Maggie Brady
and
Kingsley Palmer

Alcohol in the Outback

Two studies of drinking



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Two studies of drinking

Maggie Brady
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Kingsley Palmer

Australian National University North Australia Research Unit
Monograph
Darwin 1984

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A STUDY OF DRINKING

IN AN

ABORIGINAL COMMUNITY

BY

MAGGIE BRADY AND KINGSLEY PALMER

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PREFACE

This monograph is not the first detailed study of alcohol consumption in an Aboriginal community, but there have not been too many. Most disquisitions on the subject of Aboriginal drinking have depended in large measure on opinions and fairly subjective observations - not to mention misconceptions and prejudices - rather than facts and well informed judgements. Ms Brady's and Dr Palmer's study is all the more welcome because it impresses as being about as objective as one can be on an issue of this kind.

There is a wealth of reports of parliamentary committees, departments, and other government bodies on the effects of alcohol in Aboriginal communities. Much less has been published about how Aboriginal people actually use alcohol, and their apparent attitudes towards it. Empirical data has also been lacking. The authors have reached certain conclusions based on their studies of Diamond Well, and in my experience they hold good for many (if not most) Aboriginal communities in similar situations.

In certain respects, approaches towards liquor consumption by Aboriginal people differ little from those of most other Australians. We need not always search for special reasons for occasional or even regular over-indulgence: Aboriginal people may drink liquor simply because they feel economically deprived or socially disadvantaged. On the other hand, and in other ways and this is especially true of Aboriginal people living more or less in a traditional society - it seems clear that alcohol is used and viewed in a way which most white Australians find hard to comprehend. For example, in Australian society and under its judicial system, a person is not absolved of responsibility for actions committed whilst intoxicated. If the matter is one which comes before a court, the court may well take the fact of intoxication into account in assessing the penalty, but not in determining the question of guilt.

In traditional Aboriginal communities, liquor is very differently regarded. A man may become drunk and abuse or assault or cause great injury or offence to someone, but he is not necessarily in any way blamed; it is the 'grog' which did it. Indeed, liquor becomes a thing personified and discussed as though it was an entity with a life of its own. It is commonly regarded as a thing of malign influence which Aboriginal people must exclude from their communities. It is for this reason that in many Aboriginal communities, community leaders believe that the only way they can deal with problems of alcohol is by total exclusion or the creation of 'dry areas', and this attitude is not simply the result of past church missionary influence as some researchers are inclined to believe.

'Alcohol in the Outback' is in one sense a study of the way in which the Aboriginal community at Diamond Well has tried to come to terms with alcohol. Whether it has done so successfully depends upon your perspective, and the authors have been careful not to suggest that any one approach has been or will prove to be more successful than another. At the conclusion of the study, Christian evangelistic influences at Diamond Well had apparently led to a decrease in the amount of alcohol consumed. This may not be sustained as more recent news suggests. The process is obviously not yet over.

I commend the work of Ms Brady and Dr Palmer to all who are interested in a problem which is so wide-spread in Aboriginal communities, especially if they are themselves trying to assist people in these communities in ameliorating the effects of a substance which British subjects introduced with such dramatic consequences.

Ian Pitman

Director,
Office of Aboriginal Liaison,
Darwin; formerly Chairman,
NT Liquor Commission.

AUTHORS' NOTE

We have disguised the name of the community which we discuss in this paper in order to protect the integrity and identity of our Aboriginal consultants. We have also modified our accounts of both the geographical and historical background in order to retain anonymity of both the community and those individuals with whom we worked. Despite these necessary measures we have endeavoured to provide enough information to contextualise the study, and hope that it will be of positive value to those who read it. The text has been developed from a report prepared for a largely medical readership. Although much of it necessarily draws on medical terminology, the analytic framework is basically anthropological.

ACKNOWLEDGEMENTS

We would like to thank the Australian Associated Brewers (Medical Research Advisory Committee) whose initial research grant made this study possible. The South Australian Alcohol and Drug Addicts Treatment Board provided some supplementary financial support for which we are grateful. Special thanks are extended to Dr Rene Pols of the Board for his energetic personal interest.

The School of Medicine of Flinders University, South Australia, hosted both of us while we were researching and writing up this Report and gave logistic and moral support during the fieldwork. The study grew out of ongoing research conducted by the Western Desert Project based in the Department of Psychiatry. The Head of Department, Professor Ross Kalucy, continually gave his support and encouragement to us, as did Professor G.J. Fraenkel, Dean of the School of Medicine. Peter Steele of the Flinders Medical Centre provided logistical help in the planning of field trips, which was far beyond the call of duty. Janine Judd also provided welcome practical help to us.

The SA Aboriginal Health Organisation gave us access to Clinic records, and its staff in the field, Colleen Slattery and Sandy O'Brien provided us with a mine of information. Our enquiries involved them in much additional work, compiling retrospective data and completing questionnaires, for which we are most grateful. Many other local people provided both formal and informal data - our thanks to Keith Masson, Darcy O'Shea, Brian Pike and Tom Price.

The Aboriginal people of Diamond Well, some of whom have become our close associates rather than just informants, provided us with the richest material and shared their experiences generously with us. They enabled us to live with them in the camps, answered our questions and extended our knowledge of their language.

White staff at Diamond Well gave us friendship and hospitality during rather difficult times and special thanks are extended to Graham Norwood, Max and Clare Morrell and John and June Austin.

Two research assistants, Marcelle Tsalikis and Jackie Morton, compiled statistical data and ran an SPSS programme on our Clinic material and we thank them for their help.

The Darwin-based North Australia Research Unit of the Australian National University provided a base for Maggie Brady while the Report was being completed and we would like to thank Dr Peter Loveday, Dr Elspeth Young and Maureen Phillips for their help in making this possible.

INTRODUCTION

It has long been popular in accounts of Aboriginal contact with European Australians to characterise Aboriginal societies as ones that have suffered irremediable cultural collapse, disintegration and the breakdown of tribal authority (see Bates 1972:95; Sharp 1968). Excessive drinking, as we shall note, was seen as a mechanism through which the disinherited vainly attempted to forget their physical suffering and social decay. Drink was a panacea that numbed an unpleasant and oppressive reality and thereby made it a little easier to accept.

It is all too easy to apply this model without due regard to the observable reality. Our work at Diamond Well led us to conclude that ritual life, social organisation, language and traditions were strong (see Palmer, 1982). Aboriginal people have retained their identity and their cultural systems to an extent which made phrases like 'cultural breakdown' or 'social disintegration' irrelevant. Even if the reasoning that posited that Aboriginal people drink because their social system is breaking down is tenable (and there are serious arguments against the proposition) it is clearly not apposite to the Diamond Well situation.

Anthropologists who have stressed the positive side of drinking may find themselves in a bind because while describing alcohol consumption as a dynamic series of social actions they often neglect to report their sometimes devasting consequences. Anthropologists study a series of acts which involve the creation or sustaining of social relationships. These acts are, of necessity, time-bounded. Anthropologists must select the point in time when they consider the transaction to be more or less concluded. When a specific business undertaking is concluded, then it can be taken as a time-bounded unit and subject to analysis. However, it seems to be a major departure from this principle to discuss the organisation of the activity of drinking, without also considering the consequences. Aborigines are not only aware of drinking acts, but also are conscious of, and concerned about, the consequences of drinking. In this paper, then, we distinguish the act of drinking from the consequences of drinking in order to render a holistic account of our subject. To do less than this would be to consider only one side of the coin.

There are two important issues which arise from these initial propositions. The first concerns the relationship of consequence and cause in Aboriginal understandings. If the results of drinking are damaging, then why do Aborigines persist in drinking?

Aborigines, like European Australian drinkers do not often consider that deleterious consequences are sufficient reason to stop drinking. European Australian drinkers, on the whole, are probably better educated than Aborigines as to the physical consequences of heavy drinking, yet few would consider this sufficient reason to desist. Aborigines, like European Australians, either consider the activity of heavy drinking to be a sufficient compensation for the dire consequences, or are unwilling to admit to the causal relationship between heavy drinking and physical harm. We consider that the former is more usually the case, since in our experience Aborigines are aware of the dangers of heavy drinking sprees, and organise themselves in order to minimise risk to themselves and their

kin. In this paper we seek to demonstrate the nature of the compensation implicit in the act of heavy drinking which makes consequences either real or predicted, of little importance. Those who have strong reasons for doing something will have little use for considerations of negative consequences. Those who smoke, take tranquilisers, or drive cars, do so because they feel they have good reasons for doing so, but usually disregard the consequences, which can prove to be fatal.

We advance the proposition that heavy drinking and the effects of heavy drinking are important for those Aborigines who do so because of what is considered to be obtained or obtainable through the altered mind state of inebriation. An inebriated person, in Aboriginal understandings, becomes a member of a different order of reality than the one who is not intoxicated. He belongs to an aggregate group whose members, by virtue of what they imbibe and its effects on their nervous systems, act, interact, think and are physically different from their non-drinking peers. Recruitment to the drinking group can be specified, results of intoxication designated and the interaction of drinkers with drinkers and with sober people characterised. Drinkers, acting together, enter into a world of action and discourse different from that of everyday experience. They are separated from ordinary living and have put themselves outside of the affairs of daily living. When drinking is finished and the effects of intoxication have worn off, drinkers are re-incorporated into the larger group.

In this paper we use as a heuristic device the concept that drinking which results in intoxication is a ritual act involving separation from the rest of the community and an entry into a liminal phase of existence. When drinking and drunkenness are over, participants enter a post-liminal phase and are re-incorporated into the community. We will argue, then, that Aboriginal drinking at Diamond Well can be considered as a form of ritual and subjected to the same structural analysis as A. van Gennep (1960) first applied to religious ritual in 1909.

During the period of liminal separation, drinkers belong to a world of social action and discourse which is characterised by the inebriated state. We will demonstrate that in this state they claim to have access to goods and relationships which otherwise they find elusive or unobtainable. This supposed command of goods and services is here understood as a form of power. Drinking, then, is an activity through which Aborigines, who are socially and economically powerless within their community, seek to obtain access to those things which are otherwise beyond their reach.

However, the effects of drinking in terms of access to power are merely illusory, since the state of group inebriation does not, in fact, alter the status quo. Moreover, it is not possible to remain in the liminal state for long periods, so if drinkers do gain access to, or control over, others, goods or services, the advantage is ephemeral while the exercise of power is seriously hampered by physical incapacity. Aborigines at Diamond Well use alcohol as a means whereby they mythically seek to redress their powerlessness and subordinate status in a world dominated by European Australians.

The new Aboriginal Christianity at Diamond Well, which became popular during the latter part of field work there, is a substitutive device,

taking the place of alcohol. Christ's kingdom on earth is perceived to be one where all are equal and where the submissive will have more than a special place ('The meek shall inherit the earth'). It is not surprising that Christianity has been substituted for heavy drinking among some Diamond Well residents. While it is a mythical rather than a substantive response to power imbalance, its consequences are, at least in the short term, less devastating than heavy drinking.

In this paper we seek to describe how Aborigines organise their drinking business and what have been the consequences of their actions from time to time. We also posit reasons why Aborigines at Diamond Well drink and demonstrate that since these desired ends can also be obtained through alternative forms of ritual and myth, drinking has become redundant among some groups at Diamond Well, and so has declined in importance.

The Literature

The possibility of making generalised, theoretical comment on the excessive use of alcohol was enhanced by the availability of what became known as the Human Relations Area Files. This was a compendium of world ethnography put together by George Murdock and others at Yale University and it enabled researchers to pursue large-scale cross-cultural correlations on issues such as child-rearing, economics, kinship structure and alcohol use. Horton (1943) in a study based on the Area Files was the first to attempt to 'propose and systematically test a series of explicit and straightforward hypotheses about the functions of drinking' (Heath, 1975:20). On the basis of statistical correlations, Horton proposed that the primary function of alcohol in all societies was to reduce anxiety. As Heath comments, this has become perhaps the most popular generalisation about drinking.

Horton's study paved the way for other researchers to test out primarily psychological propositions about the functions of drinking and drunkenness. This is despite the fact that the basis for Horton's conclusions - that anxiety over insecure food supplies leads to drinking - have been soundly criticised. Anthropological evidence (Lee, 1980) has undermined the previous assumption of Horton and others that hunting and gathering societies lived in a state of subsistence insecurity. Sahlins (1974) for example describes such cultures as living in a state of 'affluence without abundance'. Moreover, hunters and gatherers living in a post contact context (as do the Diamond Well people) have a substantially different economic system from that which their forebears enjoyed. There is no indication that they now live in a state of subsistence insecurity.
Sahlins (1974) for example describes such cultures as living in a state of 'affluence without abundance'. Moreover, hunters and gatherers living in a post contact context (as do the Diamond Well people) have a substantially different economic system from that which their forebears enjoyed. There is no indication that they now live in a state of subsistence insecurity.

Schaefer (1976) and McClelland (1972), while critising Horton's economic insecurity assumptions, have followed his cross-cultural correlation technique and posited other theses. Schaefer suggests that the function of alcohol is to reduce anxiety and powerlessness in tribal societies whose belief in unpredictable spirits caused anxiety. McClelland et al. (1972), incorporating findings from a cross-cultural content analysis of folk tales, concluded that men drink primarily to get stronger and to satisfy needs for personalised power.

Studies of this sort rely solely on an academic rather than experiential knowledge of the societies under scrutiny. Such attempts to posit global explanations for heavy drinking were neither successful nor helpful to others who sought to understand the place of drinking in people's lives, or who were involved in preventative or interventionist strategies. It has undoubtedly become a less popular research methodology in recent years.

There is a body of literature of a welfare orientation which tends to focus only on the pathological aspects of drinking, its socially disruptive ramifications and medical sequelae. Such studies also tend to avoid structural or perceptual issues and arise from a largely psychological framework (Lubart, 1969; Larson, 1979, 1980).

The purely anthropological studies, however, often err to the extent of avoiding an acknowledgement of the pathological consequences of excessive drinking. In fact, Graves sees this as an 'unspoken taboo against exposing a behavioural pattern that is so manifestly dysfunctional' (1967:319). Despite this shortcoming it is clear that anthropological studies which utilise intensive fieldwork observations provide insights into features of drinking behaviour which may, in the long run, contribute more towards effective understanding and thus aid attempts to offset the more serious aftermath of alcohol abuse.

We surveyed the literature with a specific reference to Australian Aboriginal and North American Indian drinking, and give below a brief overview of the major theoretical concerns which we considered useful.

Sociocultural Deprivation

In searching for the causes of 'excessive' or 'problem' drinking among indigenous peoples, there are many studies which consider culture conflict, acculturation and economic oppression as being influential. Dozier (1966), for example, writes on the North American Indians' 'fall from a proud existence in an earlier time when they felt themselves the equal of all men' (ibid:76). He asserts that alcoholic beverages which deadened the senses and helped the Indian to forget his feeling of inadequacy, created an unreal world in which the Indian perceived himself to be an equal of the White man (ibid:77). Lubart (1969), a psychiatrist, studied McKenzie Delta Eskimoes and concluded that their motivations for excessive drinking were anxiety about the future, tension and depression, and bitterness towards the Government and Whites in general (ibid:8). Graves (1967) states unequivocally that the symptons of social and psychic disorganisation among American Indians, manifested in violence and hostility, were epitomised by heavy drinking and drunkenness (ibid:306). Writing about Townsville (Queensland) Aborigines, Larsen (1980) asserts that discrimination

frequently produces a 'sense of maladjustment reflected in widespread alcohol abuse' (ibid:385). However, his use of the term 'maladjustment' is unfortunate as it suggests that culpability lies in the victim of the discrimination. Certainly, most socially aware researchers now incorporate such factors into their analyses of causes for heavy drinking among minority and colonised groups. This perspective, however, is also not without its problems.1

Dependence and Power

Power considerations have been studied from both psychological and sociological perspectives. Lubart (1969) and Hippler (1973) for example, both psychiatrists, consider psychological dependency on the parents, ambivalence and even 'oral deprivation and rage' as being contributory factors to excessive drinking among Eskimo peoples. McClelland (1972) concluded that alcohol ingestion cued off thoughts of strength and power in men everywhere. Sociologist Lemert (1958) noted that drinking enables otherwise oppressed or dependent groups to speak or act out their feelings. Similarly, anthropologist Beckett (1965), writing of Aborigines in rural NSW, suggested that drinking and getting drunk was 'perhaps the only means whereby a minority which has been terrorised in the past and which remains disunited and politically impotent can defy the white majority' (ibid:46). Sansom (1980), in a study of Darwin fringe-camp drinking, links the end of prohibition for Aborigines and their citizenship (the right to vote). These events occurred in 1963-64. '"Since we bin have that citizenship", a man says, "lotta things bin different"...he taps twice on his beer can' (ibid:49). The right to drink is perceived by these Aborigines as being synonymous with equality, epitomised by their citizenship. Therefore to drink openly and to buy alcohol openly are acts which reaffirm their equality with other Australians.

In a similar vein, Allen (1980) describes the events surrounding the closure of a liquor store in the Northern Territory. He shows that despite the 'misery and unhappiness' associated with alcohol at Oenpelli Mission, the closure of the store reasserted the power of the mission and of the police. They both acted to prevent Aborigines from drinking 'despite their wishes and inclinations. Right or wrong, the right to consume alcohol has become for Aborigines a headway made against social discrimination' (ibid:96).

Functional Approaches to Drinking

Heath (1975:50) suggests that to emphasise 'group solidarity' or 'positive social integration' in an analysis of alcohol consumption is to adopt a functionalist approach to drinking. Certainly many ethnographic descriptions of communities in which drinking is a major activity reveal the 'positive' aspects of the behaviour. In so doing, though, anthropologists sometimes overlook the dysfunctional spin-offs of drinking - a point Heath reiterates. Honigman and Honigman (1965), in an article on the changing drinking patterns of Baffin Island Eskimo, found that alcohol consumption correlated directly with economic and social status, 'it is one mark of a full-fledged Eskimo townsman' (ibid:81). In contrast to those who emphasise alcohol's disintegrative or disruptive influences, Swed (1966) asserts that drinking in a Newfoundland parish acts as a safeguard against divisive and disruptive behaviour. By introducing drinking at

community meetings, social distances were narrowed and an institutionalised excuse ('I was drunk') was provided to explain away any hostile public outbursts (ibid:439). In a study of changes in Naskapi Indian (Quebec) life precipitated by rapid economic change, Robbins (1973) interpreted drinking as providing a focus of interpersonal conflict while simultaneously providing the opportunity for conflict resolution (ibid:99). However, he noted that actual injuries were rare - a situation quite different from that of our own study.

In a study of a Philippino community who shared, through straws, a locally fermented beer, Frake presents the drinking sessions as occasions providing a medium of inter-family communication (Frake, 1977). Within the drinking encounter was a structured setting where relationships 'can be extended, defined and manipulated through the use of speech...the most skilled in "talking from the straw" are the de facto leaders of the society ' (ibid:93). Perhaps the most well-known, and certainly one of the most thought-provoking works on drinking is MacAndrew and Edgerton's Drunken Comportment (1969). In this book the authors develop the notion of 'time out', time in the flow of community activities which is set aside for behaviour which otherwise would be disallowed or frowned upon (see also Leach, 1965). 'Time out' can be achieved in a variety of ways: through ritual performance, by temporarily assuming a change in social position or by producing an altered state of consciousness. Alcohol, they state, is by far the most frequently used agent to produce such a change. Time out offers a solution to the inevitable conflicts of life because it allows people to express their 'conflict-engendered transgressions' on occasions which 'fall under the purview of...sanctioned Time Out'. Repercussions are reduced and the chance of disruptions occurring at other times are reduced (MacAndrew and Edgerton, 1969:168-9). We shall argue in this study that some of the Diamond Well people, by embracing an emotional Christianity, exchanged the altered state of consciousness of drunkenness for that of the Gospel meeting. In the Gospel meeting was a sanctioned occasion on which past transgressions could be openly expressed, through the medium of personal testimonies.

Social Organisation and Exchanges

A more recent trend among anthropologists studying drinking is to observe and comment upon the drinking act itself, its organisation and patterning, and its meaning for those involved. Sansom's study of Darwin Aborigines (1977) is an example of such work and Collman (1979) has produced a study of drinking patterns and exchanges for a similar group of fringe dwellers in Alice Springs. Collman rejects the traditional view of heavy drinking as being the pathological response to cultural breakdown. His thesis is that the consumption and sharing of liquor are, in fact, processes of social organisation within which Aborigines construct their social world. Collman also explains how alcohol became a means of creating credit among an alcohol-sharing group.

Many welfare-oriented remedial aproaches neglect to consider the fact that individual Aborigines are often not prepared to interfere with the drinking activities of other Aborigines. Quite simply, drinking and fighting are often seen as being 'their own business' and not something others have the right to do anything about (Milliken, 1974:51; Bell and Ditton, 1980:32). A discovery such as this is rarely made by those who

study alcohol use statistically, or who make only brief visits to Aboriginal communities. Our study which utilises data collected during anthropological fieldwork together with statistics on alcohol related injuries, is an attempt to provide a holistic as well as a contextualized account of drinking in one community.

CHAPTER ONE

THE SOCIAL BACKGROUND TO THE STUDY

Introduction

The Aboriginal community which is the subject of the research discussed here is situated in outback Australia. It is a little over 200 km away from the nearest town, and some 1,000 km by road from the nearest capital city. The Aboriginal settlement is located three km north of a highway, and only 50 km west of the nearest liquor outlet, at a Roadhouse and Hotel which we will call Dindara.

Diamond Well has an Aboriginal population of about 300, and a White population of between 20 and 30 staff and teachers, including their children. Both populations fluctuate. The Aborigines make extended visits to kin and friends in the neighbouring town or travel further afield to other Aboriginal settlements to the north or west. There is high turnover of White staff. When a member of staff leaves it is not always possible to replace him quickly which results in staff levels falling.

The settlement consists of 12 houses occupied by European Australians, an administration building, store, workshop, church, visitors' quarters and a clinic. There is also a school and pre-school, a Further Education centre and a community hall. Aborigines generally live in shelters made from tree branches and covered with polythene sheets, but often incorporating wire mesh, corrugated iron and steel posts when they are available. Aborigines live in small camps, collectively called 'Big Camp' and often situated some distance from the main settlement. Since January 1982 there has been a tendency for the Aboriginal camps to be situated close to the settlement and at the time of writing (1982) there were six Aboriginal houses, four of them recently completed. One family was living in a caravan.

There is no sewerage or reticulated water for Aborigines at Diamond Well at present. Water is either collected by them from a tap in the centre of the settlement, or taken from small portable tanks located close to the camps and filled by a mobile tanker daily, or when required. Living conditions at Diamond Well for Aborigines are generally deplorable. The climate is dominated in winter by periods of cold, wet weather, with drier periods notable for their very strong winds which cause unpleasant dust storms. In summer the climate is marked by periods of hot weather with temperatures exceeding 40^{o}C but with rapid and drastic changes in which the temperature can drop 20^{o}C in a few hours. Lack of housing, sanitation and services makes living at Diamond Well uncomfortable and often unhealthy for Aborigines.

We both worked at Diamond Well pursuing a programme of anthropological research during 1981 and 1982. One of us (M.B.) had been visiting the community since 1978, spending up to six days at a time staying in the settlement and working with Aborigines. In May 1981, however, we both visited Diamond Well for extended periods, living in the Aboriginal camp in a traditional shelter, and came to know something of the discomfort, inconvenience and illness which the Aborigines experienced. During 1981 we spent a total of six months at Diamond Well, and by the end of field work in August 1982, one of us (K.P.) had spent a further two months at Diamond Well. During the period of field work we came to have a close association and friendship with many Diamond Well residents, both Aboriginal and European Australian, and to experience many activities, interactions and incidents which were of fundamental importance to the generation of our understandings of the dynamics of the community.

Living as we did, in close proximity with the people we studied, we were able to observe closely the interactions with which we were surrounded. But our acceptance, and the indulgences we were afforded and the confidences we came to enjoy were a result of our being accepted as participants and members of the community we studied. Our position was always a little different from that of the Aborigines. For example, we had the use of a four-wheel-drive vehicle, and a caravan in the settlement which we used during the day. We also had excellent sleeping bags and a good tarpaulin in contrast to the few blankets and leaky polythene sheets of our Aboriginal associates. Nevertheless, we participated in the activites of both camp and settlement so that after a period of several weeks we were accepted by our closer acquaintances as part of the group to which we had attached ourselves. As time went on our respective roles became clearer. One of us (K.P.) worked extensively on issues relating to the protection of sites in areas subject to mineral exploration programmes. The other was known to be working on research into juvenile offending and petrol sniffing, both issues of concern to members of the community and ones they were eager to see rectified if possible.

Aborigines at Diamond Well speak a Western Desert language and originated from areas which lie some distance from the present settlement. English is not heard much among the Aborigines at Diamond Well and consequently we worked to gain an understanding of their language. Although neither of us can claim to have become fluent speakers of the local language, we developed some facility in the language and this we regarded as an essential research tool. Aboriginal understandings, concepts and modes of expression are not necessarily the same as our own and understanding a language is an essential first step to understanding the culture it represents. Such a proposition is fundamental to anthropological endeavours. There is no doubt that a lack of familiarity with the local language would seriously have impaired our ability to understand the community we sought to study.

In summary, our research programme was one in which we were seen to be participating in the affairs of the Diamond Well community and were generally accepted as having legitimate roles within it. Our acceptance and our understanding of the language meant that we were able to collect data, observe interactions and ask questions which constituted a body of

research information upon which we were able to base subsequent analysis.

Our primary sources of data were our field work observations and the responses elicited from our informants. As we were developing ideas concerning the culture we studied, we were also able to evaluate useful areas which might be checked against quantifiable data. In particular we undertook a survey of the alcohol-related injuries reported in the clinic during a six-month period, and collected information on evacuations to the nearest hospital during the last six and a half years. We also collected detailed information from community records on incomes and expenditures by Aborigines within the settlement, in order to attempt to calculate how much money was being spent on alcohol. We also questioned the manager and bar staff at the Dindara Hotel as to quantities of alcohol sold to Aborigines.

While the quantifiable data we present here are important in their own right, we consider their value is as supportive evidence for our propositions which are derived from our observations of human interactions at Diamond Well. Statistical data alone are highly problematic in studies of the sort undertaken here. It is difficult, if not impossible, to know the degree of accuracy obtained because so much goes unreported. For example, we wanted to know how much Aborigines drank at Diamond Well. In order to discover this we monitored how much was sold at the community canteen and made inquiries at the local liquor outlet. We also discussed the matter with several Aboriginal friends. Although we obtained exact figures as to how much was sold within the community, allocation and final distribution patterns were a wholly Aboriginal business, much of which took place surreptitiously and so rapidly and at so many locations as to be impossible to follow. Moreover, there was no necessity for one series of actions on one occasion to be repeated on a subsequent occasion. The manager at Dindara could let us know how much he sold, but again, we could not absolutely establish subsequent allocation. On one occasion when we observed drinking and knew, more or less, how many cartons of port had been consumed, the manager informed us that he had not sold any on that occasion. Trusting our informant, we concluded it had been purchased elsewhere, but acknowledged that it was practically impossible to monitor all outlets. Aboriginal estimates of how much was drunk were vague and in any case concerned descriptions of group drinking, not individual consumption. Similarly, observation of an individual within a drinking group did not result in accurate accounts of individual consumption, particularly since all drinking is done straight from the bottle, there being no use for mugs or cups in this activity.

While it may be possible to observe at first hand allocation and individual consumption (given sufficient stamina), we doubt whether accurate measurement would be possible among such inebriated participants. Collecting quantifiable data in these circumstances is simply a difficult and unreliable way to proceed. Difficulties were also encountered when attempting to collect quantifiable data on alcohol-related injuries, morbidity, hospitalisation, numbers of drunks and damage inflicted, and so on. However, what quantifiable data we were able to collect we assembled with as much care as possible and we include it as essential material to support our major propositions.

We have devoted some space to a discussion of the nature of our data because our approach may be novel to those whose experiences lie largely in

medical rather than sociological research. However, it is our contention that insights into drinking, which we regard primarily as a social activity, should be understood in terms of social interaction, at least initially. This we attempt to do in the following pages.

The Social History of the People of Diamond Well

The Diamond Well Aborigines, or their immediate forbears, migrated from desert areas of central Australia during the second, third and fourth decades of this century. They settled at a soak which was a permanent water source and had long been used by the Aborigines who travelled there for rituals or when water became scarce elsewhere. In the early years of this century a railway line was constructed in the region, and a siding was built close to the soak, primarily so that the railway authorities could tap its water supply.

The activities on the line, and the growing availability of rations, together with their prior familiarity with the soak, combined to attract Aborigines to camp there. Simple medical care and limited food supplies were provided at the soak between 1919 and 1935.

The United Aborigines Mission (U.A.M.) established a formal presence at the soak in 1933 and by the 1940s had built a church hall, mission house and dormitories for the Aboriginal children, known as 'The Home'. The U.A.M., a non-denominational 'faith' mission, undertook a deliberate policy of undermining and intervening in Aboriginal social and religious life. Aboriginal parents living in camps a kilometre from the mission were encouraged to deposit their children in 'The Home'. This was the first step towards curbing the 'nomadic habits' of the people, which made it difficult to maintain a stable congregation. A report from Central Australia makes the U.A.M.'s ideology clear:

> ...there were possibilities of instilling the Gospel into the aborigines if they could be approached when children...if tribal customs could be broken down and the people could be induced to drop their superstition and cruel tribal laws, their lot would be greatly improved. (United Aborigines' Messenger, 1 July 1929).

The U.A.M. with the assistance of the State Government set up a formal ration depot at the soak. The weekly food ration was distributed after Christian service. The missionaries translated the Gospels into the local Aboriginal language and active forays were made into their camps by missionaries in attempts to convert them to Christianity. The missionaries deplored the initiation of young boys, correctly perceiving that initiation marked the entry of the boys into Aboriginal Law and spiritual training. The U.A.M. therefore attempted to suppress initiations, by surreptitiously showing to boys photographs of sacred objects normally revealed to them only in manhood, and they disrupted traditional mortuary rituals by attempts to enforce Christian burial. However, two anthropologists, Ronald and Catherine Berndt, who were working at the soak in 1939 reported that the 'performance of ceremony and rite continues undisturbed' (Berndt, R.M. & C.H., 1942:56).

The Aborigines had become subject to the desires and edicts of a variety of Europeans. The U.A.M. instituted their own punishments

(including head shaving and the wearing of sack-cloth) for misdemeanours it designated; the Railway authorities prevented Aborigines from moving freely along the railway line. By the early 1950s the Defence Department was planning to test atomic weapons on the land the desert Aborigines had owned and occupied for centuries.

In 1952 the U.A.M. establishment at the soak was closed down. The Aboriginal population, now made dependent upon White rations and unable to engage in hunting and gathering forays into their country were forced to move to a new location. The potential danger of radio-activity from the tests meant that they could not remain in that area.

It is clear from historical records that the people did not want to move. They had no spiritual attachment to the land on which they were to be resettled. To the dismay of the departing U.A.M. personnel and the confusion of the Aborigines, they were now to be administered by the Lutheran Church, who had fought vigorously to prevent the U.A.M. from retaining links with the people. The pastoral property to which the Aboriginal people were unwillingly moved was purchased by the State Government and leased to the Lutheran Church: it became known as Diamond Well Mission.

The Aboriginal population had become a body to be administered and although the aims of Church and State were articulated differently, the means were similar: the Aborigines had to be drawn together in settlements. The U.A.M. had realised years before that if the 'natives' were gathered up it would be easier to reach them with the Gospel. It had already noted that part of the Diamond Well estate was of 'strategic importance' to their spiritual campaign.

When the Lutherans officially received the responsibility for the Diamond Well Aborigines, their undertakings were those supported and encouraged by the Government; and the missionaries stated they would train and educate younger men and children to take over management of the property.

A quarter of a century later the affairs of the settlement are still firmly controlled by Europeans. Decisions about the allocation of funds, the provision of services such as water, electricity and medical care, are taken outside of the settlement by the Government bodies with jurisdiction over housing, health and development.

Although in the 1980s European staff now tend to be motivated by factors other than Christian proseltysing, until recently the Lutheran presence was strong. A Lutheran lay missionary who lived at Diamond Well for 19 years became the Superintendent and wielded wide-ranging power.

The unwillingness of his European staff and Aboriginal charges to challenge him on controversial issues had a powerful influence upon the development of the settlement. It was during his period of office that drinking among Aborigines was often explained by them as being in order 'to get strong enough so we can say what we think'. He was the first of many to misinterpret the messages that were communicated by Aborigines by their acts of getting drunk. Because of this he persistently continued the efforts to teach Aborigines how to drink in a civilised manner, through the

mechanism of the beer canteen which we shall describe in more detail later.

The settlement, which was, in effect, a White township, with administrative offices, churches, store and school, grew with the provision of houses for staff and their families.[2] The Aborigines, on the other hand, apart from a small number who camped around the settlement, chose to live in camps well away from the White dwellings. What has long been known as 'Big Camp' is in fact a collection of smaller family groups camped in traditional shelters of tarpaulins, branches and corrugated iron. Big Camp changes its location frequently and has been established on various occasions from 10 to 30 km away from the settlement. From this distance Aborigines must travel in private cars or in the community truck to perform their business in the settlement: to collect their pension cheques, attend the clinic, make purchases at the store and for their children to attend school.

Access to Alcohol: A Historical Overview

The Aboriginal people who were gathered at, or visited, the soak, first encountered alcohol during the period 1909-1917 when the railway line was under construction. A railwayman commented:

> ... On the whole, the black inhabitants of the plains en route were friendly to the men in the camps during the construction of the railway. Many of the tribes were unused to white people and approached the camps in fear and trepidation (Berkery, 1944:28).

At this time it was illegal for Aborigines to buy or possess alcohol, as a result of the 1891 Licensing Act. Nevertheless, alcohol was obtained from Europeans employed on the construction and maintenance of the railway, and one observer at the time noted that liquor was referred to by the Aboriginal people as kala gabbi - fire drink.

The United Aborigines Mission

By 1936 the U.A.M. had established a firm presence at the soak, and missionaries took on the task of preventing their Aboriginal charges from having access to illegal liquor. Berkery wrote:

> Every regulation brought in to counteract the illegal traffic was at once countered by a new plan by the men, and strong waters continued to enter camps away out in the desert with no apparent means of communication other than the line itself (ibid:37).

He states that it was forbidden to have alcohol either on the trains or in the camps, but that it was always there (ibid:69). The Head missionary at the soak became incensed at the traffic in alcohol and the immorality it apparently produced which, he claimed, was encouraged by fettlers, and others travelling on the trains.

One missionary wrote several outraged letters to the Railways Commissioner to request police patrols, but it is clear that his concern was based largely on a moralistic stance:

> Wine is one of the worst demoralisers, when the natives get it they go mad and do not know what they are doing and cause a great deal of trouble...We trust...in the name of AUSTRALIA'S HONOUR and CHRISTIAN DECENCY that this thing will be stopped.

In response to these letters a police constable made a tour of the gangers' camps in 1944 and concluded that the missionary had 'grossly exaggerated' the position. Nevertheless, there was undoubtedly some liquor exchanged between railway employees and Aborigines.

It seems that wine, rather than beer, was the first alcoholic beverage to which the Aborigines had access, although it is not clear from the records whether this was port or wine. There is some evidence that gangers also kept beer at their camps and this could have been sold to Aborigines or exchanged for women. Beer did not seem to cause the same degree of alarm either to the missionaries or the police. The police constable who made the inspection of ganger's camps remarked:

> A search was made in the aliens' [Italians'] camp for liquor, in their presence. About four dozen bottles of Hannan's lager was found in the camp but no trace of wine...The aliens only drink lightly and use it as a beverage at meals (P.C. Liebelt, correspondence with Railways Commissioner, January 1944).

Drinking and gambling were, wherever possible, concealed from the missionaries, as it was clear that they disapproved and, after all, they were in charge of the food ration distribution and not to be antagonised. Millar and Leung (1974:92), writing of the history of Aboriginal drinking rights, comment that prohibition helped to create a drinking pattern which was related to seclusion and fast drinking, and it could be argued that the circumstances at the soak promoted such patterns. Not only did the missionaries disapprove of alcohol, and Aborigines were breaking the law by possessing it, it was forbidden to the railway employees themselves, as Berkery noted. Drinking, therefore, took on an air of secrecy and conspiracy among both Aborigines and Europeans. Others have suggested that Aboriginal drinking was predominantly a learned affair and that they followed the 'drink or bust' pattern of itinerant White farm workers (Beckett, 1965:38). Although such elements may have been influential initially, we shall argue that the patterns of drinking, far from being imitative, are aggressively Aboriginal in form.

The Lutherans

By the time Aborigines were granted the right to consume intoxicating liquor on 1 April 1965 (Millar and Leung, 1974:94), the Aborigines had been resettled on the Diamond Well property for 13 years. However, the new Act excepted Aborigines living on reserves or missions, but there were enough Aborigines living at Diamond Well who wished to avail themselves of their rights to prompt further steps being taken. The Mission investigated the possibility of making alcohol available under controlled conditions, on the settlement itself. A so-called 'local opinion poll' (Hansen, 1972:7) was conducted at Diamond Well, which resulted in an 80 per cent vote in favour of this suggestion. The Lutheran Church mounted a case with the Licensing Court for a licence to sell beer and stout. This licence was granted in the Church's name in October 1968.[3] It is hard, retrospectively, to know

how strong the desire for a 'wet canteen' was among the Aboriginal population. Those who drank had, by that time, chosen port as the favoured drink and, as we shall see, port continued to enter the settlement despite the availability of 'controlled' beer.

Gauging Aboriginal opinion is a difficult operation at the best of times and we have no information as to the exact nature of the 'opinion poll'. Nevertheless, there was probably support for the idea simply because it would make beer available regularly and would involve no travelling for Aboriginal drinkers. The people would be assured of a consistent supply, whereas previously the availability of alcohol was dependent upon other factors - roadworthy vehicles, large amounts of cash. It is probable that the 'wet canteen' idea was instigated largely by Whites in an attempt to control drinking and that the Aboriginal drinkers were happy to comply with the suggestion.

The Canteen

The Lutheran Church made a loan of $20,000 available and Aborigines at Diamond Well, through the sale of artefacts, contributed $500 themselves towards the construction of a large hall, the 'canteen' which was also to be used as a recreation hall.

The news that a mission had become licensed to sell beer to its Aboriginal charges was met with some surprise. The Australian ran a story at the time headlined 'Teaching with a Bible and a Beer Can' (7 December 1968:12) in which the State President-General of the Lutheran Church justified the exercise. However another and more sinister motivation for the erection of the wet canteen was made clear in a Lutheran magazine. It was stated in an article that:

> ...if a church wants to retain absolute control of an Aboriginal community, and it can only do so with the assistance of considerable funds, it must be prepared to provide all the services common to the local community (Hansen, 1972:7) (Our emphasis).

These services, it was argued, included the provision of 'optional drinking facilities' which were available to other urban and rural Australians. Although this reasoning was broad-minded, it is remarkable that the Church should so candidly confess its desire to maintain control over a group of Aborigines, and that they chose the provision of drinking facilities as the means whereby this control could be facilitated.

The major public justification put forward by the Lutheran Church was not, naturally, the one stated above. A spokesman was quoted as saying a canteen was 'the lesser of two evils, and we believed controlled consumption of alcohol to be the lesser' (Australian, 7 December 1968:12).

The greater evil was seen as being the running of liquor into the settlement by taxis from the nearest outlet. The Lutherans informed the Licensing Court that taxis had been known to deliver up to 25 gallons of fortified wine to the Mission boundary. It was thought that by making limited amounts of alcohol available and by presenting positive 'behaviour models' the Aborigines could be taught to drink in a civilised manner.

('It is important that Reserve staff who show signs of alcohol abuse should not be tolerated' (Hansen, 1972:8).) A church leader stated:

> We are dealing with a total man and, in bringing him Christianity we try to raise his standards of life and try to train him to make a decision for moderation.

By allowing the sale of only two cans of beer per person on four occasions per week, the missionaries hoped to achieve this aim. It was their plan eventually to remove the restriction on the number of cans, presumably when Aborigines had learned moderation. However, this assumption, and the accompanying attempts to deflect the running of alcohol, reveal a gross misunderstanding on the part of the Lutheran Church of the context and purpose of drinking among Aborigines at Diamond Well.

There are indications that even then the Aborigines were determined that their drinking and, more precisely, their drinking behaviour would not be subject to an imposed institutionalisation. This was made clear with respect to the proposed abandonment of restriction on cans. Hansen states that 'in the words of the Aboriginal people' a permanent police officer should then be stationed at Diamond Well, 'so that effective law and order can be upheld' (ibid:7). This request (still being made 12 years later) is revealing. It signifies that the Aborigines themselves were acknowledging that 'moderation' was unlikely, and that they were making provision for the control of drunken behaviour, by outsiders. They had decided that such control and intervention would not, or could not, be undertaken by themselves.

In the eyes of the White authorities, however, the sales of liquor and possible extension of such sales would be subject to 'educational programmes'. In a letter to the Department of Aboriginal Affairs in 1979 the Superintendent of Police stated:

> Any extension of liquor sales at Diamond Well must be accompanied by correctly structured educational programmes which will instruct the Aborigines: how to drink, the dangers associated with over-indulgence and other areas of concern...

Exactly how this could be accomplished was not made clear. The notion that the Diamond Well people could be taught 'how to drink' has persisted despite all evidence to the contrary.

The Canteen was opened in October 1969, by the State Minister for Aboriginal Affairs, with some ceremony. A pastor who later wrote a history of Diamond Well was quick to point out the 'handsome profits' that soon began flowing in from beer sales. Four years later, after the Lutherans had had their loan repaid, it was resolved by the Board of Aboriginal Missions, that all profits be transferred to a co-operative society for the benefit of the Aboriginal community.

The number of cans and the frequency with which they are given out has changed over the years since the Canteen became operational. From Mr Hansen's original plan of two cans, four times a week, there were alterations to one can per day for men (to which the women objected) and 10 years later, in 1980, the 'ration', as it was called, was three cans on

three days a week, the days being 'pay days', when proceeds from pensions and pay cheque were available. As we shall describe, the actual number of cans decided upon is largely irrelevant, as the Aborigines have devised their own means of stretching and manipulating the flow of beer.

Shortly after the opening of the Canteen, cans began to be used as currency. Those who did not want to drink swapped their beer for boomerangs which were sold to the Mission for cash. Others sold their artefacts to the Mission for cash and then purchased extra beer.[4]

Until recently (1982), beer was used as currency in Two-up games which transformed the ration into a decidedly Aboriginal affair. The Two-up game constituted just one aspect of Aboriginal drinking which has been thoroughly misunderstood by Whites. In the same communication mentioned earlier from the Superintendent of Police, it was said:

> ...this supply [of beer] is obviously inadequate, as each supply is followed by gambling in an effort to supplement individual supply as a consequence of the winning of cans from the less fortunate players. The gambling is extensive and often leads to ill feeling and fights among the participants.

The Two-up undoubtedly supplemented individual supplies, but it also performed another function which is discussed in Chapter II. The Superintendent's last comment was evidently based on hearsay; in our experience the Two-up games were conducted in an atmosphere of sociability and enjoyment. Continuing the assumption that the Aborigines wanted more beer, the Superintendent went on to suggest that the Canteen should sell keg beer which would 'by its ready availability lessen the desire for fortified wines'. The Diamond Well Aborigines, however, did not choose to restrict themselves to beer, and this should have been clear at the time of his correspondence (1979).

Dindara

Port continued to enter the settlement after the instigation of the canteen and has continued ever since. Aborigines had only to travel to the next town 200 km away to have access to a full range of alcohol at the pubs and bottle stores. In 1976 the road to the town was bitumenised and a new roadhouse with its own bar and bottle store was established at Dindara 47 km east of Diamond Well. The journey takes 20 minutes by car. Hardy's Tintara V.O. Invalid Port was available at Dindara by the flagon ($4) and later by the bottle ($2.30). With a growing number of Aboriginal-owned vehicles apparent in the settlement, the people had the mobility and independence to run their own liquor from a comparatively close location.

The Aborigines buy their alcohol from the main bar, over the counter. The Manager of Dindara does not encourage credit, although he sells liquor on credit to some mixed-descent Aborigines. On occasions he exchanges port for artefacts. In 1982 one man asked for five bottles of port in exchange for a spear. The manager gave him four bottles instead - to the value of $9.20.

In the mid-1970s it was not uncommon for 20 to 30 Diamond Well people to camp in the scrub next door to or opposite Dindara to gain easy access

to alcohol. However, in 1977 the police station at a small settlement 110 km east of Diamond Well doubled its manpower and the two new police officers stationed there began to take more forceful action with disruptive drinkers at Dindara. There has been at least one major assault which occurred at the Dindara camp and which resulted in death and subsequent manslaughter charges. By agreement with the police the Dindara management stopped selling port by the flagon and sold bottles instead.5 Whether either of these factors - the new police officers and the changeover to bottles - had any impact on drinking patterns is hard to ascertain. However there was a distinct and noticeable drop in the number of Diamond Well people requiring hospital attention for alcohol-related injuries in 1977 (see Chapter III). It is possible that police intervention prompted more Diamond Well people to take their purchases back to the settlement rather than consuming them on or near the Dindara premises.

The Town

The nearest major town to Diamond Well has a population of 2,300 and lies 200 km away. It has all the facilities of a town, including a drive-in bottle shop and a pub with several bars one of which is frequented largely by Aborigines. Three kilometres out of town is an Aboriginal camp known as 'Emerald Camp' and it is here that a semi-permanent population of heavy drinkers live. Emerald Camp has a variable population, of which a high proportion are Diamond Well people. Its residents are committed drinkers who have registered in town for Unemployment Benefits (UB) which are unavailable at Diamond Well. The availability of UB in town, together with the access to alcohol, act to encourage those Diamond Well people who may originally have been passing through to stay on. Diamond Well people themselves travel to town regularly to attend the hospital or to appear in court, and annual events in the surrounding rural districts attract Diamond Well people. For example, there is an Easter Rodeo at a nearby settlement and seasonal work is taken on by Diamond Well men; all these factors prompt a movement through the town, and often prolonged pauses at Emerald Camp ensue.

Some Emerald Camp people have lost their ties with the Diamond Well community, they no longer have such strongly reinforced kinship links: in effect they cease to be 'Diamond Well people'. To be a permanent resident of Emerald Camp is to make a decisive step away from the pattern of drinking and the uneven availability of liquor on the Diamond Well settlement. It is tantamount to a decision to take on drinking as a purposeful and all-engrossing way of life.

CHAPTER TWO

THE DRINKING ACT

Drinking at Diamond Well is an activity directed in accordance with conventions and legitimized by the universally recognised rule that all have the inalienable right to drink and get drunk. Drinking is a social act in which labile groups in aggregation pursue the business of obtaining, allocating and consuming liquor and together act out the consequences of the inebriated state. Drinking takes place in the Aboriginal confines of the camps, away from the settlement, though not always out of earshot of the Whites. Drinking is not bounded by time constraints or conventions which restrict when drinking can take place. When a group wishes to drink, provided it has funds to finance the enterprise and alcohol is available for purchase, then the drinking act can commence.

The Lutheran mission staff, in a vain attempt to control drinking at Diamond Well, instituted the 'Canteen' back in 1970. We have already noted the history of this innovation. A beer ration was issued several times a week. One of the original expectations appears to have been that Aborigines would sit at tables and drink their beer out of paper cups in a civilised fashion. In this way they would 'learn' how to drink, and not feel the need to purchase extra supplies of the more intoxicating port wine from elsewhere. Aborigines set about successfully perverting European Australian aspirations. They transformed an erstwhile educative process into a thoroughly Aboriginal business through the pursuit of which they were able to obtain desired ends.

The Beer Ration

During most of 1981 the beer ration was meted out on Mondays, Wednesdays and Fridays. Beer was $1 a can with a three can limit. Profits from the sales went into community funds to pay for trips to homeland areas or other excursions such as the people approved, and the price and ration was generally considered fair by the Aborigines. During one period, when demand for liquor was particularly strong, the Community Advisor increased the allocation to five days a week. However this was soon reduced to three days as people complained about the level of drunkenness in the community.

Prospective drinkers were obliged to give their names and $3 to an Aboriginal office worker designated to perform the task of listing drinkers' names. Beer was stored in a chiller at the rear of the Canteen, and was given out behind the building to those whose names appeared on the list. No allocation or consumption took place in the Canteen. The rear of the building was well away from the main settlement and most European Australians were oblivious to the sometimes frenetic activity which took place there three times a week. The ration was given out at about 3.30 pm after work had ceased for most Aboriginal employees.

White staff, on the whole, considered 'the beer', as the ration was called, a good thing. After all, 'the beer' provided useful additional revenue which benefited the whole Aboriginal community. It seemed better to provide beer at Diamond Well rather than to force people to go outside of the community and purchase less desirable liquor elsewhere. However, some staff considered that all 'the beer' did was to whet Aboriginal

appetites, and considered they would inevitably want more.

Cans were issued unopened, and could be collected on behalf of friends, relatives and wives. The system was clearly open to abuse. Not only did names appear on the list which did not match people actually at Diamond Well, but non-drinkers could claim their ration and either give it or sell it to others. Per capita figures are hard to recover but we know, for example, that in October 1981 191 cartons of beer were sold through the canteen.6 This represents an average of 14.7 cartons per ration and, at three cans per person, an average of 118 registered drinkers. This is considerably more than the number of men and women we observed collecting and drinking beer.

Some beer once issued was consumed forthwith. Men and women sat on the ground in small groups and consumed at least one can. This allowed for a general amalgamation of interested drinkers and for the European Australian who had issued the ration to complete his business, lock up the Canteen and depart. Then the drinking business began in earnest.

Some Aborigines left with their ration to drink it in their camps. Most, however, stayed to play or watch the game of Two-up which was an integral part of the afternoon's procedures. A little behind the canteen is a clear patch of ground which is suitable for use for the game of Two-up. Women, often playing cards, sat behind the men who gathered in small groups, and the players stood in a circle some 15 to 20 metres in diameter while play commenced.

Numbers of players varied according to the number of drinkers, but as few as eight or ten were present at times and as many as 35 or 40 on other occasions. These men wagered their unopened beer ration in the hope of multiplying their stake.

Two-up is a game of chance in which the stake is won or lost upon the flip of two coins. One player assumes the role of 'spinner' but retires when two 'tails' are thrown, in which case the task passes clockwise to the next man in the ring who wishes to be the spinner. Bets are placed against the spinner before the throw, and cans are generally bet in pairs. Bets can also be placed against other players by nominating a heads or tails throw. When all bets are placed the spinner tosses two coins (usually 20c pieces) by flipping them vigorously with a piece of broken ruler, so they reach a height of four to five metres above the ground. The coins should land within the circle and if they roll far beyond the perimeter it is a 'no throw'. If the coins are odd, that is one is heads and the other is tails, the spinner throws again. If he spins two heads he takes all the beer bet against him. If he spins two tails he loses and must match the bets placed against him. A spinner may need to borrow cans to cover his debt which may be considerable, though a single win or series of successful side bets will result in a rapid accumulation of cans. Beer is also purchased during the game from lucky winners, who may charge higher prices than the ration price.

The game is played with great vigour and proceeds very rapidly. Beer is reallocated quickly throughout the group of players and, as in many games of chance, it is often the case that some win large amounts while others lose all. Stakes are consumable and participants drink while

playing so supplies tend to run short after some time. When play ceases because of poor light or because people have become tired, a final allocation takes place. Those who have lost may purchase beer from those who have plenty. Since the commodity has become scarce as a few winners have a monopoly over supply, prices are inflated and people pay up to $4 or $5 a can. A man who has won many cans of beer will share them with his close friends and kin who are sure of having plenty to drink that night.

The immediate consequences of the Two-up is that the secondary allocation of beer serves to concentrate rather than dissipate supplies. This means that while everyone is certain to drink one or two cans, any surplus is creamed off in the gaming school and eventually becomes the property of the lucky few who share it with a group of consociates. The beer ration, far from fulfilling its original purpose, has become a means whereby Aborigines can pursue a wholly Aboriginal activity which gives everyone the chance of becoming rich in beer.

The business economy of the Two-up pitch involves the exchange of cash for cans of beer and the transformation of cans into gambling 'chips'. Subsequently, the chips are converted into consumable beer which is used for the creating or discharging of social obligations. Alternatively consumable beer can be resold to realise more cash than was first laid out. Cans are then successively reallocated during an evening's play. At the end of an evening's play there is an uneven distribution of a much desired commodity, which distribution is the consequence of the luck of the spinners' coins. The transformational value of a can as a commodity in an exchange transaction varies directly in proportion with its scarcity. The cans are a form of capital which, employed reproductively, are invested at risk and expand with luck, but which are expended with use.

The rules of the Two-up school are few but rigorously maintained. Only unopened cans of beer can be used as stakes, and no cash transactions take place. Women are not encouraged to play, though some do occasionally take part. However, men control the game and take the responsibility for placing bets. Two-up is an Aboriginal affair and European Australians are unwelcome and generally positively discouraged.

Finally, a player can join in or withdraw from the school freely. However if he retires with a large number of cans he is expected either to sell some to those who wish to play on, or to give some cans away in acknowledgement of debts or obligations which are swiftly brought to his attention by would-be beneficiaries.

The end of the Two-up game marks the termination of the first phase of Aboriginal drinking at Diamond Well. The beer ration was ended, by popular demand, in April 1982, and with it the Two-up ceased as well. In Aboriginal understandings the allocation of cans of beer through the institutionalised beer ration is inextricably linked with the reallocation of beer through gambling. To play Two-up without cans as chips is unthinkable.

Once the beer ration is allocated and consumed, Diamond Well is able to provide no additional source of alcohol. Men and women who have come together to drink must then decide either to stop drinking or to fetch additional supplies. The nearest liquor supply is 50 km away at Dindara.

In order to obtain supplies from Dindara a group must have cash, a vehicle and petrol, as well as a driver. Petrol can be obtained from the local Roadhouse, money can be elicited from friends or kinsmen. The problem then is to find a roadworthy car and a good driver.

Carting Wine

'Carting wine' as it is known at Diamond Well is a business which involves transactions between contracting parties who exchange cash for transport and port wine for cash or personal favours. The value of the commodity within these transactions depends upon a triadic relationship between scarcity, desirability and the amount of available cash.

Cars at Diamond Well are important for a number of practical reasons including local transport, hunting, the fetching and carrying of firewood and personal possessions, and for going to Dindara. At any one time at Diamond Well there are between six and eight Aboriginal cars. These can be divided into two categories: grog cars and non-grog cars. Most cars are bought locally, a few from further afield. Average purchase price is about $500 or a little more. Seldom is a car bought for more than $1000. Owners of non-grogging cars are known to be non-drinkers who do not permit their vehicles to be used for carting wine. However, their owners are approached from time to time by would-be carters with attractive business propositions or even threatening demands. Non-grogging cars tend to have a life-span which far exceeds their grogging counterparts. Two non-grogging cars endured for as long as a year. Grogging cars, on the other hand, last only a few months, and often only a few weeks. Intoxicated drivers are particularly hard on cars, driving fast over atrocious dirt tracks with heavy pay-loads, stopping and starting violently.

Owners who are hardened drinkers may buy a car to ensure the continued supply of alcohol supplies and are seemingly little perturbed by the transitory nature of the life of their car. The owner of a car is he or she who has paid for it. Often a car is owned by several people, particularly old-age pensioners, who have available cash in large amounts and want to enjoy the convenience of a vehicle. Rights in a car, however, may be enjoyed by others who are not owners. If an owner does not drive, which is often the case, he or she must rely upon a chauffeur, usually a close relative like a son who, in return for driving the car, has rights to use the vehicle for his own business. Sometimes a non-drinking group of pensioners buy a car, but lose effective control over it when the driver uses it for carting wine, in which case there is much dissent in the camp and endless disputes over control and use of the vehicle.

A group of drinkers who have decided to pursue the drinking business approach a driver with a proposition they hope he will find hard to refuse. Sometimes the driver is a member of the group already. But, if he is not, he must be recruited to it and recruitment involves inducement. Deals vary with circumstances. For example, a man may agree to go to Dindara provided petrol costs are paid and he has free access to port wine on his return. Alternatively, a less willing driver may charge $5 or $10 a head and so seek to make a good profit from the journey. Vehicles which are frequently used for making trips to Dindara for which a charge is levied are known at Diamond Well as 'taxis' and are commonly referred to as such. In our experience, however, profit is not usually a major consideration for

drivers who cart wine. Most drivers are content to recover costs and receive free port and have others obligated to them.

The trip to Dindara is fraught with dangers. As danger multiplies with distance, carting wine from further afield than Dindara is less frequently undertaken. Trucks travel the road both day and night at uncompromising speed. The highway is straight but is narrow with gravel margins and an error of judgement when driving can be fatal. An additional hazard is the police. The local police, stationed 110 km from Diamond Well, visit the settlement and patrol the highway regularly. Aboriginal cars, well loaded and sometimes technically or obviously unroadworthy, are stopped and 'defected'. Once a car is defected it cannot legally be driven until its faults are properly rectified. Many grogging cars are technically unroadworthy or rapidly become so. Some are positive death-traps but are maintained and nurtured by their drivers during the cars' brief lives with skill and ingenuity. A good driver who is also a skilful bush mechanic is much valued by a drinking group.

Police also inspect drivers' licences, vehicle registration and check the sobriety of drivers. Running the gauntlet of the police is such a hazard that wine carters use various devices to avoid unnecessary encounters. There is a network of tracks that can be used as an alternative to the bitumen. However, there is no direct back route to Dindara and tracks are always rough and sometimes impassable in wet weather. All routes involve at least small sections of the main road. Some drivers travelling at night turn off the road whenever they see headlights either in front or behind but, although traffic on the road is never heavy, this ruse makes progress slow and can be impractical since the road traverses areas of thick bush.

The Acquisition of Wine

At Dindara there are two bars. The Public Bar is used for counter sales of port to Aborigines. The Lounge Bar is used by European Australians, travellers and locals. There is an unwritten and generally unspoken convention that Diamond Well Aborigines do not enter the Lounge Bar and that European Australians do not visit the Public Bar. If a White stranger goes to the Public Bar he is invited to drink in the Lounge, because it is more comfortable, we were told. The Manager of Dindara told us that some local Aborigines working on station properties did drink in the Lounge and were welcome to do so. Since Diamond Well people appear generally not to wish to visit the Lounge Bar, nor Whites the Public Bar, there is no question of either group being excluded from a drinking area.

The visit to Dindara Hotel is brief. Aborigines stress that they are short of time and must hurry back. Generally, driving after dark is considered undesirable because the main road is understood to be more dangerous at night. Cars often have defective headlights and tail lights, while the huge trucks have powerful spotlights and seldom modify their speed. However, the trip to Dindara is considered as a necessary but dangerous foray into the outside world, and is best expedited as swiftly as is practical. Some drinkers pause for a quick drink of beer in the bar while the port wine is purchased and loaded into the waiting car. Although port is the liquor purchased, it is bought only by the bottle. No port is ever bought over the bar by the glass and consumed in the Hotel. Beer is

the drink for the Hotel. Port consumption belongs to another realm of activity which takes place beyond the world of the European Australian Hotel and is confined to the Aboriginal drinking camps.

The Drinking Camps

The serious drinking of port wine requires a safe camp. The ruses and devices employed while carting become harder to sustain when full inebriation is attained. Serious drinking is a state of vulnerability, and the drinking group takes steps to protect itself from harm. Moreover, a state of excitation requires a free arena for demonstrable actions, and this cannot be obtained under the control or scrutiny of Whites, police or community staff.

A safe camp should have several attributes. It needs to be away from the main road and secluded, yet have convenient access and egress. It needs to be close enough to the main camps so that in the event of injury or accident help from non-intoxicated friends can be summoned. Some drinking groups formerly drank in the bush close to Dindara and maintained camps there for several weeks at a time. This was because they lacked transport, so if supplies were to be maintained they were obliged to camp close to the outlet. However, Aborigines were discouraged to do this by both the police and the hotelier since drinking bouts were said to upset tourists. For their part, Aborigines felt isolated and vulnerable when drinking so far from the settlement. Currently Aborigines probably have greater access to cars than formerly, so it is now usually possible to cart port and drink it at Diamond Well.

On one of the bush tracks linking the main road with the settlement are a number of open areas in the scrub used by drinkers on their return from Dindara. Here port wine is consumed by drinking groups of five or six men and women. Later, unconsumed supplies are taken further into the camps to be sold to other drinkers who had placed their orders earlier on. Port wine costs $2.30 a bottle at Dindara, but its resale price at Diamond Well may be as much as $10 a bottle. Once the allocation has taken place drinking continues until all supplies are consumed. Depending of course on the quantity obtained, a good drinking bout will last up to twelve hours.

Drinking

The actions of the drinking set are those of the inebriated who have lost inhibition and direct control over their motor functions, speech and mental faculties. They have become transformed and adopt roles which are recognised as being quite different from those assumed during other non-inebriated periods. In contrast to sober discourse, the verbal exchanges of drinkers are often made in English. English is the language proper to the intoxicated man and when necessary its range of invectives and blasphemy are utilised with facility. Drinkers form small groups of between five or ten persons and generally sit protected by small bushes or shrubs in a group while the bottle is passed round. The progress of the bottle is unpredictable, but each drinker takes a generous swig before handing it on. Empty bottles are cast aside, often breaking where they land, and are sometimes reclaimed later on for use as weapons.

Drinking is considered a means whereby assignations can be made and expedited. A couple, by prior arrangement, can surreptitiously leave the group and have intercourse in the adjacent bush. Some men purchase wine which is given to younger women in order to render them inebriated in the hope that they will become more compliant. Women have some protection in that a good drinking camp is always adjacent to kin and help, and any cries for help are likely to be answered. Women are considered foolish if they drink alone with a group of men. In our experience there was only one case of gang rape at Diamond Well during a drinking spree and three of the assailants were later arrested and brought to trial. However, sexual licence during drinking undoubtedly contributes to interpersonal disputes and conflicts which often mark the climax of a drinking spree.

Drinkers seldom sit still. There is a constant movement between drinking groups, discussion and debate, shouting and complaint. Drinkers embrace each other freely, hold each other up, lie upon each other and caress one another. Drinkers often declare they are hungry and set out to demand food from non-drinking members of their family or from friends. Sometimes in the dark a man or woman stumbles off and becomes lost, shouting and crying for help and direction. Sometimes drinkers claim they have seen spirits in the night and cry out hysterically in alarm, demanding help and rescue. A drinking camp has a quality of noise, disruption, hurried movement and altered states of mind and body that mark it off as fundamentally different from any other camp.

The Social Ordering of Drinking

There are rules fundamental to the organisation of all drinking at Diamond Well. When rules are broken there is complaint and dissent, sometimes resulting in physical confrontation. However, disputes over the maintenance of rules are complicated by matters of responsibility. We return to this shortly. The first rule concerns recruitment to the drinking group.

Children or youths under the age of about 18 are not expected to be taken on carting expeditions or drinking sprees. Drinking is an adult activity and to place a child or youth in danger by recruiting him to a drinking group is considered bad and punishable. We were told that an abandoned car had been deliberately set on fire where it had crashed because it had been used for a wine carting expedition which involved a youth, considered to be too young for such activities. The boy's foster-father was responsible for the arson.

Secondly, drinkers are expected to avoid drinking at certain places altogether. These include the camps which are designated 'dry' by their occupants who eschew wine, and certain 'holiday camps' should be grog-free. In the school holidays the people often move even further away from Diamond Well to one of several favoured camping spots. At such times life is very relaxed, activities tend to be oriented around the children and men and women engage in hunting and foraging expeditions away from the dust and unpleasantness of Diamond Well. However, the peaceful nature of these camps can be short lived and one car bringing in wine or drinkers can produce disruption and violence in such a place. Drinkers are expected to avoid the settlement itself which, after office hours, is the domain of

European Australians who resent noisy drinking bouts which upset their evening's and night's peace and quiet. Further, there is the rule of equal access. All those who drink are obliged to share their supplies with other drinkers once the initial allocation and cash transactions have been completed. To refuse a fellow drinker a swig from the bottle breaks the etiquette of Aboriginal drinking.7

A fourth rule has to do with diminished responsibility. The declared intention of drinking is to get 'full drunk' and intoxicated persons lack self-control and any rational inclination to act according to procedural rules. Aborigines understand then that a non-intoxicated person should assume responsibility on behalf of a drunk and ensure he conducts himself in a manner not dangerous to himself or others. The rule of diminished responsibility can be explained as follows.

The altered mind state of the intoxicated person is recognised by speakers of the local language by the use of the word kakiri, a term which is roughly translated by our word, 'intoxicated'. A drunken person's actions are para punkarni, which means literally, 'falling around'. A drunk is a man who is para punkarni and who has lost reasonable control of his movements, his speech and his reason. There is no intermediate state. People who have drunk a little and are merely tipsy are not classed with drunks. Being drunk involves a particular way of behaving, and if one is to be recognised as a drunk then behaviour must be evident to onlookers. Drunkenness is then a social state which can be assumed as well as induced by drinking.

All drinkers who become drunk can be divided into two categories. These are 'good drinkers' and 'bad drinkers'. A good drinker (palya tjikinyi) is one who drinks and gets drunk without causing damage to others or himself. A bad drinker (kuramata tjikinyi) is one who frequently ends up involved in physical assault which results in injury either for himself or the person attacked.

An aggressive drinker is described as pikarti (aggressive) a term also used of vicious dogs or other animals which will attack or bite. An aggressive drunk is also known as pika punganyi which means literally 'sick hitting' and can be translated as 'violent'. The stem pika means sickness or anger, but is considered by Aborigines to include a concept of alien possession and deviancea from the norm. A sick person is pikatjara (pika + tjara: having), a man who is not himself, and cannot be expected to behave or act in an ordinary way. A drunk who merely falls about (para punkarni) is likewise treated as someone who is sick. Sickness and drunkenness are considered to belong to the same condition. Drinkers are recognised as not being fully responsible for their actions. People drink to transform themselves into non-mundane states where rational actions are potentially abandoned. Consequently irrational and violent acts are to be expected of a drunk. The social organisation of drinking, then, is a matter of predicting danger and forestalling damaging and potentially fatal interactions by the application of procedural rules administered by non-drinking consociates who assume responsibility on behalf of drunks.

At Diamond Well there are some who decline their right to drink. Moreover, not everyone gets drunk at the same time, and some have higher tolerance levels than others or perhaps imbibe less. The line which

divides the responsible from the irresponsible in drinking affairs is one of relative sobriety and capability. A principal rule then governs the care of drunks by their more capable and competent kinsfolk who accept responsibility for the intoxicated. Kinsfolk and friends have a double responsibility: to protect the drunk from excesses of his own drunken state and to feed him and give him hospitality and rest. A drunk who needs food, shelter, warmth or covering cannot be refused by close friends for fear that he die of exposure, falls into the fire or chokes on his own vomit.

A further rule concerns the protection of drinkers from physical harm and violence. It is understood that drinkers may become argumentative, angry and sometimes violent. In the event of a fight breaking out people must be protected from each other by consociates who are either not drunk, or drunk but not angry. Anger (tjuni kura, literally 'bad stomach') is the state which may lead to violent assault and even homicide. Drinkers then should remain in company with others who are witness to their acts and can intervene if necessary to avoid violent assault. Fights are permitted and are common, and intervention only takes place if the matter appears to be getting out of hand. The social act of drinking is one whereby people who have lost their reason are protected from one another. When drinkers either move away from their consociates, or their freinds are not vigilant, the consequences of a drunken brawl may be serious injury or even death. In our understanding, men and women who are 'full drunk' do not necessarily adhere to conventions which govern combat and prohibit, for example, a direct blow on the head with a sharp instrument, or a stab wound in the chest or abdomen. However, if a fight is in full view of others, and monitored by those who will intervene if necessary, serious or fatal injuries are less likely to occur because of the intervention of those in attendance. Those who go off in pairs for licit or even illicit sexual liaisons do place themselves in jeopardy because their acts are private and not public and a woman may place herself beyond the help of friends in these circumstances.

Drinking is a business governed by rules, though these rules are observed in practice, not verbally declared or otherwise set out. At least two of the rules are the concern, not of the drinkers themselves, but of non-drinkers or non-intoxicated men and women who have an interest in the welfare of the drinkers. Thus sons, wives, brothers and close friends are expected to intervene to ensure the safety of drinkers. When things go wrong, or rules are broken, the results can be disastrous.

However, from Aboriginal perceptions, it appears that physical harm is deemed to be a consequence of lack of vigilance on the part of consociates rather than the drunken excesses of an assailant. Such acts of violence are understood to be the results of drinking and must be anticipated and so guarded against. If remedies are to be found to correct the damage that drinking causes these are understood by Aborigines to lie in the proper maintenance of rules and procedures, not in the abandoning of the drinking enterprise.

We have noted Aborigines intervene in drunken fights on many occasions in order to prevent bloodshed, though often their presence is enough to prevent the fight from degenerating into a bloody fray. Aborigines intervene to remove drunks from the settlement, or from 'dry' camps, where their presence is causing alarm and discomfort. Unlike our own society,

where drunks are shunned and ignored, Aborigines care for their drunken friends and, as they put it, 'look after them'.

According to Aboriginal understandings the rules that govern drinking are used in a variety of ways, but they are also circumvented by recourse to a number of ruses. Since it is not generally acceptable to reject demands from drunks for help, succour or aid, the only way to counter their sometimes unreasonable requests is to avoid encounters with them. One device employed is to camp some distance from the drinkers' camp and make it generally known that the camp is a 'dry' one. While this process works well up to a point, a 'dry camp' is constantly subject to nocturnal visits from drunks who, having finished drinking, seek wives or husbands. If a predominantly non-drinking family has only a single member who drinks heavily it is difficult if not impossible to turn him away in the early hours of the morning when he returns home. His return, even if he observed the rules which prohibit the importation and drinking of wine in a 'dry camp', is likely to be noisy and potentially violent. Non-drinkers seek to avoid attracting drunks by 'shutting up', that is by putting out their fires which attract drunks in the dark. In the scrub which surrounds Diamond Well it is difficult at night for drunks to locate individual camps unless there is a bright fire to guide them. Putting out the fire helps ensure that drunks do not head for the camp guided by the firelight.

In the event of a drunken visitation a senior man in a dry camp will act vigorously to maintain the reputation of his camp as a place to which drunks do not go. The recognition that a camp is 'dry' is used by its inhabitants to justify the exclusion of drunks who attempt to visit it, and this is sometimes an effective means of pursuading them to go elsewhere. However, exclusion by coercion is seldom even considered because it would result in a violent fight. A senior man or woman in a camp demonstrates his or her opposition to the invasion of drunks or to the drinking misdemeanours of fellow campers by making public statements of their displeasure, and by making threats as to the dire consequences of drunks repeating their disruptions. These statements are often made during a ritualised monologue which usually takes place after dark when everyone is in their bush shelters, and is known as a tjunparni or 'growl'. It may also take place in the early hours of the morning, just before dawn. The tjunparni is a statement of authority and an expression of dissatisfaction with a promise of subsequent retribution to remedy wrongs if they occur in the future. The 'growl' is always performed after a drinking incident, never during one, since drunks are regarded as being beyond ordinary discourse and might respond facetiously or even violently to the tjunparni. A senior camp resident cannot afford to risk a situation where his authority is seen to be the object of drunken derision.

The 'growl' and the associated rattling of spears which sometimes accompanies it may be effective within the confines of a 'dry camp', but the jurisdiction of a camp resident does not extend to other camps where he is not living. The institutionalised 'growl' is an important way by which some men and women attempt to establish and maintain their authority within their own camps by demonstrating their moral strength and opinions. However, as a real deterrent to drinkers or a method of physically controlling them it is of limited effectiveness and, in our experience, very often makes no difference to the intrusion of drinkers into a 'dry camp'.

Community Control: The Problem of Deflected Responsibility

The consequences of long and heavy bouts of sustained drinking are understood to be sometimes unfortunate, occasionally fatal. The undesirability of heavy drinking is endorsed by the White staff who often suffer directly from the effects of drunks who turn their aggression on their persons or on their property. Broken windows are a fact of life in the settlement, and physical assaults on White staff are not uncommon.8 During these periods of heavy drinking it became almost impossible to run the office, and there were few sober workers available for employment.

Since Aborigines at Diamond Well recognise the incontravertible rights of all to drink and become drunk, community control is a myth probably generated by European Australians in pursuit of so called 'management programmes'. Drinking is a matter for aggregate responsibility and cannot be subject to corporate sanctions. This can be explained as follows. Diamond Well is composed of disparate and labile groups who come together to be serviced and catered for by a group of European Australians. Each Aboriginal group is recruited for a particular business and has its own autonomy which is not subject to sanction or jurisdiction by other groups. This is an aggregate group. Moreover, there is no corporate jural body composed of Aborigines who could work to stifle the enterprise of drinking. Aborigines publicly assent to the idealised notion, at least on some occasions, that the wishes of the non-drinkers should be accommodated so that the disruptive effects which are the consequence of drinking bouts will have a minimal effect on non-drinkers and the European Australians. However, unilateral accommodation requires corporate sanctions. In the absence of a corporate body with jural propensities the Aborigines are powerless to effect accommodation. They attempt to solve their problems by asserting that it is the Whites' responsibility to manage corporate affairs. Until quite recently at least the Missionaries and others were only too pleased to assume this responsibility. Latterly, however, Aborigines have been encouraged by advisers to remedy the disruption and chaos which is from time to time the result of heavy drinking. Community and Council meeting minutes contain many examples of suggestions as to how to curb drunkenness. Their failure can now be clearly understood. Aborigines consider that drinking is a right of all residents at Diamond Well. It is further understood that individuals may be obliged to help and protect drunks. The matter cannot then be resolved by either banning liquor altogether or by prosecuting the drinkers. Unwilling to exert real control over alcohol consumption or the actions of drunks, Aborigines have devised a series of rationalisations and pseudo-remedies which do not infringe upon the right to drink and become drunk, but which do appease European Australian demands that something be done.

On several occasions Aborigines have agreed to act as inspectors, gatemen or watchmen, and patrol the main road and access roads and prevent grogging cars from entering the precincts of the settlement or passing beyond to the camps. The problem with this method of control was that it necessarily involved individuals in direct confrontation with wine carters and drunks, and they had no power, apart from that provided by their own strength of arms, to support their assumed authority. While the 'vigilante' method has had limited success on two occasions in our experience, it has never been sustained because of an absence of volunteers

who are prepared to take the law into their own hands and deny friends and kinfolk the right to drink in their own home.

In general, the Aborigines prefer that the police fulfil the role of patrol officer and keeper of the peace. However, police can arrest only in cases of disorderly conduct, assault and so on, but cannot, for example, arrest a person simply because he is taking a load of port wine into a settlement. While many Aborigines welcome police intervention when a drunk is running amok in the settlement, attitudes to the police remain cautious, probably because so many Aborigines have bad memories of the treatment they have received in the past at the hands of various policemen.

A second approach has been to ban drinking from the settlement and adjacent camps, and to designate an area some distance away where drinkers can camp and get drunk. However, obligations to look after drunks were a matter of concern, and on one occasion we learnt that a scheme to have drinkers camp some 10 km away from Diamond Well had been abandoned because people were afraid of the consequences of unsupervised drinking.

Aboriginal Christianity

The decision to stop the 'beer' in April 1982 was a part of a larger Aboriginal movement that had to do with belief, conviction and social activity. An Aboriginal-inspired Christian revival first appeared at Diamond Well in December 1981, and then again in March 1982. Increasing numbers of Aborigines began to subscribe to the beliefs of fundamentalist Christianity, and pledged a commitment to reform their lives. The results were salutary. Hardened violent drinkers gave up port wine and beer, men who were virtually dead from the effects of years of drinking stopped and recovered their vigour. Whole camps which had previously been strongholds of heavy drinkers and scenes of night-long drinking and fighting, shouting and assault became places of peace and relaxation. Sales of port wine slumped at Dindara, and the Community Council, elected in July 1982, was a wholly Christian body who pressed for a dry area in the immediate vicinity of the settlement. Drinkers, for the first time in our experience at least, became a minority.

Some groups continued drinking and the relationship between drinkers and non-drinkers remained the same in that there was no question of denying anyone who wished to do so the right to drink. However, one significant thing had changed. An activity had been abandoned by many which had formerly been an obsession. Drinking business had been given up by a large sector of the population, and the physical and social effects which had so marked the community during our time there were largely absent. We subsequently learnt that the abandonment of heavy drinking lasted during the remainder of 1982 and continued into 1983. However, sporadic drinking bouts were reported in 1983 and by the latter part of that year heavy drinking had again become a major feature of life at Diamond Well.

CHAPTER THREE

THE HANGOVER - THE MORNING AFTER

INTRODUCTION

Populations and Purchases

Having approached the issue of drinking from a purely anthropological and social perspective, in which we have placed the drinking act in its context as a business and an enterprise of its own, we now turn to its aftermath. We noted earlier an avoidance of consideration of the dysfunctional aspects of drinking on the part of some social scientists, and wish therefore to balance our own account.

Despite commonly held assumptions that Aborigines cannot hold their liquor, there is at present little or no evidence that Aboriginal people as a race consistently differ physiologically in their reactions to alcohol from European Australians (Marinovitch et. al., 1976). Apart from this notion that Aborigines are somehow less able to control themselves when drunk, there is, on the part of Europeans, often the idea that Aborigines become drunk on very little alcohol.9 Wilson, in his book on violence on Queensland Aboriginal reserves, refutes this notion, giving figures on alcohol consumption from one reserve, of two and a half gallons of beer (20 stubbies) per person per four-hour session. He comments:

> Serious doubt should be cast on the popular assumption suggesting that Aborigines cannot hold their liquor. They drink so heavily and for so long it is amazing that many can stay on their feet and not collapse (1982:52-53).

Another study quoted by Wilson questioned participants in an Alcohol Relief programme in Cairns, Queensland. Half of the residents reported that they drank daily and one in four said they would drink more than ten bottles of beer daily. One quarter of the men said that they drank more than six bottles of wine per day, and one in twelve drank more than four bottles of spirits a day (ibid:54). Notwithstanding the exceedingly difficult task of ascertaining the amounts of alcohol drunk by a given individual at any one time, we were able to gain some intimation of the amount of liquor purchased by Diamond Well people from the Dindara Hotel. This led us to the conclusion that drinkers at Diamond Well consumed large amounts of fortified wine, as well as beer from the Canteen.

The Drinking Population

The 1981 Census gave the following population figures for Diamond Well:

Males	145
Females	134
Total	279

The over-18 (drinking age) population was:

Males	83
Females	82
Total	165

In 1977 the Lutheran Superintendent who had resided at Diamond Well for 15 years made a submission to the House of Representatives Standing Committee on Alcohol. In this submission he estimated there to be 139 'excessive drinkers' out of an adult population of 226. While he did not define excessive, and it is clear that his figures were not based on any substantive data, his opinion indicates the perceived extent of the problem.

We estimate that there were approximately 80 men and 20 women who drank alcohol regularly at Diamond Well during the period of our field work. The numbers fluctuated according to movements of sections of the population to other areas, primarily Emerald Camp, and other Aboriginal communities. There were also visitors from these places staying at Diamond Well. Visitors are eligible to put their names down on the beer list for their ration of three cans from the Canteen on three days a week.

In our experience there was only occasional 'under-age' drinking. The right to drink was, in Aboriginal understandings, not extended to those under 18. Adolescents, and particularly young children, engaged in the sniffing of petrol - and it was clearly understood in the community that petrol-sniffing was a childhood occupation, drinking was for adults. One woman was heard to chide her older teenage son for petrol-sniffing, 'You gotta leave that petrol. You old enough to drink now.' Petrol-sniffing was first noted at Diamond Well in 1976 and has been apparent sporadically since that time.

Amounts of Beer

Thanks to the co-operation of the Community Accountant we were able to have access to administrative records which showed that the beer ration can amount to as many as 20 cartons on a pension day, which is 500 cans (187.5 litres). Beer is sold at $1 per can and in one sample month beer sales amounted to $4,582. As we have described in Chapter Two cans are redistributed through cash and gambling exchanges. The actual intake of beer per individual is therefore virtually impossible to deduce.

Amounts of Port

In interviews with the present Manager and a past Manager of the Dindara Roadhouse we were told that fortified wine is delivered by the pallet, each containing sixty cartons. Up until 1977 flagons of fortified wine were sold at Dindara. A flagon contains two litres. Each carton delivered to the hotel contained four flagons. When Dindara opened its doors in 1976 on the newly bitumenised highway, Diamond Well Aborigines were buying sixty cartons of port per week from Dindara, making a total of 240 flagons of port (480 litres) per week. When Dindara stopped selling

flagons in favour of bottles (750 ml) at the request of the police, the Manager told us that the Aborigines purchased the same quantity of port in the more expensive bottles - money was not an issue.

In 1981, the average weekly sales of port were thought to be thirty cartons of 12 bottles each, that is, 360 bottles per week (270 litres). However, it was admitted that during some months of really heavy drinking the figure could be twice that. When the Christian movement became popular in 1982, large numbers of Diamond Well people gave up drinking as it became identified with sin and was considered to be bad. As a consequence sales of port were drastically curtailed. As the Manager wryly commented, 'They've started buying guitars instead of booze.'10 His estimate of sales of port as at August 1982 was that the Hotel's stock of 60 cartons lasted for about eight weeks, bringing actual sales to approximately 90 bottles (67.5 litres) per week. In summary, then, port sales estimated by the Roadhouse Manager were as follows:

Year	Amount sold per week
1976	60 cartons = 720 bottles (480 litres)
1981	30 cartons = 360 bottles (240 litres)
1982	30 cartons in 4 weeks = approx. 90 bottles (67.5 litres)

Estimated Expenditure on Alcohol

In one month, October 1981, residents of Diamond Well who were entitled to wages, social security benefit or payment for artefacts received income as follows:

Total wages (C.D.E.P.*etc.)	$ 14 840.00
Pensions, endowment etc.	22 516.00
Other income	2 205.00
Total	$ 39 561.00

In the same month money was spent as follows:

Store takings	$ 26 308.00
Beer sales @ $1.00 per can	4 582.00
Total	$ 30 890.00

*C.D.E.P. is a bulk payment made to the community to be payable as wages, in lieu of unemployment benefits.

This leaves the sum of $8 671 not spent on beer or in the store. Now, we know that there was generally heavy drinking during October. Allowing for other purchases, at the Roadhouse or in town, and for money saved privately, it is conceivable that most of this amount, say $6 000, was spent at Dindara in one month. Further, the Dindara Manager guessed that Diamond Well people spent up to $2 000 a week there at peak drinking times.

In summary then, with a drinking population of approximately 100 people, we guess that expenditure on fortified wine prior to the Christian non-drinking trend varied from approximately $3 000 to $6 000 per month. During a peak drinking period (October 1981) $4 500 was spent on beer. During periods of heavy drinking, then, as much as $10 000 may have been spent on alcohol and, during October 1981, this would have been approximately one quarter of the population's income.

THE SOCIAL AFTERMATH OF DRINKING

Aborigines

There is no doubt that Aborigines who were not involved in the drinking business were constantly disturbed, displaced and impinged upon by the actions of those who were drinking. We have mentioned the strategies employed by people in attempts to avoid confrontation and disturbance. Even though Aborigines organised their drinking in specifiable ways, nevertheless there were many occasions when women were frightened and threatened by drunken men; children were disturbed and sometimes maltreated, and life was generally tense and uneasy as a result of drinking. Women married to heavy drinkers were expected to stay with them and look after them. Some were too frightened to leave, saying their husbands would pursue them (see also Bell & Ditton, 1980:17).

Children were sometimes mistreated at Diamond Well by parents who drank heavily and there were at least two cases in which the deaths of children were attributed to the chronic drinking of the parents. Both came from the same family: a girl aged two years died in 1972 for 'failure to thrive' (Clinic definition) and another daughter died in 1977 after falling in the fire while the parents were drunk.

Children were sometimes left behind at Diamond Well while their parents took up residence at Emerald Camp. Sometimes this was a satisfactory arrangement but sometimes such a child did not receive adequate care from the relatives assigned to the task. It was under these circumstances, (particularly if the other relatives were themselves drinkers) that Diamond Well people emphasised the role of the real or

biological parents, and criticised in public their failure to care for their children regularly.

At Diamond Well, people use specific vernacular terms to designate their kin. A person calls his mother and his mother's sisters by a single term - nguntju, and his father and his father's brothers by a second term - mama. So a Diamond Well child would have several 'mothers' and 'fathers' while being aware of who his biological parents are. This system of classificactory kinship reduced the exclusivity of the categories, as Hamilton has pointed out (1981:92). The resources of relatives who are asked to care for other people's children were frequently stretched. One 10-year-old boy was often seen to be alone at the settlement after others had returned to their camps in the evenings. His parents were Emerald Camp residents and, despite having other relatives at Diamond Well, no one seemed prepared to care for him consistently. He became a chronic petrol-sniffer and appeared in the Children's Court on several occasions. He was finally taken out of Diamond Well by the Department of Community Welfare to be fostered by Whites in a southern capital.

The categorisation of 'neglect' is not an easy one to make. In fact Hamilton has termed it 'wholly inappropriate' (1982:62).11 Aboriginal children are independent and self-sufficient from an early age and are allowed to roam the camps freely. 'Bed time' is not the major issue that it often is for Europeans, and children may sit around in the cold and wet wearing few or sometimes no clothes at all. Sores and infections were common at Diamond Well and their presence did not signify that a child was neglected.

Children missed meals when relatives were too drunk to prepare food. Although it was quite acceptable for children to seek out and share in food at other camps if they were not present at the right time, it was likely that they could be left out. Because drinking took place at camp rather than in the settlement, children would sometimes stay in the settlement in the late afternoon, hanging around after school. It was on these occasions, when several children stayed together in the evening at the settlement, that they engaged in petrol-sniffing or tried to steal cars and food (see Brady and Morice, 1982:72-88). To this extent adult drinking did affect the activities of the young: they were simultaneously avoiding drunks, while obtaining food and excitement. The appointment of a European youth worker had, to some extent, alleviated this - his house was being used as a drop-in place for children not at their camps.

Whatever the true situation, Europeans and Aborigines alike attributed to the drinking behaviour of parents the anti-social acts of their offspring. Frequent drunkenness was scapegoated as being the 'cause' of problems such as petrol-sniffing and stealing. This was despite the fact that some of these disapproved acts were also performed by children who came from non-drinking families. Like Europeans, Aboriginal people would like to give reasons for otherwise inexplicable behaviour.

Whites

The regularity of settlement-based incidents (fights, broken windows and abuse) also had its effect on the White staff. On a small and isolated settlement troubles of this kind, together with frequent break-ins and car

stealing by teenagers, were intensified. The situation was particularly difficult for new staff, for it took time to become part of the way of life on such a settlement. It took time and patience to become used to the many unexpected and sometimes undesirable incidents and interactions that occurred. In a sense, it was to the detriment of the Aboriginal population itself that the survival of some staff members was short-lived, for the people preferred staff who they had known over a lengthy period of time. With the demise of the mission in 1975 and its staff members who were motivated primarily by Christian beliefs, it became more difficult to attract staff who would be hard-working, sensitive and yet willing to endure assaults on their property and occasionally on their person. In the four years that one of us (M.B.) was associated with the community, there was a complete changeover of staff apart from two school teachers and two nursing sisters.[12]

Violence, Visibility and the Law

It has been suggested by some anthropologists that drunkenness performs a useful and consolidating function when tension and dispute exists in social groups. Lemert (1958), Swed (1966), Robbins (1973) and Myers (1976) provide evidence to support this view. Myers states that Pintupi men who had grievances against each other usually ended up fighting when they were drunk. However such disputes were quickly forgotten because people were not held responsible for their actions. If the antagonists had been sober, the interactions would have caused more tension and further dispute (quoted in Stead, 1980:69).

At Diamond Well drinking offered people opportunity for a series of social exchanges and to express enjoyment, laughter and affability. Drinking enabled marital disputes to be aired, usually in the relatively safe environment of daytime at the settlement, with plenty of onlookers about. In general this ensured that no serious harm could ensue. It was only when both parties were inebriated and either out of earshot of help or surrounded by equally drunk others that serious injuries and death tended to occur. Drinking also enabled men to assert their prominence over boys in drinking groups and in their control over the membership of such groups.

To some extent Diamond Well people, as with the Pintupi, made allowances for what people did when drunk. A woman explained to one of us that her husband 'didn't know who he was talking to' when he abused and beat her the night before, and said that he couldn't remember anything the next day. On the other hand a man who had served time in gaol for manslaughter and who persisted in committing violent assaults when he was drunk was known as a 'murderer' of whom people were frightened. His behaviour, far from dissipating tension, caused severe anxiety.

Diamond Well people, when drunk, fight with European tools which become weapons and although in some circumstances cultural rules affect the scope and severity of the injuries, in many others no holds are barred. At the point when a serious assault is drawn to the attention of the Clinic, or the Community Advisor, there is the growing likelihood that the police will become involved. The reporting of incidents does not occur as a matter of course at Diamond Well. By far the majority of incidents, the results of which appear as injuries in the Clinic data, would have passed unrecorded as criminal offences.[13] In serious cases of bodily harm (any

assault treated by a doctor) and grievous bodily harm (an injury which nearly causes death) White advisers would encourage the victim to make a complaint.

At the point when the police become involved, the drinking act and its aftermath, which up until then had been contained within an Aboriginal realm and existed according to Aboriginal rules, becomes transformed into another sphere altogether. The incident and its context ceases to be an Aboriginal matter and becomes lodged within a Euroepan framework of police statements, custody, bail, court appearance and penalty.

The police visit Diamond Well once a week as a matter of course and attend on request when possible. The Aborigines themselves on occasions ask that the police be sent for. There have been requests that police be stationed on the settlement itself. By such requests some sectors of the Aboriginal community further stress that it is not their responsibility to deal with the violence that can follow drinking. In view of our earlier comments explaining the limited jurisdiction of individual Aborigines over the affairs and disputes of others, it can be seen that the police fulfil a useful function. To call for the police to sort out a melee that is in process or to haul away the participants once it is over is to relieve others of a sometimes delicate and unwanted task. However, Aboriginal people at Diamond Well do not have easy access to the police, particularly for incidents occurring at camp, which may be some kilometres away from the settlement. There are no phones outside the settlement, requests for police presence must be channelled through the administration. Moreover, it takes the police one hour and fifteen minutes to drive to Diamond Well. For these reasons the police arrive, for the most part, after the event.

Living at Diamond Well are those who will intervene (at times) to prevent or curtail violence. Moreover the settlement itself provides a sanctuary obscuring such incidents from the gaze of the outside world. Beyond this protection Diamond Well Aborigines are subject to greater surveillance and scrutiny and are therefore liable to come under the jurisdiction of Europeans and European law. Diamond Well people who move drunkenly or violently into public space, at Dindara or in town, are exposed and vulnerable, as are the Wallaby Cross residents of Sansom's study when they move into the 'common pitch'. Sansom states:

> A distant place is generally associated with particular orders of social action and particular orders of risk...grogging of itself is dangerous. Hard drinking leads to diminished responsibility and grogging in company carries the danger of sparking drunken brawls. The police and the public have their interest in public drinkers (1980:57,58).

Dindara is closer to the police station than is Diamond Well, and the publican, within sight of the usual drinking place next to the pub and concerned about his tourist clients, can easily phone through a complaint of drunk and disorderly behaviour. In town, Aborigines are subject to the disapproving eyes of a White rural population generally intolerant of its Aboriginal fringe-dwellers. If an incident is witnessed or if a White complains, an Aborigine will inevitably be charged - although not all charges will result in convictions.

There was a rise in alcohol-related Aboriginal court appearances at the town court from 397 (34 percent of the total court appearances) in 1980 to 688 (58 percent of the total court appearances) in 1981. The Clerk of the Court attributed this rise to the high numbers of Diamond Well people who had that year sought unemployment benefits, unlimited access to alcohol and residence at Emerald Camp. These figures confirm that once Diamond Well people cease to drink in the protection of their camps in the safety of the bush, they are liable to be arrested and prosecuted by the European legal system.

THE PHYSICAL AFTERMATH OF DRINKING

The Clinic Data - Methodology

Clinic records provided two perspectives. One was a long-term picture of alcohol-related illnesses, injuries and deaths since 1976. The other was a more detailed short-term view for the six-month period January to June 1982. The 1976 - 1982 information was compiled for us by the Clinic staff from their records. The six-month data was compiled from a simple questionnaire completed by the duty nurse for each alcohol-related consultation over that period (see Appendix I).[14] These questionnaires were completed under difficult circumstances, for at times the nursing staff were grossly overworked - during a hepatitis outbreak, for example, or when one of the sisters was on holidays. Three different sisters completed questionnaires over the six-month period.

There may be inaccuracies and shortcomings in the data for these reasons. However we were able to gain an overall picture of the extent of consultations which, in the opinion of the nruses, concerned alcohol-related injury or illness. It is probable that many ailments and some minor injuries passed undetected and were not reported to the Clinic.

Diagnoses would be made where possible by nursing staff, although in some cases they did not feel able to make a definite diagnosis. A doctor visited the community by plane every two weeks to conduct clinics. The nearest hospital is in the town and all fractures, serious burns or lacerations, severe gastro-enteritis and illnesses were evacuated there by private car or the community ambulance.

We make relevant comments alongside the data where possible, in order to integrate our knowledge of the circumstances surrounding some of the events with our presentation of the statistics.

We first consider the data which covered the six and a half year period January 1976-June 1982.

Evacuation to Hospital

Patients are taken to hospital in town if their injury or illness is considered too severe to be treated at the Diamond Well Clinic. Fractures along with lacerations requiring more than a few stitches are always sent to hospital, as are serious burns. Those injuries designated as bruises presumably required observation, or X-ray for possible fractures, tasks that can only be performed in hospital. 'Other' signifies such mishaps as

dislocations, observation after motor vehicle accident, etc. Table 1 shows figures for evacuations to hospital for the period January 1976 to June 1982, covering injuries and illnesses considered by the Clinic staff to be alcohol-related. Table 1 (a) gives this data for men.

Table 1 (a)

A breakdown of alcohol-related injuries and illnesses requiring evacuation to hospital, 1976-1982. MALES N = 59

	INJURIES				ILLNESS	OTHER	TOTAL	%
YEAR	FRACTURES	BURNS	LACERTIONS	BRUISES				
1976	4	3	3	1	2	1	14	23.7
1977	1	-	-	-	1	1	3	5.0
1978	5	-	4	-	-	-	9	15.3
1979	5	-	-	-	1	3	9	15.3
1980	1	-	2	-	2	7	12	20.3
1981	4	-	2	-	-	1	7	11.9
1982	1	1	-	-	3	-	5	8.5
TOTAL	21	4	11	1	9	13	59	
%	35.5	6.7	18.6	16.9	15.3	22.0		100.0

Table 1 (b)

A breakdown of alcohol-related injuries and illnesses requiring evacuation to hospital 1976-1982. FEMALES N = 52

	INJURIES				ILLNESS	OTHER	TOTAL	%
YEAR	FRACTURES	BURNS	LACERATIONS	BRUISES				
1976	7	2	1	1	-	1	12	23.1
1977	-	-	1	-	-	-	1	1.9
1978	2	-	1	1	-	1	5	9.6
1979	10	2	-	1	-	1	14	27.0
1980	5	1	3	-	-	1	10	19.2
1981	5	-	4	-	-	1	10	19.2
1982	-	-	-	-	-	-	-	-
TOTAL	29	5	10	3	0	5	52	
%	55.8	9.6	19.2	5.8		9.6		100.00

Table 2 presents a summary by sex of the above information.

Table 2

Alcohol-related evacuations by sex, 1976-1982. N = 111

	FRACTURES		BURNS		LACERATIONS		BRUISES		ILLNESS		OTHER	
	N	%	N	%	N	%	N	%	N	%	N	%
MALES	21	18.9	4	3.6	11	10.0	1	0.9	9	8.1	13	11.7
FEMALES	29	26.1	5	4.5	10	9.0	3	2.7	-	-	5	4.5
TOTALS	50	45.0	9	8.1	21	19.0	4	3.6	9	8.1	18	16.2

The information contained in Tables 1 and 2 was drawn up in simplified form a chart for use as an educational aid by the nursing sisters at Diamond Well. We present a reduced-size version of the chart in Appendix II.

Tables 1 (a) and (b) show that the years 1976 and 1979 produced high numbers of hospitalisations. In 1976 the road between Diamond Well and Dindara was bitumenised. 1979-80 were years of community unrest and staff sackings - factors which may have had their impact on the level of drinking.

From Table 2 we can see that eight more women consulted for fractures than did men, although there were seven fewer female patients than male patients. A fracture was the most common injury for men and women, being 45 percent of all the injuries to require evacuation to hospital. Clinic staff explained that all fractures were sent to hospital for the setting of bones. Details of alcohol-related illness evacuations are contained in Table 3.

Table 3

Diagnosis of alcohol-related illnesses requiring evacuation to hospital 1976-82.15

YEAR	DIAGNOSIS	MALE	FEMALE	AGE
1976	Neurological disorder	1		59
	Hemiplegia	1		32
1977	Dehydration and broncho-pneumonia+	1		45
1978	-			
1979	Pancreatitis	1		48
	Clot from mitral valve replacement*+		1	46
1980	Hepatoma+	1		42
	Duodenal Ulcer	1		?
1981	-			
1982	Pancreatitis	1		51
	Liver dysfunction	1		40
	Liver failure+	1		44
TOTAL		9	1	

* Not an illness stictly speaking but designated by nurses as alcohol-related
\+ Later died

In the Australian population as a whole it is women who tend to suffer more organ damage as a result of heavy alcohol intake.[16] Sargent points out that there is agreement that the cirrhosis mortality rate is higher for women (1979:122). It is interesting to note from our data that those suffering from alcohol-related illness were all men. We can exclude the one female who died from a clot from mitral valve replacement - this was designated by the sisters as alcohol-related because the woman failed to take her anticoagulant medication beacause she was frequently drunk. However, our sample is very small and so it is not possible to draw any firm conclusions from this.

Diamond Well people well understand that drinking a lot can make them ill, and they know that some people die of these illnesses. However, some people believe that after treatment they will be all right. One man,

knowing that one of us had previously investigated petrol-sniffing, announced that he was 'O.K.' because he was a drinker, not a petrol-sniffer. The doctor could not help petrol-sniffers (they had been told that lead from petrol was irretrievable once laid down in the tissues), but that if he got sick from the alcohol, the doctor could 'fix him up'.

Another man, who had been ill several times, resisted the entreaties of his family to stop drinking. 'It's my own body', he said, 'you can't stop me'. He collapsed after a heavy drinking bout and was hospitalised with a diagnosis of pancreatitis. His wife described visiting him:

> I went to see him in the hospital. He was lying flat like paper...had a big lump on one side of his tummy, like a baby inside, hard. I felt 'em, felt 'em, make it soft, then he vomit. Green stuff come out like malu [kangaroo] stomach. He was all loose, skin all loose. Different man, got different skin, lost all that big talk.[17]

After this he stopped drinking because, he said, he had realised that he was killing himself. Many Diamond Well people told us that they were drinkers in the past but they had stopped because they became ill. Others have ignored the physiological warnings and have died as a result. One man gave us his own understanding of an alcohol-related death as follows:

> Wine fills up the brains, tjuni [stomach] and leave no room for kurti [spirit]. That kurti tries to get out, squeeze 'im out. When that happens, you die.[18]

It was commonly thought that drinking too much meant that your 'brains were no good', and heavy drinkers were berated by others to this effect. There were occasions after a death had occurred when Diamond Well people attributed the cause of death to 'too much wine' even when this was not, in fact, the primary cause. In May 1982 an elderly woman died of a stroke but, because she was married to a drinking man and she also drank occasionally, it was believed that ner death was caused by a heart attack from drinking. One man thought that perhaps her husband had 'killed her' by giving her too much wine.

* * *

Six Month Survey of Clinic

We shall now present data compiled from the six-month questionnaires completed by the Clinic nursing staff for the period January-June 1982. The need for anonymity made it difficult to identify with absolute accuracy individuals who had multiple attendances at the Clinic. Consequently, the questionnaires identified consultations, not individuals. Patients' names were changed into identity numbers known only to the nursing sisters. This was a condition of our access to the files laid down by the Community Council and the health authorities. However, we were able to use the identity numbers to establish individual patients, assuming the nurses had been consistent in their use of the identity numbers.

Over the six-month period January-June 1982 there were, in all, 181 consultations made at the Clinic for alcohol-related causes. With careful

compilation of identity numbers we were able to ascertain that these 181 visits were made by 66 individuals. With a drinking population of approximately 100 it is clear that approximately two-thirds had to seek medical attention as a result of their own, or others', drinking.

Figure 1 below shows the number of occasions on which individuals sought attention at the Clinic in six months.

FIGURE 1

Number of visits to the clinic by number of individuals
January-June 1982. N = 66. Total visits = 181

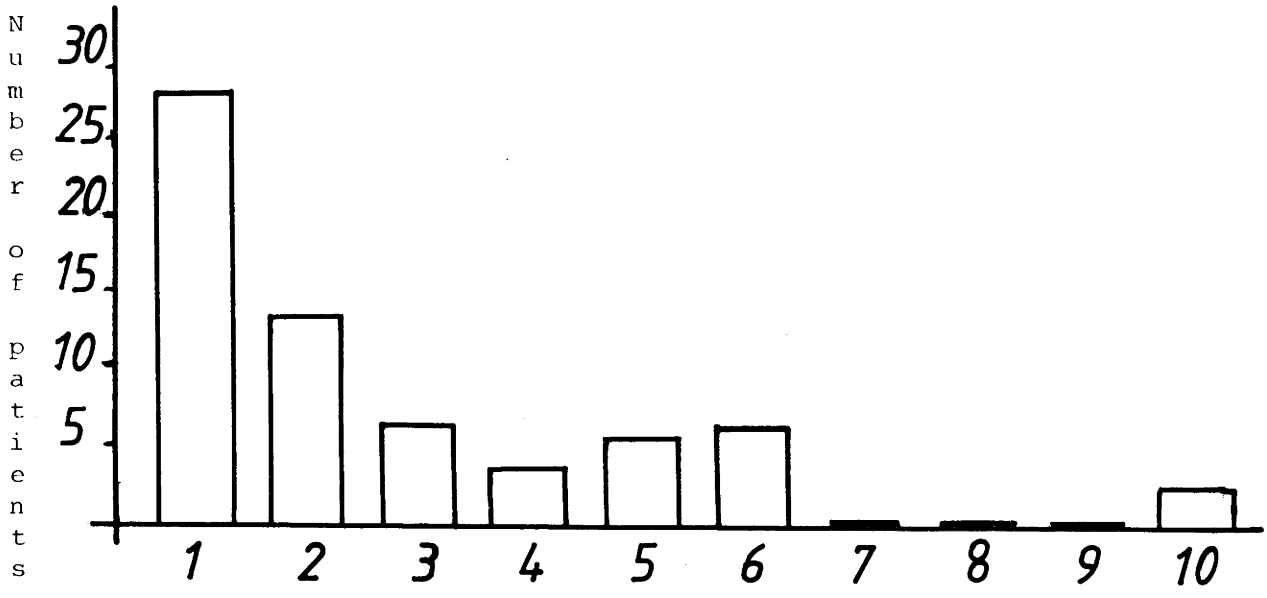


Figure 1 shows that 28 people visited the Clinic once, 14 visited twice, six visited three times, four visited four times. In all, 18 people visited the clinic on four or more occasions in six months. It is likely that many individuals making multiple visits to the Clinic were receiving treatment for burns. This is because our analysis of the type of injury by visit number showed that burns most often required three or more visits (see Table 10).

Our information on alcohol-related illness for the six-month period is fairly sketchy. There may have been Diamond Well people already hospitalised and others who did not come to the attention of the Clinic during the period of data collection. However, of the eight consultations for illness in this time, the diagnoses were as shown in Table 4.

Table 4

Consultations for alcohol-related illness, January-June 1982

NUMBER OF CONSULTATIONS	DIAGNOSIS
1	Pancreatitis
2	Pneumonia
2	Cirrhosis
1	Stupor (alcohol + petrol inhalation)
1	Fitting
1	Gastritis
TOTAL 8	

The following data concern alcohol-related injuries. These were taken from the questionnaires. We first present simple frequencies, then we give cross-tabulations on relevant data.

Table 5
Consultations by sex, January-June 1982

SEX	N	%
MALE	112	62
FEMALE	69	38
TOTAL	181	100

Table 6
Consultations by month, January-June 1982

MONTH	N	%
JANUARY	39	22
FEBRUARY	32	18
MARCH	22	12
APRIL	33	19
MAY	44	25
JUNE	8	4

N = 177 Missing = 4

Table 7
Consultations by days of week, January-June 1982

DAY	N	%
MONDAY	25	14
TUESDAY	22	12
WEDNESDAY	31	17
THURSDAY	37	21
FRIDAY	41	23
SATURDAY	12	7
SUNDAY	10	6

N = 178 Missing = 3

The approximate population of Diamond Well over this period was 300: the 1981 Census gave the population aged 18 and over as 165 (83 males and 82 females). We can assume that the number of consultations given in Table 5 for alcohol-related injuries is indicative of the level of drinking at that time. It was our impression that there were, over all, more male than female drinkers. Fluctuations shown in Table 6 probably reflect levels of drinking influenced by social and organisational factors. Over December 1981 and January 1982, despite the emergence of the Christian movement, the community was - as far as its management was concerned - in a disorganised state. There had been several changes of staff and there was no Community Advisor appointed after the resignation of the previous Advisor in December. The community was, in effect, managed by DAA and by other staff taking on extra workloads. The initial impetus of the Christian movement had ebbed in May and it was not until June that a new surge of interest in the movement became apparent, after the visit of Christians from another community. May was the month in which an alcohol-related group rape occurred, as well as the month of the highest number of consultations (25 percent).

Table 7 identifies the Clinic's busy days. Cheques are exchanged for cash on Mondays, Wednesdays and Fridays and on these days the beer ration is given out. Wages are paid in full on Wednesdays and are followed by trips to Dindara. Wednesday nights and Thursdays are the nights of the most prolonged and overt drinking. This is reflected in visits to the Clinic in the latter part of the week. A sister commented that Friday was a busy day because people had 'come round' from Thursday by then and sought medical attention for injuries they may have received on Wednesday night. On Saturday and Sunday a sister is available but the Clinic is not open. At weekends people at Diamond Well tended to take the opportunity to go off hunting or to collect artefact wood. The weekend is not the binge time that it is for White Australians.

We asked the nursing sisters to identify the type of injury seen at each consultation (see questionnaire in Appendix I), and divided these into bruises, lacerations, fractures and burns. When compiling the data, we were able to link several injuries together, e.g., bruise + laceration, and will present this in detail later. Table 8 shows five main categories of types of injury for men and women.

Table 8
Type of injury by sex

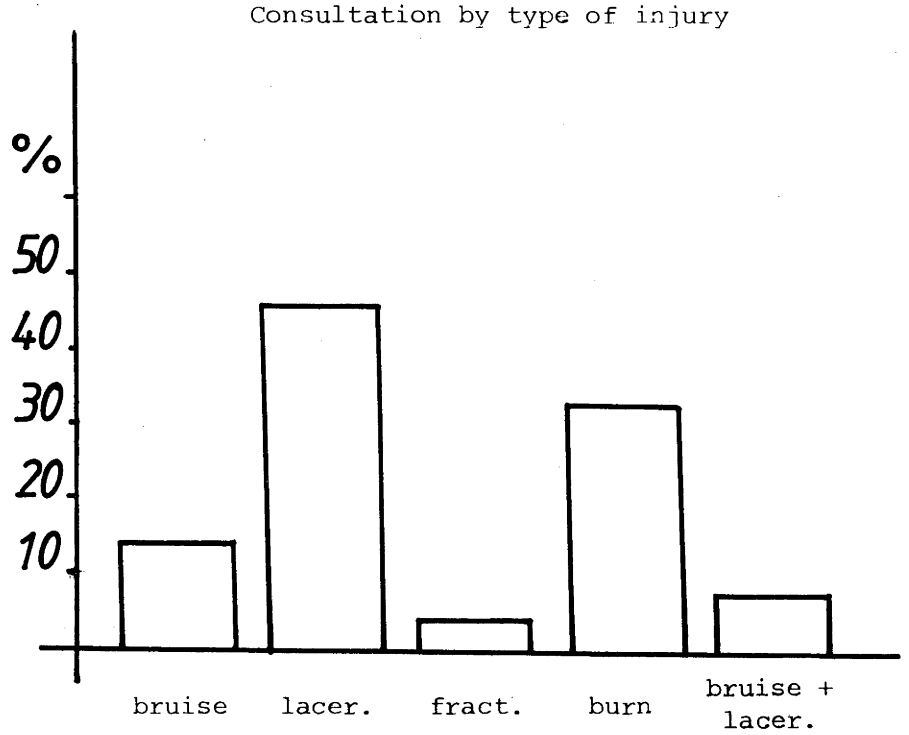
SEX	N/A	TYPE OF INJURY					
		BRUISE	LACERATION	FRACTURE	BURN	BRUISE + LACERATION	ROW TOTAL
MALES	7	11	55	0	34	3	110
ROW %	6.4	10.0	50.0	0	30.9	2.7	61.5
FEMALES	1	13	26	2	23	4	69
ROW %	1.4	18.8	37.7	2.9	33.3	5.8	38.5
TOTAL	8	24	81	2	57	7	179
%	4.5	13.4	45.3	1.1	31.8	3.9	100

N = 179 Missing=2 (males)

This table shows that men suffered more lacerations than any other injury, followed by burns and bruises. Women's injuries followed a similar pattern: they consulted the clinic for fewer lacerations than men, but slightly more bruises and fractures. In Figure 2 below we present the types of injuries as percentages, without differentiating between the sexes.

FIGURE 2

Consultation by type of injury



In Figure 2 there is a high incidence of lacerations (45 percent of all injuries). This indicates the occurrence of fights or assaults utilising weapons, rather than fists. Either there are confrontations which involve hitting only with fists which do not cause injuries requiring medical attention, or Diamond Well people tend to pick up objects which are used as weapons when they fight. Rocks are plentiful, particularly around the settlement, and were frequently used as weapons. They were often picked up by those engaging in an argument as a form of threatening gesture but not necessarily for use. When used, however, they became missiles, rather than 'bashing tools' as Sansom calls them (1980:104), and were the major anti-property weapon. Sticks, bottles and small axes were frequently used as weapons in inter-Aboriginal fights, but knives were seldom used. Tools, such as wheel-braces and crowbars, were also wielded. All these were readily available around the camps. Such weapons are known to cause grievous bodily harm; some have caused fatal injuries. Diamond Well people do own .22 rifles but a rifle was never used by a drunken person as a weapon. Rifles were kept hidden. On the one occasion (that we know of) when an Aboriginal man shot another, neither were drunk.

In contrast to lacerations, burns, the next most frequent injury (32 percent, were, on the whole, self inflicted. When people were drunk they often rolled into a fire, or inadvertently stepped on hot ashes. At night, particularly in the winter months, people slept close to fires for warmth. Most burns were to the back (as we shall see later). When a drunken person lies down to sleep he may roll into the fire because of his unaware state. Because a drunk is to an extent anaesthetised, he may not be aware that he is suffering burns to his body. There have also been deliberate burnings, since a fight may involve the use of firesticks.

In the following Table we have related the types of injuries to each month from January to June 1982.

Table 9
Type of injury by month

INJURY	JAN.	FEB.	MAR.	APR.	MAY	JUNE	TOTAL
N/A	2	6	0	0	0	0	8
Bruises	5	5	6	4	4	0	24
Lacerations	25	12	12	16	13	2	80
Fractures	0	0	0	0	0	2	2
Burns	7	8	1	12	24	5	57
Bruises & Lacerations	0	1	2	1	3	0	7
TOTAL	39	32	21	33	44	9	178
%	22.0	18.1	11.9	18.6	24.9	4.5	100.0

Table 9 shows that 44 consultations were made in May (24.9 percent of all consultations) followed by 39 (22 percent) in January. Those two months showed high levels of consultation for the two injuries most likely to be associated with drinking: lacerations and burns. Burn injuries are a good indication of the level of drinking as they represent mostly unintentional injury (as explained) and lack of alertness. The drop in the number of burns from 24 in May to five in June is significant. January and May were months in which there was a noticeable lull in the religious anti-drinking trend, a lull that is reflected in the alcohol-related injuries.

Our questionnaire asked the sisters to circle whether the patient was attending the Clinic for the first, second, third or more time for that injury, and the results are presented below.

Table 10
Visit No. by injury, January-June 1982

VISIT NO.	N/A	BRUISE	LACERATION	FRACTURE	BURN	BRUISE & LACERATION	TOTAL
1 VISIT	7	12	34	1	9	2	65
%	87.5	50.0	42.5	50.0	15.8	28.6	
2 VISIT	1	7	16	0	10	2	36
%	12.5	29.2	20.0	0	17.5	28.6	
3+ VISITS	0	5	30	1	38	3	77
%	0	20.8	37.5	50.0	66.7	42.9	
TOTALS	8	24	80	2	57	7	178

N = 178 Missing = 3

Table 10 shows that the injuries most often requiring three or more visits for medical attention at the Clinic were burns. There were:

9 cases of burns requiring 1 visit
10 cases of burns requiring 2 visits
and 38 cases of burns requiring 3+ visits.

Although, overall, lacerations were more common (45 percent of all injuries compared to burns constituting 32 percent) they were stitched or bandaged and the patient stood a reasonable chance of them healing up, with some follow-up visits. Burns, on the other hand, were more time-consuming in terms of the Clinic workload, and as an injury a burn was more problematic. People had great difficulty in keeping burns clean and free of sand, and in keeping bandages over them, particularly on legs. It must be remembered that the people lived in traditional shelters with earth floors, sat on the ground and did much travelling in the back of trucks. All these factors influence the degree of discomfort and difficulty with injuries, and particularly with burns. Several Diamond Well people have had major skin graft surgery for severe burns.

In order to ascertain roughly how severe injuries were, we asked the sisters to make an assessment along a six-point scale. Points one and two were minor, points three and four were medium, five were severe, six were fatal.

Table 11

Severity of injury by type of injury

SEVERITY	N/A	BRUISE	LACERATION	FRACTURE	BURN	BRUISE & LACERATION	TOTAL
N/A	8	-	-	-	-	-	8
MINOR 1	-	11	18	0	5	3	37
2	-	2	35	1	38	0	76
MEDIUM 3	-	4	15	0	7	3	29
4	-	0	1	1	3	0	5
TOTAL	8	17	69	2	53	6	155

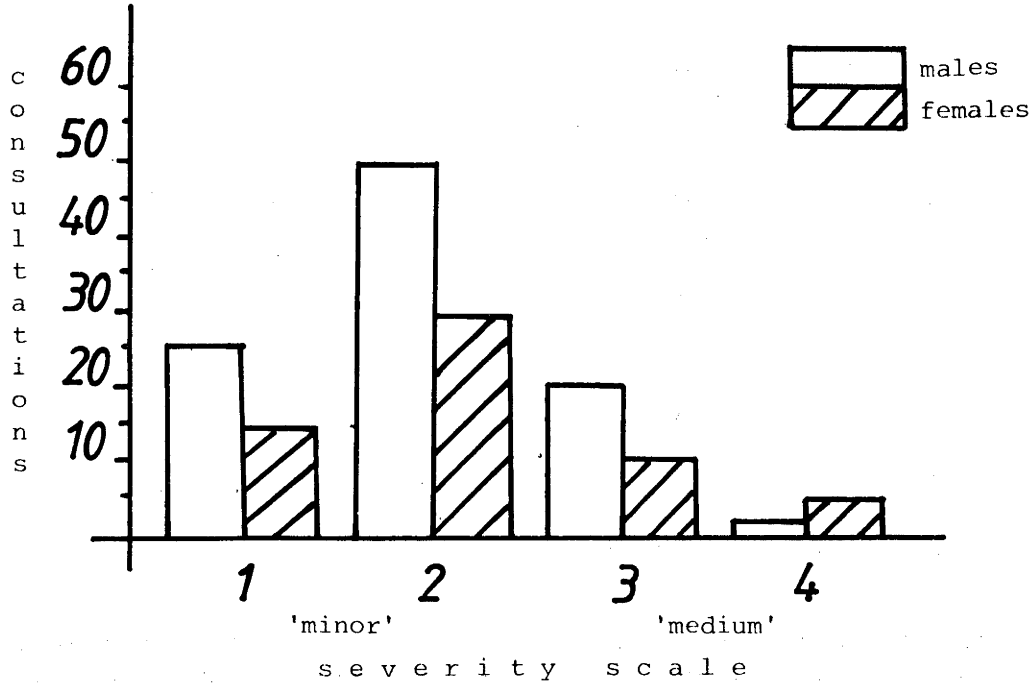
N = 155 Missing = 26

In the six-month period there were no injuries designated as level 5, i.e., 'major extensive and/or severe injuries' and no deaths from alcohol-related injury. The injuries seen therefore fell between levels 1 and 4 in terms of severity. Lacerations (45 percent of all injuries) were most usually rated as being severity '2' by the sisters'. Burns were also most often severity '2'. However burns more than any other injury in this six-month period were given a severity of '3'.

A breakdown of the severity of injuries by sex of the victim is presented in Figure 3 below.

FIGURE 3

Severity of injury by sex of victim



From Figure 3 it can be seen that injuries sustained by men and women followed a similar pattern of severity, with the exception of the most serious point on the scale '4' (in this six months). Significantly, more women than men rated on this level of severity. The relationship of severity with visit number (1st, 2nd or 3+) is shown in Table 12.

Table 12
Severity of injury by visit no.

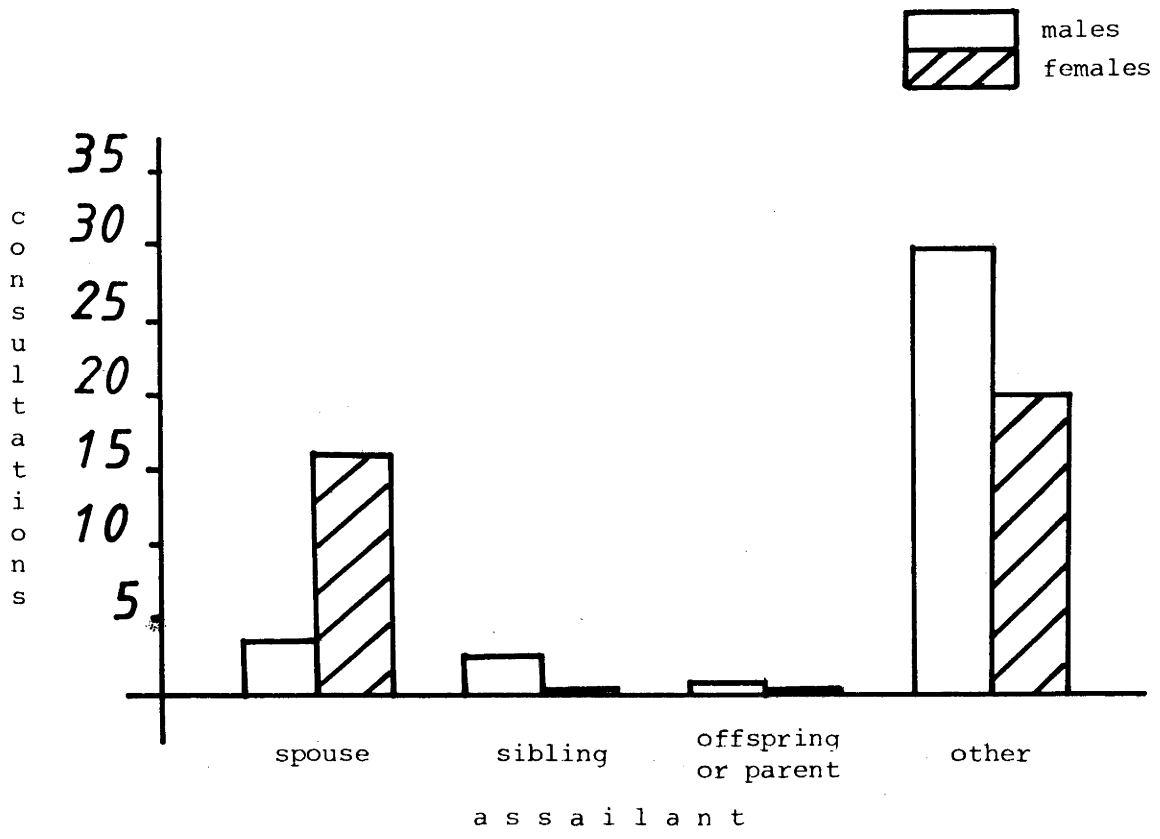
SEVERITY	FIRST VISIT	SECOND VISIT	THIRD VISIT	
N/A	7	1	0	
1	15	8	14	
Minor				
2	23	12	41	N = 154
				Missing = 27
3	8	7	13	
Medium				
4	1	0	4	
TOTALS	54	28	72	

Perhaps the most significant figure to show up in Table 12 is the high number of minor injuries '2' which required three or more visits (35.7 percent of all consultations). This suggests that the Clinic staff devote much time to 'repair' work on already treated injuries, and reinforces our comments vis-a-vis the problems associated with rapid healing. Clinic staff commented that it was very difficult prescribing a course of antibiotics for a habitual drinker; such a person tended to forget to take the medication or lost the tablets. Diamond Well Aborigines do experience problems in storing tablets or medicines and it is very easy for them to get lost or damaged at camp. Women sometimes keep tablets in the lining of a dress, or wrapped up and kept in their bosom. Some have handbags for this purpose. The sisters try to overcome this problem by dispensing small amounts of medicine or tablets, and people must simply go back for more when they need it.

Figure 4, following, presents what information we were able to gather on the relationship between assailant and victim: of 181 consultations we had information on only 74 cases. Naturally this was not easy information to obtain and unless the patient volunteered it the sisters did not pursue it. Our categories refer only to immediate family members - spouse, sibling, parent or offspring. 'Other' may therefore be a near or distant relative or someone not related at all.

FIGURE 4

Assailant by sex of victim



N = 74 (8 were N/A)
Missing = 10

Even with the limited responses, Figure 4 shows that in 49 known cases (66 percent) the assailant was designated as 'other'. In 11 consultations by women the assailant was their husband, whereas only three men were injured by their wives. Table 13 shows the type of injury inflicted by various categories of assailant.

Table 13
Assailant by type of injury

RELATIONSHIP	INJURY					
	N/A	BRUISE	LACERATION	FRACTURE	BURN	TOTAL
	8					8
Spouse	0	3	7	1	3	14
Sibling	0	0	2	0	0	2
Offspring/ Parent	0	0	1	0	0	1
Other	0	6	25	17	1	49
TOTAL	8	9	35	18	4	74

N = 74
Missing = 107

Table 13 which designates an assailant, confirms that indeed some burns (4) were deliberately inflicted, three of them by the spouse of the victim. The high number of missing information makes it very difficult to make any definitive comments.

The nursing sisters were asked to designate which part of the body was injured in each case, and this has provided us with some detailed information. In the first instance we have a breakdown of the percentage of single and multiple injuries in Table 14 below.

Table 14
Consultations for single or multiple injuries

INJURY	No.	%
N/A	8	5
One body part	144	85
Multiple	29	10

N = 171

Missing = 10

Table 14 shows that 85 percent of injuries were to only one body part. However 10 percent of injuries were to two or more parts of the body.

Tables 15 and 16, following, present detailed information on the body part injured according to the sex of the victim and according to the type of injury. We shall discuss the two Tables together.

Table 15
Part of Body by type of injury

PART OF BODY	INJURY					
	N/A	BRUISE	LAC.	FRAC.	BURN	LAC. & BRUISE
N/A	8	-	-	-	-	-
Head	-	1	23	-	-	-
Scalp	-	-	2	-	-	-
Nose	-	-	2	-	-	-
Mouth	-	-	-	-	1	-
Forehead	-	1	1	-	-	-
Neck	-	-	3	-	5	-
Shoulder	-	-	-	-	3	-
Arm	-	1	4	-	2	-
Hand	-	-	3	-	-	-
Fingers	-	-	3	-	-	-
Elbow	-	2	-	1	-	-
Wrist	-	1	-	-	1	-
Thumb	-	-	-	-	-	1
Chest	-	-	4	-	3	-
Breast	-	2	-	-	-	-
Abdomen	-	-	-	-	7	-
Ribs	-	4	-	-	-	-
Back	-	4	1	-	12	-
Hip	-	1	-	-	-	-
Thigh	-	-	22	-	-	-
Legs	-	-	3	1	4	-
Feet	-	-	1	-	6	-
Head + hands	-	-	3	-	-	-
Head + lip	-	-	1	-	-	-
Elbow + abdomen	-	-	-	-	-	2
Head + back + eye + abdomen + lip	-	-	-	-	-	1
mouth + lip	-	1	-	-	1	-
cheek + forehead	-	-	-	-	2	-
face + leg	-	-	-	-	-	2
scalp + arm	-	-	1	-	-	-
abdomen + neck	-	2	-	-	-	-
abdomen + hand	-	-	-	-	1	-
back + elbow	-	-	1	-	-	-
back + arm	-	-	-	-	5	-
back + buttock	-	-	-	-	3	-
thigh + nose	-	-	1	-	-	-
vulva + legs	-	-	-	-	1	-
penis	-	-	1	-	-	-
TOTALS	8	20	80	2	57	6

N = 173
Missing = 8

Table 16
Sex distribution of injuries to body parts

PARTS OF BODY	% MALES	% FEMALES
N/A	6.5	1.5
Head	7.4	24.6
Scalp	1.9	0.0
Nose	1.9	0.0
Mouth	0.9	0.0
Forehead	1.9	0.0
Neck	1.9	9.2
Shoulder	2.8	0.0
Arm	5.6	1.5
Hand	1.9	1.5
Fingers	2.8	0.0
Elbow	1.9	1.5
Wrist	1.9	0.0
Thumb	0.9	0.0
Chest	4.6	3.1
Breast	0.0	3.1
Abdomen	4.6	3.1
Ribs	2.8	1.5
Back	13.9	3.1
Hip	0.9	0.0
Thigh	20.4	0.0
Legs	0.0	12.3
Feet	0.9	9.2
Head + hands	0.0	4.6
Head + lip	0.0	1.5
Elbow + abdomen	1.9	0.0
Head + eye + back + abdomen + lip	0.0	1.5
Mouth + lip	0.9	1.5
Cheek + forehead	1.9	0.0
Face + leg	0.0	3.1
Scalp + arm	0.9	0.0
Abdomen + neck	0.0	3.1
Abdomen + hand	0.9	0.0
Back + elbow	0.9	0.0
Back + arm	0.0	7.7
Back + buttock	2.8	0.0
Thigh + nose	0.9	0.0
Vulva + legs	0.0	1.5
Penis	0.9	0.0
% TOTAL	100.3	99.7*

* Since decimal points were rounded to only 1 decimal place
% totals are not 100%

From Table 15 it is possible to gain an indication of the areas of the body which are most vulnerable in alcohol-related assaults. Lacerations were sustained predominantly in two areas of the body: the head and the thigh. All other laceration-type injuries were sustained in insignificant numbers to other parts of the body. Burns occurred most often to the back (a point which we have already discussed), although there were a number of burns to abdomen and feet also. Bruises occurred most often to the ribs, and to the back. There were two cases of bruises to the breast. The two fractures in this period were to the elbow and leg.

Table 16 shows that there were some clear distinctions between the areas of the body injured in men and in women. Perhaps the most significant of these is the high proportion of women who sustained head injuries. Head injuries constituted 24.6 percent of all female injuries compared with 7.4 percent of male injuries. Since most head injuries are lacerations, we can deduce that women who are injured in the head are lacerated in the head and thus it is they who sustained injuries of a critical type to a vulnerable part of the body. Women received proportionately more leg injuries than men, followed by neck, feet and multiple back and arm injuries. The injuries to the neck, feet and multiple back and arm were most often burn injuries. From this we can conclude that women burned themselves or were burned in these areas more than men.

Men suffered more back injuries than women and back injuries were usually burns (12 burns, 4 bruises and 1 laceration). Consultations by men were, however, predominantly for injuries to the thigh, being 20.4 percent of all male injuries. No woman sustained thigh injuries.[19] Aiming for the thigh has a particularly male connotation in Aboriginal society, for it is the part of the body which sustains ritual spearing as punishment (see for example R.M. & C.H. Berndt, 1964:290). Presumably the aim of a laceration to the thigh under controlled circumstances was to make the victim 'sit down quietly' (Meggitt, 1975:100), inhibit movement and to interfere with the man's ability to travel long distances, and to hunt; this would indeed, punish him. If this were the case, the punishment for women should have curtailed their particular skills in the bush - foraging and digging, grinding seeds.

In the January-June sample there is no evidence that women sustained broken arms or fingers, injuries that would inflict such a disability. However, the data collected separately from the Clinic, covering the 1976-82 evacuations to hospital detailed the names of bones to be set. Over that period there were 17 fractures to the radius or ulna of women, and only three to those bones for men. This high number of forearm fractures for women may be simply because a woman might raise her arm in self-defence, to protect her face, and thus come into contact with the full force of a weapon. It is also possible that breaking a woman's arm was a punishment and that this form of 'punishment' is still in effect (see Berndt, R.M. & C.H., 1964:175). Bell and Ditton report a case at Hooker Creek where a husband injured his wife's arm with a boomerang for not preparing his dinner. What is more, he claimed that his attack was justified under the 'old' (i.e., Aboriginal) law. The Community Council disallowed this claim, saying that the fact that he was drunk meant that the 'old' law did not apply (1980:24). A 52-year-old Diamond Well woman, who was finally killed by her male partner in 1980, had had her arms broken

on several occasions to the extent that she had had steel pins inserted. In his defence, this man argued that he had found her drinking at night with some young men and that his attack was in a sense a punishment for this perceived wrong. However at his trial the Judge stated that the defendant had hit his wife 'no less than 25 times around the head and body' with a stick. She subsequently died.

In summary, alcohol-related disputes resulted in men being injured in the thigh, back and head, in that order. The preponderance of thigh injuries is remarkable as it indicates that strong cultural influences are penetrating the drunken state. Women were injured in the head, legs, neck and feet, in that order.

Alcohol-Related Deaths

Records of alcohol-related deaths were available for the period 1972-1982. They fell into the categories of neglect, violence, burns, motor vehicle accident, illness and overdose. Although in some cases, particularly illness, it was impossible for the nursing staff to give alcohol as the sole 'cause' of death, we have based our data on their considered opinion and close personal knowledge of the individual and the circumstances surrounding the death. In some cases an individual would receive the warning that if he/she continued to drink while on a particular medication, or after a specific diagnosis, then this would cause death. A subsequent death would then be noted as 'alcohol-related' in the Clinic records. Deaths from alcohol-related causes are presented in Table 17.

Table 17
Causes of Alcohol-related death for the ten years 1972-82#

	CAUSES OF DEATH						
	NEGLECT (of child)	VIOLENCE	BURNS	MOTOR VEHICLE ACCIDENT	ILLNESS	O'DOSE	UNKNOWN
MALES	-	4	1	5	6	1	3
FEMALES	2	5	-	-	2	-	-
TOTAL	2	9	1	5	8	1	3

Total alcohol-related deaths = 29
Total deaths from all causes = 99

Data only collected to June 1982.

The most significant point that can be drawn from Table 17 is that alcohol-related deaths constituted 30 percent of all deaths at Diamond Well over the ten year period. Table 17 also shows that most alcohol-related deaths were associated with violence, followed by illness and then motor vehicle accidents. Motor vehicle accidents have also caused some severe injuries among Diamond Well people were returning from a trip to obtain alcohol. Their car had broken down and they were pushing it at night, unlit along the highway. A semi-trailer crashed into them from behind and one man was killed. The Diamond Well Clinic has its own ambulance, which covers emergency calls for any accident on the highway in the vicinity of the settlement. The nursing staff commented that a substantial number of accidents they had attended, involving European Australians, were associated with alcohol.

Table 17 shows one death designated as an overdose. This was a death from drinking duplicating fluid, which was possibly mistaken for methylated spirits. A man from another community also died in this incident. Of the deaths by violence, five were women. Two of these deaths have involved publicised manslaughter trials. Similarly, a trial for manslaughter in Queensland provoked considerable publicity, particularly with reference to alcohol (Wilson, 1982). The fact that violence was the major cause of alcohol-related death among women is undoubtedly related to the high number of head injuries they sustained, more precisely lacerations to the head. Such injuries are associated with heavy loss of blood and subsequent death. As stated in Chapter 2, women and children often vacate the camps when heavy drinking is predicted or is in progress; if women stay in the vicinity, or are themselves members of drinking groups, they place themselves in danger of serious injury. The fact that severe injuries often lead to death is due to specific situational factors. The death of the woman referred to on above is an example. As stated, she received at least 25 blows to the head and body, and was herself 'very drunk'. After the assault, she was left overnight with no medical attention, and it was

only later the next morning that other residents of the camp realised that she was seriously hurt. By this time she had lost a lot of blood. A message was sent to the Clinic, that is, a vehicle had to be found and driven into the settlement. The nursing sister then drove out to the camp and gave medical attention. The woman arrived at the town hospital by ambulance at approximatly lunch-time but was dead on arrival.

In conclusion, 29 Diamond Well people have died in a ten-year period from alcohol-related causes, constituting approximately 10 percent of the population. A simplified chart showing numbers of alcohol-related deaths from all causes was drawn up at the request of the Clinic (see Appendix III). This was done utilising the data we collected for this study. This chart, together with one depicting evacuations to hospital, was placed on display in the Clinic.

Alcohol and Clinic Time

Data on total consultations (that is, alcohol-related consultations and all others) at the Diamond Well Clinic were collected for the month of October 1981. In this month there were 672 consultations altogether. Of these, 99 were for alcohol-related causes, and of these, 52 were first visits (i.e., there were 52 separate incidents requiring medical treatment). Thus 15 percent of all treatments at the Clinic that month were alcohol-related.

Summary

Diamond Well Aborigines are under no illusions about the cost of drinking. From 1976 to 1982 they saw their friends and relatives taken to hospital for alcohol-related causes on 111 occasionsand in the ten years 1972-82 they had seen 29 people die from alcohol-related causes. Alcohol was directly related to 30 percent of all deaths occurring in the Diamond Well population over the ten years 1972-1982.

From January to June 1982, which was a period of low to moderate drinking as a result of the Christian influence, 66 people sought medical attention at the Clinic - two-thirds of the drinking population. There were 181 attendances at the Clinic overall in the six months. Diamond Well people were suffering from pancreatitis, pneumonia, cirrhosis, gastritis and fits as a result of drinking alcohol.

In alcohol-related violence, they suffered lacerations more often than any other injury, followed by burns. Burn injuries required more return visits to the Clinic than any other injury and in the six months were designated as being more serious than any other injury. Some people were deliberately burned by others. Men and women experienced injury to dissimilar parts of the body. Women sustained more head injuries than men (24.6 percent of all female injuries). Men sustained thigh injuries (20.4 percent of all male injuries), while women had none. This suggests that, to some extent, cultural rules were in operation, even when people were thoroughly drunk. The element of deliberation which is implied in these results reinforces evidence presented elsewhere (MacAndrew and Edgerton, 1969), that when people are drunk they are not entirely out of control. Women died as a result of violence more than any other alcohol-related cause. It was clear that women risked serious injury and death if they

remained in drinking camps at night. Men died as a result of illness and vehicle accidents more than from any other alcohol-related cause. At times of heavy drinking children were sometimes not supervised very closely and this has caused injury and death.

CHAPTER FOUR

TOWARDS A SOCIOLOGICAL ANALYSIS OF DRINKING

To understand drinking is to put it in social context, and to study the meaning of the actions and their value for those who engage in the enterprise of drinking. Actions have meaning when they have a significance for a group of people who place a value upon them. Actions contextualised within the fabric of social living can also be characterised by the framework or structure within which an organised system of interaction is contained. The structure is described as a heuristic device representing a model of the way a thing can be understood to work.

This is a chapter of analysis. In it we seek to analyse the structural components within which the drinking act takes place and to derive meanings from the social interactions which are predicated upon that framework. Within a synthesis of meaning and structure lies an understanding of the drinking act. We work to demonstrate that drinking is ordered along particular and observable lines in order that desired ends may be considered achieved, but that the endeavour is frustrated because of constraints which are intrinsic to the structural relationship of component parts.

Aboriginal Powerlessness

In this analysis we make two initial assumptions. The first is that Aborigines are economically and socially lacking in power in their interactions with European Australians and that Aborigines are aware of this powerlessness. Secondly, we consider that Aborigines wish to rectify this situation of powerlessness.

The first assumption is not hard to accept. While some studies of Aboriginal communities have stressed their autonomy and vitality (e.g. Sansom, 1980) it is difficult to neglect the fact that Aboriginal communities are also subject to strong pressures to respond positively to European Australian influences. Even in current Department of Aboriginal Affairs (DAA) policies in which self-management and self-determination are stressed, the reality is that Aborigines are island dependencies within a colonial administration. There is an ideological formation which lies at the base of this arrangement which has its roots far back in the colonial ethic. Aboriginal land, which was the economic base of a whole civilisation, was appropriated and its former owners incorporated into a new system of government and political organisation, legitimised by the maintenance of law and order through the exercise of coercive powers. The Aborigines were deprived of their economic base and offered material inducements to comply with the new dispensation. The settlers came to monopolise what the Aborigines needed to continue their existence and were largely indifferent to what Aborigines had to offer in return. The introduction of materialistic values, physical coercion, monopoly over resources and a disinterest in Aboriginal commodities or ideals constituted power for European Australians and powerlessness for the Aborigines.

Power, broadly defined, 'refers to all kinds of influence between persons or groups, including those exercised in exchange transactions, where one induces others to accede to his wishes by rewarding him for doing so' (Blau, 1964:115). When a group becomes dependent upon another because they cannot either do without the rewards, or require them and cannot obtain them elsewhere, then power is exercised which is not strictly negative in its application - that is, it does not involve coercive sanctions or the withholding of rewards. Blau wrote:

> By supplying services in demand to others, a person establishes power over them. If he regularly renders needed services they cannot readily obtain elsewhere, others become dependent on and obligated to him for these services, and unless they can furnish other benefits to him that produce interdependence by making him equally dependent on them, their unilateral dependence obligates them to comply with his requests lest he cease to continue to meet their needs (ibid:118).

As a consequence of colonisation the Aborigines at Diamond Well have no economic resource of their own, have no viable alternative to those provided by European Australians, lack coercive force altogether and have not developed any ideology that might lessen their needs. That is to say, they have not developed any idealism which would stress that it might be better to do without what the White man offers in order to sever the dependence upon him. While Aborigines are landless they have no hope of obtaining viable economic alternatives elsewhere, and though land rights are a reality in the north of South Australia and in the Northern Territory, the situation even in these areas is far from restoring economic independence for Aborigines.[21] In short, the Aborigines at Diamond Well have none of the conditions for independence outlined by Blau (ibid:124).

The development of the present state of affairs is not the spontaneous result of uncontrolled forces. It has eventuated because of the developed relationship between those who have power and those who have not. Powerlessness is a product of power, and those who are subordinated are in a structural relationship to those who are superordinate. The business of Diamond Well is composed of inter-relationships fundamentally formed from transactions between those who have power and those who do not. Government policies and contemporary directives for self-management and self-determination are cosmetic. They are doomed to failure because what they seek to obtain can only be achieved by a structural re-negotiation of the power base; a matter not allowed for in government programmes.

The Aborigines at Diamond Well are dependent upon European Australians for their cash and more or less dependent upon the cash economy for subsistence. At Diamond Well there are on average only between 35 and 45 wage-earners a week, and some of these work for less than five hours a week. The community has been developed to provide jobs for these workers but the community is in no way dependent upon them. If no one turns up for work the Whites may have to empty their own own rubbish bins, but the community does not grind to a halt. Aborigines cannot then withhold their labour in order to gain power over the European Australians. The Whites live at Diamond Well only because they provide valuable services which the Aborigines cannot at present manage to provide for themselves: complex

mechanical repairs, maintenance of generators, ordering of stores and the running of the shop, sending telexes and writing memorandums to DAA. If the Whites withdrew their labour, the community as it is today would stop, no one would get paid, there would be no pensions, the store would not open and people would begin to go hungry. The European Australians, then, clearly have the power. Even the Aboriginal industry of artefact-making by which some men and women earn up to $250 a month is administered by the White staff. Independent sale to tourists on the main road and not through the community artefact store would be unreliable, and it would be impossible to secure a living wage.[22]

Most of the cash flowing into the community comes from pensions, supporting mothers' allowances, invalid pensions and family allowances.[23] Cheques are processed in the community office where they are also cashed. In principle an Aborigine can receive his cheque anywhere provided he has a postal address and so need not be dependent upon the community or its White staff. However, the dependence remains since the relationship between pensioner or beneficiary and the government and its European Australian agents is asymmetrical. Power is vested in the Europeans who decide who shall qualify for benefit and who will not, who will be sent a cheque and who will be cut off. They also control where the cheques will be sent. Aborigines are always obligated to European Australians for the cash they provide, even if the debt is not consciously registered.

The socio-political organisation of the community is run along European Australian lines. A White Community Advisor co-ordinates Aboriginal activities and a Council is elected by the Black residents to discuss issues of importance. The Council members exercise some influence over the Community Advisor in matters of minor importance. However, budget allocation, expenditure and utilisation of capital equipment are controlled from outside the community by DAA officials. The Council and Diamond Well residents are not able to make any major decisions concerning finance, purchase of capital equipment or the control and expenditure of money. They may express their opinions and these are taken into account by DAA, but fundamental policy and organisation is directed from outside the community and usually from Canberra. Even items of equipment, like a community truck, are provided by DAA funds for a designated purpose and strictly may only be used in connection with that purpose although it nominally 'belongs to' the community.

The Council and community members have no real power over the management of their affairs, although they have been told repeatedly that it is their community and that they should make all important decisions. In fact they make no important decisions, have no power over the control or direction of affairs or finance and are consequently alienated from the whole procedure, which they perceive as being part of the superstructure of the European Australian administration. The alienation, frustration and anger that Aborigines feel in their position of powerlessness has been similarly noted for North American Inuit by Brody (1975).

There is an underlying ideology on the part of European Australians that Aborigines should be trained to manage their affairs in a thoroughly European way which will be consistent with government policy. The philosophy of 'training for self-management' is built upon the assumption that Aborigines will wish to run their affairs more or less as a carbon

copy of the way Whites have done. There seems little evidence to support the veracity of this assumption. Moreover, the philosophy is also based on the premise that the Aboriginal system will remain a part of the European Australian one, and be contained within its power structure. Despite the involvement of Aborigines in self-management programmes very little real change in the power structure is either taking place or proposed. For some reason government planners seem to have been easily seduced into thinking that if power is transferred into Black hands outside the community then in an unexplained the situation of powerlessness will be remedied. Of course, it is no answer. The powerless remain powerless and the only thing which has changed is the colour of the hands which hold power.

Access to Power: Ritual Time Out

We have spent some time discussing the notion of powerlessness at Diamond Well and how it is manifest. This is because drinking and drunkenness take place within this context, and it is our purpose here to contextualise the drinking act. Herein lies the key to understanding the interactions and consequences we have described in this report. Aborigines are dissatisfied with their subordinate status, but are powerless to remedy the situation. They lack viable alternatives to economic and social dependency, they are not equipped to do without the services upon which they have been encouraged to become dependent. However, they have perceived one way out. That is, to suffer transformation during the time-bounded euphoria of the intoxicated state. During this state of transformation it is possible to demonstrate the existence of alternatives to compliance with power, and sometimes possible briefly to realise them. This transformation is not obtainable through mundane interaction because it requires a fundamental alteration to the state of affairs. It is considered attainable through a period which is best described as 'time out', or as in ritual process, a liminal phase in which the otherwise impossible, the unobtainable and the unthinkable, becomes possible and within the grasp of ordinary men and women.

A. van Gennep (1960), writing in 1909, described the ritual process as one in which the initiate is separated from society, endures a period of transition and is finally incorporated into society. Psychologically the initiate at first remains unaware of the stimuli which are the substance of the experience of the ritual. Then he enters a liminal phase when the stimuli are perceptible. Finally, in the post-liminal phase, he assimilates the stimuli and accepts knowledge of them. Van Gennep called this ritual process a rite de passage.

The drinking act conforms with a rite de passage. It is a ritual act of transformation in which participants enter an altered state and are regarded by others as belonging to a different order of existence. The initial organisation of drinking belongs to the preliminal phase. Drinkers have already marked themselves off as setting out upon a course of actions which will result in their transformation. Their intentions are declared, but the results of drinking (intoxication) are as yet pre-liminal.

The drunken state is absolute. A mark of a drunk is that he is physically incapable, often unable to stand and his speech is slurred. Drinkers adopt this state as a mark of their transformation, regardless of the absolute amount of liquor consumed. However, copious consumption is

regarded as a necessary inducement to enable the altered state to become a reality. The drunk is not himself, and assumes an altered persona. He often speaks in English, not in his own language, and is permitted all sorts of licence otherwise unthinkable. A drunk who injures himself or others does so because he is drunk. He cannot be held responsible for his own actions in his liminal state. Drunks are separated from the rest of society, both by physical distance and by the mental states which are markedly different from their non-drinking peers. Drunks are not ordinary people, their experiences are not those of ordinary people, and their abilities are likewise extraordinary.

When drinking is over and sobering up commences, the other-world mind state of the drunk recedes and there is a reversion to ordinary experience and understanding. The drinker is incorporated into society and assumes his old role there, until the next ritual drinking spree.

Drinkers have told us that when they are drunk they feel different from when they are sober. They feel themselves to have a greater facility with English and so are able to demonstrate that they belong to a world and discourse which is that in which decisions are made about the control and allocation of goods and services. Moreover, they feel that they can approach a European Australian as an equal in verbal interactions, not hindered by a lack of knowledge of the spoken word.

Drinkers have also told us that the drinking experience is one in which they become bold and audacious in their interactions with Whites and are prepared to state the nature of past injustices and demand restitution. When matters of current concern are considered to be the product of unjust dealings, then the drinker may demand that a European Australian right wrongs. Drinkers in their transformed state of forcefulness and linguistic facility establish their non-compliance with European directives. If necessary a drinker will back his requests or resistance with threats of violence or make an actual assault.

Coupled with assaults on persons are attacks on European Australian property. Windows are the prime target since they break easily and dramatically, though rocks and other missiles are hurled by drunks at walls, doors and roofs as well. The intoxicated state is the means whereby an Aborigine fashions an alternative to compliance. It enables him to take by force that which was formerly withheld or was unobtainable.

While coercion or threats of coercion are short-term alternatives to compliance, their enduring effectiveness is another matter. In fact, although a drunk may cause damage or injury thereby showing himself to be for the nonce physically superior, the structural framework within which his enduring powerlessness is contained remains unaltered. A possible outcome for the violent drinker is police arrest, conviction and incarceration. Moreover, his linguistic audacity may be little more than a series of slurred sounds, incomprehensible to the unsympathetic accosted White, who may be unable in any case to meet the demands of the drunk.

As our data have shown, injury and assaults on Whites and their property are by no means the only product of a drinking bout. Aborigines themselves suffer terrible injuries which are sometimes fatal. Those who feel themselves to be powerless when sober attempt to redress the balance

when drunk by making demonstration of their ability to enforce their will by strength of arm, establish their right by might and dominate by physical action. By such action they declare to all observers that there is an alternative to powerlessness. Actions which are statements of non-compliance serve to establish the position of an individual in relation to his consociates, but they are effected at great personal cost. Moreover, they are understood to be achieved and therefore effective only during the heightened liminal state of drunkenness and so do not determine relations contracted outside of that ritual period. However, what a drinker establishes when drunk regarding his coercive powers is real, and an aggressive drinker is treated with caution by others for his predicted violence. Such a drinker, provided he can survive the consequences of his aggression, establishes himself as being both beyond the immediate control of the European Australian power of law and order and, by taking what he desires by force, to have demonstrated an alternative to a compliant state.

Drinking acts are often violent acts but not inevitably so. Drinkers establish their non-compliance with the European Australian power structure by other, non-violent means. There are two devices employed to effect this. The first is by the establishing and sustaining of an Aboriginal business which is, in its own right, an enterprise in which exchange transactions are used to develop a wholly Aboriginal network of relations of indebtedness and obligation. In their organisation of the drinking business, the Two-up school and the fetching of port wine from Dindara, Aborigines are embarking upon an enterprise which involves no dependence upon Whites. This means they are able to forge obligations, discharge debts and create alliances through the pursuit of a valued commodity which they control, allocate and consume. Drinking and carting are statements of liberation from European Australian monopoly over goods and services. The fact that it is an illicit activity, which nevertheless thrives, is further endorsement of their non-compliance with White control.

The independence is to some extent contrived, since the source of all alcohol is a hotel where cash must be exchanged for liquor. Since cash must be received at the settlement from European Australians who effectively control its allocation, drinking cannot commence without initial commitment to dependency upon Whites. However, Aborigines at Diamond Well successfully transform cash into commodities which are wholly Aboriginal in their value and in the manner in which they are subsequently exchanged. Aborigines are able successfully to establish that they pursue business which is categorically outside of the control European Australians.

Drinkers become sentimental, ebullient and sometimes shamelessly hyperbolical about their home country, their beliefs and religious commitments. Drinkers sometimes stress the intrinsic spiritual value of their sites in the country and of their rituals and religious acts. This euphoric indulgence is a means whereby the ideology of Aboriginal religious belief is stressed and claimed to be as worthy and as of much value as anything the White man can muster. In the drunken state a man is able to convince himself, and perhaps others too, that his own beliefs are indeed a viable alternative to anything the European Australians can offer.

In summary, then, we state that drinking and the intoxicated state it produces are used by Aborigines to develop actions which are statements of alternatives to compliance with power. Actual physical coercion or physical strength is an effective means whereby power is challenged. The organisation of drinking and the stressing of the value of Aboriginal beliefs are means whereby Aboriginal transactions and values are sustained in a manner deemed to be independent of European Australians. We have also noted that the effectiveness of these strategies is limited by constraining factors, but the designated meanings of the drinking act are nonetheless real for those who indulge in it.

The New Christianity

A new Aboriginal Christianity was subsequently adopted by some, though by no means all, of the drinkers at Diamond Well. Drunkenness and Christianity at first glance appear to be dissimilar, but the pursuit of each activity can achieve similar ends. Christianity supplies a satisfying alternative to compliance and is more supposed than real because it is a matter of belief and faith rather than manifest outcomes. There is no physical violence in Christian practice, so the powerless cannot combat the powerful by assault or attack. However, a fundamentalist Christian is assured that damnation (the final assault) will be the end of all non-Christians, while he in turn is sure of a place in Heaven. It is, then, not so much a question of taking coercive action as an alternative to compliance but rather of waiting until God readjusts the status quo. Meanwhile, Christian teaching endorses the notion that all have free access to the ultimate power and a capability through prayer and mediation to alter the subordinate status and powerlessness which is their present experience. Fundamentalist Christianity as it is preached at Diamond Well involves participants entering into a state of mind in which they consider their whole being to be taken over and controlled by spiritual forces. In this state they believe they are in accord with a powerful spirituality formerly manifest as Christ. Aboriginal Christians believe they have access to power. It is then unnecessary for them to drink in order to demonstrate that they are not powerless.

The Failure to Remedy Powerlessness

Drinking is a positive expression of an alternative to compliance which Aborigines use in a vain attempt to rectify their powerlessness. But because they act out their expressions within the context of their very powerlessness they are ineffective in achieving any change. This can be explained as follows.

When there are two systems engaging one another then there is a dynamic. To characterise the two systems of interaction is to describe this dynamic and to describe the dynamic is to account for social process. We have characterised social structure at Diamond Well as an asymmetrical relationship between those who are superordinate and those who are subordinate. In a symmetrical relationship reciprocal exchanges between constituent groups create the dynamic through which the two systems are perpetuated and constantly modified in relation to one another and with respect to one another. Social process is modified through time by the effect one group exerts upon the other by virtue of superior access to

goods, or the obligations it elicits from the other. In an asymmetrical relationship, that is, one in which one group has much power, the other very little, the social form is perpetuated through a dynamic in which little account, if any, is taken of the powerless by the powerful. This is because those in a more powerful position have nothing to gain and much to lose by embarking upon interaction which might produce a dynamic resulting in modification or change in the power imbalance which is in their favour. Blau notes that,

> ...vested interests and powers, established practices and organisation, traditional values and institutions, and other kinds of social investments are forces of stability and resistance to basic social innovations and reorganisation (1964:338).

At Diamond Well the existence of an asymmetrical power relationship between European Australians and Aborigines results in an equally asymmetrical interaction between the two groups, so that while the interaction between the groups is sustained through social process, the dynamic does not allow for a change in the social formation because the interaction is controlled by the powerful who stifle and inhibit structural modification.

The substance of the exchange transactions at Diamond Well are a series of acts to which we have attributed both implicit and explicit meanings. In short, we have described how some Aborigines when drinking or being Christians are making statements about their subordinate status and developing alternatives to compliance. We have shown that in some cases these actions are real alternatives to compliance even if only for a short period of time. Aggressive violence, for example, is a real alternative to compliance. Other actions are based on wholly mythical assumptions which have no substantive effect on their powerlessness. However, the interactions which drinking or Christianity occasion can be, and often are, controlled by European Australians, who can decide when to intervene should it threaten their position. The exchanges between European Australians and Aborigines are one-sided and controlled and directed by Whites as they see fit. Moreover, the meanings of the acts perpetrated by Aborigines are either disregarded, ignored or made to be of no consequence by European Australians who thereby render them of no account in any transaction.

Some European Australians understand drinking as the cries of a dying race, others as the despair of those who lack initiative and imagination and have no self-control. At best, many European Australians understand excessive drinking as a sickness whose victims should be given remedial care or medication. Similarly, Aboriginal fundamental revivalism is regarded as a transitory ephemeral child-like faith which lacks sound theological doctrine and, on close inspection, is marked by synchronistic beliefs which should be discouraged.

The one-sided interaction and its associated frustrations which are the experience of Aborigines have been described elsewhere in Australia by R.M. Berndt (1962). On Elcho Island the Aborigines brought out sacred objects formerly never seen in public. They anticipated that the European Australians would respond by giving them greater political autonomy and some material benefits. The Europeans were unaware of the implications of

the Aboriginal action (ibid:84). The power balance remained unaltered, the Aborigines unappeased. So too at Diamond Well, the drinking continues while the Whites remain unaware of the implications of the acts, or rationalise them so that they can explain them without having to understand what they mean.

We have shown that within a definable structural relationship there is an interaction between members of component parts which we have described by developing the meanings of observable acts. This relationship of structure and meaning has shown that the interaction is constrained to the extent that the drinking act has a meaning for the Aborigines which is seldom, if ever, understood by European Australians. The dynamic which accounts for social process is one effectively dominated by Whites and allows for little if any synthesis of constituent parts. As a result, Aboriginal expectations, demands and desires, though present and expressed, are inadmissable to exchange transactions. Consequently the social formation is sustained more or less unmodified. Both drinking and Christianity are ineffective in changing the powerlessness of Aborigines, not because they are intrinsically unsuited to the purpose, although we have noted some serious flaws in their potential effectiveness, but because they have been adopted by a group that is constrained in its action by existing structural powerlessness which can only be remedied by radical innovative change.

Although drinking and Christianity are ineffective in creating real structural change they should be understood as bold attempts by the helpless (but not hopeless) to remedy their situation by demanding positive responses from European Australians. It is sad to consider that until recently excessive drinking was possibly the only avenue left open to Aborigines deprived of any opportunity for political formations. The Aborigines were economically dependent upon European Australians for their very existence and were, as a result of social dependency, unable to adopt independent action. Aborigines have shown themselves capable of much independence during thousands of years, and there is no reason why they should not do so again. But in order for this to eventuate they need first to gain real economic and social independence from European Australians, and to live their own way outside the colonial third world which has been the only birth-right of so many.

While we accept that this is a utopian ideal, it is better for men and women to work in the long term for an ideal, rather than in the short term for ideologically ill-considered convenience which will ultimately be of benefit to no one.

CONCLUSION

In their attempts to direct and curb Aboriginal drinking acts, Europeans associated with this community have consistently misunderstood and misread the actions performed by Diamond Well Aborigines. There have been four major assumptions made about the drinking at Diamond Well:

a) The first was that the ready availability of beer at the Canteen would lessen the demand for fortified wine (port) and therefore bring the carting of wine to an end.

b) The second was that the reallocation of beer cans by gambling (Two-up) indicated that the supply of beer was 'inadequate', and that gambling was in any case a problematic exercise which encouraged ill-feeling.

c) The third was that structured educational programmes would be able to instruct Aborigines how to drink 'properly', and alert them to the deleterious effects of excessive drinking.

d) The fourth was that the Aboriginal community and its Council had both the desire and the power to intervene in or prevent uncontrolled drinking.

All four assumptions were incorrect, and yet they have guided missionaries, government officials and even funding allocations to the community. The assumptions continue to be important and remain central to the development of community policies regarding drinking.

The instigation of the Canteen was, as we have shown, not a purely altruistic innovation on the part of the Lutheran Church. Its inception made no impact whatsoever upon the business of running port from outside sources through the use of taxis and later Aboriginal-owned vehicles. The Canteen may have had some beneficial impact in the sense that it provided an overt statement for the Aboriginal people of their right to purchase alcohol on their own premises. The Two-up game was a means by which the Aborigines undermined the White-imposed regime of the Canteen and transformed it into a wholly Aboriginal exploit. It did not evolve necessarily because the ration was inadequate but because the game injected a social and interactional component into an otherwise bland interchange. We found no evidence to support the assumption that the gambling itself aroused ill-feeling or hostility among participants.

Aborigines at Diamond Well have evolved a style of drinking which acts to fulfil certain requirements. They drank large amounts of port, irrespective of the availability of beer, though consumption was related to availability of cash and vehicles. They drank in their camps rather than in the settlement, with their own choices of drinking partners and on their own terms. It was generally accepted that drinking was synonymous with getting drunk - this was in fact the desired state. When the state of drunkenness was achieved, then other business could be accomplished - assignations fulfilled, arguments fought through, Europeans accosted - all encompassed and protected by the state of desocialisation which drunkenness wrought. Attempts to trammel and contain these established and deliberate patterns of consumption through instruction on the dangers of intoxication,

or even undisguised efforts to make Aborigines drink in the Western 'sociable' sense have, in the past, failed and will probably continue to fail. The fourth assumption is less easy to criticise. It has to do with matters of jurisdiction and of responsibility and is veiled with the jargon of self-determination and decision-making. Affairs on Aboriginal settlements, as we have stated, are ostensibly under the control of their Aboriginal Councils but are, in effect, strongly influenced by immediate and more distant advisors and government policy. Suggestions that 'something' must be done about drinking arose largely from concerned Europeans and occasionally from abstainers or ex-alcoholics among the Aboriginal population. These suggestions, accompanied by examples of disruptive behaviour, have been endlessly mooted at Council meetings over at least a decade. Councillors (some of whom were drinkers themselves) were expected to consider a variety of means by which their own drinking behaviour was to be contained. Moreover, men and women whose area of jurisdiction and influence over others was contained within certain structural boundaries were supposed to pass judgement, in effect, on others and interfere in the drinking business of social groups over which they had no right or powers of jurisdiction. Despite a public display of concern over the issue of drinking, evidenced by the minutes of Council meetings, the members of the community subscribed to the view that drinking was a universal right. As a result of this belief they avoided committing themselves to long term or authoritarian intervention strategies on the one hand, while simultaneously instituting minor 'rules' of comportment to keep the Europeans happy, on the other.

So what do we conclude from these observations and data? We have set out to show that drinking at Diamond Well is complex social action involving exchange of goods, the creation and discharge of debts and obligations and the effecting of a business so thoroughly Aboriginal that it has long been misunderstood, or dismissed, by European Australians who have failed to comprehend its complexity. ⟨Far from being the anarchistic acts of a despairing minority in chaos and confusion, drinking at Diamond Well is ordered, skilfully executed and governed by rules and procedures agreed upon by participants. This much we have demonstrated.⟩

On the other hand, we have also shown in Chapter III that the sociological and physiological effects of drinking are generally negative and sometimes fatal. The injuries treated in the Clinic constitute a substantial part of the nurses' daily workload. Drinkers disturb non-drinkers, terrify wives or non-drinking kin, make unreasonable demands, are violent and often disruptive. Drinking can shatter the peace of the community, rendering daily tasks impossible to fulfil and sending White staff running to the comparative safety of their houses. The picture is bleak, the damage to life and property not to be understated. Why then do Aborigines choose to order their lives with so much care while enduring the legion of deleterious effects detailed in this report?

We have stated that drinking is a means whereby Aborigines attempt to remedy their perceived powerlessness in the ordering of their own community affairs. To be without power is to suffer the ignominy of being manipulated and directed, controlled and governed by others, many of whom do not understand or wish to understand Aboriginal priorities, aspirations or goals. However, the avenues open to them to remedy such a situation are few. As a result of their lack of an economic base and subsequent

dependence upon European Australians, coupled with their relative inexperience in matters relating to the wider Australian community, they have little likelihood at present of effectively altering the status quo. Aborigines at Diamond Well have control over neither resources nor land and have nothing with which to bargain. The very powerlessness which they seek to remedy is itself a major impediment to overturning the situation. With few options open to them, the Aborigines have embarked upon the social business of drinking and becoming drunk in order to gain access, so they may believe, to power. Few, we think, would challenge the view that drinking at Diamond Well is a success. Moreover, drinking is social action which is both seen and heard by Whites, either living on the settlement or merely visiting it.

The social organisation of drinking is, then, a series of acts embarked upon by men and women who, aware of the cost, have little alternative if they wish to attempt to remedy their powerlessness. The sad part is that the social and physical cost is so high and the means employed have no chance of success because they rest upon a wholly mythical assumption: that the altered mind state of the drunk gives access to power over goods, services and people, otherwise unobtainable. However, in this way Aborigines seek to achieve that which has been consistently denied them by European Australians: power to control their economic as well as social affairs in an autonomous dispensation. Such a dispensation was formerly enjoyed by them as land owners and masters and mistresses of their own domains and controllers of their own sources of wealth and subsistence. Effective restoration of the economic base is one sure way to remedy their powerlessness.

FOOTNOTES

1 As with criminal behaviour 'social background' theories can be used deterministically, suggesting that oppressed people are unable to rise above their circumstances in a positive way.

2 At the settlement people can purchase beer. It is the focus of certain actions which occur after drinking has taken place - actions which are noisy and public and intended to be so.

3 Under the Licencing Act 1967-73 (S.A.) Section 17. (See Eggleston 1976:261.)

4 Dr R. Penny, personal communication, 11 January 1982.

5 The quantities of alcohol purchased and consumed will be discussed in Chapter III.

6 A carton contains 24 cans of beer.

7 There was one case in which one man attacked another with an axe, but later complained to police that his victim had refused to give him port wine, and that was why he had attacked him with the axe. The severely injured man responded by claiming that his assailant was too young to drink, and that was why he had refused him port. Both men justified their action by reference to the drinking rules.

8 During the period from April 1981 - August 1982 there were four assaults on White staff that we knew about.

9 A Community Advisor of Diamond Well informed us that 'they only need a drop' in order to get drunk.

10 This refers to the popularity of accompanying gospel singing with electric guitars.

11 She stresses that if children were alert, active and happy in the midst of an episode of illness, or when distressingly unhealthy, they could not be designated as suffering from parental neglect. A case of real neglect is described in which the community disregarded the loneliness and distress of a child (1982:60,62).

12 On average the White staff consists of 24 adults. There are 11 teachers who work at the school.

13 As a lawyer pointed out, in effect, European justice is being differentially applied. Minor offences by juveniles at Diamond Well against White property and very serious assaults and manslaughter offences are reported and brought before the courts. The middle-range level of assaults pass unreported.

14 We were unable to obtain sufficient responses to some questions in the questionnaire to make any meaningful presentation of data.

15 Dr P. Pols (pers. com. 1983) has pointed out that at least three of the conditions noted (clot from mitral valve replacement, duodenal ulcer and hemiplegia) are not necessarily understood to be alcohol-related. Clinic staff, however, diagnosed these conditions as alcohol-related based on their familiarity over several years with the individuals concerned. In their opinion, then, alcohol consumption was a major contributory factor to the morbidity.

16 Information from N.T. Drug and Alcohol Bureau.

17 Personal communication, June 1982

18 R.M. & C.H. Berndt (1964:183) refer to the gordi (their spelling), the spirit which is released on completion of the mortuary rites. Part of the spirit remains as a mamu to haunt the living.

19 However, it is not unknown for women to be speared in the thigh in Aboriginal Australia. Meggitt (1975:100) in his study of the Walbiri, notes that a 'gentle' thigh spearing was recommended as a punishment by a husband to his wife (ibid:100) Meggitt details fights in which individuals sustained injuries to many different parts of their bodies: back and shoulders, fingers and heads (ibid:183,176,177). These were not, however, alcohol-related.

20 See Appendix IV

21 In 1982 Aborigines owned 28 percent of the N.T. freehold as a result of the land rights legislation passed in 1976. However, only 0.3 percent of this is productive pastoral country. Aborigines constitute 21.3 percent of the population of the N.T. Over 50 percent of productive pastoral country is owned by interstate and overseas investors.

22 It takes approximately two hours for a skilled and fast craftsman to make a boomerang. This will earn him $4. Prior to this, of course, he must select and cut suitable wood. This may involve travelling many kilometres from the settlement.

23 For example, from 6 October to 6 November 1981 wages at Diamond Well amounted to $16 828 and pensions of all sorts to $22 516.

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APPENDIX I

A/R HEALTH CHECK SHEET

DATE: .....

CASE I.D. (eg initials, code no.) .....

AGE: (circle one) infant school age adult

SEX: male female

VISIT NO. (circle one) 1 2 3+

A/R ILLNESS

DIAGNOSIS: .....

.....

.....

Patient has been treated (for this illneess) for

(circle one) 1 2 3 4 5+ years

Has this ailment required hospitalisation? yes no

A/R INJURY

(Circle relevant injury or injuries) bruise laceration

fracture burn

INJURY TO: (specify part of the body) .....

.....

Will the patient be hospitalised? yes no

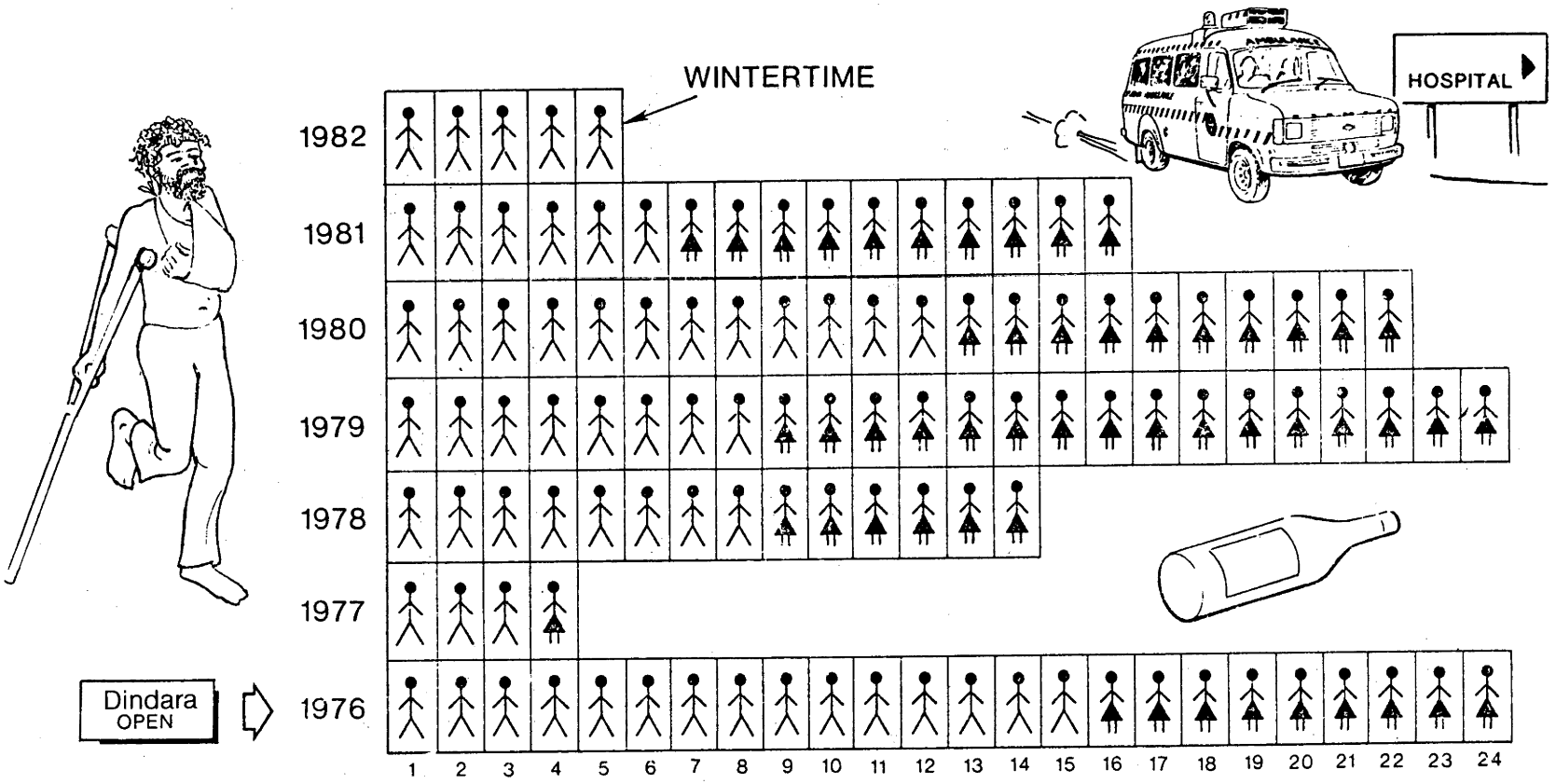
SEVERITY OF INJURY (circle one)

1	2	3	4	5	6
(e.g. Minor, limited area, superficial wound etc.)	(e.g. Medium, wounds affecting wider area, or single more severe injury)		(e.g. Major, extensive &/or severe injuries).		Death

ASSAILANT (if known, circle one)

spouse sibling offspring/parent other

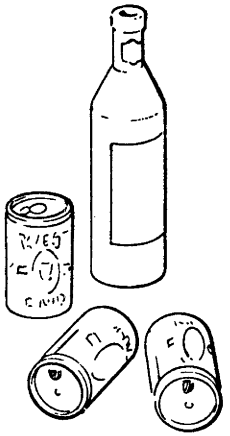
Diamond Well people evacuated to town hospital for Alcohol-Related causes

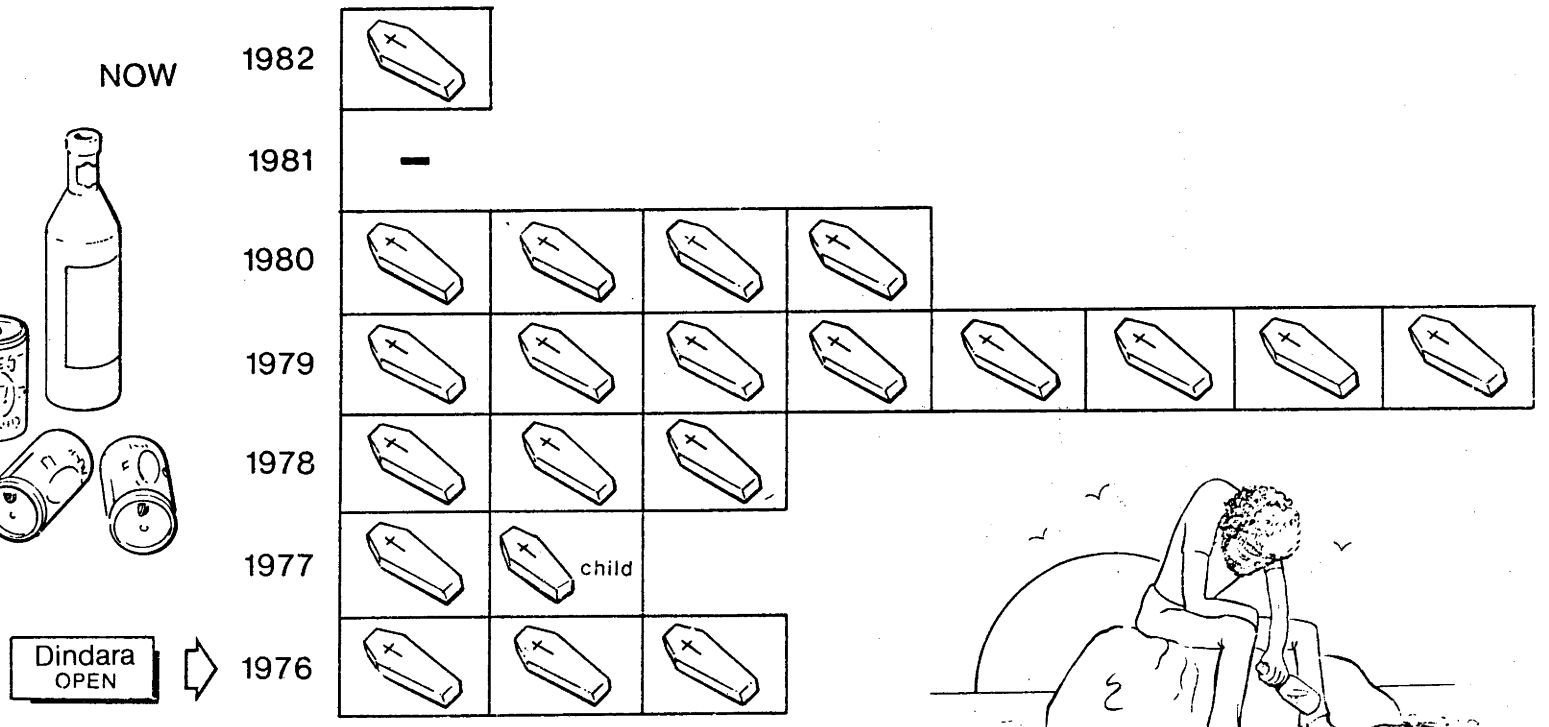


(These ANANGU went to hospital sick or hurt from wine)

Diamond Well people who have died from Alcohol-Related causes

(Illness, Injury, Vehicle Accident)







(These ANANGU died from drinking wine)

APPENDIX IV

Information on the diagnoses of alcohol-related illnesses which resulted in death was available from 1976 to June 1982. We would point out once more that the diagnoses were approximations of the cause of death.

Deaths by alcohol-related illness of Diamond Well Aborigines 1976-1982

Year	Cause of death	Sex	Age
1976	Nil		
1977	Dehydration & bronchopneumonia	Male	45
1978	Ureamia	Female	41
	Alcohol poisoning	Male	61
1979	Alcohol poisoning	Male	42
	Alcohol poisoning	Male	49
	Clot from mitral valve replacement	Female	46
1980	Cardiovascular accident	Male	33
	Hepatoma	Male	42
1981	Nil		
1982	Liver failure	Male	44
	TOTAL deaths: 9		

ALCOHOL AND DRUG USE AMONG YOUTH IN THE NORTHERN TERRITORY:

BIBLIOGRAPHY AND REVIEW OF EXISTING RESEARCH.

by Maggie Brady

Alcohol and drug use among youth in the Northern Territory: A bibliography and review of existing research. (From a report commissioned by the Office of Youth Affairs, Canberra).

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1. Summary of Bibliographical Items

In June 1983 the Office of Youth Affairs in Canberra asked for a review of the current extent of knowledge about drug and alcohol use by young people in the Northern Territory.

As a result of this request, local agencies and relevant Government Departments were contacted and the following bibliography and overview of existing research were compiled.

A literature search revealed sixty-four items which referred to the Northern Territory; forty-one were on alcohol use. Two of these were mentioned meths drinking. There was one article on 'Rinso' eating, and one article on petrol sniffing also referred also to clay-eating (pica). Apart from these two 'drug' uses, the entire drug literature available refers to petrol inhalation, and totals 22 items.

All the petrol sniffing material related to youth and all were on Aboriginal youth. However there was only one item which specifically considered youth and alcohol in the NT (NT Liquor Commission, 1979) and that study of Under-Age Drinking includes Aboriginal and non-Aboriginal children. Of the 40 remaining items on alcohol use, only eight refer to youth and alcohol briefly.

Most of the material sighted was published in journals or books (32 items). Eleven were Government publications (e.g. Reports, Conference Proceedings, etc.); two were University theses (both on Aboriginal drinking); and 19 were unpublished local ephemera.

Half of all the material examined was published between 1976 and 1980; 16 were published before 1975 and 13 published since 1980.

Of the 41 items on alcohol, 29 considered Aboriginal drinking. Only two (Dodson, 1981; Leary et al., 1975) refer in passing to Aboriginal youth and alcohol. All the petrol sniffing items (22) and the 'Rinso' eating (1) relate to Aboriginal children. Petrol sniffing is known to occur among young adult Aborigines in the NT, however no item specifically referred to adult sniffing. Altogether, then, alcohol and drug material reviewed referred specifically to Aboriginal people in 52 out of the total of 64 items examined.

Research or comment on petrol sniffing focussed most frequently on Arnhem Land. Elcho Island and Maningrida appeared to be communities notable for the practice - however this may be because a small group of researchers had access to these communities, returned to them on several occasions and published additional material (e.g. Nurcombe, 1970, 1972, 1973, 1974; Eastwell, 1978, 1979). The 'Rinso' eating item referred to a community in Arnhem Land. Four items referred to petrol sniffing in Central Australian communities and four were relevant generally to the NT.

In contrast, alcohol items were more evenly spread over the NT, with 16 being of general NT content and only eight on Arnhem Land. Two of these related specifically to the Alligator Rivers regions (Allen, 1980; Fox, 1977). Seven items focussed on Alice Springs town and town camps, and six

on Darwin town and fringe camps. Only four items referred to Central Australia other than Alice Springs.

Methodologically, about 50 per cent of items were sociological in orientation, followed by those of a socio-legal framework. These included quasi-legal aspects associated with petrol sniffing, anti-social behaviour and community punishments. Eleven out of 64 were medical or psychiatric in orientation - however these 11 items contain considerable re-working of the same material (e.g., Nurcombe).

Twelve items considered the law itself - i.e. liquor laws, licences, restricted areas, or were submissions to change the law. All these referred to alcohol rather than drug use. Most of the material examined considered the individual and the social group rather than examining court statistics.

Large surveys were rare - there were only six items which could be designated as surveys over several communities or localities in the NT. One of these was the Under-Age Drinking Study (NT Liquor Commission, 1979). Twenty-two items could be considered to be small 'surveys', some of a 'personal observation' type. Only seven items contained statistics of any note, mostly on alcohol rather than petrol sniffing. Most of the available material was of a personal observation 'welfare' type rather than actual data collection or questionnaires - however some of these observations are by those experienced in the field with intimate knowledge of either the communities concerned or the subject matter. Eight items were based on anthropological participant observation methodology.

Ten items were in the form of submissions to Government enquiries or were the Reports of Government enquiries. Six were conference or workshop papers (e.g. ANZAAS).

The overall impression from this review is that there is a dearth of research into alcohol use among NT youth (one study, a few statistics), and a total absence of any literature documenting youthful drug abuse other than petrol sniffing.

Several individuals and agencies contacted complained of the inadequacy of the compilation of statistics on related areas (alcohol/drugs/crime) in the NT.

PUBLICATIONS AND DOCUMENTS OF PARTICULAR INTEREST

Although what follows does not always have specific reference to youth in the NT, these are items sighted to which I would draw particular attention. All are referred to in the Bibliography at the end of this Report (Section 5).

Reports

The Adams Report (1973) is a comprehensive document reporting on a Board of Inquiry investigation into the NT liquor laws. Apart from much detailed information on licensed premises, trading hours, convictions and other quasi-legal aspects, it contains case histories of the twelve 'worst offenders for drunkenness in Alice Springs', and discussion on liquor on Aboriginal Reserves. The Report concluded that the licensing system in the NT needed review and that its inadequacy contributed to the excessive consumption of liquor in the NT. In keeping with these conclusions, the Report recommended, among other things, the establishment of a Liquor Commission, redrafting the Liquor Ordinance, changes in trading hours and the instigation of educational programmes.

Another influential Report was the Hawkins-Misner Report of 1974. It recommended the decriminalisation of drunkenness. It also suggested the establishment of a detoxification centre in Darwin. The Liquor Commission's Reports are noteworthy (1979, 1982, n.d.) as they are excellent pieces of research based on substantial fieldwork and consultation. Their 1979 Study of Under-Age Drinking is the only one to deal specifically with youth.

The Liquor Commission's Report utilised questions which conform to those used in the Commonwealth Department of Health Survey. It is the only substantial survey of its kind in the NT. Questionnaires were sent to all NT high schools, totalling 5,500 pupils in all, between 12 and 17 years of age. Aboriginal schools were not surveyed but three Aboriginal colleges were included. 68 per cent of the school-attending population between those ages returned completed questionnaires. Unfortunately the Alice Springs part of the survey was largely invalidated as only 16 questionnaires were returned (out of 700); no explanation for this was apparent. The study also involved the convening of seminars in Darwin, Alice Springs, Tennant Creek and Katherine.

Not surprisingly the findings revealed that a 'significant majority' of 12-17 year olds do drink alcoholic beverages, at least occasionally. The frequency of consumption rises sharply from 15-17 years. As the Liquor Commission Report concluded,

> The study has led to the recording of basic information on underage drinking... The information obtained will be valuable in future studies (1979:6).

The only other study of alcohol in the NT which has attempted a survey was conducted under the auspices of the Regional Council for Social Development in Alice Springs (Wauchope, 1975). Ms Wauchope collected statistics on alcohol consumption in the NT and data from Alice Springs on

offences, accidents and treatment programmes in the alcohol-related area. 3000 questionnaires were circulated to Alice Springs residents (of which 413 were returned). The questions tapped the perceptions of the public on alcohol use in the town. 107 high school students were consulted (Leaving and Matric levels) and Wauchope found that all but one said they had drunk alcohol at least once; 68 per cent had been 'tipsy' at least once, 52 per cent said they drank at least once a fortnight.

Thirty interviews were conducted with Aboriginal fringe campers, most of whom were 'younger men' - age not specified.

Submissions to Enquiries, for funds etc.

There are two submissions I shall mention: Cutter and Perkins (1976), and North Australian Aboriginal Legal Aid Service (NAALAS) (1981). Neither relate to youth but both contain valuable grass-roots information on the drinking patterns of Aboriginal people. Cutter and Perkins' submission for funds for an alcohol rehabilitation project/farm in Alice Springs was successful. Reference is made in passing to petrol sniffing. NAALAS wrote its submission in June 1981 in response to a press release issued by the Chief Minister in May concerning drunkenness and drinking in public places. This was to be the precursor to the 'Two Kilometre Law'. NAALAS expressed concern that the Government's proposals would cause mainly Aboriginal people - rather than European Australians - to fall foul of the legislation.

In 1975 a team of four people (three of whom were Aboriginal) conducted a 'general survey' of the causes and effects of alcoholism among Aborigines. This was as a result of recommendations of the Interdepartmental Committee on Alcoholism and Aborigines. Their Report (Leary et al., 1975) provides a useful overview of treatment and therapeutic facilities for Aborigines across Australia and Aboriginal opinion on the causes of, and possible intervention in, alcoholism.

A section in their Report is devoted to 'the Problem in Youth' and begins with the often expressed view that 'the authority structure had broken down and young people were going their own way' (1975:22). Attempts to rectify this perceived situation are described (i.e., reinstating Aboriginal 'Law') as are the difficulties encountered (i.e., young people were more interested in alcohol than in ritual affairs).

Leary et. al. suggest a variety of solutions: canteens, clubs, an educative task force. The writers express the view that 'preventative work in alcoholism must be given top priority' (1975:32). The issue of prevention is also discussed in Dodson (1981) - his realistic approach being that little change will take place in the dominant role played by alcohol in Australian society. Dodson describes what he calls the 'seed bed' for a life of excess drinking in a nine-year-old Aboriginal boy he met. 'When life pressures and the continuing colonising process threaten this lad, it's to this kind of environment he will be attracted. His memory will remind him where the seed bed of his emotional life was formed' (1981:10).

Research studies on petrol sniffing

Nurcombe et al (1970) undertook a study of petrol sniffing at Elcho Island which was psychiatric in orientation. They selected 44 children (22 sniffers and 22 controls) and administered a behaviour and family background questionnaire. Their results were inconclusive, there being only a trend for petrol sniffers (degree of sniffing is undefined) to be 'slower' at school and to come from two particular clans. Eastwell's (1979) Maningrida study has been much quoted, particularly by the medical/psychiatric profession in the south. However, anthropologically his material is questionable, and Elsegood (n.d.), a member of the Community Development Remote Area Team, has disagreed with Eastwell's findings. Eastwell's analysis hinges on the absence of outstations for petrol sniffing clans, a state of affairs more complex than his account allows.

Morice, Swift and Brady (1981) have produced a Resource Manual which overviews the medical, psychological and sociological research on petrol sniffing in Australia. It provides what factual knowledge there is about the effects of lead and hydrocarbons and documents the interventions that have been attempted by Aboriginal communitites throughout Australia (including the NT).

Hayward-Ryan (1979) reviewed the state of petrol sniffing in the NT by sending a short questionnaire to chairmen of community councils. He asked for the number of sniffers (but made no distinction between chronic or occasional sniffers), clan groups, whether girls were involved, and names and ages if possible. He presents figures from nine localities across the NT, as at December 1978, on the assumed number of sniffers. Galiwin'ku, Yirrkala and Maningrida figures are broken down into clan and language groups. Hayward-Ryan makes some useful comments, and ends by recommending further research and the involvement of the National Aboriginal Conference.

Anthropological Studies

Since the mid-1970s some valuable anthropologically-oriented alcohol research has been written up. Reid and Munungurr (1977) document the alcohol-related deaths of two Aboriginal men and the imputations of sorcery that ensued. The authors call for greater respect from health professionals for Aboriginal belief systems. Sansom (1977, 1980) and Collman (1979, 1980) each provide analyses of Aboriginal drinking patterns in town and fringe camp situations, the former for Darwin, the latter, Alice Springs. Stead (1980) compares two Aboriginal localities and the drinking business which takes place away from urban centres. He discusses the Central Australian Pintubi and the settlement of Borroloola, south of east Arnhem Land.

The 'two kilometre law' and the impact on drinking of town housing schemes with active Aboriginal councils are discussed by O'Connor (1983a, 1983b). However none of these items relates to drinking among young Aborigines. This may be because in at least some Aboriginal communities, drinking is an adult affair; petrol sniffing is 'kid's business', and the two age groups adhere to their choice of preferred intoxicant.

Overall there has been surprisingly little research undertaken in the areas of youthful drug taking and drinking in the NT. The only survey of drinking (NT Liquor Commission, 1979) was, methodologically, a straightforward questionnaire. The Liquor Commission's other research combined extensive consultation and fieldwork by known and sympathetic personnel with the compilation of hard data on alcohol sales. Research which blends participant observation with a precisely-aimed survey is one way of providing a balanced account. The findings from each area thus inform the conclusions drawn from the other, and prevent the statistical data from going 'off-target'. Such a methodology also helps to avoid approaching these issues one-sidely.

RESOURCES IN THE NORTHERN TERRITORY ON ALCOHOL AND DRUG USE

Resource Guides

The NT Department of Health has recently published two useful booklets listing resources in the area of drugs and alcohol. They are:

Directory of Northern Territory Drug and Alcohol Resources (1983) NT Drug and Alcohol Bureau, NT Health. An essential guide to services and potential sources of current knowledge on alcohol, drugs and youth. Gives addresses, phone numbers and types of service.

The Media: A guide for workers in the health field with special reference to alcohol (1983).
NT Drug and Alcohol Bureau, NT Health.

The Department of Health has also published a volume entitled Alcohol Policies for the 1980s which contains the proceedings of the conference of the same name, in Darwin, February 1980. This contains useful data and comment on the road toll, treatment facilities and vulnerable groups. The Department of Education's contribution focusses on youth education policies concerning alcohol and a curriculum development programme, 'Education about Drugs', is appended (pp. 121-238).

Agencies in the field

There are several agencies in Darwin, for example, which have extensive knowledge about the current state of youthful drug and alcohol use. These agencies usually keep records of those they see, but naturally much of this information is confidential. However, I can note some examples of organisations which deal with children and adolescents and drug and alcohol use.

Fishermans Hut, Uniting Church, Darwin. A coffee shop, drop-in centre in town. They see some alcohol problems among under-age adolescents.

Sommerville Community Services, Outreach Programme and Drop-in Centre, Darwin (10-16 year age group). The Outreach programme operates a 'pick-up' service, a bus which covers Darwin streets until 3 am. This programme is now in its fourth year. Statistics are kept, but are strictly confidential as individuals are identified. However, the Director was able to tell me that there was, in his experience, little evidence of hard drugs among those they contact. However, alcohol abuse occurs in cycles and involves a range of children and young people from age six onwards. There have been occasional outbreaks of glue-sniffing associated with two major high schools in Darwin, but these outbreaks are sporadic and seem to be associated with a few key people.

F.O.R.W.A.A.R.D. (Foundation of Rehabilitation with Aboriginal Alcohol Related Difficulties) reported that they dealt with no under-age drinkers or drug cases.

The NT Police Department's Drug Squad collect statistics on the number of charges laid and amounts of drugs seized. These are monthly statistics passed onto bodies such as the NT Drug and Alcohol Bureau. However they do not have a uniform method of collecting statistics which would relate particular crimes to alchol or drugs (other than breath-testing/driving offences).

Banyan House (Forster Foundation for Drug Rehabilitation), Darwin, produces bi-annual Reports to the Forster Foundation which contain statistics on their resident/outpatient/contact clients, their drugs of choice, history of drug-taking, family and ethnic background and other details. A spokesperson commented that the current trend is for multi-drug use (rather than pure heroin addiction as was the case 4-5 years ago). Banyan House take individuals from 18 years onwards, except in cases where a younger person is firmly entrenched in hard drug use.

The Department of Health Annual Reports include data on alcoholism and drug addiction, although prior to 1979 the Reports were very brief. From 1983 onwards there will be a section on alcohol and drug use statistics within the Department of Health Annual Reports. This will take the place of the Department's Quarterly Bulletins, which ceased in 1981.

A valuable compilation of statistics was published by the Department of Health in 1981: Some Statistics on Alcohol use in the Northern Territory (extract from the Department of Health Bulletin issue no. 31, quarter ending 31 March 1981). This compilation provides an overview of the major developments in alcohol policies and the recommendations of various Government Enquiries. It describes how the NT Drug and Alcohol Bureau came into being and describes one of its functions as being 'to monitor and report on alcohol and other drug issues in the Northern Territory' (1981:2).

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