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The 'growing up' of Aboriginal and Torres Strait Islander children: a literature review

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footprints in time
The Longitudinal Study of
Indigenous Children

2006 Administrative Arrangements Changes
In January 2006 the Office of Indigenous Policy Coordination (OIPC) and the Australian Government Department of Family and Community Services merged to form the Australian Government Department of Families, Community Services and Indigenous Affairs.

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Part 1

The 'growing up' of Aboriginal and
Torres Strait Islander children
What could lead to better futures?

What is this all about?

Longitudinal Study of Indigenous Children

The research literature and reports of government inquiries paint a bleak picture of the health and wellbeing of Indigenous Australians. Among the more damning data frequently cited is that the average life expectancy of Indigenous people is around 20 years lower than for the total Australian population. Couple this with other data on such things as violence and substance abuse, poor living conditions, economic poverty and lower educational achievement and there can be no doubt that things need to change for Indigenous Australians.

The Longitudinal Study of Indigenous Children (LSIC) is an initiative with the goal of contributing to change. The aim of the LSIC project is to use the data it will collect to help develop better outcomes for Indigenous children.

In this review, and in the LSIC project, the term 'Indigenous' is being used to cover all Aboriginal and Torres Strait Islander peoples. While it is acknowledged there are many differences between these peoples, they share a common history of colonisation and dispossession and are the subject of the same Indigenous policies.

Using this report

Much has been written about Indigenous children and their families and not everything was covered in this review. It is a selective rather than comprehensive review. Emphasis was placed on more recent work—in the past fifteen years—and on children and adolescents up to 18 years of age.

During 2003–04, community consultations were undertaken to explore the most culturally appropriate ways for generating the information needed for the LSIC project. In the community consultations, many different questions were asked about the LSIC project and especially about what the communities thought would be good to know. For many of the community questions there are answers, but not all. The unanswered community questions provide a set of topics that could be further pursued in the LSIC project. These unanswered questions are combined with issues raised in Part 2 that indicate further information that would be good to know for the benefit of Indigenous children and their families.

In the community consultations there was also frequent comment that they wanted to know more about the practical and the positive:

▶ *What, if any, are the positives we can enlarge on?*

▶ *What will help us tailor-make programs to suit the children and the communities?*

▶ *Need to focus on what works for us… what is working well now?*

In the literature I reviewed, I kept on searching for positive stories that inspired hope: stories that showed where the strengths lie, where the sources of resilience are, and what good options there may be. These are the stories that show how it can be better. While I did find some, and where I could I have used them to construct more positive stories, there are not enough. It would be good to know more. So in this part I also talk about some of the things it would be good to know more about for the benefit of Indigenous children and their families.

What do we know about the care giving environment?

Health and wellbeing

Questions from the communities

What are the effects of housing, such as overcrowding?
Australian Bureau of Statistics (ABS) data shows many Indigenous people do not have access to the same basic level of housing and essential infrastructure that is taken for granted by most Australians. Remote communities suffer the most. This impacts directly on the physical wellbeing of children and their families.

What are the services and programs available in the community?
Many remote communities have poor access to health services and this has direct consequences for child health.

Even when health services and other programs are available they do not always work as well as they could. In general, services and programs will be effective when they have community involvement/ownership and when they are culturally appropriate for the Indigenous community.

What is the impact of racism and sexism in the community?
Racism has an impact on the children's schooling, often contributing to poor outcomes.

Racism also still seems to be an active, if sometimes less blatant, element in police treatment of Indigenous peoples.

Sexism may be an element contributing to the violence and abuse against Indigenous women. But the far more important reason for this violence is the history of cultural devastation experienced by Indigenous people and the resultant cultural trauma.

How do families deal with sexual and physical abuse?
Many stories tell of shame, silence, fear, and the difficulty of dealing with police and agencies. But there are some stories that show how it might be dealt with better.

What is the impact of drugs and alcohol in the community?
Drugs and alcohol are critical factors in the epidemic of violence and abuse experienced in many communities. This has long-term and far ranging impact on the children, from disruption of stable family life, to neglect and maltreatment.

What is the impact of health and education of parents, and the extended family, on children?
Poor health and low education levels are far more common among Indigenous than non-Indigenous peoples.

This has far ranging effects on the children, from directly affecting their own health to contributing to their own poor educational outcomes.

What is the impact of parents being from the Stolen Generation (see HREOC 1997) or returning from jail?

Having poor parenting skills is one of the more obvious consequences. But being from the Stolen Generation or having been in jail reflects the broader psychosocial problems of a devastated culture that has long-term impacts on the children.

What is the impact of parental separations?

If the separation has been because a parent, and usually the father, has been sent to jail, there is a lack of an appropriate role model for the children and an increased likelihood of the children themselves ending up in the justice system.

What are the issues to do with young fathers as well as young mothers?

Various papers have pointed to the need to consider young fathers as well as young mothers. One of the important issues for both of them is that they are young and may well lack good parenting skills. This would be especially the case if they had not had good parenting themselves because of any number of the traumatic circumstances that have been experienced by Indigenous peoples. The problems of young parents are becoming more important because their numbers are increasing.

But we actually know very little directly about the effect of having fathers involved with parenting or not, as the case may be.

What else may be good to know?

In reading the community questions and in writing the literature review, there were certain things that I thought it would be good to know. It may well be that other things I have not read, or other stories that have not been told, help to understand further. Nevertheless, these are some questions about the care giving environment that may be important for understanding how children can grow up better.

How are things different in alcohol-free communities?

I was particularly struck by this question when I was considering the disruptive influence of heavy drinking by caregivers and other resident kin on children going to school. If there is no alcohol around does it make it easier for the children to participate in school? What are the general school outcomes? It would also be important to know the direct impact of no alcohol on levels of violence and other psychosocial problems in the community at large.

What are the outcomes of good parenting programs?

Some programs have been developed but I know of no outcome data. Do they work? Do the children benefit? How?

Cultural context

Questions from the communities

What is a family?

I think this question is challenging the non-Indigenous idea of a nuclear family and asking how a research project would define it for Indigenous people. In the work

reviewed, it is clear that an Indigenous family is extended, complex and mobile. It is also clear that the best definition of who makes up any particular family will be what the family themselves determine.

What is a community?

This question was asked to challenge the idea of a community model for the project. For many of the people consulted, the notion of community did not capture the more important elements of Indigenous 'groupings'—that is, common kinship and language. The key issue here is that government services and programs apply to communities, whereas social/cultural support comes from kin, or the extended family. But, as with the point about family above, it may be most important to rely on the group's, or community's, definition of itself.

What is the impact of siblings?

Siblings and other younger people in the extended Indigenous family play an important part in child rearing. From an early age, children learn how to be competent in looking after their younger kin. Children are taught to be compassionate and generous and to help and support each other.

What are the child rearing practices and social interactions?

We know some good stories about traditional and semitraditional child rearing practices in different regions in Australia and the Torres Strait Islands that encourage compassion, autonomy, self-reliance and early learning in children. But we also know some not-so-good stories where, for instance, gambling and drinking have become more important than following the traditional law about the 'growing up' of children.

What are the family values and approach to discipline?

From the child rearing stories, we know that in traditional culture family values are strong and well entrenched in law. Some of the stories also show that discipline is not direct, like the white person's way, but more roundabout and teasing. Indeed, punishment is not a traditional way of controlling a child's behaviour.

Other questions answered

What are the differences between communities/groups and what does it mean for the children?

While there are important commonalities in basic cultural beliefs and practices, Indigenous peoples are diverse. Aboriginal peoples and Torres Strait Islanders are different. Other groups vary in terms of their language, and thus, to some extent, ways of talking about and experiencing the world. Groups also vary in terms of their remoteness, with all the implications of access to services. However, there are grounds for not treating remoteness as the major basis for differences in all instances. And there are very good grounds for relying on the communities' self-determination.

What else may be good to know?

How well is the kinship system working in particular kin groups?
The kinship system, with its complex set of obligations and responsibilities, is an integral part of Indigenous culture and an important element in child rearing. As one story from south-west Western Australia put it, it provides a 'ready-made, social service system'.

There is no doubt it can be an important protective factor for children at risk but is it always there or always there as well as it could be within any one group? I ask this especially considering the stories of poor physical and psychosocial health that mean many kin may be ill, die early, are 'self-medicating' on drugs or alcohol, are in jail, or experiencing other disabling consequences of the history of Indigenous cultural devastation.

I also ask this question considering many Indigenous people and families have experienced dislocation from country and may now be far apart. So I wonder, who can the children call on in their own particular kinship system? Is it enough? How could it be better?

What are the community differences that make a difference to child outcomes?
Indigenous groups make a consistently strong point that they are diverse. And some of the differences we understand. But as I was writing the literature review, I kept on wondering about a number of other differences that may or may not matter. These are some of the questions I asked:

◗ We know that remote communities are more likely to live in traditional ways but are there important elements/basic values of these ways still alive and well in urban communities and what impact does it have on the children in that urban environment?

◗ There were some bits and pieces of data and stories that hint at a possible connection between remoteness, the proportion of Indigenous to non-Indigenous children in the school and school outcomes and I wonder if there is something important in this?

◗ Apart from data on child health in Western Australia, I found very little about urban children and their environment and I wonder what else we should understand about this environment?

◗ I also wonder what is the varying effect of racism may be for families in an urban, or even regional, environment surrounded by a non-Indigenous culture compared with families in discrete Indigenous communities?

What do we know about the children?

In early childhood

Questions from the communities

What are the effects of mothers' health on the babies?
The babies of Indigenous mothers are more than twice as likely to die at birth or shortly after and are more likely to have a low birth weight than babies of non-Indigenous mothers. Poor nutrition, alcohol consumption and tobacco smoking directly affect the babies, as does the young age of mothers and poor socioeconomic conditions.

What are the effects of delivering away from the community?
If it is a traditional community, then the opportunity to practise such things as the smoking ceremony may be removed (although some medical facilities, for example, in Alice Springs, do cater for it). On the other hand, it may be important to go away from the community to get appropriate health care.

Who is the most important caregiver for a baby?
In Indigenous families, the care giving role is normally spread over more family members than in non-Indigenous ones, making any non-Indigenous notion of a single primary caregiver meaningless. But it may be useful to ask this question to find out if a granny or aunty has taken over because the parents could not (or would not) fulfil their child care responsibilities.

What is in place to teach young mothers about raising children?
There are a number of effective ante and postnatal programs in different communities across Australia (although probably nowhere near enough) that have been shown to improve health outcomes of mothers and babies. But we know less about programs on teaching general parenting skills.

What are the nutrition issues?
Indigenous children suffer from a number of infectious diseases and have higher rates of malnutrition and failure-to-thrive than non-Indigenous children. Poor nutrition plays an important role in these problems. In the past, lengthy periods of breastfeeding and the gradual introduction of bush foods helped the children to grow strong. However, the lack of bush food in many areas, the poor choices and high food costs at community stores, and the impoverished conditions of many Indigenous families all contribute to poorer health of children.

What are the key things that make a child ready for school?
The most important thing is preschool experience. This can include playgroups, mobile services and multifunctional Aboriginal children's services as well as the more extended form of preschool itself. This preschool experience prepares children for Western school literacy and can have measurable impact on school readiness and educational outcomes in the first few years of school.

What are the differences between Indigenous and non-Indigenous early education centres?
Being run by Indigenous staff, promoting Indigenous culture, and involving parents and the whole community are important elements in effective early education, or preschool, for Indigenous children.

Other questions answered

What are the early learning and language issues?
Children in more traditional communities live in a linguistically complex environment and develop many different literacies in early childhood. However, these children are less likely to have Western school literacy and so may have more difficult transitions to school.

What else may be good to know?

Are there differences in the early learning environments of traditional and less traditional communities and what are the consequences?
I'm curious about a few things here. First, do the children acquire different competencies in the different environments? If so, what is the impact on their early school transition? Second, do the children who speak English at home have an easier transition to school or are broader cultural differences and/or socioeconomic circumstances still hampering performance in the early school years?

The school years and beyond

Questions from the communities

What are the school retention rates?
Attendance at school is a real concern for Indigenous school staff, parents and the communities. Students with poor attendance will perform poorly and will be more likely to leave school early. In 2002, the retention rate for Year 9 was 97.8 per cent, for Year 10 it was just above 80 per cent and for Year 12 it was just under 40 per cent. Not only are these all below non-Indigenous rates, but they are also likely to be overestimates.

Why aren't the children at school?
This is a complex issue, with a number of interrelated reasons. Some of the important factors include the availability and accessibility of schools (especially secondary), mobility, poor parental experience at school, poor health and hunger of children, hearing difficulties, substance abuse and the resultant family disruption, racism at school, and the general quality and relevance of the schooling provided.

What are the learning difficulties and why?
Learning difficulties arise directly because of cultural differences in learning and where there is a need for a transition between home language and English. These cultural problems could well be furthered by the problems listed in answer to the above question. The learning difficulties are reflected in the lower literacy and numeracy levels of Indigenous children from primary school through to Year 9.

How appropriate is the school for the child and what are the support systems? What is the quality of the learning environment provided? What is the effect of having Indigenous culture and language taught?

The evidence strongly suggests that providing an education that is relevant to students—that is, one which addresses and respects issues of Indigenous identity and culture—leads to better outcomes. This also requires relevant teachers—that is, Indigenous or those knowledgeable of Indigenous issues—and teaching practices.

What is the importance placed on education by parents, grandparents and so on? What support is given for going further?

Family and community involvement in Indigenous educational practices is important for better outcomes. If the families value education and are actively involved in it with their children, the children are more likely to continue at school and do well. This is particularly important at the transition point from compulsory to post-compulsory schooling.

Other questions answered

Is Indigenous identity important?

Having a strong and positive Indigenous identity is important to good educational outcomes, but not by itself. The children must also have a positive self-identity as a student.

But it would be good to know more about how a strong Indigenous identity is developed and the consequences for other aspects of a child's/youth's life apart from school.

What other education and training do Indigenous students do?

Despite the odds, some students do go on to obtain a post secondary qualification. There is also evidence that many students are turning from conventional secondary schooling and going into the TAFE system instead.

What are the early labour market outcomes?

Less than half of the youth aged between 15 and 19 years are employed and 30 per cent of the remainder are at risk—that is, unemployed, not in the labour force or attending an educational institution. While Community Development and Employment Projects (CDEP) provide work experience for some, there are mixed views on its value.

What about those at-risk and in trouble?

Indigenous youth are substantially overrepresented in the justice system. While the practice of diverting youth from courts is being used frequently, this varies across jurisdictions and the discretionary power of the police is not necessarily being exercised fairly.

Providing alternative sport and recreational activities for youth could help to divert them from criminal activities but getting them back to school is even better.

What else may be good to know?

What would help parents help their children more at school?
We know that parental involvement and support is important to school progress and performance, but we also know that many parents would have had poor experiences at school themselves and probably left early. What practices would help the parents help the children?

What recreational and back to school programs work best?
The literature only hinted about these being successful and it would be good to know more about the characteristics of programs and interventions that work well.

What about cultural activities?
I did not find any literature discussing the value of involvement by children and youth in cultural activities. It would be good to know about this.

Across childhood

Questions from the community

What is the relationship between child protection orders and the criminal trajectory?
The Royal Commission into Aboriginal Deaths in Custody showed that almost half of the people they investigated had been separated from their natural families through the intervention of the state or other institution. Other studies show that the reasons for the child protection orders in the first place—for example, maltreatment and neglect—is the greater contributor to a criminal trajectory than being in care as such.

What's happening with children in care now and what are the outcomes of Indigenous care placements compared with non-Indigenous?
Far more Indigenous than non-Indigenous children are in care (20:3) and the numbers are growing. There is an increasing use of kin care but there is no evidence that it leads to better outcomes for the children.

How can we stop them going on the wrong track?
This is a question at the heart of things and one so complex that there is no single answer. Today's children are still living with the results of a history of cultural devastation. Because of this, their physical and spiritual environment is replete with risk factors for bad outcomes.

On the other hand, the traditional culture and child rearing practices offer a number of protective factors to prevent bad outcomes. The main issue is how to make the protective factors found in traditional cultural practices outweigh the risk factors that arise from a history of cultural devastation.

Other questions answered

What do we know about resilient children?
We know that traditional cultural practices offer resources for resilience and a close bond with a caregiver and a supportive role model help further. But we should know more about these resilient children and how they find the strength to succeed.

What else may be good to know?

How do children in troubled families manage?
Not all children in troubled families follow the 'criminal trajectory' and it would be good to understand the resources they are able to call on to keep them on the right track.

What might make kin care work better?
The need to help children who are neglected or maltreated is critical and we have to understand how to make kin care work better.

What can we do to assist children onto positive pathways?
While there is much that can be done, it would be good to understand about the more practical and positive steps that could help.

Part 2

The 'growing up' of Aboriginal and
Torres Strait Islander children
What we know from work already done

1 Review framework

But we already know so much

This report was commissioned as a literature review that would support the development of the LSIC project. But the importance of the LSIC project and the breadth and diversity of the literature available provided significant challenges in undertaking this review. My way of dealing with these challenges directly affected what I read and what I wrote.

When I was first asked to do this review, I was told that many people in the community consultations questioned why it was necessary. As they said: '…but we already know so much'.

There is no doubt that there is an enormous amount of research literature and a burgeoning number of government reports on the status and life conditions of Indigenous Australians. And as the review proceeded, more kept on jumping out of the woodwork. Given the time constraints on completing the review and the enormity of the literature available, the review became selective rather than comprehensive. The practical guidelines for selection were:

◗ Coverage was, in the main, limited to work published in the past decade (1994–2003) and to Indigenous children from 0 to 18 years of age, although certain earlier seminal works (for example The Royal Commission into Aboriginal Deaths in Custody Report (Johnston 1991)) were included.

◗ Guidance was given by the LSIC Steering Committee, Design Sub-committee and the State/Territory Government Advisory Group as to the important research to be found in their area of expertise and what were critical pieces of work.

◗ Other major literature reviews or reports of government inquiries were used to provide a broad coverage of material and seminal works mentioned in them were followed up, where appropriate.

This approach did not produce an exhaustive review of the literature but it did provide a broad coverage of major reports and important research.

The enormity of the breadth of literature was matched by the diversity of topic and approach, covering all major people-related disciplines (for example, medicine, linguistics, anthropology) and an array of data gathering methods. Traditionally, in a research literature review, the method of gathering information as well as the information itself would be considered. However, in many of the reports reviewed—especially the reports arising from government inquiries—a description of method was neglected. Rather than rejecting important material, it was decided that the traditional approach would not be followed.

Instead, a major distinction was made between two different approaches to information generation—one generating scientific knowledge and the other, practical knowledge—and efforts were made to ensure that literature reflecting the two different approaches were included as much as possible.

The basis for the distinction and the implications of employing these two fundamentally different methods have been explored by a number of philosophers and researchers in recent times but the particular understandings of the arguments used are based on that found in *Reconstructing communicating: looking to a future* (Penman 2000). This will not be discussed in depth; rather the use of this distinction forms a basis for the purposes of the literature review.

For brevity's sake, scientific knowledge is generated using the familiar scientific methods of the modern Western tradition. The purpose of scientific knowledge is to arrive at abstract generalisations about the true nature of things. In contrast, practical knowledge is generated using a range of participatory methods to arrive at an understanding of how to do things, in local contexts, in particular times.

Once I started to use this distinction in the literature search and review process, it became clear that yes, we do know so much—but only a certain sort of knowledge and from a particular position. We know so much of abstract generalisations from a modern Western scientific perspective. We know far less from a practical point of view that allows insight into the experiences of the different Indigenous communities in Australia and into what may be practically possible for further, and better, action.

Are there different things and ways we could know?

In pursuing the distinction between scientific and practical knowledge, I was struck by the thought that the sensitivity shown by the LSIC project in finding culturally appropriate ways of studying Indigenous children and their life circumstances should also be used in this review. Using data generated from within a Western scientific approach is valuable, especially when it is considered that, for better or worse, it is the dominant paradigm used in the governance of this country. On the other hand, to only use that mode of understanding would be disrespectful to the cultures of the peoples of concern here.

In the Warrki Jarrinjaku report (2002) on early childhood rearing practices there was a pertinent discussion of the inappropriateness of the existing early childhood models of service funding, design, and delivery. The majority of programs are designed by non-Indigenous people, staffed from outside the community and the outcomes judged from a mainstream (non-Indigenous) perspective. The Warrki Jarrinjaku project team believe that if service models respect the cultural integrity of Indigenous communities then health and wellbeing indices for Indigenous people will improve. To do this, there must be 'both ways learning'.

I have taken this idea of 'both ways learning' very much to heart. It captures what this review needs to be orientated to and the direction that the LSIC project should follow. What we need is an understanding and learning from without—the mainstream paradigm—and from within—the Indigenous cultures.

So, yes, there are different things and ways we could know, ones that come from within the understanding of the Indigenous communities. We could also understand

ways of contributing to practical improvements in the quality of life in those communities.

Because far less of the literature reflects the Indigenous voice and far less is from a practical point of view, I have tried to compensate for this by considering what we have not so far heard/read that could be good to know. Thus, throughout this report I have considered the question 'what would be good to know?' These questions were formalised in Part 1 of this report and were guided by questions raised in the community consultations about the LSIC project.

Given all of the above considerations, this literature review slipped out of the conventional frame. It is not an objective, dispassionate critique and summary of the extant literature. Instead, it is a pulling together and a reweaving of mainstream and, where possible, practical, Indigenous understandings to create a different story. It is a story that tries to have it 'both ways'. From the mainstream, scientific, non-Indigenous stance it is a story that captures what we know in the abstract, and what we do know is bleak. From the participatory stance concerned with practical knowledge, it is a very fragmented story but from it I have tried to point to what we understand (or could understand) about the experience of Indigenous peoples and where we may find signs of hope. In the end, it was how we can understand the rich variability of the lived experience of Indigenous people and how this can point to good ways of moving forward for them that acted as the underlying plot for the story told in this report.

2   The broad picture: quality of the care giving environment

Overview

The Centre for Community Child Health (2000) has identified a number of early childhood risk factors that contribute to poor developmental outcomes. These factors relate to the quality of the care giving environment and are influenced by characteristics of the parents, socioeconomic determinants, the level of stress and support experienced by the family, the level and intensity of early learning experiences the child has, parenting style and family functioning, and parental mental health.

This part of this review considers the data available for understanding the care giving environment of Indigenous children. This part paints the broad statistical picture using major Western indicators of health and wellbeing. Many Australian Government inquiries, drawing on such statistical data, have pointed to the 'Indigenous disadvantage' (for example, SCRGSP 2003) but it goes further than this. As Boyd Hunter (1999) shows, Indigenous people are poorer than any other poor Australians in the nature and extent of destitution experienced in much of their community. They are poorer not only in income terms but also in terms of access to adequate health care, housing and justice.

Even though the picture painted from the statistical data suggests a bleak outcome for Indigenous children, other information offers hope for the role of 'protective factors' (Centre for Community Child Health 2000). Identification of these potential protective factors comes from a consideration of Indigenous cultural practices and values, especially regarding family and childhood.

Health and wellbeing

A picture of Indigenous communities

Key features of the population and the communities

Age and geographic distribution
From the 2001 census, the ABS estimates that there are 458,500 Australians who identify themselves as being Aboriginal and/or Torres Strait Islander. This is 2.4 per cent of the total Australian population (ABS 2003).

There are two important features of the Indigenous population worthy of note here.

First, the Indigenous population has a younger age structure than the non-Indigenous population, with half of the Indigenous population under 20.5 years of age. The younger age structure arises because more Indigenous people are being born and more are dying younger, compared with the non-Indigenous population. Why this is so will hopefully become clear as the picture is built up in this report.

Second, there is a distinct pattern in the spread of Indigenous people across Australia. While more than half of the Indigenous population live in New South Wales and Queensland, they still only comprise less than 4 per cent of the total population in either state. On the other hand, the 12 per cent of the Indigenous population who live in the Northern Territory comprise 29 per cent of the total population there. This, in part, reflects important community differences that make my next point below.

Community differences

While it is usual to speak of Indigenous Australians as if they were one group, it should be recognised at the outset that there are a number of widely diverse groupings, reflecting differences in cultural practices, social composition and geographical location.

One major data set on Indigenous Australians, contained in the ABS health and welfare survey, uses geographical location as the main distinguishing variable to reflect the social and cultural diversity of these different groups (ABS 2003). Five groups are differentiated in terms of remoteness from a major urban centre. In 2001, the total estimated population of Indigenous peoples were spread roughly as follows:

◗ major cities—28 per cent of the Indigenous population

◗ inner regional—21 per cent

◗ outer regional—23 per cent

◗ remote—10 per cent

◗ very remote—18 per cent (ABS 2003, p. 17).

But, as noted earlier, even though there are more Indigenous peoples living in major cities, they are a much smaller proportion of the total population in the cities. The Indigenous proportion of the total population increases with increasing geographic remoteness.

Another major data set on Indigenous peoples is collected by ABS on behalf of the Australian Government and focuses on discrete Indigenous communities—those inhabited predominantly by Indigenous people with community-owned or managed housing or infrastructure. These communities are, in the main, in remote areas.

In what follows I will give an overview of what we know of discrete Indigenous communities in particular, and this is followed by what we know of Indigenous families and households in general.

Discrete Indigenous communities

Demographic and cultural features

Most discrete Indigenous communities are located in remote to very remote regions of Australia. Of the 1,223 discrete communities identified in 1999, over half were located in the Northern Territory and were the homes for just on 90 per cent of that

territory's Indigenous population (Bailie et al. 2002). Of the 1,216 communities identified in 2001, 85 per cent of all discrete Indigenous communities were located in very remote regions, with only five in major cities and two-thirds had 50 or less people in them (ABS 2003). In all, about a quarter of the total Indigenous population live in discrete communities (SCRGSP 2003).

It is important to note that these discrete Indigenous communities are, in the main, artificial. They have come into existence as a result of direct government or mission action (Bailie et al. 2002; ed. Smith 2000). They are also primarily without a viable mainstream labour market and, as such, rely heavily on welfare payments (ed. Smith 2000).

On the other hand, these communities are also far more likely to draw upon traditional Indigenous cultural practices. This is reflected in, amongst other things, the fact that the proportion of Indigenous Australians who spoke an Indigenous language at home increased from 1 per cent in major cities and inner regional areas to 55 per cent in very remote areas (ABS 2003).

Housing and environmental health
It is well recognised that quality of housing and health-related essential infrastructure, such as the supply of power, safe drinking water and sewage removal, is directly related to physical wellbeing of individuals and communities. The most recent ABS data confirms that not all Indigenous peoples have access to the same basic level of housing and essential infrastructure that is taken for granted by the majority of the Australian population (ABS 2003). It is the discrete Indigenous communities, in particular those in remote regions, that suffer the most from poor housing and environmental health.

The data on this can be found in Bailie et al. (2002), ABS (2003) and SCRGSP (2003), but the following examples illustrate the point:

◗ The majority of communities rely on non-town water sources and of those who had their water tested for safety over a quarter had a failed result.

◗ Just on half of the communities relied on septic tanks with leach drains and 60 per cent of those in communities of 50 or more had overflows or leakages in the 12 months prior to the survey.

◗ Seven per cent of the communities had no organised electricity supply.

◗ For just over half of all communities rubbish disposal was in an unfenced community tip.

◗ Almost one-third of the Indigenous Housing Organisation managed dwellings in these communities required major repair or replacement.

Access to health services
The health consequences of the impoverished living circumstances of discrete Indigenous communities is exacerbated by poor access to health services. Some key data from the 2001 survey (ABS 2003) are:

◗ In 2001, over two-thirds of all discrete Indigenous communities were 100 kilometres or more from the nearest hospital and while only half of these communities had access to a medical emergency air service, they included 88 per cent of the people in Indigenous communities.

◗ For communities 10 kilometres or more from the nearest hospital, just over a quarter had a community health centre in or within 10 kilometres of their community and this covered 85 per cent of the population.

◗ 151 communities were located 100 kilometres or more even from the nearest first aid clinic, community health centre or hospital.

◗ Of the 242 communities with more than 50 people each and located more than 10 kilometres from the nearest hospital, two-thirds had daily access to a health worker, nurse or doctor.

Households and families

Socioeconomic picture

The national statistics
The 2001 census data (ABS 2003) show that Indigenous peoples are disadvantaged with regard to a number of socioeconomic indicators. Compared with non-Indigenous Australians, they have:

◗ poorer educational outcomes—overall only 18 per cent had completed school to Year 12 and this percentage was much lower in very remote areas

◗ higher rates of unemployment—22 per cent for Indigenous males and 18 per cent for females

◗ higher rates not in the labour force at all—39 per cent for Indigenous males and 56 per cent for females

◗ lower household income levels—only 62 per cent of the corresponding non-Indigenous income

◗ lower home ownership and purchasing levels—only 32 per cent of Indigenous households.

Household economies
Daly and Smith (1999) show Indigenous households:

◗ are more likely to be multi-family, increasing in size with degree of remoteness

◗ have younger adults with lower levels of education and are less likely to be in employment than non-Indigenous Australians

◗ are twice as likely to contain sole parent families (see also Daly & Smith 1998)

◗ have high visitor rates

◗ have high childhood dependency burdens.

However, the above census data could be misleading. When ethnographic understandings of Indigenous families and their extended households are taken into account, Daley and Smith (1999) conclude that the real economic burden experienced by low-income Indigenous households is more substantial than the census depicts. This clearly has both immediate and long-term impact on the capacity of families to care for their children (Finlayson & Auld 1999).

It is important to note that this economic burden is not solely confined to remote communities. For example, Smith (1995) has reported labour force, income and mobility variables for the Redfern population in Sydney as being similar to, or worse than, those in remote communities.

Two significant case studies—of Yuendumu (remote community) and Kuranda (rural town)—also point to a further important economic feature of many Indigenous households—their welfare dependency (ed. Smith 2000). In both of the communities studied, a majority of parents and their children lived in households with welfare-based economies, where adults are highly reliant on a variety of welfare transfers.

Household and family living

Diversity
There is significant cultural diversity in fundamental aspects of social and economic organisation in Indigenous households. Different groups maintain quite distinctive local identities and cultural priorities (Daly & Smith 1999).

There is also considerable diversity in the structure of Indigenous households. In the Western Australian Aboriginal child health survey (Zubrick et al. 2004) it was found that when households were classified by 'usual residents', only 31 per cent were of a 'nuclear family' type with two parents and their children living together. There were also sole-mother households (22 per cent), blended families (11 per cent), sole mother within an extended family (11 per cent), and two parents with extended families (7 per cent). Level of isolation is an important factor affecting family composition (Zubrick et al. 2004).

Complex composition
The nuclear family is not the most common residential form; it is the extended family that is the norm (ed. Smith 2000). Typically, an Indigenous household consists of a small, multi-family, multi-generational core of kin with a highly mobile fringe of transient members. The responsibility for child care and rearing is distributed widely amongst a range of kin (Daly & Smith 1999), making any Western notion of 'primary carer' meaningless.

This shared child care is an essential feature of family support in many Indigenous communities operating under pressure from the impact of mobility, stretched resources and the limits of welfare income. In the Yuendumu and Kuranda communities, it was noted that the consequence of this shared child care under pressure was that some children received erratic or marginal care at best (ed. Smith 2000).

It is important to note that a household composition based on kin relations is not necessarily contained within a single dwelling. Households can, and do, flow across more than one dwelling (Daly & Smith 1999). Children are part of this household flow across more than one dwelling.

It is also important to note that the complexity of household relations defies any neat categorisation according to standard census definitions (Henry & Smith 2002). Moreover, even the English words used to define relationships, such as 'aunt' and 'uncle', may differ substantially from their Anglo-Australian meaning (Finlayson & Auld 1999).

Mobility
Mobility and the resultant high visitor number for households is a common feature of Indigenous living. The study of the Kuranda community over three survey periods provides some insight into the dimensions of mobility (Henry & Smith 2002). Mobility in that community was mainly circular or short-distanced, reflecting a recurring pattern identified for other Indigenous groups (for example, Taylor 1996). Mobility was also very common. Between two survey periods in 2001 and 2002, one out of every two persons had moved.

Mobility is not confined to adults. In the Kuranda study as many children as adults had moved between the two survey periods. In all cases, the children moved to other households within their kinship network (Henry & Smith 2002). However, as Henry and Smith (2002) also point out, while this movement reflects a cultural preference to 'live extendedly' and to emphasise individual autonomy from a young age, it also reflects a lack of adequate housing and a response to poverty and destitution.

Patterns of mobility also make a substantial contribution to changing household composition with dynamic cycles of expansion, contraction, disintegration and reformation (ed. Smith 2000).

Mobility creates special challenges for a longitudinal study and it will be important to know the 'travel lines' of the participants.

Demand sharing
The limited material resources available in many Indigenous households are managed through a system of 'demand sharing' (Schwab 1995). Not all people share resources or contribute to costs; rather, there is a fluid distribution of resources across kinship lines according to need and request. This, in part, helps to cope with the impact of low and erratic incomes but also can bring severe economic burdens on some household members (Daly & Smith 1999).

Physical and mental health

The physical health of Indigenous peoples

> Global health statistics released by the World Health Organization (WHO) in
> June 2000 confirm that the general population of Australia is one of the healthiest
> of any developed country... Other sources indicate that the Indigenous Australian

population is one of the least healthy of all Indigenous populations within comparable developed countries (OATSIH 2001, p. 10).

Indigenous people suffer greater ill health, are more likely to experience disability and reduced quality of life, and to die at younger ages than non-Indigenous Australians (ABS 2003). The impoverished socioeconomic circumstances, exposure to health risks and poor environmental health conditions of Indigenous peoples documented earlier in this report all contribute to their poorer health.

However, it is important to point out that poor health is not confined to the low-income groups of Indigenous peoples. As Hunter (1999) points out, long-term health problems are evident in one-third of Indigenous households in both low and high-income groups.

In 2001, Indigenous life expectancy at birth was 20 years less than for the total population (ABS 2003). Indigenous Australians also suffer from a number of medical conditions at a higher rate than non-Indigenous Australians. Some key points (using age standardised rates) from the 2001 health and welfare survey (ABS 2003) are:

◗ circulatory system diseases—experienced by nearly one-fifth of all Indigenous peoples and more so by those living in remote areas

◗ diabetes—as a conservative estimate, this is experienced by 11 per cent of the Indigenous population and more so by those living in remote areas

◗ kidney disease—the numbers of Indigenous peoples with end stage renal disease is increasing faster than the rate for non-Indigenous Australians

◗ respiratory diseases—asthma is more prevalent in Indigenous than non-Indigenous Australians and respiratory diseases in general account for 3 to 4 times more deaths in Indigenous than in non-Indigenous Australians

◗ communicable diseases—sexually transmitted infections are higher in Indigenous than non-Indigenous Australians

◗ injury or accident—a higher proportion of Indigenous than non-Indigenous Australians suffer from a condition caused by an accident or injury and more die from it: common causes of fatal injury being suicide, transport-related events, and assault

◗ ear and eye problems—Indigenous peoples have less eye problems and more ear problems than non-Indigenous Australians, with middle ear infection being a major problem for Indigenous children.

It is important to note that while there have been some health improvements in recent years—for example, a dramatic decline in death from pneumonia—there has been no overall progress (Ring & Brown 2002). Most telling is that the median age at death for Indigenous peoples—51 years—has not changed in the last decade and that this median age is much lower than that of Indigenous peoples in New Zealand, Canada and the United States of America (Ring & Brown 2002).

The shorter life span and higher incidence of ill health among Indigenous peoples impacts on the children in two important ways. First, their parents are more likely to suffer poor health and to die younger, compared to non-Indigenous parents. Second, they are less likely to have the guidance of grandparents—something important in traditional culture—as they are growing up.

However, it should be noted that there are an increasing number of case studies showing that the provision of local and culturally appropriate health care services can have positive impacts on health (OATSIH 2001).

Psychosocial health

While the physical health data tell a damning-enough story, it is in the broad arena of psychological and social health that the devastation experienced by Indigenous peoples over the past two centuries is truly brought home. As the Royal Commission into Aboriginal Deaths in Custody forcefully put it, the consequence of the history of 'deliberate and systematic disempowerment' has been the partial destruction of Indigenous culture and a large part of the population, along with disadvantage and inequality in all areas of social life. There has also been a considerable degree of breakdown of many communities and the losing of their way by many Indigenous people (Johnston 1991).

Alcohol and substance abuse

Alcohol and substance abuse is at the heart of much of the violence, crime, injury and ill health in Indigenous populations today (Fitzgerald 2001; SCRGSP 2003) and that abuse in turn reflects the devastating consequences of history mentioned above. However, it is important to note that substance abuse is not a common phenomenon across the whole of the Indigenous population. Indigenous people, as a whole, are actually less likely than non-Indigenous Australians to drink alcohol. But, those that do drink are more likely to do so at hazardous levels (ABS 2003).

Indigenous males aged over 55 years had the highest proportion of hazardous alcohol consumption. In contrast, younger Indigenous males (18 to 24 years) were less likely than non-Indigenous males of the same age to consume alcohol at hazardous levels. Yet, younger Indigenous females (18 to 24 years) were more likely to consume at hazardous levels than non-Indigenous females of the same age (ABS 2003). There seems to be a relation here between hazardous consumption and the different life cycle patterns of Indigenous males and females.

Violence

Indigenous hospitalisation from injury data documented by the ABS (2003) is alarming. The rates were 1.9 times higher for Indigenous males and 2.3 times higher for Indigenous females compared with their non-Indigenous counterparts. In addition, Indigenous males were 8.3 times more likely to have been hospitalised because of assault and Indigenous females 28 times more likely compared with their non-Indigenous counterparts.

Moreover, it is recognised that the level of violence is much higher than openly acknowledged or reported (Aboriginal and Torres Strait Islander Women's Task Force on Violence 2000; Greer 2003). Indeed the level is so high it has variously been described as a 'dire emergency' (Fitzgerald 2001, p. 9) or of 'epidemic proportions' (Dodson, cited in Huggins 2003).

Women and children bear the brunt of the violence, most usually committed by boyfriends or husbands who were drunk (Aboriginal and Torres Strait Islander Women's Task Force on Violence 2000). The Aboriginal and Torres Strait Islander Women's Task Force on Violence (2000) illustrate this with the example of a north Queensland community, with a total female population of 133 over 15 years of age, that had 193 cases of domestic assault injuries in a 12-month period.

Even though rape or sexual assault is the most underreported form of all violence, there is no doubt it is an increasingly common occurrence (Aboriginal and Torres Strait Islander Women's Task Force on Violence 2000). Greer (2003, p. 1) captures the extent of the plight when she cites the example that 'in one town no Aboriginal girl over the age of ten had not been raped'.

Further insights into the nature and impact of domestic violence are given in *Ya pulingina kani—Good to see you talk* (Pugh 2002). Here the stories of Indigenous people in Tasmania are captured. They are stories that show that both Indigenous boys and girls suffer from domestic violence and often go on to perpetuate it. They are stories that show, once again, how their history of devastation continues to directly impact on their lives. They are also stories that show that sexual abuse is part of the domestic violence experienced by children and women. But there are stories that offer a glimmer of hope as well.

Self-harm, in the form of suicide or attempted suicide, also fits into this pattern of violence. However, it is important to note that it is the social environment that is critical to understanding destructive behaviour, and not culture or ethnicity (Radford et al. 1999).

Transgenerational trauma
The violence and abuse being expressed, and experienced, within Indigenous communities are the culmination of a history of violence they have experienced from the non-Indigenous culture. In *Bringing Them Home*, the report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their Families, it was shown how very much the past is still with Indigenous people today. The report details 'multiple and profoundly disabling' layers of abuse, leading to 'a cycle of damage from which it is difficult to escape unaided' (Human Rights and Equal Opportunity Commission 1997, p. 178). In short, the children were separated from their families, institutionalised, subject to physical brutality and abuse, repeated sexual violations, psychological and emotional maltreatment, and less exposure to cultural and spiritual knowledge and identity. Anger, substance abuse, physical ill health, self-harm and psychological distress are some of the many consequences of such extreme experiences.

The layers of violence and abuse experienced by the Stolen Generation were only the latest in a history of violence and abuse that has created what Atkinson (2002) calls 'transgenerational trauma'. She captures the extent and depth of this trauma with a six-generation genogram showing the compounding effect of epidemics, starvations, massacres and removals between 1860 and 1930; the removals to reserves and the removals of children coupled with intense government surveillance between 1880 and 1960; and then the continued removals and government interventions between 1940 and 1980. The fourth, fifth and sixth levels of the genogram clearly demonstrate the increase in intra-family violence and psychological distress such that by the sixth level barely a child is left untouched by the history of violence (Atkinson 2002, p. 185).

I think there are two major points to the story about the care giving environment of young Indigenous children today. The first is that many of these children continue to be exposed to the cycle of damage resulting from transgenerational trauma. Just how many is indicated in the Western Australian study of Aboriginal child health (Zubrick et al. 2004), where it was found that 35 per cent of the Aboriginal children were living in households where a carer or a carer's parents had been forcibly separated from their family and 24 per cent were living in families affected by forced relocation from their country.

The second, and perhaps more important point, is that Atkinson (2002) has also shown that there is hope: healing, while hard work, is possible.

Impact on the children

A care giving system under stress

In their review of the early childhood literature, the Centre for Community Child Health (2000) identified a number of risk factors relating to the quality of the care giving environment that can contribute to poor developmental outcomes. Sadly, the care giving environment of Indigenous children is replete with these factors.

As the Centre for Community Child Health (2000) points out, risk factors for adverse outcomes often co-occur and they may have cumulative effects over time. In the Australian Temperament Study it was confirmed that there is a cumulative effect of family stressors such as low socioeconomic status, young maternal age at birth, large family size and family instability (Centre for Community Child Health 2000). All of these factors are prevalent in Indigenous families and communities. When you then add the psychosocial problems described in the last section, the risk of adverse outcomes clearly increases.

Poor parenting skills

The Fitzgerald inquiry (2001) in Cape York communities shows how the children feel the impact of the substance abuse and violence around them. When school children were asked what was the biggest problem in their community, they commonly cited alcohol use, smoking and violence:

... drinking, fighting, especially when adults are drinking. It's not safe for kids to be around there because trouble starts and the kids might get hurt (Fitzgerald 2001, p. 142).

When they were then asked what could be done to make it a better community, they invariably said that the adults should stop drinking and being violent and look after their kids better. The trouble is, so many of their parents lack the skills to do so.

The direct effect of the Stolen Generation and the longer-term effects of transgenerational trauma has been that there are an increasing number of young Indigenous parents who need parenting skills (Swinburne Institute of Technology 2003). Many of these young parents have parents who themselves had not experienced adequate nurturing and good parenting and who had often been subject to various forms of violence and abuse. This lack of experience with good parenting can go back generations and have equal impact on mothers and fathers.

Good parenting programs are available, or are being developed (for example, the VACCA/Good Beginnings project documented by Swinburne Institute of Technology 2003) but I was unable to find any evaluation data. On the other hand, there is every reason to believe that a program well informed by, and involving, the Indigenous community, could only make a positive contribution.

A deadly cycle

There are two further direct and important consequences for children of the 'epidemic' of alcohol abuse and violence described earlier: parents, notably fathers, are removed from children into the prison system and children are removed from families for protection.

Parents removed

The Royal Commission into Aboriginal Deaths in Custody clearly documented the overrepresentation of Indigenous people in the criminal justice system (Johnston 1991) and gave an incisive account of the reasons. Since then, neither the data nor the reasons have changed. For example, in 2001 nearly 6 per cent of all Indigenous males aged 25 to 29 years were prisoners (compared to 0.6 per cent of all males aged 25 to 29 years) (Woodward 2003).

Woodward (2003), in a review of the literature on families of prisoners, points to two important consequences of incarcerated parents. First, it appears that an indirect effect of the justice system is to foster intergenerational offending, particularly resulting from lack of appropriate male role models. This has been identified as a major issue for Indigenous communities and one that I will return to in this report. Second, the children experience a variety of negative consequences especially in terms of their emotional health and wellbeing.

Children removed into care

In 2001–02, the rates for Indigenous children entering the child protection system were higher than for non-Indigenous children; being up to nearly eight times the rate for non-Indigenous children in some states (ABS 2003).

While there is no doubt that significant numbers of Indigenous children experience violence and abuse and something needs to be done to help them, the arguments of D'Souza (1993) are of real concern. He points out that there was, at least a decade ago, clear evidence of 'institutional racism' in the higher proportion of Indigenous cases 'substantiated' or confirmed. He also points directly to the evidence of the Royal Commission into Aboriginal Deaths in Custody: 43 out of the 99 people whose deaths in custody were investigated had been separated from their natural families through intervention of the state, mission organisation or other institution.

The compelling evidence documented in the *Bringing Them Home* report (Human Rights and Equal Opportunity Commission 1997) puts further weight behind D'Souza's arguments. Even though, as the report points out, there have been some advances (recognising the Aboriginal Child Placement Principle) with more Indigenous children being placed in Indigenous care, 'welfare departments in all jurisdictions continue to fail Indigenous children' (Human Rights and Equal Opportunity Commission 1997, p. 453).

A more recent paper by McHugh (2003) on foster care continues to raise concerns. In 2002, the rate of Indigenous children in care was 20 per thousand, compared with three per thousand for non-Indigenous children and, between 1999 and 2002, the number of all Indigenous children in care rose by more than 3,000 to 18,800 (McHugh, 2003). Moreover, as McHugh goes on to point out, despite the increasing use of kin care, there is no evidence that it provides better outcomes for children while there is evidence that it places further financial burdens on the kin carers.

In reviewing the data and the arguments, I was forcefully struck by the recognition that the situation has all the classic features of a particular psychopathology that arises when the repeated application of an inappropriate solution becomes the problem. In this instance, the solution for dealing with the impact of dysfunctional family life on Indigenous children—removing them—in turn creates further problems for the children. The pattern is well captured in the vignette provided by the Royal Commission into Aboriginal Deaths in Custody on the lives of those who died:

> Through the files, the Commissioners could trace the familiar pattern of State intervention into and control of Aboriginal lives. The files start from birth; perhaps recording a child adopted out, perhaps its birth is merely noted as a costly additional burden; through childhood perhaps forcibly removed from parents after having been categorised as having mixed racial origins and therefore denied a loving upbringing by parents and family; through encounters at school, probably described as truant, intractable and unteachable; to juvenile courts, magistrates courts, possibly Supreme Court; through the dismissive entries in medical records ('drunk again'), and in the standard entries in the note books of police investigating death in a cell ('no suspicious circumstances') (Johnston 1991, para. 1.2.12).

What else could be possible?

Everything to date points to Indigenous children and youth as being particularly vulnerable to a number of risk factors in their own families and communities and in the broader society. But not all have poor outcomes and it is important to search for what helps to make other, better, pathways possible.

Brady's (1991) report on the health of young Indigenous peoples offers a valuable insight with the idea of 'resilient children'. She describes a 30-year study of children in an island population in Hawaii where the researchers took a special interest in 'high risk' children: children who had experienced severe perinatal stress, grew up in chronic poverty, were brought up by parents with few years of education, or who lived in families experiencing discord, divorce, parental alcoholism or mental illness. While two-thirds of the children did develop serious learning and/or behavioural problems, one-third did not. These were what the researchers called 'resilient children'.

While some of the sources of resilience seemed to be constitutional (for example, high degree of sociability), others were environmental. Three particular environmental factors stood out. First, the resilient children had the opportunity to establish a close bond with at least one caretaker who gave them positive attention in their early years. Second, the resilient children and youths found a supportive role model—this was particularly important for boys. Third, the resilient children relied on informal rather than formal sources of support: it was 'kith and kin', rather than the professional and social service agencies, that was far more important (Brady 1991).

Cultural context

Different stories of child rearing practices

Semitraditional ways in central Australia

The Warrki Jarrinjaku ACRS project team (2002) has compiled a review of the literature on child rearing practices in their region—covering the central and western desert area, including six different language groups and where people still live what they call semitraditional lifestyles. Their review drew significantly on the unique report prepared by Waltja Tjutangku Palyapayi (2001), a group of senior Aboriginal women documenting their own child rearing practices. The key features of both the Waltja report and the Warrki Jarrinjaku review are as follows.

In non-Indigenous cultures, babies are seen to be helpless and in need of a great deal of direction from adults. In contrast, Yapa and Anangu (the two main groups of Indigenous people) see babies and young children as small adults who have a set place in the family and community with all the responsibilities of law and culture. This is reflected in how they are addressed from the very beginning—for example, as 'my young auntie' or 'my mother again'.

In learning their specific obligations and responsibilities, young children have almost complete freedom to choose and demand what they desire. They are fed whenever they are hungry and sleep whenever and wherever they like. This is in contrast with the non-Indigenous culture where babies are expected to develop routines as directed by adults.

Despite the practice of responding to what the child wants, there are still behavioural controls. Children are encouraged to behave in certain ways, in particular to be unselfish and compassionate. Generosity is seen as the natural way of behaving and so becomes so. As part of this, children are taught to help and encourage one another, to keep each other safe and to work together. It is unacceptable to watch someone struggling when assistance is required.

These practices encourage autonomy and early learning within a supportive and sharing environment based on the traditional Law (Jukurrpa) about the correct way to live and behave.

Another story, from north-east Arnhem Land

The description of the traditional Indigenous values and practices of the central Australian peoples needs to be balanced with some stories documented by Smith et al. (2003) about 'growing up' children in the Gapuwiyak community of the Yolngu people in north-east Arnhem land.

For Yolunga people, looking after children meant they were not left alone, that family members spent time with them, they were washed, kept clean and well fed, they were given what they wanted, and they were taught ceremony and singing. This looking after has to be done by the whole (extended) family: it is everyone's responsibility, but especially that of the mother and father. The importance of grandparents was also recognised. However, many of the people the researchers spoke with said that the grandparents did too much caring because parents were no longer fulfilling their child care responsibilities.

The failure of some parents in not looking after their children was a new issue for the community, but an important one. The most common reason given for not caring was that the parents were busy doing other things, which usually meant they were gambling with cards or drinking kava. For too many parents, gambling and drinking was seen as more important than their children. Other reasons given for not caring was the young age of the parents (who did not know 'the story about growing children'), having unstable, informal relationships, and with mothers being too lazy.

In this story, the breakdown in traditional values among some of the community—especially the younger parents—is apparent.

The Nunga way in an urban environment

Malin, Campbell and Agius (1996) provide another story about Aboriginal child rearing from a Nunga family living in Adelaide and contrast it with an Anglo-Australian family. From observations of the two families, they found that the children in the Nunga family were encouraged to be independent, self-regulating

and self-reliant—features that are characteristic of Aboriginal families elsewhere in Australia. In contrast, the Anglo-Australian children were far more childish by, for example, feigning ignorance and helplessness.

The Nunga children were also encouraged to be socially concerned and caring. The Nunga children learnt how to be competent looking after their younger kin from an early age and their mother trusted them in this and provided the opportunity to practise. The children were far more caring and loving to each other than the Anglo-Australian children, even though the Anglo mother verbally encouraged her children to be caring more often.

While the Nunga mother did use some overt disciplining techniques she did so far less often than the Anglo mother. The Nunga mother relied far more on indirect and implicit control.

Even from this brief description I hope it can be seen that the core of the traditional Indigenous values described for the central and western desert region are at the heart of this Nunga mother's practices in an urban environment.

From the south west of Western Australia

This is a story translated by Collard et al. (1994) from the stories told by Aboriginal families in the south west of Western Australia about the enduring value base for their family life.

The Aboriginal people who contributed their stories believe that culture, respect and family harmony are the fundamental elements of family life, child rearing and kinship maintenance. Culture consists of complex systems of obligations and responsibilities that bind all members of the kinship system through a strong oral tradition. Respect reflects the absolute belief that all people are worthy of respect and it is right that others will pay them due regard. Family harmony is premised on the principle of reciprocity—a mutuality of expectations.

These three basic elements provide what Collard et al. (1994) call a ready made social service system—one 'for kin and by kin'—that intricately connects children and elders in a mutual system of responsibility. And, even though there have been years of colonisation, the peoples of the south west of Western Australia believe that these traditional family values and the culture that sustains it has not been destroyed. They also believe their system has the ability to re-flourish and that Aboriginal kinships systems can work proudly and effectively again.

From the Torres Strait

This story comes from reports by Batrouney & Soriano (2001), Ban et al. (1993) and the IINA Torres Strait Islanders Corporation (1996).

As with the Aboriginal peoples on the mainland, Torres Strait Islander child caring occurs in a complex, extended family setting. The interconnections within the extended family are strengthened with the practice of Kupai Omasker (traditional adoption) whereby children are transferred permanently from one family to another.

The children grow up in a 'dense' support system with each member in the family playing an active, and often unique, role. There is also a special person for each child who acts as an 'external teacher', or perhaps what might be called a mentor or role model.

There is also a small, supportive community structure to rely upon: watching over children, providing activities for them and showing them things can all be done safely within the community. The community is seen to play a direct and active role in the 'growing up' of children.

The dense kinship system and the role of community in child rearing is fostered by the relative isolation of island living. However, even though Torres Strait Islanders are more isolated than most, it was noted by Batrouney & Soriano (2001) that modern mainstream Australian values were increasingly having an impact on traditional Indigenous practices and parents were being challenged as to how to incorporate the traditional along with the modern.

Comparisons

There are three key points that can be drawn from these different stories. First, it is clear from the stories from central and western Australia and from the Torres Strait that traditional practices are still being used and valued. Second, from the Nunga and south-west Western Australia stories, it is also clear that traditional values and practices continue to exist outside of discrete Indigenous communities. Third, while these traditional practices are being challenged and, in some instances, broken down by mainstream non-Indigenous culture, there is the capacity for them to re-flourish.

On a broader note, however, it is important to emphasise that differences between different cultural child rearing practices do not mean one is better or worse than the other. In a comparison of child rearing between Australian parents from three different cultures—Anglo, Vietnamese and Torres Strait Islander—Kolar and Soriano argue that their 'findings clearly highlight the need for cultural understanding with the imperative that differences in child rearing are not defined as deficit models in parenting' (Kolar & Soriano 2000, p. 56).

The culture and its values, as such, do not define better or poorer child caring practices. Although, as the earlier stories show, some parents within cultures are better than others.

Cultural diversity

Elements of diversity

Throughout the reports and research literature I have drawn on here, there was repeated mention of diversity. Indeed, in recognition of this diversity, I too pointed to the need to acknowledge that Indigenous peoples are more than one group. However, from what has been reviewed and written to date, the extent of the diversity and the full implications of it has yet to become clear. So, here I want to explore some elements of this diversity a bit further.

Aboriginal or Torres Strait Islander peoples

In the ABS (2003) report on Aboriginal and Torres Strait Islander peoples, certain statistics were presented by way of comparison between the two groups. Persons identified as being of Aboriginal origin comprised about 90 per cent of the Indigenous population, persons of Torres Strait Islander origin 6 per cent and those with both comprised 4 per cent.

From the data, it was obvious that the two populations shared the same age distribution—that is, both had a young age structure. However, there were some noticeable differences:

▶ Torres Strait Islander babies were less likely to have a low birth weight or to die perinatally, and more likely to be born of older mothers and fathers who were both Indigenous.

▶ Torres Strait Islanders have a higher median age of death, although the causes were similar to the Aboriginal population.

▶ Those Torres Strait Islanders living in the Torres Strait were more likely to speak a language other than English.

▶ Torres Strait Islanders were more likely to have completed Year 10.

▶ Torres Strait Islanders had a higher median weekly income, although this was more so for those living on the mainland.

These data would suggest that there are at least some sociodemographic differences between Torres Strait Islanders and Aboriginal peoples. There are also cultural differences. The Torres Strait Islanders are part of a Pacific culture and their practice of Kupai Omasker (adoption), amongst other things, reflects that broader culture influence (Ban et al. 1993; IINA Torres Strait Islanders Corporation 1996).

The dimension of remoteness

Degree of remoteness is the dimension used by the ABS to differentiate different types of Indigenous groups. From the statistical information given in the 'Health and wellbeing' section, it is clear that there are different lived experiences as a function of remoteness. The Western Australian Aboriginal child health survey corroborates this conclusion (Zubrick et al. 2004).

Compared with less remote Indigenous people, remote people are more likely to:

▶ live in discrete Indigenous communities that are, in the main, artificial and have no viable labour market

▶ speak a language other than English

▶ suffer the most from poor housing and environmental health

▶ have poor access to health services

▶ live in larger households, with greater overcrowding

▶ have higher rates of circulatory system and kidney diseases, and diabetes.

The two case studies (ed. Smith 2000) from Yuendumu (remote Indigenous community) and Kuranda (rural town) also indicate that peoples in remote communities, compared with rural regions, have a:

◗ lower proficiency in English

◗ higher mobility rate and greater range

◗ greater difficulty in accessing services outside their community

◗ different local economies.

On the other hand, as Smith (2000) also points out, these two different communities have much in common. In particular, they share the same concept of family based on an extended kin system with children being cared for throughout the system, although this care may be unpredictable. Stories about this same concept of family within an extended kinship system were also described in the previous section as being as relevant in an urban environment as a remote one. So it would seem that while the dimension of remoteness may reflect some sociodemographic differences, it does not necessarily reflect different cultural beliefs or values.

Language groups
A further source of diversity is language. Although it is difficult to fully determine the number of different languages, it is estimated that before the arrival of the Europeans Aboriginal peoples spoke some 600 to 700 different dialects from at least 250 language groupings (Bourke 1993). These language groups reflect the diversity of different cultural understandings, although as Bourke (1993) points out, they all share a broad common framework. A key element in this common framework is their spiritual link with the land.

From the literature reviewed, we know that more people in remote regions speak their Indigenous language today than those in other regions. We also know that older people are more likely to speak an Indigenous language than younger people.

However, from the literature reviewed I could only find hints as to what the specific and practical implications of speaking different Indigenous languages may be. One such hint came from an essay by D. Smith (cited in SEWRSBERC 2000) in which he said: 'Despite an inclusive commonality of Aboriginal identity, key differences continue to be asserted by groups wanting to emphasise distinctive local identities'. What seems to be critical here is the concept of local, reflecting a direct link with a specific area of land, or country, and, concomitantly, a particular language group and kinship network.

Implications
There are three key implications arising from this consideration of diversity. First, I think it is important to recognise there is a basic difference between Aboriginal and Torres Strait Islander cultures where, traditionally at least, the Torres Strait Islanders have more in common with other Pacific cultures than with mainland Aboriginal ones.

Second, the use of the remoteness dimension may not be the most appropriate differentiator of difference in all instances. Remoteness is a measure constructed for the purposes of statistical collections and while some differences are exposed by this measure, they may not be differences that matter or they may cloud more important commonalities. On this point, I am reminded of an astute comment in a report cited in NACCHO (2003b) that being urban and Indigenous is still 'very non-white'.

Third, while there seem to be important commonalities in basic cultural beliefs and the principles underlying practices, the way in which they are acted out, the nature of the stories told, and the links to specific country differ. More importantly, it is only from within the specific communities that the differences can be known. It is the local community itself, relying on its own understanding of the 'relationship and travel lines' (Collard et al. 1994), that knows what their group is and how it is defined (Peters-Little 1999). In essence, differences between groups are self-determined.

Impact on the children

Conflict between protective and risk factors

In the Centre for Community Child Health (2000) review, a number of protective factors were identified as being associated with the prevention of adverse outcomes. These factors included positive attention from parents, supportive relationships with other adults and extended family, family harmony, and religious faith. From the brief stories of Indigenous cultural child rearing practices, there is no doubt that these factors can be, and are, present within Indigenous families.

Particular sources of resilience can also be found within more traditional practices. The emphasis on children being self-reliant from a very early age is a valuable strength that children can draw on as they grow up, as is the close bonding and attachment that is possible in traditional communities where the baby goes everywhere with the family (Waltja 2001). The availability of a large kinship support system is a further resource for resilience. And, of particular note, is the assignment of a special mentor/role model for each child living the traditional Torres Strait Islander life.

On the other hand, traditional practices are more likely to be followed in remote communities that suffer particular stress arising from their very remoteness. In contemporary Indigenous life there is a conflict between protective factors associated with traditional practices and risk factors arising from poverty and destitution. Good outcomes for Indigenous children are possible where these competing factors can be managed such that the protective outweigh the risk.

System breakdown

It is where there is a failure of respect for traditional practices, without a replacement of another cogent value or belief system, and the stresses of living become overwhelming, that the care giving system breaks down and poor

outcomes for children become more likely. This was illustrated with the stories from north-east Arnhem Land where the playing of cards and drinking of kava have become more important for some than following the traditional law about 'growing up' children.

It also struck me that particular problems are created when such a system breakdown occurs in an extended kinship system. When the traditional values are respected, traditional responsibilities are being met. Not respecting those values and responsibilities (or not having them passed on in the first place) may be a little easier in an extended kinship system because there is always someone else to take on the responsibility—usually the grandparents, as noted earlier. This not only leaves fewer people to care for the children, but can leave no-one at all, with the children just getting lost in the system. This pattern of getting lost or neglected was also described by Smith (2000) as a consequence of shared child care in a system operating under enormous pressure.

3   Focusing on the children

Overview

In the previous section, the focus was on the care giving environment of Indigenous children and its potential effects on children of all ages. In this part the focus is more specifically on the children at different stages of growing up: from neonates through early childhood, to going to school and then leaving it.

In the literature reviewed here, there are still too many unacceptable, poor outcomes. Indigenous babies have higher mortality rates and lower birth weights, children have more health and nutrition problems, schoolchildren have poor attendance rates, lower literacy and numeracy levels and leave school earlier, and juveniles have lower employment rates and are overrepresented in the criminal justice system, when compared with non-Indigenous children and youth.

In discussing the poor school outcomes, Herbert et al. (1999) made a critical point: 'such statistics should be read in the context of the ongoing struggle by Indigenous peoples not only to gain improved access to schools but also to participate in schooling "which is culturally sensitive and offers equitable and appropriate outcomes" (DEET 1995)' (Herbert et al. 1999, p. 2). This same point applies to all the poor outcomes summarised above. Better outcomes are possible with the provision of appropriate, quality services.

Maternal and child health programs can result in significant health gains for babies and children. School readiness and early school outcomes can be enhanced by the provision of preschool services. School attendance and performance can also be enhanced by the provision of certain educational services and programs. But, in all instances, these services must be readily accessible to the community (both physically and economically) and must be culturally appropriate.

Early childhood (0 to 5 years)

Starting life

Neonatal health: a statistical picture

> Aboriginal people suffer the poorest health of any population in Australia, and mothers and their young children comprise a particularly vulnerable section of the Aboriginal community (Balmer & Foster 1997, p. 26).

ABS data, from 1998–2000, show the national perinatal mortality rate for babies of Indigenous mothers remains at just over twice the rate for babies of non-Indigenous mothers (ABS 2003). But it should be borne in mind that this is likely to be a conservative rate as there is an underidentification of Indigenous deaths in all states and territories (SCRGSP 2003). It should also be borne in mind that the mortality rates for babies of Indigenous mothers in Australia are higher than for Indigenous mothers in New Zealand and the US (Ring & Brown 2002; SCRGSP 2003).

Indigenous mothers are also more likely to have a low birth weight baby than non-Indigenous mothers. Since 1991, there appears to have been little change in both the proportion of low birth weight Indigenous babies and their mean birth weight (ABS 2003).

Birth weight is important—in a sense, it is the first outcome. It reflects the influence of a number of parental factors, is directly linked with foetal death and is the earliest indicator of proneness to ill health during childhood and to later adult diseases, such as high blood pressure (Singh & Hoy 2003).

Poor starts

Mackerras (1998) has argued that the prevalence of low birth weights in Indigenous communities is likely to be due to the influence of a range of foetal growth retardation factors. Putting aside the factors that cannot be changed (such as infant sex or race), the following factors are important:

◗ very young maternal age—21.7 per cent of Indigenous mothers compared with 4.5 per cent of non-Indigenous are under 20 years of age (ABS 2003) and this younger age is associated with a greater likelihood of giving up children and less capacity/knowledge to care for them (Zubrick et al. 2004)

◗ alcohol consumption—while only 23 per cent of Western Australian birth mothers drank during pregnancy (Zubrick et al. 2004) it is also known that of those Indigenous females that do consume alcohol, a higher proportion do so at more risky/high risk levels than non-Indigenous women (ABS 2003)

◗ tobacco smoking—a higher proportion of Indigenous women than non-Indigenous women smoke (ABS 2003) and in the Western Australian Aboriginal child health survey (Zubrick et al. 2004) it was found that 47 per cent of the mothers smoked during pregnancy

◗ pregnancy weight gain and associated nutrition—data on nutrition is variable, partly as a function of geographic location

◗ socioeconomic status, including maternal education—Indigenous females leave school earlier and have lower levels of schooling overall than their non-Indigenous counterparts (ABS 2003).

Brady (1991) also points out that another crucial variable affecting at-risk births is the level of antenatal care.

Drawing, once again, on the ABS (2003) data, certain aspects of Indigenous health care provision suggest that this antenatal care can be lacking in many cases:

◗ The supply of medical professionals per head of population decreases with increasing remoteness, where a higher proportion of Indigenous people live.

◗ Of those 242 remote communities studied, only half had daily access to a female Indigenous health worker and only 20 per cent had access to an obstetrician and/or gynaecologist.

Better starts

Traditional

The Warrki Jarrinjaku ACRS project team (2002), in their review of child rearing practices in the central desert region, note that many elders blame poor infant health on the failure of young women to follow traditional women's law. In traditional birth practices for that region:

◗ attention is paid to the spiritual and the physical health of the mother and baby

◗ great significance is attached to the place where a child is conceived and where they are born

◗ men are excluded from the birth and for a period afterwards

◗ a smoking ceremony is held soon after the birth to encourage strength and good health.

Mention is also made of the use of other traditional medicines in the birthing ceremony that helped make the babies strong:

> When we washed our babies we would mix jungarrayi-jungarrayi (a plant with medicinal properties) with water to keep them strong. Before white man's medicines our babies grew up strong, with no sickness. (Told by Molly Nungarrayi, cited in Warrki Jarrinjaku 2002, p. 99.)

Although there can be no empirical data to support the beliefs given above, there is certainly damning evidence that the health and wellbeing of Indigenous families has declined significantly since colonisation (Warrki Jarrinjaku 2002).

It should also be noted that in traditional childbirth and rearing practices of central Australia, it was normal to breastfeed children for several years. This not only provided nutrition and nurture but it also had a contraceptive effect such that births were well spaced (Warrki Jarrinjaku 2002). However, there is a contradiction in contemporary data. Some show that Indigenous mothers now have a lower breastfeeding rate than non-Indigenous ones, except where a traditional lifestyle has been maintained (Engeler et al. 1998). On the other hand, the Western Australian Aboriginal child health survey (Zubrick et al. 2004) found a slightly higher breastfeeding rate for Indigenous children (88 per cent) than non-Indigenous (84 per cent).

Western

There is also evidence that the provision of appropriate care based on Western medicine can improve the health outcomes for Indigenous babies. This is illustrated in the Nganampa Health Council antenatal care program study (ABS 2003). When the health council was set up in 1985, poor antenatal care was a major health problem in the region, with less than one-third of all women receiving any reasonable care. Following the implementation of an antenatal care program, it was found that perinatal mortality rates and low birth weights decreased significantly, although still not to the levels of non-Indigenous babies.

Mackerras' (1998) study of the Strong Women, Strong Babies, Strong Culture program showed similar results. This program was designed to support pregnant women in the community, including helping them to visit clinics early in the pregnancy and to eat properly. After the program had been implemented, Mackerras (1998) showed a statistically significant decline in the prevalence of low birth weight in the trial Top End communities.

Herceg (2004) reviewed seven other antenatal and mother/infant programs. From the evaluation evidence she concluded that there is a reasonable indication that these programs are effective in improving access to, and use of, maternal and child health services and in improving health outcomes.

In general, the Office of Aboriginal and Torres Strait Islander Health report on Better Health Care (OATSIH 2001) shows that where maternal and child health programs are delivered in a way that is accessible (both culturally and physically) to Indigenous women, they are used and result in significant health gains.

Health in early childhood

The statistical picture

The latest national data on early Indigenous childhood health, collected in 2001–02 (SCRGSP 2003) show that:

◗ Indigenous children aged under 4 years have more than double the rate of hospital admissions for infectious diseases than their non-Indigenous counterparts.

◗ The most common reason for admission was intestinal infectious disease, then influenza and pneumonia.

◗ The death rate for children between 0 and 4 years of age from conditions starting in the perinatal period was three times higher in the Indigenous than in the non-Indigenous population.

◗ Nine per cent of Indigenous children aged 0 to 4 years suffer long-term diseases of the ear, and hospital admissions for middle ear infections were much higher for Indigenous children than non-Indigenous.

Data from the National Aboriginal Community Controlled Health Organisation (NACCHO 2003a) also show that:

◗ Indigenous children suffer higher rates of malnutrition and failure-to-thrive than non-Indigenous children.

◗ There is suboptimal immunisation coverage of Indigenous children.

A more recent study of immunisation (Hull et al. 2004) has shown that full immunisation is around 17 per cent less for Indigenous children at 12 and 24 months than for non-Indigenous children and that there are bigger immunisation gaps in urban areas.

Further data from the Western Australian Aboriginal child health survey (Zubrick et al. 2004) show that, in terms of use of health services:

◗ Aboriginal children generally receive emergency treatment if it is needed.

◗ Aboriginal children have a lower rate of contact with a doctor than non-Aboriginal children and this rate decreases further with isolation.

◗ The more isolated the location, the lower the carer's level of education, and the Indigenous status of the child's carer all affect whether the child is likely to have had contact with a doctor in a six-month period.

Nutrition, health and growth

The tangled web of health, food choice and availability
While many of the poor health outcomes can be directly attributable to the poor starts experienced by many Indigenous children and the impoverished nature of their circumstances, there is more to the story than that.

It would seem that Indigenous understandings of physical health and illness differ somewhat from a Western understanding and so do their attribution of cause and effect. For example, central Australian Aboriginal people see spiritual health as closely linked to physical health so that a sick or weak child could have a weakened spirit rather than a weakened body. Or, as with the Yolngu people in north-east Arnhem Land, illness can be seen as indicative of something positive rather than negative. For them, episodes of diarrhoea serve as indicators or triggers for the child to move to the next stage of development (Warrki Jarrinjaku 2002; Smith et al. 2003), rather than as signs of ill health.

Nevertheless, Indigenous communities do recognise the relationship between eating good food and good growth. In the Yolngu study (Smith et al. 2003), eating bush food was seen as the main reason for children growing well. For women from the Walpiri language groups north west of Alice Springs there is a spiritual benefit as well as a nutritional one from eating bush food (Warrki Jarrinjaku 2002). The problem, though, is the availability of bush food has been dramatically reduced since European settlement. And, as both the Yolngu study (Smith et al. 2003) and the Warrki Jarrinjaku project (2002) point out, the decrease in availability of bush food is compounded by high food prices, poor quality food and the 'junk food' options available in the community store.

It is also important to note that the view that children are able to determine and express their needs means that they are expected to take food as and when they want it. No-one feeds a child; the food is made available and children eat or not as they choose (Warrki Jarrinjaku 2002). So, when there is little bush food, or other good food, and mainly poor or 'junk' food that is available, that is what the child takes.

While the issue of the availability and affordability of good food is clearly one of great importance to remote communities, the general practice of allowing the children to determine their food, and the 'junk food' choices consequently made,

is of relevance across all communities. Moreover, it should be noted that in the Western Australian Aboriginal child health survey it was found that there was an inadequate consumption of fresh vegetables, regardless of remoteness (Zubrick et al. 2004).

What helps?
The Warrki Jarrinjaku (2002) report documents a number of innovative programs aimed at addressing health issues in children, as does the Western Australian Aboriginal child health study (Zubrick et al. 2004). Of note is the development of Indigenous multipurpose early childhood nurturing centres that incorporate infant health care and early childhood services in one and where the semitraditional lifestyles and beliefs of the families are recognised and respected.

The National Aboriginal Community Controlled Health Organisation (2003a) argues strongly that a nutritional supplement program is urgently needed, especially in remote areas. They cite overseas data to show that such programs can directly contribute to improved growth and health in early childhood.

Early learning

Language, literacy and learning

Language acquisition
In the review of child rearing practices in central and western desert regions (Warrki Jarrinjaku, 2002) it is noted that young Aboriginal children are surrounded by a rich and linguistically complex environment, often consisting of at least two languages and several dialects. English is used infrequently in the home context.

As the Warrki Jarrinjaku (2002) review points out, this practice of only using the family language is in accord with current language acquisition theory that argues it is more advantageous to master the complexities of a first language—the language spoken at home—before adding a second language (that is, English).

Children in these regions are brought into their language through intensive non-verbal interactions with their family and kin and the use of baby talk. It is of some interest to note that these practices appear to bring on certain language development milestones at an earlier rate than for non-Indigenous children.

Sign language and non-verbal communication are also important elements of the rich linguistic environment of western and central desert children and they are encouraged to understand and use a range of gestures and signs at any early age.

Learning and literacies
Fleer and Williams-Kennedy (2002) note that understanding non-verbal body language is one of the many literacies of young Indigenous children. They are also literate in understanding their natural environment and their complex social relationships, along with their own language and associated dialects. Before they get to school, these children have high-level symbolic knowledge—the essence

of literacy. However, given their cultural and linguistic heritage the children from remote communities are less likely to have Western school literacy.

In their exploration of different Indigenous literacies, Fleer and Williams-Kennedy (2002) point to a number of different strategies and approaches to learning that show significant cultural differences. Some of the points that are important for later school experiences are:

◗ learning is a two-way process—children learn by doing things together, they have obligations to each other; learning is a whole family obligation

◗ children are not punished for making mistakes—mistakes are part of learning

◗ listening is critical to learning—you do not have to look or appear to be attending to listen and learn

◗ asking questions is more an urban way of learning, watching and listening is more a traditional way

◗ learning is about moving around and looking, not sitting still.

Warrki Jarrinjaku (2002) also describe similar learning practices for the central and western desert region. In particular, they highlight the importance of hearing and listening. A person's ability to understand and think is intimately tied to their ability to listen.

Preschool—an important transition

The brief description above of early language and literacies acquisition in Indigenous cultures, notably in the central and western deserts, clearly demonstrates that there is a rich learning environment in early childhood.

However, if Indigenous children, especially those from more traditional lifestyles, are to make a successful transition to Western-style school, they need to be introduced to a 'schooling culture'—one that makes explicit the pre-learning on which the school system is based (Northern Territory Department of Education 1999). This is particularly important when you consider the contradictions between the learning styles and expectations of Indigenous children described above and those demanded by schools (National Aboriginal Education Committee 1989). It is also important when you consider that many of the parents may have low literacy skills themselves and cannot help the children at home.

Numerous studies of children experiencing disadvantage or disability have shown that quality preschool experiences can have measurable impact on the school readiness and educational outcomes in the first few years of schooling (Centre for Community Child Health 2000). Preschool experience can also have long term impacts, such as reduced likelihood of failure and increased chances of employment (Human Rights and Equal Opportunity Commission 2000; Kronemann 1998).

Recent case studies of innovative preschool projects point specifically to the importance of the preschool experience for Indigenous children (Northern Territory Department of Education 1999; McRae et al. 2000) especially where it:

◗   involves the Indigenous families of the children and the whole community

◗   helps the parents to help their children

◗   uses Indigenous staff

◗   uses the preschool for early screening of possible health problems

◗   promotes Indigenous culture.

These features of a good preschool experience are in accord with the National
Policy Guidelines for Early Childhood Education set out by the National Aboriginal
Education Committee (1989). They are also in accord with other work by McClay and
Willsher (cited in Trigwell 2000).

This preschool experience does not need to be an extended one. There are a
number of different types of children's services available to Indigenous children.
These include playgroups, preschools, multifunctional Aboriginal children's services
and mobile services. Indigenous children who go through any of these services
generally perform better when they get to school (Butler 1993).

However, as the Northern Territory's Department of Education review (1999) points
out, not all Indigenous children are exposed to these early childhood services.
This was also noted in reports on the needs of remote and isolated Indigenous
children in New South Wales (Kutena 1995) and nationally (Human Rights and Equal
Opportunity Commission 2000).

It is difficult to estimate the numbers of Indigenous children who attend preschool
because of lack of uniformity in data collection. However, some estimates have
been made (SCRGSP 2003). In 2002, the national participation rate for Indigenous
3 year-olds was 18.3 per cent, for 4 year-olds it was 43.6 per cent and for 5 year-olds
it was 10.1 per cent. The rates varied substantially across the states suggesting,
amongst other things, differences in service funding and provision.

The school years

Participation and performance: the data

Attendance and retention

Two of the more disturbing aspects of the statistical data on schooling and
Indigenous children are the extent to which the children are absent from school and
the low numbers who complete Year 12.

Attendance
The Northern Territory Department of Education review (1999) noted that
attendance is a deep concern for Indigenous school staff in the Northern Territory,
as well as for parents and community members. The data presented in that review
support this general and deep concern. While Indigenous enrolments have been
increasing in line with population growth over the past decade, attendance has
been declining: from 76 per cent in 1983 to 68 per cent in 1998. Other data from

around Australia show that, in general, Indigenous students are absent from school at a rate around twice that of non-Indigenous students (Schwab 1999).

However, these figures on attendance do not show the full extent of the problem. To understand what might be happening at the school level, the Northern Territory Department of Education (1999) used data from five east Arnhem schools when there were no large absences due to excursions or ceremonies. The data showed that only three out of the five schools had greater than 50 per cent attendance for three or more days and for two out of the five schools the majority of students did not attend at all. The import of this is that not only is average attendance low but regular attendance for at least 3 days a week is even lower.

Further data from the Northern Territory review is equally alarming. The Northern Territory provides an intensive oral English program to Indigenous students who speak English as a second language. In 1998, of the 757 students who were enrolled in that program 55 did not attend at all, almost 500 attended for half a year or less, 19 attended for between 161 and 200 days and only 4 attended for the full course.

This Northern Territory study would suggest that official attendance figures are likely to be an overestimate. Other reports confirm this. In a study of factors affecting attendance in secondary schools in New South Wales and the Northern Territory, the researchers were unable to obtain any accurate data about the attendance of Indigenous students at a schools-based or district level (Herbert et al. 1999). The MCEETYA Taskforce report (2000) also notes that consistent data on attendance cannot be provided.

Whatever the real attendance numbers may be, there is no doubt that, for those who do not attend, their schooling will suffer (Northern Territory Department of Education 1999). If the children do not go to school, and do not go consistently, then their performance will be poor and they are more likely to drop out altogether.

Staying on at school
The link between attendance and educational outcomes is reflected in school retention rate data—that is, the number of students who stay on at school. Overall, the retention rates for Indigenous children are lower than for non-Indigenous students and the difference increases after compulsory leaving age. In 2002, the retention rate for Year 9 was 97.8 per cent, for Year 10 it was just above 80 per cent, and for Year 12 it was just under 40 per cent. Nationally, non-Indigenous students were two times more likely to continue to Year 12 than Indigenous students (SCRGSP 2003).

While the Indigenous retention rate to Year 12 is low, it should be noted that it has increased substantially from the 12 per cent figure for 1989 (SEWRSBERC 2000) and that data from 1998 to 2002 show a slight increase in the Indigenous rate (SCRGSP 2003).

Schwab's (1999) detailed analysis of retention rates shows the following specific features:

◗ The gap between Indigenous and non-Indigenous retention rates was smallest in the Australian Capital Territory and Queensland and highest in the Northern Territory.

◗ In line with the non-Indigenous population, Indigenous females were more likely to continue to Year 12 than males.

◗ In Queensland, Indigenous retention rates were higher in urban schools and where Indigenous students were less than 10 per cent of the total school enrolments.

◗ There was a decline between 1991 and 1996 in the percentage of rural Indigenous youth (15 to 19 years) participating in school.

Despite these poor retention rates, I think it is important to note that in 2002, almost 40 per cent of Indigenous students did continue on to Year 12. In the light of the significant hardships experienced by Indigenous youth, and Indigenous peoples in general, that could be seen as quite a remarkable achievement. I could not find any national data that shows how many successfully completed (as compared with attended) Year 12, although the SCRGSP report (2003) does provide data by regions. These data show, for example, the proportion of Indigenous students who achieved a Year 12 certificate was highest in New South Wales (71 per cent) and lowest in the Northern Territory (10 per cent)—where the numbers reflect the proportion who successfully completed Year 12 compared with those who started Year 11.

Literacy and numeracy

Literacy and numeracy achievement is regarded as a major factor contributing to continued education and to work outcomes (Penman 2004). Yet, from the early primary school years through to Year 9, Indigenous children perform well below non-Indigenous levels.

In Year 3, the percentages of Indigenous children who performed at national benchmark levels for reading, writing and numeracy were 72 per cent, 67.8 per cent and 80.2 per cent, respectively. The Year 5 data show that 66.9 per cent, 79.9 per cent and 63.2 per cent of Indigenous students met the national benchmarks for reading, writing and numeracy, respectively (SCRGSP 2003).

Data from the Longitudinal Studies of Australian Youth (LSAY) show that Indigenous students perform significantly lower than non-Indigenous students in standard tests of literacy and numeracy at 14 years of age (typically in Year 9) (Rothman 2002). The same studies also indicate that performance levels for Indigenous students in remote regions are substantially below that of Indigenous students in other areas (Jones 2002).

Not only are there grave concerns about the low levels of literacy and numeracy, but there is growing concern that it is getting worse (Northern Territory Department of Education 1999). Although the Senate report into education (SEWRSBERC 2000) states that national data does not support the concern, other data raise questions.

For example, in the LSAY report mentioned above, it was also found that the levels of literacy and numeracy for Indigenous students had decreased—albeit, not at a statistically significant rate—from 1995 to 1998 (Rothman 2002).

Availability and accessibility

The data showing that more Indigenous children attend less school, leave earlier and have lower levels of literacy and numeracy than their non-Indigenous counterparts needs to be tempered with the data on the availability and accessibility of schooling. As was noted in the early childhood section, not all Indigenous children have access to preschool. This is also the case for later levels of schooling.

While specific national data for Indigenous children and youth is not readily available, submissions to the inquiry into rural and remote education (Human Rights and Equal Opportunity Commission 2000) gives some indication. In terms of primary schools:

◗ It is estimated that in Arnhem Land 700 to 1,000 children do not have access to education.

◗ Outstations around Doomadgee (Queensland) have up to 200 school age students but no school.

◗ Of the 23 homelands in the Nambarra Schools Council region only 8 are eligible for Northern Territory Government support.

The inquiry also makes the following points about secondary schools:

◗ In the Northern Territory outside the urban areas there is very little provision of secondary education, especially to Year 12.

◗ The substantial Aboriginal communities of Doomadgee, Mornington Island and Aurukun (Queensland) have no senior secondary school provision.

Schwab's (1999) analysis of secondary school participation rates supports the suggestion that Indigenous students are under-served in terms of educational facilities in rural areas.

When children are unable to access a school they are expected to use distance education or, in secondary years, to attend an urban school. However, as the report on rural and remote education noted, very few Indigenous children use distance education. This is easy to understand when you consider that such education requires the parents to have sufficient education to understand the curriculum themselves. The report also notes that where boarding is the only option for Indigenous children it is rarely successful (Human Rights and Equal Opportunity Commission 2000). Again, this is understandable given the strong family bonds and the costs.

A note on judging outcomes

I think it is important to recognise that the documentation of poor attendance, poor retention, and lower levels of literacy and numeracy all reflect judgments made from a non-Indigenous perspective. So, to say that Indigenous children generally have poorer educational outcomes is to say that they are poorer by non-Indigenous standards.

Earlier I described what we know about early learning and language acquisition in Indigenous children and there was nothing to suggest that they are not prepared to learn—indeed, quite the contrary. Put simply, you could say that the problem arises from the transition from one culture to another. But put more forcefully, it reflects 'the ongoing struggle by Indigenous people to not only gain improved access to schools but also to participate in schooling which is culturally sensitive and offers equitable and appropriate outcomes' (Herbert et al. 1999, p. 2).

The point here is that, what is seen as poor attendance or poor educational outcomes from a non-Indigenous perspective could be seen from another perspective as a failure of the school system or as a rejection by the students themselves of that school system.

What contributes to poor outcomes?

Cultural mismatches

Mobility
Significant population mobility exposes children to a number of educational risks. Poor attendance is clearly a major risk, but the Northern Territory Department of Education report (1999) points to others:

◗   increased probability of repeat work or missed blocks because of different sequencing and approaches in different schools

◗   decreased likelihood of a good relationship between student and teacher

◗   ad hoc transfer of student records.

It is important to note that the Northern Territory Department of Education (1999) does not see mobility as inevitably leading to poor attendance and outcomes. Indeed their review points out that the mobility of families is quite patterned and if the Department were to organise its administration to better align with the clustering of affiliated communities, it would be to the advantage of Indigenous students. So, rather than suggesting that it is mobility per se that is the problem, it would be more accurate to say it is the misalignment between Indigenous practices and non-Indigenous educational administration. This makes one of many points in support of the importance of community control of schools recommended by the Royal Commission into Aboriginal Deaths in Custody (Johnston 1991) and reinforced by the Senate inquiry into Indigenous education (SEWRSBERC 2000).

Not forcing kids

The Warrki Jarrinjaku review of child rearing in central Australia (2002) raises a potentially important question about whether going to school constitutes good behaviour within Indigenous culture. As they point out, it is clear that sharing food and possessions, looking after younger siblings and showing compassion for others are all desirable behaviours but it is less clear what else may be. They ask: do adults consider going to school every day a desirable behaviour and one that they should enforce? Similarly, is attendance at school seen as a choice by the child or are there judgments made and actions taken to pressure the child to go to school?

Anecdotal evidence (Warrki Jarrinjaku 2002; Northern Territory Department of Education 1999) would suggest that some parents and families are reluctant to force children to go to school. This is certainly in keeping with the general Indigenous approach to child rearing that gives children the freedom to choose what they want.

But I suspect there is more to it than this. We need to bear in mind that for many parents schooling was a bad experience, especially with regard to the institutionalised racism that was rife in earlier (and not so earlier) times (Herbert et al. 1999). So why should parents force their own children into a situation that they themselves found so negative?

Given this, perhaps the real question is: what could make the children themselves choose to go to school and to stay? Some possible answers to this are discussed later in this section.

Health and socioeconomic issues

The impoverished living and socioeconomic conditions of Indigenous children documented earlier impact on their educational outcomes in many ways. By way of illustration, Hill (2002) points out that there is a marked relationship between family poverty and low levels of achievement in school literacy and, notably, this occurs across Indigenous and non-Indigenous families. Research also shows that children with nutritional, hearing and other health problems are more likely to experience slow literacy development (Schwab 1999). These problems are prevalent in Indigenous children.

Nutrition and related health factors

I've already noted that Indigenous children are more likely to suffer from low birth weight and from malnutrition and failure-to-thrive during early childhood. This not only affects general physical growth but also children's intellectual developments and hearing abilities well before they arrive at school (Northern Territory Department of Education 1999; MCEETYA 2001).

The poor starts experienced by many Indigenous children continue into school. However, it should be noted that there may be remote–urban differences in certain health characteristics. For example, Mackerras et al. (2003) have shown that remote

children are shorter and lighter than their urban counterparts and have a higher incidence of visible infections.

The Northern Territory Department of Education review (1999) mentioned frequent reference to poor health as a key hindrance to learning outcomes. Many children suffer from hunger that causes listlessness, inattention and concentration lapses and that acts as a contributing factor to absenteeism (SEWRSBERC 2000). In recognition of this, many schools offer nutrition programs.

Hearing difficulties
Indigenous children are reported as having ear or hearing problems at twice the rate of non-Indigenous children, primarily due to the high rates of middle ear infection (otitis media) (ABS 2003). And, while the SCRGSP (2003) report concludes that the true burden of hearing loss is unclear, there is evidence from the Senate inquiry into Indigenous education that the prevalence of otitis media is much higher than suggested in the ABS data. For example, the report (SCRGSP 2003) cited one study showing over 20 per cent of all northern Australian Aboriginal children are affected by otitis media.

Otitis media has direct and compounded effects on learning (SCRGSP 2003; SEWRSBERC 2000; MCEETYA 2001; Brady 1991; Australian Office of Hearing Services 2002). The most obvious direct effect is that the children simply cannot hear what is being said in the classroom or, at least, cannot fully hear. This then has a compounding effect on the existing difficulties associated with schooling, particularly in remote areas where attendance is a constant struggle (why bother going when you cannot hear). In addition, young people who cannot hear can be subjected to social ostracism because they are different. The resultant lack of confidence and low self-esteem can be further devastating.

Given the prevalence of otitis media and the consequences of subsequent hearing impairment it is clearly an important factor contributing to poor educational outcomes. It is also one often unrecognised or followed up and supported.

On the other hand, the incidence of otitis media (and general skin infections) can be drastically reduced with simple interventions. One study in Western Australian found that the introduction of swimming pools in two remote communities led to a substantial reduction in otitis media (from 32 per cent to 13 per cent and 18 per cent) and in skin infections (from 62 per cent to 18 per cent and from 70 per cent to 20 per cent) (Lehmann et al. 2003).

Substance abuse and family disruption
Excessive alcohol consumption within families has two major impacts on the children. First, it often diverts limited money away from essentials such as food, clothing and education. Second, it creates family disruption that, at the least, means children do not get enough sleep and, at the worst, means they are subject to the violence that often goes with excessive drinking (MCEETYA 2001; Northern Territory Department of Education 1999). Anecdotal evidence suggests that where

communities restrict or ban alcohol there is a positive impact on school attendance and child nutrition (Northern Territory Department of Education 1999).

There is additional concern in many communities about the substance abuse by children themselves, usually involving solvents (Northern Territory Department of Education 1999). Those involved are often very young, can themselves disrupt family life by either falling into a trance-like state or becoming violent, and can suffer long term brain damage (MCEETYA 2001). This clearly impacts on school attendance and education outcomes.

Racism

Schwab's (1999) analysis of Indigenous school retention shows that when factors such as school achievement and socioeconomic background are controlled for, Indigenous students still leave school at a rate that far exceeds other students. He suggests that this difference can be explained by factors associated with the historical and cultural experience of being Indigenous in Australia. One such prominent factor is the experience of racism.

Throughout the literature on the education of Indigenous children there is repeated reference to racist experiences — both blatant and endemic in the institutions (for example, Aboriginal Education Foundation of South Australia 1992; Purdie et al. 2000; Herbert et al. 1999; SEWRSBERC 2000). Blatant racism is experienced in everyday interactions with non-Indigenous teachers and students. Institutionalised racism is expressed in various ways but hinges on the failure to recognise, let alone to respect, the Aboriginality of the students and the cultural differences that entails. The issue of respect for mobility that was raised earlier is just one such example of institutionalised racism.

The end consequence of this experience of racism at school is that students leave school early (SEWRSBERC 2000). Some research has suggested that this comes about because of the diminished sense of self-worth or esteem (Purdie et al. 2000). Others have suggested that removing themselves from the school system — either by absenteeism or leaving early — is a legitimate response to the students' experience of racism (Herbert et al. 1999). Either way, racism can drive them away. However, it should be noted that Herbert et al. (1999) concluded that racism was more significant in New South Wales than it was in the Northern Territory.

Better outcomes

Culturally relevant and appropriate education

A review of the literature on Indigenous attrition in higher education concluded that the first step in improving attrition rates would be to create an education environment in which students want to remain (Bourke, Burden & Moore, cited in Australian Council of Educational Research 1998). This is the same suggestion I made earlier about student absenteeism: what could make them want to go to school and stay?

Studies have shown (Australian Council of Educational Research 1998) that a key influencing factor is an education that is relevant to Indigenous students—that is, one that addresses and respects issues of Indigenous identity and culture. The arguments for relevance are twofold. First, if it is relevant, students are more likely to attend school and, by implication, to learn. Second, if it is relevant, it will be showing recognition of the value of Indigenous peoples and their cultures, and thus enhancing such things as self-identity and self-esteem.

These arguments regarding relevance and other associated curriculum issues were discussed at length in the Senate Indigenous education review (SEWRSBERC 2000), with no clear-cut conclusion on effectiveness. The problem here is that there are two separate issues. First, there is what I would call a moral issue: is it right that Indigenous students are taught in ways that respect their culture? For me, the answer is unequivocally yes and thus doing so is justified on moral grounds. Then there is the second issue: what is the practical or empirical import of doing so? In other words, what evidence do we have of the practical consequences and of the factors that make it work?

Below, I identify two specific culturally relevant curriculum issues that appear to lead to better outcomes. Further factors affecting better outcomes are then discussed in the following two sections. However, there is an overriding caveat to this discussion: there is no one solution. I have already presented sufficient argument, and some evidence, to show there are differences between Indigenous groups. When it comes to education in particular, we need to take account of the sociodemographic characteristics associated with remoteness (for example, urban or remote), Indigenous representation (for example, few or fully) in the schools, and types of communities (see for example, Herbert et al 1999).

Language matters
Almost all children in remote schools and some regional/urban students do not speak English as their first language. They will speak their home country language and/or Aboriginal English—the latter now recognised as a language in its own right (SEWRSBERC 2000). Recognising that these students are English as a second language (ESL) speakers and teaching appropriately is critical to their educational outcomes, especially when these outcomes are measured, as it were, in English-speaking terms.

Bilingual teaching is the most obvious way to deal with ESL students. Evidence up to 1988 collected by the Northern Territory Department of Education review (1999) clearly shows positive literacy and numeracy outcomes for bilingual schools when compared with non-bilingual schools. However, the situation now is less clear. External assessment of bilingual programs stopped in 1988 and the Northern Territory Government has dropped its bilingual policy.

The Northern Territory Department of Education review (1999) suggests that the concept of 'two-way learning' is more appropriate to the current circumstances in the Northern Territory. The Senate Indigenous education review (SEWRSBERC 2000)

also argues that two-way learning is the more important concept for all Indigenous students whether they are ESL students or not. With such learning, attention is paid to education in and about both the Indigenous and non-Indigenous cultures.

However, there is no substantive empirical evidence that 'two-way learning' will inevitably result in better educational outcomes. Indeed, the Northern Territory Department of Education review (1999) argues strongly that a 'one size fits all approach' is doomed to fail. Any two-way learning program must fit the individual situation and the requirements of the different communities. When it does, as case study evidence presented by the Northern Territory Department of Education (1999) and the Senate review (SEWRSBERC 2000) shows, it can work well.

Teachers and teaching practices

As a general principle, two-way learning is commendable, but it must be matched with good teachers and good teaching practices to bring about desirable outcomes (Northern Territory Department of Education 1999). When it comes to teaching Indigenous students, there are two particular factors that are important.

First, there is the culture of the teachers. While I could find no direct empirical evidence showing that Indigenous teachers are better for Indigenous students, there was some evidence that Indigenous education workers were important in the lower levels of secondary schooling (SEWRSBERC 2000). There are good arguments why this should be so for education workers, and for teachers. In particular, Indigenous teachers have the advantage of understanding the culture, and often its language(s), and can act as role models for their students. The problem is there is an underrepresentation of Indigenous teachers and education workers (SEWRSBERC 2000).

Second, certain teaching practices are more appropriate than others, especially those that understand and build on the cultural practices Indigenous children bring into the classroom. From the earlier sections on early childhood and child rearing practices, I noted that Indigenous children have culturally specific skills that have a direct bearing on their preparedness to learn. For example, they are not raised to respond to authoritarian behaviour, they are expected to keep each other safe and work together, and they learn by moving around and looking and doing things together. Malin's (1998) astute chapter on what makes a good teacher of Indigenous students shows how such culturally specific skills can be recognised and incorporated into good teaching practices. She also shows how critical this is to encouraging academic pursuits, as did the study by Hill (2002) on literacy development. As Herbert et al.'s (1999) study also points out, good teachers have always known that much of their success is directly attributable to the way they interact with their students.

Family and community involvement

Good educational outcomes require an environment of nurture and support and this is perhaps more so for Indigenous students than others given, amongst other things, the cultural emphasis on communal life. The innovative projects mentioned

in the early childhood section showed the importance of involving the families and the whole community in good outcomes. This is also the case for primary and secondary school. And, it is especially the case for the transition point from compulsory to post-compulsory schooling where the support from home (as well as school) is critical (Australian Council of Educational Research 1998).

For parents to support their children they need to understand the school requirements (Herbert et al. 1999). Parents also need to be actively involved with their children's schooling both at school and at home—this is a known characteristic of student success (Northern Territory Department of Education 1999).

However, there is also much evidence that Indigenous parents often feel intensely uncomfortable with teachers and unsure how best to interact, if at all, with schools (Schwab 1999; Northern Territory Department of Education 1999). Various strategies have been described (for example, Herbert et al. 1999) for getting parental involvement, in particular, using Indigenous education workers and home liaison officers. The key point is that if parents do understand and feel involved with the school they will provide better support for their children.

One significant way of increasing parental involvement and the whole community is to create schools as community education centres—centres for everyone, not just the kids. Schwab and Sutherland (2001) reviewed five examples of programs that have been premised on the belief that education begins with the family, and so parents need to be full partners in their children's education. These programs offered extended learning opportunities and incorporated wider programs of social development and personal growth for individuals and the whole community. There is sufficiently strong evidence that they work to retain students, develop good individual skills, involve parents and develop a strong sense of community.

Other case study evidence cited in the Senate report on Indigenous education (SEWRSBERC 2000) supports the importance of community involvement in, and management of, schools for improving educational outcomes.

Positive self-identity

Having a clear sense of self and valuing it positively is pivotal to successful achievement in many regards. For example, a study by Day (1991, cited in Australian Council of Educational Research 1998) showed a clear link between identity and outcomes. Indigenous students who stayed on at school had strong Indigenous and personal identities as well as Western school cultural knowledge and a determination and desire to succeed at school.

However, Purdie et al. (2000), suggests that a strong sense of Indigenous identity by itself is not enough. While many of the Indigenous students involved in their study had a positive sense of themselves as Indigenous this was not necessarily linked with good educational outcomes. Positive self-identity as a student was far more likely to relate to good educational outcomes.

Purdie et al. (2000) identify a number of factors that contribute to a positive self-identity as a student. These factors include:

◗ school—where students have a sense of belonging

◗ teachers—who are supportive and have positive expectations

◗ curriculum—which has relevance

◗ community—support and encouragement from family and the broader community.

All of these have been mentioned earlier when describing the factors contributing to better educational outcomes. The significance of this is the substantial part that a good school with good teachers and a relevant curriculum can play in developing a positive identity as a student with its consequent good educational outcomes. The quality of school life does count.

I think there is one final point that needs drawing out here and that is the relationship between nonattendance and quality of schooling. In many of the discussions about nonattendance there is the implication that the kids play 'truant'—nobody makes them go to school and they just entertain themselves doing things more interesting to them. However, Schwab (1999) makes an important point citing figures from South Australia that the issue of nonattendance may be one of alienation from education rather than one of truancy. Perhaps the answer to the question raised earlier—what could make them want to go to school?—is to provide a good school experience: one that does not alienate them and that develops a positive self-identity as a student.

Pathways outside of school

From school to further education and work

Other forms of education and training

Higher education
The picture of the pathways of young Indigenous students after they complete Year 12 is fragmented. From the 2001 census data, we know that 12.5 per cent (compared with 33.5 per cent for non-Indigenous) of the Indigenous population aged 15 years and over had a post secondary level 3 certificate (for example, degree, diploma).

We also know that Indigenous students have a lower success rate in higher education than non-Indigenous students (SCRGSP 2003). This lower success rate reflects the number of difficulties experienced by Indigenous students, especially in trying to balance family and community responsibilities with study demands (Grant 1996, cited in Australian Council of Educational Research 1998).

Vocational education and training

The picture of the pathways for those more than 60 per cent who left school before Year 12 is also fragmented. However, it would seem that some at least are turning to other forms of vocational education and training (VET). The Senate inquiry into Indigenous education (SEWRSBERC 2000) cites the following data:

◗ Since 1996 there have been significant increases in the numbers of teenage Indigenous VET students, with annual growth rates of almost 25 per cent.

◗ Levels of VET participation among Indigenous Australians aged 15 to 24 years are now higher than among all Australians.

Other data discussed by the Senate inquiry (SEWRSBERC 2000), although not age-specific, shows that many of the enrolments are at the preparatory level rather than semiprofessional or professional. This would suggest that Indigenous youth and adults are turning to TAFE rather than high school to complete their education and evidence confirms that Indigenous students had a better perception of TAFE than of schools (NSW TAFE 1995, cited in Australian Council of Educational Research 1998).

However, how successful the turn to TAFE rather than school may be is not clear. The one indication that success may be limited is the finding that Indigenous VET students (age unspecified) have higher withdrawal and failure rates than other VET students (SEWRSBERC 2000; SCRGSP 2003). Other studies suggest that these high withdrawal and failure rates could be improved if courses offered were more culturally appropriate (Australian Council of Educational Research 1998).

Into the labour market

The labour force participation for Indigenous people generally is lower than that for non-Indigenous people. It is also lower for Indigenous youth. In 2001, 42 per cent of Indigenous males and 36 per cent of Indigenous females were employed, compared with 50 per cent and 53 per cent of non-Indigenous males and females aged between 15 and 19 years (ABS 2003). This employment figure includes those in Community Development and Employment Projects (CDEP) programs and so is, in one sense, inflated for Indigenous people.

ABS data from 2001 (SCRGSP 2003) also show that 30 per cent of the 15 to 19 year-old Indigenous population were at risk—they were unemployed or not in the labour force and not attending an educational institution. In addition, almost half of the 15 to 19 year-olds in the Northern Territory were in this at-risk group. These at-risk people are most likely to suffer long-term disadvantage.

It is worth noting that data (from LSAY) for all Australian youths identify only about 10 per cent in the at-risk group. Moreover, other data for all Australian youths confirm that leaving before Year 12 and having lower levels of literacy and numeracy are associated with high unemployment rates in the early post-school years at least. Living in a socioeconomically disadvantaged community also impacts on unemployment (Penman 2004). And, as we can see from the above figures, living

in remote regions with little employment opportunities further exacerbates the picture.

Transitional programs and CDEP
Community Development and Employment Projects (CDEP) provide employment opportunities for Indigenous peoples, especially for those in remote regions. Participation in these projects, however, may only be on a part-time basis with no long-term tenure. Research in the Northern Territory, New South Wales and Western Australia shows that participants have mixed views about the CDEP scheme and young Torres Strait Islanders (15 to 24 years) are quite negative about it. They see the normal part-time CDEP work as relatively meaningless and boring (Arthur & David-Petero 2000).

There are other programs or strategies in place aimed at helping Indigenous youth make the transition from school into work, but a review of these programs suggests that more needs to be done on these programs to make them work better for Indigenous youth (Australian Council of Educational Research 1998). Those that do work contain the same factors that make high school and TAFE work—that is, are culturally appropriate and community supported.

At-risk and in trouble

Into the juvenile justice system

Indigenous people are overrepresented at all stages in the criminal justice system— arrest rates, bail refusals and sentencing. This is as true for juveniles as it is for adult males and females (Woodward 2003). For example, census data show that in 2000–01, 43 per cent of the 10 to 17 year-olds in detention centres were Indigenous. While the rate of detention had declined between 1994 and 2001, Indigenous youth were still 17 times more likely to be in a detention centre than non-Indigenous youth (Cahill & Marshall 2002).

Two general factors are likely contributors to this extraordinarily high detention rate. I talked about the profound psychosocial stress experienced in many Indigenous communities and the consequent breakdown in the care giving environment earlier and there is no doubt that this makes a significant contribution to juvenile criminal behaviour. Importantly, it should be noted that there is strong evidence that Indigenous children who have been maltreated have a significantly increased risk of offending before the age of 18 years (Harris 2003).

However, there is also the issue of racism and its reflection in police treatment of juveniles. Since the Aboriginal Deaths in Custody report (Johnston 1991), the more blatant aspects of this have no doubt been tempered. Nevertheless, while racism exists in mainstream society, it will exist in the police force. General evidence indicates that if you are black you are still more likely to come to police attention and more likely to experience criminal justice interventions (Bargen 2001).

Following the Aboriginal Deaths in Custody report (Johnston 1991) and other recent reviews of the juvenile justice system (see Bargen 2001) greater emphasis has been placed on diverting Indigenous youth from courts and ultimately custody. While no

national data are available, there are some state data (SCRGSP 2003). In New South Wales, 34 per cent of Indigenous juveniles (10 to 17 years) caught by police in 2002 were diverted out of the traditional system. In the majority of instances, the juvenile was charged but not sent to court. This rate is comparable with the total rate of all juveniles of 35 per cent. In Western Australia, 54 per cent of Indigenous juveniles were diverted compared with 80 per cent of non-Indigenous juveniles. In the Northern Territory, 43 per cent of the Indigenous juvenile cases (not persons) were diverted, compared with 56 per cent of the non-Indigenous cases. In all states, Indigenous females were more likely to be diverted than males.

What factors may be contributing to these different diversion rates is not clear. However, the fact that diversion is at the discretion of the police must be taken into account and that these police powers are not necessarily exercised fairly (Fitzgerald 2001; Bargen 2001).

Whether or not diversions are successful is not clear. However, there is some evidence from New South Wales that since the new Young Offenders Act became law in 1998, the number of new and finalised matters in children's courts has steadily decreased, as has the total number of young offenders held in custody; although, unfortunately, not the proportion of Indigenous young people in custody (Bargen 2001).

Alternatives for at-risk youth

While diversion and other measures to avoid the traditional non-Indigenous justice system are important, it is the efforts to keep young people away from criminal activities altogether that are more important. Providing alternatives in the form of sport and recreational activities and appropriate opportunities for education and training would seem most useful.

The literature revealed nothing about the value and role of Indigenous cultural activities for at-risk youth.

Sport and recreation

The Fitzgerald Inquiry (2001) notes that initiatives to enhance sport and recreation opportunities have a significant potential for preventing breaches of the law in Indigenous communities, especially by young people. There is currently little information on the participation of Indigenous youth in organised sport, arts or community group activities although the SCRGSP review (2003) cites a number of innovative programs available. The review also cites anecdotal evidence of the impact of one program: with the introduction of a football oval and basketball court to a rural New South Wales' community, petty crime and ambulance call out rate decreased noticeably. Another review (Beneforti & Cunningham 2002) also notes that there is anecdotal and qualitative evidence that sport and recreation can directly or indirectly influence a number of areas of social concern to Indigenous communities.

Getting them back to school

Not coping at school, leaving early, being bored, and having little to do is a sure recipe for youth being at risk. Provision of alternative recreational activities is a part solution, but getting early school leavers back to school is better. A program to do just that in Victoria is described by Lovett, Stringer and Parker (2001). It has all the elements required for engaging Indigenous youth but no evaluation data are available.

Inspiring outcomes

Given the history of devastation and the generally impoverished circumstances of Indigenous people, along with the lack of culturally appropriate services, it is understandable that many Indigenous youth have poor outcomes. However, there is enough in the literature reviewed to suggest that these poor outcomes are not necessarily inevitable and that much can be done to change things.

There is also enough in the literature reviewed to show that while poor outcomes occur far too often, especially compared with non-Indigenous youth, there is a noticeable number of Indigenous youth who 'make it'. For example, while the majority of Indigenous children do not complete Year 12, there are some that do. And, while there is a significant minority (30 per cent) of Indigenous youth between 15 and 19 years who are at risk—unemployed or out of the labour force, and not in further education—70 per cent are not.

Understandably, the major focus has been placed on the disproportionate numbers of children and youth who have poor outcomes. However, there is as much to learn, if not more, from those with good outcomes as from those with poor ones. The trouble is, I found little relating to the good stories. What circumstances and inner strength and resilience have led some Indigenous youth to 'make it'? What inspirational stories have they to tell?

A recent publication by two young Indigenous women offers a rare set of inspirational stories. In *Fresh Footprints*, Kate Munro and Michelle Tyhuis (2003) present the personal stories of 60 successful young Indigenous people—where they came from, what they have done and what has inspired them to achieve. In reading through these stories, I was struck by three important things.

First, the young people frequently mentioned the importance of role models and mentors to them. For example, those who had succeeded down the sporting pathway found Cathy Freeman a powerful role model. Second, the young people also frequently mentioned the importance of family and community support in helping them along their way. As a senior education officer said: 'the support of my parents and late grandfather taught me that family and community support networks are critical in succeeding in education and career aspirations' (Munro & Tyhuis 2003, p. 84). Third, their pathways to success were not always straightforwardly through school, into further education and/or work and their successes were not necessarily conventional. For example, there is the National Whip Cracking Champion, Russel Adcock, who has dedicated himself to his art despite being born with severe arthritis. And there is Kassey Blanco, who left

school to become a hairdresser, and then a young entrepreneur and member of the National Youth Roundtable 2001.

We need to know more about young people like those described in *Fresh Footprints*. How did they do it? Where did they find the strength to excel? What were the key turning points for them? And we need to hear more about such young people because, in the words of Kate Munro (2003, p. 11):

> [I]t's time people stand up, take notice and acknowledge the undeniable array of talent in Australia's Indigenous community.

References

Aboriginal and Torres Strait Islander Women's Task Force on Violence 2000, *Aboriginal and Torres Strait Islander Women's Task Force on Violence Report,* Revised edition, Queensland: Department of Aboriginal and Torres Strait Islander Policy and Development.

Aboriginal Education Foundation of South Australia 1992, *Aboriginals respond to the Royal Commission into Aboriginal Deaths in Custody,* Aboriginal Education Foundation of South Australia Inc & Aboriginal Employment Development Branch, Adelaide.

Arthur, WS & David-Petero, J 2000, 'Career aspirations and orientation to work: Young Torres Strait Islanders 1999', *CAEPR Discussion Paper No. 206*, Centre for Aboriginal Economic Policy Research, Australian National University, Canberra.

Atkinson, J 2002, *Trauma trails, recreating song lines: the transgenerational effects of trauma in Indigenous Australia,* Spinifex Press, Melbourne.

Australian Bureau of Statistics 2003, *The health and welfare of Australia's Aboriginal and Torres Strait Islander peoples,* Australian Bureau of Statistics and Australian Institute of Health and Welfare, Canberra.

Australian Council of Educational Research 1998, *The school to work transition of Indigenous Australians: a review of the literature and statistical analysis,* ACER, Melbourne.

Australian Office of Hearing Services 2002, *Report on Commonwealth funded hearing services to Aboriginal and Torres Strait Islander peoples*, AGPS, Canberra.

Bailie, R, Siciliano, F, Dane, G, Bevan, L, Paradies, Y & Carson, B 2002, *Atlas of health related infrastructure in discrete Indigenous communities*, Aboriginal and Torres Strait Islander Commission, Melbourne.

Balmer, L & Foster, V 1997, 'Preliminary evaluations of the effects of a nutrition awareness project on the Ngaanyatjarra Pitjantjatjara Yankunytjatjara communities of central Australia', *Collegian,* (42), pp. 26–32.

Ban, P, Mam, S, Elu, M, Trevallion, I & Reid, A 1993, 'Torres Strait Islander family life', *Family Matters,* 35, p. 16–21.

Bargen, J 2001, 'Diverting ATSI young offenders from court and custody in NSW— practices, perspectives and possibilities under the Young Offenders Act 1997', paper presented at the Best Practice Interventions in Corrections for Indigenous People Conference, Sydney, October.

Batrouney, T & Soriano, G 2001, 'Parenting in the Torres Strait Islands', *Family Matters,* 59, pp. 48–53.

Beneforti, M & Cunningham, J 2002, *Investigating indicators for measuring the health and social impact of sport and recreation programs in Indigenous*

communities, Australian Sports Commission and Cooperative Research Centre for Aboriginal and Tropical Health, Darwin.

Bourke, E 1993, 'The first Australians: kinship, family and identity', *Family Matters,* 35, pp. 4–6.

Brady, M 1991, *The health of young Aborigines,* National Clearinghouse for Youth Studies, Hobart.

Butler, B 1993, 'Aboriginal children: back to origins', *Family Matters,* 35, pp. 7–12.

Cahill, L & Marshall, P 2002, 'Statistics on juvenile detention in Australia: 1981–2001', *Technical and Background Paper Series No. 1,* Australian Institute of Criminology, Canberra.

Centre for Community Child Health 2000, *A review of the early childhood literature,* Department of Family & Community Services, Canberra.

Collard, D, Crowe, S, Harries, M & Taylor, C 1994, 'The contribution of Aboriginal family values to Australian family life' in J Inglis & L Rogan (eds) *Flexible families* Australia: Pluto Press, pp. 113–22.

Daly, AE & Smith, DE 1998, 'The continuing disadvantage of Indigenous sole parents: a preliminary analysis of 1996 census data', *CAEPR Discussion Paper No. 153,* Centre for Aboriginal Economic Policy Research, ANU, Canberra.

——1999, 'Indigenous household demography and socioeconomic status. The policy implications of 1996 census data', *CAEPR Discussion paper No. 181,* Centre for Aboriginal Economic Policy Research, ANU, Canberra.

D'Souza, N 1993, 'Aboriginal child welfare: framework for a national policy', *Family Matters,* 35, p. 40.

Engeler, T, McDonald, MA, Miller, ME, Groos, A, Black, ME & Leonard, D 1998, *Review of current interventions and identification of best practice currently used by community based Aboriginal and Torres Strait Islander health service providers in promoting and supporting breast feeding and appropriate infant nutrition,* AGPS, Canberra.

Finlayson, JD & Auld, AJ 1999, 'Shoe or stew? Balancing wants and needs in Indigenous households: a study of appropriate income support payments and policies for families', *CAEPR Discussion Paper No. 182,* Centre for Aboriginal Economic Policy Research, ANU, Canberra.

Fitzgerald, T 2001, *Cape York Justice Study,* Premier's Department, Queensland.

Fleer, M & Williams-Kennedy, D 2002, *Building bridges: Literacy development in young Indigenous children,* Australian Early Childhood Association, Canberra.

Greer, P 2003, 'Sexual assault and Indigenous communities', Paper presented at Practice and prevention: contemporary issues in adult sexual assault in NSW conference, viewed at <www.lawlink.nsw.gov.au/cpd.nsf/pages/greer>.

Harris, L 2003, 'Research links child maltreatment with juvenile offending', *Indigenous Law Bulletin*, *5 (22)*, p. 5.

Henry, R & Smith, DE 2002, 'Three years on: Indigenous families and the welfare system, the Kuranda community case study', *CAEPR Discussion Paper No. 229,* Centre for Aboriginal Economic Policy Research, ANU, Canberra.

Herbert, J, Anderson, L, Price, D & Stehbens, C 1999, *If they learn us right: a study of the factors affecting the attendance, suspension and exclusion of Aboriginal students in secondary schools,* Australian Centre for Equity through Education, Sydney.

Herceg, A 2004, 'Improving health in Aboriginal and Torres Strait Islander pregnant women, babies and young children: a literature review', Draft report, Office for Aboriginal and Torres Strait Islander Health.

Hill, S 2002, '100 children turn 10: a longitudinal study of literacy development from the year prior to school to the first four years of school', *Newsletter of the Australian Literacy Educators' Association*, October.

Huggins, J 2003, 'It's now or never...our chance to tackle Indigenous family violence', Keynote address reported in *Aware: ACSSA Newsletter No 2*.

Hull, BP, McIntyre, PB & Couzos, S 2004, 'Evaluation of immunisation coverage for Aboriginal and Torres Strait Islander children using the Australian Childhood Immunisation Register', *Australian and New Zealand Journal of Public Health*, 28 (1), pp. 47–52.

Human Rights and Equal Opportunity Commission 1997, *Bringing them home: Report of the national inquiry into the separation of Aboriginal and Torres Strait Islander children from their families*, Human Rights and Equal Opportunity Commission, Sydney.

——2000, *Emerging themes: national inquiry into rural and remote education*, Human Rights Commission, Sydney.

Hunter, B 1999, 'Three nations, not one: Indigenous and other Australian poverty', *CAEPR Working Paper No. 1*, Centre for Aboriginal Economic Policy Research, ANU, Canberra.

IINA Torres Strait Islanders Corporation 1996, 'Proposed plan of action for the prevention of child abuse and neglect in Torres Strait Islander communities', AGPS, Canberra.

Johnston, E 1991, *Royal Commission into Aboriginal Deaths in Custody: national report*, AGPS, Canberra.

Jones, RG 2002, 'Education participation and outcomes by geographic region', *LSAY Research Report No 26*, Australian Council for Educational Research, Melbourne.

Kolar, V & Soriano, G 2000, 'Parenting in Australian families: a comparative study of Anglo, Torres Strait Islander and Vietnamese communities', *Research Report No. 5*, Australian Institute of Family Studies, Melbourne.

Kronemann, M 1998, *Towards a national plan for preschool education*, Australian Education Union, Melbourne.

Kutena, A 1995, *Identified needs of remote and isolated Aboriginal children, families and communities,* Contact Incorporated, Newtown, New South Wales.

Lehmann, D, Tennant, MT, Silva, DT, McAullay, D, Lannigan, F, Coates, H & Stanley, FJ 2003, 'Benefits of swimming pools in two remote Aboriginal communities in Western Australia: intervention study', *British Medical Journal,* 327, pp. 415–19.

Lovett, A, Stringer, K & Parker, L 2001, 'Victorian programs for young Indigenous people "at risk"', paper presented at the Best Practice Interventions in Corrections for Indigenous People Conference, Sydney.

McHugh, M 2003, 'A further perspective on kinship care: Indigenous foster care', *Developing Practice,* Summer, pp. 14–24.

McRae, D, Ainsworth, G, Cummings, J, Hughes, P, Mackay, T, Price, K, Rowland, M, Warhurst, J, Woods, D & Zbar, V 2000, *What works: Explorations in improving outcomes for Indigenous students,* Australian Curriculum Studies Association, Canberra.

Mackerras, D 1998, *Evaluation of the strong women, strong babies, strong culture program*, Menzies School of Health Research, Darwin.

——Reid, A, Sayers, S, Singh, G, Bucens, I & Flynn, K 2003, 'Growth and morbidity in children in the Aboriginal Birth Cohort Study: the urban–remote differential', *Medical Journal of Australia,* 178(2), pp. 56–60.

Malin, M 1998, 'They listen and they've got respect: culture and pedagogy', in *Perspectives on Aboriginal and Torres Strait Islander Education*, Social Science Press, Katoomba, pp. 245–308.

——Campbell, K & Agius, J 1996, 'Raising children in the Nunga Aboriginal way', *Family Matters,* 43, pp. 43–7.

Martin, K 2002, 'The spirit of learning, telling our stories: education, research and life', paper presented at the Dhagun-Gur, Creche and Kindergarten Association, Spirit of learning: Telling our stories Conference, Cairns, September.

MCEETYA 2000, *Report of MCEETYA taskforce on Indigenous education,* viewed at <www.curriculum.edu.au/mceetya>.

——2001, 'Solid foundations: health and education partnership for Indigenous children aged 0 to 8 years', *MCEETYA Taskforce on Indigenous Education Discussion Paper,* June.

Munro, K & Tyhuis, M 2003, *Fresh footprints,* Department of Family and Community Services, Canberra.

National Aboriginal Community Controlled Health Organisation (NACCHO) 2003a, *What's needed to improve child health in the Aboriginal and Torres Strait Islander population,* NACCHO, Canberra.

——2003b, *A way through? Measuring Aboriginal mental health/social and emotional well being: community and post-colonial perspectives on population inquiry methods and strategy development*, NACCHO, Canberra.

National Aboriginal Education Committee 1989, *National policy guidelines for early childhood education,* AGPS, Canberra.

Northern Territory Department of Education 1999, *Learning lessons: an independent review of Indigenous education in the Northern Territory*, Northern Territory Department of Education.

OATSIH (Office of Aboriginal and Torres Strait Islander Health) 2001, *Better health care: studies in the successful delivery of primary health care services for Aboriginal and Torres Strait Islander Australians*, OATSIH Office of Aboriginal and Torres Strait Islander Health.

Penman, R 2000, *Reconstructing communicating: looking to a future,* Lawrence Erlbaum Associates, Mahwah, NJ.

——2004, '*What do we know about the experiences of Australian youth? A compendium of LSAY research reports from 1996–2003*, Australian Council of Educational Research, Melbourne.

Peters-Little, F 1999, 'The community game: Aboriginal self-definition at the local level', *AIATSIS Research Discussion Papers No. 10,* Aboriginal Institute of Aboriginal and Torres Strait Islander Studies, Canberra.

Pugh, R 2002, *Ya pulingina kani—Good to see you talk,* Office of Aboriginal Affairs, Department of Premier and Cabinet, Tasmania.

Purdie, N, Tripcony, P, Boulton-Lewis, G, Fanshawe, J & Gunstone, A 2000, *Positive self-identity for Indigenous students and its relationship to school outcomes*, Department of Education Training and Youth Affairs, Canberra.

Radford, AJ, Brice, GA, Harris, R, Van Der Byl, M, Monten, H, McNeece-Neeson, M & Hassan, R 1999, 'The "easy street" myth: self harm among Aboriginal and non-Aboriginal female sole parents in urban state housing', *Australian and New Zealand Journal of Public Health,* 23, pp. 77–85.

Ring, IT & Brown, N 2002, 'Indigenous health: chronically inadequate responses to damning statistics', *Medical Journal of Australia,* 177(11), pp. 629–31.

Rothman, S 2002, 'Achievement in literacy and numeracy by Australian 14 year-olds, 1975–1998', *LSAY Research Report No. 29*, Australian Council for Educational Research, Melbourne.

Schwab, RG 1995, 'The calculus of reciprocity: principles and implications of Aboriginal sharing', *CAEPR Discussion Paper No. 100*, Centre for Aboriginal Economic Policy Research, ANU, Canberra.

——1999, 'Why only one in three? The complex reasons for low Indigenous school retention', *CAEPR Research Monograph No. 16*, Centre for Aboriginal Economic Policy Research, ANU, Canberra.

——& Sutherland, D 2001, 'Building Indigenous learning communities', *CAEPR Discussion Paper No. 225*, Centre for Aboriginal Economic Policy Research, ANU, Canberra.

SCRGSP (Steering Committee for the Review of Government Service Provision) 2003, *Overcoming Indigenous disadvantage: key indicators 2003,* Productivity Commission, Canberra.

SEWRSBERC (Senate Employment, Workplace Relations, Small Business and Education References Committee) 2000, *Katu Kalpa: report on the inquiry into the effectiveness of education and training programs for Indigenous Australians,* Parliament House, Canberra.

Singh, GR & Hoy, WE 2003, 'The association between birthweight and current blood pressure: a cross-sectional study in an Australian Aboriginal community', *Medical Journal of Australia,* 179 (10), pp. 532–5.

Smith, D, Mununggurr, L, Bamundurruwuy, D & Edmond, K 2003, *How children grow: Indigenous and health professional perceptions*, Cooperative Research Centre for Aboriginal and Tropical Health, Darwin.

——2004, *Community action to promote child growth in Gapuwiyak*, Cooperative Research Centre for Aboriginal and Tropical Health, Darwin.

Smith, DE 1995, 'Redfern works: the policy and community challenges of an urban CDEP scheme', *CAEPR Discussion Paper No. 99*, Centre for Aboriginal Economic Policy Research, ANU, Canberra.

——(ed.) 2000, 'Indigenous families and the welfare system: two community case studies', *CAEPR Research Monograph No. 17*, Centre for Aboriginal Economic Policy Research, ANU, Canberra.

Swinburne University of Technology 2003, *VACCA/Good Beginnings: Aboriginal parenting project stage 1*, Melbourne.

Taylor, J 1996, 'Surveying mobile populations: lost opportunity and future needs' in JC Altman & J Taylor (eds), *The 1994 National Aboriginal and Torres Strait Islander survey: findings and future prospects, CAEPR Research Monograph No. 11*, Centre for Aboriginal Economic Policy Research, ANU, Canberra.

Trigwell, J 2000, *Childcare models and options in rural and remote Indigenous communities*, WA Council of Social Service, Western Australia.

Waltja Tjutangku Palyapayi Aboriginal Corporation 2001, *Pipirri Wiimaku, 'for the little kids': innovative childcare report 2000–2001,* Waltja Tjutangku Palyapayi Aboriginal Corporation, Alice Springs.

Warrki Jarrinjaku ACRS Project Team 2002, *Warrki Jarrinjaku Jintangkamanu Purananjaku: Aboriginal child rearing and associated research,* Department of Family and Community Services, Canberra.

Woodward, R 2003, 'Families of prisoners: literature review on issues and difficulties', *Occasional Paper No. 10*, Department of Family and Community Services, Canberra.

Zubrick, SR, Lawrence, DM, Silburn, SR, Blair, E, Milroy, H, Wilkes, T, Eades, S, D'Antoine, H, Read, A, Ishiguchi, P & Doyle, S 2004, *The Western Australian Aboriginal child health survey: the health of Aboriginal children and young people*, Telethon Institute for Child Health Research, Perth.

——Lawrence, D, Mitrou, F, Silburn, SR & Eades, S 2003, *The Western Australian Aboriginal child health survey: key findings from the survey field work*, Telethon Institute for Child Health Research, Perth.

Occasional Papers

1. *Income support and related statistics: a ten-year compendium, 1989–99*
   Kim Bond and Jie Wang (January 2001)

2. *Low fertility: a discussion paper*
   Alison Barnes (February 2001)

3. *The identification and analysis of indicators of community strength and outcomes*
   Alan Black and Phillip Hughes (June 2001)

4. *Hardship in Australia: an analysis of financial stress indicators in the 1998–99 Australian Bureau of Statistics Household Expenditure Survey*
   J Rob Bray (December 2001)

5. *Welfare Reform Pilots: characteristics and participation patterns of three disadvantaged groups*
   Chris Carlile, Michael Fuery, Carole Heyworth, Mary Ivec, Kerry Marshall and Marie Newey (June 2002)

6. *The Australian system of social protection–an overview* (second edition)
   Peter Whiteford and Gregory Angenent (June 2002)

7. *Income support customers: a statistical overview 2001*
   Corporate Information and Mapping Services, Strategic Policy and Knowledge Branch, Family and Community Services (March 2003)

8. *Inquiry into long-term strategies to address the ageing of the Australian population over the next 40 years*
   Commonwealth Department of Family and Community Services submission to the 2003 House of Representatives Standing Committee on Ageing (October 2003)

9. *Inquiry into poverty and financial hardship*
   Commonwealth Department of Family and Community Services submission to the Senate Community Affairs References Committee (October 2003)

10. *Families of prisoners: literature review on issues and difficulties*
    Rosemary Woodward (September 2003)

11. *Inquiries into retirement and superannuation*
    Australian Government Department of Family and Community Services submissions to the Senate Select Committee on Superannuation (December 2003)

12. *A compendium of legislative changes in social security 1908–1982*
    (June 2006)

13. *A compendium of legislative changes in social security 1983–2000 Part 1 1983–1993, Part 2 1994–2000*
    Bob Daprè (June 2006)

14. *Evaluation of Fixing Houses for Better Health Projects 2, 3 and 4*
    SGS Economics & Planning in conjunction with Tallegalla Consultants Pty Ltd (August 2006)