

Janeen Baxter · Jack Lam · Jenny Povey ·
Rennie Lee · Stephen R. Zubrick *Editors*

Family Dynamics over the Life Course

Foundations, Turning Points and
Outcomes

OPEN ACCESS

 Springer

Life Course Research and Social Policies

Volume 15

Series Editors

Flavia Fossati, Bâtiment IDHEAP, Quartier UNIL-Mouline,
Lausanne, Switzerland

Andreas Ihle, University of Geneva, Geneva, Switzerland

Jean-Marie Le Goff, LIVES, Batiment Geopolis, University of Lausanne,
Lausanne, Switzerland

Núria Sánchez-Mira, Bâtiment Géopolis, Quartier UNIL-Mouline,
Lausanne, Switzerland

Matthias Studer, NCCR Lives, University of Geneva, Genève, Geneve,
Switzerland

The book series puts the spotlight on life course research. The series publishes monographs and edited volumes presenting theoretical, methodological, and empirical advances in the study of the life course, thereby elaborating on possible implications for society and social policies applications. Topics appropriate for the series include, among others, the following: *Life Course Research and Social Policies*

- Life course transitions and trajectories in the domains of education, employment, family, health, and migration
- The dynamic of stress and resources over the life course
- Accumulation of (dis)advantages and social inequalities
- Social and individual vulnerabilities
- Social networks development and change
- Personality and identity development
- Ageing
- Longitudinal methods of analysis
- Social policies' regulation of the life course

Books commissioned for the series aim to encourage debates on life course research in various countries and regions across the world. Volumes in this series will be of interest to researchers, professionals and policy makers in social sciences and related fields.

The series is edited by a team of scholars affiliated to the Swiss LIVES Centre: Flavia Fossati (UNIL), Andreas Ihle (UNIGE), Jean-Marie Le Goff (UNIL), Núria Sánchez-Mira (UNIL) and Matthias Studer (UNIGE).

If you are interested in filling a gap in coverage, providing a focus on a certain area, or contributing a new perspective or approach, we would be delighted to receive a book proposal from you. The book proposal should include a description of the proposed book, Table of Contents, unique or special features compared to competing titles, anticipated completion date, and CV with brief biography. The book proposal can be sent to the publisher, Evelien Bakker, at evelien.bakker@springer.com.

Janeen Baxter • Jack Lam
Jenny Povey • Rennie Lee • Stephen R. Zubrick
Editors

Family Dynamics over the Life Course

Foundations, Turning Points and Outcomes

 Springer

Editors

Janeen Baxter
Australian Research Council Centre
of Excellence for Children and Families
over the Life Course, Institute for Social
Science Research
The University of Queensland
Brisbane, QLD, Australia

Jack Lam
Australian Research Council Centre
of Excellence for Children and Families
over the Life Course, Institute for Social
Science Research
The University of Queensland
Brisbane, QLD, Australia

Jenny Povey
Australian Research Council Centre
of Excellence for Children and Families
over the Life Course, Institute for Social
Science Research
The University of Queensland
Brisbane, QLD, Australia

Rennie Lee
Australian Research Council Centre
of Excellence for Children and Families
over the Life Course, Institute for Social
Science Research
The University of Queensland
Brisbane, QLD, Australia

Stephen R. Zubrick
Australian Research Council Centre of
Excellence for Children and Families over
the Life Course, Telethon Kids Institute
University of Western Australia
Perth, WA, Australia



ISSN 2211-7776

ISSN 2211-7784 (electronic)

Life Course Research and Social Policies

ISBN 978-3-031-12223-1

ISBN 978-3-031-12224-8 (eBook)

<https://doi.org/10.1007/978-3-031-12224-8>

© The Editor(s) (if applicable) and The Author(s) 2022. This book is an open access publication.

Open Access This book is licensed under the terms of the Creative Commons Attribution 4.0 International License (<http://creativecommons.org/licenses/by/4.0/>), which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons license and indicate if changes were made.

The images or other third party material in this book are included in the book's Creative Commons license, unless indicated otherwise in a credit line to the material. If material is not included in the book's Creative Commons license and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder.

The use of general descriptive names, registered names, trademarks, service marks, etc. in this publication does not imply, even in the absence of a specific statement, that such names are exempt from the relevant protective laws and regulations and therefore free for general use.

The publisher, the authors, and the editors are safe to assume that the advice and information in this book are believed to be true and accurate at the date of publication. Neither the publisher nor the authors or the editors give a warranty, expressed or implied, with respect to the material contained herein or for any errors or omissions that may have been made. The publisher remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

This Springer imprint is published by the registered company Springer Nature Switzerland AG
The registered company address is: Gewerbestrasse 11, 6330 Cham, Switzerland

Acknowledgements

This collection draws on research undertaken for the Australian Research Council Centre of Excellence for Children and Families over the Life Course (Life Course Centre). The Life Course Centre is a multidisciplinary, multi-partner collaborative research centre designed to investigate the transmission of social disadvantage over the life course and across generations and to provide evidence and solutions to reduce it. The Centre is a collaboration across four universities in Australia: The University of Queensland, the University of Sydney, the University of Western Australia and the University of Melbourne. Additionally, the Centre is partnered with experts in several international universities, as well as key government and non-government agencies in Australia working to design and deliver policies and programs to mitigate social disadvantage. The Life Course Centre was initially funded in 2014 for a period of 7 years, and we were fortunate to receive funding for a further 7 years in 2020. We gratefully acknowledge the funding and support from the Australian Research Council Centre of Excellence for Children and Families over the Life Course (CE140100027 and CE200100025), as well as our partners and colleagues who have contributed to the research and evidence underlying this collection.

Each of the chapters uses recent, unique and high-quality Australian data. In many cases, the data are drawn from longitudinal surveys funded by the Commonwealth Government of Australia. These include: the *Household, Income and Labour Dynamics in Australia Survey*, conducted by the Melbourne Institute: Applied Economic & Social Research and funded by the Australian Government Department of Social Services; *Growing Up in Australia: The Longitudinal Study of Australian Children*, conducted in partnership by the Department of Social Services, the Australian Institute of Family Studies and the Australian Bureau of Statistics; *Footprints in Time: The Longitudinal Study of Indigenous Children*, initiated and funded by the Australian Government Department of Social Services; *Building a New Life in Australia: The Longitudinal Study of Humanitarian Migrants* survey conducted by the Australian Government Department of Social Services; and the *Longitudinal Survey of Australian Youth*, funded by the Australian Government Department of Education, Skills and Employment. We are very grateful to the data

managers, funders and participants in each of these studies and to the Australian government for their foresight and vision in building such a rich and diverse range of high-quality, publicly available longitudinal data assets for Australia. We hope that the analyses provided here will not only showcase the power of these data for answering critical scientific questions but also provide useful evidence for policy-makers and service providers working at the frontline to reduce social disadvantage in Australia.

The editors would like to particularly thank each of the chapter authors for generously agreeing to contribute their time and expertise to the volume. We are delighted with the quality of the chapters, the depth of the analyses and the coverage of life course stages reported here. We believe the chapters showcase some of the best Australian expertise in life course and longitudinal analyses, and we hope that readers will find the research engaging, informative and useful. The idea for this volume originally emerged at a Life Course Centre research retreat held in Perth, Western Australia, in 2019. As with all research ideas, successful execution requires a great deal of hard work and dedication, and we are grateful to our colleagues who stayed the course and to those who joined the project to ensure it could be delivered.

The editors were ably assisted by research and administrative support from Sarah-Ann Burger and Heidi Hoffman in the Institute for Social Science Research at The University of Queensland. We thank them both for their extremely valuable behind-the-scenes work on the volume and for helping to ensure its successful and timely completion. More broadly the Life Course Centre is supported by an exceptional team of professional staff that ensure the Centre operates seamlessly and productively across all of its many activities and commitments. All of the researchers in the Centre owe a huge gratitude of thanks to these staff for providing the strong foundations and governance on which we depend to successfully deliver our research.

We are very thankful to Springer, the series editors and our reviewers for their encouragement and support of our work. The opportunity to share our findings with colleagues across the globe is invaluable and highly rewarding. Portions of some chapters have appeared previously in publication and are used here with permission. We thank the publishers for permission to reuse selected material.

Finally, we are deeply indebted to our families and friends for their ongoing support and encouragement. As each of the chapters demonstrate, families and personal relationships provide the essential, often invisible, support and resources that enable goals and opportunities to be realised. This book is no exception. Our loved ones have helped in numerous ways to ensure we were able to produce this volume, and we thank them for their love and support in this and all of our endeavours.

Contents

1	Introduction	1
	Janeen Baxter, Jack Lam, Rennie Lee, Jenny Povey, and Stephen R. Zubrick	
2	Families, Life Courses and the Intergenerational Transmission of Social Disadvantage in Australia	17
	Rennie Lee, Jack Lam, Janeen Baxter, Jenny Povey, and Stephen R. Zubrick	
3	Early Years and Disadvantage: Matching Developmental Circumstances in Populations to Prevention and Intervention Opportunities	37
	Stephen R. Zubrick, Catherine Taylor, Daniel Christensen, and Kirsten Hancock	
4	Cultural Identity and Social and Emotional Wellbeing in Aboriginal and Torres Strait Islander Children	57
	Yaqoot Fatima, Anne Cleary, Stephanie King, Shaun Solomon, Lisa McDaid, Md Mehedi Hasan, Abdullah Al Mamun, and Janeen Baxter	
5	Refugee Children in Australia: Wellbeing and Integration	71
	Rennie Lee and Sin Yi Cheung	
6	Adolescence a Period of Vulnerability and Risk for Adverse Outcomes across the Life Course: The Role of Parent Engagement in Learning	97
	Jenny Povey, Stefanie Plage, Yanshu Huang, Alexandra Gramotnev, Stephanie Cook, Sophie Austerberry, and Mark Western	

7	Differences in Higher Education Access, Participation and Outcomes by Socioeconomic Background: A Life Course Perspective	133
	Wojtek Tomaszewski, Francisco Perales, Ning Xiang, and Matthias Kubler	
8	Emerging Adulthood in Australia: How is this Stage Lived?	157
	David C. Ribar and Clement Wong	
9	Labour Market Participation: Family and Work Challenges across the Life Course.	177
	Barbara Broadway and Guyonne Kalb	
10	Marriage Matters. Or Does It?	201
	Rennie Lee and Janeen Baxter	
11	Parenthood: Disrupting the Intergenerational Transmission of Social Disadvantage	223
	Kylie Burke and Cassandra K. Dittman	
12	Intergenerational Processes of Disadvantage in the Lives of Lesbian, Gay and Bisexual Australians: From Relationships with Parents to Parenting Expectations	251
	Alice Campbell and Francisco Perales	
13	Ageing and Loneliness: A Life Course and Cumulative Disadvantage Approach	279
	Jack Lam, Catherine Dickson, and Janeen Baxter	
14	Influencing Social Policy on Families through Research in Australia.	297
	Tim Reddel, Kelly Hand, and Lutfun Nahar Lata	
15	Emerging Directions and New Challenges	313
	Stephen R. Zubrick, Rennie Lee, Janeen Baxter, Jack Lam, and Jenny Povey	
	Index	321

Chapter 4

Cultural Identity and Social and Emotional Wellbeing in Aboriginal and Torres Strait Islander Children



Yaqoot Fatima, Anne Cleary, Stephanie King, Shaun Solomon, Lisa McDaid, Md Mehedi Hasan, Abdullah Al Mamun, and Janeen Baxter

Our identity as human beings remain tied to our land, to our cultural practices, our systems of authority and social control, our intellectual traditions, our concepts of spirituality, and to our systems of resources ownership and exchange. Destroy this relationship, and you damage – sometimes irrevocably – individual human beings and their health.

(Pat Anderson 1995)

The First Nations people of Australia comprise two similar but distinct traditional cultural groups—Aboriginal peoples and Torres Strait Islander peoples, with unique and rich cultural beliefs, practices and knowledge (Australian Institute of Aboriginal and Torres Strait Islander Studies, n.d.). Aboriginal and Torres Strait Islander peoples include all Indigenous people of the Australian mainland and Indigenous peoples of the island of Tasmania and the Torres Strait, a strait located in the northernmost extremity of the Australian mainland that connects with Papua New Guinea. In 2016, an estimated 798,365 Aboriginal and Torres Strait Islander peoples lived in Australia, representing 3.3% of the Australian population (Australian Bureau of

Y. Fatima (✉) · A. Al Mamun · J. Baxter

Australian Research Council Centre of Excellence for Children and Families over the Life Course, Institute for Social Science Research, The University of Queensland, Brisbane, QLD, Australia

e-mail: fatima.yaqoot@uq.edu.au; mamun@sph.uq.edu.au; j.baxter@uq.edu.au

A. Cleary · L. McDaid · M. M. Hasan

Institute for Social Science Research, The University of Queensland, Brisbane, QLD, Australia
e-mail: anne.cleary@uq.edu.au; l.mcdaid@uq.edu.au; m.m.hasan@uq.net.au

S. King · S. Solomon

Murtupuni Centre for Rural and Remote Health, James Cook University, Mount Isa, QLD, Australia

e-mail: stephanie.king1@jcu.edu.au; shaun.solomon1@jcu.edu.au

© The Author(s) 2022

J. Baxter et al. (eds.), *Family Dynamics over the Life Course*, Life Course Research and Social Policies 15, https://doi.org/10.1007/978-3-031-12224-8_4

57

Statistics, 2019). While acknowledging the diversity of Aboriginal and Torres Strait Islander cultures and identities across Australia, for this chapter, hereafter, we use Indigenous Australians as a collective term for describing both Aboriginal and Torres Strait Islander peoples.

Indigenous Australians have the longest, continuing and adapting culture in the world. For example, evidence of ritual burials dates cultural practices of Australian Aboriginals from 41,000 years ago, with other evidence dating Australia's Aboriginal occupation from over 60,000 years ago (Australian Human Rights Commission, n.d.). With over 250 languages and many hundreds of dialects, Indigenous Australian culture is diverse, vibrant and can be understood and expressed by different Indigenous Australians in different ways (Hampton & Toombs, 2013). Within this diversity reside core concepts such as family, kinship, relatedness and connectedness, which are the basis of Indigenous Australian world-views and the philosophy underpinning Indigenous Australian social organisation, cultural identity and cultural practices (Grieves, 2009). These concepts are highly consistent with a life course approach, as outlined in Chap. 2, that emphasises linked lives, the importance of family background, intergenerational connections, contextual and environmental influences, and the impacts of cumulative advantage and disadvantage over time.

As a result of European settlement, Indigenous Australians have suffered devastating loss of sovereignty and dispossession of lands, waterways and customary law, reduced access to their ancestral lands and intergenerational trauma (Sherwood, 2013). Consequently, ongoing disadvantage in education, employment, housing and health outcomes has contributed to appalling inequity in health and wellbeing outcomes between Indigenous and non-Indigenous Australians (Australian Institute of Health and Welfare, 2020). Nonetheless, despite the adverse impacts of colonisation, Indigenous Australians have demonstrated formidable cultural resilience in responding to historic and contemporary impacts of colonisation (Berry et al., 2010). There is growing recognition of the role of cultural identity in promoting positive health, social, educational and economic outcomes of Indigenous Australians (Roth, 2011). The emerging evidence strongly connects the health of an Indigenous person to the health of their family, kin, community, and their connection to Country, culture, spirituality and ancestry (Dudgeon et al., 2020). The Australian National Indigenous Reform Agreement also highlights the critical role of connection to culture for Indigenous Australians' emotional, physical and spiritual wellbeing (Steering Committee for the Review of Government Service Provision, 2019).

Understanding the potential protective role of cultural identity is particularly important when considering the health and wellbeing of Indigenous youth who have a disproportionately higher burden of poor health than their counterparts (Australian Institute of Health and Welfare, 2018; Dickson et al., 2019). The literature from various Indigenous communities worldwide highlights the positive impact of cultural identity on the health and wellbeing of Indigenous youth. For example, a strong sense of cultural connection is associated with reduced anxiety and

depression among Indigenous Sami youth from Arctic Norway (Bals et al., 2011), reduced suicidal ideation among American Indian youths (Yoder et al., 2006) and reduced suicide risk among Canadian Aboriginal youth (Chandler et al., 2003). Gee et al. suggest that strong culture builds resilience, facilitates life balance and offers protection against adverse life experiences for Indigenous children (Gee et al., 2014), which is particularly important in the changes in the transition from childhood to adolescence and increased vulnerability to poor mental health (Christensen et al., 2017).

Compared with the adult population, the role of cultural identity and mental health outcomes is relatively less explored in Indigenous Australian children (Salmon et al., 2018, Lopez-Carmen et al., 2019). This chapter aims to fill part of this knowledge gap. Utilising the Primary Carer responses to questions about cultural identity and social and emotional problems within the Longitudinal Study of Indigenous Children (LSIC), we explore the social-emotional wellbeing of Indigenous children in LSIC and assess to what extent cultural identity reduces their risk of social-emotional problems.

Cultural Identity for Aboriginal and Torres Strait Islander Peoples

Indigenous Australians have a unique physical and spiritual connection to a country/place with unique knowledge and belief systems. The literature on Indigenous Australian culture is vast and diverse, with multiple efforts to define this multi-faceted construct (Dockery, 2009). While the commonly used definitions of cultural identity are based on an individual's self-awareness or self-knowledge (Usborne & Taylor, 2010), the studies based on LSIC data defined cultural identity in terms of "children knowing and understanding who they were and where they were from" (Martin, 2017). However, there is no clear consensus within the literature on how to best measure cultural identity among Indigenous Australians. A recent literature review of descriptors of Indigenous Australian's cultural identity identified six broad, frequently cited cultural domains (Salmon et al., 2018):

1. Connection to Country.
2. Indigenous beliefs and knowledge.
3. Indigenous language.
4. Family, kinship and community.
5. Cultural expression and continuity.
6. Self-determination and leadership.

Within each of these domains exist sub-domains; for example, cultural expression and continuity contain identity, traditional practices, arts and music, community practices, and sport (Salmon et al., 2018). Other authors have explored the conceptualisation and measurement of Australian Indigenous cultural identity within the

context of the factors associated with connection to culture. For example, Dockery et al. used data from the 2002 National Aboriginal and Torres Strait Islander Social Survey to propose two broad dimensions of connection to culture: cultural identity (spoken languages, recognition of clan, tribal group or language group and recognition of homelands) and cultural participation (attendance at, or participation in, cultural and related social activities) (Dockery, 2009). Dockery used this conceptualisation and operationalisation of connection to culture to explore how the connection to Indigenous culture might shape Indigenous Australians' engagement with education and training (Dockery, 2011). Despite the nuances and diversity in defining cultural identity, there is a universal understanding that culture is core to identity and sense of self and what it means to be healthy and well for Indigenous Australians (Colquhoun, 2012).

The Longitudinal Study of Indigenous Children

The rich and unique data from LSIC (also known as Footprints in Time), a large cohort study of Indigenous children in Australia, offer an untapped opportunity to examine the link between cultural identity and social-emotional wellbeing in Indigenous children. The LSIC is a longitudinal study conducted by the Commonwealth Department of Social Services, Australia. Unlike the data examined in the previous chapter, which is a national longitudinal sample of all Australian children, LSIC focuses specifically on Indigenous children and was designed to provide a source of information on what helps Indigenous children to grow up strong and healthy. The study commenced in 2008, involving 1759 Aboriginal and Torres Strait Islander children aged 6–18 months at baseline (B cohort) and a cohort of children aged 3.5–5 years at baseline (K cohort) (Thurber et al., 2015). Participants were recruited through purposive sampling from 11 diverse sites across Australia, covering a wide range of socioeconomic status, rural and remote locations and cultural groups. During each annual follow up, a face-to-face survey was conducted with a parent or primary carer of the child (B and K cohort) and the child (K-cohort). So far, data for 11 waves of the LSIC cohort has been released.

In addition to sociodemographic, lifestyle and health-related variables, the LSIC dataset offers rich information on the cultural knowledge, cultural identity, extended family and community, and strengths of Indigenous culture. Further details on the study and methodology are provided elsewhere (Department of Families Housing Community Services and Indigenous Affairs, 2009; Dodson et al., 2012).

Since only wave 8 (2016) of the LSIC cohort captured data on cultural identity variables for children, this chapter is based on wave 8 of the cohort. In addition to cultural identity, wave 8 also collected data on social-emotional wellbeing and other key sociodemographic variables for children. Considering a meaningful understanding of cultural identity might be difficult for young children, we restricted the analysis to the older cohort (K cohort) of wave 8 (mean age 9.3 years (± 1.52)).

Key Variables

In the LSIC cohort, children's social and emotional wellbeing, our dependent variable, is determined by primary carer responses to the Strengths and Difficulties Questionnaire (SDQ) (Goodman, 1997). The overall score (range 0–40) is computed by summing scores across the first four subscales of the primary carer reported emotional symptoms, conduct problems, hyperactivity and peer problems, with a higher score indicating more social-emotional problems. Summed scores are grouped into three categories: normal, borderline and of concern. Children in the “of concern” category indicate a substantial risk of mental health problems. Based on the recommendations of the LSIC technical group, we used the SDQ cut-off ≥ 14 for dichotomisation (“normal/borderline” and “of concern”) to identify the children at risk of poor mental health (Thurber et al., 2019).

Cultural identity, one of our main independent variables, was based on the mean score of the following four items reported by the primary carer: (1) “Study Child (SC) feels good about being Indigenous in class”; (2) “SC wants to share things about being Indigenous in class”, “SC feels safe about being Indigenous in class” and “SC wants people in class to know that he/she is Indigenous. Each of these items was coded as “never”, “sometimes”, and “always.” Cultural knowledge, another key independent variable, was based on mean scores of the items exploring the child's knowledge of (1) clan/tribe, (2) their people and (3) family stories/history. Each of these items was coded as “Yes” or “No”.

Covariates

The selection of covariates was guided by previous evidence on the link between cultural identity and mental health of Indigenous people (Dockery, 2011, Colquhoun, 2012). Child-related covariates included gender and age. Weekly family income after deductions were reported by the primary carer and categorised as “less than \$399, \$400–\$599,” “\$600–\$999,” and “\$1,000 or more.”

Major life events were derived from the list of major events experienced by the family in the last 12 months. These events are not necessarily negative and can be any event in life with a significant impact on a person's wellbeing (Wilkins, 2012). In the LSIC cohort, some life events are related to the normal human life cycle, for example, births, deaths, and marriages, while others are related to external stressors such as the loss of a job, financial hardship, or social isolation. The 15 possible events covered in the LSIC data are: pregnancy, sickness, death, job loss, arrested or jailed or police problem, divorce, humbugged (harassed for money), mugged, robbed, assaulted, worries about money, alcohol or drug problems, child upset by family arguments, child scared by other people, child cared for by someone else for at least 1 week. Based on the LSIC technical group's recommendations, we used the cut-off ≥ 3 to dichotomise major life events (Thurber et al., 2019).

Geographical remoteness was measured using the Level of Relative Isolation (LORI) scale (Department of Health and Aged Care and the National Key Centre for Social Applications of Geographical Information Systems (GISCA) 2001). The LORI scale indicates the relative distance of families from population centres (coded as “none”, “low isolation”, “moderate isolation”, “high/extreme isolation”). Area-level disadvantage was measured using the Index of Relative Indigenous Socioeconomic Outcomes (IRISEO) scores. The IRISEO deciles are based on nine socioeconomic status measures (SES) such as employment, education, income and housing, and rank SES for an area in which an individual resides relative to other Indigenous Australians (Biddle, 2009). In the LSIC cohort, areas were categorised as having the “lowest (IRISEO 8–10),” “middle (IRISEO 4–7),” or “highest (IRISEO 1–3)” level of disadvantage.

Analyses and Results

Initial analyses examined basic descriptive statistics (for example, frequency, mean, standard deviation) to summarise information related to sociodemographic, cultural identity and social-emotional wellbeing. Regression analyses were subsequently used to identify factors associated with increased risk of social and emotional problems. The results of logistic regression models are reported as odds ratios (ORs) and 95% confidence intervals. A p-value of <0.05 was adopted as a significance threshold for statistical significance. However, it is worth mentioning that using $p < 0.05$ for statistical significance is merely a convention and should not be used reflexively to determine the size or importance of the observed effect (Baker, 2016). The interpretation of quantitative analyses should be based on a combined consideration of the conceptual framework, confidence intervals, p-value and sample size (Concato & Hartigan, 2016). All statistical analyses were undertaken using Stata IC 15.0 (Stata Statistical Software, College Station, Tx, USA).

As highlighted in Table 4.1, social and emotional wellbeing was explored in 498 Indigenous children (mean age 11.0 years, $SD \pm 0.51$). The majority of survey respondents were the mother of the child (83.2%). A significant proportion of the study participants identified as Aboriginal (88.9%), and the rest identified as Torres Strait Islander (6.1%) and both Aboriginal and Torres Strait Islander (4.9%). Approximately half of the sample was male (50.2%), 10% were living in extreme geographical isolation, and 18.8% of children were living in the most disadvantaged areas. Approximately one-quarter of the participants (24.3%) reported a family income of less than \$600/week. Nearly half (47.1%) of the study participants had experienced ≥ 3 major life events in the 12 months before their interviews. About one-third (30.3%) of study children had “of-concern” SDQ scores. The mean scores for cultural knowledge and cultural identity were 0.60 (± 0.36) and 1.70 (± 0.39), respectively, suggesting that, on average LSIC children had fairly high cultural knowledge and a strong sense of cultural identity.

Table 4.1 Distribution of sociodemographic, family and geographical area related variables in LSIC children (based on wave 8 data)

Variables	All participants n(%)	SDQ Scores		p-value**
		Normal/Borderline n(%)	Of concern *n(%)	
Age (mean ± SD)	11 yrs. (0.51)	11 yrs. (0.50)	11.03 yrs. (0.54)	0.457
Sex				
Male	251 (50.4)	163 (47.0)	88 (58.3)	0.02
Female	247 (49.6)	184 (53.0)	63 (41.7)	
Family income				
>\$1000/week	176 (39.9)	127 (41.9)	49 (35.0)	0.384
\$600–999/week	159 (35.8)	105 (34.7)	54 (38.6)	
<\$600/week	108 (24.3)	71 (23.4)	37 (26.4)	
Major life events				
No	264 (52.9)	194 (55.9)	70 (46.4)	0.05
Yes (≥ 3)	234 (47.1)	153 (44.1)	81 (53.6)	
Geographic remoteness				
None/low	388 (77.9)	261 (75.2)	127 (84.1)	0.08
Moderate	60 (12.0)	48 (13.8)	12 (8.0)	
High	50 (10.0)	38 (10.0)	12 (7.9)	
Area level disadvantage***				
Lowest disadvantage	92 (18.5)	62 (17.9)	30 (19.8)	0.646
Middle advantage	312 (62.7)	216 (62.2)	96 (63.6)	
Highest disadvantage	94 (18.8)	69 (19.9)	25 (16.6)	
Cultural knowledge (mean ± SD)	0.60 (0.36)	0.64 (0.35)	0.53 (0.38)	0.003
Cultural identity (mean ± SD)	1.70 (0.39)	1.74 (0.34)	1.60 (0.48)	0.001

Note: Increased risk of mental health issues,**significance level $p < 0.05$, ***Based on IRISEO deciles. Source: Longitudinal Study of Australian Children Wave 8, 2016

Cultural Identity and Social and Emotional Wellbeing in Indigenous Children

Results from regression analyses shown in Table 4.2 suggest that age, geographical isolation, and area-level disadvantage are not associated with social and emotional wellbeing in Indigenous children. However, there was a significant gender difference as females had lower odds of high social and emotional problems than their male counterparts. Children who experienced major life events (≥ 3) also had higher odds of social and emotional problems. In comparison, cultural knowledge and cultural identity seemed to play a protective role and reduced the odds of social and emotional problems. In multivariable analysis, even after controlling for socioeconomic disadvantages, the protective effect of cultural identity was still evident. High

Table 4.2 Association between cultural identity and poor social and emotional problems ('of concern' SDQ scores) in LSIC children (based on wave 8 data)

Variables	SDQ Scores 'of concern'			
	Unadjusted		Adjusted	
	OR	95%CI	OR	95%CI
Age	0.95	0.78–1.02	1.28	0.76–2.16
Sex				
Male (ref)				
Female	0.75	0.58–0.98	0.79	0.49–1.28
Family income				
>\$1000/week (ref)				
\$600–999/week	1.29	1.00–1.67	1.20	0.73–1.96
<\$600/week	1.48	1.05–2.09	1.85	1.00–3.43
Major life events				
No (ref)				
Yes	1.63	1.28–2.09	1.53	1.05–2.23
Geographic remoteness				
None/low (ref)				
Moderate/high	0.57	0.32–1.04	0.58	0.22–1.51
Area level disadvantage*				
Lowest disadvantage (ref)				
Middle disadvantage	0.87	0.66–1.16	1.02	0.61–1.70
Highest disadvantage	0.95	0.59–1.53	1.45	0.67–3.17
Cultural knowledge	0.67	0.49–0.93	0.50	0.30–0.85
Cultural identity	0.42	0.25–0.72	0.38	0.20–0.72

Note: Based on IRISEO deciles, significant associations ($p < 0.05$) are highlighted in bold. Source: Longitudinal Study of Australian Children Wave 8, 2016

scores on cultural knowledge (OR: 0.49; 95% CI: 0.28–0.88) and cultural identity (OR: 0.42; 95% CI: 0.22–0.79) were associated with significantly reduced odds of social and emotional problems in Indigenous children.

Discussion

These results suggest that a significant majority of the Indigenous Australian children that participated in LSIC are experiencing a high burden of social and emotional problems and are at increased risk of poor mental health. However, children with strong cultural identity and knowledge are less likely to experience social and emotional problems than their counterparts. The potentially protective effect of cultural identity further highlights the need for strengths-based approaches to reduce mental health issues in Indigenous children. Shifting from a deficit narrative to

capitalising on Indigenous culture as a strength can lead to better engagement, uptake, and delivery of mental health programs and achieve better outcomes for Indigenous children.

Cultural identity is a key factor affecting the health and wellbeing of Indigenous children, who, due to rapid changes in globalisation, colonial disruption and undermining of Indigenous cultures, face greater challenges in understanding their identity from past, present to future self. Many young Indigenous people's social interactions and experiences are affected by past and current social realities, including negative stereotyping, racism, and outlawing Aboriginal languages (Stoneham et al., 2014; Macedo et al., 2019). These negative experiences strongly affect self-worth and are linked with self-deprecation in young people (Wexler, 2009). However, through cultural strength and resilience, Indigenous people have contributed to better outcomes for their people. Having a strong cultural identity and knowledge helps young Indigenous Australians to make positive social connections with people in their family and broader community and feel a sense of belonging (Renshaw, 2019). In turn, this promotes resilience, enhances self-esteem, and protects from poor mental health, offering opportunities for living life to full potential (Dudgeon & Walker, 2010).

Similar to our results, evidence from other Australian studies also highlight the protective effect of cultural identity and cultural knowledge in improved health outcomes for Indigenous Children. For example, the Western Australian Aboriginal Child Health Survey reports that children whose carers were more fluent in an Aboriginal language had lower risks of emotional or behavioural difficulties (Zubrick et al., 2005). The work by Colquhoun et al. highlights that knowing their cultural heritage, background, language and connection to Country and community is integral to Indigenous children's sense of belonging and pride and helps them attain emotional strength to face challenges in life (Colquhoun, 2012). The 2008 National Aboriginal and Torres Strait Islander Social Survey findings highlight positive associations between cultural participation and cultural identity and perceived wellbeing, happiness and mental health (Dockery, 2011).

Studies from different Indigenous communities suggest that leveraging the strengths of Indigenous culture is a largely untapped opportunity for addressing Indigenous disadvantage (Dockery, 2020). The majority of the health programs still fail to recognise the strengths of Indigenous knowledge/culture and do not align with Indigenous people's needs and expectations, and therefore are inherently ineffective in Indigenous communities. The evidence has made it clear that health and wellbeing programs and services cannot be effective unless program/service planning, design and delivery are centred on cultural identity and cultural pride (Colquhoun, 2012, Australian Institute of Health and Welfare, 2013; Kingsley et al., 2013). Therefore, understanding how Indigenous youth connect with their culture and its application in mental health program design and delivery is crucial to addressing the growing trends of poor mental health in Indigenous youth.

Indigenous Australian culture is dynamic and continues to evolve and develop in response to historical and contemporary circumstances (Commonwealth of Australia, 2013). As highlighted by a life course approach children's lives are

shaped by the social environment in which they are born and raised. The ‘linked lives’ perspective is particularly relevant to the life course of Indigenous children, given the role of the family in children’s lives, social structures and vast kinship that are an important part of Indigenous children’s lives (Biddle, 2010). There is established evidence on intergenerational transmission of trauma experienced by elders and family members to Indigenous children leading to poor health and wellbeing outcomes (Australian Institute of Health and Welfare, 2019).

However, connection to family and kinship are also important sources of cultural knowledge and play a big role in strengthening cultural identity (Colquhoun, 2012). Children’s perceptions and understanding of cultural identity are strongly influenced by parents’ cultural knowledge sharing, their sense of Indigeneity, and the value of cultural heritage to them (Martin, 2017). Children’s understanding of cultural identity is also shaped by whether they live on Country (ancestral land), have opportunities to participate in cultural practices, spend time and maintain meaningful relationships with people in their family and wider community (Jackson-Barrett & Lee-Hammond, 2018). These opportunities are limited for children in out-of-home care who move further from their cultural identity and community (Richardson & Osborn, 2007). Therefore, for Indigenous children who need to be removed from their homes to protect them from harm, protecting and strengthening their cultural identities must be a key priority for child welfare services.

Indigenous children have significantly greater social and emotional problems, mental health issues, psychological distress and suicide rates than their counterparts (Priest et al., 2012, Department of Health, 2013). Identifying interventions and approaches that support better uptake and delivery of services is vital for improving Indigenous youth’s mental health outcomes. It is promising to see that policymakers are now recognising that interventions centred on cultural identity and connections are critical to improving Indigenous Australians’ health outcomes. Though non-random sampling and small sample size limit the generalisability of our findings, our results further support the long-awaited shift in the deficit narrative focus to a strengths-based discourse. Strong evidence on the role of cultural identity reinforces the need for interventions centred on Indigenous knowledge and leadership to offer effective solutions for improving the health and wellbeing of Indigenous people.

Conclusion

Reducing the gap in health and wellbeing between Indigenous and non-Indigenous Australians is a critical national priority. Unacceptably high rates of poor mental health and suicide in Indigenous people indicate that current health and wellbeing services that excessively focus on deficit correction fail to improve outcomes. Socioeconomic disadvantages are linked with varying levels of psychological distress in Indigenous Australian children. However, attachment with Indigenous culture, clan and community, and cultural identity are individual assets that contribute to the health and wellbeing of children, buffering the negative effect of disadvantage

in Indigenous children. Therefore, for better engagement and impact of health and wellbeing programs, policymakers and services providers must take a different approach and offer health interventions and services capitalising on the strengths of Indigenous culture and cultural identity.

References

- Australian Bureau of Statistics. (2019). *Estimates and projections, aboriginal and torres strait Islander Australians*. Retrieved July 07, 2021, from <https://www.abs.gov.au/statistics/people/aboriginal-and-torres-strait-islander-peoples/estimates-and-projections-aboriginal-and-torres-strait-islander-australians/latest-release>
- Australian Human Rights Commission. (n.d.). *Historical context – Ancient history*. Retrieved February 17, 2021, from <https://bth.humanrights.gov.au/significance/historical-context-ancient-history>
- Australian Institute of Aboriginal and Torres Strait Islander Studies. (n.d.). *Map of Indigenous Australia*. Retrieved July 10, 2021, from <https://aiatsis.gov.au/explore/map-indigenous-australia>
- Australian Institute of Health and Welfare. (2013). *Effectiveness of Indigenous social and emotional wellbeing programs examined in new reports*. From <https://www.aihw.gov.au/news-media/media-releases/2013/february/effectiveness-of-indigenous-social-and-emotional-w>
- Australian Institute of Health and Welfare. (2018). *Aboriginal and Torres Strait islander adolescent and youth health and wellbeing*. AIHW.
- Australian Institute of Health and Welfare. (2019). *Children living in households with members of the Stolen Generations*. AIHW.
- Australian Institute of Health and Welfare. (2020). *Indigenous health and wellbeing*. Retrieved September 12, 2020, from <https://www.aihw.gov.au/reports/australias-health/indigenousealth-and-wellbeing>
- Baker, M. (2016). Statisticians issue warning over misuse of P values. *Nature*, 531(7593), 151–151.
- Bals, M., Turi, A. L., Skre, I., & Kvermmo, S. (2011). The relationship between internalizing and externalizing symptoms and cultural resilience factors in Indigenous Sami youth from Arctic Norway. *International Journal of Circumpolar Health*, 70(1), 37–45.
- Berry, H. L., Butler, J. R., Burgess, C. P., King, U. G., Tsey, K., Cadet-James, Y. L., Rigby, C. W., & Raphael, B. (2010). Mind, body, spirit: Co-benefits for mental health from climate change adaptation and caring for country in remote Aboriginal Australian communities. *New South Wales Public Health Bulletin*, 21(5–6), 139–145.
- Biddle, N. (2009). Ranking regions – revisiting an index of relative indigenous socio-economic outcomes. *Australasian Journal of Regional Studies*, 15(3), 329–353.
- Biddle, N. Y. M. (2010). *Demographic and socioeconomic outcomes across the indigenous Australian lifecourse: Evidence from the 2006 census* (pp. 1–4). ANU Press.
- Chandler, M. J., Lalonde, C. E., Sokol, B. W., & Hallett, D. (2003). Personal persistence, identity development, and suicide: A study of Native and Non-native North American adolescents. *Monographs of the Society for Research in Child Development*, 68(2), vii–viii, 1-130; discussion 131–138.
- Christensen, D., Fahey, M. T., Giallo, R., & Hancock, K. J. (2017). Longitudinal trajectories of mental health in Australian children aged 4–5 to 14–15 years. *PLoS One*, 12(11), e0187974.
- Colquhoun, S., & Dockery, A. M. (2012). *The link between Indigenous culture and wellbeing: Qualitative evidence for Australian Aboriginal peoples* (CLMR discussion paper series 2012/01). Centre for Labour Market Research, Curtin Business School, Curtin University.
- Colquhoun, S. D. A. M. (2012). *The link between Indigenous culture and wellbeing: Qualitative evidence for Australian Aboriginal peoples* (CLMR discussion paper series 2012/1). Curtin Business School, Centre for Labour Market Research.

- Commonwealth of Australia. (2013). *National Aboriginal and Torres Strait Islander health plan 2013–2023*. Retrieved February 17, 2021, from [https://www1.health.gov.au/internet/main/publishing.nsf/content/B92E980680486C3BCA257BF0001BAF01/\\$File/health-plan.pdf](https://www1.health.gov.au/internet/main/publishing.nsf/content/B92E980680486C3BCA257BF0001BAF01/$File/health-plan.pdf)
- Concato, J., & Hartigan, J. A. (2016). P values: From suggestion to superstition. *Journal of investigative medicine: the official publication of the American Federation for Clinical Research*, 64(7), 1166–1171.
- Department of Families Housing Community Services and Indigenous Affairs. (2009). *Footprints in time: The longitudinal study of indigenous children (Key summary report from wave 1)*. Canberra.
- Department of Health. (2013). *Aboriginal and Torres Strait Islander suicide: Origins, trends and incidence*. Retrieved September 12, 2020, from <https://www1.health.gov.au/internet/publications/publishing.nsf/Content/mental-natsisps-strat-toc~mental-natsisps-strat-1~mental-natsisps-strat-1-ab>
- Department of Health and Aged Care and the National Key Centre for Social Applications of Geographical Information Systems (GISCA). (2001). *Measuring remoteness: Accessibility/Remoteness Index of Australia (ARIA)*. Commonwealth of Australia.
- Dickson, J. M., Cruise, K., McCall, C. A., & Taylor, P. J. (2019). A systematic review of the antecedents and prevalence of suicide, self-harm and suicide ideation in Australian Aboriginal and Torres Strait Islander Youth. *International Journal of Environmental Research and Public Health*, 16(17), 3154.
- Dockery, A. M. (2009). *Cultural dimensions of Indigenous participation in education and training*. Adelaide.
- Dockery, A. M. (2011). *Traditional culture and the wellbeing of Indigenous Australians: An analysis of the 2008 NATSISS*. Centre for Labour Market Research, Curtin University Perth.
- Dockery, A. M. (2020). Inter-generational transmission of indigenous culture and children's wellbeing: Evidence from Australia. *International Journal of Intercultural Relations*, 74, 80–93.
- Dodson, M., Hunter, B., & McKay, M. (2012). Footprints in time: The longitudinal study of indigenous children. A guide for the uninitiated. *Family Matters*, 91, 69–82.
- Dudgeon, P., Gibson, C., & Bray, A. (2020). *Social and emotional well-being: Aboriginal health in aboriginal hands. Handbook of rural, remote and very remote mental health*. Springer.
- Dudgeon, P., & Walker, R. (2010). *Working together: Aboriginal and Torres Strait Islander mental health and wellbeing principles and practice*. Commonwealth of Australia.
- Gee, G., Dudgeon, P., Schultz, C., Hart, A., & Kelly, K. (2014). Aboriginal and Torres Strait Islander social and emotional wellbeing. *Working together: Aboriginal and Torres Strait Islander mental health and wellbeing principles and practice*, 2, 55–68.
- Goodman, R. (1997). The strengths and difficulties questionnaire: A research note. *Journal of Child Psychology and Psychiatry*, 38(5), 581–586.
- Grieves, V. (2009). Aboriginal spirituality: Aboriginal philosophy, the basis of aboriginal social and emotional wellbeing. .
- Hampton, R., & Toombs, M. (2013). *Culture, identity and indigenous Australian people. Indigenous Australians and health: The wombat in the room* (M. T. Ron Hampton, Ed.) (pp. 3–23). Oxford University Press.
- Jackson-Barrett, E. M., & Lee-Hammond, L. (2018). Strengthening identities and involvement of aboriginal children through learning on country. *Australian Journal of Teacher Education*, 43(6), 1–20.
- Kingsley, J. T., Henderson-Wilson, M., & Bolam, C. B. (2013). Developing an exploratory framework linking Australian aboriginal peoples' connection to country and concepts of wellbeing. *International Journal of Environmental Research and Public Health*, 19, 678–698.
- Lopez-Carmen, V., McCalman, J., Benveniste, T., Askew, D., Spurling, G., Langham, E., & Bainbridge, R. (2019). Working together to improve the mental health of indigenous children: A systematic review. *Children and Youth Services Review*, 104, 104408.
- Macedo, D. M., Smithers, L. G., Roberts, R. M., Paradies, Y., & Jamieson, L. M. (2019). Effects of racism on the socio-emotional wellbeing of Aboriginal Australian children. *International Journal for Equity in Health*, 18(1), 132.

- Martin, K. L. (2017). *Culture and identity: LSIC parents' beliefs and values and raising young Indigenous children in the twenty-first century*. Indigenous Children Growing Up Strong: A Longitudinal Study of Aboriginal and Torres Strait Islander Families. M. Walter, Martin, K.L. Bodkin-Andrews, G. London, Palgrave Macmillan.
- Pat Anderson. (1995). *Priorities in Aboriginal health. Aboriginal health, social and cultural transitions*. Northern Territory University, Darwin, NTU Press.
- Priest, N., Baxter, J., & Hayes, L. (2012). Social and emotional outcomes of Australian children from indigenous and culturally and linguistically diverse backgrounds. *Australian and New Zealand Journal of Public Health*, 36(2), 183–190.
- Renshaw, L. (2019). *A positive sense of identity and culture*. Retrieved February 17, 2021, from https://www.aracy.org.au/publications-resources/command/download_file/id/397/filename/Full_report_-_A_Positive_Sense_of_Identity_and_Culture.pdf
- Richardson, N. B., & Osborn, L. A. (2007). *Cultural considerations in out-of-home care*. Retrieved July 19, 2021, from <https://earlytraumagrief.anu.edu.au/files/rb8.pdf>
- Roth, L. (2011). *Indigenous disadvantage: Can strengthening cultural attachment help to Close the Gap?* Retrieved September 12, 2020, from <https://apo.org.au/sites/default/files/resource-files/2011-10/apo-nid26855.pdf>
- Salmon, M., Doery, K., Dance, P., Chapman, J., Gilbert, R., Williams, R. & Lovett, R. (2018). *Defining the indefinable: descriptors of Aboriginal and Torres Strait Islander people cultures and their links to health and wellbeing*. Retrieved September 17, 2021, from https://openresearch-repository.anu.edu.au/bitstream/1885/148406/8/Defining_the_Indefinable_WEB2_FINAL.pdf
- Sherwood, J. (2013). Colonisation – It's bad for your health: The context of Aboriginal health. *Contemporary Nurse*, 46(1), 28–40.
- Steering Committee for the Review of Government Service Provision. (2019). *National agreement performance information 2018–19: National Indigenous reform agreement*. Retrieved February 17, 2021, from https://www.federalfinancialrelations.gov.au/content/npa/health/_archive/indigenous-reform/national-agreement_sept_12.pdf
- Stoneham, M., Goodman, J., & Daube, M. (2014). The portrayal of indigenous health in selected Australian media. *International Indigenous Policy Journal*, 5(5), 1–13.
- Thurber, K. A., Banks, E., & Banwell, C. (2015). Cohort profile: Footprints in time, the Australian longitudinal study of indigenous children. *International Journal of Epidemiology*, 44(3), 789–800.
- Thurber, K. W., Dunbar, J. T., Guthrie, J., Calear, A., Batterham, P., Richardson, A., Strazdins, L., Walter, M., & Lovett, R. (2019). *Technical Report: Measuring child mental health, psychological distress, and social and emotional wellbeing in the Longitudinal Study of Indigenous Children*. ANU.
- Osborne, E., & Taylor, D. M. (2010). The role of cultural identity clarity for self-concept clarity, self-esteem, and subjective well-being. *Personality and Social Psychology Bulletin*, 36(7), 883–897.
- Wexler, L. (2009). Identifying colonial discourses in Inupiat young people's narratives as a way to understand the no future of Inupiat youth suicide. *American Indian and Alaska Native Mental Health Research*, 16(1), 1–24.
- Wilkins, R. W. D. (2012). *Families, Incomes and Jobs, Volume 7: A statistical report on waves 1 to 9 of the Household, Income and Labour Dynamics in Australia Survey*. Melbourne.
- Yoder, K. A., Whitbeck, L. B., Hoyt, D. R., & LaFromboise, T. (2006). Suicidal ideation among American Indian youths. *Archives of Suicide Research*, 10(2), 177–190.
- Zubrick, S., Silburn, S. R., Lawrence, D., Mitrou, F. G., Dalby, R. B., Blair, E., Griffin, J., Milroy, H., De Maio, J. A., Cox, A., & Li, J. Z. (2005). *The Western Australian Aboriginal Child Health Survey: The social and emotional wellbeing of Aboriginal children and young people*. Curtin University of Technology and the Telethon Institute for Child Health Research.

Open Access This chapter is licensed under the terms of the Creative Commons Attribution 4.0 International License (<http://creativecommons.org/licenses/by/4.0/>), which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons license and indicate if changes were made.

The images or other third party material in this chapter are included in the chapter's Creative Commons license, unless indicated otherwise in a credit line to the material. If material is not included in the chapter's Creative Commons license and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder.

