Working with the Stolen Generations: understanding trauma

Providing effective dental services to Stolen Generations survivors
This fact sheet considers challenges for **dental staff in dealing with Stolen Generations survivors**, key points Stolen Generations survivors want dental practitioners to know, and lots of tips including things that are likely to be helpful and those that are best avoided. As with any population group, there is enormous diversity among Stolen Generations survivors, and this fact sheet should be viewed as a starting point only.

**History**

Between 1910 and the 1970s approximately one in ten Aboriginal children were stolen from their families, communities and cultures and placed in institutions or adopted by non-Indigenous families. The removals were racially motivated, designed to assimilate Aboriginal people. They occurred under government policies of the day. The 1997 Bringing them Home report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families documents the stories of many survivors.

On top of the grief and suffering caused by their removal, stolen children were often subjected to harsh and degrading treatment including abuse, exploitation and racism. Many were also denied education.

The trauma of these experiences continues to affect Stolen Generations survivors, their descendants and communities today.

**11%**

of Aboriginal and Torres Strait Islander people born before 1972 were removed from their families

<table>
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<tr>
<th>Jurisdiction</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Western Australia</td>
<td>24%</td>
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<tr>
<td>South Australia</td>
<td>16%</td>
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<td>Other jurisdictions</td>
<td>11-13%</td>
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Current reality

Many Stolen Generations survivors have experienced lifelong physical, mental and economic disadvantage as a result of their removal – even compared to other Aboriginal and Torres Strait Islander people. In many cases this trauma has also been unintentionally passed on to children and even grandchildren, affecting multiple generations. Trauma survivors often find things that happen in their daily lives can trigger distressing memories or reactions related to the original trauma. Triggers are very personal and affect different people in different ways. They can occur at any time and trauma survivors often don’t know what will trigger them.

Common triggers for Stolen Generations survivors include anything that reminds them of childhood trauma, including:

- clinical settings resembling an institution they were placed in as a child
- a tone of voice, such as a person projecting authority
- a look on someone’s face or a gesture
- any situation that brings back feelings of the lack of control Stolen Generations survivors experienced when they were taken from their families.

Stolen Generations survivors who develop dementia may experience terrifying flashbacks to their childhood, which they are unable to distinguish from reality. Aboriginal and Torres Strait Islander people are three to five times more likely to develop dementia than non-Indigenous Australians\(^1\), and rates of dementia are believed to be even higher among Stolen Generations survivors as a result of the trauma they experienced\(^2\).

When interacting with Stolen Generations survivors and their families, it’s helpful to recognise the trauma many people carry, and how people’s behaviour can be a symptom of distress.

A basic level of trauma awareness training is recommended for all staff dealing with Aboriginal and Torres Strait Islander people, especially Stolen Generations survivors.

Poverty

As a result of the lifelong physical, mental and economic disadvantage commonly experienced by Stolen Generations survivors combined with their ageing status, many rely on the aged pension or other forms of income support. This can affect where and how often they access dental treatment, and affect dental health.

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2. Childhood Stress and Adversity is Associated with Late-Life Dementia in Aboriginal Australians: https://www.ncbi.nlm.nih.gov/pubmed/28689644
Communication

Many Stolen Generations survivors find it difficult to talk about being a stolen child, as it may cause them to re-experience trauma. It is important to be guided by the patient on whether they want to talk about their past, and how much they want to reveal. When Stolen Generations survivors do share their stories, the details may come out in stages, depending on the circumstances and how comfortable the person feels.

It can be particularly distressing for Stolen Generations survivors to be asked to retell their stories, for example to different staff members. This should be avoided. See ‘How you can help’ below for suggestions.

Stolen Generations organisations and other advocates often act as custodians of people’s stories, reducing the number of times survivors need to retell them which can repeatedly act as a trigger. Such advocates often support survivors in a range of ways, including at appointments.

If Stolen Generations survivors feel stressed, including as a result of being triggered, they may not be able to provide even basic information or answer questions. This can lead to people backing away from triggering situations altogether.

The best way to prevent this or address it is to ensure that wherever possible the environment doesn’t remind people of an institution (see tips below and throughout this fact sheet), and attempt to make people feel as comfortable as possible.

It can also be difficult for Stolen Generations survivors to speak up about their needs and concerns because as children they were often punished for speaking up, or only told what to do and never learned this important skill. If you notice a Stolen Generations survivor is not speaking up about something that might be affecting them, you may like to encourage them to do so if they feel comfortable.

Documentation/instructions

Many Stolen Generations survivors were denied education as children, which in turn affected their ability to access educational opportunities later in life. Many also have physical and/or cognitive disabilities. This means it may not always be easy for them to complete lengthy forms or read written information provided (e.g. oral health fact sheets). Past trauma can affect people's ability to process and retain information.

As a result of the inadequate, inappropriate or false records kept about them as children, many Stolen Generations survivors are apprehensive about what is written down about them in a contemporary context. It is important to be mindful of the language used when writing about Stolen Generations survivors and be prepared to show people what you have written about them and make changes/additions at their request.

Next of kin

As a result of their forcible removal as children, Stolen Generations survivors may not be connected to their biological families or communities of birth. Instead, other survivors may be their families.

Stolen Generations organisations and other advocates play a key role in supporting survivors, particularly for people who do not have family nearby.

It’s important not to make assumptions about who the decision maker might be for a Stolen Generations survivor, and to respect their choices about who their information is shared with.

Confirmation of Aboriginality

As a result of being removed from their families as babies or children, and inadequate/non-existent records, it’s not always easy for Stolen Generations survivors to prove their Aboriginality. Being asked to do so can be extremely distressing for people who never had the opportunity to reunite with their family, or are grieving their forced removal from community and culture.

This has been especially challenging for some Stolen Generations survivors with fair skin, whose cultural and spiritual identity may be questioned by people who don’t understand the diversity among Aboriginal and Torres Strait Islander people.

If your practice/organisation requires patients to provide proof of Aboriginality for any purpose, you may like to consider changing this policy or at the very least providing exemptions for Stolen Generations survivors, to avoid causing them any additional distress or trauma.

Advocates may include a trusted relative or friend, or a counsellor or other staff member from an organisation that has previously supported the survivor.
Discrimination and racism

Despite laws banning discrimination on the basis of race, age and disability (among others), racism and discrimination continue to affect many Aboriginal and Torres Strait Islander people regularly. This can have a devastating impact, increasing shame and distress, especially when compounded by previous trauma.

Dentists are encouraged to ensure policies and procedures are in place to prevent racism and discrimination within the workplace, Aboriginal and Torres Strait Islander cultural awareness/safety training is undertaken and clinical practice facilities and services are welcoming and appropriate for Aboriginal and Torres Islander patients.

Stolen Generations and dental care

Given the diversity of Aboriginal and Torres Strait Islander people including Stolen Generations survivors, many dental practices may have Aboriginal patients and not be aware that they are Aboriginal.

Many Aboriginal and Torres Strait Islander people, including Stolen Generations survivors, fear visiting the dentist after hearing ‘horror stories’ from decades ago. Consequently, they commonly demonstrate problem-based patterns of attendance.

As a result, visiting the dentist is often a stressful experience and may act as a trigger for Stolen Generations survivors.

Some survivors may be so anxious in situations with a perceived authority figure, such as a dentist, that they are unable to sit through a consultation and have to leave.

The perceived feeling of vulnerability and lack of control within the dental chair (not being able to speak or move), can remind Stolen Generations survivors of the way they were treated as a child and may trigger trauma.

Seeing a dentist can be a particularly difficult experience for Stolen Generations survivors if they have been sexually abused.

Touch

The trauma Stolen Generations survivors experienced as children may manifest as being uncomfortable with people touching them or their belongings.

It is essential to ask Stolen Generations survivors for permission before doing anything that involves touch, including the regular dental practice of placing a hand on a patient’s shoulder in an attempt to reassure or comfort them.
How you can help

- Ensure all staff dealing with Aboriginal and Torres Strait Islander patients receive basic education regarding trauma and how it affects people (or at the very least have read this fact sheet). This can help in understanding the symptoms of trauma, and why people may be behaving in particular ways.
- Talk to Stolen Generations survivors about their individual needs (which may vary significantly from person to person).
- Respect people's choices, particularly regarding touch, and consider alternative arrangements if a Stolen Generations patient is uncomfortable.
- Use plain English and give clear explanations that are tailored to people's needs and level of understanding and education. For example, consider demonstrating oral hygiene techniques rather than providing written information.
- Explain the process and actions involved in a dental appointment before, during and after treatment. Not understanding what is happening or feeling a lack of control over the process can remind people of the way they were treated as a child.
- Frame directions as suggestions wherever possible, such as 'If you're happy to take a seat in the chair we can have a look at what's going on' (if a Stolen Generations survivor feels like they're being told what to do – often by someone projecting authority – this may remind them of being forcibly removed from their families or being institutionalised as a child).
- Where possible, allow additional time for consultations with Stolen Generations survivors.
- Consider whether someone may need support during an appointment and be flexible in considering alternatives to make the process as simple and straightforward as possible.
- Use discretion when asking people about traumatic experiences, recognise where they are in their healing and be guided by each person about how much they share at any time.
- If people do share their stories, consider how this can be recorded or shared with other relevant staff with the permission of the Stolen Generations survivor (perhaps by seeking permission to include it in the person's dental records/notes), to prevent them having to go through it all again with someone else.
- As many Stolen Generation survivors have often had inadequate, inappropriate or false records kept about themselves and their families, it is important to be mindful of the language used and include survivors in preparation of any written documentation – this may include showing people what you have written about them and making changes/additions at their request.
• Consider adding a tick box to new patient forms asking if the person is a Stolen Generations survivor. This provides an easy way for survivors to identify themselves without engaging in a potentially triggering conversation.

• Ensure people know their rights and encourage them to speak up if these are not being respected and ensure they feel supported doing so. For example, who to go to and what the process is if they need to make a complaint. Many Stolen Generations survivors were punished for speaking up as children, which can continue to affect them as adults.

• Let people know that their privacy will be protected; this is part of building trust

• Build partnerships with trusted third parties such as local Stolen Generations/Link-Up organisations and Social and Emotional Wellbeing Counsellors to better support Stolen Generations patients.

• Ensure policies and procedures are in place to prevent racism and discrimination, call out racist attitudes and discriminatory behaviours wherever they occur, and share your knowledge about trauma and its impact on Stolen Generations survivors.

• Ensure facilities and services are culturally friendly. For example, incorporate cultural awareness/safety requirements into policy and training materials or include an Aboriginal flag or piece of artwork within your practice. If your practice has a Reconciliation Action Plan this could be amended to specifically mention Stolen Generations survivors.

• Encourage all staff dealing with Aboriginal and Torres Strait Islander patients to undertake Aboriginal and Torres Strait Islander cultural awareness/safety training specific to the local area. For example, it is important to understand the impact of Sorry Business on Aboriginal and Torres Strait Islander people and communities (e.g. missing appointments).

• If possible, employ Aboriginal and Torres Strait Islander staff with an understanding of the trauma affecting Stolen Generations survivors. This includes those in administration roles, dentists and other dental staff.

4 Counsellors funded to support Stolen Generations survivors
5 For contact details visit https://healingfoundation.org.au/stolen-generations/support/

• Shining torches in people’s eyes – this is particularly important to consider when using loupes with a bright light or the overhead light attached to the dental chair. It would be helpful to ask Stolen Generations survivors for permission before using these, and let them know that while the lights are designed to shine in people’s mouths they can sometimes shine in a person’s eyes accidentally.

• Making assumptions. For example about people’s needs and their level of literacy (including health literacy), where they are at in their healing, who the decision maker might be for them, and who they would like their information shared with.

• Requiring proof of Aboriginality (or at least providing exemptions for Stolen Generations survivors).

• Using medical jargon or acronyms – in general this can be alienating, and many Stolen Generations survivors were denied an education.

• Shouting, purposefully talking slowly or right in a person’s face based on assumptions about their ability to understand.

• Using reflective practice, which is often taught as an element of active listening. Summarising statements such as ‘what I’m hearing from you is...’ can make Stolen Generations survivors feel like they’re having to repeat their stories and can sound patronising.

• Making negative statements that dismiss people’s trauma and grief e.g. ‘move on’.
Further information

To view these documents visit https://healingfoundation.org.au/working-stolen-generations/

For more information about trauma and its impacts, view our resource on Coping with the Impacts of Trauma.

To learn more about the specific needs of Stolen Generations survivors aged 50 and over, view our resource Aboriginal and Torres Strait Islander Stolen Generations aged 50 and over.

For further information about the health and social impacts of the Stolen Generations policies on survivors and their descendants, check out the Australian Institute of Health and Welfare's analysis.

For information about the ongoing impact of Intergenerational Trauma view the Australian Institute of Health and Welfare Children’s report.

Find out more about trauma and healing terms for Aboriginal and Torres Strait Islander people in our Glossary of Healing Terms.

*This material has been developed in collaboration with Stolen Generations survivors.*