Helping Spirits Stay Strong

Footprints in Time: The Longitudinal Study of Indigenous Children

Social and Emotional Wellbeing Research Summary Report

D. Howard-Wagner, B. Harrap, O. Wycisk, Y. Dinku, J. Guthrie, G. Buchanan, E. Malbon, V. Cooms, P. Somboonsin, B. Edwards, & M. Yap

Australian National University

Centre for Indigenous Policy Research, POLIS: The Centre for Social Policy Research | CIPR COMMISSIONED REPORT 11/2024

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Associate Professor William Fogarty
Acting Director, CIPR
POLIS: The Centre for Social Policy Research
Research School of Social Sciences
College of Arts & Social Sciences
The Australian National University, September 2024

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- Social Impact Hub.

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CIPR is a unique social science research organisation and is a leading research centre on Aboriginal and Torres Strait Islander policy issues. Since being established as the Centre for Aboriginal Economic Policy Research (CAEPR) in 1990, CIPR has established an unrivalled reputation and outstanding track record in complex and challenging public policy debates of national significance. CIPR is recognised for expertise in applied policy research and analysis, place-based action policy research, and community-led evaluation with Aboriginal and Torres Strait Islander peoples and organisations, Australian federal, state, and territory governments, and international agencies.

A central goal of CIPR is to continue to build long-term partnerships with Aboriginal and Torres Strait Islander stakeholders, with a view to supporting and working with key individuals and organisations in the areas of research, education, and policy development.

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Deirdre Howard-Wagner is Social Policy, Participation and Inclusion Program Lead at POLIS and former Research Director at CIPR. **Benjamin Harrap** is a Research Fellow at CIPR. **Oscar Wycisk** is a Quantitative Research Officer at CIPR. **Yonatan Dinku** is a Research Fellow at CIPR. **Jill Guthrie** (Wiradjuri) is an Associate Professor at CIPR. **Geoff Buchanan** is a Research Fellow at CIPR. **Eleanor Malbon** was a Research Fellow at CIPR. **Valerie Cooms** (Quandamooka) is a former Director of CIPR. **Pattheera (Paire) Somboonsin** is a Research Assistant at CIPR. **Ben Edwards** is Data, Analytics and Evaluation Program Lead at POLIS: The Centre for Social Policy Research. **Mandy Yap** is a Fellow at CIPR.

Footprints in Time: The Longitudinal Study of Indigenous Children (LSIC) Social and Emotional Wellbeing Summary Report

D. Howard-Wagner, B. Harrap, O. Wycisk, Y. Dinku, J. Guthrie, G. Buchanan, E. Malbon, V. Cooms, P. Somboonsin, B. Edwards and M. Yap

Abstract

The Centre for Indigenous Policy Research at POLIS: The Centre for Social Policy Research, the Australian National University was commissioned by the Commonwealth Department of Social Services (DSS) to deliver a Research Report which analyses the social and emotional wellbeing of Aboriginal and Torres Strait Islander Children and Youth (the Research Report, https://doi.org/10.25911/6KGK-RG76), as recorded in ***Footprints in Time:*** The Longitudinal Study of Indigenous Children (LSIC).

This Summary Report, which sets out the high-level methods, findings, and implications of the analysis of LSIC data in relation to the social and emotional wellbeing of LSIC Study Children or Study Youth, is part of a suite of materials that accompany the Research Report, which also includes a series of Factsheets, describing our analysis and findings.

This Summary Report outlines the key methods, findings, research, and policy implications of our analysis. Comprehensive and detailed descriptions can be found in the Research Report, which is organised into six sections:

1. The conceptual model for Aboriginal and Torres Strait Islander social and emotional wellbeing.
2. Adapting the Gee et al. (2014) framework for social and emotional wellbeing to LSIC data using structural equation modelling.
3. Examining culture as a determinant of social and emotional wellbeing for LSIC Study Children.
4. Conducting a longitudinal analysis of factors associated with social and emotional wellbeing in LSIC Study Children.
5. Investigating self-harm and suicidal behaviours among LSIC Study Youth.
6. Understanding the trajectories of social and emotional wellbeing and related outcomes.

Each section provides in-depth insights into the relevant topics.

The Summary Report discusses data relating to self-harm and suicide. We acknowledge that each statistic presented here represents the experiences of a person. We acknowledge that some readers may find the topics discussed disturbing or distressing. If you or someone you know is feeling distressed or suicidal, please contact one of the following services:

During an emergency, call: 000.

13YARN [Thirteen YARN]: 1300 78 99 78.

Kids Helpline: 1800 55 18 00.

Lifeline: 13 11 14 or 0477 13 11 14 (SMS).

Suicide Call Back Service: 1300 65 94 67.

Beyond Blue: 1300 22 46 36.

Acronyms

ANU Australian National University

CIPR Centre for Indigenous Policy Research (formerly, CAEPR: Centre for Aboriginal Economic Policy Research)

DSS Australian Government Department of Social Services

IRSAD Index of Relative Socioeconomic Advantage and Disadvantage (ABS)

LSIC Longitudinal Study of Indigenous Children

SEIFA Socio-Economic Index for Areas (ABS)

SEM Structural equation model

SDQ Strengths and Difficulties Questionnaire

P1 Primary Carer, most often a mother

Note on Terminology

Aboriginal and Torres Strait Islander peoples

We acknowledge the diversity of languages, beliefs and lived experiences among the Aboriginal and Torres Strait Islander population.

Where the Summary Report refers to policy, it typically identifies this population as 'Aboriginal and Torres Strait Islander peoples'.

As is considered convention by many in the field, where describing academics and scholars who identify as Aboriginal and/or Torres Strait Islander, the Report uses the terminology of 'First Nations scholars'.

Where the Summary Report refers to academics and peoples who do not have Aboriginal and/or Torres Strait Islander heritage, it uses the terminology of 'non-Indigenous'.

Study Child or Study Youth and Primary Carer

For sections that include data from Wave 1 to Wave 14, this Report tends to use the term 'Study Child'. For sections that include only data from Wave 11 and Wave 14, the Report tends to use the term 'Study Youth'. Primary Carer is most often a mother. Responses from a Secondary Carer are sometimes analysed. LSIC families tend to denote the families associated with a Study Child and Primary Carer.

Report Context

A Note on Indigenous Data Sovereignty and Positionality

Maiam nayri Wingara set out the definitions for Indigenous Data Sovereignty as:

> In Australia, 'Indigenous Data Sovereignty' refers to the right of Indigenous people to exercise ownership over Indigenous Data. Ownership of data can be expressed through the creation, collection, access, analysis, interpretation, management, dissemination and reuse of Indigenous Data.
>
> 'Indigenous Data Governance' refers to the right of Indigenous peoples to autonomously decide what, how and why Indigenous Data are collected, accessed and used. It ensures that data on or about Indigenous peoples reflects our priorities, values, cultures, worldviews and diversity (Maiam nayri Wingara n.d.)

The Longitudinal Study of Indigenous Children (LSIC) study is guided by the ***Footprints in Time*** Steering Committee. The Steering Committee, which is Indigenous-led and has majority Aboriginal or Torres Strait Islander representation, provides expertise in survey content, design, collection methods, community engagement, ethics, cultural protocols, and data analysis and interpretation. Some of the founding members of Maiam nayri Wingara are also members of the LSIC Steering Committee, thus ensuring the Steering Committee has a commitment to and overall responsibility for ensuring Indigenous data sovereignty principles are met.

Our team, which included First Nations members, were guided by the Steering Committee, and other key Indigenous stakeholders throughout. In undertaking this contact with Australian Government Department of Social Services (DSS) to analyse data collected through LSIC, we were guided and challenged by Chris Anderson, who write:

> Colonial settler paradigms tend to cannibalise Indigenous spaces as their own. That is to say, as non-Indigenous researchers begin to decolonise their methodologies and methods and venture into Indigenous research spaces formerly marginalised, they may begin to see these methodologies and methods as 'normal'. In these cases, those spaces, formerly Indigenous, now seem less so because white scholars come to inhabit them, physically and intellectually, and as such, claim them (Walter & Anderson, 2016, p. 57).

We were aware of the need to critically challenge 'the powerful influence of the usually invisible standpoints that inform what data are gathered, by whom, and for what purpose' (Walter & Anderson, 2016, p. 56) as they surround the statistical methods used.

Our team is a diverse group of people who came together to undertake the DSS contract. Collectively, we have many years of experience working and creating in the student, research, policy and/or advocacy spaces. Some of us have worked in the Indigenous policy and research space for many years, while others are relatively new to this space. As a team, we see our strengths as emanating from our different histories and our shared histories, including that we come from First Nations, settler-colonial and/or immigrant backgrounds; student, staff, academic, and/or professional backgrounds; neurodiverse and neurotypical, gender fluid and gender specific; abled and disabled backgrounds. We see ourselves as constantly learning and being challenged and guided by the wealth of experience that First Nations scholars in the field bring. We see our approach as the combination of all of our epistemologies, axiologies, ontologies and our social positions. This required constant reflexivity and reflection on assumptions we might have made, all the while trying our best to avoid 'overtaking' the model and process.

The non-Indigenous members of our team were guided by the Steering Committee, as well as Professor Valerie Cooms (Professor, Indigenous Policy at Australian National University (ANU)), Associate Professor Jill Guthrie and the perspectives of First Nation colleagues at DSS and within the ANU. As a team, we were conscious of adopting and maintaining a decolonising approach to western statistical conventions, adapting statistical methods in a way that centred Aboriginal and Torres Strait Islander perspectives and priorities. This approach, we hope, allowed us to produce a culturally informed analysis of the experiences that Study Children and Youth and their carers had of social and emotional wellbeing, holistically and within each domain.

Positionality Statements from each of the ANU team members can be found in the Research Report at https://doi.org/10.25911/6KGK-RG76.

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Executive Summary

The Centre for Indigenous Policy Research (CIPR) was commissioned by the Australian Government Department of Social Services to provide a Research Report on the social and emotional wellbeing of Aboriginal and Torres Strait Islander children and youth. This was achieved using ***Footprints in Time***: The Longitudinal Study of Indigenous Children (LSIC), which has followed up annually a cohort of Aboriginal and Torres Strait Islander children from 11 places across Australia, since 2008. The principles that underpinned the Research Report were the recognition of, and focus on, the strength of Aboriginal and Torres Strait Islander communities and cultures. Fundamental to this was a First Nations holistic model of social and emotional wellbeing developed by Graham Gee, Pat Dudgeon, Clinton Schultz, Amanda Hart, and Kerrie Kelly in 2014, with this model guiding our perspective and interpretation of LSIC data.

In producing the Research Report, we drew on both quantitative and qualitative data from LSIC to examine a range of experiences of social and emotional wellbeing. Our most noteworthy findings consider the:

- technical aspects of measuring social and emotional wellbeing with LSIC data
- cultural (and other) determinants of social and emotional wellbeing
- the impact of protective and risk factors on social and emotional wellbeing
- the role of the school environment in self-harm and suicidal behaviours, and
- changes in social and emotional wellbeing over time for the Study Youth.

We summarise the key findings and policy implications from the Research Report here, with a more detailed summary presented in the remainder of this Summary Report. The full Research Report, which goes into more technical detail, is available online from https://doi.org/10.25911/6KGK-RG76.

Key Findings

Social and emotional wellbeing in LSIC was holistic and represented through several domains.

The holistic model we used was well-represented in the data. The model defined social and emotional wellbeing through interconnected domains of Connection to Body, Connection to Mind and Emotions, Connection to Family and Kinship, Connection to Community, and Connection to Culture, Country, Ancestors and Spirituality. We were able to map enough questions in LSIC to each of these domains to develop measures of them. We found that each of these domains were important for a child's overall social and emotional wellbeing and were highly interrelated with each other, demonstrating the holistic nature of social and emotional wellbeing for LSIC Study Children.

Culture and family are key determinants for children growing up strong and having positive social and emotional wellbeing

Across 13 years of data, the responses of Primary Carers (predominantly mothers) tell an ongoing story about the importance of maintaining a child's connection to their culture for growing up strong, and that family plays a vital role in this. Contact with family, including extended family and community members who are considered family, was central to the development of a child's sense of identity, belonging, and social and emotional wellbeing.

Culture was one of the strongest protective factors for long-term social and emotional wellbeing

We identified many protective factors for social and emotional wellbeing, including having good physical health, having a primary carer with positive mental health, higher socioeconomic status both at the family and community level, and having close relationships with others. It was having a strong Connection to Culture, however, that strongly predicted positive social and emotional wellbeing independent of demographics, health, and socioeconomic conditions. Experiencing racism, poor housing conditions, financial stress, or multiple major life events such as a family member passing away or having problems with police, all acted as risk factors.

The school environment can strengthen or harm social and emotional wellbeing

The school environment appeared in every area of analysis. Study Youth having pride in their cultural identity in the classroom was an important component of Connection to Culture. Study Youth qualitative responses in LSIC Wave 13 frequently mentioned the importance of a 'good education' to growing up strong and having good social and emotional wellbeing. A positive school environment was protective, and bullying was a strong risk factor for long-term social and emotional wellbeing. Study Youth who experienced bullying and racism at school were two-to-three times more likely to report self-harm, have suicidal thoughts, and suicide attempts. Conversely, Study Youth who reported a positive school climate and feeling a sense of safety at school were half as likely to report self-harm, have suicidal thoughts, and suicide attempts.

Social and emotional wellbeing improved over the 14 years of follow-up, although some outcomes worsened

Over the 14 LSIC waves analysed, the proportion of children with positive social and emotional wellbeing (measured in this case using the Strengths and Difficulties Questionnaire (SDQ)) increased from 61% at ages 2–7 years in 2010 to 73% at ages 13–18 years in 2021. Connection to Culture, indicated by the proportion of children regularly attending cultural events and ceremonies or who learned cultural practices or arts, also increased over time. These indicators were consistently highest for children living in remote areas of Australia. The proportion of children having good sleep and good overall health declined over time, to only 62% in 2021. Primary Carers in LSIC reported lower rates of financial stress and poor-quality housing from 2008 to 2021. These rates were notably at their lowest during the COVID-19 restrictions in 2020 and 2021.

Policy Implications

Improving social and emotional wellbeing must aim holistically and consider a child's broader context

The interconnected nature of the domains of social and emotional wellbeing demonstrate that all domains should be considered when designing policy to improve social and emotional wellbeing for Aboriginal and Torres Strait Islander children. This means policy must consider a child's Connection to Body, Connection to Mind and Emotions, Connection to Family and Kinship, Connection to Community, and Connection to Culture, Country, Ancestors and Spirituality. This also means policy must consider the social and emotional wellbeing of each individual child, collective family and kin, and community. Each community understands its own needs best. Therefore, and consistent with the principle of self-determination and Priority Reform 1 (formal partnerships and shared decision-making) of the National Agreement on Closing the Gap, each community must be afforded the opportunity to lead the development of these policies and programs.

Children must remain with their families and communities

For Aboriginal and Torres Strait Islander children to grow up strong and have positive social and emotional wellbeing, it is critical that families are supported to raise their children to be connected to their family, community and culture. This can be achieved through greater funding of Aboriginal Community-Controlled Organisations which understand their local community's needs and context best. The cultural safety of all child and family services must be improved all the same. Further, state and territory child protection systems must act with greater urgency to prevent removals and do better in placing children with family or other members of their community.

These implications will not be surprising. Each mirrors the calls over many decades of many Aboriginal and Torres Strait Islander experts and peak bodies. For instance, the Yoorrook Justice Commission (2023) report into Victoria's child protection and criminal justice systems; the Family Matters reports published annually for much of the last decade by the Secretariat of National Aboriginal and Islander Child Care (e.g. Liddle et al., 2023); the 2019 Family as Culture Review Report (Davis, 2019); and the 1997 Bringing Them Home report (Human Rights and Equal Opportunity Commission, 1997).

The importance of the school environment cannot be understated

That school racism and bullying pose a direct risk to the health and lives of Aboriginal and Torres Strait Islander children underscores the importance of action to create safe and supportive school environments. The current shortage of teachers needs to be addressed, as identified in the National Teacher Workforce Action Plan, as it will hinder the capacity of schools to create safe and supportive environments. While working toward improving the current mainstream schooling environment should remain a priority, alternatives to Australia's mainstream educational system should also be explored. The 2023 M.K. Turner report (M.K. Turner and Children's Ground, 2023) calls for the establishment of a First Nations Educational System and supporting First Nations schooling systems that can be adapted for different communities, cultures and contexts.

The focus of Closing the Gap Target 14 must be broadened in how it defines social and emotional wellbeing

The National Agreement on Closing the Gap Life Outcome 14 seeks to ensure that Aboriginal and Torres Strait Islander people enjoy high levels of social and emotional wellbeing. This target is a sustained reduction (towards zero) in the suicide of Aboriginal and Torres Strait Islander people (Commonwealth of Australia & Coalition of the Peaks, 2020). One of the contextual indicators for Life Outcome 14 is the proportion of Aboriginal and Torres Strait Islander people who report experiencing psychological distress.

These measures overlook antecedent wellbeing issues, such as emotional difficulties or self-harm, and does not reflect positive aspects of social and emotional wellbeing. Moreover, the statistical focus on suicide mortality as a measure of social and emotional wellbeing could result in policies that focus on the number on deaths without considering risk factors that underlie poor social and emotional wellbeing and protective factors that enhance positive social and emotional wellbeing, such as the school environment.

Our findings show that the factors which enhance social and emotional wellbeing mirror the protective factors that reduce the prevalence of suicidality. Further, our findings demonstrate that positive social and emotional wellbeing can be measured in many ways, demonstrating strength-based alternatives for measuring social and emotional wellbeing for Aboriginal and Torres Strait Islander children and youth, that align with Aboriginal and Torres Strait Islander perspectives.

Finally, our findings highlight that a more comprehensive approach is needed to measure social and emotional wellbeing effectively. The intent of such a holistic approach would be an improved 'quality of life' (National Aboriginal Health Strategy Working Party, 1989, p. ix) for Aboriginal and Torres Strait Islander peoples, not just a reduction in suicide.

Research Report Overview

Background on *Footprints in time:* The Longitudinal Study of Indigenous Children

The Longitudinal Study of Indigenous Children (LSIC) has been run by the Australian Government Department of Social Services (DSS) annually since 2008. It provides a powerful record of the life and experiences of Indigenous children and their families, as they have grown to be young adults. The Study Children come from 11 places across Australia. The study is overseen by an Aboriginal and Torres Strait Islander majority Steering Committee. Aboriginal and/or Torres Strait Islander Research Administration Officers use the annual LSIC instrument to collect data from two groups of Aboriginal and/or Torres Strait Islander children – the first group aged 6–24 months old at the start of the study in 2008; the second was aged 3.5–5 years in 2008.

The annual LSIC survey instruments include questions to capture a wide range of experiences and factors in each LSIC Study Child's life. Among these are a series of quantitative and qualitative questions that focus on the social and emotional wellbeing of the LSIC Study Child, their families and communities.

The LSIC data is available to approved researchers from government, academic institutions and non-profit organisations. The LSIC data documentation, such as a data dictionary, user guide and marked up copies of the questionnaires can be downloaded via the Australian Data Archive without prior approval. The DSS also commissions various reports, including a report specific to each wave of the LSIC study and research reports on specific topics Footprints in Time – The Longitudinal Study of Indigenous Children (LSIC) | Department of Social Services, Australian Government.

Our Approach

We took as our starting point a definition of Aboriginal and Torres Strait Islander social and emotional wellbeing as explained by First Nations scholars who define it as a holistic, multi-element, strengths-based and interconnected concept of mental, physical, social, emotional and spiritual health in Aboriginal and Torres Strait Islander peoples and communities (Calma, 2009; Dudgeon et al., 2017; Gee et al., 2014; Sutherland & Adams, 2019).

We used the conceptual framework for social and emotional wellbeing described by First Nations Scholars (majority) Graham Gee, Pat Dudgeon, Clinton Schultz, Amanda Hart and Kerrie Kelly in 2014, who frame social and emotional wellbeing as the 'expression' of having a good Connection to Country, Culture, Community, Family and Kinship, Mind and Emotions, Body, and Spirituality and Ancestors. Gee and co-authors call each of these parts of Aboriginal and Torres Strait Islander life 'domains' of social and emotional wellbeing (Gee et al., 2014).

Gee and co-authors acknowledge that these 'domains' are affected by social, historical and political determinants. A broader set of cultural determinants also helps shape a person's or community's connection to each domain. Cultural determinants give strength to people and communities in mitigating the effects of social and historical determinants. Central to this framework is the concept of 'self', which is deeply embedded within family, community and broader ecological contexts (Gee et al., 2014).

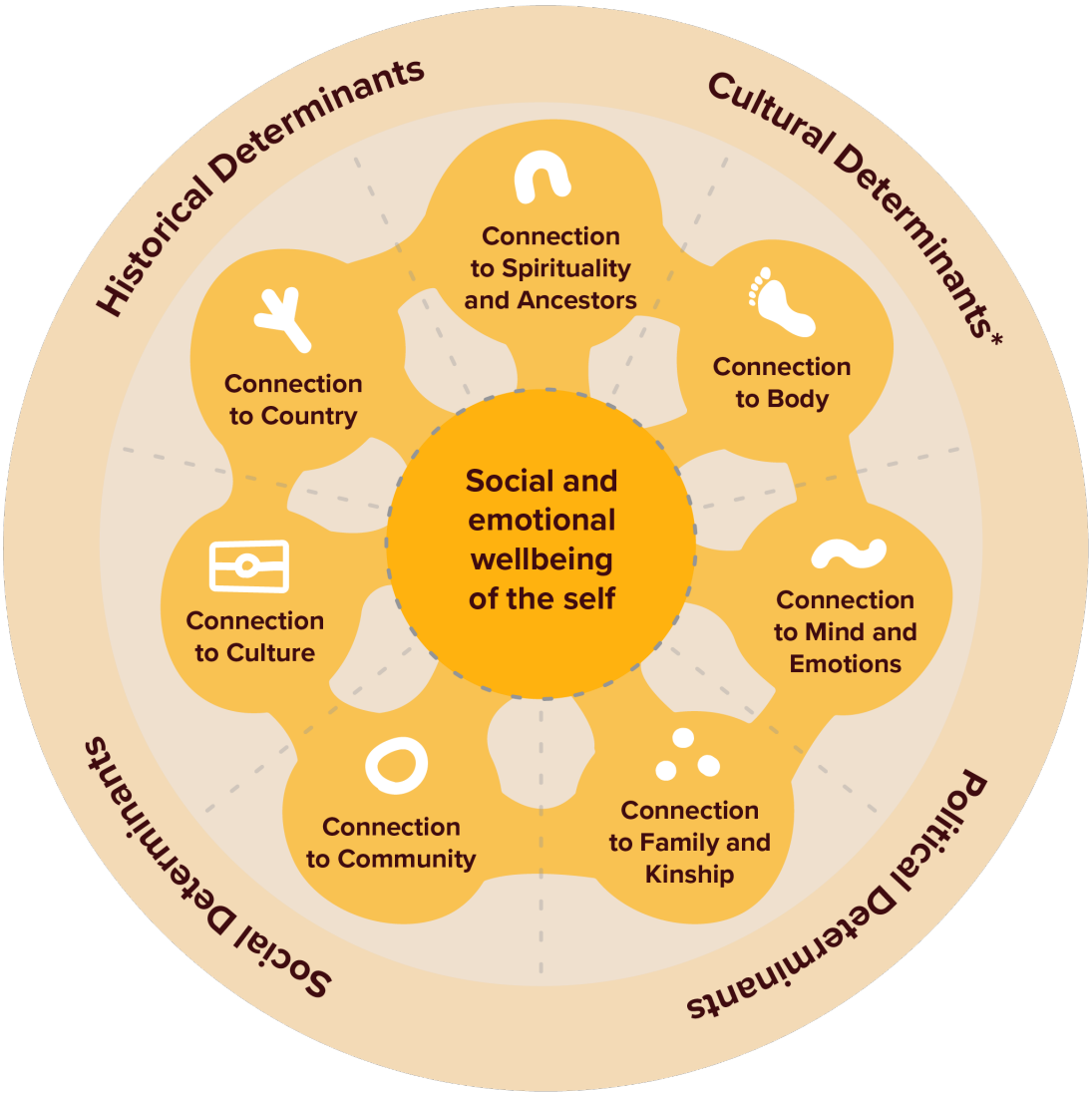

Figure 1: Conceptual framework for social and emotional wellbeing

Source: adapted from Gee et al., (2014)

Key: This framework conceptualises social and emotional wellbeing for a person (inner circle) who is intrinsically connected to family and community, as the interconnected function of a series of domains (middle circle), driven by historical, social, and political determinants (outer circle). Expressions and experiences across diverse cultural groups and life experiences affect this framework throughout the life-course of a person. *cultural determinants do not appear in the original visual conceptualisation of the Gee et al. (2014) framework. They have been added here to reflect their general discussion in Gee et al. (2014).

Guiding Principles

The Gee et al. (2014) framework, and its application in our analysis, is grounded in the following nine guiding principles created by the Ways Forward national consultancy in 1995 (Swan & Raphael, 1995):

1. Health is viewed in a holistic context.
2. The right to self-determination is central to the provision of Aboriginal and Torres Strait Islander health services.
3. Culturally valid understandings must shape approaches to strengthening Aboriginal and Torres Strait Islander health.
4. The impact of history in trauma and loss are recognised as a direct disruption to cultural wellbeing.
5. Human rights must be recognised and respected.
6. The impact of racism, stigma, environmental adversity and social disadvantage constitute ongoing stressors and have negative impacts on social and emotional wellbeing.
7. The centrality of Kinship must be recognised.
8. The cultural diversity and many ways of living must be understood.
9. The great strengths of Aboriginal and Torres Strait Islander people, including; creativity, endurance and deep understandings of the relationships between human beings and the environment must be celebrated.

Application of the Gee Model to Our Analysis

As comprehensively described in the Research Report, the importance of applying the Gee et al. (2014) framework to an analysis of the LSIC data is threefold: one, through obtaining meaningful results, it shows the value of using a strengths-based approach that privileges an Aboriginal and Torres Strait Islander understanding of social and emotional wellbeing; two, it shows the centrality of positive social and emotional wellbeing – that is, of having a good Connection to Country, Culture, Community, Family and Kinship, Mind and Emotions, Body, and Spirituality and Ancestors – for Aboriginal and Torres Strait Islander Study Children and Youth growing up strong; and three, it shows the link between positive life events/outcomes and positive social and emotional wellbeing for Aboriginal and Torres Strait Islander Study Children and Youth.

Importantly, a finding that is not new – but that should be restated – is that culture helps LSIC Study Children or Study Youth to grow up strong. In the words of one LSIC Primary Carer, it 'helps spirits stay strong' – which we have paraphrased as part of the title of the full report of this study.

Our Findings in Relation to Existing Research

Our analysis of social and emotional wellbeing using the Gee et al. (2014) framework demonstrates that the framework can be applied to LSIC quantitative data, adding to the body of literature that already documents how this framework has been used to conceptualise social and emotional wellbeing for Aboriginal and Torres Strait Islander peoples (Black et al., 2024; Dudgeon et al., 2020; Dudgeon et al. 2022; Murrup-Stewart et al., 2021). Our findings that all domains are collectively and simultaneously related to social and emotional wellbeing is consistent with both (a) the Gee et al. (2014) framework and (b) literature

which highlights the importance of supporting connections between and within every domain to improve social and emotional wellbeing (e.g., Dudgeon et al., 2020).

That Connection to Family and Kinship and Connection to Culture, Country, Spirituality and Ancestors had the strongest relationship with social and emotional wellbeing also mirrors the findings from the qualitative analysis that these domains are particularly important in supporting positive social and emotional wellbeing (Dudgeon et al., 2022; Murrup-Stewart et al., 2021).

Our findings corroborate existing research on the ways in which culture supports LSIC Study Children to grow up strong. In the content analysis of LSIC Primary Carer text responses from Wave 1 on 'What it is about Aboriginal and/or Torres Strait Islander culture that will help the study child grow up strong?', Martin (2017) identified eight themes: family; culture; personal traits; identity; heritage; relationships; history; and land/Country (Martin, 2017). Prehn et al. (2021) undertook a content analysis of Fathers' responses to this same question in LSIC Waves 1 and 7, identifying 10 typologies or themes: being proud; community; Country; family; identity; language; learning culture; spirituality; values; and other.

We conducted a qualitative content analysis of Primary Carer responses to this question across Waves 1 and 8, identifying 20 themes – all of which had some connection to the themes identified by Martin (2017) and Prehn et al. (2021).

We also undertook a content analysis of a related question asked of LSIC Study Youth in Wave 13 – 'What does "grow up strong" mean for you? Not just physically'. We further demonstrated the value of LSIC in providing qualitative insights on cultural determinants of the social and emotional wellbeing of Aboriginal and Torres Strait Islander children from multiple perspectives: Primary Carers (including mostly mothers, and a small number of responses from a range of other carers and family relations) and Study Children or Study Youth.

Our analysis also supports existing research on what the parents and families of Study Children do to help Study Children learn about Aboriginal and Torres Strait Islander culture. For example, Section Three of the Research Report presented findings of a qualitative content analysis of Wave 5 text responses about the things that Primary Carers and other family members do with Study Child to help them learn Aboriginal and/or Torres Strait Islander culture. Prehn et al. (2021) undertook content analysis of LSIC Fathers' text responses to a similar question from Wave 4 – 'What sorts of things do you do to pass on Aboriginal and/or Torres Strait Islander culture to (STUDY CHILD)?'. The 18 themes identified by Prehn et al. (2021) align closely with the 15 themes we identified. This provides a valuable point of comparison between the types of activities Primary Carers (predominantly mothers) and Fathers do with the Study Child to pass on culture

To seek further insights into how culture is passed on to Study Children, we undertook complementary quantitative analysis of a closely related LSIC question that has been asked of Primary Carers across Waves 3, 6 and 12: 'What is it about Aboriginal/Torres Strait Islander/Aboriginal and Torres Strait Islander culture that you (and your partner) would like to pass on to (STUDY CHILD) at this age?'. Martin (2017) analysed Primary Carer responses to this question from Wave 3, identifying geographic variation in Primary Carer responses by level of relative isolation. This highlights the value and potential of LSIC data for exploring geographic, cultural and demographic influences on parent's and children's perspectives on the role of culture in growing up strong and the types of activities that help children to learn about Aboriginal and Torres Strait culture.

The findings from the quantitative analyses in Sections Four, Five and Six of the Research Report demonstrate that the social and emotional wellbeing of Aboriginal and Torres Strait Islander children is strongly connected to other dimensions of wellbeing, such as physical health, financial wellbeing, Connection to Culture and social relationships. Social and emotional wellbeing is also influenced by factors at the individual, family, local community and school levels.

Overall, these findings not only support the theoretical framework for Gee et al. (2014) but are also consistent with findings in previous empirical studies. For instance, in a large-scale study of Aboriginal children in Western Australia, Zubrick et al. (2005) found that having poor physical health (including disability and functional impairment), having a Primary Carer experiencing poor mental health, and being exposed to multiple life stressors are significantly associated with a low level of social and emotional wellbeing. Other studies have identified factors such as bullying, racial discrimination and frequent housing mobility as risk factors for social and emotional wellbeing (e.g., Cave et al., 2019; Macedo et al., 2019; Priest et al., 2011; Shepherd et al., 2012), whereas regular participation in cultural events and employment of the Primary Carer have been identified as protective factors (e.g., Lovett, 2017; Shepherd et al., 2012).

Our Research Report presents further insights into the factors influencing the social and emotional wellbeing of Aboriginal and Torres Strait Islander children and youth. It shows that a positive school environment, such as experiencing a sense of safety, support, or belonging at school is pivotal in fostering a high level of social and emotional wellbeing and reducing self-harm and suicide risks. In line with this, Lovett (2017) found that LSIC Children with a 'warm relationship' with their teachers are more likely than other children to experience positive social and emotional wellbeing.

Summary Report Structure

The structure of this Summary Report follows that of the Research Report, with six sections acting as an outline and guide to each corresponding section of the Research Report.

Section One, comprises much of the above discussion, including an exploration of social and emotional wellbeing, its various frameworks and definitions, and an overview of the Gee et al. (2014) framework. We distinguish between social and emotional wellbeing, and more narrow concepts such as mental health.

In **Section Two**, we describe how we identified a series of quantitative survey questions from LSIC Waves 11 and 12 that recorded the LSIC Study Youth's connection to the domains of Country, Culture, Community, Family and Kinship, Mind and Emotions, Body, and Spirituality and Ancestors.

We found that social and emotional wellbeing for LSIC Study Youth in Wave 11 was highest when they had strong Connections to Body, Family and Kinship, Community, and Culture, Country, Spirituality and Ancestors. While all the different domains that made up social and emotional wellbeing were important, it was a Study Youth's Connection to their Family and Kinship and their Connection to Culture, Country, and Spirituality and Ancestors, that had the strongest relationship to positive social and emotional wellbeing overall.

In **Section Three**, we describe how we analysed the qualitative data to explore the effects of broad cultural determinants on the LSIC Study Child or Study Youth's experience of social and emotional wellbeing.

In **Section Four**, we describe the challenges associated with finding the necessary questions in enough waves of the study to measure social and emotional wellbeing holistically using the Gee et al. (2014)

framework. We did, nonetheless, still consider the impacts of a range of social, historical, cultural and political determinants on social and emotional wellbeing as measured by the SDQ.

We found that two broad classes of factors act as determinants of social and emotional wellbeing among LSIC Study Children or Study Youth: risk factors and protective factors. Risk factors either pose direct threats to social and emotional wellbeing or have indirect impacts through, for instance, limiting a family's ability to access basic resources. Protective factors either promote positive social and emotional wellbeing in their own right or reduce negative impacts in the presence of life stressors. If Connection to Culture is measured as 'level of knowledge of cultural identity' and 'level of engagement in cultural practices', Study Children or Study Youth who show a stronger connection to Aboriginal and Torres Strait Islander cultures tended to have a higher level of social and emotional wellbeing.

In **Section Five**, we show how we considered the factors that influence self-harm and suicide. This analysis maintained applicability to Gee et al.'s holistic framework of social and emotional wellbeing by exploring social, historical and political impacts on mental health.

We found that self-harm and suicidal behaviours are prevalent among LSIC Study Youth. Most LSIC Study Youth sought help when experiencing emotional or personal problems. School environments are key predictors of self-harm and suicidal behaviour.

In **Section Six**, we show how we followed several factors of social and emotional wellbeing as they changed over time, finding that the proportion of LSIC Study Children with positive social and emotional wellbeing increased from 61% at ages 2–7 years in 2010 to 73% at ages 13–18 years in 2021.

We found that while the proportion has increased across all areas, remote areas saw the fastest increase. We also found that LSIC Study Children felt their connection to culture had improved over time. Despite increased proportions of positive social and emotional wellbeing and connection to culture, the reverse is the case for Primary Carers of LSIC Study Children, whose wellbeing outcomes have worsened over time. We also found that physical health outcomes for Study Children have worsened over time. Furthermore, LSIC Study Children have experienced a rise in exposure to unsafe school environments. Importantly though, we found that the COVID-19 restrictions in 2020 corresponded with improved wellbeing outcomes for Primary Carers of Study Children.

What follows is an outline and guide to each section in the Research Report.

Section One: Applying Gee's model

Section One of the Research Report comprises much of the above discussion, and an overview of the Gee et al. (2014) framework.

In this section of the Research Report, we explain how we adopted and explored a novel approach to measuring social and emotional wellbeing in LSIC, by exploring the responses of LSIC Study Children or Study Youth and Primary Carer. Inspired by a holistic construct of social and emotional wellbeing outlined by the Aboriginal-led team Gee et al. (2014), it shows how we used an exploratory factor analysis and structural equation model to identify and test which LSIC variables express holistic social and emotional wellbeing. Although our approach requires further development for conclusive and longitudinal use, the Research Report demonstrates that a promising factor structure exists for a series of LSIC variables in Waves 11 and 12. When modelled collectively, these factors appear to express the interconnected and interrelated framework for social and emotional wellbeing outlined by Gee et al. (2014).

Section Two: Quantitatively Exploring the Gee et al. (2014) Framework in the Longitudinal Study of Indigenous Children

What We Found

Wellbeing is holistic

The social and emotional wellbeing for LSIC Study Youth in Wave 11 was highest when they had strong Connections to Body, Family and Kinship, Community, and Culture, Country, Spirituality and Ancestors. LSIC Study Youth with good social and emotional wellbeing also tended to have a good Connection to Mind and Emotions in Wave 12. We summarise our model onto the original Gee et al. (2014) framework in Figure 2.

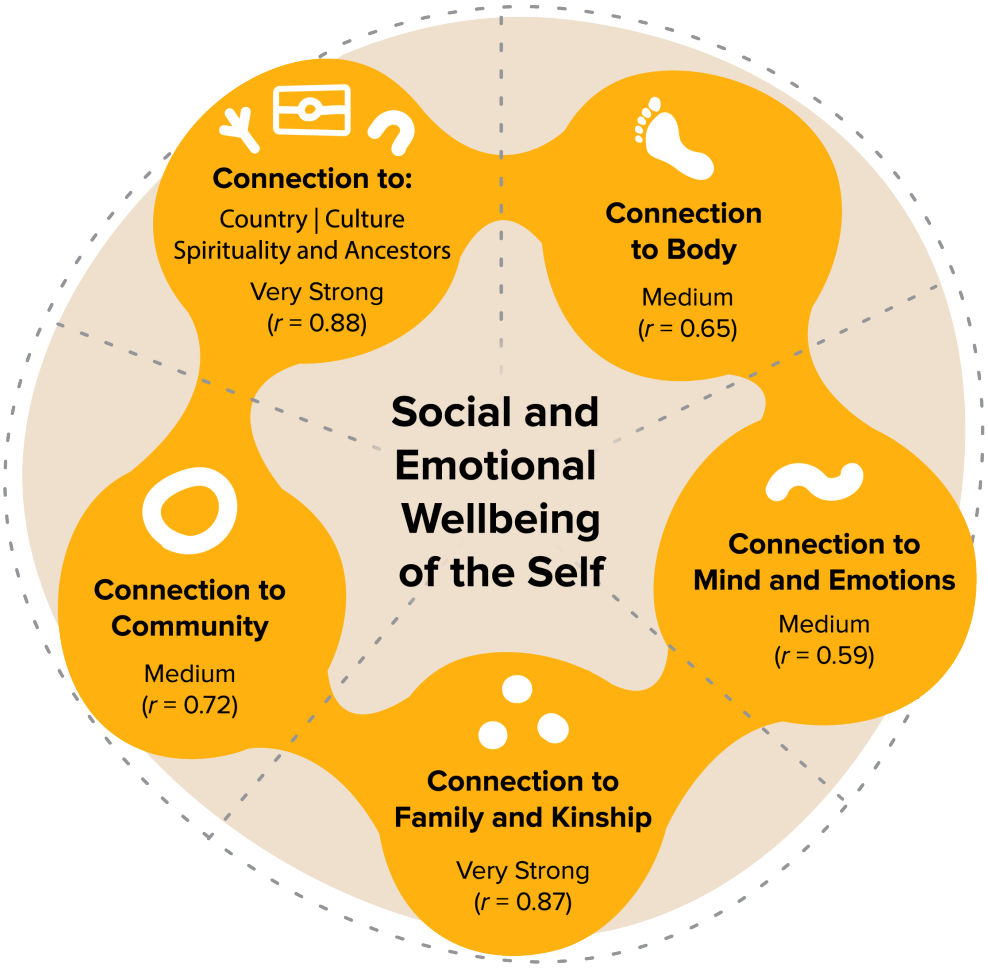

Figure 2: Our adaption of Gee et al.'s (2014) framework using LSIC responses

Family and culture are central

While all the different domains that made up social and emotional wellbeing were important, it was an LSIC Study Youth's Connection to their Family and Kinship and their Connection to Culture, Country, Spirituality and Ancestors, that had the strongest relationship to positive social and emotional wellbeing overall.

Implications

Measuring social and emotional wellbeing as understood by an Aboriginal and Torres Strait Islander perspective is possible and should be used in future work that examines social and emotional wellbeing in LSIC data. This could be by applying the same Aboriginal and Torres Strait Islander understanding of social and emotional wellbeing to other waves within LSIC or by developing future LSIC questions based around this understanding.

More broadly, future analyses of LSIC data should work on decolonising the methods used. The Research Report suggests that approaching the analysis of LSIC data using an Aboriginal and Torres Strait Islander standpoint generates more meaningful results. This is particularly important for non-Indigenous analysts. Using an Aboriginal and Torres Strait Islander standpoint provides a solid grounding for non-Indigenous analysts to question their own assumptions and biases in how they approach analysing LSIC data.

Each area (domain) of social and emotional wellbeing was interrelated with every other area. Therefore, for Aboriginal and Torres Strait Islander children and youth to have good social and emotional wellbeing and grow up strong, these children must be supported to develop strong connections in each area. To do this, it will be important that families and communities are supported to raise their children with the opportunities to develop a strong Connection to their Culture, Country, Body, Mind and Emotions, Spirituality and Ancestors, Kinship, and the families and communities themselves. This is particularly relevant for Closing the Gap Life Outcome 14, 'Aboriginal and Torres Strait Islander peoples enjoy high levels of social and emotional wellbeing', as the current measure does not capture social and emotional wellbeing as understood from an Aboriginal and Torres Strait Islander perspective.

Aboriginal and Torres Strait Islander understandings of each of these domains of social and emotional wellbeing must be central to any policies or programs that seek to help Aboriginal and Torres Strait Islander families and communities support their children to grow up strong. Aboriginal and Torres Strait Islander peoples must be part of the conversations that lead to new policies and programs, be part the implementation of new programs to make sure they meet the needs of their communities and be part of any research that determines how successful these policies or programs have been.

At the centre of this finding is the importance of self-determination and community-led solutions. There is great strength and diversity in Aboriginal and Torres Strait Islander cultures. Communities know what they need.

How We Did It

We wanted to know if and how we could measure social and emotional wellbeing for the Study Children or Study Youth participating in LSIC by using their and their parents' answers to different questions. To do this, we took the following steps:

1. Two researchers looked through all LSIC questions that were asked of the LSIC Study Children or Study Youth and their primary caregiver, making note of any questions that could be used to

measure Study Children or Study Youth social and emotional wellbeing as understood by the Gee et al. (2014) framework.

2. Taking these lists of questions, we discussed each question, keeping those which everyone agreed on and deciding on which of the following domains of social and emotional wellbeing they could measure:
    a. Connection to Body
    b. Connection to Mind and Emotions
    c. Connection to Family and Kinship
    d. Connection to Community
    e. Connection to Culture, Country, Spirituality and Ancestors.
3. Taking this set of questions and the domains they thought the questions measured, we decided what questions within each domain had in common. Commonality was considered in terms of what the question was trying to elicit and how participants responded. Factor analysis was used for this step.
4. Using the factor analysis results and our thoughts on which questions were important, we grouped the questions within each domain according to what they seemed to be measuring. For example, some questions in the Connection to Family and Kinship domain asked about how well LSIC Study Youth got on with their family as a whole and other questions asked about their relationship with their mother.
5. We then looked at how these groupings of questions within each domain, and the domains overall, were interrelated, using a structural equation modelling method. Central to this step was the Aboriginal and Torres Strait Islander understanding of social and emotional wellbeing as documented by Gee et al. (2014), which showed that all domains of social and emotional wellbeing were interrelated.

A summary of the themes used for each domain is outlined in Figure 3.

Figure 3: A summary of the themes and how they map onto each domain in our model

Section Three: Cultural Determinants of Social and Emotional Wellbeing

What We Found

We show that LSIC gathers valuable data from both Primary Carers and Study Children, at various stages in the children's lives, which offer insights into the role and significance of culture and other factors/determinants to the social and emotional wellbeing of Aboriginal and Torres Strait Islander children.

Culture helps Aboriginal and Torres Strait Islander children grow up strong

When asked what it is about Aboriginal and/or Torres Strait Islander culture that helps children grow up strong in Waves 1 and 8, LSIC Primary Carers referred most often to: family connection; identity and belonging; cultural knowledge and learning; pride and self-confidence; and respect, morals and protocols. When asked what 'grow up strong' means in Wave 13, many of the responses of LSIC Study Youth aligned with one or more of the seven social and emotional wellbeing domains.

When asked what it means to grow up strong in Wave 13, LSIC Study Youth referred to both social and cultural determinants outlined in Gee et al.'s (2014) framework of holistic social and emotional wellbeing. For example, LSIC Study Youth frequently mention the importance of both social and cultural determinants, such as a 'good education', 'good job', along with 'doing one's best', 'achieving goals', 'doing the right thing' along with 'keeping culture strong', 'respect and support', 'Listen to my old people and learn, knowing my Country', 'Learn to respect, proud of my identity', and 'To be strong, independent and know my Country, language and my culture'.

When considered together, the perspectives of Primary Carers and Study Youth give rich insights into the social and cultural determinants of each domain of social and emotional wellbeing and 'growing up strong'. Some perspectives are depicted in Figure 4.

Figure 4: Study Youth and Primary Carer perspectives on the cultural determinants of 'growing up strong' and social and emotional wellbeing

[1] Quotes from Study Youth's perspective in 533 responses to the question "What 'growing up strong' means to you, not just physically?" Wave 13 (2020), respondents aged between 12 and 17.

[2] Quotes from Primary Carer's perspective in 2,399 responses to the question "What is it about Aboriginal and Torres Strait Islander culture that will help your Study Child grow up strong?" Responses from Wave 1 (2008) and Wave 8 (2015)

The role that different elements of culture play in supporting the social and emotional welling of LSIC Study Children

Our qualitative content analysis of LSIC Primary Carers' responses provides valuable insights into what Primary Carers, mostly the mothers of LSIC Study Children, see as making up culture and the role that these different elements of culture play in supporting the social and emotional wellbeing of Aboriginal and Torres Strait Islander children.

Our findings show how ***connection*** to culture is gained through social experience and involves interaction with families, grandparents, Elders and communities.

Our findings reinforce the arguments presented in the Culture is Key report which called for the embedding of cultural determinants in policy across the whole-of-government (Lowitja Institute, 2021).

Our findings point to the important role of schools in providing not only educational opportunities but also opportunities for Aboriginal and Torres Strait Islander children to engage in cultural activities and programs.

Family connection and family history are very important aspects of culture

Family connections (or bonds, networks, ties and values) was the aspect of culture that was most frequently mentioned by Primary Carers in relation to helping Study Children grow up strong in Waves 1 and 8. When Primary Carers were asked in Waves 3, 6 and 12 to select the five most important things from Aboriginal and/or Torres Strait Islander culture they would like to pass on to their child from a list of 13 pre-defined options, family history was the option most often chosen by Primary Carers across all three waves.

Parents and families pass culture on to children in many ways

In Wave 5, Primary Carers were asked what sort of activities their child does with them or other family members to learn about Aboriginal and/or Torres Strait Islander culture. The five themes that the most responses related to were: storytelling and yarning; bush tucker/island food; dancing, singing and music; language; and cultural activities and events. We identified a further 10 themes across a wide range of cultural activities.

When asked to choose the five most important things about Aboriginal and/or Torres Strait Islander culture they would like to pass on to their child, four of the 12 options provided were chosen by more than half of Primary Carers across all three waves: family history; showing respect; pride in identity; and knowing Country. Over the three waves, the fifth most common theme varied between: bush tucker, hunting, fishing; family networks; and traditions and ceremony.

Aboriginal and Torres Strait Islander identity is important to young people

In Wave 11, LSIC Study Youth were asked three questions about the importance of being Aboriginal and/or Torres Strait Islander. In response to the first question: 37% said being Aboriginal and/or Torres Strait Islander was 'central to who you are' and 31% said it was 'important, but not the only thing'. In response to the second question: 57% said it was 'extremely important to me' and a further 18% indicated that it was very important. When asked about the importance of 15 different aspects of being Aboriginal and/or Torres Strait Islander, the majority of Study Youth saw all as being of high or extreme importance – this included a number of aspects that aligned with themes from our content analysis such as: your Country (82%);

knowing about your Indigenous family connections (79%); your people, your Mob (79%); Indigenous events (77%); ways and laws of Indigenous ancestors (72%); knowing the language of your people (68%); knowing Indigenous stories (67%); and bush foods, medicines (60%). The two most popular aspects were: the Aboriginal and/or Torres Strait Islander flag (87%) and being strong and deadly (86%).

Implications

Our insights are built from the ground up, directly from the words of over 1,000 Primary Carers, who are mostly the mothers of LSIC Study Children or Study Youth, alongside the perspectives of LSIC Study Youth.

Section Three of our Research Report contributes to a growing evidence base on the cultural determinants of health and wellbeing for Aboriginal and Torres Strait Islander peoples. Importantly, it provides insights into the ongoing, contemporary importance of culture in supporting the social and emotional wellbeing of Aboriginal and Torres Strait Islander children from the perspective of both parents and children.

As part of Aboriginal and Torres Strait Islander peoples' longstanding and ongoing pursuit of self-determination and decolonisation in health policy, the Lowitja Institute has in recent years called for cultural determinants to be embedded in policy across the whole-of-government (Lowitja Institute, 2021). This is part of a rights, strengths, and evidence-based approach to improving health and wellbeing outcomes and closing the gap which centres Aboriginal and Torres Strait Islander peoples, perspectives, priorities and knowledges.

Our findings highlight the importance of Aboriginal and Torres Strait Islander children staying connected to their family, community, culture, and Country. These connections are essential for nurturing a child's sense of identity, belonging, and wellbeing, as expressed in numerous commissioned reports and research publications. Additionally, maintaining cultural connections is vital to a child's overall wellbeing. For example, our findings reinforce the vital importance of Aboriginal and Torres Strait Islander children remaining in contact with their family and extended family, and members of the community who are considered family, in out-of-home care as called for in various reports over the years including the Family as Culture Review Report (Davis, 2019, p. 322).

Our findings show the important role of schools in providing not only educational opportunities, but also opportunities for Aboriginal and Torres Strait Islander children to engage in cultural activities and programs.

Our findings also show that the LSIC study provides a rich source of qualitative data that centres the perspectives, priorities and knowledges of Aboriginal and Torres Strait Islander peoples. LSIC data provides a vital means of building the evidence base for cultural determinants driven policy and program development by governments, especially as these policies and programs seek to improve the lives and wellbeing of Aboriginal and Torres Strait Islander children.

How We Did It

We wanted to explore how LSIC Study Children or Study Youth and their Primary Carers saw the relationship between culture and social and emotional wellbeing in their own words. To do this, we took the following steps:

1. Examined all the LSIC questions where people gave open-ended text responses, taking note of questions that would likely elicit suggestions that support the social and emotional wellbeing of Aboriginal and/or Torres Strait Islander children.
2. To decide which questions to analyse, the questions needed to:
    a. have a strengths-based approach to the role of culture in promoting social and emotional wellbeing
    b. provide a wealth of cultural content, and/or
    c. have policy relevance.
3. To make a final selection to analyse, we created a shortlist of questions and looked at a sample of the responses to each question.
4. Three questions were selected for detailed analysis:
    a. What is it about Aboriginal and Torres Strait Islander culture that will help (STUDY CHILD) grow up strong? (asked of Primary Carers in Waves 1 and 8)
    b. What sort of activities does (STUDY CHILD) do with you or other family members to learn about Aboriginal and/or Torres Strait Islander culture? (asked of Primary Carers in Wave 5)
    c. What does 'grow up strong' mean for you? Not just physically (asked of Study Youth in Wave 13).
5. For each of these questions, we used a 'content analysis' method which involved reading every response to develop a set of themes 'from the ground up'.
6. We then looked at how these themes fit with the seven domains of the Gee et al., (2014) social and emotional wellbeing framework.
7. We also identified three closed-ended or multiple-choice LSIC questions that fit the selection criteria and provided additional information on what 'growing up strong' means to young people. These three questions were asked of Study Youths in Wave 11 and relate to the perceived importance of being Aboriginal and/or Torres Strait Islander.

Section Four: A Longitudinal Analysis of the Factors Associated with Social and Emotional Wellbeing in Aboriginal and Torres Strait Islander Study Children

What We Found

The social and emotional wellbeing of LSIC Study Children is determined by a combination of both risk and protective factors

Child demographics, health, cultural connection and social relationships are strongly linked to social and emotional wellbeing. Notably, children with very good or excellent overall health exhibit significantly higher levels of wellbeing, while those with health issues, particularly health issues affecting people living with disability, tend to experience a marked decline in their social and emotional wellbeing. Cultural

connection, such as participating in cultural practices and knowing one's family identity, boosts wellbeing, as do strong interpersonal skills and close relationships. Family factors such as the primary carer's education, mental health and employment positively affect social and emotional wellbeing, while financial stress, housing problem, and stressful life events negatively impact it. Furthermore, living in socioeconomically advantaged areas and positive school environments fosters social and emotional wellbeing, while bullying and racial discrimination at school harm it.

Error! Reference source not found. shows that two broad classes of factors emerged as determinants of social and emotional wellbeing: risk factors and protective factors. Risk factors either pose direct threats to social and emotional wellbeing or have indirect impacts through, for instance, limiting LSIC families' ability to access basic resources. Protective factors either promote positive social and emotional wellbeing in their own right or reduce negative impacts in the presence of life stressors.

Risk factors:

- experiencing bullying or unfair treatment at school
- experiencing racial discrimination at school
- having poor physical health (e.g.skin problems and ear problems) including health issues arising from disability
- living in a family experiencing financial stress
- living in a family experiencing major life events, such as humbugging, arrest by police and family arguments, and
- living in a family experiencing poor housing conditions, such as overcrowding and houses that need major repairs.

Protective factors:

- very good/excellent physical health
- parents being in a paid job
- Primary Carer acquiring a non-school qualification
- Primary Carer having good mental health
- regularly practicing culture, such as attending cultural events and ceremonies and learning cultural practices and arts
- having high cultural knowledge, such as knowing one's clan/tribe, people, and family stories
- having good interpersonal skills and close relationship with many people
- experiencing a positive school climate, such as schools being supportive and safe, and
- living in a more socioeconomically advantaged area, where many households have high incomes, and many people work in skilled occupations.

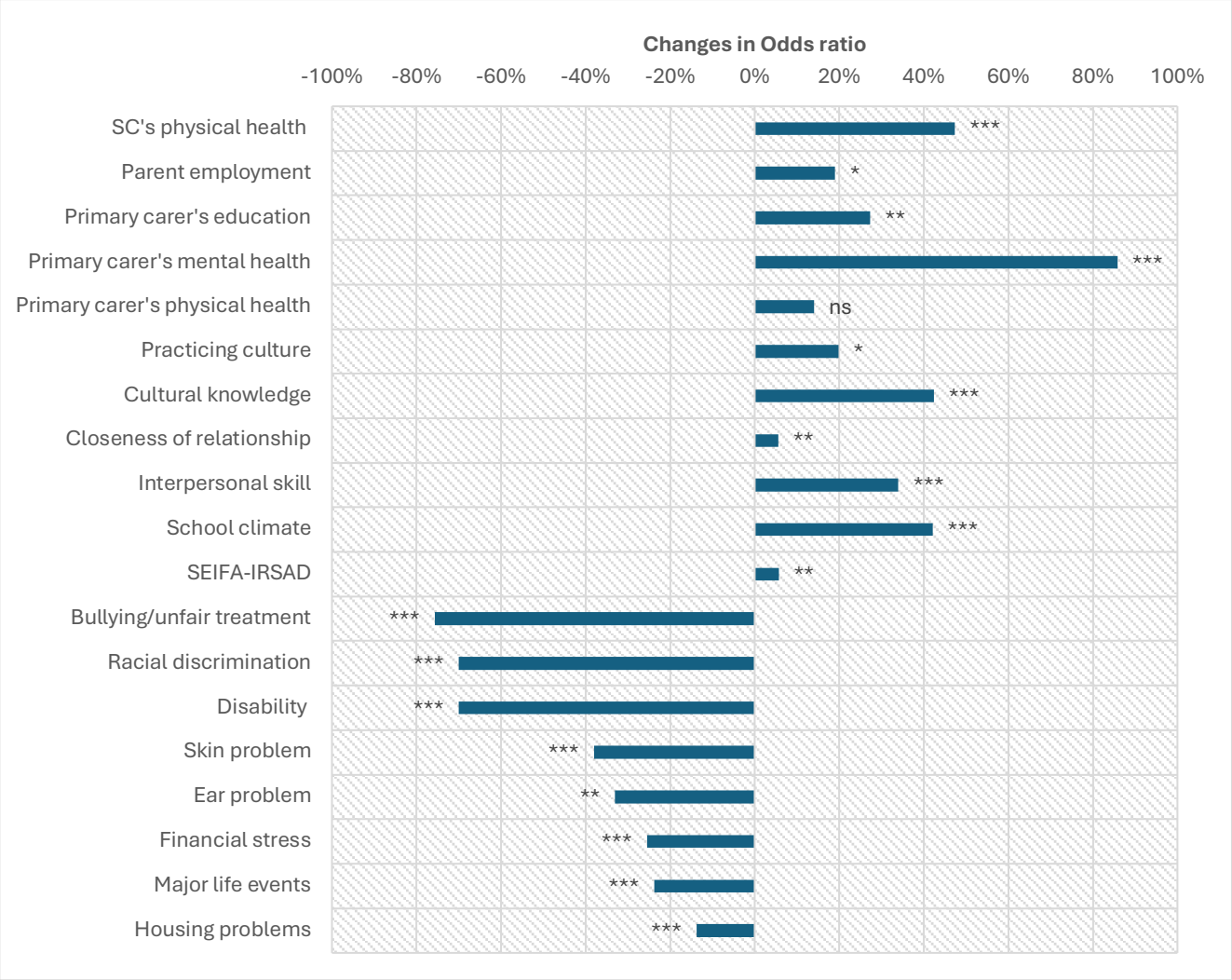

Figure 5: Predictors of social and emotional wellbeing

Note: *** Statistically significant at the 1% level; ** significant at the 5% level; * significant at the 10% level; ns represents non-statistical significance. Changes in odds ratio are not directly comparable as the scaling is different between each predictor variables. The variables 'Major life events' and 'Closeness of relationship' are count; 'Primary carer's mental health', 'Practicing culture', 'Cultural knowledge', 'Interpersonal skills' and 'School climate' are standardised factors scores and the rest are dichotomous. Please refer to Section Four of the Research Report for variable definition.
SEIFA-IRSAD = Socio-Economic Index for Areas–Index of Relative Socioeconomic Advantage and Disadvantage

Connection to Culture features prominently as a protective factor for social and emotional wellbeing

If Connection to Culture is measured as 'level of knowledge of cultural identity' and 'level of engagement in cultural practices', LSIC Study Children who show a stronger connection to Aboriginal and Torres Strait Islander cultures, tended to have a higher level of social and emotional wellbeing. After conducting a multivariate analysis that accounted for differences in age, gender, physical health, Primary Carer/partner employment, Primary Carer's education level, financial stress, exposure to major life events, local-area socioeconomic status and geographic remoteness, the relationship between Connection to Culture and social and emotional wellbeing remained statistically significant (see Research Report, Appendix Table A35).

Implications

Our analysis underlines that changes in the social and emotional wellbeing of Aboriginal and Torres Strait Islander children cannot be attributed to a single factor. This highlights the need for a holistic approach to improving social and emotional wellbeing outcomes.

The results also highlight the importance of policies and programs that enhance the socioeconomic conditions of Aboriginal and Torres Strait Islander families, create supportive and inclusive school environments, and mitigate bullying and racial discrimination. Promoting strong cultural ties and social relationships is also crucial for fostering social and emotional wellbeing in Aboriginal and Torres Strait Islander children.

How We Did It

Social and emotional wellbeing was measured using the SDQ score, a screening tool for emotional and behavioural difficulty in children and young people (Goodman, 1997). We examined data that followed children longitudinally across five LSIC waves as they aged from 2-7 years to 11-16 years. Drawing on the existing literature (e.g., Zubrick et al., 2005), the SDQ scores were grouped into normal (scores 1-13) and borderline/abnormal (scores 14-40) categories. The normal category represented a positive state of social and emotional wellbeing.

The Gee et al. (2014) framework suggests the social and emotional wellbeing of Aboriginal and Totters Strait Islander children would be determined by several factors that may interact with each other. Therefore, multivariate analysis techniques were used to measure the independent effect of each determinant factor.

Section Five: Self-Harm and Suicidal Behaviours Among LSIC Study Youth – Examining the Role of School Environments

What We Found

Self-harm and suicidal behaviours are prevalent among LSIC Study Youth

In 2021, 11% of LSIC Study Youth intentionally self-harmed, 7% considered taking their own life, 6% planed how to take their own life and 4% attempted suicide. Females were more likely than males to show self-harm and suicidal behaviours. About 11% of LSIC Study Youth and 13% of their Primary Carers reported that suicide is a big/very big problem in their community. The rates are higher in remote areas than non-remote areas.

Most LSIC Study Youth sought help when experiencing emotional or personal problems

Over 90% of LSIC Study Youth who experienced emotional or personal problems sought help from others. Parents were the most common source of help, followed by friends, and brothers or sisters. However, for LSIC Study Youth who showed self-harm or suicidal behaviours, friends were the most important source of help, followed by parents and boyfriends or girlfriends.

School environments are key predictors of self-harm and suicidal behaviour

The importance of positive school environments has long been recognised as a key underlying factor for fostering engagement, retention and completion among Aboriginal and Torres Strait Islander students. This study found that positive school experiences, marked by a strong sense of support, belonging, respect and safety, are associated with reduced risks of self-harm and suicidality. Conversely, teacher racism, bullying, racial discrimination and witnessing the unfair treatment of Aboriginal and Torres Strait Islander peoples significantly raise the risks of self-harm and suicide (see **Error! Reference source not found.**). These findings underscore that creating a positive school environment for Aboriginal and Torres Strait Islander students offers benefits that extend well beyond improved educational outcomes, contributing to better mental health and wellbeing.

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In sum, we found the factors associated with increased self-harm and suicide risks are:

- being bullied or unfairly treated at school
- being racially discriminated at school
- seeing other people being unfairly treated at school simply because they are Aboriginal and or Torres Strait Islander, and
- having teachers with racist behaviour toward Aboriginal and Torres Strait Islander students.

We found the factors associated with reduced self-harm and suicide risks are:

- having a supportive adult or friend at school, e.g., having someone who listens to the Study Youth, who cares for the Study Youth and who believes in the Study Youth
- experiencing a positive school climate, e.g., feeling proud of belonging to school, being treated with as much respect as other students; being understood and respected by teachers; having a teacher or another adult to talk to when experiencing problems, and
- feeling safe at school.

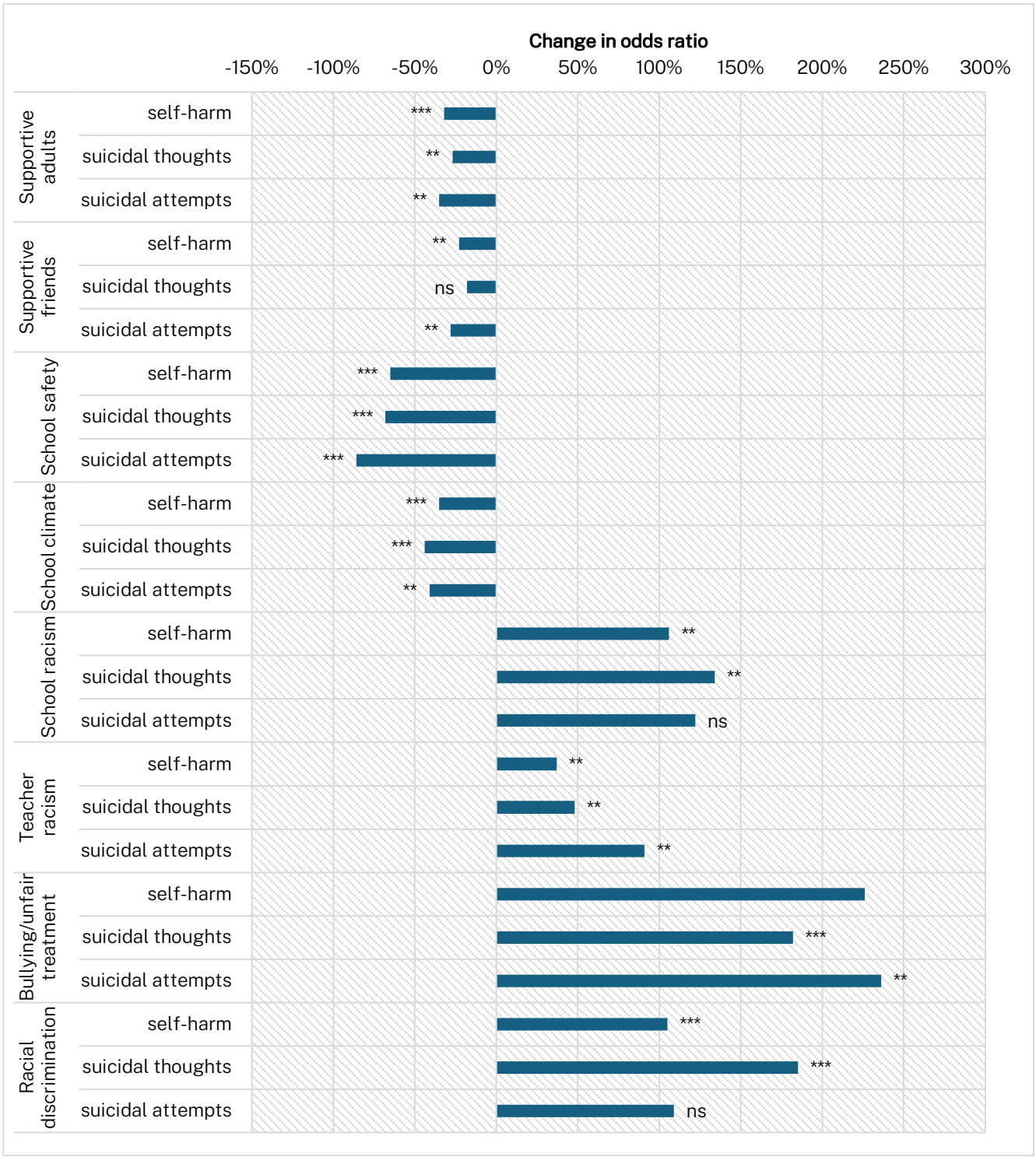

Figure 6: School environment as predictor of self-harm and suicidal behaviours

Note: *** Statistically significant at the 1% level; ** significant at the 5% level; * significant at the 10% level. ns represents non-statistical significance. Changes in odds ratio are not directly comparable as the scaling is different between each predictor variable.

Implications

While self-harm and suicidal behaviours among Aboriginal and Torres Strait Islander peoples are influenced by a range of factors, including the ongoing effects of colonisation, these findings highlight that schools can play a vital role in reducing self-harm and suicide risks. Schools must:

- promote positive student-teacher and student-peer relationships
- improve processes for eliminating bullying and racism, and
- build teacher cultural responsiveness.

How We Did It

We compared the commonness (prevalence rates) of suicide and self-harm among LSIC youth and Primary Carer responses. 'Don't know' and 'Refused' were included in the calculation of prevalence rates as the removal of such responses would have inflated these rates. However, this does not mean that 'Don't know' or 'Refused' responses were treated as 'yes' or 'no' in the calculations. Instead, the percentage of Study Youth who self-harmed or experienced suicidal thoughts was calculated from the total number of participants, including those with 'Don't know' or 'Refused' data. As such, the rates should be taken as lower bound estimates.

The association between school environment and self-harm and suicidal behaviours were measured using multivariate logit models. Here, the 'Don't know' and 'Refused' responses were removed from the analysis. For each school variable listed in **Error! Reference source not found.**, the associations with self-harm and suicidal behaviours were measured after accounting for differences in age, gender, remoteness and exposure to major life events.

Section Six: Trajectories of Social and Emotional Wellbeing and Related Outcomes

What We Found

The social and emotional wellbeing of LSIC Study Children has improved over time

The proportion of LSIC Study Children with positive social and emotional wellbeing increased from 61% at ages 2-7 years in 2010 to 73% at ages 13-18 years in 2021. While the proportion has increased across all areas, remote areas saw the fastest increase. This is perhaps because, during the same period, LSIC Study Children in remote areas experienced a higher level of engagement with Aboriginal and Torres Strait Islander culture than did their peers in major cities and regional areas.

Physical health outcomes for LSIC Study Children have worsened over time

The proportion of LSIC Study Children who have not had trouble getting to sleep or staying asleep was 62% in 2021, down from 76% in 2008. While a declining trend is evident across major cities, regional areas, and remote areas, the proportion of people without difficulty sleeping remained highest in remote areas. The proportion of Study Children with very good/excellent overall health (as rated by the Primary Carer)

also has declined from 79% in 2008 to 62% in 2021. While the proportion has trended downward across all the remoteness areas, remote areas have seen the fastest decline in very good/excellent health outcomes. Remote areas have also continued to have the lowest proportion of children with very good/excellent health status. Oral health problems and eye problems have become more prevalent over time, and oral health problems have remained the most common types of health problem.

LSIC Study Children's connection to Aboriginal and Torres Strait Islander cultures has improved over time

The proportion of LSIC Study Children who regularly attended Aboriginal and Torres Strait Islander cultural events and ceremonies, and the proportion of those who regularly learned cultural practices have increased over time in remote areas and major cities whilst we see a decrease in regional areas. Meanwhile, the proportion of Study Children learning Aboriginal and Torres Strait Islander arts has increased over time in all areas. Overall, rates of engagement in Aboriginal and Torres Strait Islander cultures have remained highest in remote areas.

LSIC Study Children have experienced a rise in exposure to unsafe school environments

Though the proportion of LSIC Study Children who feel safe remained high (over 80%), it dropped from 89% in 2013 to 82% in 2021. Remote areas have continued to have the highest proportion of children who feel safe at school. The prevalence of racial discrimination has also trended upward across all areas. It remains least prevalent in remote areas.

Wellbeing outcomes appear to have worsened over time for Primary Carers of LSIC Study Children

The proportion of Primary Carers of LSIC Study Children without life stressors have trended downward between 2008 and 2021, as has the proportion of those who report to be coping well. Overall, remote areas have had the lowest proportion of Primary Carers coping well despite having the highest proportion of Primary Carers without life stressors. This could be linked with the unique challenges of living in remote areas, where socioeconomic disadvantages such as poverty, unemployment and poor housing conditions are more prevalent (ABS, 2019). In addition, though traditional community support could be stronger in remote communities, geographic isolation can make it more difficult for Primary Carers to access wider networks or services that could help cope with life stressors.

LSIC Families have experienced improved socioeconomic outcomes over time

The proportion of LSIC Families who have experienced financial stress has dropped from 31% in 2008 to 20% in 2021, and the proportion of LSIC Families whose houses needed major fixing has dropped from 40% to 22% during the same period. The proportion of LSIC Families who have experienced multiple major life events (i.e. two or more events) has also dropped from 83% in 2008 to 75% in 2021. Overall, remote areas have had the lowest proportion of LSIC Families experiencing financial stress, while having the highest proportion of LSIC Families whose houses needed major fixing. The average number of major life events experienced by LSIC Families has also remained highest in remote areas.

The COVID-19 restrictions in 2020 corresponded with improved wellbeing outcomes for Primary Carers of LSIC children

In comparison to the years both before and after the pandemic — specifically 2019 and 2021 — a smaller percentage of LSIC Primary Carers faced overcrowding or financial stress the first year of the COVID-19

crisis – 2020. Additionally, a higher proportion of Primary Carers reported a lack of life stressors or indicated that they coped well during this time. It is likely that while increased government payments might have provided some financial relief to LSIC Primary Carers, COVID-19 restrictions might have reduced the number of visitors who would be sharing common spaces such as bathrooms and kitchens, temporarily alleviating daily overcrowding. The combined effect of reduced financial stress and overcrowding might have, in turn, eased life stressors and contributed to a heightened sense of resilience.

Implications

The evidence presented in this section strongly supports the view that the social and emotional wellbeing of Aboriginal and Torres Strait Islander peoples is a holistic concept, signifying that individuals can maintain positive social and emotional wellbeing while facing challenges in specific areas of their lives, if their positive experiences in other areas outweigh the difficulties (Gee et al., 2014). Previous sections (Sections Four and Five) emphasised that factors such as physical health, primary carer's wellbeing, and school environment significantly impact social and emotional wellbeing. However, this section shows that despite increased exposure to racism, unsafe school environments, and physical health risks, LSIC Children have shown improved social and emotional wellbeing over time. This suggests that improvements in other aspects of life, such as financial stability, housing, and Connection to Culture, may have played a role in safeguarding social and emotional wellbeing from the adverse effects of detrimental school environments.

How We Did It

Since at least three data points were needed for a trajectory to be identified, only those outcomes that were measured in at least three LSIC waves were considered for analysis.

- Social and emotional wellbeing was measured using three categories derived from the SDQ total difficulty scores, normal (1–13), borderline (14–16) and abnormal (17–40). The normal category was viewed as a measure of a positive state of social and emotional wellbeing.
- For the outcome variables under consideration, proportions (percentages) were computed mainly through LSIC Primary Carer responses.
- Proportions were presented by geographic remoteness to see if outcomes have evolved over time differently in remote and non-remote areas.

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CONTACT US

Centre for Indigenous Policy Research
POLIS: Centre for Social Policy Research
Research School of Social Sciences
ANU College of Arts & Social Sciences

Copland Building #24
The Australian National University
Canberra ACT 0200
Australia

T +61 2 6125 0587
W caepr.cass.anu.edu.au

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