Talking about health, wellbeing & disability in young people: an Aboriginal perspective

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OVERVIEW

• Background
• Objectives & Significance
• Methodology
• Summary

Image from ‘Two Mates’ by Melanie Prewett
The way we look at health...
Aboriginal people & disability

• In 2008, one-half of Indigenous adults had some form of disability (ABS, 2010)

• Around 8% of those aged 15 years or older having “profound or severe core activity limitation”

• In 2008, the proportion of profound or severe core activity restrictions among Indigenous people was slightly higher in remote areas (8.1%) than in non-remote areas (7.9%). (SCRGSP, 2011)
Aboriginal people & disability

• The 2008 National Aboriginal and Torres Strait Islander social survey (NATSISS) found that almost one-in-ten Indigenous children had an eye or sight problem (ABS, 2009)

• The Western Australian Aboriginal Child Health Survey (WAACHS) reported that almost one-fifth of Indigenous children had recurring ear infections (Zubrick et al., 2004)
Aboriginal people & disability

Disability as defined by the ABS is a ‘limitation, restriction or impairment which has lasted, or is likely to last, for at least six months and restricts everyday activities’.

Aboriginal perceptions of disability…

• Few studies purposefully research Aboriginal perceptions of disability
• Current literature – all adults perspectives
Aboriginal people & disability

- **No word** for disability
- Don’t see themselves as having a disability; or many **not aware** of disability
- Traditionally **not stigmatised**
- **No difference** between disability and health issues
- **Congenial disability** vs. accidents
- May be seen as *'special'* or a *'pay-back'* for a past wrongdoing
- **Visible conditions** more likely to be identified as a disability
- Only an issue if condition became a **handicap**

(Ariotti, 1999; Branson, 1992; McDonald, 2009; Mokak, 1997; O’Neill et al. 2004; Senior, 2000)
Aboriginal people & disability

- **Shame**
- Lack of independence may not be seen as a major issue in some Aboriginal communities if person **fulfil family and relationship obligations**
- Value **mobility** than upper limb function
- Responsibility of
  - **welfare**
  - a **family or community problem** (may not actively seek help)
  - **self**, demand no special attention or burden to community

(Clancy, 2002; McDonald, 2006; Maher, 1999; O’Neill et al. 2004; Regan, 2010; Strange, 2008)
Significance

• No literature on Aboriginality + disability + perspective of children and young people
Objectives

• Investigate the meaning of health, wellbeing and disability

• Explore facilitators and barriers

• Report on differences and similarities
Methodology

- Cultural consultants × 2
- Reference group × 4
- Ethics HREC & WAAHEC
- Yarning (Bessarab & Ng’andu, 2010)
- Consent from primary carers
- Access counselling service
- Audio-recorded, transcribed verbatim
- Thematic analysis with NVivo
Reference Group

Jonathan Ford

Rhonda Marriott

Michelle Sultan

Rachel Visser
Ethics

- Reciprocity
- Respect
- Equality
- Survival
- Protection
- Responsibility

National Health and Medical Research Council Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research
Yarning

Yarning supplemented with non-verbal expressions e.g. painting
Social yarning…

Supplemented with non-verbal expressions e.g. drawing

- Draw **self/family portrait** and describe yourself in three words
- **Timeline** of life

(Bagnoli, 2009; Mohajer, Bessarab & Earnest, 2009)
Research yarning…

- What does it mean to be healthy?
- What makes a good life?
- Who can help you live a good life?
- What stops you from living a good life?
- Tell me about this girl….
- What about this young bloke? Tell me about his life…
- What would be the hardest thing about his life?
- What would be the best about his life?
- What things or people do you think would help him have a good life?
- Picture yourself as this young bloke, how do you feel?
Participants

• 30 Noongar children and young people
• 10 to 25 years
• Purposive sampling, snowballing
• Perth, metro (possible rural inclusion)
• Without and with disabilities
  – Primary diagnosis of sensory or physical
Milestones

• Candidacy
• Ethics (HR 19/2012 & WAAHEC 424)
• Reference group, pilot yarning
• Recruitment, Yarning circles
• Analysis and dissemination
Summary

• Aboriginal youths’ view on disability
• 15 youths with disabilities
• 15 youths without disabilities
• Yarning method & thematic analysis
• Results to form recommendations to disability service providers
References

- Department of Health and Ageing (2010). *Working together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principals and Practice*’ Nola Purdie, Pat Dudgeon, and Roz Walker (eds), Canberra, ACT.