

## Aboriginal community-controlled art centres

### Keeping Elders strong and connected. Articulating an ontologically situated, intergenerational model of care

Mackell, Paulene; Squires, Kathryn; Cecil, Jessica; Lindeman, Melissa; Fraser, Scott; Malay, Roslyn; Meredith, Maree; Young, Michelle; Nargoodah, Lynley; Cook, Belinda; Schmidt, Chrischona; Dow, Briony; Batchelor, Frances

*Published in:*

Australasian Journal on Ageing

*DOI:*

[10.1111/ajag.13178](https://doi.org/10.1111/ajag.13178)

Published: 01/06/2023

*Document Version*

Publisher's PDF, also known as Version of record

[Link to publication](#)

*Citation for published version (APA):*

Mackell, P., Squires, K., Cecil, J., Lindeman, M., Fraser, S., Malay, R., Meredith, M., Young, M., Nargoodah, L., Cook, B., Schmidt, C., Dow, B., & Batchelor, F. (2023). Aboriginal community-controlled art centres: Keeping Elders strong and connected. Articulating an ontologically situated, intergenerational model of care. *Australasian Journal on Ageing*, 42(2), 293-301. <https://doi.org/10.1111/ajag.13178>

#### General rights

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.



- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal

#### Take down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

**RESEARCH ARTICLE**

# Aboriginal community-controlled art centres: Keeping Elders strong and connected. Articulating an ontologically situated, intergenerational model of care

Paulene Mackell<sup>1,2,3</sup>  | Kathryn Squires<sup>1</sup> | Jessica Cecil<sup>1</sup> | Melissa Lindeman<sup>3,4</sup> | Scott Fraser<sup>1</sup> | Roslyn Malay<sup>5</sup> | Maree Meredith<sup>6,7</sup> | Michelle Young<sup>8</sup> | Lynley Nargoodah<sup>9</sup> | Belinda Cook<sup>9,10</sup> | Chrischona Schmidt<sup>11</sup> | Briony Dow<sup>1</sup> | Frances Batchelor<sup>1</sup> 

<sup>1</sup>National Ageing Research Institute, Melbourne, Victoria, Australia

<sup>2</sup>School of Design, RMIT, Melbourne, Victoria, Australia

<sup>3</sup>Charles Darwin University, Faculty of Health, Alice Springs, Northern Territory, Australia

<sup>4</sup>Molly Wardaguga Research Centre, Charles Darwin University, Alice Springs, Northern Territory, Australia

<sup>5</sup>The University of Western Australia, Medical School, Broome, Western Australia, Australia

<sup>6</sup>Poche Centre for Indigenous Health SA + NT, Flinders University, Alice Springs, Northern Territory, Australia

<sup>7</sup>University of Canberra, Canberra, Australian Capital Territory, Australia

<sup>8</sup>Tjanpi Desert Weavers, Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council, Alice Springs, Northern Territory, Australia

<sup>9</sup>Mangkaja Arts Resource Agency, Fitzroy Crossing, Western Australia, Australia

<sup>10</sup>BC Consulting, Broome, Western Australia, Australia

<sup>11</sup>Ikuntji Artists, Haasts Bluff, Northern Territory, Australia

## Correspondence

Paulene Mackell, Faculty of Health, Charles Darwin University, Alice Springs, Northern Territory, Australia.  
Email: [paulene.mackell@cdu.edu.au](mailto:paulene.mackell@cdu.edu.au)

## Funding information

The Australian Government; Dementia Australia Research Fund; Australian Association of Gerontology Research Trust

## Abstract

**Objective:** To articulate how Aboriginal community-controlled art centres support the role of Elders and older people within an ontologically situated, intergenerational model of care.

**Methods:** In this paper, we draw on stories (data) generated through interviews involving 75 people associated with three Aboriginal community-controlled art centres and field notes taken during a Participatory Action Research (PAR) study. The study was undertaken in collaboration with three community-controlled art centres and two aged care providers over almost 4 years, in diverse Indigenous sovereignties, all located in geographically remote Australian locations.

**Results:** Engaging with decolonising and Indigenous theoretical frameworks, our analysis identified three interwoven meta-themes. These include connection to law and culture; purpose; and healing. Each theme had important subthemes, and all were central to upholding the well-being of older people and their families, as well as the art centre workforce, Country, and their broader communities.

This is an open access article under the terms of the [Creative Commons Attribution-NonCommercial-NoDerivs](https://creativecommons.org/licenses/by-nc-nd/4.0/) License, which permits use and distribution in any medium, provided the original work is properly cited, the use is non-commercial and no modifications or adaptations are made.

© 2023 The Authors. *Australasian Journal on Ageing* published by John Wiley & Sons Australia, Ltd on behalf of AJA Inc.

**Conclusions:** Our analysis articulates an ontologically situated model of care within Aboriginal community-controlled art centres. The model sees that older people receive care from art centres and provide care to each other, to younger generations, to art centre staff, to Country, and to their broader communities. In this model, those in receipt of care, many of whom are older people, art centre directors, and important artists, govern how care is conceptualised and delivered.

#### KEYWORDS

Aboriginal and Torres Strait Islander Peoples, art centres, Australia, decolonising, First Nations, Indigenous, intergenerational, model of care, older people, participatory action research

## 1 | INTRODUCTION

Older Aboriginal people play vital roles in promoting well-being within their communities.<sup>1-4</sup> These roles are practised through connecting with, caring for and mentoring younger generations<sup>1-4</sup>; safeguarding identity; passing down knowledge<sup>1</sup>; healing; seeking balance between health services and their community's foundations<sup>3</sup>; and nurturing the cultural,<sup>3</sup> social, and emotional aspects of well-being.<sup>4</sup> Decolonising occupations<sup>4</sup> and programs<sup>1,5</sup> to better reflect the cultural obligations of older people and reinforce community well-being requires the ongoing attention of researchers, policy makers and funders.<sup>1,3,5-7</sup> Adding to this work, our Participatory Action Research (PAR) study explored how three Aboriginal community-controlled art centres support the role of older people, Elders, and people living with dementia. Although the study included aged care providers, this paper analyses stories shared by those associated with the art centres.

There are about 90 Aboriginal and Torres Strait Islander community-controlled art centres, with approximately 30% of artists over the age of 55 and potentially eligible to receive aged care services.<sup>8</sup> We use “art centre” to describe organisations operating in Australia owned and controlled by Aboriginal and Torres Strait Islander peoples, where the principal pursuit is facilitating the production and marketing of arts and crafts. Art centres are diverse, with the majority in geographically remote areas. Creative practices include painting, weaving, woodwork, ceramics, and textiles. Central to these practices is the exercising of each artist's authority, responsibility, and relationship to their Country.<sup>9</sup> Previous studies have identified the social, cultural, economic,<sup>8,10,11</sup> and health-promoting benefits of art centres.<sup>12</sup> Although little is known about how art centres support people living with dementia,<sup>8</sup> a recent national survey identified they provide older people with substantial day-to-day care and collaborate with

### Policy Impact

Australian Aboriginal community-controlled art centres keep older people strong and connected within a reciprocal, relational, and intergenerational model of care. Emerging from and responsive to each Country, the model prioritises law and culture, purpose, and healing. The model could help to meet recommendations from the Royal Commission into Aged Care Quality and Safety.

### Practice Impact

This study presents an opportunity to better recognise, learn from, and resource the role Aboriginal community-controlled art centres play in supporting the health and well-being of community members across the life-course. This could include resourcing and piloting partnerships between art centres, aged care, and other care providers.

health and aged care services.<sup>6</sup> The survey indicated that art centres could play a role in responding to recommendations from the Royal Commission into Quality and Safety in Aged Care.<sup>13</sup> Building on this emergent evidence, our study engages with decolonising and Indigenous theoretical frameworks<sup>14-16</sup> to highlight an ontologically situated model of care within art centres. The relational, reciprocal, and intergenerational model emerges from and is responsive to each centre's Country, (hi)story, and contemporary context. Foregrounding Indigenous scholarship,<sup>14-16</sup> we articulate a locally responsive, intergenerational, and healing-centred<sup>7</sup> model that reconceptualises “person-centred” care as “caring for Country.”<sup>17</sup>

## 2 | METHODOLOGY AND METHODS

We, the authors, are employed by participating art centres and academic institutions and have diverse heritages and relationships with the three participating art centres. Author 6 identifies as a Yurriyangem Taam Kija woman and dementia-care researcher who has strong connections with one centre; Author 7 is a Bidjara woman and researcher who has generated knowledge with art centres in central Australia. Author 9 is a Walmajarri Nyikina woman, senior arts worker, curator, and board member of one of the participating centres. The remaining authors are White, with European heritage and various degrees of pre-existing relationships with each other and the centres. Our expertise includes Indigenous methodologies, health and ageing, arts practice, anthropology, archaeology, community development, history, science, social work, and physiotherapy.

Our collaboration was established by Author 1, a White Irish-born woman, social worker and researcher, living on Wurundjeri Country, and enabled through relationships she developed over several years in research, health care, and Aboriginal arts roles. The three art centres represent diverse sovereign nations of the Pintubi-Luritja peoples of Ikuntji Artists; Bunuba, Walmajarri, Gooniyandi, Wangkajunka and Nyikina peoples of Mangkaja Arts Resource Agency; and Ngaanyatjarra, Pitjantjatjara, Yankunytjatjara peoples of Tjanpi Desert Weavers. Each centre wished to generate and share evidence of the holistic ways they support older people. Ethical approval of the study was granted by four Human Research Ethics Committees: Aboriginal Health Research Ethics Committee (ID: 04–17-742); Central Australian Human Research Ethics Committee (ID: CA-17-2986); Western Australian Aboriginal Health Ethics Committee (ID: 829); Western Australian Country Health Services (ID: RGS 915).

Conscious of the harm researchers have inflicted on Aboriginal communities, PAR was chosen to align with principles of self-determination and reinforce social and emotional well-being.<sup>18–20</sup> All involved were positioned as co-researchers and the cyclical knowledge-making process was responsive, reflexive and negotiated during field trips and in the study's project, methodology, and advisory meetings.<sup>21</sup> We use the term “co-researcher” to describe researchers associated with the art centres, and “visiting co-researchers” for those employed by academic institutions.

Visiting Aboriginal (Authors 6, 7) and non-Aboriginal co-researchers (Authors 1–5, 12, 13), all of whom except Author 5 identify as female, were invited by the Boards of the three centres to listen, learn and develop an understanding of the centres' daily routines and rhythms. Co-researchers (Authors 8, 9, 10, 11) prepared their centres

and with Elders, determined the right time and way to proceed.<sup>19</sup>

Enacting reciprocal and relational ways of knowing, being and doing,<sup>14–16</sup> visiting co-researchers provided transport, helped older artists with shopping, and supplied, prepared, and shared food at the centres. semi-structured individual and group interviews were undertaken (Authors 1, 5, 6, 7) with 75 people associated with three art centres. Recognising art centres had many competing demands, decision-making processes were guided by local protocols, and interviews were conducted at a time and place of their choice, usually amidst day-to-day business.<sup>22</sup>

Co-researchers, including Elders, invited their colleagues and kin to share their story and organised interpreters for those who chose to speak in their first language. Interviews were conducted between June and December 2018, took between 20 and 90 min, and were digitally-recorded and transcribed in English by Author 3 and Queensland-based Smart Docs Transcription Services. Visiting co-researchers often sat on the ground, side-by-side with artists and staff, gained informed consent, and referred to a broad set of questions. Co-researchers also invited colleagues from nearby art centres to participate. Visiting co-researchers made field notes after interviews and noted that the co-researchers had multiple roles, with 50 people identifying primarily as artists and 25 primarily as art centre staff or stakeholders. Visiting co-researchers also observed their co-researchers included people who were aged in their twenties up to their eighties, and that several were receiving community aged care services or were residing in residential aged care.

When visiting co-researchers identified that no new themes were emerging, they proposed ceasing interviews to Elders. Elders directed they continue, so those who wished to share their stories could continue to do so. Enacting Elders' wishes disrupted norms where “data collection” is finalised once saturation or no new themes are identified.<sup>23</sup> This decision extends recent debates regarding saturation<sup>24</sup> by reorientating to Indigenous sovereignty and decolonising Western research practice.<sup>14–16,25</sup> It led to additional field trips, 60% more people being involved than anticipated, and a richer qualitative story.

Transcripts were entered into NVivo12, coded, and analyzed by pairs of visiting Aboriginal (Authors 6, 7) and non-Aboriginal co-researchers (Authors 1–5, 12). Six visiting co-researchers had some experience in qualitative analysis (Authors 1–3, 5–7) and two had extensive experience (Authors 4, 12). Most transcripts were coded independently and discussed in pairs, with an iterative inductive analysis identifying themes.<sup>23</sup> Informed by Indigenous theoretical and methodological scholarship, the analysis emphasised an holistic, reciprocal, and relational interpretation<sup>14–16</sup>

and was strengthened through critically reflexive dialogue with co-researchers.<sup>19–21</sup> A preliminary analysis was presented at a participatory action research workshop in March 2019, where themes were further explored and endorsed.

### 3 | LESSONS LEARNT (RESULTS)

Three meta-themes, each with important subthemes, were identified to describe the vital role of older people within a relational, reciprocal, and intergenerational model of care. The themes—connection to law and culture, purpose, and healing—are best understood as interwoven and interdependent. Themes are illustrated using quotes from co-researchers attributed by their primary role in relation to the study, and observations from the field notes of visiting co-researchers.

#### 3.1 | Connection to law and culture

Art centres are grounded in the cultural protocols of their specific sovereignties. Subthemes include the role of older people in governance, holding knowledge, and the art centre enabling people to “be who they are.”

##### 3.1.1 | A place to practice governance

The art centres were established by Elders for their communities, many of whom sit on the boards of their respective centres. Elders are at the helm of each centre's strategic vision, often present every day, guiding the implementation, and being recipients of these decisions.

One Elder, who is an art centre director and a senior artist, explained her role as:

Lots of helping. Give them a hand and go to meeting, lots of things.

(Artist, Elder, Director)

Art Centre staff emphasised that the role of older people was embedded within the model itself:

Of course, the [artists] particularly are going to be pleased with our organisation, their organisation, because it's acting and responding to and consistent with the operating rhythm of Aboriginal culture, because cultural acumen is an incredible component of our governance acumen.

(Senior Art Centre Stakeholder)

There is local staff that make sure old people are being looked after and that's a very large part of what [our centre] does as core business and what the directors want is to support culture and old people throughout everything they do as an organisation.

(Art Centre Staff)

Visiting co-researchers observed that the centres prioritise implementing this governance. Examples included providing transport, remunerating board members, organising interpreters, preparing materials that reflect oral languages, and extensive preparation to enable older artists attend meetings held on Country.

##### 3.1.2 | A place to hold knowledge

The subtheme of older people and Elders as “knowledge keepers” was identified as fundamental:

We have a very rich cultural heritage on our land. We refer to this as ‘Tjukurpa pulka’. Our old people held this cultural heritage well... They were holding it... The Tjukurpa is not open to all, but they were looking after it, retaining it, keeping it strong, thinking about it, holding it, keeping it present...

(Artist, Elder)

The [artists] are doing what they love and they are drawing on knowledge and legacy, their custodianship. And it's thousands of years, it's not just their living memory.

(Senior Art Centre Stakeholder)

The artists come from inaccessible terrain, Country. And the art that they do... brings them closer to home. And it relieves that part of the memory. What home was, what home is, what home should be.

(Art Centre Staff, Artist)

##### 3.1.3 | A place to be and belong

Art centres were often viewed by older people as a place to be and belong:

Oh, we like it because it's nice and quiet and there is no humbug, you can concentrate here, do your painting. And then you've got people to talk to, sit down and talk to, we just

yarn a lot and do our painting. It's good. We love coming to this place.

(Artist, Elder)

Make me feel good when I paint my Country.

(Artist, Elder)

Visiting co-researchers noted that the centres employed a predominantly local workforce, who knew the artists, their (hi) stories and families. Younger staff were often emerging artists.

### 3.2 | Purpose

The art centre provides a sense of purpose for older artists, with subthemes of teaching and learning; routine, important work, and income; and continuing and creating a legacy.

#### 3.2.1 | Teaching and learning

The art centre is a place of intergenerational connection. Creative practices, such as painting or weaving, were rarely separated from the priority of teaching and learning through watching and listening to stories. This was noted as a vital role of older artists, who had learnt from their “old people” who have passed away:

I like learning young people... niece, nephew, family, they can come and look... make them happy, make me more proud.

(Artist, Elder, Director).

We learn when they talk stories. We sit down and listen to the old people talking and we learn. Yuwa [yes]. And we want to learn that young people, family.

(Artist, Elder, Director)

And they're the ones that like teaching us for law and culture.

(Artist)

A central aspect of the model is its pedagogical framework, which is informed by local ways of knowing, being, and doing:

They take notes in their head, not on a pen and paper... It's not looked at as an instruction book, you know or a lesson in school. It's not a class. It's not noticed as that, like the kids just grow into it. Learning, you know and Elders just continuously doing that.

(Art Centre Staff, Artist)

#### 3.2.2 | Routine, important work, and income

Many artists described their time at their art centre as culturally important work, with the ability to earn an income noted by staff and artists. One staff member also stated the centre gave her ‘a reason to get out of bed in the morning’:

...lot of old people, they still work in here... [they] come in every morning... nothing to do out there.

(Art Centre Staff, Artist, Elder)

They don't like seeing other family group going hungry.

(Artist, Director, Elder)

I mean, most of our senior artists are funding their families, their grandchildren, you know, everybody.

(Art Centre Staff)

Visiting co-researchers noted that each centre's model includes supporting the management of the older artists' money and exploring opportunities to generate revenue for artists and families.

#### 3.2.3 | Continuing and creating a legacy

Creating a legacy for future generations was a key purpose of the art centres:

...when we go, we need someone to step in our shoes, to make it better, stronger, keep it going.

(Artist, Director, Elder)

Because if it wasn't for my old people, I wouldn't have a job here... There would be nothing.

(Art Centre Staff, Artist)

I'm doing for my future, for my grandkids and for my son and my nephew and niece, so they can understand.

(Artist, Elder)

### 3.3 | Healing

The third meta-theme is the art centre as a place of healing, and includes the sub-themes: social and emotional well-being; a safe place; and being with Country.

### 3.3.1 | Social and emotional well-being

The centres were described as a place that nurtures the social and emotional well-being of artists:

Good for your mind... good to learn... in a quiet way... Because we was losing a lot of families.

(Artist)

So, you can talk about the benefits, health benefits and mental health benefits, and we absolutely agree that's what [our centre] provides... to senior [artists] who are suffering in their senior years, because it draws on who they are and who they want to be.

(Senior Art Centre Stakeholder)

So, any problem, what problems in community they have, they talk about it. It's a good place, like, if you've been going through a lot of trauma and you've gone to [the centre], you can relax, it's like place where you relax your mind... you can forget about any problems.

(Artist, Director, Elder)

### 3.3.2 | A safe place

Art centres indicated they worked hard to be a "safe place" that was responsive to older artists:

[The centre] is a safe space, there is food, there is always cups of tea; we always make sure old people are comfortable.

(Art Centre Staff)

Keeping spirit strong, telling story of Country. We help with meals and laundry, medication, medicine. Even money story and stuff, Centrelink, like the art centre is good to help all the old people for all that stuff... Their own, like business, you know. Like Centrelink, funerals, pay for funerals, help pay for, you know, bills if they need something or family members need help with the payment going somewhere, like getting bus fares.

(Art Centre Staff, Artist)

Local and people you know, they feel trust. Yeah, they feel safe.

(Art Centre Staff, Artist)

Staff noted that responding to the multiple needs of older artists was resource intensive, but saw this as a responsibility within their model:

We don't stop caring for them just because they have gone to aged care... We still see them, and we still feel a sense of responsibility... we want to be there for them in the twilight.

(Art Centre Staff)

I know we can't do everything but we try and help the best we can do and sometimes we are limited due to our funding.

(Art Centre Staff, Artist)

Visiting co-researchers noted that staff provided transport, addressed housing and vehicle concerns, provided personal care, monitored hydration, nutrition, and cognitive and physical function. Staff liaised with artists' families and advocated and implemented care plans with local health and aged care services.

### 3.3.3 | Being with Country

The art centres' model prioritises being with Country:

Going back to Country... when you take them back, they open up. Their spirits are alive, and they're like young men and women out there.

(Artist, Former Director)

We go and collect bush dyes from back to Country, boil them and we do that, yeah. I just love doing it, you know? Yeah, it's relaxing... Once you get started you can't stop.

(Artist, Elder)

Art centre staff members recognised the importance of assisting older artists, particularly those with declined mobility or cognitive function, or those in residential aged care, to be with Country:

Every time I saw her [there], she was surrounded by other women and she was smiling... I think it was really important that she was there. You know, it's her Country.

(Art Centre Staff)

Furthermore, staff were creative in "bringing Country" to those in residential care:

You don't have to take them to camping, you can bring camping to them... I bring back artefacts, that sort of stuff.

(Art Centre Staff, Artist)

### 3.4 | Limitations

The interviews were conducted in English, many with the assistance of an interpreter. Some of the depth and richness may not have been recognised as well as if they had been conducted in the person's first language and translated later. The generation of the PAR methodology, and the analysis of interviews with aged care providers, will be presented in future publications.

## 4 | DISCUSSION

This study aimed to develop an understanding of how art centres support older people and people living with dementia. Critically engaging with decolonising and Indigenous theoretical frameworks,<sup>14–16</sup> we articulate “support” as an ontologically situated model of relational, reciprocal, and intergenerational care. The model emerges from each centre's Country, embedding the vital roles of older people and Elders through upholding law and culture; providing purpose; and promoting healing. While the model operates outside of the context of mainstream aged care funding, it is responsive to the context of communities where chronic illness and functional decline are prevalent,<sup>26–28</sup> and often includes those living in residential aged care.<sup>6</sup>

Situated within Indigenous ways of knowing, being and doing,<sup>14–16</sup> the model reorientates from mainstream models of aged care that assess *consumers'* eligibility for services based on an individual's age and functional disabilities. Instead, it emphasises interdependence of Country and people, old and young, artists and staff, art centres and communities. Given mainstream models of aged care have been described as systemically flawed and requiring radical and urgent redesign,<sup>13</sup> our analysis proposes three main points for aged care providers, funders, and policymakers.

First, an arts centre's governance structure is situated within the cultural protocols of the specific Country or sovereignty where it is located, a strength highlighted in an exploration of a Warlpiri model of community-controlled aged care over a decade ago.<sup>29</sup> Older people provide care by keeping culture, language, and law strong, teaching younger generations, supporting their (often large) families through income generation, and in turn they receive care from their centres to uphold these roles. Governance maintains older artists' roles as knowledge

keepers and lifelong learners within their centres, families, and broader communities. These concepts decolonise mainstream understandings of occupations and support the social and emotional well-being of older Aboriginal and Torres Strait Islander Peoples<sup>4</sup> and the well-being of all community members.<sup>30,31</sup>

Strong governance and an Aboriginal workforce have been identified as a preference of older Aboriginal people when accessing aged care services<sup>32</sup> and integral to creating a safe environment to integrate Aboriginal community-controlled aged care with primary health care.<sup>33</sup> We note the art centres have a predominantly local workforce, and the directors are often at their centres on a day-to-day basis, both receiving and delivering care to each other, their workforce, and broader communities.

Second, art centres are not exclusively places for older people, creating space for the purpose of intergenerational connection. Similarly, to studies exploring the roles of older Aboriginal peoples, artists of all ages emphasized the role and purpose of older artists in teaching younger generations through culturally appropriate methods, such as storytelling.<sup>1–4,6</sup> Older artists emphasised that while they have a responsibility and gain great satisfaction from teaching, they too are still learning, which was also raised in a recent study.<sup>4</sup> The art centres facilitate this and enable older people to practice their cultural obligations through everyday occupations as an artist, director, and/or staff member.

Furthermore, staff recognise that responding to physical, cognitive, social and spiritual needs is necessary to create an environment where older people feel comfortable to work. For example, during this study, the work of several artists who were residing in residential aged care featured in a fashion collaboration. This venture saw staff and artists working with younger members of their communities to nurture the health and well-being of existing generations, with the well-being of future generations in mind. The importance of this future and culturally centred focus has been highlighted by Indigenous scholars.<sup>34</sup> While there is interest in developing programs that promote intergenerational connection in aged care<sup>7,35</sup> and calls for decolonising healthy ageing programs,<sup>5</sup> this research is in its infancy. Researchers, providers, funders, and policymakers can learn from art centres who embed this approach.

Third, the art centre as a place for healing, with staff, many of whom were also artists, describing their centre as a safe space. The importance of safety has been highlighted in scholarship exploring the role of older people in the context of historical and ongoing everyday structural racism, economic disadvantage and loss.<sup>1–4,6</sup> Safety is interpreted as time out from daily stressors and those resulting from loss, grief or trauma; to access supports without



judgement; and to be “who they are” where elsewhere colonial and racist norms dominate health, social, education, and justice structures.<sup>5-7,36</sup> Examples of being with Country, or bringing Country to those unable to travel, are critical in nurturing well-being. Crucially, the art centre provides routine ways to practice these roles,<sup>6</sup> and as Elders recently raised, spaces such as these are not always readily available,<sup>1</sup> or in the case of art centres, not formally recognised for their value nor adequately resourced.<sup>6</sup>

## 5 | POSSIBILITIES (CONCLUSIONS)

The ontologically situated model we present is embedded within relational, reciprocal, and intergenerational protocols of each specific Aboriginal sovereignty. The model is a significant reorientation from mainstream models that *deliver* care in the form of a transaction from service providers to individual *consumers*. It reinforces the vital roles and responsibilities of older people, who receive care from staff, and provide care to Country, staff and their broader communities as well as to younger and future generations. The model sees those in receipt of care governing how care is conceptualised and enacted to uphold law and culture, provide purpose, and centralise healing.

This study holds significant lessons and could help to address recommendations made by the Australian Royal Commission into Aged Care Quality and Safety. These include the need for aged care services to centralise cultural safety and connection to Country, as well as integrate with local Aboriginal community-controlled organisations.<sup>13</sup> Our collaboration calls for further work to better recognise and resource the art centres themselves and invest in novel partnerships such as between art centres and aged care providers. This could go some way towards decolonising mainstream approaches to conceptualising and operationalising care across the life-course.

## ACKNOWLEDGMENTS

The authors would like to acknowledge the many Countries throughout what is now known as Australia, on which we live and work. We pay our respects to the First Peoples of these Countries and to their ancestors and Elders past and present. In particular, we acknowledge the Ngaanyatjarra, Pitjantjatjara, Yankunytjatjara Countries and peoples of Tjanpi Desert Weavers, Pintupi-Luritja Countries and peoples of Ikuntji Artists, and Bunuba, Gooniyandi, Walmajarri, Wangkajunka and Nyikina Countries and peoples of Mangkaja Arts Resource Agency for their methodological and ethical leadership during this study. We also acknowledge and thank everyone involved in this study, including members of our Project, Advisory, and Methodology Fidelity Groups for their expertise and

generosity. Open access publishing facilitated by Charles Darwin University, as part of the Wiley - Charles Darwin University agreement via the Council of Australian University Librarians.

## FUNDING INFORMATION

This study was funded with support from the Australian Government, via a Dementia and Aged Care Innovation Grant; the Dementia Australia Research Fund; and the AAG Research Trust.

## CONFLICTS OF INTEREST

The authors declare Professor Briony Dow is an Editorial Board member of Australasian Journal on Ageing. There are no other conflicts of interest.

## DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

## AN INVITATION

We invite you to watch our 20-min film. You will hear directly from artists, Elders, and staff of three art centres, who share the vital role they play in keeping older people strong and connected. Older people are the backbone of the art centres and play a critical role in maintaining intergenerational connection <https://www.nari.net.au/art-centres-supporting-elders-a-good-news-story>.

## ORCID

Paulene Mackell  <https://orcid.org/0000-0003-1506-929X>

Frances Batchelor  <https://orcid.org/0000-0002-7302-7293>

## REFERENCES

1. Busija L, Cinelli R, Toombs M, et al. The role of Elders in the wellbeing of a contemporary Australian Indigenous community. *Gerontologist*. 2020;60(3):513-524. doi:10.1093/geront/gny140
2. Eades O, Toombs MR, Cinelle R, et al. The path to Eldership: results from a contemporary Indigenous Australian community. *Gerontologist*. 2021;62:607-615. doi:10.1093/geront/gnab062
3. Cox T, Hoang H, Mond J, Cross M. ‘It all comes back to community!’: a qualitative study of Aboriginal Elders promoting cultural well-being. *Aust J Rural Health*. 2021;00:1-9. doi:10.1111/ajr.12791
4. Gibson C, Dudgeon P, Crockett J. Listen, look & learn: exploring cultural obligations of Elders and older Aboriginal people. *J Occup Sci*. 2020;27(2):193-203. doi:10.1080/14427591.2020.1732228
5. Coombes J, Lukaszyc C, Sherrington C, et al. First Nation Elders’ perspectives on healthy ageing in NSW, Australia. *Aust N Z J Public Health*. 2018;42(4):361-364. doi:10.1111/1753-6405.12796
6. Mackell P, Squires K, Fraser S, et al. Art centres supporting our Elders— ‘old people, that’s where our strength comes from’

- results from a national survey of Australian Aboriginal and Torres Strait Islander community controlled art centres. *Rural Remote Health*. 2022;22:6850. DOI: [doi:10.22605/RRH6850](https://doi.org/10.22605/RRH6850)
7. Dudley M, Withall A, Radford K. Indigenous communities of Australia and New Zealand. In: Gauthier S, Webster C, Servaes S, Morais JA, Rosa-Neto P, eds. *World Alzheimer Report 2022: Life after Diagnosis: Navigating Treatment, Care and Support*. Alzheimer's Disease International; 2022:107-108.
  8. Lindeman M, Mackell P, Lin X, et al. Role of art centres for Aboriginal Australians living with dementia in remote communities. *Australas J Ageing*. 2017;36(2):128-133. doi:10.1111/ajag.12443
  9. Wright F, Morphy F. *The Art & Craft Centre Story: a Survey of Thirty-Nine Aboriginal Community Art and Craft Centres in Remote Australia, Undertaken by Desart Inc*. ATSIIC; 1999.
  10. Acker T, Woodhead A. The economy of place – a place in the economy: a value chain study of the Aboriginal and Torres Strait Islander art sector – summary report. Ninti One Limited 2015:9. Accessed October 13, 2021. <https://nintione.com.au/resource/EconomyOfPlace/files/assets/basic-html/page-1.html>
  11. Bartleet BL, Sunderland N, O'Sullivan S, Woodland S. Creative Barkly: Sustaining the Arts and Creative Sector in Remote Australia [Australia Research Council Linkage Industry Report]. Queensland Conservatorium Research Center, Griffith University; 2019. Accessed November 10, 2022. <https://research-repository.griffith.edu.au/handle/10072/389763>
  12. Meredith M. *Mapping the Health Promotion Benefits of Art Centres on the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands: an Ethnographic Account*. Flinders University; 2018.
  13. Royal Commission into Aged Care Quality and Safety. *Care, Dignity and Respect. Final Report of the Royal Commission into Aged Care Quality and Safety*. Royal Commission into Aged Care Quality and Safety; 2021.
  14. Rigney L-I. Internalisation of an Indigenous anti-colonial cultural critique of research methodologies: a guide to Indigenist research methodology and its principles. *J Am Stud*. 1997;14(2):109-122.
  15. Smith LT. *Decolonizing Methodologies: Research and Indigenous Peoples*. 3rd ed. Bloomsbury Publications; 2021.
  16. Martin K, Mirraboopa B. Ways of knowing, being and doing: a theoretical framework and methods for Indigenous and indigenist re-search. *Journal of Australian Studies*. 2003;27(76):203-214. doi:10.1080/14443050309387838
  17. McMillan F, Kampers D, Traynor V, Dewing J. Person-centered care as caring for country. *Dementia (London)*. 2010;9(2):163-167. doi:10.1177/1471301210369954
  18. Dudgeon P, Bray A, Darlaston-Jones D, Walker R. *Aboriginal Participatory Action Research: An Indigenous Research Methodology Strengthening Decolonisation and Social and Emotional Wellbeing*. Lowitja Institute; 2020.
  19. D'Antoine H, Abbott P, Sherwood J, et al. A collaborative yarn on qualitative health research with Aboriginal communities. *Aust Indig Health Bull*. 2019;19(2):1-6.
  20. Wright M. Research as intervention: engaging silenced voices. *Action Learn Action Res J*. 2011;17:25-46.
  21. Stringer E. *Action Research*. 4th ed. Sage; 2014.
  22. Dickson G, Green K. Participatory action research: lessons learned with Aboriginal grandmothers. *Health Care Women Int*. 2001;22(5):471-482. doi:10.1080/073993301317094290
  23. Patton M. *Qualitative Research Methods & Evaluation Methods*. 3rd ed. Sage Publications; 2002.
  24. Braun V, Clarke V. To saturate or not to saturate? Questioning data saturation as a useful concept for thematic analysis and sample-size rationales. *Qual Res Sport Exerc*. 2021;13(2):201-216. doi:10.1080/2159676X.2019.1704846
  25. Gilroy J, Dew A, Lincoln M, et al. Indigenous persons with disability in remote Australia: research methodology and Indigenous community control. *Disabil Soc*. 2018;33(7):1025-1045. doi:10.1080/09687599.2018.1478802
  26. Smith K, Flicker L, Lautenschlager N, et al. High prevalence of dementia and cognitive impairment in indigenous Australians. *Neurology*. 2008;71(19):1470-1473. doi:10.1212/01.wnl.0000320508.11013.4f
  27. Radford K, Mack H, Draper B, et al. Prevalence of dementia in urban and regional Aboriginal Australians. *Alzheimers Dement*. 2015;11(3):271-279. doi:10.1016/j.jalz.2014.03.007
  28. Russell SG, Quigley R, Thompson F, et al. Prevalence of dementia in the Torres Strait. *Australas J Ageing*. 2020;00:1-8. doi:10.1111/ajag.12878
  29. Smith K, Grundy J, Nelson H. Culture at the Center of community based aged care in a remote Australian Indigenous setting: a case study of the development of Yuendumu Old People's Programme. *Rural Remote Health*. 2010;10(4):234-248.
  30. Butler TL, Anderson K, Garvey G, et al. Aboriginal and Torres Strait Islander people's domains of wellbeing: a comprehensive literature review. *Soc Sci Med*. 2019;233:138-157. doi:10.1016/j.socscimed.2019.06.004
  31. Garvey G, Anderson K, Gall A, et al. The fabric of Aboriginal and Torres Strait Islander wellbeing: a conceptual model. *Int J Environ Res Public Health*. 2021;18(15):7745. doi:10.3390/ijerph18157745
  32. Larke BM, Broe G, Daylight G, et al. Patterns and preferences for accessing health and aged care services in older Aboriginal and Torres Strait Islander Australians. *Australas J Ageing*. 2021;40(2):145-153. doi:10.1111/ajag.12864
  33. Dawson A, Harfield S, Davy C, et al. Aboriginal community-controlled aged care: principles, practices and actions to integrate with primary health care. *Prim Health Care Res Dev*. 2021;22:e50. doi:10.1017/S1463423621000542
  34. Lowitja Institute. *We Nurture our Culture for our Future our Culture Nurtures us*. The Lowitja Institute; 2020.
  35. Radford K, Oxlade D, Fitzgerald A, Vecchio N. Making intergenerational care a possibility in Australia: a review of the Australian legislation. *J Intergener Relatsh*. 2016;14(2):119-134. doi:10.1080/15350770.2016.1160732
  36. Papps E, Ramsden I. Cultural safety in nursing: the New Zealand experience. *Int J Qual Health Care*. 1996;8(5):491-497. doi:10.1093/intqhc/8.5.491

**How to cite this article:** Mackell P, Squires K, Cecil J, et al. Aboriginal community-controlled art centres: Keeping Elders strong and connected. Articulating an ontologically situated, intergenerational model of care. *Australas J Ageing*. 2023;42:293-301. doi:[10.1111/ajag.13178](https://doi.org/10.1111/ajag.13178)