



Maari Ma Health Aboriginal Corporation

ABN 39 056 645 930

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Submission towards development of National Cultural Policy

By email: culturalpolicy@arts.gov.au

Maari Ma Health Aboriginal Corporation is an Aboriginal community controlled regional health service based in Broken Hill, far west NSW. Maari Ma provides a range of health, social and community programs to Aboriginal and non-Aboriginal people across western NSW. We are largely funded through grants from the Commonwealth and State governments but we also attract philanthropic funds which enable us to pilot and trial activities which have (yet) not been seen as a priority of Governments at the time, however many of them have gone on to attract Government funds.

So why does a health-based community controlled organisation want to have input into the development of a new National Cultural Policy?

When Maari Ma was first established in 1995, our Board of Directors were determined to see Aboriginal health improve in western NSW, despite remote locations, vast distances, and endemic disadvantage. Through passionate community control, led by experienced Aboriginal elders, Maari Ma has grown to deliver a wealth of health services with an impressive schedule of visiting medical specialists who support our Aboriginal health practitioners, nurses, GPs and allied health workers to provide quality primary health care to our clients and communities.

But health services only go so far.

After many years of health service delivery, and implementing a home-grown chronic disease strategy which was aimed at preventing chronic diseases by a) giving pregnant women a good pregnancy and babies and toddlers the best possible start in life, b) finding chronic diseases early through regular contact with community and regular health checks, and c) managing chronic disease better through quality services, Maari Ma realised that was not the whole story. We realised that when our children were starting school, they were already developmentally behind their non-Aboriginal counter-parts and the gap got wider as they got older.

What we then did was important: we know that evidenced-based best practice is the key to good outcomes in health and so we applied the same principle to the social determinants of health, and we turned to an academic, who was also a paediatrician, to find out what else we could and should be doing to ensure that the Aboriginal children in the far west of NSW were going to achieve their full potential.

We then took this information and shared it with the community at large including health, education, welfare and other service providers that interact with our families, so that we would all have the same information and evidence about what children need to reach their full potential. That combined wisdom is captured in "*Strategic framework document to improve child development and*

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wellbeing for Aboriginal children in the far west” (2009) and a subsequent edition, “Strategic Framework Document: Improving development and wellbeing for Aboriginal children and young people in the far west of NSW” (2012).

Since 2009, Maari Ma has been implementing what we have called our Early Years Project. Initially, this was an Aboriginal playgroup in Broken Hill for parents/carers of Aboriginal children: for children to learn through play, and for parents to understand about child development and to share their child’s growth and learning.

Our next addition was a book sharing program called Little Kids and Books: we sourced quality books and scaffolded an activity around the story – a song, craft, a skit or game – plus a healthy morning tea. This was both a social activity for many families who did not have access to any early childhood education activities in their isolated community and an opportunity for educators to model the interactions that make reading with children such a pivotal developmental activity for young children. Families would take home the book as the start of a home library where many families did not have such a thing.

Our next activity was linking early literacy with our child health calendar. Our chronic disease strategy encourages families to interact with our clinical staff 26 times from birth to 8 years of age – to ensure baby is developing appropriately, to support new families to ensure their baby stays well, and to help with health literacy: learning what keeps children well and what can adversely affect their health or growth. At 10 key developmental milestones for the child up to 8 years of age, we now provide an age-appropriate book and information to the parent: about the child’s current stage of development, how to share the book with them, and techniques for book sharing. This is particularly important for parents who may have low or poor literacy skills themselves. These books also form part of the home library.

We have been providing the HIPPY program (Home Interaction Program for Parents and Youngsters) in Broken Hill since 2014. HIPPY is an evidence-based program that supports a child in the year before they start school to be school ready and their first year of school to consolidate the skills needed to achieve their potential. We are funded to support 25 x 4 year old and 25 x 5 year old Aboriginal children each year and have recently, through philanthropic funding, expanded this program to Wilcannia and Menindee. A critical feature of the HIPPY program is the peer to peer teaching process. From each cohort of parents, we recruit 2 parents to be tutors to the other parents for each weekly activity. Then the parent teaches the child, consolidating the parent’s role as the child’s first teacher. This empowering of parents is almost as important as the child’s school readiness. Another important feature of the HIPPY program is books and, again, these are incorporated into a home library for our families.

There are other features of our Early Years Project which are important to helping Aboriginal children achieve their best outcomes in later life, but the last feature relevant to the development of a new National Cultural Policy is access to quality age-appropriate books written by First Nations authors for First Nation (and other) children. Our strategic framework document, and its list of references, underscore the importance of language and reading in early childhood development and literacy, acknowledging the role that reading to young children makes in their overall growth and development including brain development, language development, their sense of who they are and

their culture. For many Aboriginal parents, literacy is a challenge and there is plenty of evidence to say that reading ability does not preclude a parent from sharing books with their children. Maari Ma has researched and developed our own dialogic book sharing program. Dialogic book sharing is all about a parent interacting with a child about a book and what they see on the page: what is this person doing? What do you think they might be saying? What can you tell me about this picture? What's your favourite part? Each picture becomes the start of a conversation. Our pilot is utilising existing children's books that lend themselves to plenty of interaction based on the illustrations, but the number of books written by First Nations authors is still relatively small. And as we have seen and is well documented as a staple of Aboriginal health care and career pathways for Aboriginal people in the health industry, "you can't be what you can't see." It is important that Aboriginal children interact with their parents and carers over books that tell stories that reflect their communities, reflect their values and culture, celebrate their totems and storylines, their country.

From our perspective, the research is clear: early literacy is key to improving outcomes for Aboriginal children. Improved literacy and school readiness leads to improved outcomes in schooling. And global evidence tells us that education is key to getting disadvantaged populations out of poverty. Improved literacy is a function of successful brain development which really highlights the link between primary health and the social determinants of health. If we make sure that, not only is a child healthy, but he or she grows up in a family that values books and reading and knowledge, in a safe home environment, in a safe community, then a child will thrive. Reading, and subsequently, writing activities are integral to social cohesion for children, and they ultimately lend themselves to improved mental health and wellbeing, and this is particularly so for Aboriginal people.

The link between a strong literary culture, that is a love of and a valuing of books, and levels of literacy and competence for children and young people cannot be understated. Of equal importance is culture to Aboriginal children and their families and so the need for a strong literary industry in Australia is also important. The problem of Australian children only seeing American shows on TV in previous decades is equally as dire for Aboriginal children who only see other cultures reflected to them in books, but none of their own. It is imperative that we encourage and support the Australian book industry so that the myriad of Australian stories can be told, not to the exclusion of stories from other cultures, but in addition to those stories, so that our First Nations people can share with all Australians the stories that underpin the longest living culture on earth.

A thriving Australian book industry is integral to telling the stories of all Australians, and in particular, supporting the telling of Aboriginal stories. The telling of Aboriginal stories is essential to Aboriginal children and their families sharing their culture. The sharing of books is essential to all, but particularly, to young children or those who might be book-deprived.

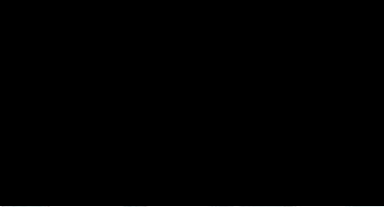
As an Aboriginal community controlled organisation, Maari Ma takes our role as advocates for Aboriginal people very seriously. We believe that the Australian Government should do all in its power to support access for Aboriginal people to Australian books through a strong Australian publishing industry, support for Australian authors and illustrators, and access to grants that support First Nations story-tellers. All of these should be features within a new National Cultural Policy.

Equally, a National Cultural Policy should support the re-invigoration of Indigenous languages across Australia: in schools, in public places, in formal and informal ceremonies. Those who have retained the language, stories and lore, should be encouraged and supported to record it for current and future generations. Providing for, encouraging and supporting a strong First Nations presence in the

arts, theatre and literature will be a gift not only to all First Nations people, but all Australians: the culture of First Nations people is the Gift that is referred to in the Uluru Statement from the Heart.

We would be happy to provide further information regarding any aspect of our submission if requested.

Yours sincerely

A large black rectangular redaction box covering the signature of William Smiley Johnstone.

William Smiley Johnstone
Chief Executive Officer, Maari Ma Health Aboriginal Corporation

Two black rectangular redaction boxes covering contact information, likely a phone number and an email address.

References:

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