develop
additional approaches towards the prevention of lateral violence within their families, workplaces and communities.

Currently, there is a scarcity of evaluation research in Australia that determines the benefits, impact and outcomes of healing and education interventions targeted toward Aboriginal people. The Productivity Commission has been critical of the fact that there are very few evaluations of Aboriginal policy and programs. The commission indicated that in Australian “of 1000 Indigenous specific initiatives, the commission – backed by all governments – could only find 34 properly evaluated and effective case studies and that these need to be released publically” (Hunter, p. 3). It may be that “properly” evaluated programs constitute an evidence based practice which is often linked to quantitative evaluations (see Day & Francisco, 2013). It seems that for evaluations of Aboriginal programs a preference for holistic approaches by Aboriginal people appear prominent and may not be deemed proper or evidence based. Hence it is important that evidence based practices are culturally appropriate and integrated into Indigenous research and evaluation methods to ensure there is a baseline to measure improvements and needs over time. An evidence based approach means different things to different people or communities.

Evaluation research needs to be part of a holistic and relational process and considered within an Indigenous methodology. This means that such an approach must ensure that participants are the subjects of their experiences and not the objects of research. It needs to be an inclusive process that integrates participants’ knowledge into the research so that it is useful and not taken out of cultural context. It needs to also be a process that focuses on the positive aspects of Aboriginal culture and resiliency. It may also need to be considered along with other forms of empowerment evaluation research such as *community oriented research, collaborative*
research (e.g. Healing foundation, 2012) and post-colonial research (e.g. Baker2012; Ramone, 2011).

Nevertheless, the current two-phase evaluation used in this study has provided a robust approach to program evaluation including both objective and insider (subjective) approaches to validate outcomes. However, in order to ensure rigour and quality assurance, the evaluation needs to be an ongoing process with a large pool of information over time. Furthermore a questionnaire with standardised and validated questions could be developed to capture aspects of lateral violence. This can be used to ensure a baseline to determine changes over time and across organisations, communities and other settings that promote an evidence based focus. A good starting point could be to use some of the items within the evaluation survey, information from the themes, particularly on coping and resiliency, as well as to explore other surveys such as the standardised LVNS (developed by Stanley et al., 2007b) in order to develop a survey to use within the Aboriginal community in Australia.
References


interpersonal and intrapersonal coping in Muslim and Christian faiths. Review of General Psychology, 14, 365-381. doi: 10.1037/a0021624


Aboriginal and Torres Strait Islander mental health and wellbeing principles and practice (2nd edition) (pp. 419-436). Canberra: Commonwealth of Australia.


Appendices

Appendix 1: Study 1. Invitation flyer to participants

You are invited to participate in a research project on

‘Lateral violence within the Aboriginal community in Adelaide, South Australia: From dilemmas to strategies’

If you are:

- Aboriginal and/or Torres Strait Islander;
- Aged between 18–75 years;
- Willing to give informed consent

Then we would like to:

Have a chat with you about lateral violence in the Aboriginal community, at a location that is convenient for you in Adelaide. For this project we want to explore what you know about lateral violence and how it affects you and those around you and how you might deal with it. If you choose to be involved we will offer you a $50 gift shopping voucher for your time.

If you are interested in participating or would like more information please contact Yvonne Clark on (08) 83137464 or email: yvonne.clark@adelaide.edu.au

This research has been approved by the Aboriginal Health Research Ethics Committee and the University of Adelaide Human Research Ethics Committee.
Appendix 2: Study 1. Information sheet

You are invited to participate in the research project: Lateral violence within the Aboriginal community in Adelaide, South Australia: From dilemmas to strategies

Who is involved in the research project?
My name is Yvonne Clark and the project will form part of my PhD at the University of Adelaide. I am of Kokatha-Wirangu descent from the West Coast of SA and have lived in Adelaide for approximately 37 years. I am a Clinical Psychologist who has had extensive experience working with local Aboriginal people. I am passionate about this topic and want to make sure the research is being conducted by someone experienced on the topic.

My supervisors for the research project are Professor Martha Augoustinos, School of Psychology, University of Adelaide and Associate Professor Jenny Baker, Yaitja Purruna Indigenous Health Unit, School of Population Health, Faculty of Health Sciences.

What the research project is about
The research project is about lateral violence, a term that was coined by Indigenous Canadians. It is used to describe how Indigenous people direct their dissatisfaction inward, such as toward themselves and toward each other. There has been very little research on lateral violence within the Aboriginal and Torres Strait Islander people in Australia. Thus the aims of the current study are to:

- Expand knowledge on lateral violence;
- Have a better understanding how the issue of lateral violence is perceived in the Aboriginal community in Adelaide, South Australia (SA);
- Explore its effects on individuals and communities; and explore the resilience and successful strategies participants have implemented to curb lateral violence; and
- Ensure there are sufficient resources available to assist people in preventing lateral violence in SA in the future.

Moreover this study aims to understand lateral violence from your perspective, your perceptions and understandings and your views about strategies to curb lateral violence. In short we are interested in whatever you have to say about lateral violence and we would like to do this by having a yarn with you. The talk will be audio taped and then transcribed.

Benefits of the study
Understanding about lateral violence in the Aboriginal community appear to be unclear. It is hoped that the outcomes of the research will result in more guidance, talk, reading materials, resources, and community willingness to prevent and stop lateral violence in communities.

Confidentiality and privacy
Please be reassured that all interview material will be anonymous and your identity or personal information will be kept strictly confidential and not be made available to anyone other than myself as the researcher. If examples from the interviews are used in the published thesis we will ensure that no one will be able to identify you by using pseudonyms and deleting any personal information that may identify you. The only time confidentiality maybe breached is if you tell me about any illegal or abusive activities, in regard to children and young people, that you know of or have been part of. I will then be obligated to inform the relevant child...
protection authorities as a mandatory reporter. You need to also be aware that any information gathered from you could be obtained by court order. However this is very unlikely and will be further explained prior to commencing the research.

Your rights
Your participation in this study is totally voluntary, you are not obliged in any way to participate and you have the right to withdraw from the research at any stage, for any reason without penalty or loss of benefits to which you would otherwise be entitled. You can refuse to answer any questions and you can stop participating at any time if you choose not to participate anymore.

Potential risks
There are no potential risks to the study. However given that lateral violence is a sensitive topic and people may have experienced such violence you may become a little uncomfortable or distressed. As a qualified psychologist I will ensure that I am sensitive to your feelings and if required, will provide you with the names and contacts of appropriate counsellors.

Incentives
We understand that everyone’s time is valuable and we would like to offer a gift of $50 Coles/Myer voucher for your time and effort. This is a gift of our appreciation for allowing me to talk to you to gain your valuable insight, thoughts and ideas about this sensitive topic of lateral violence within the Aboriginal community in South Australia.

Outcomes of the study
Much of the information gained from the research project will be used to further develop workshops about lateral violence, to produce resources and information to assist people with strategies to curb lateral violence. A journal or book article will be written and a number of presentations about the project will take place. You will be invited to attend.

Approval
Before I can conduct the interviews, approval must be sought from the relevant ethics committees. The researchers have gone to great lengths to ensure that participants’ wellbeing and dignity is respected. This research project has been approved by the Aboriginal Health Research Ethics Committee (AHREC) and the University of Adelaide Human Research Ethics Committee. If you have any queries, complaints, ethical concerns about the project, or questions about your rights as a participant please contact the executive officer of the committee(s)

- Ms Sabine Schreiber, Secretary Human Research Ethics Committee, University of Adelaide. Ph: 83136028. Email: sabine.schreiber@adelaide.edu.au
- Dr Rosie King, Senior Research and ethics officer, Aboriginal Health Council of SA, (08) 82737261, email: rosie.king@ahcra.org.au

How to contact the researchers
- Ms Yvonne Clark: yvonne.clark@adelaide.edu.au
- Professor Martha Augustinos: martha.augustinos@adelaide.edu.au
- Associate Professor Jenny Baker: jenny.baker@adelaide.edu.au
Appendix 3: Study 1. Wellbeing scales

Kessler Psychological Distress Scale – K5

<table>
<thead>
<tr>
<th>In the past 4 weeks:</th>
<th>None of the time</th>
<th>A little of the time</th>
<th>Some of the time</th>
<th>Most of the time</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. About how often did you feel nervous?</td>
<td></td>
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<td>2. About how often did you feel without hope?</td>
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<td>3. About how often did you feel restless or jumpy?</td>
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<td>4. About how often did you feel everything is an effort?</td>
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<td>5. About how often did you feel so sad that nothing could cheer you up?</td>
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</table>

Total Score: ______________________

Scoring for K5
Minimum score 5, indicates no distress.
Low / moderate distress 5 – 11
High / very high distress 12 – 25
Maximum score 25, indicates severe distress.
## Negative Life Events Scale

<table>
<thead>
<tr>
<th>Negative Life Events Scale</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have any of these things been a worry for you or anyone else in your family during the last year?</td>
<td></td>
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<tr>
<td>Serious illness</td>
<td></td>
<td></td>
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<tr>
<td>Serious accident</td>
<td></td>
<td></td>
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<tr>
<td>Death of family member or close friend</td>
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<td></td>
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<tr>
<td>Divorce or separation</td>
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<td></td>
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<tr>
<td>Not able to get a job</td>
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<tr>
<td>Lost job</td>
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<tr>
<td>Alcohol related problems</td>
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<tr>
<td>Drug related problems</td>
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<td></td>
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<tr>
<td>Seeing fights or people beaten up</td>
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<td></td>
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<tr>
<td>Abuse or violent crime</td>
<td></td>
<td></td>
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<tr>
<td>Trouble with the police</td>
<td></td>
<td></td>
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<tr>
<td>Gambling problem</td>
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<td></td>
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<tr>
<td>Member of family sent to jail</td>
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<td></td>
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<tr>
<td>Overcrowding at home</td>
<td></td>
<td></td>
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<tr>
<td>Discrimination/Racism</td>
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<td>Total</td>
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Re: 1 day workshop on ‘preventing lateral violence’ with Aboriginal staff/community

Dear

I write to seek your interest and support to convene a 1 day workshop on lateral violence with Aboriginal staff/community with your organisation. The purpose of the workshop, is to provide an understanding of it and to work towards preventing lateral violence’ within the Aboriginal sector in SA. We would like to provide the training to approximately 20 participants

Our training consortium has been running information sessions and workshops on the topic of lateral violence within the Aboriginal community since 2007. The workshops have been requested by various Aboriginal employment and community sectors within SA. The workshops have in general been well received with positive feedback. See attachment 1 & 2 for biographies and background information about the workshops.

Because of my passion for the topic of lateral violence, I have taken leave from my employment to undertake my PhD at the School of Psychology, University of Adelaide. This is my second study in which I am seeking to evaluate the ‘preventing lateral violence’ workshops and determine whether participants have an increased understanding of lateral violence and have put in place some strategies within their contexts. This research component will require participants of the workshops to fill out short questionnaires which will take about 15 minutes in all. The research component has been approved by the relevant ethics committees. Please see research design and information sheet for study 2 in attachments 3 & 4.

The cost of delivering the work including facilitators, materials etc will be covered by the research institution (Adelaide University). However, an in-kind contribution by your organisation to cover training venue. Lunch is welcomed and I am happy to discuss this further with you.

In the attachments I have also provided some background information about lateral violence and a draft outline of a one day schedule for your perusal.

If you would like to consider having a workshop with the small research component within your organisation, please contact me to discuss further via email or phone numbers below.

Yours sincerely

Yvonne Clark
PhD candidate (Lecturer and Clinical psychologist)
School of Psychology, University of Adelaide
(08) 83137454.
Email: yvonne.clark@adelaide.edu.au
Appendix 5: Study 2. Information sheet

You are invited to participate in the research project: Lateral violence within the Aboriginal community in Adelaide, South Australia: From dilemmas to strategies

Who is involved in the research project?
My name is Yvonne Clark and the project will form part of my PhD at the University of Adelaide. I am of Kokatha-Wirangu descent from the West Coast of SA and have lived in Adelaide for approximately 37 years. I am a Clinical Psychologist who has had extensive experience working with local Aboriginal people and community. I am passionate about this topic and want to make sure the research is being conducted by someone experienced on the topic.

My supervisors for the research project are Professor Martha Augoustinos, School of Psychology, University of Adelaide and Associate Professor Jenny Baker, Yalitja Purnu Indigenous Health Unit, School of Population Health, Faculty of Health Sciences. The Research assistant is Joanne O'Connor, Honours student, University of Adelaide.

What the research project is about
The research project is about lateral violence which is a term used to describe how people in positions of powerlessness (i.e. Indigenous people) direct their dissatisfaction inward, such as toward themselves, toward each other and toward those less powerful than themselves. There is a lot of unknown information about lateral violence within Aboriginal and Torres Strait Islander people in Australia. Thus the aims of the current study are to:

- Expand the knowledge on lateral violence;
- Have a better understanding how the issue of lateral violence is perceived in the Aboriginal community in Adelaide, South Australia (SA);
- Explore the effects on individuals and community; explore the resilience and successful strategies of participants in curbing lateral violence; and
- Ensure there are sufficient resources available to assist people in preventing lateral violence in SA in the future.

This study will evaluate the current workshops that myself and colleagues have been involved in and co-developed as well as see if the workshops have made a different to your understanding, knowledge and actions toward preventing lateral violence. If you are involved in a workshop and agree to be part of this study you would be asked to fill out a number of questionnaires before and after the workshops which will take about 15 minutes in all to complete. We will also require a few volunteers to also talk to us about their experiences of the workshops and about strategies that they have utilised to prevent lateral violence.

Benefits of the study
Understandings about lateral violence in the Aboriginal community appear to be unclear. It is hoped that the outcomes of the research will result in improved workshops, more guidance, talk, reading materials, resources, and community willingness to prevent and stop lateral violence in communities.

Confidentiality and privacy
Please be reassured that all material will be anonymous and your identity or personal information will be kept strictly confidential and not be made available to anyone other than myself as the researcher. The evaluation design requires that I match your responses over 3 time periods and will therefore need to identify you for matching purposes. Further if examples from the interviews are used in the published thesis we will ensure that no one will be able to identify you by using pseudonyms and deleting any personal information that may identify you. The only time confidentiality maybe breached is if you reveal any illegal or abusive activities, in regard to children and young people, that you know of or have been part of. I will then be obligated to inform the relevant child protection authorities as a mandatory reporter. You need also to be aware
that any information gathered from you could be obtained by court order. However, this is very unlikely and can be further explained prior to commencing the research.

Your rights
Your participation in this study is totally voluntary, you are not obliged in any way to participate and you have the right to withdraw from the research at any stage, for any reason without penalty or loss of benefits to which you would otherwise be entitled. You can refuse to answer any questions and you can stop participating at any time if you choose not to participate anymore.

Potential risks
There are no potential risks to the study. However given that lateral violence is a sensitive topic and people may have experienced such violence you may become a little uncomfortable or distressed. As a qualified psychologist I will ensure that I am sensitive to your feelings and if required, will provide you with the names and contacts of appropriate counsellors.

Incentives
If you volunteer to do a follow up interview (approximately 3 months after the workshop) we would like to offer a gift of $50 Coles/Meyer voucher for your time and effort. This is a gift of our appreciation for allowing me to talk to you to continue to gain your valuable insight, thoughts and ideas about this sensitive topic of lateral violence within the Aboriginal community in South Australia.

Outcomes of the study
Much of the information gained from the research project will be used to further develop workshops about lateral violence, to produce resources and information to assist people with strategies to curb lateral violence. A journal or book article will be written and a number of presentations about the project will take place. You will be invited to attend.

Approval
Before I can conduct the interviews, approval must be sought from the relevant ethics committees. The researchers have gone to great lengths to ensure that participants’ wellbeing and dignity is respected. This research project has been approved by the Aboriginal Health Research Ethics Committee (AHREC) and the University of Adelaide Human Research Ethics Committee. If you have any queries, complaints, ethical concerns about the project, or questions about your rights as a participant please contact the executive officer of the committee(s)

- Ms Sabine Schreiber, Secretary Human Research Ethics Committee, University of Adelaide. Ph: 83136028 Email: sabine.schreiber@adelaide.edu.au
- Dr Rosie King, Senior Research and ethics officer, Aboriginal Health Council of SA, (08) 82737261, email: rosie.king@ahcgsa.org.au

How to contact the researchers
- Ms Yvonne Clark: yvonne.clark@adelaide.edu.au
- Professor Martha Augustinos: martha.augustinos@adelaide.edu.au
- Associate Professor Jenny Baker. jenny.baker@adelaide.edu.au
Appendix 6: Study 2. Pre questionnaire

Pre-Workshop evaluation for ‘Preventing Lateral Violence’

We are interested in your understanding, knowledge and activities around lateral violence in the Aboriginal and Torres Strait Islander community prior to completing the 1 day workshop on lateral violence. For each statement, please tick if you agree or disagree using a rating scale from “1” to “5”.

- A rating of “1” indicates that you strongly disagree with the statement;
- A rating of “5” indicates that you strongly agree, and
- A rating of “3” is the level where you neither agree nor disagree.

<table>
<thead>
<tr>
<th>Categories</th>
<th>Tick your response</th>
<th>Strongly Disagree</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Strongly Agree</th>
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</thead>
<tbody>
<tr>
<td>Training, motivation and expectations</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
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<td>5</td>
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<tr>
<td>1. The objectives of the training were clearly defined prior to</td>
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<td>attending the workshop</td>
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<td>2. I expect the training to equip me with the understanding and</td>
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<tr>
<td>knowledge of lateral violence.</td>
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<td>3. I expect to learn lots of and develop strategies to deal with lateral</td>
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<tr>
<td>violence.</td>
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<td>4. I am doing this training because I thought it would be useful in my</td>
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<td>work or community</td>
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<td>5. My employer made me do the training</td>
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<td>6. I had heard about this training from others who have done it</td>
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<td>7. I knew about the training from the flyer</td>
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<td>8. The training information was NOT provided in sufficient time for me</td>
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<td>to organize to attend training</td>
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<tr>
<td>Experiences, impact and attributes</td>
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<tr>
<td>9. I have never heard of lateral violence before undertaking the training</td>
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<td>10. Lateral violence is a useful term in understanding violence in the</td>
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<td>Aboriginal community</td>
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<td>11. Lateral violence DOES NOT adequately describe violence experienced by</td>
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<tr>
<td>Aboriginal people</td>
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<td>12. Lateral violence is a confusing term</td>
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<td>13. Lateral violence describes my experiences of violence as an Aboriginal</td>
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<td>person/non-Aboriginal person</td>
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<td>14. There are better ways of understanding Aboriginal violence than the</td>
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<tr>
<td>concept of lateral violence</td>
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<td>15. I know what lateral violence is all about</td>
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<td>16. I have witnessed lateral violence</td>
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<td>17. I have NOT seen lateral violence when it occurs in the workplace</td>
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<td>18. I have NOT seen lateral violence when it occurs in the community</td>
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<tr>
<td>19.</td>
<td>I understand the impact of lateral violence on individuals</td>
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<tr>
<td>20.</td>
<td>I understand the impact of lateral violence in the workplace</td>
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<td>21.</td>
<td>I understand the impact of lateral violence in the community</td>
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<tr>
<td>22.</td>
<td>I realize that I have been a victim of lateral violence at least once (it happened to me)</td>
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<tr>
<td>23.</td>
<td>I realize that I have been a perpetrator of lateral violence at least once (I have committed lateral violence)</td>
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<tr>
<td>24.</td>
<td>I recognize the importance of preventing lateral violence from re-occurring in various contexts</td>
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<tr>
<td>25.</td>
<td>I am aware of a range of strategies to address lateral violence</td>
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<tr>
<td>26.</td>
<td>I currently have some skills and strategies to address lateral violence</td>
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</tbody>
</table>

Can you please fill out the demographic information. This is for research purposes only and not used to identify you.

Are you: Aboriginal □ Torres Strait Islander □ both Aboriginal and Torres Strait Islander □ Non-Aboriginal □

Age category: 18-25 □ 26-30 □ 31-35 □ 36-40 □ 41-45 □

46-50 □ 51-55 □ 56-60 □ 61-65 □ 66+ □

**For matching purposes only- specify day and month of birth (i.e. 19/09)   .../.../

Gender: Male □ Female □

Education and/or training level reached:

Primary School □ Secondary School □ ...if yes, year level......

Apprenticeship □ University □ TAFE □ Other □

Thank You for your participation

Note: there will be another 2 short questionnaires which will assist us for research purposes. One will be at the end of the day and another will be provided for filling out in about 3 months time

Note: If you would like to volunteer to be interviewed in about 6 months time to see how you have dealt with lateral violence and to further discuss what strategies were successful please let one of the facilitators know.
Appendix 7: Study 2. Post questionnaire

Evaluation of the 1 day workshop ‘Preventing lateral violence’

Workshop Objectives:
- To have a better understanding of lateral violence in Aboriginal communities and within the workplace
- To recognize how it is defined and where it has come from
- To understand how it is characterized and the forms it takes
- To begin to realize the effects on the community
- To share stories and care for and support each other
- To enhance the connections between each other
- To work towards strategies to effectively deal with lateral violence and to help others
- To ensure participants feel emotionally and culturally safe.

We are interested in your assessment of the training provided and would like to ask you to complete the form. For each statement, please check if you agree or disagree using a rating scale. A rating of “1” indicates that you strongly disagree with the statement and a rating of “5” indicates that you strongly agree and “3” is the level where you neither agree nor disagree.

<table>
<thead>
<tr>
<th>Categories</th>
<th>Check your response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Strongly Disagree – Strongly Agree</td>
</tr>
<tr>
<td></td>
<td>1   2    3    4    5</td>
</tr>
<tr>
<td>The delivery of the Lateral Violence workshop</td>
<td></td>
</tr>
<tr>
<td>The objectives of the training were clearly defined</td>
<td></td>
</tr>
<tr>
<td>The topics covered were relevant</td>
<td></td>
</tr>
<tr>
<td>The training was too technical and difficult to understand</td>
<td></td>
</tr>
<tr>
<td>There was sufficient opportunity for interactive participation</td>
<td></td>
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<tr>
<td>I did NOT get my questions answered during the training</td>
<td></td>
</tr>
<tr>
<td>The materials were pitched at the right level</td>
<td></td>
</tr>
<tr>
<td>The handouts for the training were helpful</td>
<td></td>
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<tr>
<td>The schedule for the training provided sufficient time to cover all of the proposed activities in the program</td>
<td></td>
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<tr>
<td>Facilities</td>
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<tr>
<td>The facilitators were knowledgeable about the topic</td>
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<tr>
<td>The facilitators were well prepared for the session</td>
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<tr>
<td>The facilitators encouraged active participation</td>
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<tr>
<td>The facilitators did NOT answer questions in a complete and clear manner</td>
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<tr>
<td>The facilitators used variety of training methods</td>
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<tr>
<td>The facilitators were respectful of the different skills and values presented by the participants</td>
<td></td>
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<tr>
<td>The facilitators ensured that participants felt comfortable and safe</td>
<td></td>
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<tr>
<td>Facility</td>
<td></td>
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</tbody>
</table>

1
| The meeting room and facilities provided a comfortable and safe setting for the training |
| The location for the training was convenient for me |
| The refreshments and food provided were of good quality |
| The equipment used during the sessions worked well |

**General Satisfaction:**

- The objectives of the training have been met
- I am NOT satisfied with my increased understanding of the topic
- I was generally very satisfied with all aspects of this training
- I plan to share the strategies I received during the training with others
- The DVD was helpful to understand lateral violence in the Aboriginal community
- The information in the DVD on lateral violence in Canada relates to lateral violence in Adelaide.
- The training provided me an opportunity to understand the values and behaviours of others
- The strategies will help me to build and maintain positive relationships within the Aboriginal community
- The debriefing was adequate
- I will recommend this training to others

**Experiences, impact and attributes**

- Lateral violence is a useful term in understanding violence in the Aboriginal community
- Lateral violence DOES NOT adequately describe violence experienced by Aboriginal people
- Lateral violence is a confusing term
- Lateral violence describes my experiences of violence as an Aboriginal person/non-Aboriginal person
- There are better ways of understanding Aboriginal violence than the concept of lateral violence
- I know what lateral violence is all about
- I do NOT recognise lateral violence when it occurs in the workplace
- I do NOT recognise lateral violence when it occurs in the community
- I understand the impact of lateral violence on individuals
| I understand the impact of lateral violence in the workplace |
| I understand the impact of lateral violence in the community |
| I have witnessed lateral violence |
| I realize that I have been a victim of lateral violence at least once. |
| I realize that I have been a perpetrator of lateral violence at least once. |
| I recognize the importance of preventing lateral violence from re-occurring in various contexts |
| I am aware of a range of strategies to address lateral violence |
| I have some skills and strategies to address lateral violence |

Can you please fill out the demographic information (tick categories). This is for research purposes only and not to identify you in anyway.

Are you: Aboriginal ☐ Torres Strait Islander ☐ Both Aboriginal and Torres Strait Islander ☐ non-Aboriginal ☐

Age category: 18-25 ☐ 26-30 ☐ 31-35 ☐ 36-40 ☐ 41-45 ☐ 46-50 ☐ 51-55 ☐ 56-60 ☐ 61-65 ☐ 66+ ☐

**For matching purposes only- specify day and month of birth (i.e. 19/09) **/./...

Gender: Male ☐ Female ☐

Education and/or training level reached:

Primary School ☐ Secondary School ☐ …if yes, specify year level ……

Apprenticeship ☐ University ☐ TAFE ☐ Other ☐

PTO

3
How do you hope to make any changes in your life or your practice as a result of this training?

Any additional comments?

Note: there will be another very short questionnaire coming out in about 3 months time which we would like you to complete.

Note: If you would like to volunteer to be interviewed in about 6 months time to see how you have dealt with lateral violence please let one of the facilitators know. For the interviews participants will be given a $50 Coles/Myer gift voucher.

Thank You for your participation
Appendix 8: Study 2. Three months post questionnaire

3 month Post-workshop evaluation for ‘Preventing Lateral Violence’

We are interested in any skills and strategies you may have developed or put in place after your training on lateral violence (3 months ago). We would like to ask you to complete the form. For each statement, please tick if you agree or disagree using a rating scale from “1” to “5”.

A rating of “1” indicates that you strongly disagree with the statement and a rating of “5” indicates that you strongly agree and “3” is the level where you neither agree nor disagree.

<table>
<thead>
<tr>
<th>Categories</th>
<th>Check your response</th>
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<tbody>
<tr>
<td>The objectives of the previous training on lateral violence were clearly defined</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>The topics covered were relevant during training</td>
<td></td>
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<tr>
<td>The training experience was useful and has helped me in my workplace</td>
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<tr>
<td>The training experience has been useful and has helped me with community relationships</td>
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<tr>
<td>I got most of my questions answered during the training</td>
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<tr>
<td>The schedule for the training provided sufficient time to cover all of the proposed activities in the program</td>
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<tr>
<td>I have read the training material provided</td>
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<tr>
<td>The handouts for the training were useful for my understanding of lateral violence in the Aboriginal community</td>
<td></td>
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<tr>
<td>the training material was easy to understand</td>
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<tr>
<td>General Satisfaction:</td>
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<tr>
<td>I am satisfied with my increased knowledge and understanding of the topic</td>
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<tr>
<td>I was satisfied with all aspects of the training</td>
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<tr>
<td>I have shared skills and strategies that I learnt during the training with others</td>
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<tr>
<td>I have NOT been able to integrate my knowledge and understanding of lateral violence into my workplace</td>
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</tr>
<tr>
<td>I have NOT been able to integrate my knowledge and understanding of lateral violence into my community</td>
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<tr>
<td>The training provided me an opportunity to understand the values and behaviours of others</td>
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<tr>
<td>I have needed further debriefing, support or counseling since learning about lateral violence.</td>
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</tr>
<tr>
<td>Experiences, impact and attributes</td>
<td></td>
</tr>
<tr>
<td>Lateral violence is a useful term in understanding violence in the Aboriginal community</td>
<td></td>
</tr>
<tr>
<td>Lateral violence DOES NOT adequately describe violence experienced by Aboriginal people</td>
<td></td>
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</tbody>
</table>
Lateral violence is a confusing term

Lateral violence describes my experiences of violence as an Aboriginal person
There are better ways of understanding Aboriginal violence than the concept of lateral violence

I Do Not recognise lateral violence when lateral violence occurs in the workplace
I Do Not recognise lateral violence when it occurs in the community
I understand the impact of lateral violence on individuals
I understand the impact of lateral violence in the workplace
I understand the impact of lateral violence in the community
I realize that I have been a victim of lateral violence at least once.
I realize that I have been a perpetrator of lateral violence at least once.
I recognize the importance of preventing lateral violence from occurring and re-occuring
I am now aware of a range of strategies to address lateral violence
I have used the strategies that I learned to prevent lateral violence
I realize that I already had many strategies to prevent lateral violence
I have developed some new skills and strategies to address lateral violence (on your own after the workshop)
I have recommended this training to others

Can you please fill out the demographic information. This is for research purposes only and not used to identify you. Please Tick categories

Are you: Aboriginal ☐ Torres Strait Islander ☐ Both Aboriginal and Torres Strait Islander ☐ non-Aboriginal ☐

Age category: 18-25 ☐ 26-30 ☐ 31-35 ☐ 36-40 ☐ 41-45 ☐ 46-50 ☐ 51-55 ☐ 56-60 ☐61-65 ☐ 66+ ☐

*For matching purposes only- specify day and month of birth (i.e. 19/09) ..../..../

Gender: Male ☐ Female ☐

Education and/or training level reached: Primary School ☐ Secondary School ☐. If yes, year level…… Apprenticeship ☐ University ☐ TAFE ☐ Other ☐

PTO- only a few more questions
What are the 3 main behaviours that you see as lateral violence?

What changes (if any) have you made in your life or your practice as a result of the lateral violence training?

What additional training would you like to have or see developed in the future about lateral violence?

Any additional Comments?

Thank You for your participation

Note: If you would like to volunteer to be interviewed in the near future to discuss how you have used or developed strategies to deal with lateral violence, please email Yvonne Clark (yvonne.clark@adelaide.edu.au) or ring on 83137464
Appendix 9: Study 1 and 2. List of counsellors.

Counselling, Psychological Services and Resources for Mental health and Social and Emotional Wellbeing of Aboriginal and Torres Strait Islander People in Adelaide

Note: This is a comprehensive but not complete list of counselling services that Aboriginal people can utilise. It is up to date at the time of issue.

ALCOHOL AND DRUGS

Alcohol and Drug Information Service (ADIS) – Ph: 1300 131 340 (24hrs 7 days pw (24/7)) - Information, counselling and referral service for the general public, concerning family and friends, students and health professionals.

Aboriginal sobriety group mobile assistance team - Ph: 82234204, mobile: 0411474368. Assists Aboriginal people who are under the influence of drugs and alcohol (24/7).

CHILDREN AND YOUTH SERVICES


Child Abuse Prevention Services – Ph: 1800 688 009 - Supportive, non-judgemental counselling for parents and carers who are afraid of hurting a child.

Crisis Care After hours service- Ph: 131 611

Kids Help Line: Ph: 1800 551 800 Free, confidential and anonymous, telephone and online counselling service specifically for young people aged between 5 and 18 years.

Youth Healthline, Ph: 1300 13 17 19. Confidential telephone health information and referral (i.e. physical health, mental health, relationships. Stress, sexuality, identity, drugs and alcohol)

Child and Adolescent Mental Health Services (CAMHS). Provides a range of therapeutic counselling services for children and adolescents from birth to 18 years of age and their families. Located in various locations in Adelaide (West (83211232), North (82520133), East (73214503), South (Onkaparinga: 83216123) (Marion 74269800), as well as the country (86 325 304, Toll Free: 1800 919 099). For these services Aboriginal families are given priority access

Ngartunna Pampannga (Children of the South)
This Aboriginal Child and Family Program, established within Southern CAMHS, provides a assessment and therapy service to Aboriginal children, young people and their families in the southern metropolitan regions of Adelaide. Ph: 8298774.

Headstart e-counselling services; Eheadspace provides online and telephone counselling you young people from 12-25 years old. Phone: 1800650890, web: https://www.eheadspace.org.au/

General web address for headspace is: http://www.headspace.org.au/about-headspace

DOMESTIC AND FAMILY VIOLENCE

National Sexual Assault Domestic Violence Counselling service Ph: 1800RESPECT (1800737732)

Domestic Violence Helpline: 1800 800 099 (24 hrs)
Telephone counselling for victims of domestic violence and their concerned friends & information about
services for those affected by domestic violence or who are troubled by their own behaviour. Gateway for Aboriginal services.

**Domestic Violence Crisis Service** - 1300 782 200 (24 hours)
Crisis counselling, support, referral to safe accommodation

**Nungar Miminar Inq** P: 1300722200. Provides support, referral and accommodation to Aboriginal women and families in family violence situations.

**Ninko Kurtangga Patpangga** (Southern region domestic violence service) P: 82970844

**CRISIS COUNSELLING**

**Lifeline** - 13 11 14 – The service offers a counselling service that respects everyone’s right to be heard, understood and cared for. They also provide information about other support services that are available in communities around Australia. From 8pm to midnight 7 days per week.

**GENERAL COUNSELLING**

**NADA counselling, consulting and training** P: 83402240 Located at 1 Mary Street, Hindmarsh, 5007. A range of counsellors, from Psychologists and social workers, who provide a range of therapy, interventions and training. Many of the counsellors are experienced at working with Aboriginal clients.

**Nunkuwarrin Yunti**, P: 84061600. Nunkuwarrin Yunti provides a number of services. They provide a free and confidential service that assists Aboriginal people and their families to deal with many issues including grief & loss, depression, domestic & family violence, family and/or relationship matters and any other issues which impact on social and emotional wellbeing.

**Community Health Services**. The community health services provide a number of services. Many of them provide a counselling service. Information about local services can be located via the “SA community connect website” [http://sacomunity.org/az/13768-Community_Health_Services?qclid=CKij57b7nblCFwBUpqod1hQA-A](http://sacomunity.org/az/13768-Community_Health_Services?qclid=CKij57b7nblCFwBUpqod1hQA-A)

**GAMBLING SERVICES**

**Gambling Helpline** - 1800 858 858 - 24/7 - Counselling, information and referral for people who are concerned about their own, or another person’s gambling.

**LATERAL VIOLENCE**


**LOSS AND GRIEF**


**Other Websites:**

Aboriginal grief and loss in SA (Murraylands). A series of brochures was produced by The Rainbow Project - Helping with Grief and Trauma.


MENS SERVICES

Mensline. Ph: 1300789978 (24 hour counselling and referral). Mensline Australia is a professional telephone and online support, information and referral service, helping men to deal with relationship problems in a practical and effective way. W: http://www.mensline.org.au

Mibbinbah. Ph: 07 4778 5818, mobile (CEO) 0416 173 975. Mibbinbah exists to create safe spaces for spirit healing, empowerment, celebration and education and training for Indigenous Men... W: http://mibbinbah.org/

MENTAL HEALTH SERVICES

Mental Health Services in South Australia are provided through the public hospital system, and are made up of:
- Emergency & crisis services
- Treatment services for people with mental illness
- Rehabilitation & recovery services
- Services for people with severe & persistent needs

Emergency Services: Ph: 13 1468. Statewide – South Australia._24-hour Mental Health Telephone, Emergency & Crisis Intervention Service._

Mental health review boards – are legal government bodies established to conduct reviews, hear appeals and look after the legal rights of people with mental disorders being treated against their will as hospital patients or on community orders. The review boards are used after a person is admitted to hospital with a mental illness or mental disorder.

South Australia phone: 1800 800 801/ 08 93695800. Northern Territory- Phone 08 8991474

SANE Helpline. Ph: 1800187230- 9am to 5pm, Monday to Friday – Information and advice- Web: SANE Help line

Internet and website services for mental health
For schizophrenia, psychosis and other mental health disorders: www.sane.org, or www.eppic.org.au

PARENT SUPPORT
PSYCHOLOGY SERVICES

Indigenous Psychological Services: Ph: 08 93622038. IPS provides a number of services from training in cultural competency and mental health to community intervention programs
http://www.indigenouspsychservices.com.au

Find a Psychologist: The Australian Psychology Association (APS) ‘Find a Psychologist’ service assists you to find a psychologist to suit your needs. Referrals are drawn from a data base of more than 2,600 APS registered psychologists around Australia. APS provide an online search, telephone service and email referral service to the general public, GPS and other health professions.

RAPE AND SEXUAL ASSAULT/ABUSE

Yarrow Place Rape and Sexual Assault Service - 8220 8787 or (rural) 1800 817 421
Emergency medical and counselling services for people who have been raped or sexually assaulted. This is for individuals and families in any type of crisis.

Respond SA: Ph: 04192042 or free call from regional areas on 1800 182 325 or relationships Australia on 1300364277. Provides support to adults who have been subjected to childhood sexual abuse.

STOLEN GENERATION

Link-Up services SA: provides a national network of services supporting and assisting Indigenous people affected by past removal policies in tracing their genealogy and family history and potentially reuniting them with their families. Located at Nunktwarin Yunti of South Australia. Address: 152-160 Wakefield Street, Adelaide SA 5000. Phone: (08) 8223 5217

SUICIDE, AT RISK AND PREVENTION OF SUICIDE

Suicide Helpline Call Back Service - 1300 859 467 – (24/7) - Support for people at risk of suicide, people caring for someone who is suicidal or people bereaved by suicide. Service offers six sessions of 50 minute telephone counselling over a period of up to six months. http://www.suicideprevention.com.au/main/?id=5

WOMEN’S SERVICES

Women’s Health Statewide

Women’s Health Statewide is staffed by administrative workers, bi-cultural and bi-lingual workers, community health nurses, a medical practitioner, project workers and social workers.

Health and information service Ph: 02200600, Women’s Healthline-1300002090 (toll free within SA) and (Rural) 1800182098, Counselling service-(03) 82399000, Free call 1800182098

Women’s Health Service Ph: 1300022222
Appendix 10: Study 1. Published article 1

What's in a name?
Lateral violence within the Aboriginal community in Adelaide, South Australia

Yvonne Clark
Martha Angustianos
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This article presents a thematic analysis of the naming and framing of lateral violence within the Aboriginal community in Adelaide, South Australia. Lateral violence is a relatively under-researched area within the Aboriginal community, yet this term has been applied with little consultation. Interviews with 30 Aboriginal participants examining their understandings of lateral violence identified five themes relevant to the labelling and acceptance of the term 'lateral violence'. By drawing on theories of oppression, social representations, stigma and racism many of the themes indicate the importance and relevance of an overarching label of lateral violence to describe the "infighting" behaviours that have been normalised within the Aboriginal community. Assurance of a label makes the concept of lateral violence tangible and therefore able to be addressed. Despite this labelling, awareness of the concept of lateral violence in Adelaide appears relatively low. Resistance and opposition from the Aboriginal community to lateral violence appear to be associated with the stigma and prejudice attached to 'violence'. Such a word can potentially render all Aboriginal people as intrinsically violent and therefore blameworthy, which can alleviate any responsibility for dealing with this chronic problem in broader society.

Recent understandings of lateral violence in Australian Aboriginal and Torres Strait Islander communities have been influenced largely by Canadian Indigenous interpretations and experiences of lateral violence (Australian Human Rights Commission, 2011b). In a Canadian context lateral violence is believed to exist within many Indigenous communities worldwide with the common causal explanation as oppression, colonisation, racism and intergenerational trauma (Bombay, 2014; Derrick, 2006; Native Women's Association Canada [NWAC] 2015). According to the Native Counselling Services of Alberta (NCSA) (2008) lateral violence is described as the way powerless people covertly and overtly direct their dissatisfaction inward, toward each other, toward themselves and toward those less powerful than themselves.

Some of the behavioural manifestations of lateral violence include gossip, jealousy, blaming others, verbal and physical attacks, sabotage and bullying (BearPaw Media, 2006; Derrick, 2006; Eguy-Wui, 2012; NWAC, 2015). Accordingly such behaviours can be triggered by differing levels of money, social status and education within communities, one's 'blood quantum' and links to culture and physical characteristics such as skin, eye and hair colour. The effects include feelings of shame, blaming masculinity, lack of trust in others, and judgments within communities (Derrick, 2006) as well as physiological signs such as sleep disorders, weight loss or gain, and depression (NWAC, 2015).

In the Australian context this inward dissatisfaction and "infighting" within Aboriginal communities in South Australia (SA) is now also referred to as lateral violence. The literature on lateral violence also signifies colonisation and oppression as contributory factors for lateral violence in the Aboriginal community (AHRC, 2011b; Gorrige, Ross, & Fforde, 2009; Langton, 2008; Wingard, 2010). Colonisation in mainland Australia has been and arguably still is a process whereby Aboriginal peoples and their cultures are fragmented and disenfranchised. Australia's history of colonisation was founded upon draconian and racist laws and policies which acted to
Lateral violence within the Aboriginal community in Adelaide: “It affects our identity and wellbeing”

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Meridy Main 
Retired

Abstract

The term “lateral violence” describes how members of an oppressed group direct their dissatisfaction inward. This paper reports on qualitative interviews with 30 local Aboriginal participants in Adelaide, South Australia. The purpose was to explore understandings, awareness, experiences, and effects of lateral violence. Most participants completed two questionnaires (the Kessler-5 and negative life events scales) in order to gain further insight into their wellbeing and its association with experiences of lateral violence. Overall, four major interpretative themes emerged from interviews: the predominantly covert and insidious nature of lateral violence, the relationship between racism and lateral violence, challenges to identity as acts of lateral violence, and the destructive effects of lateral violence on wellbeing. The wellbeing scales indicated overall that participants’ psychological distress was in the moderate range, with 29% scoring in the high/very high psychological distress range. Many of the participants with high distress levels related traumatic narratives of lateral violence and were exposed to a number of negative life events. It is hoped that by increasing awareness of lateral violence and its effects, this will assist in preventing lateral violence incidences within Indigenous communities.

Keywords: Lateral violence, racism, oppression, identity, wellbeing, trauma

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Introduction

Lateral violence (LV) refers to the ways oppressed and powerless people covertly and