'Connecting the dots': The Role of Psychology in Indigenous Australia Keith R. McConnochie, The University of South Australia

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The dots are on the page. There is a lack of political will to join them up."

Relationships between Indigenous Australians and psychology have been the subject of a range of critical examinations over the last three decades, with psychology being characterised as an agent of colonialism, responsible for creating stereotypes of Indigenous Australians as primitive stone-age curiosities of low intelligence, designing education programs which have been directed at the destruction of Indigenous cultures, classifying Indigenous people as being mentally ill on the basis of culturally biased and inappropriate criteria, being actively complicit in the forced removal of Indigenous children from their families and failing to respond to the psychological distress caused by it.

While psychology has undoubtedly been involved in structuring relationships between Indigenous Australians and the broader Australian community, this involvement has typically been episodic, and has involved the application of psychological models to the confirmation and application of existing policies and practices rather than any sustained application of psychological theory to an analysis of the characteristics and effects of those policies. The lack of involvement of psychologists in Indigenous policy formulation or analysis is becoming increasingly significant given emerging evidence of the high levels of mental illness within Indigenous communities in Australia, the role of mental illness in contributing to the levels of social breakdown and violence within many Indigenous communities and the relative absence of coordinated strategies to overcome these problems.

The sources of these high levels of mental illness are described by Halloran (2004, n.p.)

There is little doubt that in real and symbolic terms, Australian Aboriginal culture has been traumatized by the 'European invasion'. There is also little doubt that Aboriginal Australians suffer a poor state of social, psychological and physical health reflecting a general state of anxiety. ... there is strong

evidence to support the relationship between cultural destruction, cultural trauma, and the situation of Aboriginal people today.

Three major national reports during the early 1990s (The Australian Royal Commission Into Aboriginal Deaths In Custody National Report, 1991; the Human Rights & Equal Opportunity Commission's report on Human Rights and Mental Illness, 1994; and Swan & Raphael's 1995 "Ways Forward" report into Aboriginal and Torres Strait Islander Mental Health) identified the extent, nature and debilitating consequences of mental health issues within Indigenous communities. In the "Ways Forward" report it was noted that;

... evidence was presented ... that Aboriginal people suffered mental health problems such as depression at a very high rate, compared to non-Aboriginal people, that rates of self-harm and suicide are higher, and that substance abuse, domestic violence, child abuse and disadvantage contribute additional risk factors. (Swan & Raphael, 1995(a) Executive Summary, 1)

These reports are summarised by Eley, Hunter et.al. (2006) who note "All (three) reports acknowledge the need for increased and improved mental health services for Indigenous people and identify significant shortfalls in existing services." They further note, with reference to the RCIADIC and Burdekin report that "Both reports found that many mental health professionals have little understanding of Indigenous culture and society, resulting in frequent misdiagnosis and inappropriate treatment." These comments reflect similar concerns raised by a range of authors over the last decade criticizing the standard and appropriateness of services provided to Indigenous Australians by psychologists, arguing that psychologists operate within an ethnocentric neo-colonial Western framework and are largely ignorant of knowledge of Indigenous cultures, worldview, histories and contemporary situations. The strategies and models used by psychologists with Indigenous clients within a wide range of clinical, forensic, educational, clinical and organisational contexts have been described as inappropriate, ineffective and resting on cultural specific and inappropriate assumptions.

This paper explores the extent to which these criticisms are supported by evidence from the historical record, before examining the implications of this history for the role of psychology in contemporary Indigenous Australia.

A Brief History of Psychology and Indigenous Australians

The following discussion is based on an on-going project analysing a comprehensive bibliography of Psychology & Indigenous Australians. The

bibliography includes some 400 articles published since 1865 specifically relating to Psychology & Indigenous Australians. The patterning of these publications in Figure 1 shows the total number of publications within each 5 yearly interval from 1865 to 2005. As is apparent, there has been a dramatic increase in the rate of publication in the years from 1970 through to the present with over 50% of the total publications occurring since 1990.

Psychology has routinely been castigated for its role in creating images of Indigenous Australians as being of low intelligence. However, this image pre-dates any involvement of psychology by many decades. From the very beginnings of European settlement Indigenous Australians were stereotyped as being of low intelligence as a consequence of their assumed lowly position within the evolutionary ladder of social Darwinism. As Stuart Banner (2005, para 23) notes

... it quickly became conventional British opinion that the Aborigines were the most primitive people in the world... Watkin Tench observed: 'But how inferior they show when compared with the subtle African; the patient watchful American; or the elegant timid islander of the South Seas.' British observers consistently ranked the Aborigines last in the hierarchy. They were 'far behind other savages,' 'the lowest link in the connection of the human races,' 'the lowest of the nations in the order of civilization.' They were compared unfavorably with the Maori, who were agriculturalists and were capable of being usefully employed by settlers, and with the Burmese and Malayans, who, unlike the Aborigines, were 'susceptible of civilization.' John Russell, the Secretary for the Colonies, contrasted the 'half-civilized' Indians of Canada with the Aborigines, who were 'little raised above the brutes.'

These attitudes, dating from 1788, precede the emergence of psychology as an academic discipline in Europe, were not based on any psychological research and were not supported any psychology publications. Indeed the first attempt to use psychology to explore Australian Indigenous characteristics can be found in early 19th century with the attempts by Barron Field, the first Supreme Court Judge in Australia and one of Australia's earliest and possibly worst poets, to use phrenology to support these early stereotypes:

... Australian phrenologists believed that by measuring skulls they could prove that Aboriginal people were subhuman. In the words of Barron Field, the first Supreme Court Judge of New South Wales and an ardent phrenologist, 'The skull, the genius, the habits, of the Australians... have, in all of them, the degenerate Ethiopian character...'...According to Field,

this 'degenerate' character precluded the civilisation of Aboriginal people, and confirmed the inevitability of their extinction' (Watson 2003).

The stereotype of Indigenous Australians as primitive and of low intelligence was well established within the first few years of white settlement in Australia, in the absence of any involvement of psychology. However, the failure of the initial missions and protectorates by the middle of the 19th century initiated the full development of the Aboriginal reserve system, the creation of official 'protection' agencies and eventually the implementation in all states of discriminatory legislation to control almost every aspect of Indigenous lives. These developments were firmly embedded in the social Darwinist beliefs about the future of Indigenous Australians, including the expectation that they were a dying race, that their passing years should be spent in isolation, protected from the rapidly developing European settlement, that these strategies were justified on the belief that Aboriginal people were intellectually incapable of becoming civilised and that their behaviour was based on instinct rather than intellect.

There was significant academic support for these views. Oldfield, writing in 1865, noted; "After 20, their mental vigour seems to decline, and at the age of 40 seems nearly extinct, instinct alone remaining". Similarly, Wake, writing in 1872, explains the apparent contradiction between these models of black intellectual deficit with the skills Aborigines exhibited in their own environment: "The Australian natives exhibit a degree of mental activity which at first sight may be thought inconsistent with the childish position here assigned to them ... This activity results from ... the repeated exercise of the mind on the means of accomplishing the all-important end of obtaining food ... a development of the, lower intellectual faculties, somewhat disproportionate to the moral ideas with which they are associated" (1872:82).

These early writings about the intellectual capacities of Indigenous Australians provided scientific legitimation for the popular stereotypes of the day and the emerging Social Darwinist models and policies. However, again these early writings precede the establishment of psychology as a discipline, were not based on any kind of significant research within psychological paradigms and were not published within of the emerging psychological journals. Oldfield's article appeared in the *Transactions of the Ethnographic society of London* while Wake's "The mental characteristics of primitive man, as exemplified by the Australian Aborigines" and Dunn's 1875 article, "Some remarks on ethnic psychology" both appeared in the *Journal of the Anthropological Institute*.

It is not until the establishment of the first psychology journal (Mind) in 1876 and the establishment of experimental laboratories (such as Wundt's laboratory in Leipzig in 1879) that Psychology begins to emerge as a separate academic discipline. Many of the early developments within the discipline drew significantly on Australian Indigenous examples in establishing psychology as an evolutionary science. Spencer, for example, in his 1855 Principles of Psychology placed great emphasis on the study of "the savage mind", drawing specifically on Indigenous Australian evidence while Freud also drew heavily of Aboriginal case studies in his Totem & Taboo, appropriately sub-titled "Some Points of Agreement Between the Mental Lives of Savages and Neurotics".

By the beginning of the twentieth century Aboriginal people had been stereotyped as primitive stone-age curiosities, had been largely constrained by legislation which denied them the freedoms accepted as rights by other Australians, and had been confined within reserves where they lived their lives under the direct control of white administrators. At the same time concepts of racial superiority were becoming well established in Australia, both in individual attitudes and in the structure and operation of the major social institutions of Australian society. These concepts were firmly based on an acceptance of the validity of racial typologies and the application of evolutionary theory to social and cultural differences. While the emerging discipline of psychology incorporated similar views it was not until the first half of the 20th century that psychology begins developing as a discipline in Australia generating a distinct body of literature exploring the characteristics of Indigenous Australians.

One of the first examples of using psychology to examine Aboriginal mental capacity can be found in Haddon's Torres Strait expedition in 1895. As part of this expedition C G Seligman had tested 'Aborigines from the Fitzroy and McKenzie River districts and found that their sensory and perceptual skills were much the same as those of Europeans. This evidence was largely ignored by later psychological research. Instead, research during this period was dominated by the development and application of the emerging field of psychometrics to identify Indigenous Australians as being of low intellectual capacity, probably for genetic reasons, such that they are portrayed as being incapable of being able to become fully functional citizens in 20th century Australia. Stanley Porteus initiated this research activity with his 1917 paper "Mental tests with delinquents and Australian Aboriginal children". This title reflected an equation of social deviance and cultural difference which characterized the next 30 years of psychometric research with Indigenous Australian children, providing strong support for the prevailing beliefs in the limited intelligence of Indigenous Australians.

Psychology was also implicated in the administration of the policies of segregation. In 1928 the Inspector General of the Insane for Victoria was commissioned by the SA Government to examine the intelligence of 39 boys and 25 girls at the Point Pearce Aboriginal Mission Station. He concluded that all 64 of them were mentally defective (Barnes, 1969). Similarly, the NSW State Psychological Clinic Annual report for the year ending 30th of June, 1929, included a discussion of "the estimated mentality of half-caste and full-blooded aboriginal children... The tests used in the study of aborigines were chiefly performance, i.e., Seguin Formboard, Porteus Maze Test." The report concluded; "Of the 85 children examined individually we found none bright by white standards. Twenty-six were average by white standards, 19 were regarded as definitely feeble-minded, and the remainder (40) as borderline and dull." The evidence from the Stolen Generations inquiry strongly suggests that throughout this period psychologists were also actively involved in implementing the forced removal of Indigenous children. As Bretherton & Mellor (2006:92) note "practicing psychologists working for welfare agencies after 1950 probably had a complicit role in many such cases".

In general, then, the psychological research being undertaken with Indigenous Australians during the first half of the twentieth century reflected the continuity between the social sciences and Social Darwinist models of evolutionary thought. The model of Aboriginal intelligence proposed by social Darwinists in the 19th Century has been confirmed by the psychometrics of the 20th century. Aborigines, and particularly Aboriginal children, were portrayed as having low intelligence, probably for genetic reasons.

Following the Second World War psychological interest in Indigenous Australians began diversifying. Psychoanalytic frameworks began emerging in the literature accompanied by a brief excursion into paranormal psychology. By 1963 there was a sufficient body of research to support Oeser & McElwain's 1963 review of psychological research with Indigenous Australians.

A further period of significant research activity emerged in the late 1960s following the introduction of the assimilation policies of the 1950s and early 1960s. Indigenous children began entering the state school system in significant numbers for the first time. At the same time, large numbers of immigrant children were also entering these schools. In both cases it was assumed that the children would become assimilated as rapidly as possible – that they would attend school and would catch measles, chicken pox and Australian culture. That is, assimilation would simply happen.

Of course it didn't. By the early 1960s problems were becoming pressing. Indigenous children were not succeeding at school with evidence emerging of high levels of truancy, behaviour problems, early school leaving and low attainment levels.

Education authorities turned to early intervention programs and compensatory education to solve the problems of Indigenous education and further the assimilation process. Compensatory education models rest very firmly on assumptions of cultural deprivation and cognitive deficit which resonated with the earlier psychometric research but required further confirmation. The decades of the 1960s and 1970s saw another increase in psychological research activity with Indigenous subjects and the application of this research to legitimate the proliferation of compensatory education (see, for example, de Lacey, 1970).

The bulk of the research was concerned with the intelligence, cognitive characteristics and psycho-linguistic abilities of the children, using standardized tests derived from overseas research undertaken with children from western cultures. To the extent that Aboriginal children performed poorly in these tests they were described as having intellectual, cognitive or psycho-linguistic deficits induced by living in inadequate, un-stimulating or culturally deprived environments. This research, and the 'deficit' interpretation of the results, provided one the major starting points for the development of compensatory education programs for Aboriginal children.

This increase in research activity coincided with two other major developments – the widespread forced removal of Indigenous children from their families and the emergence of a major debate within psychology about the impact of maternal deprivation on children.

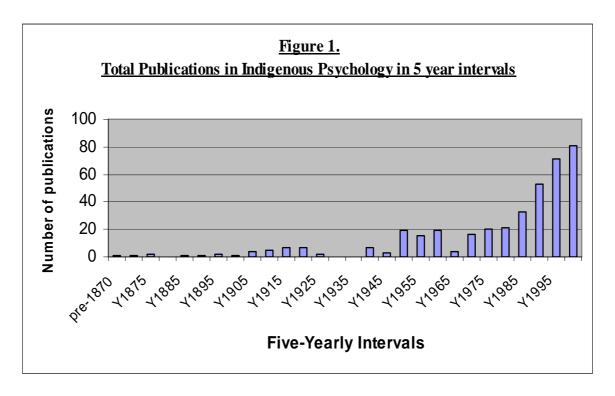
The extent of the forced removal of Indigenous children has been widely reported and discussed following the publication of the *Bringing Them Home* report in 1997. As many as 1 in 5 Indigenous children were removed from their families, with the majority of these removals (about 80%) being girls. This removal was widespread during the two decades between 1950 & 1960 and psychologists were actively involved in aspects of this process, although the extent of this involvement remains poorly documented.

Over the same two decades there was a major debate within psychology over the impact of maternal deprivation on children, initiated by the publication of Bowlby's *Maternal Care and Mental Health* in 1951 and culminating with Michael Rutter's *Maternal Deprivation Reassessed* in 1981.

While psychologists in Australia were actively involved in this debate they failed to link the evidence or the theoretical models relating to maternal deprivation to the removal of Indigenous children from their mothers. As Bretherton & Mellor (2006:92 - 93) comment:

Few White psychologists challenged the idea that taking Aboriginal children away from their families was in their best interests and, indeed, practicing psychologists working for welfare agencies after 1950 probably had a complicit role in many such cases... psychologists, with their knowledge of the impact of institutionalization and the breaking of family bonds and attachments, may be implicated for failing to protest against the removal of children from their Aboriginal mothers. Psychological theorizing and research ... inform us that some of the consequences could have been predicted. Given the prominence of the debates on maternal deprivation during the 1950s to the 1970s, and psychologists' awareness of the complexity of psychosocial sequelae (sic) that tend to follow the breaking of bonds with primary caregivers, it is salutary to note psychologists' lack of concern for Aboriginal mothers and their children. ... Psychology and psychologists could have used their disciplinary knowledge and social standing to act as advocates for Aboriginal children, but did not do so. While exceptional individual psychologists befriended Aboriginal people, a more empathic approach from the profession as a whole was not evident until after the publication of the inquiry report.

That is, then, during the 1960s, psychologists were aware of the potentially damaging effects of the removal of children from the mothers and families, were undertaking extensive research with Indigenous children and were actively involved in the removal of Indigenous children. The failure of psychology to identify the likely effects of these policies on the children and to undertake any kind of advocacy role remains one of the major failings of the profession in Australia.



This period culminated with the publication of two texts; Kearney et.al. (1973) *The Psychology of Indigenous Australians* and Kearney & McElwain (1975) *Aboriginal Cognition*. These texts provided both an overview of psychological research and theory and a critical examination of the role of psychology in indigenous affairs. Neither text mentions the forced removal of children, or of the damaging effects of this removal on the children involved.

The period following the publication of these two texts saw the abandonment of the assimilation policies by the Commonwealth government, a dramatic decline in psychometrics based research with Aboriginal subjects and, as Figure 1 demonstrates, a significant increase in interest in other aspects of psychology and Indigenous Australians. While a detailed analysis of these developments is beyond the scope of the current paper some general comments on the patterning of these publications are relevant. The 1970s through to the 1990s saw significant developments in ethno-psychiatry, more critical analyses of the role of psychology in Indigenous Australia, increasing interest in exploring Indigenous values and attitudes, a low level of continuing interest in psychometrics and cognitive skills (with an emphasis on cognitive difference rather than deficit) and an emerging interest in mental health issues. Psychologists also began exploring issues of white attitudes and the psychology of Australian racism.

During the 1990s the literature continued to accelerate and diversify. Indigenous voices began appearing while psychological research into substance abuse,

violence, rehabilitation, racism and white attitudes continued, and the application of forensic psychology to Indigenous issues developed as a specialised area of study. The publication of *Working with Indigenous Australians* (Dudgeon, et.al., 2000) and the special edition of *The Australian Psychologist* (2000) dealing specifically with Indigenous issues reflect a growing interest in the role of psychology in therapeutic contexts.

This acceleration continued through the period 2000 – 2005 with some additional themes emerging including the development of guidelines for culturally appropriate psychological practices and the increased acceptance of alternative therapeutic models, particularly structured around grief and loss models. Indigenous voices are becoming much more apparent in the literature with publications by Westerman, Dudgeon, Koolmatrie. Garvey, Clark, Nolan, McDermott and others. The literature is also characterized by increasing interest in the development of cultural competence models for psychological practice, and the inclusion of such models in pre-service and in-service professional development. Psychometrics and cognitive based research have largely disappeared from the literature.

This dramatic increase in the involvement of psychology with Indigenous Australians has been generated by a number of factors. While the reconciliation process of the 1990s has been widely criticised, one of the positive outcomes was the adoption of statements of reconciliation by many professional bodies. These statements have provided a context within which professional bodies such as the Australian Psychological Society have needed to review their levels of involvement in Indigenous issues and generate specific policy statements.

Over the same period a range of public and well-publicized inquiries into Indigenous issues generated clear evidence of the deficiencies in the engagement of many professions with Indigenous clients. The *Report of the Royal Commission into Aboriginal Deaths in Custody*, the *Bringing Them Home* report and various reports on Indigenous mental health all provided critical comments on the role of psychology in Indigenous Australia. These comments have also spurred the profession to adopt a more active role.

The numbers of Indigenous students gaining qualifications within the professions since the 1970s also increased dramatically (from a very low base). Some of these early graduates are now working as academic staff within universities, while others are now in senior positions within youth services, health services, counselling, social welfare, education, and criminal justice systems creating a critical mass of Indigenous voices.

This brief historical overview clearly indicates that psychology has played a role in the construction and legitimation of colonization through the direct effects of research, through the use of psychological testing and through the participation of psychologists in the administration of policies such as compensatory education and the forced removal of children. There is also an extensive body of literature arguing that psychologists working as professionals with Indigenous clients are poorly informed about Indigenous issues, operate within a predominantly western professional model and use culturally inappropriate strategies in therapeutic, forensic and developmental contexts. However, it does need to be noted that there is virtually no research literature exploring the contexts, nature, characteristics or effects of psychologists working with Indigenous clients. This remains a major gap in the literature.

The failure of psychology to speak out on the forced removal of Indigenous children highlights a more significant issue in this history. Psychology, as a profession, has failed to actively engage in policy analysis and formulation or to undertake any advocacy role on behalf of Indigenous Australians. Psychologists have failed to use psychological models and frameworks to provide policy makers, professional staff and Indigenous communities with any sustained analysis of the psychological consequences of colonisation, the impacts of these consequences on Indigenous communities today or the need for policies to address mental illness as both a major cause and a major consequence of social problems.

Psychology, Mental Health & Indigenous Australians

The statistics on the nature and extent of mental illnesses within Indigenous Australians are not very reliable and may well be under-estimates given that Indigenous sufferers of mental illness may not attend clinics at all, may only attend when the problem is acute and may not identify or be recorded as Indigenous. However, despite these limitations, the available evidence clearly indicates that mental health is a major and growing issue. When Indigenous Australians are compared with non-Indigenous Australians

- The rate for involuntary admission to psychiatric care is 3-5 times higher
- The rate for hospitalisation with mental disorders due to psychoactive substance use is 4 -5 times higher
- The death rate associated with mental disorders for males is 3 times higher, but about the same for females.
- Rates for schizophrenia, schizotypal and delusional disorders are more than double

- The rates for illicit substance use are almost double the rate for non-Indigenous Australians
- Indigenous Australians are less likely to use alcohol than non-Indigenous Australians, but those who do use alcohol are more likely to be high risk users. The Australian Bureau of Statistics (2006) survey of alcohol consumption in Australia in 2004/5 notes that while a smaller proportion of Indigenous Australians report consuming alcohol in the survey period (49% compared to 62%) "...the proportion of Indigenous adults who reported drinking at risky/high risk levels was similar to that for non-Indigenous adults").
- Petrol sniffing is a major problem in remote communities.
- The suicide rates for Indigenous males are more than double the rate for non-Indigenous males. For females, the Indigenous rate is almost double the non-Indigenous rate.
- Rates of depression are widely reported as being much higher.

There is little doubt that Indigenous communities across Australia are characterised by high levels of mental distress and that these levels of mental distress contribute significantly to the levels of social breakdown within these communities. The issue is not a lack of evidence. As McDermott (2006:520) notes

The greatest difficulty in improving Indigenous mental health is not finding data, but finding mechanisms to convince governments — ultimately, the program funders, workforce developers and agenda-setters — ... that to connect the unresolved trauma of dispossession, child removal, missionisation, racism and over-incarceration to contemporary distress is not adopting a 'black armband view of history'.

The dots are on the page. There is a lack of political will to join them up.

Psychology has a major advocacy role to play in convincing governments of the need to address mental health issues as a priority. The impact of the historical and contemporary processes of colonisation on the psychological well-being of Indigenous Australians has been widely commented on but poorly documented in the research literature. As Silburn et.al. (2007:10) note:

It is now generally accepted that both forced separation and forced relocation have had devastating consequences for Aboriginal children in terms of social and cultural dislocation and have impacted on the health and wellbeing of subsequent generations. However, until recently there has been little or no empirical data to scientifically document the nature and extent of these intergenerational effects.

There is an urgent need for psychologists to develop and apply effective models linking the psychological consequences of colonisation to the health and well-being of Indigenous Australians, exploring the cascading, trans-generational effects of trauma on Indigenous Australians as each generation responds to the trauma of the previous generation, deals with a new set of policies every generation and lives with the daily effects of poverty, the removal of children, family dislocation, domestic violence, childhood trauma, foetal alcohol syndrome, post-natal depression, racism and poor health. While there are well-developed models within psychology describing the psychological effects of trauma, these models are rarely applied to an examination of the effects of generations of trauma on Indigenous communities.

In the 1960s and 1970s psychology failed to use its understandings of the effects of maternal deprivation to speak out as a profession against the forced removal of children, failed to identify the predictable effects of these practices on subsequent generations, and failed to develop and implement therapeutic strategies to overcome these effects. Forty years later these predictable effects are now daily realities. It is important that psychology, as a profession, and psychologists as practitioners, respond to these realities in ways which they failed to do in the 1960s.

It is equally important that psychology engages in detailed analyses of the impact of these mental health issues on contemporary Indigenous communities, exploring the extent to which mental health issues contribute to violence, aggression, sexual abuse, child-rearing practices, responses to educational and health programs, and the emergence of behaviours which lead to the continuing high rates of removal of Indigenous children and the high rates of incarceration of Indigenous youth and adults.

Finally, it is important that psychology explores strategies and responses to the therapeutic needs of Indigenous Australians in mental distress. Psychology is well positioned to examine the effectiveness of a range of different therapeutic strategies with Indigenous clients. In undertaking these tasks psychology will need to question many of its current theoretical models and frameworks. How well do existing diagnostic criteria and assessment strategies extend across cultural boundaries? How do psychologists develop communication skills which effectively recognize the high levels of cultural diversity which characterize Indigenous Australians today? Does psychology need to move away from individualistic explanations based on 'mental illness' towards a more holistic explanations based on models of social & emotional well-being?

In exploring these questions psychology must enter into genuine partnerships with Indigenous psychologists, mental health workers, other professionals and

communities. It is important to empower them, to work closely with them and to ensure that their voices are heard. But it is equally important to recognise that psychology also has a major role to play in research, in the development and implementation of effective therapeutic processes, in policy formulation and in public advocacy. If Indigenous communities and cultures are to survive, the failures of the past must not be repeated in the future.

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