Aboriginality and Ageing: A Review

The Multicultural Network

2017
Approach and Methodology

The Methodology that was prevalent within this review was secondary sources found using online tools and databases. Unfortunately, certain articles have been accessed using a University database that therefore restricts the accessibility of some of the sources collected. The annotated bibliography consists of the majority of the literature used in understanding this topic, with certain sources being available to be accessed online by the public. The sources that were selected were aimed at exploring Aboriginal people in their ageing process and the contribution from their culture as they age.

Acknowledgements

this Literature Review was prepared by Emma Sepokas as her major project for the subject ‘Professionals pathway project’ at the University of Technology, Sydney. She would like to thank Miguel Ferrero very much for supervising the production of this literature review, and for the constant encouragement and leadership. Likewise, many thanks for the staff members of The Multicultural Network who provided her with a warm and welcoming atmosphere and assisted her learning and working as part of their team. She would also like to acknowledge and thank Christina Ho for her support and observations as a tutor at the University of Technology Sydney.
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1.0 Introduction

1.1 The Motive for this Topic
Aboriginality and Ageing has been a notably underdeveloped topic of research regarding the Aboriginal community. When investigating this subject, it was clear that there was no shortage of research regarding the physical health of Aboriginal people as they age, yet there was a substantial lack of material regarding the Aboriginal perspective of their ageing. The Multicultural Network believed this topic is an imperative aspect of Aboriginal culture, and therefore must continue to be reviewed and understood.

1.2 The Multicultural Network
The Multicultural Network (TMN) is a non-profit independent community based organization. They aim to support and advocate for the many diverse communities in south west Sydney. Their goal is to bring positive social change to groups within the area including, but not limited to, the disabled, Indigenous and the elderly, while also aspiring towards an inclusive harmonious relationship with Indigenous, Anglo-Australian and ethnic communities. The Multicultural Network prides themselves on their ethics, which includes equality, empowerment, community, growth and strengthening the capacity of our diverse communities.

1.3 History
“There is no place in Australia that is not Aboriginal or Torres Strait Islander land” (Working with older aboriginal and Torres Strait Islander people, 2017)

To understand the Aboriginal perspective regarding Aboriginality and ageing, I thought it would first be essential to understand the immense and extended history of Aboriginal people, to ensure a culturally appropriate appreciation of their ownership of Australian land.

In the research article ‘Aboriginal social, cultural and historical contexts’, it is noted that ‘Aboriginal people have been in Australia between 50,000 and 120,000 years. At the time that the British arrived in 1788, there were speculations that the Aboriginal population was 300,000 to 950,000 people.’ It was also expressed that there was an abundance of diverse languages, approximately totalling 260 languages, and 500 dialects. The communities were described as small and semi-nomadic, ultimately allowing land to be a fundamental element to Aboriginal people. (Aboriginal social, cultural and historical contexts, 2017)

1.4 Introduction to Aboriginality and Ageing
The notion of ageing well is essential for individuals to live a fulfilled and enriched life. When understanding the important aspects of ageing well, many articles were examined. The Authors
of the article ‘Ageing well from an urban Indigenous Australian perspective’, Waugh and Mackenzie, noted that numerous significant characteristics were prevalent in the ageing process of Aboriginal People include personal identity, family, community and a positive perception of health and ageing. They state:

“As health and wellbeing are multi-dimensional, it is essential to maintain optimistic wellbeing throughout an individual’s ageing progression.” (Waugh, E. and Mackenzie, L. 2011)

This illustrates not just the physical aspects of ageing, but the mental and social aspects correspondingly. The aim of this literature review regarding Aboriginality and Ageing is intended to examine the existing literature and resources on this topic from the perspective of Aboriginal people. This will therefore identify areas and topics that need further research.

I cannot stress the importance in understanding that the literature being reviewed, and the concepts being explored, are from numerous scholars who have interviewed or discussed with Aboriginal participants, yet, these opinions expressed may not be the thoughts and attitudes regarding ageing within the entire Aboriginal population of Australia.
2.0 The Ageing landscape of Australia

“Indigenous and Torres strait Islander people aged 45 years and above are classified as older Indigenous to the Australian government and allows accessibility in receiving aged care and services, which are available to non-Indigenous Australians at 65 years and older.” (Waugh, E. and Mackenzie, L. 2011)

To understand the notion of Aboriginality and Ageing, identifying the current Australian landscape concerning health and ageing within Australia is crucial. The Authors of ‘Indigenous wellbeing in Australia’ demonstrated the current statistical demographic of older aboriginal’s, and noted that there was a very little percentage of the Aboriginal population aged 65 years and older at 3%. They stated:

“Premature ageing is common regarding degenerate diseases like diabetes and kidney and heart problems starting at the age of 45.” (Manning, M, Ambrey, C, Fleming, C. 2015)

These authors also noted that less Aboriginal people statistically survive older age, and therefore the life expectancy for Aboriginal people tends to be far lower than non-Aboriginal people. They continue on to accentuate the belief that having a partner can be a motivating factor in accessing ageing services and facilities which can benefit the physical and mental health in the ageing process. Consequently, due to the lower life expectancy, it is less likely to have a partner in the ageing development of Aboriginal people. (Manning, M, et al. 2015)

The ‘Department of Communities, Child Safety and Disability Services’ studied and reported on the statistics regarding the ageing demographic of Australia. The final conclusions conveyed:

“The median age for non-Indigenous Australian’s is 36 years, while it is 21 years for Indigenous.”

This statistic has assisted in comprehending the reason behind the estimated 3% percent of Aboriginal people over 65, in comparison to 13% of non-Aboriginal people aged over 65 years due to the dramatic difference in median ages. (Annual Report 2014-15, 2017)

With this being understood, it is imperative to recognize that the Aboriginal population is relatively young in age, yet the number of aged people within the Aboriginal population is constantly increasing. Through the Australian association of Gerontology’s research, they have noted that ‘Aboriginal people 75 years and older living in Aboriginal communities have a mortality rate similar to non-indigenous people.’ Simultaneously, Aboriginal people also have higher rates of dementia and disabilities, yet they have limited access to services in comparison to the non-indigenous population. (Aboriginal Ageing, 2017) To comprehend these statistics is necessary in recognizing the difficult ageing process individuals within the Aboriginal community face in comparison to those of non-aboriginal descent.
It is an iconic statistic within Australia about the age gap of Aboriginal people in comparison non-Aboriginal people’s life expectancy is nearly 20 years different. There have been numerous literature and websites attempting to create and research this health gap, and therefore it is unclear of the exact life expectancy of Aboriginal people in comparison to non-aboriginal people as there is no one precise and confirmed statistic. It has been considered by some that the life expectancy gap may have improved, with ‘estimates suggesting that there is now an 11 year lower life expectancy gap.’ (Anderson, I, et al. 2012)

Whereas, the Moreton consulting group found that the NSW life expectancy for Aboriginal males is 70.5 (9.2 years less than non-aboriginal males), and for females being 74.6 (8.5 years less than non-aboriginal females.) They continued to illustrate their notion that this shorter life span is an indication of poverty, disadvantage and ill health within Australian society. Their facts came from the NSW government education in aboriginal affairs, and also stated ‘As there are limited elders, due to this shorter life span, consequently has many negative effects on the community and its development.’ (Growing old in Kempsey, 2017) This is also confirmed as one author stated: “The Aboriginal population is described as most disadvantaged group in Australia.” (P, Dudgeon, et al. 2017)

The 2006 Census was mentioned and illustrated in ‘the Aboriginal Ageing and Disability issues in South West and Inner West Sydney’. As these are outdated figures, these statistics will have changed dramatically over the past 11 years, and it is important to recognize that this has occurred. In the 2006 figures, ‘there were 455,031 indigenous Australians, representing 2.3% of the total Australian population. 17.1% of those were aged 45 years and over compared to 38.8% of the non-indigenous population, while only 8.2% of indigenous is aged 55 years and over, compared to 24.7% of the non-indigenous population. 3.3% of the indigenous aged 65 years and older compared to 13.4% of non-indigenous. 1.1% of indigenous aged 75 years and older compared to 6.4%’. These gaps are dramatic in grasping an understanding of the Indigenous’ higher mortality rates and lower life expectancies. (Indigenous research and development consultancy, 2017)

2.1 Health issues
It is continually spoken about within society and discussed in the government regarding health issues that relate to Aboriginal people as they age. Waugh and Mackenzie mention that the prevalent physical health problems identified within the ageing Aboriginal communities include diabetes, cardiovascular disease, emphysema, asthma, obesity, cancer, kidney disease, arthritis, high blood pressure and high cholesterol. (Waugh and Mackenzie, 2011).

The Moreton Consulting group interviewed a number of Aboriginal people regarding their ageing. The main point deduced was the notion that for some, “the first time they felt old was related to a serious medical event such as a heart attack.” They discussed Aboriginal people and
the importance in identifying their specific ageing requirements to reduce the risk of common illness’ and diseases. They mentioned the common diseases for individuals aged 50 and above included: “Depression, Renal impairment, Hyperlipidemia (high cholesterol), Diabetes type 2, and hypertension (high blood pressure)”. (Growing old in Kempsey, 2017)

These prevalent diseases are also said by the authors of ‘Do Indigenous Australian’s age prematurely?’ and note that the frequency of hypertension, respiratory disease and diabetes were higher than non-indigenous rates, particularly for the younger age groups. They are said to affect Aboriginal people at approximately 10-20 years earlier than non-Aboriginal people. (Anderson, I. Et al. 2012)

Similarly, the Australian Government stated that Aboriginal people have dementia at almost 5 times the rate than the general population. They continued to remark that the age group of people 45-69 was the majority affected, while males are more affected than females, which contrasts to the general population. (The Australian government, 2010)

Dementia has also been acknowledged by the Benevolent Organization, where they recognized dementia as an issue within the Aboriginal community. They noted that it can be distressing for Aboriginal people because “the role of elders in passing on cultural knowledge to younger generations orally, which require a reliance on memory. As a result, it is not only individuals who are affected by dementia, but rather entire communities.” (Working with older aboriginal and Torres Strait Islander people 2017) The importance in Aboriginal people passing down information as they age is confirmed by the authors of ‘Special Issue: Remembering our roots’, and illustrated that “They are determined to preserve, develop and transmit to future generations their ancestral territories, and their ethnic identity, as the basis of their continued existence as peoples, in accordance with their own cultural patterns, social institutions and legal system.”(Braun, K, et al. 2013.

As the government and numerous members and organisations in society have put a big emphasis on the health statistics of Aboriginal people, this literature review will now aim to examine the subjective wellbeing of Aboriginal people.

2.2 Subjective wellbeing

2.2.1 Collaborate with the Aboriginal community
Waugh and Mackenzie mention a need for including Aboriginal people in every process and stage of program development, and will allow an increase in subjective wellbeing of the entire community. They further state that:

“We must Value indigenous knowledge and cultural beliefs and practices, which are important for promoting cultural identity and social and emotional wellbeing for indigenous Australians.” (Waugh and Mackenzie 2011).

2.2.2 Subjective wellbeing of Aboriginal people
The Article ‘Subjective wellbeing of the Aboriginal and Torres Strait Island people of Australia’ illustrates numerous arguments regarding Aboriginal subjective wellbeing which consequently affects the ageing process for many ageing people. They note that the subjective aspects of indigenous life such as spiritual wellbeing have been absent from the policy domain, yet are increasingly important within the Aboriginal community.

Important factors that increase subjective wellbeing
Many participants were interviewed to clarify the important factors for indigenous people which cannot be measured objectively, such as: “family stability, community life, cultural identity and connectedness with country.” (Manning, M. et al. 2015) They continue to suggest that through their studies, it is clear that life satisfaction for indigenous Australian’s is higher than that of non-indigenous.

“This may be due to Indigenous Australian’s having a different baseline against which they evaluate their own life, and also likely that there are other dimensions of life uniquely experienced by indigenous Australians; these potentially play an important role in Indigenous life satisfaction.” (Manning, M. et al. 2015)

Similarly, speaking limited or no English was associated with higher levels of life satisfaction for indigenous Australians, whereas the reverse is true for non-indigenous Australians. It is understood that this positive subjective wellbeing may have been due to their ability to be closely connected with their culture and community.
Negative aspects that effect subjective wellbeing

Unfortunately, the discussion of widowhood was a prevalent theme, where they presented the statistics that ‘being a widow is seven times more detrimental to life satisfaction for indigenous than non-indigenous.’ They consider the possibilities that this may be due to numerous reasons such as Indigenous women having more children, which consequently equates to a larger burden; Limited job opportunities for older or unqualified people, which subsequently leads to the inability to support themselves; or perhaps the proven life expectancy gap, and therefore the accumulation of superannuation or other financial assets has not been adequately acquired to survive the retirement and ageing period. (Manning, M. et al. 2015)

The Authors of ‘That’s just the way he is’ convey the fact that Aboriginal people “continue to experience greater poverty than non-Aboriginal Australians, have higher rates of unemployment, more inadequate housing, poorer participation and completion in education, poorer access to clean water, waste disposal, and utilities than the white population.” These inequalities ultimately affect their ageing process, and their wellbeing. (Vicary, D, Westerman, T. 2014)

A Review named ‘Aboriginal grief and loss’ focused on Aboriginal people and their experience with palliative care. Similar to my own research, these authors illustrated their lack of findings and the minimal literature found for the aboriginal context on this topic. However, the research they found portrayed “Aboriginal people generally limit their access of mainstream palliative services due to lack of cultural awareness and culturally appropriate care.” Similarly, the idea that grief is a cause of illness, which can be a result of loss, was portrayed. They continue to explain malignant grief as a term used to describe the “process of irresolvable, collective and cumulative grief over multiple generations that affects Aboriginal individuals and communities, causing them to lose function. The grief has invasive properties, spreading through the body… Many of Australia’s Aboriginal people eventually die of this grief.” The negative effects of colonization on numerous generations of the Aboriginal community are still present in today’s society, and grief continues to occur. This affects the emotional wellbeing of many Aboriginal individuals, and limits their ability to have a successful and happy ageing process. (Wynne-Jones M, et al, 2016)

2.2.3 Social and emotional wellbeing

The key theme of the article named ‘Social and Emotional wellbeing’ was the need to understand that ‘ageing is not just the physical wellbeing of an individual, but also the social, emotional and cultural wellbeing of the entire community’. The positive social and emotional
wellbeing of individuals and communities is essential in the ageing process of Aboriginals. In numerous articles regarding Aboriginal social and emotional wellbeing, the following nine guiding principles which allow the ability to reinforce social and emotional wellbeing to the Aboriginal community is integral, and assists understanding and facilitating in ageing emotionally, spiritually and physically. (Graham, G. et al, 2015)

“Nine guiding principles that underpin SEWB
1. Health as holistic
2. The right to self-determination
3. The need for cultural understanding
4. The impact of history in trauma and loss
5. Recognition of human rights
6. The impact of racism and stigma
7. Recognition of the centrality of kinship
8. Recognition of cultural diversity
9. Recognition of Aboriginal strengths”
(Graham, G. et al, 2015)

Active and Successful Ageing
Manning et Al found that the term used by governments ‘Active Ageing policy’ marginalized and excluded aboriginal elders. Certain examples include the difficulty for many elders and older Aboriginal people to access the majority of resources that are offered by the government such as physical fitness facilities, senior centers and health care services due to remote locations or lack of transport. Similarly, Racism has been experienced by numerous elders at these amenities within Manning et Al’s research, and has consequently reduced the self-esteem of individuals and the community wellbeing. (Manning, M. et al. 2015)

Successful ageing generally emphasizes physical aspects, while also considering psychological attributes such as happiness and emotional wellbeing. Ranzijn defines successful ageing as a low probability of disease, high cognitive and physical functional capacity and an active engagement with life. (Ranzijn, R. 2010) The current policy regarding active ageing as part of a government initiative focuses mainly on physical health, independence and productivity, yet there are many arguments that illustrate this policy marginalizes Aboriginal elders. Racism is a factor that majority of Aboriginal people have experienced within their lives. Within the Ageing process, the elderly and Aboriginal elders had mentioned that they often feel unwelcomed when attending organizations, and conveyed that they are not ‘Nunga-Friendly’ (The Nunga people are the aboriginal people of the southern-South Australia.(Ranzijn, R. 2010)

It is therefore essential to start considering other aspects of ageing besides physical characteristics.
3.0 Aboriginality and Ageing

There is numerous literature noting figures and statistics from a westernized view concerning Aboriginal people and their health in the ageing process. Yet unfortunately, there is very limited literature regarding the ageing process from an Aboriginal perspective. In this segment, I hope to gain further insight into Aboriginality and Ageing from the perspective of Aboriginal people rather than the medical western views.

“It is understood that through culture, Aboriginal and Torres Strait islander people experience strong connections to family, country, spirituality and community”. (Working with older aboriginal and Torres Strait Islander people 2017)

Knowing the concept of Aboriginality and Ageing from the perspective of Aboriginal people is essential in allowing the Australian population to understand and realize the importance of this culture, and how individuals and communities can help with their ageing process.

The concept of health to aboriginal people is multi-dimensional, and therefore difficult to define simply what health is believed to be. Aboriginal people’s health can be portrayed as “deeply embedded in culture and spirituality, and embraces all aspects of life and living.” (Working with older aboriginal and Torres Strait Islander people 2017)

3.1 The role of an elder

The role of an elder is an essential component of the Aboriginal community, and enriches the ageing process in numerous ways. This can be seen from the perspective of elders and how their leadership role within the community has benefited them emotionally and spiritually. Similarly, it can also be positively seen to other ageing members of the Aboriginal community, as elders continue to preserve the community as a whole and enrich numerous members when constantly.

Braun, Browne and Sue describe elders as leaders, custodians of history and cultural knowledge, while simultaneously a mentor to the young. They mention that:

“Eldership is not based on age, but on demonstration of emotional wellbeing, community engagement, spirituality, physical health and wisdom gained through life experiences.”

This article conveyed the beliefs of Aboriginal participants, and specifically noted that elders within the Aboriginal community in Sydney understood ageing well comes from engagement in ‘meaningful, culturally valued roles; which ultimately strengthens self-identity and facilitates family and community wellbeing.’ (Braun, K. et al. 2010) As Self-Identity, family and community were all cited previously as being essential in ageing healthy, it is clear that these factors from
elders contribute have a positive role on wellness in the entire Aboriginal communities.

This idea of eldership is prevalent in other similar journal articles, where one stated that the four elements of eldership are ‘emotional wellbeing, community engagement, spirituality and physical health.’ He continues to describe these elders as respected by the entire community, and defines them as those who have lived traditionally and have been continually present as a role model, thus being an integral part of the community. (Lewis, J. 2011) “It is Essential to value the status of elders and enabling them to fulfill their traditional roles will enable them to age well and eventually die happy.” This responsibility of fulfilling such customary roles allows a sense of purpose and contentment in the ageing process. (Lewis, J. 2011)

A case study was conducted by Ranzijn regarding marginalised and disadvantaged elders. He noted that elder hood is not determined by age, rather, by going through the progression of gaining their status, and have increased responsibilities to demonstrate that they can be trusted with Significant Aboriginal knowledge. There is no guarantee that an older Aboriginal person becomes an elder, and some never gain their status of an elder, while it is possible for relatively young people to also be recognized. Ranzijn portrayed that such responsibilities include “stewardship of traditional land, custodianship of the dreaming, passing on stories of culture, and regulating the affairs of the community in a system where men and women have distinct but equally important roles.” (Ranzijn, R 2010)

3.2 Identity and Culture:
The identity and culture of Aboriginal people is a vital component of their ageing process. They need to share aspects of their identity onto their grandchildren and continue to contribute to the community of indigenous people in Australia. Performing and fulfilling certain roles is an integral element of culture that provides a sense of purpose and pride in their lives. This includes “community work, sharing of knowledge, involving children and helping their future and tracing their family history, learning aboriginal languages or advocating for indigenous people.” (Waugh, E. and Mackenzie, L. 2011)

An article by Jordan Lewis on Aboriginal successful ageing noted that it is necessary to realise that culture is dynamic and fluid in nature. The culture of many people changes over time due to outside and inside influences. He also illustrated the idea that continual community involvement allows elders to have a sense of purpose and a strong sense of identity. Most elders who were interviewed acknowledged the importance of passing down information and knowledge to the youth, and felt privileged in having this information to do so. (Lewis, J. 2011) This has been a common priority throughout majority of the literature regarding significant Aboriginal practices.
McGrath and Phillips studied Aboriginal beliefs, and portrayed that there is no ‘one’ Aboriginal culture. It is said that, “Contrary to popular beliefs, indigenous Australians culture is not one culture. Rather, aboriginal spirituality is influenced by the diversity of cultures of indigenous Australians, the influence of European cultures and religions and other social and environmental factors.”

What they did understand through their studies and interviewing participants was that Spiritual beliefs play an important role in the wellbeing of aboriginal persons. “Aboriginal values include family and kinship, sharing and the love of the land. They are shared values even though their cultures are different.” (McGrath, P, Phillips, E. 2008)

3.2.1 Life cycle
During their conversations with participants, the authors clarified the notion that when it was time for many older Aboriginal people, they have an overwhelming urge to return to their original country where their spirit can re-enter the dreamtime. Therefore, the need for health professionals to be aware of Aboriginal beliefs and culture is essential as they can help assist in numerous culturally important customs. (McGrath, P, Phillips, E. 2008)

Similarly, through an interview process, Ranzijn noted that many Aboriginal people believe that the life cycle is a circle of life-death-life. The belief that people die so their spirit can return and renew the original land is important within the ageing process as an acceptance of life. Death is not something to be feared nor fought against, as ageing is an accepted part of life, which ultimately contrasts the western view of resisting and denying ageing as long as possible. (Ranzijn, R. 2010)

Yet, in many cases, there is a mix of traditional and Christian beliefs. This is present in an interview conducted by McGrath and Phillips, who stated: “A lot of people too have a bit of both, bit of western and a bit of Aboriginal. Where does the spirit go? I don’t know. Some say to their country or some say to heaven, or a bit goes to country and heaven? Oh yeah, country. Yes, everyone has different beliefs, yes. (McGrath, P, Phillips, E. 2008)

Similarly, McGrath and Phillips delved into the spiritual beliefs regarding animal spirits as a prevalent part of Aboriginal culture. Through interviews, they cited that Animal spirits are an essential notion in the traditional aboriginal view of the spirit world, where each person has a relationship with their own spirit animal. These spirit animals are also known to warn an Aboriginal person when they will be dyeing, so they can prepare to go back to their country. (McGrath, P, Phillips, E. 2008)
3.3 Family and Kinships:

Family and Kinship networks are central in the functioning of Aboriginal societies. It allows caring, responsibility and reciprocity to be present, and provides secure connections that build a sense of identity and participation. The system of kinship, which determines an Aboriginal or Torres Strait Islander person’s extended family and land, is a central aspect of the community. “Older people are an integral part of the social fabric of Aboriginal and Torres Strait Islander communities. Social fabric is what makes a community interesting, meaningful and purposeful”. To have Aboriginal communities encouraging successful ageing is crucial in mentoring and ensuring there are positive role models for middle aged and young people. This is due to older aboriginal people holding knowledge and wisdom which can be transferred through generations. (Working with older aboriginal and Torres Strait Islander people 2017)

Similarly, it is confirmed that family connections are incredibly important to Aboriginal culture, and thus, a fundamental role for Aboriginal elders is to continue to assist in keeping these kinships strong to ensure family unity. Likewise, other commitment’s such as the role of a grandparent is a strong theme related to positive Aboriginal ageing and health. Waugh and Mackenzie illustrate that being a grandparent is a motivating factor in remaining healthy, which can contribute as a source of happiness and satisfaction. Yet, certain negative aspects regarding family for ageing aboriginal people include the numerous overwhelming demands of being the head of a family, or the increasing issue of lack of respect that may occur on occasion. This was believed to be due to media and contemporary attitudes towards older people, which ultimately affect the wellbeing of family cohesion, and the positive identity of Aboriginal people in their ageing development. (Waugh, E. and Mackenzie, L. 2011)

Similar to Waugh and Mackenzie, family was a common theme prevalent. It was illustrated that there were responsibilities thrust upon grandparents, which involve stepping in to raise their grandchildren. This may be due to a result of drugs, alcohol, violence or mental health issues. (Growing old in Kempsey, 2017) Yet, The Aboriginal kinship is prevalent in numerous literatures, and can be seen when communities as a whole take responsibility for caring for its elders and positively affects the notion of Aboriginality and Ageing. (Ranzijn, R. 2010) This illustrates the respect that families and kin have for elder generations, and positively impacts the ageing process due to the constant support of family and kin.

It has been said by Aboriginal people living in Sydney that majority of the care received as they age is classified as informal, as relatives are their primary care givers. This definitely illustrates the reflection of the kinship patterns in many aboriginal families and allows confidence and fulfilment to be achieved by being so close to their kin. (Farrelly, T. Lumby, B, 2017)
3.4 Community:
Culture was a prevalent theme that the older Aboriginal people associated with ageing, and many participants spoke about their commitment to supporting the community and sharing their knowledge and cultural pride. Having these relationships with the younger community allows meaning to be further added to their lives. When asked what made their life meaningful, some answers included “Faith, church, involvement in community, being happy to be alive, being active, relationships, partners or family.” (Growing old in Kempsey, 2017)

It has been understood that connections to family, kinships and community have always been an essential theme within the functioning of traditional and contemporary Aboriginal societies from numerous literatures. These systems are multifaceted and diverse, yet essential to the aboriginal identity, and thus there is no one theme of significance, rather, an interrelation of numerous themes such as family, identity and community. (Graham Gee, et al. 2015)

3.5 Connection to mind and emotions
“Depression can be seen as longing for, crying for, or being sick for their country.” This can be seen if individuals are removed from their country, or place of dreaming for long periods of time. There is a clear difference between western treatments of depression in comparison to Aboriginal cures. The western treatment involves medication and counselling, whereas the Indigenous methods aim to build resilience against the spirits and to increase wellness. (Vicary, D et al. 2014) It illustrates their desire to promote enablement and enrichment within their lives, and affects the ageing process positively if the constant support is present.

A Connection to the mind and emotions refers to an entire spectrum of cognitive, emotional and psychological experiences. The human needs illustrated by the participants include “the experience of safety and security, a sense of belonging, control or mastery, self-esteem, meaning making, values and motivation, and the need for secure relationships.” (Graham Gee, et al. 2015) These requirements would allow the mental wellbeing of Aboriginal people in the ageing progression to be content and positively affect their mental and physical health as their physical health declines.

3.6 Perceptions of what health and ageing mean to Aboriginal people
An Aboriginal perspective that has been discussed by the department of communities, child safety and disability services states that everyone develops differently, and that the “Ageing is a continuous process, rather than a distinct phase with a particular starting time.” (Ageing, Myth and Reality, 2017)

This is further established when a literature on ‘aboriginal social and emotional wellbeing’ mentioned the notion of health and wellbeing consisting of numerous complex concepts, and therefore there is difficult in finding one consensus regarding what the definition of Aboriginal
ageing is. They continue to illustrate the national Aboriginal and Islander health organization’s definition of health as:

“Aboriginal health does not mean the physical wellbeing of an individual, but refers to the social, emotional and cultural wellbeing of the whole community. For aboriginal people this is seen in terms of the whole life view. Health care services should strive to achieve the state where every individual is able to achieve their full potential as human beings, and must bring about the total wellbeing of their communities.” (Graham Gee, et al. 2015)

Ranzijn compared the values between the Aboriginal people and the non-Aboriginal to understand their ageing process. “Non-aboriginal people valued independence, autonomy and self-reliance, Whereas, Aboriginal people valued interdependence, mutual resilience, reciprocity and the kinship system.” (Ranzijn, R. 2010) This statement further enforces the idea that the Aboriginal culture involves community and kinship, and allows constant support to be present. This is therefore a positive factor for older Aboriginal people as they get older, and reduces the pressure of physical limitations that come with age. Aboriginal people value wellness and enrichment through positive life goals such as helping the community and raising their grandchildren. It accentuates the spiritual concepts of Aboriginal culture, rather than focusing on the physical aspects such as wrinkles and reduced capabilities.

Waugh and Mackenzie spoke to many Indigenous participants regarding their perceptions of health and ageing within their own experiences. Numerous partakers understood their health as purely physical, and believed their ageing was an increase in physical limitations. This declining health due to their age has been said to challenge many aboriginal people’s identity, and some had trouble adjusting to the increasing reliance on others for help.

Several participants considered the notion that Aboriginal people living closer to their traditional way of life had better physical and spiritual health in their ageing process. This belief is also confirmed by the authors of the article ‘The link between Indigenous culture and wellbeing’, where they state “Wellbeing of Indigenous people is enhanced when they maintain their traditional culture’ (Colquhoun, S et al. 2012)

While many participants regrettably noted that negative risk taking activities in their past, such as smoking and alcohol consumption had now affected their current health in the later stages of their life. This was a prevalent theme for the participants that did not live in the ‘traditional’ way of Aboriginal culture. (Waugh, E. and Mackenzie, L. 2011)

In regards to Western medical professionals, it is clear that there is not a clear understanding of the importance of Aboriginal spiritual beliefs, and consequently leads to a reluctance in Aboriginal people talking to such professionals about their ageing issues. As these medical
professionals do not truly understand the Aboriginal culture, it has had negative effects on the Aboriginal identity of numerous patients due to their culture being overlooked and disregarded.

3.7 Concerns of ageing
Similar to non-aboriginal concerns regarding ageing, factors that were prevalent issues involving the ageing process included health, money and poor standards of housing. Other fears that were voiced during participant interviews by Moreton consulting included “impacts of drugs and alcohol, families wellbeing, transport issues, caring for young children, not being able to access services, money pressure from family, violence, not being able to do certain things, community tensions, grief and looking after the house and yard.” (Growing old in Kempsey, 2017)

Supporting the concern of financial issues, Ranzijn interviewed numerous Aboriginal elders living in South Australia, and attempted to understand their ageing process. Majority of the elders he interviewed illustrated their employment throughout their life, which allowed them to accumulate assets and life comfortably and secure. Unfortunately, many were also exploited through this employment, and included their wages being withheld by their non-aboriginal employers. Similarly, as community and family is an essential theme regarding Aboriginality and ageing, any spare money that was accumulated by these participants usually went towards care for their grandchildren and other relatives, and therefore miss out on essential medical or ageing amenities such as walking sticks. (Ranzijn, R. 2010)
4.0 Conclusion:
This review was aimed at conveying ‘Aboriginality and Ageing’ from the perspective of Aboriginal people. Numerous literatures were examined concerning a variety of aspects of Aboriginal health, including mental illness, spirituality, disability and many other health issues. This was due to the clear lack of research and information regarding Aboriginality and Ageing from Aboriginal perspectives, rather from the perspective of westernized views. Thus, I was not capable of entirely grasping the topic, as the quantity and quality of literature regarding aboriginal perspectives are lacking. This unfortunately led a large portion of this review to have focused on health issues, which were not my intentions, yet this being the topic that the majority of studies are focused on. Finding minimal research regarding Aboriginality and Ageing from the Aboriginal perspective, it is clear that this is a topic that needs to be further examined. This would allow service providers to be able to understand and assist in the ageing process of Aboriginal people in a culturally appropriate way.

Likewise, all the literature and materials found and examined were written by non-indigenous authors, and therefore lacks the significance and sincerity that it would have if written by Aboriginal members of the community. Many authors interviewed Aboriginal participants to ensure validity, yet primary sources would have been a desired source that would have guaranteed first-hand experience and knowledge about Aboriginality and Ageing.

Another issue that became noticeable in the examination of this literature was that there is no one single culture, and therefore it is impossible to determine what each Aboriginal culture considers in regards to their ageing. It was not possible to grasp a concise definition and perspective of Aboriginality and Ageing, as there are numerous Aboriginal culture’s within Australia, as well as numerous outside factors that have changed the Aboriginal culture.
5.0 Annotated Bibliography

5.1 Literature Available to the public


Key words: Culture, Kin, and Wellbeing

This study illustrates the main ideas of what factors are necessary for their children to grow and have a happy and full life. Several studies have presented evidence that individuals from such minorities achieve better life outcomes if they maintain a stronger affinity with their traditional culture.


Key words: statistics, life expectancy gap

Indicates statistics and factors regarding subjective wellbeing, and a comparison between these aspects for indigenous and non-indigenous Australians. Statistics illustrated that the perceived quality of life declines over the life cycle until the ages of 45-54, beyond which it seems to level off and appears to rise again after age 65.


Key Words: Health issues, Disability

This article discussed the 2006 census in regard to Aboriginal statistics. Numerous health issues were raised, as well as the need for certain support networks and cultural activities. They suggested ideas for service providers, and mentioned Aboriginal cultural beliefs about disability.

Key Words: social and emotional wellbeing, culture

This reading explores the idea of social and emotional wellbeing within the Aboriginal and Torres Strait Islander community. Health and wellbeing are complex concepts and there is no clear consensus across or within cultures as to how these constricts should be defined. Mental health and wellbeing is an important component but needs to be viewed as only one component of health that is inextricably linked to the social, emotional, physical, cultural and spiritual dimensions of wellbeing.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3945528/>

Key words: Ageing perceptions

Illustrates ageing and culture of Indigenous elders from Alaska. There was many applicable concepts regarding the definitions of elders and certain ageing aspects such as viewing ageing from a holistic perspective.


Provides an analysis, trends and determinants regarding subjective wellbeing.

Manning, M, Ambrey, C, Fleming, C. 2015. ‘Subjective wellbeing of the Aboriginal and Torres Strait Island people of Australia’

Key Words: Wellbeing, culture, identity
“Subjective wellbeing of the Aboriginal and Torres Strait Island people of Australia” explores the notion that wellbeing can be considered a subjective concept. While living conditions are considered poor, Indigenous Aboriginals consider themselves well off in aspects such as culture, community life, family and identity. These findings show results that statistically, life satisfaction is much higher than non-indigenous.


Ageing, experiences, culture

Definitions of successful ageing and illustrates the government policies regarding active ageing, affecting Aboriginal elders negatively. He interviewed many elders living in SA, and therefore delved into their live experiences. He notes differences between western culture and Aboriginal culture, especially during an ageing process. The Article finishes by illustrating appropriate services that would be beneficial for the aboriginal community.


Key Words: Aged care, grief

“Aboriginal grief and loss: a review of the literature” explains briefly that mainstream palliative services are generally not being accessed by Aboriginal people because of the lack of cultural awareness and culturally appropriate care. Also, The term malignant grief is used to describe the process of irresolvable, collective and cumulative grief over multiple generations that affects aboriginal individuals and communities, causing them to lose function.
5.2 Journal articles


Key words: Life expectancy, life experiences

These authors illustrate Aboriginal communities and their increasing life expectancy. They continue to speak about experiences with western colonisation, health and the respect of elders.


Key words: Aged care, ageing

This article illustrates elders within society. It depicts the notion that ‘old’ does not necessarily refer to a fixed age category or a single stage of life. Similarly, it explains that in indigenous society generally values reciprocity and looks after its older people. The article continues on to mention factors and statistics regarding Indigenous Australians and their access to age care services.


Key words: government, health needs

This article explains the emphasis placed on ageing by the government, and continues to illustrate statistics regarding ageing in Australia. It is also portrayed that Aboriginal people’s needs need to be acknowledged, and will therefore increase the overall wellbeing of indigenous people.

Key words: culture, animals

These authors convey essential beliefs that are prominent in Aboriginal culture such as spirit animals. The lack of understanding is portrayed by the western health professionals give to Aboriginal culture. They finalize by stating their findings regarding death.

**Vicary, D, Westerman, T. 2014, ‘That’s just the way he is’: some implications of aboriginal mental health beliefs’ Australian e-journal for the advancement of mental health**

Key words: mental health

This article was focused around mental health issues within the Aboriginal community, and possible reasons why these issues are so prevalent within Australia. Numerous social issues were considered that may have negative impacts on mental health such as racism, as well as a comparison between Western views on Mental illness to the Aboriginal views.


Key Words: wellbeing, age, indigenous, identity, family, community, lifestyle

“Ageing well from an urban indigenous Australian perspective” explores the main outcomes that are deemed important considerations when ageing. These can be summarized through; personal identity, family, community & health. Ageing well can be briefed as maintaining wellbeing and a quality of life throughout the ageing progression, especially as life expectancy increases. The generations of indigenous people are classified as ‘older’ are those that are over the age of 45, however, being known as an indigenous ‘elder’ refers to the cultural authority within the community.
5.3 Websites


Key Word: Aged Care, Dementia, Cultural Activity, KCIA

“Aboriginality and Ageing – from an Aboriginal perspective” explains the Kimberly Indigenous Cognitive Assessment (KICA). The KCIA has developed in response for the need of cognitive screening tools for the older Aboriginals living in rural and remote areas. This makes contributions to dementia knowledge, dementia care and aged services within the indigenous community & cultural activities within the community.


Key Words: disability, aged care, mental illness, statistics, ageing, indigenous

This article has helped the reader understand the overwhelming statistics in relation to indigenous versus non-indigenous communities. This paper describes the overwhelming statics surrounding the key differences in regards to average middle age, mental health, poor health conditions & poor living conditions. Statistics show that members of the indigenous community are far more likely to have lower middle ages and are more susceptible to mental health issues.


Key words: History, Family, Social and Emotional wellbeing

This article explains the history and nature of Aboriginal communities, accentuating on land, and family dynamics. It conveys social and emotional wellbeing, where the nine guiding principles for aboriginal people are illustrated.

Key Words: Ageing, housing, community

Research conducted by Moreton Consulting has shown concerning results in relation to indigenous living conditions. Due to low mortality rates, majority of those surveyed considered that one would begin to be considered old between the age of 40 – 50. Majority of the 30 participants agreed that housing has become a major issue within their community as issues such as public transport, drug and alcohol abuse & supporting grandchildren are present within the community.


Key words: History, Kin, Emotional wellbeing

This site was essential in understanding the history and relationships of Aboriginal people. It delves into the concept of health and wellbeing to older people, and illustrates Aboriginal spirituality in regards to their country.