

POLICY OPTIONS

Perspectives on childhood resilience among the Aboriginal community: an interview study

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Policy context

Aboriginal children are known to face greater adversities than non-Aboriginal children. Childhood adversities increase the likelihood of negative social and health outcomes that can disrupt normal development, burden families and continue into adulthood. However, despite the presence of adversity most Aboriginal children show positive outcomes, that is, they are resilient.

Research that investigates resilience can help health service providers and policy advisers to better understand the factors that help some Aboriginal children maintain positive outcomes despite experiencing challenging situations, while others do not. Positive outcomes such as regularly attending school, resisting drugs and alcohol, and displaying positive mental health are linked to desirable longer-term outcomes including stable employment, adult physical and mental health and the absence of criminal activity or suicidal behaviour.

The knowledge obtained through this research may be used to inform initiatives designed to enhance childhood resilience resulting in stronger, healthier and more resilient Aboriginal communities.

STUDY AIMS

- > To define resilience from an Aboriginal perspective
- > To identify factors that enhance Aboriginal children's resilience
- > To identify key strategies for programs to boost resilience in Aboriginal young people

Policy options

This study highlighted the significant adversity that Aboriginal children still face. Safe, stable and structured environments were believed to encourage resilience, as were programs involving community groups and parents that allowed Aboriginal children to develop better decision-making skills through greater self-esteem, and an awareness of positive ways of living. More availability of Aboriginal-led youth activities, including activities where children were able to set and achieve goals within a supportive environment can also help build resilience in young people.

Program development should take into consideration the fact that children and families experiencing multiple adversities are also more likely to face greater barriers to accessing health services such as lack of transport, wariness of services and lack of parental involvement. Programs that can identify and provide services for at-risk children at school or in out-of-home care comprise a potentially useful strategy for building resilience. Such health initiatives would benefit greatly from the input of the local Aboriginal Community Controlled Health Services, who have unique knowledge of their community, and who are likely to play an essential role in the identification of at-risk children. The availability of long-term, holistic and sustainable services was thought crucial to the success of programs designed to enhance resilience.

Options for policy include:

- > Increased services for Aboriginal parents that promote stable, healthy family environments
 - Target parent's mental health, drug and alcohol, parenting skills
- > Increased services for children in order to enhance resilience
 - Greater availability of youth activities (e.g. sporting, artistic and cultural groups)
 - Services that boost self-esteem, self-confidence, knowledge of and pride in Aboriginal culture, awareness of positive pathways
 - Mentoring programs
- > Improve service accessibility for Aboriginal families
 - No-cost, Aboriginal-led, culturally competent
- > Improve service sustainability
 - Reduce stop-start services
- > Provide more opportunities for resilient community members to transfer knowledge and act as positive role models for children

Key findings

Aboriginal community members believed childhood resilience is the ability to endure adversity with minimal disruption to normal development and social functioning, and the strength to choose positive behaviours in the face of challenging circumstances. While some participants felt resilience was an innate quality, they also believed resilience could be learned, or nurtured through positive interactions with family and community.

Resilience was thought to be fostered by sociocultural factors that instil a strong self-concept, connection to Aboriginal culture, the knowledge of positive behaviours and outcomes, and the desire and self-belief required to achieve these outcomes. However, resilience was not always viewed positively.

Some participants believed that many Aboriginal children were forced to develop resilience due to experiences of discrimination, inconsistent or disruptive parenting and poverty. Others felt that some children developed resilient facades that hid psychological trauma that may go unnoticed and untreated. Community programs that could augment positive family dynamics, or act as a potential buffer against negative or impoverished family environments were desired.

- > Aboriginal children continue to face high levels of adversity, within their families and communities, including the impacts of poverty, domestic violence, drug and alcohol problems, discrimination and bullying
- > Greater support for Aboriginal families can help raise resilient children

- Culturally appropriate services, including holistic, sustainable and accessible services that target parent's mental health and parenting practices
- > Children's positive decision-making during periods of adversity is aided by:
 - An awareness of positive pathways, provided by role models and social support
 - The self-belief and self-esteem that empower children to follow these pathways and resist poor decision-making in order to achieve valued, positive goals
- > Children's cultural identification promotes resilience and buffers against discrimination and negative stereotyping
- > There is a need for more sustainable, Aboriginal-led programs to identify at-risk children and provide safeguards during periods of familial adversity

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