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'It's been a long hard fight for me': The Stolen
Generations and Narratives of Poor Health in Australia
1883-2009

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Abstract

Health, according to the World Health Organisation (WHO), can be defined as ‘a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.’ Using this definition of health, and others, as guiding principles, this thesis takes a thematic approach in order to demonstrate how nineteenth- and twentieth-century Australian government policies have influenced the health of Indigenous Australians today. The four key themes investigated are alienation, mental illness, alcohol abuse, and crime. By weaving the narratives taken from a number of published oral interviews, testimonies from *Bringing Them Home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their Families* and *Telling Our Story: A Report by the Aboriginal Legal Service of Western Australia (Inc) on the Removal of Aboriginal children from their families in Western Australia*, and other edited collections, this thesis argues that from the perspective of numerous members of the Stolen Generations, the forcible removal of Aboriginal children and the subsequent feelings of alienation produced by removal, have had significant and on-going implications for the current state of poor health within Aboriginal and Torres Strait Islander communities.

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Contents

Abstract	ii
Acknowledgements	iii
Introduction:	1
Historical Background	4
The Sources and Methodological approaches	15
Chapter One:	24
Traditional Aboriginal Health and Belonging	29
The Removal	36
Cultural Confusion	46
Chapter Two:	52
Trauma, Post-Traumatic Stress Disorder, Depression	55
Depression	62
Suicide	66
Family and Inter-Generational Effects	71
Chapter Three:	80
Chapter Four:	96
Violence	98
Crime	103
The Royal Commission into Black Deaths in Custody	105
Conclusion	114
List of Sources:	120

Introduction

'It's like a hole in your heart that can never heal'

So what you've got is not only the biological ripping away ... It was ripping away from the trees who are as much caretakers of me in that setting, as the rocks, from the rocks, the sand, from every other plant. From the reptile, from the snakes, from the birds, from everything that was there and especially from the spirit of the place, the many spirits of the place who ... had the responsibility of being my caretaker. ... So that break away would probably affect every single child who had that experience, for the rest of their life and may even go on to their children's lives, their grandchildren's, their great-grandchildren's lives.

That's the sad part about it – and for what reason?"¹

As a young child, Bob Randall was removed by police from this family in Angus Downs in the Northern Territory, to Alice Springs. At about the age of 8 or 9 he was then sent to Darwin. He never saw his parents again. The reflection above, provided by Bob as an adult in the context of an interview, shows that for Bob, being removed from his parents at a young age has amounted to more than just the physical separation. There was also a spiritual dimension to it: a 'ripping away' from the land, the

¹ Cited in Lorena Allam, 'Memories of the Home: this beautiful sense of freedom' in *Many Voices: Reflections on experiences of Indigenous child separation*, eds. Doreen Mellor and Anna Haebich (Canberra: National Library of Australia, 2002), p. 39.

creatures, and the spirit of the land that was his home. In retrospect, he asks the question ‘and for what reason?’ This is a question of immense importance in Australia’s past and present, and has been explored by various historians and public commentators over the past few decades.

This thesis also investigates the topic of Aboriginal child removal, but from a new and different angle. It takes the narratives – both oral and written – of Aboriginal people who experienced child removal, and examines these for their significance as stories about the damage done to Aboriginal health from the late-nineteenth century and into the twenty-first century.

While some may consider ‘good health’ to be merely a lack of illness, the World Health Organisation (WHO) defines health as something more than this. The WHO Constitution (1946) states that ‘health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.’² However, for the purpose of this study, the definition of good health requires a far broader, and more inclusive, conceptualisation. The MediLexicon Medical Dictionary, for instance, describes good health as:

A state characterized by anatomic, physiologic, and psychological integrity, ability to perform personally valued family, work, and community roles; ability to deal with physical, biologic, psychological, and social stress; a feeling of well-being, and freedom from the risk of disease and untimely death.³

² *Official Records of the World Health Organization*, no. 2, p. 100, as cited at *Medical News Today*, ‘What is good Health? What Does Good Health Mean?’ Retrieved 02/08/10 from <http://www.medicalnewstoday.com/articles/150999.php> [accessed 02 August 2010].

³ MediLexicon, ‘Health’, *Medical Dictionary*, <<http://www.medilexicon.com/medicaldictionary.php?t=39448>>, [30 July 2010]

Such broad and inclusive definitions suit discussions of a global health population, particularly as they characterise the multifaceted nature of health, not only from the individual's perspective, but from a perception of greater health relevant to the community surrounding the individual. Indigenous models of good health add another crucial dimension, that link with, and often expand on, the above definitions. On this issue, Indigenous Hawaiian scholar, Haunani-Kay Trask asserts that if non-Indigenous historians truly want to write about issues of indigenous peoples, then they relocate their intellectual frame of reference within the local ways of thinking.⁴ Thus, this study treats Indigenous holistic perspectives of health and well-being as vital to the international and 'mainstream' definitions of health outlined above. Indeed, the National Aboriginal Health Strategy Working Party of 1989 has argued that: 'Health does not just mean the physical well-being of the individual but refers to the social, emotional, spiritual and cultural well-being of the whole community.'⁵ These definitions are further addressed and developed throughout this thesis.⁶

Using these definitions of health as guiding principles, this thesis employs a thematic approach in order to demonstrate how the Australian government and/or church initiated child removal policies of the

⁴ Haunani-Kay Trask, 'From a Native Daughter' in *The American Indian and the Problem of History*, ed. by Calvin Martin (New York: Oxford University Press, 1987) p. 178.

⁵ National Aboriginal Health Strategy Working Party, *A National Aboriginal Health Strategy*. (Canberra: Department of Aboriginal Affairs, 1989) cited in Mark Lutschini, 'Engaging with holism in Australian health policy – a review', in *Australia and New Zealand Health Policy*, 2, 15 (2005), accessed at <<http://www.anzhealthpolicy.com/content/2/1/15>>

⁶ For more on Aboriginal and Torres Strait Islander perspectives on/definitions of health and well being, refer to Mike Gooda, 'Social Justice and Wellbeing', AIATSIS Seminar Series 2010: Indigenous Wellbeing, Canberra, 28 June 2010, <http://www.hreoc.gov.au/about/media/speeches/social_justice/2010/20100628_wellbeing.html#fn3>, [accessed 12 October 2010]; and Patrick Maher, 'A Review of 'Traditional' Aboriginal Health Beliefs', in *Australian Journal of Rural Health*, 7, (1999), pp. 229-236.

nineteenth and twentieth centuries influenced the current health situation of Indigenous Australians over time. The four key themes investigated in this study focus on: alienation, mental illness, alcoholism, and criminal activity. This thesis argues that the forcible removal of Aboriginal children, and the subsequent feelings of alienation that removal produced, has had significant and on-going implications for the current state of poor health within Aboriginal and Torres Strait Islander communities. Although such publications as the *Bringing Them Home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their Families* (1997), and *Telling Our Story* (1995) reports have investigated such themes as those discussed in this thesis, there exists a gap in the scholarly literature.⁷ As opposed to conducting interviews with Indigenous Australians to tease out such ideas, Aboriginal sources (such as edited collections of child removal stories, autobiographical material, and excerpts taken from published interviews) are investigated in greater detail in this thesis for what they can tell us about how Indigenous Australians themselves view their current health situation as a result of child removal and separation. I do this by interweaving the voices of Aboriginal informants and narrators with a wider body of secondary sources throughout the body of this thesis.

Historical Background

I remember all we children being herded up, like a mob of cattle, and feeling the humiliation of being graded by the colour of our skins for the government records.

⁷ Here in ~~refer~~ferred ~~red~~ to as *Bringing Them Home*.

Confidential submission 332, Queensland.⁸

Because [my mother] wasn't educated, the white people were allowed to come in and do whatever they wanted to do - all she did was sign papers. Quite possibly, she didn't even know what she signed. ... The biggest hurt, I think, was having my mum chase the welfare car - I'll always remember it - we were looking out the window and mum was running behind us and singing out for us. They locked us in the police cell up here and mum was walking up and down outside the police station and crying and screaming out for us. There was 10 of us.

Confidential evidence 689.⁹

These brief recollections are only two short excerpts from the many testimonies offered by Aboriginal people removed from their families as children. The first is a confidential submission from a woman removed from her family in the 1950s to Cootamundra Girls' Home in New South Wales. Here she recalls the 'humiliation' felt when herself and others were ranked by the colour of their skins, 'like a mob of cows'. The second excerpt is shared by a woman taken from her family in the 1960s - sadly, it is not unique. It is an emotional and deeply personal reflection, imbued with sadness as she recalls her mother chasing the welfare car that has just taken her child away. She also points out that her mother was likely never

⁸ *Bringing Them Home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their Families* [Commissioner Ronald Wilson], ed. by Meredith Wilkie (Sydney: Human Rights and Equal Opportunity Commission, 1997), p. 186.

⁹ *Bringing Them Home*, p. 48.

fully aware of what she was signing, or indeed the impact of such a simple and seemingly harmless act.

Government policies of child removal have been studied by a variety of scholars. Arguably, research conducted within the field of Aboriginal history that does not include the discussion of child removal policies cannot be deemed adequate histories at all. Peter Read, Anna Haebich, Carmel Bird, and Brian McCoy have either written or edited books or articles that focus specifically on child removal, or the Aboriginal experiences of these acts of separation.¹⁰ With the exception of McCoy, these writers do not focus specifically on the health implications of child removal as this thesis does.

My name is Millicent D. I was born at Wonthella WA in 1945. My parents were CD and MP, both 'half-caste' Aborigines.

In 1949 the Protector of Aborigines with the native Welfare Department visited the sandhill camps. All the families living there were to be moved to other campsites or to the Moore River Aboriginal Settlement. Because my parents were fair in complexion, the authorities decided us kids could

¹⁰ Peter Read, *A rape of the soul so profound* (St. Leonards: Allen and Unwin, 1999); *The Stolen Generations: The Removal of Aboriginal children in New South Wales 1883 to 1969*, 4th Reprint (New South Wales: Department of Aboriginal Affairs, 2006); Anna Haebich, *Broken Circles: Fragmenting Indigenous Families, 1800-2000* (Fremantle: Fremantle Arts Centre Press, 2000); *The stolen children: their stories*, ed. by Carmel Bird (Milsons Point: Random House Australia, 1998); Brian McCoy, 'Missions, Dormitories and Generational Health', *Health and History*, 9, 2 (2007), pp. 48-69; *Holding Men: Kanyirninpa and the health of Aboriginal men* (Canberra: Aboriginal Studies Press, 2008).

pass as whitefellas. I was four years old and that was the last time I was to see my parents again.

Confidential submission 640.¹¹

Although this passage is only a snippet from 'Millicent's' testimony in *Bringing Them Home*, it provides an apt starting point for a discussion of the government policies that lead to the removal of Indigenous children. 'Millicent's' bigger story is one of incredible misery, confusion, humiliation, rape and mistreatment. She was removed from her parents at the age of four, and separated from her sisters and one of her brothers. Although she did get to stay with one of her brothers, she was housed in separate accommodation. 'Millicent' also shares later in her submission how she ate rat poison attempting to commit suicide, and her removal left 'an unrepairable scar of loneliness, mistrust, hatred and bitterness that marks her heart.'¹² This thesis shows some of the many testimonies submitted by Indigenous Australians that were removed from their families as children. Yet the selection used in this thesis only barely scratches the surface of the deep store of Aboriginal Stolen Generations narratives. Robert Manne, for instance, discusses the *Bringing Them Home* report findings about the actual number of Aboriginal children separated from their families during the (roughly) seventy years that child removal policies were in act. He discusses the report's suggestions that anywhere between one in three, and one in ten children were taken from their families. While he admits that there is a great difference between one in three, and one in ten, he can state for sure that 'in the seventy or so years in question tens of thousands of babies and children were removed'.¹³

¹¹ *Bringing Them Home*, p. 115.

¹² *Bringing Them Home*, p. 115, cited in *The stolen children: their stories*, p. 28.

¹³ Robert Manne, 'The Stolen Generations' in *Quadrant* (January-February, 1998), p. 53.

What is even more distressing is the fact that, until relatively recently, most non-Indigenous Australians were ignorant of any such removal practices. In the reprint of his seminal essay *The Stolen Generations* (1981), Peter Read writes that when he first published his work, child removal and separation were barely discussed. Further to this, many non-Indigenous Australians believed that such separations could never have happened. Also, the Aboriginal victims were often too ashamed to tell their stories. As Read puts it, 'they believed that maybe their parents hadn't been able to care for them properly, or worse still, didn't want them.'¹⁴ Since Peter Read first wrote his essay, many things have changed, particularly in regards to the educating of non-Indigenous Australians about the past wrongs committed upon Aboriginal and Torres Strait Islander Australians. The commissioning of the inquiry behind *Bringing Them Home* is just one of these changes. There are now also a vast number of sources concerning child removal and separation policies, and debates around the arguments contained within this literature, will be continued further in Chapter One.¹⁵

This thesis operated on the premise that Indigenous peoples in Australia have suffered poor socio-economic conditions and poor health, both of which can be attributed to historical factors such as colonisation. According to the Australian Bureau of Statistics (ABS), in 2010, Indigenous

¹⁴ Read, *The Stolen Generations*, p. 2.

¹⁵ To attempt to write an exhaustive analysis of the 'Stolen Generations' or the accompanying literature is impossible within this thesis. For further reading refer to *Contested Ground: Australian Aborigines under the British Crown*, ed. by Ann McGrath (St. Leonards, Allen & Unwin, 1995); Haebich, *Broken Circles*; Read, *A rape of the soul so profound*. Also, refer to John Herron, *Inquiry into the Stolen Generation*, Federal Government Submission, Senate Legal and Constitutional References Committee (Canberra: Senate Legal and Constitutional References Committee, 2000) for alternative arguments. Also refer to 'Special section: 'Genocide'?: Australian Aboriginal history in international perspective' Various Authors, in *Aboriginal History*, 25 (2001) pp. 1-173, for a discussion of the major debates concerning the Stolen Generations and genocide.

people in Australia numbered roughly 562,681 which is the equivalent of 2.6 per cent of Australia's population.¹⁶ Indigenous unemployment numbers show startling results when compared to non-Indigenous figures. According to 2006 census data, the Aboriginal unemployment rate averaged at 16 per cent which was roughly balanced for both males and females, compared to 5 per cent for non-Indigenous.¹⁷ The vast disparity does not end there. Statistics from the same census show that across all age groups, the median gross weekly income for Indigenous peoples in full-time work, across all occupations, was \$702 compared to \$884 for non-Indigenous.¹⁸ Life expectancy estimates also paint a bleak picture. Recently revised statistics (again taken from the ABS) suggest that an Indigenous male born between 2005-2007 is expected to live to 67.2 years, and an Indigenous female 72.9, which equates to 11.5 and 10 years (respectively) less than their non-Indigenous counterparts. In addition to this, when taking into consideration that the Indigenous population of Australia is younger than the non-Indigenous, 'death rates for Indigenous males and females are around three times higher than those of their non-Indigenous counterparts.'¹⁹ Violence and homicide in Indigenous communities is also eleven times higher than the within the general

¹⁶ Australian Indigenous HealthInfoNet, *Summary of Australian Indigenous health, 2010*, p. 1. <http://www.healthinfonet.ecu.edu.au/health-facts/summary>. [accessed 31 May 2011]

¹⁷ Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Australians, Australia, 2006*, (cat. no. 4713.0) <<http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/C4372A7598E0C731CA2578DB00283C9?opendocument>> [accessed 31 July 2011]

¹⁸ Ibid., <<http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/8E4A1018AFC6332DCA2578DB00283CCE?opendocument>>

¹⁹ *Summary of Australian Indigenous health*, p. 3; Kenneth Hill, Bridget Barker, Theo Vos, 'Excess Indigenous mortality: are Indigenous Australians more severely disadvantaged than other indigenous populations?' in *International Journal of Epidemiology*, 36, (2007), also discuss that while it is accepted that Indigenous populations around the world experience a shorter life expectancy than their non-Indigenous counterparts, however when compared to New Zealand, Canada and the United States, Australia's Indigenous population has a far worse life expectancy level, pp. 580-589.

Australian population.²⁰ Why are these statistics so important? As Fiona Armstrong states, Indigenous Australians are only worse than China when it comes to quality of living.²¹ Furthermore, much of the literature concerning Aboriginal and Torres Strait Islander health highlight the cyclical nature of how social, economic, and political environments can influence physical, mental and societal wellbeing and vice-versa.²² Therefore, if the statistics concerning the economic conditions of Indigenous Australians depict a negative picture, we can correctly expect that their health statistics will generally tell a similar story as further figures used throughout this thesis indicate.

This thesis, however, does not look at Aboriginal health using statistics, but instead, it uses stories. Methodologically speaking, this thesis takes a postcolonial approach in order to allow the voices of Indigenous peoples to speak for themselves. In other words, this thesis will attempt to create, as Doreen Mellor and Anna Haebich state, 'a more democratised version of history' in which the oppressed, can tell *their* history in *their* own words.²³ Although it is easy to be critical of such terms as 'postcolonial', critical discussions such as these are another 'step in the transformative process of decolonizing our history, a start toward undoing the colonial legacies that still characterize the relationships between Native and non-

²⁰ Ron Brown, 'Australian Indigenous mental health' in *Australian and New Zealand Journal of Mental Health Nursing*, 10 (2001), p. 35.

²¹ Fiona Armstrong, "'Deadly': Indigenous health today", in *Australian Nursing Journal*, 12, 5 (November, 2004), p. 16.

²² Brown, p.36; Ian Anderson, Sue Crengle, Martina Leialoha Kamaka, Tai-Ho Chen, Neal Palafox, Lisa Jackson-Pulver, 'Indigenous Health in Australia, New Zealand, and the Pacific' in *The Lancet*, 367, 9524 (May 27, 2006), pp. 1775-1785, discuss similar issues elsewhere in the Pacific, particularly outlining the legacies of Colonial practices on Indigenous health.

²³ Dorreen Mellor, and Anna Haebich, 'Community of voices' in *Many Voices: Reflections on experiences of Indigenous child separation*, eds. by Doreen Mellor and Anna Haebich (Canberra, National Library of Australia, 2002), p. 10.

Native people.’²⁴ In fact, it is these very ideas of how the effects of colonisation are still very much in affect today, resulting in the continuation of Indigenous oppression that underlines my key argument. Warwick Anderson’s discussion of Indigenous medical histories also reminds us of this very point. He states that focusing on the health/medical histories of Indigenous peoples requires ‘sensitivity’ to the influence of ‘both colonialism and the incipient white nation-state as well as an appreciation of the multiple implications of the related processes of assimilation, integration, and self-determination.’²⁵ As a foundation for my research methodology I am also constantly reminded of the existing colonial/post-colonial histories of Indigenous health. According to David Pier Thomas, from the 1970s there was an ‘exponential rise’ in the publication of Aboriginal medical health research in the *Medical Journal of Australia*.²⁶ Interestingly, this boom in medical publications concerning the Aboriginal population also coincided with a shift in the way in which indigenous people were characterised in medical, health, and disease research publications. ‘No longer,’ Thomas states, ‘were Aboriginal people described as a race doomed to extinction’ and research was also no longer merely concerned with collecting as much information, as it could before it was it became impossible to do so. Medical publications became more focused on curative and preventative research.²⁷ It is evident within the historical literature too that medical historians were still trying to claim that the early influence that colonisation had on Indigenous health was a biological issue.

²⁴ Mary-Ellen Kelm, *Colonising Bodies: Aboriginal Health and Healing in British Columbia 1900-1950* (Vancouver: UBC Press, 1998), p. xxiii.

²⁵ Warwick Anderson, ‘The Colonial Medicine of Settle States: Comparing Histories of Indigenous Health’, *Health and History*, 9, 2 (2007), p. 144.

²⁶ David Thomas, *Reading Doctor’s Writing: Race, and politics and power in Indigenous health research 1870-1969* (Canberra: Aboriginal Studies Press, 2004), p. 140.

²⁷ *Ibid.*, p. 135.

However, as historians and medical professionals have become more aware of the devastating effect that 'warfare, dispossession, and demoralisation [have] on health and social organisation' this mode of explaining health inequalities is 'largely out of fashion.'²⁸ Now, historians of this field are more inclined to examine the 'lasting effects of racial discrimination, dispossession, family disruption, poverty, social marginalisation, and limited access to health care.'²⁹ What is most interesting about the study of current Indigenous health is that 'history' has become a key focus within debates around policies concerning Indigenous health. As Anderson states, '[i]ndeed, discussion of Indigenous health is now one of the few ways for historical narratives ever to gain entry to medical journals.'³⁰

Mary-Ellen Kelm also raises particularly interesting arguments about the ways in which history has moulded contemporary ideas concerning the Aboriginal 'body'.³¹ One of her key points is the way in which the body is a social/cultural construct. In stating this though, she does not attempt to claim that the body is 'not real'. Rather it is her argument that the body is 'unfinished, always under construction by the forces of society and culture.'³² Kelm's argument then, rather than merely discussing the destructive results that colonisation had for Indigenous Canadians, focuses on analysing the ways in which constructs of Aboriginal bodies were shaped by colonisation. Therefore 'Aboriginal ill-health was created not just by faceless pathogens but by the colonial policies and practices of

²⁸ Anderson, pp. 144-145.

²⁹ Ibid.

³⁰ Anderson, p. 151.

³¹ Kelm, p. xvii.

³² Ibid.

the Canadian government.³³ The same could easily be said for the ill-health of Aboriginal Australians. While we are now fully aware of the devastating effect that settler-bought diseases had on Indigenous Australians, this thesis will argue that these 'pathogens' cannot possibly be the sole cause of Aboriginal ill-health.³⁴ Instead, I argue that the serious on-going health issues within Aboriginal communities are the result of child removal policies and other colonial practices created by the Australian government in the name of protection and assimilation, as well as through dominant constructions of Aboriginal bodies.

Before beginning my discussion about the sources I have used in this thesis, I must discuss my status as an 'outsider' from Indigenous Australian culture. Not only am I a non-Indigenous Australian, but I am also a New Zealander. It is because of this reason that I have chosen to examine the words of Indigenous Australians via written and oral transcribed accounts. Keeping this methodological problem in mind though, I do not believe that my position (which is far removed from that of the people that I choose to write about) negatively impacts my use of postcolonial methods. In fact, my outsider status affords me the opportunity to approach the topic area from a new angle that is outside of any dominant debates concerning Australian nationhood, and national identity. In saying this, I am fully aware that no person is without their own personal, and cultural backgrounds, and in turn personal biases, though again I do not believe that that makes my research any less valid. Prominent scholars - Peter Read, Anna Haebich to name only two - are able to maintain privileged positions within this field of study despite

³³ Ibid., p. xix.

³⁴ For more information concerning first contact diseases refer to Judy Campbell, *Invisible Invaders: Smallpox and Other Diseases in Aboriginal Australia, 1780-1880*, (Carlton: Melbourne University Press, 2007).

being non-Indigenous. Although debates have arisen concerning non-Indigenous researchers writing the histories of the Indigenous people³⁵, to use the words of Judit Moschokovich, a Latin-American Jewish feminist, 'It is not the duty of the oppressed to educate the oppressor.' Therefore, as Kelm further elaborates, 'to avoid studying, and therefore confronting, our history on the basis of skin colour, heritage, gender, or social position is to avoid "doing our homework."' ³⁶ I believe that regardless of my cultural background my end goal would still be the same. It is my hope that this thesis, and particularly my investigation of the themes contained within it, can help, as Ann McGrath so succinctly puts it, to 'fight ignorance and hopefully will contribute towards redressing some of the wrongs of the past.'³⁷ Although it is easy to be critical of such terms as 'postcolonial', particularly as it assumes that the colonisers have left, a critical discussion of colonial practices will allow for further empowerment and agency to be gained by those that were, and still are, oppressed today.³⁸ The following extract taken from the Foreword to *The Lost Children* written by the acclaimed Indigenous writer Sally Morgan also shares these sentiments.

It is important for us to discuss and detail such things; to reclaim the past, our families, ourselves; to have something to be; a framework within which we can exist, learn, be proud. In the telling we assert the validity of our own experiences and we call the

³⁵ Anna Green and Kathleen Troup, 'Postcolonial perspectives', in *The houses of history: A critical reader in twentieth-century history and theory*, eds. Anna Green and Kathleen Troup (Manchester: Manchester University Press, 1999), pp. 282.

³⁶ Cited in Kelm, p. xxiii.

³⁷ McGrath, p. xxx.

³⁸ Refer to Anna Green and Kathleen Troup 'Oral history', in *The houses of history: a critical reader in twentieth-century history and theory*, eds. Anna Green and Kathleen Troup (Manchester: Manchester University Press, 1999), pp. 277-296 for further discussion of postcolonial approaches to history, and Warwick Anderson, and David Piers Thomas for discussions of colonial and postcolonial histories of medicine and the effects of colonial policies on the colonised.

silence of two hundred years a lie. And it is important for you, the listener, because like it or not, we are a part of you. We have to find a way of living together in this country, and that will only come when our hearts, minds and wills are set towards reconciliation. It will only come when thousands of stories have been spoken and listened to with understanding.

Sally Morgan.³⁹

The sources and methodological approaches

This thesis takes a selection from a large collection of roughly 200 excerpts that I have selected from a number of already published auto/biographies, life-stories, oral histories, edited collections, and the testimonies that are contained within *Bringing Them Home*. This research is directly focused on extant published narratives for two key reasons: firstly, because my research is conducted from a New Zealand setting, I am not in a position to conduct the interviews myself; secondly, and I believe more importantly, that we might find answers to questions about Aboriginal health, and how they view their health in regard to child removal, and many more, from these extremely significant, but undervalued historical sources. As Margaret McDonell explains, these narratives have two very significant functions. First, they recount a version of history that varies from the dominant 'Eurocentric canon'. Second, when 'read together these life writings, through the individual memories and stories of their

³⁹ Cited in *The Lost Children: Thirteen Australians taken away from their Aboriginal families tell of the struggle to find their natural parents*, eds. Coral Edwards & Peter Read (Moorebank: Double Day, 1989), p. vii.

authors, create and shape the collective memory.’⁴⁰ Additionally, Aboriginal literature, according to Heather Scutter has always been inextricably linked to the ‘the Aboriginal struggle for economic freedom, legal recognition and reform of basic living conditions.’⁴¹ Kay Shaffer further elaborates upon this idea. She claims that the power of these narratives and life stories lay in their ability to reach out to the readers in order ‘to promote the micro-climates of change, to allow for dialogue between peoples previously bound by racial divisions and national histories.’⁴²

As Gillian Whitlock, in her discussion of the role of the listener in *Stolen Generations* narrative transactions explains, that the testimonies shared by those that were removed are ‘gifts’, yet these ‘gifts’ in the form of ‘testimonies are profoundly disturbing to dominant ways of thinking about history, identity, and race here, casting a shadow which some dismiss as a “black armband” view of the national history.’⁴³ Within a great deal of the literature a debate has arisen surrounding this very point and has questioned the reliability of testimonies collected for *Bringing Them Home*. Rosanna Kennedy discusses the ways in which these testimonies have in some cases been vilified, and others merely questioned because of issues concerning ‘narrative coalescence.’⁴⁴ As an example, Kennedy raises an argument set forth by ‘conservative critics’

⁴⁰ Margaret McDonell, ‘Protocols, Political Correctness and Discomfort Zones: Indigenous life writing and non-indigenous editing’, *Hecate*, 30, 1 (2004), p. 84.

⁴¹ Heather Scutter, ‘Writing the Childhood Self: Australian Aboriginal Autobiographies, Memoirs, and testimonies’, *The Lion and the Unicorn*, 25, 2 (April 2001), p. 227.

⁴² Kay Shaffer, ‘Stolen Generation Narratives in Local and Global Contexts’, *Antipodes* 16, 1 (June 2002), p. 7.

⁴³ Gillian Whitlock, ‘In the Second Person: Narrative Transactions in *Stolen Generations* Testimony’, in *Biography*, 24, 1, (Winter, 2001), p. 198.

⁴⁴ Rosanna Kennedy, ‘Stolen Generations Testimony: Trauma, historiography, and the question of truth’, in *The Oral History Reader*, 2nd edition, eds. Robert Perks and Alistair Thomson (New York: Routledge, 2006), p. 507.

Ron Brown and Paddy McGuinness who claim that the testimonies shared by those removed are illustrations of 'false memory syndrome' that were 'fabricated memories of removal in a sympathetic cultural and political climate.'⁴⁵ Bain Attwood also weighs in on this argument, but rather than (as Kennedy puts it) 'vilifying' the narratives of the Stolen Generations, he instead problematizes the sources' factual reliability for an historian.⁴⁶

From around the 1990s it was, as Attwood states, clear that 'narrative accrual or coalescence' was taking place in the narratives of the Stolen Generations, because stories of separation and removal were becoming more widely shared and 'reproduced'.⁴⁷ Kennedy contends that Attwood seems to be rather troubled by issues of collective memory within Stolen Generation narratives, as their stories came to fall within a 'master narrative' which laid all blame for the forced removal of Aboriginal children on government created policies of assimilation, and led to the construction of 'simplistic histories of colonialism in Australia'.⁴⁸ As I stated earlier though, within the context of my research, these sources, are incredibly significant, not so much as artefacts of historical fact, but as evidence of how the narrators view their current health in light of past events. Or as James Young, in *Writing and rewriting the Holocaust* claims, 'the value of testimonies "lies not in their supposed neutrality as source material but in their record of "telling history"'. Therefore these testimonies should not be examined for their 'truths', instead they should

⁴⁵ Ibid.

⁴⁶ Ibid.

⁴⁷ Bain Attwood, "'Learning about the truth": The Stolen Generations Narrative', in *Telling Stories: Indigenous History and Memory in Australia and New Zealand*, eds. Bain Attwood and Fiona Magowan (Wellington: Bridget Williams Books, 2001), p. 196.

⁴⁸ Cited in Kennedy, p. 508.

be investigated 'for their insights into how people involved in past events interpreted those events and their implications.'⁴⁹

However, using already published oral histories does raise some issues. As Alessandro Portelli points out, the key difference of oral history is the 'orality' of its sources, and through the creation of transcriptions, much of the narrator's meaning can be missed, or misinterpreted.⁵⁰ Simply put, by putting the spoken word onto paper, we are at risk of losing 'the narrators' emotions, their participation in the story, and the way the story affected them.'⁵¹ Or, as Doreen Mellor and Anna Haebich so succinctly put it, 'the real potency of the interviews is in the hearing.'⁵² Taking this into consideration, I have selected testimonies that either state most clearly how child removal policies have affected the narrators, or provide the most intense/memorable images for the readers. I have done this not only to make sure that readers do not miss out on the emotions conveyed by the narrators, but also to give adequate weight to the often uncomfortably emotional testimonies and narratives that were shared in not always the most comfortable of situations. This last point is particularly poignant when we consider the ways in which the testimonies used in *Bringing Them Home* were shared.⁵³

⁴⁹ Cited in Kennedy, p. 513.

⁵⁰ Alessandro Portelli, 'What Makes Oral History Different', in *The Death of Luigi Trastulli and Other Stories: Form and Meaning in Oral History* (New York: State University of New York Press, 1991), p. 47.

⁵¹ Portelli, p. 48.

⁵² Doreen Mellor, and Anna Haebich, 'Chapter One: A community of voices' in *Voices of Aboriginal Australia: Past, Present, Future*, compiled by Irene Moores. Aboriginal Deaths in Custody Watch Committee, (Springwood: Butterfly Books, 1995), pp. 2-15.

⁵³ A series of hearings were conducted in every major city, and smaller centres in Australia, for more information, refer to pp. 18-23 of *Bringing Them Home*.

Throughout the sources that I have collected a number of themes were particularly prevalent, but none more so than the themes of cultural alienation, mental illness, alcohol and crime. For that reason, I have selected to investigate only these themes, as to include any more is outside of the scope of a Master's thesis. Studies such as those conducted by Brian McCoy, and reports published by the Aboriginal Legal Service of Western Australia,⁵⁴ and *Bringing Them Home*, show that these four themes are very serious and widespread issues within Indigenous communities across Australia, and therefore warrant further in-depth discussion. In this thesis I evaluate the narratives by taking the words shared by Indigenous narrators, in a variety of different situations, and tease out the narrator's own evaluation of their current health issues and how they themselves perceive their health in relationship to their removal, or in some cases the removal of their family members. Through the evaluation of my collection of narratives and testimonies a number of commonalities arose, and each theme became more pronounced individually, yet as this thesis also shows, each of the themes, while different, are intimately linked within the narratives. It would be naïve of me to state though that *all* Indigenous Australians suffered in the same way. In the context of this thesis, however, grappling with all of the dissonances that I encountered within my collection of narratives is not possible, or necessary, due to the fact that this thesis focuses specifically on how child removal practices have negatively influenced Indigenous health (as evidenced in the narratives). However, where possible, I have attempted to include examples of

⁵⁴ *Telling Our Story: A Report by the Aboriginal Legal Service of Western Australia (inc) on the Removal of Aboriginal children from their Families in Western Australia*, (Aboriginal Legal Service of Western Australia, 1995).

dissonances within the narratives: for example, I also point to stories of positive experiences of Aboriginal peoples.⁵⁵

Chapter One addresses the theme of alienation. Using the stories of Indigenous Australians I will examine the selected excerpts for evidence of how child removal policies resulted in the informant's own sense of alienation. By alienation, I do not just mean the experience of the feelings of alienation from the larger non-Indigenous Australian culture (including feelings of worthlessness because of the colour of their skin, and anger toward other Aboriginal people). My use of the word 'alienation' also includes the feelings of alienation/ignorance of/isolation of Aboriginal people from their traditional land, culture, language, rituals, family, and kinship groups.

As a foundation for this chapter, I use the work of Brian McCoy. McCoy discusses the generational effects of child removal and institutionalisation, and argues that the institutionalisation of Indigenous Australians greatly disrupted traditional (healthy) models of familial nurturing, and has led to the current dependent status of many Aborigines today. McCoy uses the work of Fred Myers and his theory of *kanyirninpa* to argue his point. *Kanyirninpa*, incorporates 'a whole range of cultural and moral practice around care and nurturance.' Mission and institutional interference with these traditional roles of holding greatly disrupted the lifestyles of the older generations of Aboriginal people, and it also meant the younger

⁵⁵ *Bringing Them Home* in fact includes the narrative of a South Australian woman that was fostered in the 1960s at the age of 4. She maintains that she was placed with a very loving family, and her foster parents believed that she needed to know her heritage, p. 170.

generations were no longer being taught how to take care of themselves.⁵⁶ Although McCoy focuses specifically on the effects of mission/institutional life, my thesis will not. This research will use the blanket terms of 'removed' and 'separated' (interchangeably) to encompass the experiences of Indigenous Australians that were forced into mission dormitories and those that were forcibly separated from their parents and kin.⁵⁷ In summary, this chapter will show that alienation from their culture, language, family, and traditional bonds of *holding* have left Indigenous Australians in an incredibly vulnerable position within Australian society. The chapters subsequent to this one will be dedicated to showing how these feelings of alienation have resulted in other serious, on-going social and mental health issues within Australia's Aboriginal population, including criminal behaviour.

Chapter Two investigates the theme of mental illness as evidenced in the stories and testimonies that I have found through the process of my research. Through the analysis of further testimonies, this chapter will show how being forcibly removed from their families has caused a great deal of trauma for those who experienced it. I also show that the trauma is not only suffered by those that were physically removed from their own families, in fact this trauma is often passed on to the following generations. Dr Kowalenko explains that patterns of emotional numbing, bought about as a coping mechanism for grief and trauma, can become so ingrained that they become a lifelong issue which is then passed onto the next generation. The Human Rights and Equal Opportunity Commission's Inquiry into Mental Illness also reported that children of

⁵⁶ Brian McCoy, McCoy, Brian, "'They Weren't Separated': Missions, Dormitories and Generational Health', in *Health and History*, 9, 2 (2007), p. 56-58.

parents suffering from depression tend to suffer from higher levels of anxiety, depression and general poor health than children whose parents are not depressed.⁵⁸ Therefore, as with the other issues of ill-health that this thesis discusses, mental illness (as a result of child removal) has further reaching issues within Aboriginal communities than merely affecting those that suffered through the removal process.

Chapter Three investigates the theme of alcohol and substance abuse. According to statistics quoted by Ron Brown, alcoholism levels are eleven times higher within Aboriginal communities than Australia's total population.⁵⁹ Further statistics have also shown that 'in 2003, alcohol was the fifth leading cause of the burden of disease and injury among Indigenous people, responsible for 6.2 per cent of the total burden and 7 per cent of all deaths. Just over one-fifth of burden due to injury and more than one-sixth of burden due to mental disorders were attributable to alcohol.'⁶⁰ It would be an understatement (as this chapter shows) to claim that alcohol consumption and substance abuse is a significant issue within Aboriginal communities, and this chapter will examine this very issue.

Chapter Four investigates the theme of criminal activity. While the committing of criminal acts may not (in the traditional sense) indicate poor health necessarily, in the context of health as I have defined it for this thesis, the 'drive' to commit crime in any way, shape or form cannot possibly be considered a characteristic of somebody who is truly 'healthy'.

⁵⁸ *Bringing Them Home*, p. 228.

⁵⁹ Brown, p. 35.

⁶⁰ N. Thomson, A. MacRae, J. Burns, M. Catto, O. Debuyst, I. Krom, R. Midford, C. Potter, K. Ride, S. Stumpers, B. Urquhart (2010) *Overview of Australian Indigenous health status, April 2010*. Australian Indigenous HealthInfoNet. <<http://www.healthinfonet.ecu.edu.au/health-facts/overviews>>, p. 47, [accessed 09 October 2010]

Indeed criminal activity is also not a characteristic of somebody that possesses the 'physiologic, and psychological integrity, ability to perform personally valued family, work, and community roles' either. Discussing Aboriginal and Torres Strait Islander crime statistics, Roderic Broadhurst claims that Indigenous Australians have been considerably over-represented.⁶¹ As with Chapter Three this chapter shows that crime is a very significant issue within Aboriginal communities, with a much further-reaching impact on Aboriginal society than merely losing a large number of men within the judicial system, and that it can be linked to concepts of poor health among Aboriginal people.

Overall, in its four chapters, this thesis deploys Aboriginal narratives, with the addition of secondary sources to show how the many Indigenous Australians view their current health position in relation to their removal and separation from their traditional family, kin, and homeland. Using these narratives, I argue that child removal policies have without doubt negatively influenced either directly, or indirectly (through the transmission of intergenerational trauma), the current poor health of Aboriginal and Torres Strait Islander Australians today. By using this methodology this thesis makes a new contribution to the field, pulling together a wide range of Indigenous narrative sources to discuss how Australia's dark history of child removal has deeply influenced the serious on-going health issues suffered by Indigenous Australians.

⁶¹ Roderic Broadhurst, 'Aborigines and Crime in Australia' in *Crime and Justice, Ethnicity, Crime and Immigration: Comparative and Cross-National Perspectives*, 21 (1997), p. 408.

Chapter One

“I don't know when I even realised I was Aboriginal”: Indigenous Australians, alienation, and poor health

I was taken there because I was 'half-caste'. I started thinking, 'Why do I deserve to be treated like this?' But as the years went by, I sort of accepted all that. We were treated differently to white and black people. ... I was almost ashamed to be half-caste sometimes. I had no confidence in myself, or how to make up my mind what to do. ... When I was growing up I wanted to be a teacher or a nurse. But you couldn't say that because you had to go to school and go out and work in the house, do domestic duties. That's what they said. We lost much of our culture, our language and traditional knowledge, our kinship and our land.

Confidential evidence 821, Western Australia.¹

This piece of confidential testimony, presented to the Human Rights and Equal Opportunity Commission's National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families in 1997, was shared by an Aboriginal woman in Western Australia. She was removed from her family at the age of five in 1944 to Moola Bulla Station. Like many of the others who have shared their stories of removal, this woman was raised to feel a sense of embarrassment because of her mixed

¹ *Bringing Them Home*, p. 204.

race. This shame led to her suffering from a lack of confidence as a result of these feelings of worthlessness, because Aboriginal girls were destined (so they were told) for lives as a domestic servant. She also adds that she lost much of her culture, language and traditional knowledge. These losses further alienated this woman, and her contemporaries, from their own culture. In addition, they were alienated from the white Australians who sought to assimilate them. Alienation, then, forms the central focus of this chapter, especially as it relates to poor health outcomes over time for Aboriginal peoples.

As explained in the introduction to this thesis, by 'alienation' I do not just mean the experience of the feelings of alienation from the larger non-Indigenous Australian culture (including feelings of worthlessness because of the colour of their skin, and anger toward other Aboriginal people). My use of the word 'alienation' also includes the feelings of alienation/ignorance of/isolation from, their traditional land, culture, language, rituals, family, and kinship groups.² In particular, I argue that a broad conception of alienation helps us to understand poor health outcomes for Aboriginal peoples over time in the Australian context. This chapter is divided into three key points of discussion: Aboriginal sense of health and belonging; Aboriginal child removal; and cultural confusion. These themes are located within specific time periods and contexts and allow me to explore changes over time, as well as examining the context of narratives which highlight this concept of alienation. Section one of this chapter discusses particular aspects of traditional Aboriginal cultural

² According to *The Encyclopaedia of Aboriginal Australia*, within Aboriginal society there were around 250 distinguishable language groups with 'between 500 and 800 dialects', cited in Dr Ian Howie-Willis, 'Dialect' in *The Encyclopaedia of Aboriginal Australia: Aboriginal and Torres Strait Islander History, Society and Culture*, ed. by David Horton (Canberra: Aboriginal Studies Press for the Australian Institute of Aboriginal and Torres Strait Islander Studies, 1994), p. 279.

practices and focuses primarily on familial organisation. I show that the family and kinship bonds within Aboriginal communities were greatly misunderstood by non-Indigenous onlookers, and what was often perceived by colonial interlopers as child neglect, was actually completely the opposite. The second section of this chapter not only discusses the processes and experiences of child removal, but also the public and widely pervasive attitudes that drove these removal practices over time. It provides a broad, but brief overview of predominant attitudes of such twentieth-century government officials as A. O. Neville, Chief Protector of Aborigines in Western Australia from 1915-1936. This section will show that during the late 1800s and early 1900s it was widely believed that the 'half-caste' offspring of Aboriginal and non-Indigenous Australians posed a very real threat to the unity of white Australian society, and it was these ideas that eventually led to the separation of countless Indigenous children from their families and kin. In the final section of this chapter I examine the results of these separations, with a particular focus on cultural confusion and identity issues. This section will show that many of the children who were removed were often left with a sense that they neither belonged within Aboriginal communities, nor the white communities in which they had supposedly been raised to live.

Overall, through its examination of selected published narratives of Aboriginal people, this chapter shows the ways in which the experience of removal and/or separation has led to feelings of alienation from land, language, culture and traditional knowledge. In subsequent chapters, I continue to argue that these feelings of alienation have directly influenced the poor health (as seen within the themes investigated in this thesis) of Aboriginal Australians. To perform this investigation of alienation, it is critical to consider the important work of Brian McCoy. His insights into

how alienation (either direct or indirect) can have a very real, traumatic and on-going influence on one's life and health helps to demonstrate the relationship between alienation and Aboriginal health.

In his article "Missions, Dormitories and Generational Health" and his book published the following year, *Holding Men: Kanyirninpa and the health of Aboriginal men*, McCoy discusses the inter-generational effects of the institutionalisation of Aboriginal children. He argues that the institutionalisation of Indigenous Australians greatly disrupted traditional (healthy) models of familial nurturing, and has led to the current dependent status of many Aborigines today. McCoy uses the work of Fred Myers and his theory of *kanyirninpa* to argue his point. *Kanyirninpa*, according to Myer's ethnographic work, encompassed 'a whole range of cultural and moral practice around care and nurturance. *Kanyirninpa* or *holding* also invoked an ideological or social referent to the relationship between the generations'.³ These values and skills of nurturance, care, and survival were intended to be passed down through the generations, as a foundation, or set of rules, that governed traditional social and personal behaviour.⁴ Mission and institutional interference with these traditional roles of *holding* greatly disrupted the lifestyles of the older generations of Aboriginal people, and it also meant the younger generations, in many instances, were no longer being taught how to take care of themselves.⁵ McCoy's work however, primarily focuses on the inter-generational effects suffered by those that lived in mission dormitories in Western Australia/Kimberley desert area. Also writing about Western Australia, Christine Choo has been the only scholar who has looked at the effects of

³ Brian McCoy, "'They Weren't Separated'": Missions, Dormitories and Generational Health" in *Health and History* vol. 9, 2 (2007), p. 56.

⁴ Ibid. p. 57.

⁵ McCoy, 'They Weren't Separated', p. 58.

the dormitory system focusing particularly on child separation. What is most significant about McCoy's choice to focus on the separation of children in mission dormitories is that the Federal Government of Australia proposed in 2000 that children "were not distanced from their families and grew up in full knowledge of their backgrounds", because "further contact between the child and his or his parents was not precluded."⁶ In other words, it was the Federal Government's argument that these children could not, and should not be counted as members of the Stolen Generations. However, Coral Edwards and Peter Read dispute this claim as they state that

It makes no difference how you were removed. I don't believe it matters in the long run whether children were removed forcibly or were adopted or fostered, because by the time they come to Link-Up, they are all suffering the same, or very similar, after-effects. They have all lost the same kinds of things.⁷

For the purpose of clarity I will be using the blanket term 'forcibly removed' to encompass those children who were forced into mission dormitories and separated yet still had some (but very limited) access to their parents; and those who were completely removed from their families, kin, and homeland. I have also chosen to use this term because the key focus of this thesis is to show how alienation (as a result of child removal) has influenced the current state of poor Aboriginal health, rather than to only focus on the theme of removal or separation. Although both of these groups of separated children may have experienced very different forms of separation from their families, all of these separations that occurred still caused serious disruptions to the traditional family lives of

⁶ Ibid., p. 48.

⁷ *The Lost Children*, p. xxi.

Indigenous Australians, and the effects of these disruptions are on-going. The following passage from John Newfong shares these very thoughts:

Since the 1890s, large numbers of Aboriginal children have been removed from their families by welfare authorities and brought up in white homes and institutions. Children have been alienated from their own people and culture, families dispersed and destroyed. The results – chronic cycles of alcoholism, gaol and further family disintegration.

John Newfong.⁸

Some of these effects will be discussed in the following chapters.

Traditional Aboriginal health and belonging

Family, wider kin, and the individual's place and interactions within these spheres, have been shown to be the fundamental elements for fostering cultural, emotional, and physical well-being in Aboriginal communities. In fact, as Ypinazar and colleagues state, 'family and community relationships are the basis of culture and are important to cohesion and to healing within a community.'⁹ Traditionally, Aboriginal family life revolved predominantly around the interactions of extended family and kinship groups. In contrast to historical non-Indigenous familial

⁸ '100 years of Welfare' in *Voices of Aboriginal Australia: Past, Present, Future*, compiled by Irene Moores, Aboriginal Deaths in Custody Watch Committee (Springwood: Butterfly Books, 1995), p. 64.

⁹ Valmae A. Ypinazar, Stephen A. Margolis, Melissa Haswell-Elkins, Komla Tsey, 'Indigenous Australians' understandings regarding mental health and disorders', in *Australian and New Zealand Journal of Psychiatry*, 41, pp. 474.

constructs,¹⁰ Aboriginal children used such titles as father, mother, aunty, uncle, sister, brother, for all members of their wider extended family.¹¹ Despite this broader use of these terms though, children were very-much aware of who their birth-parents were and their position within their community of family members and kin.¹² Bourke and Edwards refer to this system of kinship titles as the 'Classificatory System of Kinship'.¹³ The rules or laws governing this system, while seemingly complex and widely misunderstood by contemporary non-Indigenous on-lookers, were not so complicated for the children to grasp because they were not just taught these rules, they lived and used the knowledge of these practices on a daily basis.¹⁴ Clara Coulthard was born in 1929 at Lilla Creek Station to a mother of Yankunytjatjara decent. In the following passage Clara discusses the traditionally close-knit family structure in which she was raised:

you have that freedom and especially the happiness that comes from being with your family, grandparents, mothers, and your extra grandparents and your extra mothers, because that's within your family structure. Whoever your mother's cousin is, she's your mother as well, and the same as whoever your grandmother's cousin or sisters are, they're your grandparents too.

¹⁰ Colin Bourke, and Bill Edwards, 'Family and Kinship', in *Aboriginal Australia: An Introductory Reader in Aboriginal Studies*, 2nd edn., ed. by Colin Bourke, Eleanor Bourke, Bill Edwards (St. Lucia: University of Queensland Press, 1998) p. 104.

¹¹ For further reading about Australian colonial families refer to *Families in Colonial Australia*, eds. Patricia Grimshaw, Chris McConville, and Ellen McEwen (Sydney: Allen & Unwin, 1985).

¹² Richard Broome, *Aboriginal Australians: black responses to white dominance*, 3rd edn. (Crows Nest, NSW, Allen & Unwin, 2002), p.20.

¹³ Bourke and Edwards, p. 104.

¹⁴ Broome, p. 20.

Clara Coulthard.¹⁵

Broome states that while this classification system is rather complex, attempting to grapple with these complexities is not as vital as understanding the *purpose* of this system. Essentially, he summarises, this system allowed for every member of the group to know where they were placed within their communities, or as he states, 'it provided a mental map of social relationships and thus behaviour.'¹⁶ Aboriginal children learned through this complicated 'map' who they were linked to and those that they were not. This system, in other words, shaped an environment in which children were completely familiar with their kin, their own place within this group, and the appropriate behaviour that was expected of them towards their fellow family, kin, and community members.¹⁷ In the 1970s, the anthropologist R.M Berndt also added to this discussion, explaining the extension and significance of this classificatory system. Rather than merely extending 'horizontally', Berndt suggests, this 'group identification' extended 'vertically through the generations'. He further explains that:

There was no form of category or unit in traditional Aboriginal Australia which was 'open' or to which one could belong voluntarily through purely individual choice. Religiously and economically, people were placed quite firmly within the total system – no room was left for an uncommitted, floating population.¹⁸

¹⁵ Cited in Allam, p. 35.

¹⁶ Broome, p.20.

¹⁷ Patricia Grimshaw, Marilyn Lake, Ann McGrath, Marian Quartly, *Creating a Nation*, (Ringwood, Vic: Penguin Books, 1996), p. 15.

¹⁸ Berndt (1977) cited in Ernest Hunter, *Aboriginal Health and History: Power and prejudice in remote Australia* (Cambridge, New York, Melbourne: Cambridge University Press, 1993), p. 204.

As an example of this, Aboriginal man Bob Randall comments that:

I had four immediate mothers ... How many fathers did I have? I had six fathers. So my parents were around me constantly. Was I starved? Did I have no food? No, I had everything I needed to sustain me in my day-to-day playfulness with other kids. I can never say, 'Was I neglected in my love?' because love is a part of life. This is not even questioned. If hugging, the demonstration of love, is the criteria to match it, my foot never touched the ground. I was hugged, tickled, rubbed, massaged, put to sleep in the arms of so many people for the full six, seven years of my life in that family setting.

Bob Randall.¹⁹

Children within Aboriginal societies were treasured members of their family and kin, as this excerpt from Bob Randall shows. Randall states, 'if hugging, the demonstration of love, is the criteria to match it, my foot never touched the ground'. In his experience he and other Aboriginal children were never in need of a hug, because they were given them freely and frequently. It did not matter whether they were with their birth mothers or mother/aunties, the children were never left out of the everyday activities of the adults and older children; instead, they were active participants. Usually within the arms of loved ones, children were expected to watch and copy the actions of their elders as a way of learning so that they could later perform the actions for themselves.²⁰ Children were, as Broome states, at the 'centre of camp life, amid work, the social life, the disputes and even the ceremonies where they fell asleep in their

¹⁹ Cited in Allam, p. 35.

²⁰ Grimshaw, (1996), p. 15.

mother's arms. It was in this way that they grew naturally into the life of the tribe.'²¹ Yet Glenys Collard shares a recollection that shows that this method of child-rearing was not looked upon very fondly by non-indigenous outsiders:

They say things like, 'And the kids are left with their grandparents and they're just running around'. But that's what grannies are for, I think. Well now, I mean, my mum has all her grannies (grandchildren) with her and when I'm home all my grannies (grandchildren) are with me when I'm not working. But at that time I suppose ... they didn't really think it was the right thing to do.²²

Indigenous oral histories themselves also highlight the importance of traditional Aboriginal knowledge sharing and family practices. Roy Yorrowin, of Yolŋu descent, shares that not only were Indigenous Australians aware of their familial roles and titles, but they all had their own gender-specific roles within their communities. These roles, however, were more than just tasks for tribal survival, they provided each individual a very real sense of purpose, as Roy's discussion with Richard Trudgen show:

Many years ago, before the white man came to this area, our people were very different. All the Aboriginal people around here lived on their land, making a living from their own work. Everyone had

²¹ Broome, p. 22.

²² Cited in Allam, p. 35.

a job, a role to play in the family group, things to be proud of and a reason to live.

The women had the job of collecting food like root vegetables and the seeds from grasses and grinding them into flour. They had to cook the food. They also had to look after the children. They made small carry-bags for food and they helped in collecting material for building houses and things like that.

The men had the job of catching the bigger animals for meat and protecting the whole family from trouble. They also made the big things like rope, traps, spears and houses.

Everyone felt needed because each person relied on everyone else to pull his or her weight. Everyone felt proud knowing they were all needed.²³

As we have seen so far, for those that have shared their stories of separation and removal, family was more than just about the individual members that constituted their family/kinship/tribal group. Family was 'comfort and connection to identity through land, language and culture, and can include other living creatures, tracts of country and Ancestors.'²⁴ Reid and Trompf also add that land is considered of vital importance to the Aboriginal sense of health and belonging. They state: 'next to shooting

²³ In Richard Trudgen, *Why Warriors lie down and die* (Aboriginal Resource and Development Services: Adelaide, 2000), p. 167-168.

²⁴ Cited in Allam, p. 29.

Indigenous people the surest way to kill us is to separate us from our part of the earth.'²⁵ This intense connection between land, health and well-being has also in some sources been referred to as 'the interrelated tripartite: land, body, and spirit', when one element is not well there will be 'weakness in the other two'.²⁶ In fact, as Yami Lester further elaborates, Indigenous culture is inseparable from the land and the stories that the land share. Land, Lester states, contains 'a story for the children to learn'.²⁷

The following excerpt has been taken from the story of Bill Simon. Throughout this thesis, we hear more of his story, as it applies to most of the main themes under discussion, including mental health, alcohol and substance abuse, and criminal behaviour. He shares that although he had a very happy childhood with his parents and extended family, he was completely unaware of the stress that his parents felt as they worried about being able to offer their children a prosperous future. He also claims that at the age of ten his childhood 'turn[ed] rotten'.

If you were to ask me if I had a happy childhood, the answer would be a definite yes. I was loved, fed, clothed and cared for not only by my parents but also by our extended family that lived around us. As far as I was concerned, I had no problems. Small children are oblivious to the anxious, hushed voices of their

²⁵ 1992, p. xi as cited in Brown, p. 38.

²⁶ Reid (1982) cited in Paul Burgess and Joe Morrison, 'Country' in *Social determinants of Indigenous Health*, ed. By Bronwyn Carson, Terry Dunbar, Richard D. Chenhall and Ross Bailie, (Crows Nest, NSW; Allen and Unwin, 2007), p. 181

²⁷ In Eleanor Bourke, 'Australia's First Peoples: Identity and Population', in *Aboriginal Australia: An Introductory Reader in Aboriginal Studies*, 2nd edn., eds. Colin Bourke, Eleanor Bourke, Bill Edwards (St. Lucia: University of Queensland Press, 1998), p. 51.

parents late at night, to the complexities of the adult world with all its worries, to the feelings of hopelessness that parents might have when they realise that they cannot offer their children much of a future. Much later on in life, I knew what people probably thought: 'He must have had a rotten childhood. He's ended up like he did because his parents probably neglected him.'

My childhood didn't turn rotten until I was ten.²⁸

The following sections will investigate how the lives of Bill, and many other children were turned rotten after being removed from their families, kin and homeland.

The Removal

Are we going to have a population of 1,000,000 blacks in the Commonwealth, or are we going to merge them into our white community and eventually forget that there were any aborigines in Australia?

A.O Neville, in *Commonwealth of Australia*, (1937: 11)²⁹

In the late-nineteenth and early-twentieth century, 'educated opinion' in Australia generally began to view Aborigines as a dying race.³⁰ This idea was based on the premise of Aboriginal weakness as a result of their

²⁸ Bill Simon, Des Montgomerie, Jo Tuscano, *Back on the Block: Bill Simon's Story* (Canberra: Aboriginal Studies Press, 2009), p. 1.

²⁹ Robert Van Krieken, 'The barbarism of civilization: cultural genocide and the "stolen generations"', *British Journal of Sociology*, 50, 2 (June 1999), p. 297.

³⁰ Manne, p. 56; Mason Durie in *Whaiora: Maori Development*, 2nd edition (Auckland: Oxford University, 1998) shows that ideas of the 'dying' or 'doomed race' was not only limited Australia, p. 30.

interactions with the European colonisers.³¹ Coinciding with this 'issue' was the growing prevalence of close sexual contact between Aboriginal women and non-Indigenous males. As the colonisation of Australia began to increase, so too did the interaction between the races. The mixed blood population of Australia (as a result of this sexual contact) grew at a worrying rate for the Europeans. The growing, and 'very fertile' mixed-blooded population began to be known as 'the half-caste problem'.³² Russell McGregor also argues that it soon began to be realised that 'the descendants of a dying race might continue to haunt white Australia for generations.'³³ This so-called 'problem' in fact incited a great deal of public anxiety and disgust. In 1927 the *Sunday Times* in Perth stated that:

Central Australia's half-caste problem ... must be tackled boldly and immediately. The greatest danger, experts agree, is that three races will develop in Australia – white, black and the pathetic sinister third race which is neither.³⁴

Historians explain that non-Indigenous Australians began to become increasingly preoccupied (as they had been in other British colonies) with ideas of race and its relation to nationhood. Non-Indigenous Australians generally believed that the future greatness of their nation rested on the racial purity of the nation. Another example of the popularity of this idea can be seen in one 1901 issue of the *Bulletin* magazine, where it claimed:

If Australia is to be a country fit for our children and their children to live in, we must KEEP THE BREED PURE. The half-caste

³¹ Robert Van Krieken, 'The barbarism of civilisation', p. 304.

³² Russell McGregor, cited in Van Krieken, 'The barbarism of civilisation', p. 304.

³³ Ibid.

³⁴ As cited in Manne, p. 56.

usually inherits the vices of both races and the virtues of neither.

Do you want Australia to be a community of mongrels?³⁵

Such statements were also being made across the Tasman, in New Zealand, around the same time, though they were perhaps shared with less disgust, and more joyful hope for a blended and assimilated future.³⁶ James Belich quotes Minister of Native Affairs from 1912 to 1921, William Herries, as saying 'I look forward for the next hundred years or so, to a time when we shall have no Maoris at all, but a white race with a slight dash of the finest coloured race in the world.'³⁷ As a further result of the 'Aboriginal problem' it also became clear to government officials that mixed-blooded children had inherited the 'vices' and very little (if any) 'virtues' of the races, and it was this very nature inherent within them that was the antithesis of the 'modern civilisation' that the colonisers had attempted to impose upon them. Some of the key concerns that Europeans came to despise were the following behaviours: 'idleness, nomadism, emotionality, lack of discipline and productivity, sexual promiscuity, poor bodily hygiene, and a group rather than an individual orientation.'³⁸ Therefore, without considering the significance of the sharing of traditional knowledge and practices, it was generally believed by government officials and non-Indigenous on-lookers that Aboriginal parents were teaching their children nothing of any real value. As Anna

³⁵ Broome, pp. 97-98.

³⁶ Non-Indigenous Australian perception of Aboriginal Australians greatly differed to the views of Non-Indigenous New Zealanders concerning Maori. Colonisers of New Zealand began to view Maori as 'better blacks' and 'the most convertible of savages. These notions were based on the original conceptions of Aborigines being 'primitive' while Maori were more 'advanced', refer to James Belich, 'Racial Harmony (1): Merging Maori?', in *Paradise Reforged: A History of the New Zealanders From the 1880s to the year 2000* (Auckland: Allen Lane, The Penguin Press, 2001), pp. 189-206.

³⁷ Belich, p. 190.

³⁸ Van Krieken, 'Barbarism of civilisation', p. 305.

Haebich discusses, it was thought that Aboriginal parents merely taught 'models of immoral and destructive behaviour for their adult life.'³⁹

State governments began to tackle this 'problem' before the Federation of Australia in 1901.⁴⁰ As early as 1883, according to Edwards and Read, the removal of children from their parents began. However, the reasons behind this were to 'help control' the Aboriginal communities that gathered around settlements. It was thought that by removing the children, they were able to train the children to become 'useful citizens'.⁴¹ Generally, it was believed by non-indigenous Australians that there was no way of breaking the idleness and other such related issues without completely severing the ties between the child and its parents. Or, as Peter Read explains:

A baby placed with white parents would obviously be more quickly assimilated than one placed with black parents. So ran official thinking, but more importantly, so also ran the feelings of the majority of honest and conscientious white citizens. The popular image of Aboriginality was a run-down camp, devoid of truly Aboriginal culture, overrun with children and dogs. Drunks, broken windows, dirt, disease.'⁴²

Non-Indigenous Australians then saw no reason to dispute the claim put forward by such institutions as the New South Wales Board of Education in the 1852 when they argued that:

³⁹ Anna Haebich, 'Between knowing and not knowing': Public knowledge of the Stolen Generations', *Aboriginal History*, 25 (2001), p. 76.

⁴⁰ Due to time constraints it is difficult to provide a complete state-by-state run-down of child removal policies and practices. Therefore, in this thesis I will only be providing a brief outline of some of the ideas that drove the practices of child removal. For a more comprehensive analysis refer to Haebich, *Broken Circles*.

⁴¹ Colin Bourke, and Bill Edwards, pp. 101.

⁴² Grimshaw et. al, (1996), p. 292.

unless the connection between the old and young is completely severed – an act repugnant at first view to all – there is, I am convinced, no human power of civilising or even perpetuating the race.⁴³

As a result of these beliefs a series of legislations, supported by a number of institutions, and stringent government control, began the process of separating Aboriginal children from their parents and placing them into white institutions or homes.⁴⁴

By the 1920s and 1930s, between the wars, the dominant discourse began to change again in regards to the ‘mixed race’ children ‘problem’. Australian officials soon grew to believe that eugenics (which had become popular during this period) was their ‘solution’. As Dr Cecil Cook Chief Protector of Aborigines in Northern Territory in the 1930s stated, ‘the problem of our half-castes will be quickly eliminated by the complete disappearance of the black race, and the swift submergence of their progeny in the white.’⁴⁵ Dr Cook, and the earlier mentioned A.O Neville, to name only two of the most prominent followers of the breeding out policies, believed that a strictly controlled program of breeding out half-castes, quadroons, and octoroons had the implication that within three to five generations, ‘without the danger of what was called “atavism” or biological “throwback”, of turning part-Aborigines into whites.’⁴⁶ They

⁴³ Haebich, ‘Between knowing and not knowing’, p. 76.

⁴⁴ For further reading about these Acts and Legislations, *Contested Ground* contains a state by run-down of Aboriginal ‘Protection’ Acts, as well as Chris Cunneen, ‘History of Government Policy Regarding Aborigines and Torres Strait Islanders’ in *Indigenous People and the Law in Australia* (Sydney: Butterworths, 1995), pp. 29-43; and Chris Cunneen, ‘Case Study: The Removal of Aboriginal Children’ in *Indigenous People and the Law in Australia* (Sydney: Butterworths, 1995), pp. 44-55.

⁴⁵ As cited in David Day, *Claiming a Continent: A New History of Australia* (Sydney: HarperCollins, 2001), p. 197.

⁴⁶ As cited in Manne, p. 58.

believed that through this process of controlled breeding, that they would be able to provide a better life for these children if they were integrated properly within white Australian society. This idea was founded on the premise, as had always been the case, that Indigenous Australians were, by colour and creed, inferior. Government officials such as Neville argued that separation and integration would, in the words of Richard Broome, 'create a brave new Australia where all people were white and the same, and Aboriginality was washed away from the "Australian Way of Life"'.⁴⁷ Indeed Neville himself asserted that 'our coloured people must be helped in spite of themselves'.⁴⁸ Despite the harsh paternalistic tone of this words, the ideas were not only limited to Australian borders. Sir John MacDonal, Canada's first Prime Minister stated that 'the great aim of our civilisation has been to do away with the tribal system and assimilate the Indian people in all respects with the inhabitants of the Dominion, as speedily they are fit for the change'.⁴⁹ One of the key differences, however, according to Julie Cassidy, was that the Canadian government did not focus primarily on children of mixed race, and the Indian children were forced into state run schools as opposed to the same types of removals faced by Australian Aborigines.⁵⁰

It is difficult to provide an accurate number of the children that were removed. Robert Manne, for instance, discusses the *Bringing Them Home* report findings about the actual number of Aboriginal children separated

⁴⁷ Broome, p. 277.

⁴⁸ In Russell McGregor, "'Breed out the Colour' or the Importance of Being White'", *Australian Historical Studies*, 120 (October 2002), p. 300.

⁴⁹ In Robert Van Krieken, "The 'Stolen Generations' and Cultural Genocide: The forced removal of Australian Indigenous children from their families and its implications for the sociology of childhood", *Childhood*, 6, 3, p. 306.

⁵⁰ Julie Cassidy, 'The Stolen Generations – Canada and Australia: The Legacy of Assimilation', in *Deakin Law Review*, 11, 1, (2006), p. 135; and Van Krieken, 'The "Stolen Generations"', p. 306.

from their families during the (roughly) seventy years that child removal policies were in act. He claims that the report suggests that anywhere between one in three, and one in ten children were taken from their families. Although he admits that there is a great difference between one in three, and one in ten, he can state for sure that in the roughly seventy years of child removal, 'tens of thousands of babies and children were removed.'⁵¹ What is most important about these numbers is that we must acknowledge the great number of Aboriginal children and families that were greatly disrupted by these practices, and that the traumatic results of these removals are still visible within Indigenous communities today. The following passages are recollections of the narrators' removals.

Bill Simon, as mentioned earlier, had a very happy childhood. He resided at the Purfleet Mission which was located near Taree in New South Wales. However he and his parents lived with the ever present concern that the authorities could come to take them away. He explains:

As the children in our family grew older we began to be aware of the anxiety that our parents lived with concerning the authorities. The welfare people came into Platto about once every four to six weeks. Sometimes we'd see them sitting on a nearby hill with binoculars, spying, waiting for the right time to strike. 'Run and hide,' our parents shouted as soon as a car was spotted. They told us that if the welfare people found us, we'd be taken away. Why whitefellas wanna take us away?' I asked. We weren't told the reason but like all children at Platto

⁵¹ Manne, p. 53.

we knew what to do. Once, Boxy and I were running to hide from the welfare people and luckily there was a well near some trees, camouflaged by bushes. We could hear them up above, stamping and yelling in frustration. They didn't find any of us that day, but we knew they'd be back to try again. It was just a matter of time.⁵²

He continues with this recollection of the morning that welfare staff arrived and he and his two brothers were taken away forever:

It was winter 1957, seven o'clock in the morning. The sun was up and the sounds of birds drifted down into our small kitchen. My brother Lenny was sitting on the floor, eating toast; my brothers Murray and David and I, rubbing our eyes in a state of half sleep, were waiting for mum to smear Vegemite on our bread before we dressed for school. A routine day in the Simon household. Someone rapped loudly on the door. My mother didn't answer it. We hadn't heard anyone come up the path. The knocking got louder, and finally my mother, who was reluctant to answer any callers when my father wasn't home, opened the door and exchanged words with three people. We strained to hear what they were saying. Three men then entered the room. A man in a suit ordered my mother to pick up Lenny and give him to me. My mother started to scream. One of the policemen bent

⁵² Simon et. al., p. 13.

down and picked up my brother and handed him to me. My mother screamed and sobbed hysterically but the men took no notice, and forced my brothers and me into a car. My mother ran out onto the road, fell on her knees and belted her fists into the bitumen as she screamed. We looked back as the car drove off to see her hammering her fists into the road, the tears streaming down her face. Then we saw her stand up, turn around and go back inside the house, shutting the door behind her.⁵³

In another example, Edith, born in 1941, was removed from her family at the age of four.⁵⁴ Edith tells us that

The most enduring memory that still causes so much pain for me is the time I saw my mum once while I was in the orphanage and I wanted to go out and see her but one of the nuns was holding me back. I wanted to go with my mother. I wanted to be with my mum. My mum was crying and I was being held back by the nun. The image on my mother's face sticks vividly in my mind and it is very upsetting – it still causes me much grief and sorrow. When I think about it I still cry a lot.⁵⁵

⁵³ Simon et. al., p. 14-15.

⁵⁴ Unfortunately no other information has been provided about her.

⁵⁵ In *Telling Our Story*, p. 66.

In the beginning of this thesis, I introduced the story of 'Millicent's' removal. She, just like Edith, was taken away from her parents at the age of four. The following excerpt is a continuation of her story:

The Protector of Aborigines and the Child Welfare Department in their 'Almighty Wisdom' said we would have a better life and future bought up as whitefellas away from our parents in a good religious environment. All they contributed to our upbringing and future was an unbearable scar of loneliness, mistrust, hatred and bitterness. Fears that have been with me all of life. The empty, dark and lonely existence was so full of many hurtful and unforgivable events that I cannot escape from no matter how hard I try. Being deprived of the most cherished and valuable thing in life as an Aboriginal Child – love and family bonds.⁵⁶

In the eyes of the various state governments, Aboriginal families were often seen as living in severe poverty, and in housing that was far below the living standards that could be provided by non-Indigenous Australians. It was because of this that Indigenous children were never placed with other Indigenous families. As the matron of Cootamundra Aboriginal Girls Home explained as late as the 1960s:

these children are not getting a natural home life, because dark people naturally only live unto the day; they do not look after tomorrow even, and very often they would be hungry and they would not get a natural life in that respect. I think they are very

⁵⁶ *The stolen children: their stories*, p. 27.

much better off in an institution than they would be in some of their home lives.⁵⁷

As a result of this removal, and the often complete separation from their traditional communities of support, many of these children were forced into new lives where they were often exposed to bigotry, abuse, and intolerance from white Australians. Having being 'trained' to live in a non-Indigenous world, they were often left in a state of confusion with little sense of their own identity.⁵⁸ These children grew up to feel that because they had learned nothing about their homeland, their traditional culture, and language, *and* they did not fit into the non-Indigenous world that they were forced to live in, that they did not belong within either worlds. These ideas are discussed in the following section.

Cultural Confusion

I was there for 16 years and I was brainwashed every day of the week. You never go near Blacks. Your people don't want you anyway. They're just dirty. They don't want anything to do with you ... We were playing in the schoolyard and this old black man came to the fence. I could hear him singing out to me and my sister. I said to [my sister], 'Don't go. There's a black man'. And we took off. It was two years ago I found out that was my grandfather. He came looking for us. I don't know when I ever stopped being frightened of Aboriginal people. I don't know when I

⁵⁷ Haebich, 'Between Knowing and not Knowing', p. 80

⁵⁸ Bourke, and Edwards, p. 102.

even realised I was Aboriginal. It's been a long hard fight for me.

Confidential evidence 10, Queensland⁵⁹

Removed from her family in New South Wales and placed into Cootamundra girls home in the 1940s, this woman shares a story that is repeated frequently within the testimonies. Often children were taught, or to use her words 'brainwashed' into believing that Aboriginal people were bad, and that they (the children) were unwanted by the wider Aboriginal community. What is most prominent about this testimony is the strong image it conjures of a small girl's fear of a black man that she did not realise was her grandfather. A number of other testimonies also share that they, just like this women, did not even realise that they were Aboriginal themselves.⁶⁰ Anna Haebich, in fact, points out that cultural confusion was common as the children, once removed were often forbidden from speaking their native tongue, which as she states was the 'final onslaught on the membranous web linking them to family, culture and county.'⁶¹

When children were separated from their parents, they were not only removed from the loving bonds of their family and kin, but they were also removed from the traditional bonds of *holding*, and the knowledge and skills that are shared through these traditional teaching practices. Peter Read elaborates upon this and states that while government policies attempt to help (so they say) welfare-dependant Aborigines, it in fact that their 'repressive institutions and cruel policies' which traumatised those that were removed, and 'rendered many of them unable to take a normal

⁵⁹ *Bringing Them Home*, p. 211.

⁶⁰ Refer to *Bringing Them Home*, *Many Voices*, and *Telling our Story* for other examples.

⁶¹ Haebich, *Broken Circles*, p. 343.

part in adult life.’⁶² Trauma in particular reference to the removal of children, as McCoy explains it, can be described as the severing and loss of ‘the transmission of identity, and important cultural values associated with that identity, across generations has become severely broken and wounded.’⁶³ The following testimony was shared by four sisters that were taken from their father and grandmother when their parents were having marital issues in the 1960s. They tell us that they were forced into an institution and new life which did not prepare them for later adult and family life. They claim that they lost their survival skills for living within the ‘mainstream community’:

We had been brought up on the surrogate mother of the institution and that whole lifestyle, which did not prepare us at all for any type of family life or life whereby in the future we would be surviving or fending for ourselves; and then the survival skills that we needed in order to survive in the mainstream community, because those survival skills are certainly not skills that you learn in a major institution. And the whole family value system wasn't there and then the practice that comes with that wasn't there and put in place.

Confidential evidence 265, Victoria.⁶⁴

This piece of narrative from Colin Walker shares similar sentiments. Instead of preparing him and the other children at Cummeragunja mission for their adult lives, the staff there stripped his people of their spirit, and

⁶² Read, *A rape of the soul so profound*, p. 43.

⁶³ McCoy, ‘Holding men’, p. 63

⁶⁴ *Bringing Them Home*, p. 187.

instead of *holding* their children, the Aboriginal elders taught the younger generations nothing other than how to hunt.

I went to Cummeragunja Sunday School and if you started doing anything in the Aboriginal way they'd say the Devil would get you. So it sort of broke our spirit, and the old people were broken and they didn't pass anything on to us. All they passed on to us was gathering foods and what to eat and how to hunt.

Colin Walker.⁶⁵

As Wayne Thorpe put it, 'Once you know your identity, your confidence is so much stronger.'⁶⁶ As I have shown so far, if having a strong sense of identity is empowering, many of the children who were removed from their families were often severely weakened by the intervention of non-Indigenous officials. The government policies that drove the removal of children were deeply entrenched in the idea that assimilation was only possible if children were completely separated from their parents, kinsfolk, and community. The children who were removed were taught the ways of the non-Indigenous society. They were taught, as this final testimony for this chapter shows, that being Aboriginal was something to be embarrassed about:

I didn't know any Aboriginal people at all - none at all. I was placed in a white family and I was just - I was white. I never knew, I never accepted myself to

⁶⁵ 'An old trapper without a trail', in *Living Aboriginal History of Victoria: Stories in the Oral Tradition*, eds. Alick Jackomos and Derek Fowell (Craftsmen Press, Museum of Victoria, 1991), p. 198.

⁶⁶ 'These things give meaning to life' in *Living Aboriginal History of Victoria: Stories in the Oral Tradition*, eds. Alick Jackomos and Derek Fowell (Craftsmen Press, Museum of Victoria, 1991), p. 51.

being a black person until - I don't know - I don't know if you ever really do accept yourself as being ... How can you be proud of being Aboriginal after all the humiliation and the anger and the hatred you have? It's unbelievable how much you can hold inside.

Confidential evidence 152, Victoria.⁶⁷

To conclude, in traditional Aboriginal societies, every member of the family and tribe had their own role to play, thus giving each individual a definite sense of purpose. Removal policies, as well as the dislocation and displacement, that were further results of colonisation, removed Indigenous Australians from their cultural homeland and tribal responsibilities, and in the process, alienated them from themselves. This, as Mick Adams and McCoy claim, broke men's spirits, leaving them in poor physical, social and emotional health.⁶⁸ However, as I continue to show in this thesis, this was not only true for males, females too have suffered greatly. In the following chapter, I investigate the links between alienation and mental illness.

⁶⁷ *Bringing Them Home*, p. 200.

⁶⁸ Mick Adams, 'Raising the profile of Aboriginal and Torres Strait Islander men's health: an Indigenous man's perspective', *Australian Aboriginal Studies*, 2 (2006), p.70.

Chapter Two

Unresolved issues:

Alienation, Trauma, and Mental illness

There's still a lot of unresolved issues within me. One of the biggest ones is I cannot really love anyone no more. I'm sick of being hurt. Every time I used to get close to anyone they were just taken away from me. The other fact is, if I did meet someone, I don't want to have children, cos I'm frightened the welfare system would come back and take my children.

Confidential evidence 528, New South Wales.¹

This piece of testimony was shared by a man that was removed from his family at the age of eight in the 1970s. Not only did he suffer from the original trauma of removal, he was subjected to multiple acts of sexual abuse in the church controlled orphanages and foster homes.² It is clear from his statement that the effects of his removal and abuse that he faced as a child were still felt four decades after they began. He claims that he has 'a lot of unresolved issues' which hinder his ability to form attachments with anyone because he is afraid of being hurt. In fact, he is so afraid, that he will not even have children in case they are taken away from him. This fear, according to the testimony of Joyce Smith, a prominent worker in the field of Aboriginal health and development, is quite a common feeling, especially among those Indigenous people who

¹ *Bringing Them Home*, p. 184,

² The church denomination is not specified.

have had children.³ Although it is difficult to provide exact numbers here, it is safe to speculate that many of those that were removed as children feel this way. Professor Beverly Raphael, a world-renowned trauma expert, claims that due to the trauma suffered from the experience of separation, children (and then later on adults) are more likely to have difficulties forming, and maintaining relationships with other people.⁴ Already then, we are able to see that alienation has far further reaching effects than just the loss of culture, language, land, and family. Alienation is a core aspect of poor mental health, particularly in regards to the development of an individual's sense of belonging.

Linking this idea back to the overall theme of health, Dr Ian Anderson testified for the National Inquiry that the major effect that removal created was the sense of 'fragmented' identities, and the resultant lack of self-worth that is the greatest cause of Aboriginal poor health. He claimed that:

The result of that sort of [separation] process was one which fragmented the identity of many people in quite a profound way. That has an impact on people's sense of who they are, how you fit into the world and where you're going – what in technical terms people call your sense of coherence. It also destroyed the sense of worth of being Aboriginal and fragmented people's sense of identity, and this is something which happened not just to people who were taken away but it has also happened to the families who were left behind. Now this whole process in a psychological sense fundamentally impacts

³ *Bringing Them Home*, p. 224.

⁴ *Bringing Them Home*, p. 184.

on how people look after themselves ... It makes it even more difficult for people who do have physical illness to take complicated treatments over a long period of time ... Individuals may not have the self-esteem or self-worth to actually come in for care in the first instance or for follow-up management.⁵

In other words, according to mental health experts, the original trauma and alienation suffered due to the processes of removal and separation represents only the 'tip of the iceberg' when looking at the long list of health related issues suffered by many Indigenous Australians today. In the previous chapter, I discussed the idea of alienation and the loss of *kanyirninpa*. In this chapter I begin to investigate mental illness among removed and separated Aboriginal Australians as one of the on-going serious effects of this significant disruption to, and loss of traditional practices of *holding*. Mental health looms largely in the oral testimonies contained within the *Bringing Them Home* report. This is not surprising, particularly as the Inquiry's purpose was to tease out some of the many issues confronting Indigenous communities on a daily basis. However, as with the theme of alienation, there are a number of other narrative sources that include evidence of mental illness.

In this chapter I discuss three main issues within the broader theme of mental illness. As with the previous chapter, I will be using the narratives of the Stolen Generations as key sources to show how those that were removed view their current poor mental health status as a result of being removed from their families as children. In the first section I will be

⁵Dr Ian Anderson, evidence 261, in *Bringing Them Home*, p. 198.

discussing the idea of trauma, post-traumatic stress disorder and depression, and how it applies within the context of the Stolen Generation's experiences and oral and published narratives. As I alluded to in the previous chapter, trauma in the instance of this discussion, according to Brian McCoy, is when the usual, or tradition modes of culture and identity transference is disrupted or completely destroyed.⁶ Using the narratives, I show how the trauma affects countless numbers of those removed today, and that even with (in many cases) a great deal of effort on the part of those that are suffering, many of those that were removed are still not able to move on. In section two of this chapter I examine the theme of suicide. According to Kerrie Doyle, Indigenous Australians commit suicide at a rate of approximately three times more than their non-Indigenous counterparts.⁷ From these figures alone, it is obvious that suicide is a real, ever-present, and very serious issue for Indigenous mental health workers, and the narratives contained within this section further prove this point. Finally, using the work of such researchers as Brian McCoy, and Mike Adams as a starting point of discussion, I investigate the inter-generational effects of this trauma, and the mental health implications that are often inherited as a result of these removal practices, despite the fact that many of those affected by these issues were not physically removed themselves.

Trauma, Post-Traumatic Stress Disorder, Depression

Mental health has been defined by the National Mental Health Strategy 'as being more than the absence of illness; rather it describes a state of emotional and social well-being whereby the individual is able to function

⁶ McCoy, 'Holding men', p. 63.

⁷ Kerrie Doyle, 'Modes of Colonisation and Patterns of Contemporary Mental Health: Towards and Understanding of Canadian Aboriginal, Australian Aboriginal and Maori Peoples', *Aboriginal and Islander Health Worker Journal*, 35, 1 (2011), p. 22.

in their environment and with their innate capacity and cognitive, affective and relational mental abilities.⁸ The Sydney Mental Health Unit, in providing evidence for the Inquiry behind *Bringing Them Home*, also offers us an indigenous perspective of Mental health. They state that:

Traditional Aboriginal culture like many others does not conceive of illness, mental or otherwise, as a distinct medical entity. Rather there is a more holistic conception of life in which individual wellbeing is intimately associated with collective wellbeing. It involves harmony in social relationships, in spiritual relationships and in the fundamental relationship with the land and other aspects of the physical environment. In these terms diagnosis of an individual illness is meaningless or even counterproductive if it isolates the individual from these relationships.⁹

In other words, traditional concepts of mental health, for Aboriginal Australians, are intimately enmeshed in the cultural, social and spiritual health of the individual, with family, and community, inextricably linked.¹⁰ This holistic approach to maintaining the well-being of one's self and community also existed in pre-colonial Inuit, and Maori societies.¹¹ According to Darrin Hodgetts and colleagues, a key aspect to 'decolonising psychology' is to move away from Western concepts of psychology in which individuals are viewed as separate 'independent self-entities' disconnected from their social and environmental spheres, to get a fuller understanding of someone's mental health we also need to

⁸ Valmae A. Ypinazar et. al, p. 468.

⁹ *Bringing Them Home*, p. 392.

¹⁰ Anna B. Williamson, Beverley Raphael, Sally Redman, John Daniels, Sandra J Eades, Naomi Mayers, 'Emerging themes in Aboriginal child and adolescent mental: findings from a qualitative study in Sydney, New South Wales', *Medical Journal of Australia*, 192, 10 (17 May 2010), p. 603.

¹¹ Doyle, p. 21.

consider and engage with their past, and the social and environmental contexts to which they are connected, not separated from.¹² Undoubtedly such practice is not only vital to 'decolonising psychology' but history also.

Experts in the field of psychiatry, such as the widely acknowledged psychologist John Bowlby (in particular, well-known for his groundbreaking work on attachment theory), have argued for the recognition of the role that parental care in the early stages of a child's life can have on an individual's future state of mental health.¹³ Evidence has shown that for a child to possess a 'positive self-image', they need to have been raised in an atmosphere that encourages their 'emotional and psychological well-being which will foster feelings of self-esteem and confidence.'¹⁴ Arguments centre on questions about the formation of a child's identity: for example if a child's identity is formed by the individual's perception of themselves in relation to the world around them¹⁵ and they were raised in an environment in which they were taught to despise their Aboriginal culture and heritage, how is it even possible for a child that has been removed or separated to form any healthy, positive self-image? As the previous chapter argues, many of those children that were removed did not have access to such a safe domestic or emotional environment after they had been taken away from their homes, and herein lies the origin of the Stolen Generations' trauma. The following testimony highlights one of the key

¹² Mikulas (2007) in Darrin Hodgetts, Neil Drew, Christopher Sonn, Otilie Stolte, Linda Waimarie Nikora, Cate Curtis, 'Indigenous psychologies and the social psychology of everyday life', *Social Psychology and Everyday Life*, (Basingstoke; New York: Palgrave MacMillan, 2010), p. 140-141.

¹³ McCoy, (2007), p. 59.

¹⁴ *Telling Our Story*, p. 35-36

¹⁵ *Ibid.*

issues of trauma, that while the scars may not be visible, they are no less painful for the sufferer.

It never goes away. Just `cause we're not walking around on crutches or with bandages or plasters on our legs and arms, doesn't mean we're not hurting. Just `cause you can't see it doesn't mean ... I suspect I'll carry these sorts of wounds `til the day I die. I'd just like it to be not quite as intense, that's all.

Confidential evidence 580, Queensland.¹⁶

The use of the term 'trauma' has become an integral part of Stolen Generations discourse. Trauma has in one instance been defined as the following: 'In psychiatry, "trauma" has assumed a different meaning and refers to an experience that is emotionally painful, distressful, or shocking, which often results in lasting mental and physical effects.'¹⁷ Judith Herman in 1992 also similarly defined trauma as the destruction of the victim's central expectations about the safety of the world, the loss of positive self-value, and 'the meaningful order of creation'.¹⁸ However, where the Stolen Generations are discussed, in the words of Rosanna Kennedy, trauma is used to 'express the very real and ever-present anguish and "the damage that has been done by misguided policies, to mount a moral campaign for an apology, to invite empathy, and to legitimate claims for reparation."¹⁹ As this thesis shows, 'life stories', and the same could be said about published narratives and testimonies, are

¹⁶ *Bringing Them Home*, p. 178.

¹⁷ 'Trauma', *MedicineNet*, last editorial review 27/04/11, <http://www.medterms.com/script/main/art.asp?articlekey=8171> [accessed 11 November 2011]

¹⁸ In McCoy "'They Weren't Separated'", p. 60.

¹⁹ Kennedy, p. 512.

excellent sources for investigating the significant impact that trauma has on those that suffer through it.²⁰

Going back to Bowlby's ideas concerning child-parent separation, Bowlby has argued that unless a child experiences a loving, close relationship with their mother, or a maternal substitute, in their adult life they are far more likely to develop such issues as depression and chronic anxiety. Another significant issue that often arises from 'maternal deprivation' is that those who were deprived of the bonding as a child will often have issues creating a healthy, and intimate bond with children of their own.²¹ This issue is explored later in this chapter. A significant number of the testimonies contained within *Bringing Them Home* provide evidence of the prevalence of mental illness within Aboriginal communities. The extract below is from a submission provided by a psychiatrist shows how mental illness deeply affects the life of his patient 'Eric':

In the light of the research findings, Eric's experiences of separation were both highly traumatic for him and also occurred at an age when he would have been most vulnerable to serious disturbance. For Eric too the separation involved a disruption to his cultural and racial identity.

It is apparent to me that a fundamental diagnosis of Post-Traumatic Stress Disorder is fitting. Eric's

²⁰ Gadi BenEzer, 'Trauma signals in life stories', in *Trauma and Life Stories: International perspectives*, eds. Kim Lacy Rogers, Selma Leydesdorff, Graham Dawson, (London; New York: Routledge, 1999), p. 29. For further sources on Trauma and memory refer to *Traumatic Pasts: History, Psychiatry, and Trauma in the Modern Age, 1870-1930*, eds. Mark S. Micale and Paul Lerner, (Cambridge: Cambridge University Press, 2001); *Tense Past: Cultural Essays in Trauma and Memory*, eds. Paul Antze and Michael Lambek, (New York; London: Routledge, 1996).

²¹ *Telling Our Story*, p. 33.

symptomatology is obviously severe and chronic. In addition, it is clear that he deals with many deep emotional wounds that do not clearly fit [this] diagnostic classification. His deep sense of loss and abandonment, his sense of alienation, and his gross sense of betrayal and mistrust are normal responses to a tragic life cycle. Having said this, it is also apparent that he deals from time to time with Major Depressive Episodes.

Confidential submission 64, Victoria (as shared by psychiatrist).²²

According to his psychiatrist 'Eric' suffers from Post-Traumatic Stress Disorder (PTSD) as a result of the 'disruption to his cultural and racial identity' caused by his removal from his family at the age of one. It is also clear from this submission that his feelings of alienation and loss are typical for someone that has experienced a 'tragic life cycle'. 'Eric' though, does not suffer alone. As stated in Ron Brown's article, Aboriginal and Torres Strait Islanders (generally) suffer from stress and anxiety at far higher rates than their non-Indigenous counterparts;²³ and this is a strongly pronounced theme amongst the narratives collected. The following testimony is another example of how stress has affected the life of another Aboriginal man that was removed from his family as a child:

Oh, yes. I've been in a state of stress most of my life. Much of it has been my own doing, I suppose, but I feel I'm just beginning a process of self-healing in my life. No matter what course we all do, not matter

²² *Bringing Them Home*, pp. 178-180.

²³ Ron Brown, p. 36.

what doctors we see, when it comes to psychological and emotional healing, we ultimately are our own healers.

Burnum Burnum.²⁴

Burnum Burnum was raised 'on the breast of a mother relation'²⁵ as his birth mother died of tuberculosis shortly after he was born, though not long after his mother's death, he and his siblings were taken from his kin to the Bomaderry Baptist United Aboriginal Mission in New South Wales. Although he claims that he was treated very well by the missionaries there, his life soon changed for the worse:

I was then declared a Ward of the State but the State Government was a highly negligent parent. It neglected us in that it did not prepare us to meet all the struggles of life. I was given twenty-five cents a year as pocket money up until eighteen years of age so I didn't have a clue about the value of money. We were deprived and cooped up and had almost no identity. It was as if we were numbers in a prison. Most of the boys of my age, when let loose on society, took to alcohol and the other agents of Aboriginal genocide like drugs and cigarettes.²⁶

Dealing with the stresses of everyday life was clearly not a skill that Burnum Burnum and a significant number of others that experienced

²⁴ Interview with Caroline Jones, in *Voices of Aboriginal Australia: Past, Present, Future*, compiled by Irene Moores, Aboriginal Deaths in Custody Watch Committee, (Springwood: Butterfly Books, 1995), p. 423.

²⁵ Ibid.

²⁶ Ibid.

similar childhoods to him. He claims that once the boys his age were no longer under the control of the State, many of them took to alcohol and drugs. In the following chapter I will be investigating how alienation, and mental illness led many of the 'Stolen Generation' into using these 'agents of Aboriginal genocide', in Burnham Burnham's words.

Depression

When using published narratives for evidence of how child removal has influenced the current state of mental health of Indigenous Australians, one factor that becomes apparent very quickly is the lasting scar that separation has left in the hearts and minds of those that were removed as children. The following testimony shared by a woman that was fostered out in the 1960s at the age of 18 months, is an apt example of this. She claims that mental illness, particularly extreme anxiety, or fear 'consumes' her life at times. It is 'welfare', in her opinion that is at fault for her issues, and what she 'needed to do was to be with [her] family and [her] mother.'

I now understand why I find it so very very hard to leave my home, to find a job, to be a part of what is out there. I have panic attacks when I have to go anywhere I don't know well and feel safe. Fear consumes me at times and I have to plan my life carefully so that I can lead as 'normal' an existence as possible. I blame welfare for this. What I needed to do was to be with my family and my mother, but that opportunity was denied me.

Confidential submission 483.²⁷

²⁷ *Bringing Them Home*, p. 198.

Indigenous health worker at the Centre for Remote Health, Juanita Sherwood, claims that depression is a very significant issue in the everyday lives of Aboriginal Australians. Sherwood herself has suffered from depression as a result of the post-traumatic stress disorder she incurred after a vehicle accident. Although I am unaware of whether she was removed as a child, what is most significant about her article is that she touches on a point that was raised earlier in this chapter. She argues that mental illness is 'a life issue, living within a minority group who must deal with the daily consequences of a silent and injurious history.'²⁸ Accordingly, as Doyle points out, it seems other Indigenous groups are living with these issues too:

Using a similar tool to the Social and Emotional Survey of Aboriginal People in 2006 (as reported in the Aboriginal and Torres Strait Islander Health Performance Framework [HPF], 2009), 30 per cent of first Nations people have felt sad blue or depressed for two or more weeks (First Nations Regional Longitudinal Health Survey, 2005, in StatsCan, 2009), compared to per cent of Australian Aboriginal people.²⁹

In New Zealand, Maori scholar of health Mason Durie claims that 'despair and despondency' is also a very real issue for Māori mental health. He also states, as cited by Doyle, that these feelings can be ascribed to the high rates of suicide within other Indigenous communities.³⁰ The following testimony was shared by the earlier mentioned four sisters that were removed in the 1960s, in it they discuss the 'trauma manifestations' suffered by their youngest sister Jill, and her eventual suicide.

²⁸ Juanita Sherwood, 'Mental Health Issues from an Indigenous Perspective', *Aboriginal and Islander Health Worker Journal*, 29, 3 (May/June 2005), p. 29.

²⁹ Doyle, p. 22.

³⁰ Doyle, p. 22.

The youngest member of our family, Jill, was perhaps more traumatised through all this process because she grew up from the age of 9 months being institutionalised the whole time. She actually had some major trauma illnesses and trauma manifestations of institutional life evident in her life and yet nobody knew the root of it, or the cause of it, let alone knew the remedy to it. [The cottage mother] used a lot of mental cruelty on Jill - I mean, through cutting all of her hair off at one time to exert authority and to bring submission and fear into you ... making the kids look ugly and dress like boys. She did that to the younger children - well Jill in particular because she was younger and more impressionable. Jill died because of those policies in law. She committed suicide. She was 34 and death was the better thing.

Confidential evidence 265, Victoria.³¹

Suicide will be addressed further in the following section. What is most important to note here though is that while we perhaps need to be wary about the above extract from Doyle, it does clearly show that a startlingly high number of Australian Aboriginal have at some stage in their lives felt sad or depressed, across the broad spectrum of what constitutes 'depression'. For many, depression can be a 'chronic' disease, and often can be reoccurring.³² Unfortunately the term depression is often used

³¹ *Bringing Them Home*, p. 185.

³² Cate Howell, Carlote Marshall, Mellisa Opolski, Wendy Newbury, 'Management of recurrent depression', in *Australian Family Physician*, 37, 9, (Sept 2008), p. 704.

incorrectly and far too regularly. It is normal, according to Black's Medical Dictionary, to feel extended periods of sadness. However, 'clinical depression' can be more accurately defined as:

a collection of psychological symptoms including sadness; unhappy thoughts characterised by worry, poor self-image, self-blame, guilt and low self-confidence; downbeat views on the future; and a feeling of hopelessness. Sufferers may consider suicide, and in severe depression may develop hallucinations and delusions.

Doctors make the diagnosis of depression when they believe it is causing a patient to be ill; depression may affect physical health and in some instances be life-threatening.³³

Symptoms of depression can be wide and varied. Colin Tatz outlines some of them as the following: feelings of irritability; anxiety; lack of ability to focus; lack of appetite; losing interest in things that were once interesting or enjoyable; loss of care for one's own appearance; inability to sleep and not wanting to get out bed; persistent tiredness; suicidal thoughts or tendencies; weight loss or gain.³⁴ Although we cannot always be sure that the people that have shared their testimonies have 'clinical depression', what we can see is that for many, their poor state of mental health has made it very difficult for them to function on a day-to-day basis in a productive and fulfilling manner.

³³ 'Depression' *Black's Medical Dictionary*, 42nd Edition, (London: A&C Black, 2010) *Credo Reference*. Web, <<http://www.credoreference.com/entry/blackmed/depression>> [accessed 22 January 2012]

³⁴ Colin Tatz, 'Aboriginal, Maori and Inuit youth suicide: avenues to alleviation?' in *Australian Aboriginal Studies*, 2 (2004), p. 20.

Suicide

As I stated earlier, suicide attempts (or suicidal thoughts) are one of the many symptoms or effects of severe depression. It is easy to see, even as an outsider, that daily feelings of hopelessness and depression can push someone into taking their own life, particularly if they do not receive any help, or treatment. Mary Smith grew up on a reserve near Narrogin, although life was tough for her family there, because her father was unemployed, she believes that her childhood was a happy one, until she was about 10 or 11 when men from Aboriginal Welfare picked her and three of her siblings up from school unannounced. Although she was able to attend school until she reached Grade three, she spent most of her youth at the Carrolup native settlement in domestic training. While at her second job she met her husband Jack, and once she became pregnant to him she moved to Katanning to live with him. However, Jack was a heavy drinker and severely and regularly abused her. She felt that she had no choice but to leave him and her three eldest children, taking only her youngest child. Eventually her children were placed in the Wandering Mission, repeating the same childhood that she had. Once Mary had made it to Perth in order to find work, she soon began to feel extreme guilt for leaving her children and took to drinking to mask her pain. She then suffered from a breakdown, and wanted to commit suicide:

I was in Royal Perth Hospital for a week or so and I was ready to jump out the top window.

It's heartbreaking. All the time you can picture their faces. You can see them and you can't reach 'em. I

don't know what they was going through. I could feel it myself though.³⁵

Although Mary's story is a little different to others shared in this thesis, her story still shows the devastating and on-going effects that child removal can have not only on the child that was removed, but subsequent generations also. This will be further touched on in the following section. Feelings of pain, and unresolved issues resulting from the alienation, and abuse suffered over long periods of time had significantly contributed to her own, and her children's lack of self-esteem and feelings of loss, 'helplessness and hopelessness'.³⁶ Mary's story is also an example of how alcohol is often used as a way to mask one's feelings of sadness, guilt, and depression. This, too, will be further discussed in Chapter Three.

Pauline McCloud was separated from her family at the age of two, and placed into the home of her adoptive parents at the age of four:

A week ago I hit rock bottom. Once again. It was like dreaming the whole thing happened. I thought I really couldn't live with it. It was too much. Everything had finally got to me. I was prepared to go. I couldn't give a shit about living and facing the world again. So I took a whole heap of pills and really was ready to die. The dumb things never worked! I got one heck of a headache from it. As a nurse I knew what was dangerous and I thought, "Oh well, this could do the trick" – but it never did. Woke up three hours later crook as anything. I

³⁵ *Telling Our Story*, pp. 149-153.

³⁶ *Ibid.*, p. 142.

thought, "Oh well, my lot in life is not to die yet." And so, slowly but surely building up confidence in myself to cope with what happened to my family , with what happened to myself, and try to help kids who might be facing similar situations. To try to make people understand out in the world, understand what happened to our family. Should never ever happen any more. To steal twenty-four years of a family's life.

Pauline McCloud.³⁷

Pauline was one of the lucky ones: she was able to be reunited with her parents through the Link-up program. She shares her feelings of wanting to give-up on her life as 'it was too much'. Unfortunately her story is all too common. As I have already touched on in the introduction to this chapter, the rate of Aboriginal suicides is three times higher than that of non-Indigenous Australians. The prevalence of Indigenous suicide is not only limited to Australia. In fact, as Colin Tatz discusses in his controversial article concerning Aboriginal, Maori and Inuit youth suicide, Canada and New Zealand have similar issues, with Maori suicides being equal to the startlingly high number of non-Indigenous suicides (despite having until only recently been much lower). Inuit suicide rates are as high as ten times that of non-indigenous suicides in Canada.³⁸ These statistics Tatz claims, and I must agree, deserve more attention, and better explanation of their causation than merely 'depression'.³⁹

³⁷ *The Lost Children*, p. 170.

³⁸ Tatz, p. 16. In his 2004 article Tatz uses figures that were collected between 1995 and 2003.

³⁹ Tatz, p. 17.

As I stated however, this article was rather controversial, not because of his claims about the rate of Aboriginal and Indigenous suicides, but because of his reasoning behind how and why they were different. According to Tatz, unlike Maori and their notion of *whakamomori* (suicide), and the Inuit practices of 'sacrificial suicide' in an attempt to help with the survival of kin groups, (and even then, he argues that Inuits and Maori barely acted on these concepts), Aboriginal Australians had no notions of suicide prior to as late as the 1970s. Not surprisingly then, in the same journal that Tatz's article was published, his article received some significant backlash. For instance, Joseph Reser claimed that Tatz's argument could not have been further from the truth. In actuality suicide has been a pervasive factor in Aboriginal art and culture for over four decades, and he argues that 'it is this very depiction of the inevitability and tragic/heroic/inviting character of suicide that, in part, drives the contemporary phenomenon'.⁴⁰ Tatz also claims within this article that the attempts that have been made to prevent Aboriginal suicide are generally a failure. One obviously cannot help but agree, however, as Michael Dudley so adequately points out, despite the fact that Tatz argues that Aboriginal suicide is different to the usual suicide phenomena, Tatz fails to offer any substitute theories.⁴¹ In spite of the obvious flaws in Tatz argument, Dudley does point out that (among other things) one particular strength of Tatz's argument (in a different publication) is that he does caution us from trying to compare the experiences of non-Aboriginal and Aboriginal suicides because there is no other culture that that matches the particular experiences of Australian Aboriginals. As Dudley further

⁴⁰ Joseph P. Reser, 'What does it mean to say that Aboriginal suicide is different? Differing cultures, accounts, and idioms of distress in the context of indigenous youth suicide,' *Australian Aboriginal Studies*, 2 (2004), p. 38.

⁴¹ Michael Dudley, 'Addressing indigenous suicide: a special case? A response to Colin Tatz', in *Australian Aboriginal Studies*, 2 (2004), p. 27.

elaborates, 'in terms of the realities of power, Aboriginal suicide is vastly different from white, and if Aboriginal suicide is different, it is for such reasons of history and power.'⁴² These ideas of how history and power have influenced Aboriginal health have been integral to this thesis.

Reser also explains that youth, in what he terms 'traditionally oriented' Aboriginal communities, have significant issues with dealing with their feelings, especially for those that have broken family and kin support networks, traditional forms of coping mechanisms and modes of 'emotional expression'. 'Emotional distress,' he claims, particularly when teamed up with the use of alcohol, 'is almost invariably a significant precursor to suicide attempts.'⁴³ This section's concluding excerpt is taken from the story of Nancy DeVries who was taken from her mother at the age of eighteen months in the 1930s because she had been born out of wedlock. Nancy was moved around a great deal between families and various Missions, greatly shaking any sense of stability, trust and belonging that she may have been able to form.

I think it's important that people realise that these kids that were taken away from their families, separated from their culture, their identity, had to put up with dreadful, dreadful things. How many of us have survived sane I don't know, and I realise why so many of us have died through alcohol. I was lucky, as I grew up, that alcohol never agreed with me. Instead of the slow death of alcohol I tried the quick death of pills or hanging. I always tell people I cut my wrists here cutting a jam tin, because it's very

⁴² Dudley, p. 31.

⁴³ Reser, p. 43.

embarrassing admitting that I tried to commit suicide. I tried to kill myself. I was lonely, I was unhappy, I wanted my mother, I wanted my identity, I felt cheated, I wanted to be me. And I wasn't being me.⁴⁴

This passage summarises the sentiments conveyed throughout this thesis. She claims that all she ever wanted was her own identity and her mother, but welfare took that away from her, and her mistreatment led her, and many others like her, into attempting suicide, and that luckily 'alcohol never agreed with [her]'. Unfortunately, as I will show in the following chapter, others were not so fortunate in being able to avoid alcohol.

Family and Inter-Generational effects

It is my thesis that Aboriginal Australia underwent a rape of the soul so profound that the blight continues in the minds of most blacks today. It is this psychological blight, more than anything else, that causes the conditions that we see in reserves and missions. And it is repeated down the generations.

...

Today we are the products of the ravages of white settlement. History has moulded us, psychologically and physically.

Kevin Gilbert.⁴⁵

⁴⁴ *The Lost Children*, p. 89.

⁴⁵ In 'Voice of', *Voices of Aboriginal Australia: Past, Present, Future*, compiled by Irene Moores, Aboriginal Deaths in Custody Watch Committee (Springwood: Butterfly Books, , 1995) p.45.

This passage was taken from a published piece by Kevin Gilbert. Born in Condobolin, New South Wales, and of Wiradjuri and Kamilaroi descent, Kevin was, rather than being removed, raised on an Aboriginal reserve by his sister. Although his upbringing may have been different to most of those that are included in this thesis, his perception of the destructive role of missions and reserves cannot be ignored. As Kerrie Doyle has discussed, the prevalence of mental health issues and negative behaviour (for instance alcohol abuse and criminal activity) within Aboriginal communities is 'grounded in unresolved grief associated with multiple layers of trauma spanning many generations', or as Gilbert puts it 'a rape of the soul so profound.' Doyle further adds that there is no existing Indigenous group that 'has survived "othering" intact'. The higher occurrence of mental health related issues for Indigenous peoples in comparison to their non-Indigenous counterparts then are the 'on-going effects of social and cultural inequalities.'⁴⁶ Throughout this thesis I have attempted to highlight the individual experiences of removal, and the later complications that have arisen as a result of these separations. In this section, I discuss the inter-generational effects of trauma and mental illness. As Kirmayer and colleagues, in their discussion of Canadian Aboriginal mental health, have suggested:

The emphasis on narrating personal trauma in contemporary psychotherapy is problematic because many forms of violence against Aboriginal people are structural or implicit and so may remain hidden in individual accounts. ... Individual events are part

⁴⁶ Doyle, p. 22.

of larger historical formations that have profound effects for both individuals and communities.⁴⁷

Bill Simon dedicates a large section of his life story to discussing his role as a father figure, and a husband. His first marriage to Lily did not work out the way that he had always hoped it would. By his early twenties, Bill was drinking very heavily, and Lily his partner, and then later wife, was doing the same. He recounts that often their drinking resulted in violence against each other.⁴⁸ Even though they did attempt to end the cycle of alcohol related violence against each other, they continued to have issues. Eventually Lily, who was heavily pregnant, grew tired of Bill's drinking and negative behaviour patterns. The following excerpt is Bill's recollection of the time:

Lily leaving was a wake-up call. I started to reflect on my life, and I was worried that we had split up when we were about to become parents. I wanted a normal family life and I knew I should stop drinking, but I didn't have the will power, support or skills to help myself. I wanted for myself and our child the sort of life that I had been cheated of: a normal family life. Children needed their parents, I knew that, but I didn't know how to manage my own behaviour and the anger I had inside.⁴⁹

⁴⁷ Cited in Peter Menzies, 'Developing an Aboriginal Healing Model for Intergenerational Trauma', *International Journal of Health Promotion & Education*, 46, 2 (2008), p. 43.

⁴⁸ Simon et. al., p 80.

⁴⁹ Ibid., p. 81.

Under the 'care' of the staff (and I use the word 'care' ironically here) Bill, his siblings, and the other boys at Kinchela were often subjected to untold amounts of physical, psychological, and emotional abuse and deprivation.⁵⁰ Bill later explains that he often wished that he could have explained this to Lily, claiming that:

if I had, she would have understood my over-reaction to being told what to do. Instead of talking about it, I kept it to myself.⁵¹

In his discussion of 'screen memories', Sigmund Freud has argued that one's memory of traumatic events is often so powerful that the individual will more often than not repress this memory or memories by subconsciously replacing the memory of this trauma with 'screen memories' that are less complex, and far easier to comprehend. This 'repression' of memories though does come at a relatively heavy toll to the individual's social and personal functioning, particularly as the 'mind still struggles with the past and carries its open wounds, so it will express the original trauma in indirect ways, frequently by inflicting similar suffering on others.'⁵² Indeed, Ernest Hunter, a prominent historian in the field of Aboriginal health has cited the work of Noel Pearson claiming that there are two distinct forms of trauma suffered by Indigenous communities in Australia: 1) 'personal and immediate'; and 2) trauma that has been 'inherited'.⁵³ Within the narratives included in this section, the trauma that is being inflicted on others (usually their family members) is often emotional and repeated throughout the generations. However, in the

⁵⁰ Refer to 'Stolen' in Simon et.al., p. 14-62.

⁵¹ Simon et. al., p. 84.

⁵² Cited in 'History from within: trauma and memory', in *The Modern Historiography Reader: Western Sources*, ed. Adam Budd, (New York: Routledge, 2009), p. 313.

⁵³ McCoy, *Holding Men*, p. 12-13.

earlier excerpt taken from Bill Simon, the trauma that he imposed on his family was similar to the abuse that he suffered as a child at Kinchela boys home and the repression of his past trauma cost him his relationship with his first wife, and the mother of his oldest two children. The following testimony was shared by a parent who can see that her children have inherited her anxiety issues.

There's things in my life that I haven't dealt with and I've passed them on to my children. Gone to pieces. Anxiety attacks. I've passed this on to my kids. I know for a fact if you go and knock at their door they run and hide.

I look at my son today who had to be taken away because he was going to commit suicide because he can't handle it; he just can't take any more of the anxiety attacks that he and Karen have. I have passed that on to my kids because I haven't dealt with it. How do you deal with it? How do you sit down and go through all those years of abuse? Somehow I'm passing down negativity to my kids.

Confidential evidence 284, South Australia⁵⁴

Dr Nick Kowalenko, and Professor Raphael in their submissions in *Bringing Them Home* explain that the feelings detailed by the woman in the above testimony is common, and even expected. Because of trauma experienced as a child, and coping mechanisms devised and maintained while growing up, many parents begin to 'convey anxiety and distress' upon their children.⁵⁵ This was also evidenced in the earlier mentioned

⁵⁴ *Bringing Them Home*, p. 222.

⁵⁵ *Bringing Them Home*, p. 227.

story of Mary Smith and her family. Mary's original trauma from removal left her in a vulnerable state that was only further exacerbated by the many years of abuse that she suffered at the hands of her husband, and her separation from her children. Mary's diminished self-worth and her feelings of helplessness, anger and guilt was no doubt passed onto her children. In fact, the lives of the first generation of the Smith family was paralleled in the life her children. Her eldest daughter Joy also married an abusive man, and in the process of leaving him to save herself, she was forced to give up her role as carer for her children to members of her husband's family. Mary's eldest two sons, Barry and Wayne, were suffering from a burden of trauma that left them unable to maintain stable relationships, and just like Bill Simon, and their father, they too ruined relationships because of their alcohol-fuelled attacks of domestic violence.⁵⁶ This Dr Kowalenko also explains that patterns of emotional numbing, bought about as a coping mechanism for grief and trauma, can become so ingrained, or normalised, as Menzies puts it,⁵⁷ that they become a lifelong issue which is then passed onto the next generation.

The Human Rights and Equal Opportunity Commission's Inquiry into Mental Illness also reported that children of parents suffering from depression tend to suffer from higher levels of anxiety, depression and general poor health than children whose parents are not depressed.⁵⁸ The following testimony is an example of how severe depression, as a result of grief, can influence a person's wellbeing. It also illustrates the inter-

⁵⁶ Joy Smith, remarried and started another family with a loving man, and Barry and Wayne have both since "gained insight into aspects of their troubled lives and were attempting to deal with their emotional and physical well-being." *Telling Our Stories*, p. 144-145.

⁵⁷ Menzies, p. 43.

⁵⁸ *Bringing Them Home*, p. 228.

generational effects of child removal, as it is not only the child who is removed who suffers, the remaining family suffers just as greatly:

Mum was kidnapped. My grandfather was away working at the time, and he came home and found that his kids had been taken away, and he didn't know nothing about it. Four years later he died of a broken heart. He had a breakdown and was sent to Kew [Psychiatric] Hospital. He was buried in a pauper's grave and on his death certificate he died of malnutrition, ulcers and plus he had bedsores. He was 51.

Confidential evidence 143, Victoria.

Similar to the testimony provided by Dr Ian Anderson at the beginning of this chapter, Michael Constable points out that because of depression and severe anxieties, it becomes very hard for Aborigines to seek help for their illnesses. In fact he argues that it is difficult to make people with these issues to even want to take care of themselves and be healthy.⁵⁹ It goes without saying then, that severe depression can indeed cause poor physical and general health, as Mick Adams states:

“Preventable chronic conditions” become lethal when combined with the impact of intergenerational trauma (for example, the losses and abuses sustained by the “stolen generations”); the poverty cycle; a lack of health education; and cultural and language barriers to accessing appropriate health services. Medicalisation of intergenerational trauma diminishes social injustice by reducing it to psychological pathology and biological dysfunction.⁶⁰

⁵⁹ *Bringing Them Home*, p. 198.

⁶⁰ Adams, p. 69.

All medical professionals then, not just those in the mental health field, need to take these factors into consideration if any real change is going to be made to the state of Indigenous health in Australia.

In summary, the Indigenous narratives and testimonies used within this chapter have shown that historical child removal policies have greatly influenced the mental health status of many Indigenous Australians. Unfortunately however, narratives also show that the trauma does not stop at those who were 'stolen' from their families. The issues, anxieties, and depression suffered as a result, are often passed down to the next generation. What is most important to remember however, is the cyclical nature of the effects of mental illness. This chapter has also shown that because of severe mental illness, many Indigenous Australians suffer from general poor physical health, which undoubtedly leads to mental health issues remaining unchanged, or getting worse. Additionally, as I discuss in the following chapter, the use and abuse of both legal, and illegal substances only further aggravates the state of mental health issues for Aboriginal Australians today.⁶¹

⁶¹ Adams, p. 70.

Chapter Three

'Food wasn't a priority but grog was':

Alcohol, substance abuse and the Stolen Generations

It has left me sick, also my son sick too, never to be the same people again that we were before, being separated from one another, it has made our lives to be nothing on this earth. My sons and myself went through a lot of pain and heartbreak. It's a thing that I'll never forget until I die, it will always be in my mind that the Welfare has ruined my thinking and my life.

I felt so miserable and sad and very unhappy, that I took to drinking after they took my sons. I thought there was nothing left for me.

Confidential submission 338, Victoria.¹

Ernest Hunter claims that the use and abuse of alcohol, without question, can be attributed to younger deaths, and poor health 'in alcohol-consuming populations'²; Australia, and particularly its Indigenous population is not immune from these deaths and health risks. According to statistics quoted by Ron Brown, alcoholism levels are eleven times higher within Aboriginal communities than Australia's total population. Further statistics have also shown that 'in 2003, alcohol was the fifth leading cause of the burden of disease and injury among Indigenous people, responsible for 6.2 per cent of the total burden and 7 per cent of all

¹ *Bringing Them Home*, p. 214.

² Hunter, p. 94.

deaths. Just over one-fifth of burden due to injury and more than one-sixth of burden due to mental disorders were attributable to alcohol.³ As we can see from the above testimony, this mother of two is a part of this statistic. Although she was a nurse and able to take good care of her sons, they were still removed from her care in the 1950s, she claims that it was Welfare that ruined her outlook on life, and it was the removal of her children and the feeling of severe sadness that drove her to drink.

Despite the figures that I have alluded to above, it is ironic that Aboriginal Australians are in fact less likely to drink alcohol than their non-Indigenous counterparts. In fact, statistics gained from the National Drug Strategy Household Survey in 2007 show that 23 per cent of Aboriginal and Torres Strait Islander peoples over the age of 14 either abstained or had been drinkers previously but had stopped, compared to 17 per cent of Australia's non-Indigenous population. Additionally, the 2004-2005 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) showed that 24 per cent of Indigenous people and 15 per cent of non-Indigenous people over the age of 18 had either never had alcohol before, or had not drunk any for 12 months or longer. Unfortunately, what is most significant about Indigenous consumption of alcohol is that rate at which it is consumed. The same NATSIHS survey found that of those over the age of 18 that did consume alcohol at a rate to be considered 'high risk' was 8 per cent (Indigenous) and 6 per cent (non-Indigenous).⁴

Within the field of Aboriginal health work in Australia, it has become widely accepted that alcohol is both an indication of and a reason for

³ Thompson et. al., p. 47.

⁴ 'High-risk' consumption of alcohol is six or more standard drinks a day for males, and four or more for females. Thomson, et. al., p. 47-48.

individual, family and community issues. Historically, alcohol or the right to consume alcohol has held more significance to Aboriginal Australians than just gaining/re-gaining the permission to consume alcohol. During the late 1800s, a series of alcohol restrictions and bans were implemented across New South Wales (Victoria and Queensland inclusive), in order to curb growing Aboriginal alcohol consumption issues, such as the perception of a fringe-dwelling native peoples living on European hand-outs.⁵ This prohibition then, it has been suggested, transformed the way in which alcohol was consumed by Indigenous Australians; alcohol consumption 'took on', as Kirby states, 'an air of secrecy and conspiracy'.⁶ Indeed, as Hunter adds, alcohol for Indigenous Australians, particularly during periods of prohibition, represented more than a 'substance' but was instead a 'symbol' of power and colonial relations. He states that 'in remote Australia access to alcohol was the most immediate and tangible expression of "full rights" and for many Aborigines these two things were seen as synonymous.'⁷ With this in mind then, we must be aware that heavy, or problematic alcohol consumption within particular sections of Indigenous communities, has a history that stretches back to early colonisation, and continues to today, and has only been further aggravated by removal practices, alienation, and the denigration of the self-esteem of many of those that were removed.

In this chapter, however, I do not seek to outline possible avenues or suggestions for alleviating alcohol and alcohol related issues within Aboriginal communities. Instead, as with the previous chapters, by using narratives taken from such edited collections as *The Lost Children*, and

⁵ Broome, p. 59.

⁶ Diane Kirkby, 'Drinking "The Good Life": Australia c. 1880-1980', in *Alcohol: A Social and Cultural History*, ed. M. Holt (Oxford; New York: Berg, 2006), p. 213.

⁷ Hunter, p. 90.

testimonies taken from *Bringing Them Home*, this chapter investigates how Indigenous Australians perceive their own use of alcohol and how, in their opinion, their removal and the subsequent alienation was at the heart of alcohol issues. Although it is widely acknowledged that the causes of alcohol and substance abuse are multifaceted and it is impossible to pinpoint any one particular cause, as Kathleen Clapham, Kerin O’Dea, Richard D. Chenhall point out, ‘social, economic, historical and cultural factors’ are all determinants to a varying degree.⁸ This chapter shows that for many Indigenous Australians, their removal as children caused them to develop alcohol issues in later life.

The structure of this chapter is somewhat different to the previous chapters. This chapter is dedicated to the discussion of the alcohol and substance abuse of many of the Stolen Generations, and why they chose to or, perhaps more accurately put, feel that they need to drink. This chapter shows, using the narratives of Indigenous Australians as key sources, that for many of those removed, alcohol is used to numb themselves from ongoing emotional and mental effects of separation related trauma. As psychiatrist Judith Hermann explains, at the time of a traumatic event or experience, the brain creates a chemical reaction which helps the victim to distance themselves psychologically from the trauma as a mechanism of survival. She goes on to state that some ‘traumatised people who cannot spontaneously dissociate may attempt to produce similar numbing effects by using alcohol or narcotics.’ Because of this, traumatized people are at a higher risk of becoming addicted to alcohol or other types of drugs.⁹ The

⁸ Kathleen Clapham, Kerin O’dea, Richard D. Chenhall, ‘Interventions and sustainable programs’, in *Social determinants of Indigenous Health*, ed. By Bronwyn Carson, Terry Dunbar, Richard D. Chenhall and Ross Bailie (Crows Nest, NSW: Allen and Unwin, 2007), p. 284.

⁹ *Bringing Them Home*, p. 199.

following testimonies share stories of the numbing effects that alcohol has had on the lives of those sharing their narratives. The first testimony shows that the informant used to drink because, as he states, he was not sure if it was because he saw his father do it, or because he had too many issues that he could not confront.

I drank a lot when I was younger, y'know. I still do I guess. I don't drink as much now, but I still do and there's never been anything ... any pleasure in it. I guess I don't know whether it's a hangover from seeing the old man do it ... whether it's because of that or whether it's because of other issues which I just wouldn't, couldn't confront ... I'd have nights where I'd sit down and think about things. There was no answers.

Confidential evidence 208, Victoria.¹⁰

According to the following narrators, as a young Indigenous person you are not only witness to the on-going traumatic issues suffered by those that were removed, but you are also subjected to 'continual rejection [and] continual animosity' because of the colour of your skin. The narrators, then, feel that when you grow up hating the colour of your skin, the only release available, or most appealing, is alcohol, or drug abuse, or even both:

As a black kid grows up he can't hit out at anyone else, only himself for being black. And he sees this continual rejection, continual animosity [that] is

¹⁰ *Bringing Them Home*, p. 215.

directly attributable to his blackness. And so he hates being black. The only release he has for this is through alcohol, or drugs, and so the next step is alcohol and drugs.

Paddy Jerome, Bob Weatherall, Sam Watson, Don Davidson, Headley Johnson, Pat Murdoch and Roy Hopkins.¹¹

In the testimony below we again see alcohol originally being used as a numbing agent for depressive thoughts. The woman sharing this story was fostered out as a baby in the 1970s and she states that while she did not drink for a long time, whenever she does all of her depressed thoughts begin to come back to her. This clearly highlights the aggravating nature of alcohol on mental health and illness. Sadly though, as evidence supplied by Michael Constable to the Inquiry,¹² and as this testimony shows, alcohol is often the first self-treated medicine of choice:

I still to this day go through stages of depression. Not that I've ever taken anything for it - except alcohol. I didn't drink for a long time. But when I drink a lot it comes back to me. I end up kind of cracking up.

Confidential evidence 529, New South Wales.¹³

Cedric Jacobs was born in York, Western Australia, in 1943 and removed from his parents with his brothers at the age of nine to Mogumber. The

¹¹ Paddy Jerome, Bob Weatherall, Sam Watson, Don Davidson, Headley Johnson, Pat Murdoch and Roy Hopkins, 'The Spirit of Musgrave Park', in *Being Aboriginal: Comments, observations and stories from Aboriginal Australia*, eds. Ross Bowden and Bill Bunbury, (Australian Broadcasting Corporation, 1990), pp. 51.

¹² *Bringing Them Home*, p. 199.

¹³ *Bringing Them Home*, p. 197.

following extract, taken from his interview for the *Bringing Them Home* Oral History project, shows how Jacobs' sister took to drinking because she could not cope with the removal of her younger brothers. Additionally, Cedric comments on how the trauma and heartache from the removals caused the 'physical problems' that eventually killed all of his siblings.

I had one sister who I believe was so dramatically affected by losing the three youngest in the family, that her life was never the same. She drank alcohol quite a bit...eventually all of my brothers and sister died from I believe to be heartache-caused physical problems.

Cedric Jacobs.¹⁴

Here again we return to the story of Bill Simon. By the age of 20, Bill had become an alcoholic. Although his drinking was mainly limited to the weekends because of his job, his drinking increased so much that he could no longer maintain his job. The following excerpt shows the extent of his addiction, he even drank methylated spirits when he did not have enough money to afford alcohol. What is most prominent about his testimony however is his statement about his alcohol consumption in relation to his mental state. He claims that the more that he drank, the more he remembered Kinchela, the abuse he suffered there, and his brothers that were still being forced to live there. However, he also adds, the angrier he got about these thoughts and memories, the more he drank. His life became ruled by an endless cycle of anger and alcohol:

¹⁴ In Jane Harrison, 'Leaving Home: "There were no goodbyes"', *Many Voices: Reflections on experiences of Indigenous child separation*, ed. by Doreen Mellor and Anna Haebich (Canberra: National Library of Australia, 2002), p. 57.

Grog became an important part of all my social outings, but I didn't end up having the good time that the advertisements promised. When I was intoxicated I always thought about Kinchela, and I would find myself dredging up unpleasant and violent incidents and situation I had been a part of, or witnessed. With increasingly morose thoughts I would sink into feelings of anger and sorrow. More grog fuelled thoughts of my brothers left behind. I pictured them from lining up on the parade without me, frightened and alone. The more I thought about it, the angrier I became, and the angrier I was, the more I drank.

Most days were spent drinking anything we could get our hands on. I was drinking methylated spirits with a bit of boot polish added in for flavour. We drank metho whenever we couldn't get our hands on grog, because it was cheap. After a while I stopped adding the boot polish and drank it straight. I was an alcoholic and I was twenty-one.¹⁵

Bill's story is an example of how post-traumatic stress syndrome can lead to alcohol addiction. As I have already stated, the use of alcohol to numb traumatic pain is not an unusual phenomenon. However, using the research of Volpicelli and colleagues, it is also clear that Bill, and others included within this chapter, have developed a 'learned helplessness'.

¹⁵ Simon et. al., p. 64-65.

'Learned helplessness' according to Volpicelli, is when an individual learns that 'their responses are of no consequence, leaving them helpless to cope with a traumatic situation', and additionally, further research shows a distinct link between excessive alcohol PTSD and 'learned helplessness'.¹⁶ As this thesis has progressed and continues into the next chapter, it is obvious that once you have developed a sense of 'learned helplessness', attempting to move on from their trauma, getting help or making the actions to do so becomes incredibly difficult. It is heartening however to see that, as Mick Adams explains, 'after remaining for so long in the background, burdening themselves with anger and resentment, and seeking solace in alcohol and drugs, many Indigenous men are beginning to consider positive and proactive ways of living.'¹⁷

Ultimately, and it cannot be stated enough, the major argument of this thesis is that mental illness, alcohol and substance abuse, and criminal behaviour, are all symptoms of a large societal, and historical problem – alienation. Indeed, in regards to the 'alcohol problem' within Indigenous communities, the National Aboriginal Health Strategy Working Party (1989) 'emphasised ... [that] "there is a consensus in the Aboriginal community that understands the "alcohol problem" from a community perspective, as a symptom (ultimately a symptom of dispossession) of alienation, and discrimination which leads to loss of self-esteem".'¹⁸ The following testimony from Stan Bowden is an excellent example of how alcoholism was merely a symptom of his bigger issue: feelings of

¹⁶ Joseph Volpicelli, Geetha Balaraman, Julie Hahn, Heather Wallace, Donald Bux, 'The Role of Uncontrollable Trauma in the Development of PTSD and Alcohol Addiction', in *Alcohol Research and Health*, 23, 4 (1999), p. 258.

¹⁷ Adams, p. 71. Refer to Clapham, et. al., pp. 271-295, for a discussion of intervention action and programs that have been designed to help with Indigenous alcohol related issues.

¹⁸ Cited in Hunter, p. 91.

confusion, anger and alienation. Essentially, all that he wanted to be able to answer was the question, where am I from?

[I was] confused. Angry too, but I couldn't see at the time whether it was anger or confusion. I think that was where I went drinking a lot. I became an alcoholic...I couldn't figure out how everyone else talked about their families and different ones would ask where I was from. I didn't know. Where I was really from. It bugged me a lot, and I was hitting the grog a lot on the ships...

Stan Bowden.¹⁹

In the following excerpt, well-known singer/song-writer Archie Roach also explains similar sentiments to Stan, although his experience was perhaps a little different. Although, as he states, he was treated well by his foster family, he did begin to have problems once he left their home at the age of 14. His main issues began as he pushed his foster parents for answers about his birth family, and they could not give him any:

When I was a kid I was in and out of foster homes and institutions. I eventually ended up with a couple called Cox, an Australian woman and a Scottish man. ...They were good people and brought me up as best as they could until I was about 14. I got in a bit of strife when I left. I didn't know anything about my people. I didn't even know I was Aboriginal. I was 14 when one of my sisters tracked me down. She wrote me a letter, "Dear brother, I

¹⁹ *The Lost Children*, p. 100.

finally found you at last. Dear old Mum passed away a week ago.” The rest of the letter is a bit vague but the part about Mum passing away stuck in my head. Who is she talking about? From then on I changed; I wasn’t the reserved kid I used to be. I confronted my foster parents but they couldn’t answer my questions. I argued with them and took off. But they didn’t know anything because they weren’t told. I started drinking heavily. In fact, I was a hopeless drunk. It’s a wonder I didn’t die.

Archie Roach.²⁰

The following testimony was shared by a woman removed from her family as a baby in the 1940s. At the age of fifteen she was raped while on a work placement organised by the institution she was placed in. She explains that she had no one to turn to when as she suffered from varying degrees of sexual abuse. She also clearly states that this feeling of isolation and alienation from traditional family bonds is what drove her to drinking. Again through this excerpt we see the spiralling nature of the current Aboriginal health situation. It is clear that this woman is suffering as a result of her separation from her family, and the abuses she was subjected to after her removal. This alienation has created a legacy of mental health issues that in turn led her to drinking.²¹

I remember when my sister come down and visited me and I was reaching out. There was no-one there. I

²⁰ Archie Roach, ‘You can’t heal the hurt until you have been sore’, in *Living Aboriginal History of Victoria: Stories in the Oral Tradition*, eds. Alick Jackomos and Derek Fowell, (Craftsmen Press: Museum of Victoria, 1991), p. 70.

²¹ Refer to Brown pp. 36-37 for the cyclical nature of mental illness and other ‘psychosocial and social issues’ such as alcohol, violence, abuse, and neglect in Aboriginal communities.

was just reaching out and I could see her standing there and I couldn't tell her that I'd been raped. And I never told anyone for years and years. And I've had this all inside me for years and years and years. I've been sexually abused, harassed, and then finally raped, y'know, and I've never had anyone to talk to about it ... nobody, no father, no mother, no-one. We had no-one to guide us. I felt so isolated, alienated. And I just had no-one. That's why I hit the booze. None of that family bonding, nurturing - nothing. We had nothing.

Confidential evidence 248, South Australia.²²

Linking this back to *kanyirninpa*, Brian McCoy explains that when someone loses any 'valued aspects' of their life, including family or control of their bodies (through rape as this informant had), often they also lose any drive they might have had to not use alcohol as a coping mechanism. The traditional roles and bonds of *kanyirninpa*, however, 'can provide those valued aspects'²³; unfortunately, as the above woman stated, she missed out on that important aspect of her childhood, 'family bonding, [and] nurturing'.

One key factor of alcohol consumption is the cyclical nature of its effects. As an anonymous writer for the Australian Science journal has so aptly pointed out, solving the issue of excessive alcohol consumption is not possible unless prominent social issues within Aboriginal communities are

²² Bringing Them Home, p. 184.

²³ McCoy, *Holding Men*, p. 143-144.

themselves addressed, and alternatively, a number of these issues, including unemployment and lack of educational programs cannot be dealt with when alcohol consumption in some communities is so high.²⁴ The following excerpt was taken from the testimony of a man that was removed from his mother at an early age. His mother had suffered a nervous breakdown so he was taken from her and he was placed in a children's home. His mother was also removed from her parents as a child.

I tried to look forward. As I say, every time I'd look back as in trying to find out exactly who I was and what my history was, I'd have real bad attacks of Vic. Bitter.

Confidential evidence 156, Victoria.²⁵

This informant's testimony speaks to more than just a discussion of alcohol use. His story is yet another example of the intergenerational effects of child removal related trauma. Additionally, his story shows that moving forward for him has been a difficult battle, particularly as he feels that he does not know about his history. Such testimonies as this, and the others contained within this thesis, highlight the significance of Indigenous narratives and testimonies, particularly when using them as a lens for viewing Indigenous health issues as a result of child removal policies.

Eleanor Harding has worked extensively on helping Aboriginal and Torres Strait Islander women. For over 25 years (since 1978) she has

²⁴ Anonymous, 'Aboriginal Alcoholism', in *Australian Science, Incorporating Search*, 19, 8 (September 1998), p. 43.

²⁵ *Bringing Them Home*, p. 199.

worked for the Department for Community Services supporting victims of domestic violence. She argues that:

Domestic violence is on the increase because of drugs. There are so many drugs on the streets and they turn society to violence. Male violence is rife in the community now. At least a drunk sobers up, but with an addict there is no end. They take the last dollar from the house even if the kids go without a feed...Many of the Aborigines we come into contact with are victims of government assimilation policies. They were adopted or fostered out to white families and are returning to the Aboriginal community with severe identity problems. They don't know whether they are black or white. Some have become very bitter people. They are lost souls within themselves, so they turn to drugs and alcohol and that's the start of violence.

Eleanor Harding.²⁶

Eleanor's narrative discusses an incredibly prominent issue within Indigenous communities: domestic violence, which will be further discussed in Chapter Four. Importantly though, this excerpt highlights that alcohol has far reaching issues and it emphasises the effects of drugs and alcohol on the wider society and family groups. As Gracey discusses, often the results of addiction influences the disintegration of families,

²⁶ Eleanor Harding, 'I'm pessimistic about the future', in *Living Aboriginal History of Victoria: Stories in the Oral Tradition*, eds. Alick Jackomos and Derek Fowell, (Craftsmen Press: Museum of Victoria, 1991), p. 54.

truancy, neglect of children, and creates 'a strong association with crime and the criminal justice system.'²⁷

In summary, this chapter, as with the previous chapters, has highlighted the significance of published Indigenous narratives and sources and the previously hidden, or under-analysed evidence of Indigenous physical, mental and social health issues that they contain. Additionally, in regards to alcohol, although Australian media reports constantly highlight the excessive alcohol consumption of Aboriginal Australians, statistics actually show that Indigenous Australians are more likely to refrain from drinking alcohol. In saying this, however, it has become clear through this investigation of Stolen Generations narratives, and through additional statistics, that alcohol is still a very significant issue within Aboriginal communities. What is most significant about alcohol consumption within Indigenous communities is the way in which it is both caused by, and in tandem, causes mental health and illness issues. In the following chapter I further discuss some of the issues raised by Eleanor Harding, and Aboriginal over-representation within the criminal justice system.

²⁷ Michael Gracey, 'Substance misuse in Aboriginal Australians', in *Addiction Biology*, 3, 1 (1998), (no page provided), cited at <<http://web.ebscohost.com.ezproxy.waikato.ac.nz/ehost/detail?sid=5dbb9803-749f-4521-bb7a-1a64cf414a5e%40sessionmgr104&vid=2&hid=106&bdata=JnNpdGU9ZWWhvc3QtbGl2ZQ%3d%3d#bib22>>, [accessed 22 November 2011].

Chapter Four

‘[N]ot because I wanted to be a criminal’:

Alienation, rebellion, violence, and criminal activity

They grew up to mix up with other troubled children in Tardon and didn't know how to mix with us their mother and family, they only knew how to mix with other boys that they grew up with and these boys were into stealing, so my sons went with them, they couldn't do without the crowd that they grew up with. I couldn't tell them anything at this stage cause they felt that coloured people were nothing and that is when they went on the wrong road.

One of my sons was put into jail for four years and the other one died before he could reach the age of 21 years. It hasn't done my sons any good, the Welfare making them wards of the State and taking them away from me, they would have been better off with me their mother.

Confidential submission 338, Victoria.¹

This testimony was given to the inquiry behind *Bringing the Home* by a mother of two who was speaking about her sons that were removed from her care in the 1950s. Not only is this an example of her sons' alienation from their ancestral community and kin, but it also tells us that one of her sons has also been incarcerated for an unspecified crime. Most

¹ *Bringing Them Home*, p. 191.

importantly however, the mother is able to link her sons' institutionalisation to their problems. A number of studies show that the significantly greater occurrence of crime within Australia's Indigenous population is related to the 'marginal status and alienated character of the Aboriginal people within Australian society.'² While criminal acts may not (in the traditional sense) indicate poor health necessarily, in the context of health as I have defined it for this thesis, the need or drive to commit crime in any way, shape or form cannot possibly be considered a characteristic of somebody who is truly 'healthy'. Indeed, criminal activity is also not a characteristic of somebody who possesses the 'physiologic, and psychological integrity, ability to perform personally valued family, work, and community roles' either. As this chapter progresses, using the narratives of Indigenous Australians, we will see that this is definitely the case.

This chapter will be divided into two main sections. In the first section I look at the issue of violence. Violence, as with crime, has become an increasingly worrying issue within Indigenous communities. In the previous chapter an excerpt taken from Eleanor Harding's narrative referred to the inter-related nature of Aboriginal violence and alcohol and substance abuse, within the first section of this chapter I have included further examples of how this is so. Additionally, through the continued use of Bill Simon's narrative I show that the use of violence was an assertion of masculinity, dominance, and severe anger. In the second section of this chapter I look more specifically at criminal activity leading to incarceration. Discussing Aboriginal and Torres Strait Islander crime statistics, Roderic Broadhurst claims that Indigenous Australians have

² Amnesty International, 1993, as cited in Broadhurst, p. 453.

been over represented. In fact, he claims, as at 1997 Aborigines represented only 1.6 per cent of the entire Australian population, yet they 'were significantly overrepresented (by 12:1) in the penal system.'³ In this section the narratives and testimonies show that for a number of those that commit crimes on a regular basis, crime was either a form of social rebellion and defiance against the government that had removed and isolated them as children, or prison was viewed as a place of comfort and familiar faces.

Violence

He was really good at the start but things soon changed. I found out that he was drinking too much. He was very, very cruel, physical ... I was never without a black eye or two. Belted up and put in hospital those early days. I was pregnant with Joy when he used to belt me up. Mum and Dad ... took me home. He came and got me again took me back and the same thing happened again. I kept going back, back, back. Always got belted up. When he broke my jaw, smashed it, ... that's when I called it quits. He threatened to kill me. I was off.

Mary Smith.⁴

In this excerpt taken from the story of Mary Smith, she explains that her husband had, on multiple occasions, beaten her severely and even threatened to kill her, forcing her to leave him and her children behind for her own safety. Although her husband was non-Indigenous, her story

³ Roderic Broadhurst, p. 408.

⁴ *Telling Our Story*, p. 152.

highlights the increasingly prominent issue, particularly for Indigenous women – of domestic violence. Statistics used by Dorinda Cox and colleagues show that members of the Stolen Generations are two times more likely to be subjected to violence in their lifetimes.⁵ With this in mind it is not difficult to see why and how violence has become a major issue in Aboriginal communities, because as we will see further along in this section, violence and abuse behaviour is learned. Additionally, Indigenous women, according to statistics quoted by J. Eveline and K.M. Vincent, are a startling forty-five times more likely to suffer from domestic abuse, and 10 times more likely to die from this abuse, compared to non-Indigenous Australian women.⁶

According to Richard Widders, ‘domestic violence and the other forms of abuse are learned behaviours; they were learned by my people so they could survive in a community within a community’⁷: when we look at the story of Bill Simon, even if only in the context of this thesis, it is clear that violence and lashing out was a behaviour that he had learned within the Kinchela Boy’s home. He saw, and experienced on a regular basis, boys getting beatings when they did not behave in a manner deemed appropriate by the Home’s staff. The following excerpt from taken from Bill’s life story describes another instance of Bill taking his anger out on his wife:

Our fights were now so bad that they were becoming dangerous. One night her mother had to pull me off

⁵ Dorinda Cox, Mandy Young, and Alison Bairnsfather-Scott, ‘No justice without healing: Australian Aboriginal people and family violence’, *Australian Feminist Law Journal*, 30, (June 2009), p. 152.

⁶ J. Eveline, and K.M. Vincent, ‘The invisibility of gendered power relations in domestic violence policy’, *Journal of Family Studies*, 14, 2-3 (Oct, 2008), p. 323.

⁷ Richard Widders, ‘Domestic Violence, Sexual Assault and the Health of Aboriginal People’ in *Developing Practice: The Child, Youth and Family Work Journal*, 6 (Autumn 2003), p. 44.

her. I had my knees on her arms and I was holding a pillow over her head trying to smother her. I don't know what would've happened if her mother hadn't been there. When I shaved off my beard Lily laughed so much that I punched her in the face to make her stop. One night she became so enraged that she stabbed me in the chest. She stabbed me in various parts of my body on about four different occasions. Lily often accused me of cheating on her after Vicky was born. I was often too drunk to remember what I had been doing. At times I would smash holes in the walls and swear at her instead of hitting her. By this stage of our marriage she was afraid of me. I could tell by the look in her eyes.⁸

As we have seen, as a child, Bill Simon was subjected to a great deal of abuse, and no doubt severely de-masculinised by the staff at Kinchela. Geoffrey Hunt and colleagues argue that domestic violence (male-on-female to be specific) can be viewed as a tactic for asserting their masculinity onto their partner, 'particularly for lower – and working-class males, who lack the conventional resources open to their middle class counterparts to produce a sense of manliness.'⁹ This is no doubt the case for Bill.

The following testimony was provided by a psychiatrist and other staff from the Victorian Koori Kids Mental Health Network. They shared this

⁸ Simon et. al., p. 83.

⁹ Geoffrey P. Hunt, Kathleen Mackenzie, Karren Joe-Laidler, 'Alcohol and masculinity: the case of ethnic youth gangs', in *Drinking Cultures: Alcohol and Identity*, ed. Thomas M. Wilson (Oxford; New York: Berg, 2005), p. 225-226.

as part of a bigger story about one of the many families that suffered greatly as a result of removal policies:

Jenny grew up in a chaotic family experiencing violence, alcoholism and sexual abuse from her father. At three and a half years she was placed in foster care. There were periods of time when she was returned to her mother and then removed again. Like her mother she also received no adequate model on which to base her future parenting and due to her deprivation and abuse her ability to trust and form close relationships was damaged. In addition, she also had to cope with a history of violence, alcoholism and sexual abuse that left her depressed and only just able to cope with life on a day to day basis. She could not hold down a regular job, abused alcohol, was attracted to violent, abusive men and tried to meet her needs for care and nurturing by having one child after another. While her children's basic needs were met, the family was chaotic and there were numerous times when Jenny was clearly not coping and needed to have respite from her children.¹⁰

In the instance of Jenny's experience, clearly violence was a learned behaviour, however she did not enact upon the behaviour herself; because of a definite loss of self-esteem and a sense of 'learned helplessness' Jenny deliberately sought out relationships with violent men.

¹⁰ *Bringing Them Home*, p. 229.

Violence against females, however, is not only the domain of males. The following recollection shared by Aileen Wedge describes her assault on another woman:

They was all fighting who was going to bash Tiny up. Mummy was bashing her with the crutch. It was terrible – I couldn't even get a punch in. Mummy wouldn't let me have a go. She wanted to have a go. But I walked into the house first, see, and I punched her through the window. Smashed the glass and the glass cut her. We all go outside, and the police come then. I already had a fin on me. So I had a couple of months at Long Bay. It was better in jail than at home. You had to work, but they weren't so strict like at Parramatta. Get plenty of good food there, plenty to eat. Only thing I didn't like was night-time when they lock you in the cell.

Aileen Wedge.¹¹

Aileen had lived a very difficult and problematic youth. In and out of various homes and she was even committed to a mental hospital. Clearly, as her narrative shows, Aileen, as well as her other family members, were suffering from some fairly serious anger issues. As we have seen throughout this thesis, and within numerous testimonies, and narratives, child removal severely disrupted traditional family norms and practices. For Aileen, she clearly lost the ability to function within society both physically, and emotionally. We have also seen that through the passing

¹¹ Cited in Read, *A rape of the soul so profound*, p. 14.

on of inter-generational trauma, generations following those that were removed also suffer. Aileen also had her child removed from her by her mother, because her mother was afraid that she would harm her child. How though can we explain these very obvious link between violence, anger and alienation?

Reijntjes and colleagues explain that a number of theories have been suggested for the link between alienation and violence. For one, it is argued that 'perceptions of exclusion by mainstream society lead people to reject societal norms that inhibit aggressive behaviour, thereby releasing the more instinctual and impulsive tendency to aggress.' Alternatively they also suggest another possible theory in which feelings of alienation and a lack of healthy interactions with friends, family, and peers 'impose a severe threat to basic human needs, including needs for belonging, self-esteem, self-control, and meaningful existence. Such thwarted needs likely yield significant feelings of frustration, which, in turn, increase the likelihood of aggression.'¹²

As we have seen in the narratives included within this section, removal and feelings of alienation have had a direct influence on violent events in the narrator's lives, whether it was through violence they enacted themselves, or whether the violence was forced upon them.

Crime

Approximately six per cent of Aboriginal Australian men between the ages of 25 and 30 are incarcerated at any one time, and it is claimed that

¹² Albert Reijntjes, Sander Thomaes, Brad J Bushman, Paul A. Boelen, Bram Oobio de Castro, Michael J Telch, 'The Outcast-Lash-Out Effect in Youth: Alienation Increases Aggression Following Peer Rejection', in *Psychological Science*, 21 (2010), p. 1394.

'each year up to a quarter of all young Aboriginal men have direct involvement with correctional services.'¹³ These figures when added to those mentioned above from Broadhurst, paint a description of a very serious, and ever increasing issue for Aboriginal men and Aboriginal communities. Studies quoted by Wijesekere showed a startling growth in Aboriginal incarcerations over a ten year period. 2140 Indigenous Australian adults, were serving a prison sentence in 1991; by 2001 it had increased to 4445, which was an increase of over 107 per cent.¹⁴ Over these same eleven years, non-Indigenous rates of incarceration increased also, however it was only by forty per cent.¹⁵

As Steve Hemming so aptly points out, from as early as 1788 the non-Indigenous state attempted to take charge of Indigenous Australians, and the police and jail, according to Hemming, have been integral to this. In this section I will examine the testimonies and narratives of Aboriginal Australians for evidence of how their removal as children influenced their criminal activity in their adult lives. The Royal Commission into Black Deaths in Custody, as Hemming further elaborates, clearly emphasised how non-Indigenous organisations have been instrumental in the 'oppression' of Indigenous Australians. 'Policies of protection, segregation and assimilation', he argues, 'have been applied to Aboriginal people by Australian governments and resulted in inhuman practices such as the removal of children from parents.'¹⁶ This section of Chapter Four

¹³ Anthea S. Krieg, 'Aboriginal incarceration: health and social impacts', *Medical Journal of Australia*, 184, 10 (2006), p. 534.

¹⁴ Gaminiratne Wijesekere, 'Incarceration of Indigenous and non-Indigenous adults, 1991-2001: trends and differentials,' *Australian Aboriginal Studies*, 2, (2004), pp. 56.

¹⁵ *Ibid.*,

¹⁶ Steve Hemming, 'Changing History: New Images of Aboriginal History', in *Aboriginal Australia: An Introductory Reader in Aboriginal Studies*, 2nd edn., eds. Colin Bourke, Eleanor Bourke, Bill Edwards (St. Lucia: University of Queensland Press, 1998) p. 31.

will examine Indigenous narratives and testimonies for evidence of criminal activity and how they viewed their own behaviour and incarceration. Before beginning my examination of narratives, I will first discuss The Royal Commission into Black Deaths in Custody.

The Royal Commission into Black Deaths in Custody

Prior to the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from The Families, the influence that child removal had on Aboriginal incarceration numbers was already widely acknowledged, due to the Royal Commission into Black Deaths in Custody.¹⁷ In fact, as Chris Cunneen claims, 'The Royal Commission laid the groundwork for the Stolen Generations Inquiry in that it showed conclusively the historical and contemporary importance of forced removals, the nature of the removal process and the long term individual and social effects.'¹⁸ The findings of The Royal Commission were so significant that it still influences government policies concerning Aboriginal Australians and criminal justice.¹⁹

The Commission itself was established in 1987 as concerns grew over the number of Aboriginal deaths in jail. In the period between January 1980 and May 1989 ninety-nine Aboriginal and Torres Strait Islanders died in custody; eighty-eight were male, and eleven were female.²⁰ It also found

¹⁷ Herein referred to as The Royal Commission. A comprehensive summary of The Royal Commission is impossible here, however refer to the following footnotes for further reading.

¹⁸ Chris Cunneen, 'Assessing the outcomes of the Royal Commission into Aboriginal Death in Custody', *Health and Sociology Review*, 10, 2 (2001), p. 61.

¹⁹ Elena Marchetti, 'The Deep Colonizing Practices of the Australian Royal Commission into Aboriginal Deaths in Custody' *Journal of Law and Society*, 33, 3 (Sept., 2006), p. 453.

²⁰ The Royal Commission into the Black Deaths in Custody, 'National Report Volume One - 1.1.1 - 1.1.2', *Indigenous Law Resources: Reconciliation and Social Justice Library*,

that roughly half of the Aboriginal prisoners that died in custody were removed as children, and for the most part, those that died had had multiple encounters with the justice system.²¹

Interestingly, as with the figures for alcohol use among Aboriginal peoples and white Australians discussed in Chapter Three, Aborigines are far less likely to commit serious crimes, instead, statistics show that Indigenous Australians are more likely to commit minor crimes and offences, and be incarcerated more frequently during 'longer criminal careers' than their non-Indigenous counterparts.²² The following testimony is just one example taken from the *Bringing Them Home* report, provided by an Aboriginal prisoner speaking about his life spent in, and out of, detention facilities and institutions, and the familiar faces of his fellow inmates:

And every time you come back in it doesn't bother you because you're used to it and you see the same faces. It's like you never left, you know, in the end.
Confidential evidence 204, Victoria.²³

Taking this into consideration, what factors then drive Indigenous Australians into the committing of crimes? In order to understand these contemporary issues, as I have argued throughout the thesis, we must first examine the historical contexts. She Athena Krieg states that:

A culturally responsive health perspective allows us to hear what Aboriginal people have been telling us for a long time – that patterns of criminal behaviour are often an expression of the deep

<<http://www.austlii.edu.au/au/other/IndigLRes/rciadic/national/vol1/7.html>>[accessed 11 February 2012]

²¹ Cunneen, 'Assessing the Outcomes of The Royal Commission..', p. 54.

²² Broadhurst, p. 410.

²³ *Bringing Them Home*, p. 191.

wells of pain, anger and grief experienced by Aboriginal people on a daily basis as a consequence of their long history of dispossession in this country. Forced separation through incarceration intensifies this, creating a further marginalised and destabilised young Aboriginal population and placing added burdens, both financial and social, on the individuals and on Aboriginal women and children.²⁴

Aboriginal crime, and over-representation is then, as Martin Hinton quotes, 'not an "Aboriginal problem; instead it is one of professional accountability and of non-Aboriginal criminal justice methods and processes"'.²⁵ The published narratives are an excellent source of evidence for helping us to look at how Indigenous people themselves view their current position as a result of their pasts.

Dr Elizabeth Sommerlad surveyed the Aboriginal Legal Services in the 1970s, and concluded that feelings of alienation from both white communities and Aboriginal cultures was the key underlying issue for the group of people which she surveyed.²⁶ The following testimony lends truth to this statement.

It did lead to a career in crime in which, to me, well, it wasn't the crime that turned me on, even though I was successful at it. It was getting back at society. It was kicking `em, y'know? It wasn't the crime, it was

²⁴ Krieg, p. 535.

²⁵ Lincoln and Wilson (1994) cited in Martin Hinton, 'Sentencing and Indigenous Australians – Addressing Over-representation from Within the Criminal Justice System', in *Indigenous Australians and The Law*, eds. Elliot Johnston QC, Martin Hinton, and Daryle Rigney, (Sydney: Cavendish Publishing, 1997), p. 113.

²⁶ *Bringing Them Home*, p.190.

the fact that, well, I'm going to pay back now for 20 odd years. Now, I served something like 5 years in the prisons, not because I wanted to be a criminal, but because I didn't know where I was, I didn't know who I belonged to.

Confidential evidence 354, South Australia.²⁷

This above informant was fostered in the 1950s from the age of two. He was put in a reformatory at the age of 14. His story shows that the pain of his removal from his family lead him to rebel against the ones that had inflicted the most hurt upon him. He also explicitly states the fact that he 'didn't know who he belonged to', and it was also this alienation from his own people and community that drove him into crime. If feelings of alienation are indeed at the root of Aboriginal crime, and, as I have maintained throughout this thesis, feelings of alienation from Aboriginal culture and identity are directly linked to child removal policies, removal and/or institutionalisation of Aboriginal children must then be rooted in the prevalence of Aboriginal crime.

George Bloomfield, a youth health worker, was removed from his family as a young child. In the narrative below, he shares how the unresolved issues from his past led to him acting out in an illegal fashion as a young adult. He also shares in this passage about the discussion he had with his parole officer that made him reconsider his lifestyle choices:

That's when my whole life sort of changed from there because I thought ... because I remember her actually sitting down and... getting really aggro, and

²⁷ *Bringing Them Home*, p. 190.

she turned around and she ripped it up and she said, 'George, you've basically assaulted a parole officer. You've not reported for three or four months, except the last before, when you first got out. You just basically ignored us,' and they actually put me through all these. 'All the things you've done,' she said, 'You should've been put back in over a year ago. You've ignored everything we ever told you. Why do you think you're still out? It's just because we're trying to help you here'...I thought about that, I really thought. Then I thought to myself, really, I was the problem, right. Then I said to her, 'Well, what do I do?'...She took an interest in me. She said, 'Let's go back'.

Then I remember what she said when we started talking about my mother, I'd never talked about my mother in my life. I'd never break. That's the first time I ever broke down...she told me and I never forgot what she said, she goes, 'George, all that anger in there, that's that little boy inside that got hurt 25 years ago'. She told me, she said, 'And that's what's coming out of you'...I was blaming the whole world for what happened to me and I knew I had to change my life...and I knew I didn't want to go back to gaol, I said, 'I had to change'. That was the bottom line. So, yeah, I was 22 and it wasn't until I was about 27 when I finally was content with my life.

George Bloomfield.²⁸

This piece of testimony below, not only describes feelings of alienation but shows that he also blames the non-Aboriginal homes that he lived in and the different treatment that he and his three siblings received as a children as the cause of his problems:

I reckon all my troubles started when I was living in them homes. That's when I first started stealing because you wasn't allowed to have anything and if I wanted something the only way I could get it is get it off someone else, get me brother or sister to buy it or just take it. We were sort of denied everything we wanted, just got what we was given and just be satisfied with that. I felt second-rate. I didn't feel like I got the love I was supposed to get; like a kid's supposed to get at that age, because they're more vulnerable at that age. They just follow people that seem to look more after them. That's why I got in with the wrong crowd, I suppose. They seemed to care more.

Confidential evidence 146, Victoria.²⁹

Dr Sommerlad's survey further emphasises this point:

Officers attached to the services in Sydney, Melbourne and Darwin maintained that a large majority of clients seeking legal aid for criminal offences have a history of institutionalisation, repeated

²⁸ In 'On-going Business: Reflections on Past Methods, Thoughts for the Future', *Many Voices: Reflections on experiences of Indigenous child separation*, edited by Doreen Mellor and Anna Haebich, Canberra: National Library of Australia, 2002), pp. 221-222.

²⁹ *Bringing Them Home*, p. 191.

fosterings or adoption by white families ... their assertion is a reflection of the perception aboriginal officers have of the deleterious effects of removal from the support of the aboriginal community.³⁰

The Australia Law Reform Commission has also provided input on the higher numbers of Aboriginal crime, and using Sommerlad's findings in their 1982 report, they were able to conclude that while it is difficult to certify for certain that the prevalence of Aboriginal youth in corrective facilities, and of Aboriginal adults in prisons is directly linked to them being removed to care institutions as children, 'there is a link between them that has often been asserted and seems undeniable.' As examples they show that in Victoria, ninety per cent of the clients asking for assistance with criminal charges from the Aboriginal Legal Service had as children lived in some type of alternative caring arrangement (either being placed in an institution, fostered or adopted. In New South Wales, the figure ranges between ninety and ninety five per cent.³¹ Research from three years earlier showed similar outcomes. The findings showed that in 1979 there were between fifty to sixty Aboriginal youths (both male and female) entering corrective institutions every year, and that the rates had remained steady over a span of four years. The report also showed that one-third of those youths placed in the corrective facilities due to delinquent behaviour were a part of a white family's adoption or fostering that had failed. An additional third of the Aboriginal youths under the custody of corrective facilities have lived or spent time in child institutions.³²

³⁰ *Bringing Them Home*, p. 190.

³¹ As cited in *Bringing Them Home*, p. 190.

³² As cited in *Bringing Them Home*, p. 191.

The final narrative for this chapter has been taken from the story of Bill Simon. In it he describes a portion of his criminal career, and more particularly his time spent in jail. He claims that he was very lucky having his cousin Boxy in prison to look after him, so again we see another instance of how having a familiar face can be comforting for the narrator. Bill also compares his prison to his time at Kinchela, and he states that his time in prison was far better than his time in the Boys Home.

Later in my life I would spend much more than four days in Long Boy. In total I would spend five years in jail. In 1979 I was sentenced to three years for armed robbery and I did other stretches that amounted in total to another two years. My cousin Boxy and I had plenty of time to catch up when we were in jail together at various times. Thankfully, he showed me the ropes and kept a close eye on me. He told the other prisoners that they'd better leave me alone or else, and so no-one harmed me while I was there.

I remember at the time thinking that being in jail wasn't so bad. The men in jail had it a lot better than we did back in the Home. Once again I had a number, but there was much more freedom and the guards were less harsh.³³

³³ Simon et. al., p. 68.

Using the narratives and testimonies in the way that they have been within this chapter, and throughout the thesis, has revealed some rather emotional, and startling experiences, clearly highlighting the significance of published narratives as pieces of historical evidence. The narratives and testimonies within this chapter have clearly shown that for the narrators and informants, being removed as children and the alienation and mental health issues that followed as a consequence, has directly influenced their criminal behaviour. Additionally, as some of the narratives showed in the first section of this chapter, a learned sense of helplessness led the ongoing suffering of abuse against them from their husband and partners.

Conclusion

The telling of our story, I think it's a release for us too, to tell. Because when you tell a story in an Aboriginal way, if you have a bad dream, you release the badness about it.

Sean Garlett.¹

This thesis has shown, using the published narratives of Indigenous Australians, that Aboriginal and Torres Strait Islanders feel that as a result of nineteenth- and twentieth-century child removals, they have been left in a significantly vulnerable state of physical, mental, and social well-being. Although we cannot deny the effects of the other consequences of colonisation, such as the introduction of diseases, frontier violence, dispossession, and racial intolerance, it is undeniable that practices of child removal and separation have had a devastating effect on Indigenous health in Australia.

In Chapter One, I discussed the theme of alienation as a result of child removal. This chapter showed that traditional Aboriginal family practices which revolved around the involvement of an entire kinship group in the upbringing of a child, were deemed by non-Indigenous on-lookers as 'unhealthy'. Furthermore, as interaction between colonisers and Indigenous people increased, so too did the number of inter-racial sexual relations - most prominently between non-Indigenous males and Aboriginal females. The resultant mixed-blood children became a

¹ In Karen George, 'Responses to the Interview Experience: 'I didn't think my little story would be so big'', in *Many Voices: Reflections on experiences of Indigenous child separation*, eds. by Doreen Mellor and Anna Haebich, (Canberra: National Library of Australia, 2002), p. 17.

growing concern for colonial interlopers, and by the nineteenth century state governments began to take statutory action to control the movements of Aboriginal Australians, and the placement of mixed-blooded children in an attempt to, as Russell McGregor put it, 'breed out the colour'.² The resulting practices of child removal across Australia created substantial feelings of alienation, and cultural confusion in the children that were taken away. As the narratives in this chapter showed, a number of Indigenous children that were removed felt a great sense of shame, and lack of belonging in both the white world that they were trained to live in and the Aboriginal world that they were born in. Additionally, in traditional Aboriginal societies, every member of the family, kinship group, and tribe had their own role to play ensuring each member of the tribe had a real sense of purpose. Removal policies and displacement removed Indigenous Australians from their cultural homeland and significantly disrupted tribal responsibilities, and practices of *holding*.

Using the theme of alienation as a key foundation, Chapter Two explored the links between alienation and mental illness. As with the previous chapter, using published narratives, this chapter showed that many of those that were removed as children linked their removal to their current mental health issues. Discussing three key issues within the broader theme of mental illness – Trauma, Post-Traumatic Stress Disorder and Depression; Suicide; and Inter-Generational effects, this chapter investigated how alienation has influenced (both directly and indirectly) these above mentioned key mental health issues. Trauma, as this chapter showed, has become a significant aspect of Stolen Generations discourse, and the effects of trauma had further reaching consequences for not only

² McGregor, p. 286.

those that were removed but their families also. Often, as seen in the sources, the depression, anxiety, and anger that were the results of child removal and alienation were passed on to the following generation, or in the case of Bill Simon, it was his wife bore the brunt of his unresolved issues. Ultimately, linking mental health back to the larger picture of Aboriginal physical health, this chapter concluded with a point raised by Mike Adams that for many Indigenous Australians, their depression and anxieties often prevent them from seeking out the assistance for other medical issues, creating a spiral of poor physical health and general wellbeing.

The use of statistical data showed that despite the fact media reports in Australia emphasise Indigenous use and abuse of alcohol, Aboriginal and Torres Strait Islanders are less likely to drink alcohol than their non-Indigenous counterparts. Unfortunately however, further statistics, and Indigenous narratives and testimonies, show that excessive consumption of alcohol is still a very serious issue within Aboriginal communities. This chapter also displayed a significant link between mental illness and the use of alcohol for its numbing effect. As the testimonies and narratives showed, for a number of those that were removed, they were left as adults with feelings of deep sadness, depression, anxiety, and having to deal with unresolved issues resulting from sexual and physical abuse, isolation and alienation. These feelings often lead to excessive consumption of alcohol and other substances in an attempt to mask or forget their trauma and the lingering emotional, and psychological issues that the trauma created.

As shown in the final chapter, violence, crime, and criminal activity is an increasingly prominent issue within Aboriginal communities. Similar to

the prevalence of alcohol consumption, Indigenous Australians are less likely to commit serious crimes, however they are more likely to commit numerous smaller crimes over a lengthier criminal career. For some, as the narratives showed, the committing of crime was an act of rebellion, for others, life inside of prisons was nothing new to them. In fact in the case of one particular informant included in *Bringing Them Home*, the familiarity of the many of the faces in prisons was almost comforting. In the beginning of Chapter Four I also included a discussion of violence, particularly domestic violence. In Chapter Three I included a narrative shared by Eleanor Harding and employee for the Department for Community Services. She claimed that because of a rise in alcohol and drug abuse, community violence and violence within the home has also increased. Additional narratives contained within Chapter Four further emphasised her point, highlighting the significant link between alcohol consumption, and violence, and taking these links one step further, back to alienation, anger, unresolved issues, and mental illness.

Published Indigenous narratives, as this thesis has shown, are highly significant and under-analysed sources for investigating the poor health status of Aboriginal and Torres Strait Islander people. Additionally, using these sources as a lens for viewing Indigenous health from the perspective of Indigenous Australians opens up new ground for research in the field of Aboriginal history, and further contributes to historical debates about the Stolen Generations and the on-going contemporary social and cultural issues resulting from these removals. Further examination of the numerous published Indigenous narratives, life stories, auto-biographies, and testimonies from commissioned inquiries, such as the inquiry behind *Bringing them Home*, for themes other than those contained within this thesis, was not possible in a piece of research this length. However, this

thesis does open the way for new and more extensive investigations examining additional published narratives for evidence of further themes outside of the scope of 'health' histories and research, for example, poor education levels, and poor housing.

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