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General Information

The Australian Community Psychologist is the Official Journal of the College of Community Psychologists of the Australian Psychological Society

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Current and past issues of ACP can be accessed through Australia’s web archive system PANDORA (http://pandora.nla.gov.au/tep/84823)

PANDORA is an initiative of the Australian National Library in conjunction with nine other collections. The name is an acronym derived from its mission: Preserving and Accessing Networked Documentary Resources of Australia.
I am very pleased to present the second issue of The Australian Community Psychologist for 2012. Where else can you find articles on topics as interesting and diverse as acculturation of migrant women, the role of morality in climate change, Aboriginal concepts of place and country, prejudice against asylum seekers, careers in psychology for Indigenous people, experiences of adolescent boys whose fathers work on a fly-in/fly-out basis, spiritual activism, a call for community critical psychology, psychological practices relevant to child maltreatment survivors, and discrimination experiences of Muslim Australians!

This is the second issue to feature our new-look cover page. The cover is not the only change – I would like to formally welcome Dr Charlotte Brownlow and Dr Shiloh Groot to the journal’s editorial team and both are making significant contributions. The journal remains listed in the official list of journals prepared for the Excellence in Research for Australia (ERA), an Australian Government initiative to assess research quality. A recent change is the abolition of rankings (i.e., A*, A, B, and C), which are no longer being used to assess journal quality.

This general issue follows our first issue for the year, a special issue called “Ignored no longer: Indigenous researchers on Indigenous psychologies” guest-edited by Mohi Rua, Shiloh Groot, Bridgette Masters-Awatere, Pat Dudgeon, and Darren Garvey. This issue is a counterpoint to dominant psychologies and provided a space for Indigenous psychologists to reflect upon and promote Indigenous knowledges, perspectives, and worldviews from Australia, New Zealand/Aotearoa, Canada, Samoa, and Africa. It was a pleasure to assist the development of the issue from an idea into reality.

This issue comprises seven research reports, one article, two practice issues, and five book reviews. First, Sharon L. Dawson and Graham A. Tyson investigated whether morality or political ideology determine the response to climate change and showed that morality has a direct relationship with attitudes towards climate change as well as an indirect relationship mediated by political orientation. These findings are important, given that climate change is a critically complex issue that can neither be discussed nor progressed without a solid understanding of responses to it.

Next, Brian J. Bishop, David A. Vicary, Joelle R. Mitchell, and Glen Pearson describe the importance of country for Aboriginal people in Western Australia. The study has implications in the importance of non-Aboriginal practitioners acknowledging different worldviews concerning country and its importance in Aboriginal social and emotional wellbeing.

The subsequent three articles describe research about migrants and refugees. Amiirah Salleh-Hoddin and Anne Pedersen investigated the experiences of discrimination by Muslim Australians. Their analysis revealed the complexities of integration in that, while being visibly ‘Middle Eastern’ and ‘Muslim’ was associated with more reports of discrimination, positive contact with non-Muslim Australians was a protective factor for integration.

Jennifer Loh and Jessica Klug explored acculturation of women migrants and demonstrated that resilience plays an important part in acculturation experiences. Aries Suhnan, Anne Pedersen, and Lisa Hartley investigated the perception of threat and acceptance of false beliefs on prejudice towards asylum seekers and people smugglers. This is important, given the increasing hostility with which asylum seekers are afforded.

Mary M. MacBeth, Elizabeth Kaczmarek, and Anne M. Sibbel provide an important addition to our understandings of fly-in/fly-out employment. By focussing on the...
relationships between fly-in/fly-out fathers and their adolescent sons, they trouble the assumption that fly-in/fly-out employment always has negative consequences for families. Katherine E. Coder describes three case studies in her constructionist cross-case analysis of mature spiritual activism. She describes a connection between individual spiritual development and social change practices and argues that social engagement and change may be underpinned by spirituality, an under-explored phenomenon in community psychology.

These research reports are followed by an article by Joaquim Coimbra, Paul Duckett, David Fryer, Ibrahim Makkawi, Isabel Menezes, Mohamed Seedat, and Carl Walker. These authors describe the misuses of the word ‘community’ in and outside of community psychology and argue that a commitment to community critical psychology, rather than mainstream community psychology, will overcome social injustices and effect change.

In the practice issues section, Jacinta Wainwright, Heather Gridley, and Emma Sampson highlight, through the experiences of three Aboriginal women, the many inter-related barriers Aboriginal and Torres Strait Islander people face in becoming psychologists. The disproportionate number of Aboriginal and Torres Strait Islander psychologists in this country requires urgent attention and Wainwright and colleagues provide insight into promoting cultural safety in psychology. Adeline Lee, Stuart Lee, Jan Coles, and Jayashri Kulkarni describe psychologists’ current practice, beliefs and attitudes towards supporting women survivors of childhood maltreatment and demonstrate a need for professional development in this complex, yet often overlooked, area.

Five books are reviewed in this issue. First, Catherine D’Arcy reviews Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice edited by Nola Purdie, Pat Dudgeon and Roz Walker. Julie Ann Pooley reviews Tom Wolff’s The Power of Collaborative Solutions: Six Principles and Effective Tools for Building Healthy Communities. Both books provide strategies for working with communities to achieve positive outcomes. These are followed by my own reviews of Melinda Tankard Reist and Abigail Bray’s Big Porn Inc. and David Healy’s Pharmageddon. Both of these are critiques of powerful international industries – pharmaceutical and pornographic – and show how these industries have created markets and colonised our understandings of what it healthy. Finally, Lyn O’Grady reviews Andee Jones’s Barking Mad: Too Much Therapy is Never Enough, which illustrates the experiences and tensions of being both a mental health ‘consumer’ and ‘provider’.

Finally, I would like to acknowledge all the practitioners and academics who review manuscripts submitted to ACP. The journal would not exist without these volunteers who graciously provide their time and expertise to assist with the journal’s production.

Note
1 I use the term here broadly rather than specifically in reference to Australian Indigenous people and peoples, hence the use of small ‘i’ indigenous.

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Will Morality or Political Ideology Determine Attitudes to Climate Change?

Sharon L. Dawson
Graham A. Tyson
Charles Sturt University

Climate change is a major moral and political challenge facing Australia. Public attitudes to the issue influence public policy in respect of responding to climate change. Using Moral Foundations theory, this study investigated the relationship between attitudes to climate change, individuals’ moral intuitions and political affinity, using a sample of 487 Australian adults between the ages of 18 and 86 years. Patterns of moral intuitions scores which are higher for harm and fairness and lower for in-group, authority or purity, correlated with liberalism and self-reported left-wing political orientation, and predicted a preference for a strong response to climate change irrespective of self-interest. Patterns of moral intuitions scores, which focus more equally on all five foundations, correlated with conservatism and self-reported right-wing political orientation, and predicted a preference for a reduced response. Specifically, intuitions concerned with harm and fairness were predictive of preference for stronger responses, whereas those concerned with loyalty to in-group were the opposite. Overall, moral intuitions predicted attitudes to response to climate change, but the relationship was partially mediated by political affinity. The study is further evidence of the relevance of Moral Foundations Theory to moral issues, particularly those requiring a political response.

Climate change is currently prominent in public discourse; involving environmentalists, scientists, economists, industry bodies, international agencies and governments across the globe. Much of this discourse is concerned with determining the response world communities will make to climate change and establishing timeframes for action. The recent Copenhagen Summit is an example of the ongoing meetings leading this process. Irrespective of the scientific and economic policy aspects of the issue, responding to climate change poses a fundamentally moral problem in three parts. The problem involves aspects of the Prisoners’ Dilemma because only cooperation will provide the optimal solution in terms of costs and benefits; the Tragedy of the Commons because continued pursuit of self-interest may destroy the resources underlying our prosperity and our lifestyles; and a Free-rider problem because of the potential benefits of opportunistic behaviour to individual communities (The Economist, 2009). As a result, negotiations between nations are complicated because the optimal response to climate change will require the subordination of short-term self-interest so that long-term shared benefits are the result, and such responses are voluntary.

These dilemmas exist at the individual level also, where the present generation can choose from a spectrum of potential responses ranging from no response being necessary to radical changes to almost every aspect of human activity, with limited consequences for themselves. The issue of subordinating self-interest is exacerbated by the intergenerational aspect of climate change which allows present generations to make no changes that would affect their lifestyles – to the possible detriment of future generations. Alternatively, present generations can make sacrifices that they will not benefit from but which are likely to benefit not only their own future generations but also those of other communities who may not make similar changes. This represents a temptation to do nothing or do no more than others. Beyond this basic issue
The temptation to make a relatively weak response to climate change which may be to the economic detriment of individuals or nations that make greater sacrifices. This is a negative externality, which is similar to free-riding but a more malign form of self-interest.

In the context of choice between gratification or subordination of self-interest where immediate personal consequences of self-gratification are not significant, the response to climate change is readily identifiable as a moral problem. The psychology of moral decision-making is therefore relevant to understanding individuals' attitudes to this issue. Like individuals, each nation's participation is voluntary and subject to considerations of national self-interest. A global response to climate change requires collective decision-making by governments to intervene in their own national economic systems, so that a cohesive and optimal global response is effected. National responses can only occur through political processes in each country, so theoretical frameworks of moral psychology will be most useful if they are universal in their applicability and can demonstrate a clear connection to political ideology and behaviour. This research aims to use Moral Foundations Theory to investigate attitudes to climate change response. As most of the research that has led to the development of the theory has been North American and European, a secondary aim is to use it in an Australian context.

Moral Foundations Theory

Moral Foundations Theory proposes five foundations which manifest as automatic emotional and cognitive reactions (called intuitions) to environmental stimuli (Haidt & Joseph, 2004). The intuitions drive moral decision-making through a psychological preparedness to notice and to approve or disapprove of particular aspects of situations or issues (Haidt & Graham, 2007), prior to any conscious reasoning process (Haidt, 2001). There is evidence for the existence of unconscious processes generally (Nisbett & Wilson, 1977); and specific to moral decision-making, North Americans and Brazilians have found it difficult to justify in any rational way their reactions of disapproval to stories of norm violations that clearly do not create harm (Haidt, Koller, & Dias, 1993). This initial approval or disapproval can be interpreted as an unconscious driver of the attitudes that individual's take to situations and behaviours that they observe in the world. The intuitions extend beyond their initial evolutionary domains to other domains of modern social relevance (Haidt & Joseph, 2004) which makes them relevant to attitudes to climate change.

Moral Foundations Theory extends the scope of the moral domain beyond the traditional values of preventing harm (Gilligan, 1982) and promoting equality and fairness (Kohlberg, 1981). The Harm/Care moral foundation seems to reflect what Gilligan meant, as it is sensitivity to the suffering of others, resulting in compassion and empathy. Originally derived from the need to protect one’s children from danger, it has been extended to other people and to dangers other than physical dangers (Haidt & Joseph, 2004). The Fairness/Reciprocity foundation derives from the benefits of altruistic behaviour and the detriment caused by cheating behaviour to individuals and the group as a whole in group living arrangements. This is very similar to Kohlberg’s view of justice, and it results in gratitude for reciprocal altruism, and guilt if one is the perpetrator or anger toward the perpetrator of unfair treatment of others, (Trivers, 1971; Haidt & Joseph, 2004; Brosnan, 2006). These two types of intuitions suggest a positive attitude to the response to climate change, where self-interest may be subordinated to concern to prevent further harm to the planet and or to be fair to future generations.

The In-group/Loyalty foundation relates to the value to the individual of group membership such as protection and shared
resources, and manifests in trust and pride towards the in-group, anger towards traitors; and wariness and distrust towards the out-group (Haidt & Graham, 2007). Also derived from the conditions of group living, the Authority/Respect foundation relates to social hierarchy and respect and deference for those in higher positions and resentment of attempts to undermine existing hierarchies (Haidt & Joseph, 2004). Extended beyond privilege for dominant individuals in exchange for group protection (Haidt & Joseph, 2004), it is based on the prestige accruing to successful individuals because of the information goods they have (Henrich & Gil-White, 2001); and has been depersonalised to extend to legitimate authority including traditions and societal structures as well (Haidt & Graham, 2007).

The last of the five foundations is Purity/Sanctity which relates to bodily sanctity and disgust at violations of group norms. Based on the enforcement of hygienic practices to prevent the contraction and spread of disease and infection, it has been extended to include religious ritual and behavioural norms and taboos (Rozin, Haidt, & McCauley, 2000) and to devolve upon objects or traditions that are merely symbolic such as national flags (Haidt & Graham, 2007). These three intuitions suggest that attitudes to climate change may be negatively affected by the self-interest of groups that individuals perceive themselves to belong to, even to the extent of free-riding or to create a negative externality.

The evolutionary basis of all of the five foundations suggests that Moral Foundations Theory will be able to be applied across cultures. Evidence for its universal applicability is provided by anthropological studies that were used in its development. These studies indicated three core ethics (Autonomy, Community and Divinity) which map to the moral foundations (Schweder, Much, Mahapatra, & Park, 1997). This suggests that the theory is likely to be relevant to issues such as climate change which requires a global response.

In summary, Moral Foundations Theory acknowledges the role of self-interest, but proposes that people also care about how others are treated through intuitions about Harm/Care and Fairness/Reciprocity; and how people behave in the context of groups through intuitions about In-group/Loyalty, Authority/Respect and Purity/Sanctity (Haidt, 2007). This dichotomous grouping of intuitions between group and non-group related intuitions is central to understanding how different perspectives may affect attitudes to issues. The political processes of nations are the link between individuals’ attitudes and government actions and to climate change response in particular. Application of the model to political alignment, belief and voting behaviour has demonstrated some interesting linkages between political orientation and the relative weightings given by individuals to the five moral foundations (Haidt & Joseph, 2008; Graham, Haidt, & Nosek, 2009; Haidt, Graham, & Joseph, 2009).

**Political Orientations and Morals**

Studies of individuals ranging across the political spectrum from left to right show a slight reduction in the relative focus on Harm/Care and Fairness/Reciprocity; and a marked increase in the relative importance of considerations of In-group/Loyalty, Authority/Respect and Purity/Sanctity as political orientation of the individual moves across the left-right spectrum towards the right (Graham et al., 2009). Thus, self-reported liberals focus mainly on the foundations of Harm/Care and Fairness/Reciprocity, whereas self-reported conservatives tend to focus more evenly across all five foundations (Haidt & Joseph, 2008). This suggests that kindness and aggression (derived from Harm/Care) and fairness, honesty, trustworthiness, justice, cheating, and dishonesty (Fairness/Reciprocity), are the behaviours most salient to liberals; whereas conservatives place equal importance on all of these but also on self-sacrifice, patriotism, loyalty and cowardice.
(In-group/Loyalty), leadership, obedience to authority, and disrespect (Authority/Respect) and temperance, chastity, piety, cleanliness and lust (Purity/Sanctity), (Haidt & Graham, 2007; Haidt & Joseph, 2008).

The differences between the relative weightings placed on the foundations by left-wing and right-wing individuals have been found to hold in studies of abstract assessments of moral relevance in making moral choices (Haidt & Joseph, 2008), and in studies looking at ratings of moral judgement statements (Graham et al., 2009). Further, they have predicted responses to moral judgement statements more strongly than responses to questions of moral relevance (Graham et al., 2009). Voting behaviour of individuals and their self-reported political ideology is highly correlated (Jost, 2006), so the relation between individuals’ patterns of moral decision-making which correlate to their political orientation suggests that Moral Foundations Theory is likely to provide some considerable insight into political behaviour including voting on issues.

Moral decision-making is more complex than the simple mapping of relationships between moral foundations and political orientation outlined above, because each foundation may elicit responses contradictory to those of the other foundations, or the weighting given to each of the foundations may alter in respect of a particular issue. The pro-life and pro-capital punishment positions typically held by American (United States) conservatives (Cohen, 2003) may be an example of this flexibility in the manifestation of moral foundations. Such views may indicate that Harm/Care is more salient in the abortion debate than in the capital punishment debate. It may be though that there is a difference in relative importance of the foundations at the issue level, where for conservatives Harm/Care may be in the ascendant for abortion, but for capital punishment Authority/Respect is more relevant.

An alternative explanation of apparently contradictory moral stances is that individuals may also be guided by their political orientation and give preference to their party’s position irrespective of any contradictions therein. This explanation is supported by the finding that the objective quality of policy and individuals’ self-reported ideological beliefs are both subordinated to the views that the individual perceives to be the stated position of their party and that this effect persists even when the perceived party position is completely at odds with the real party position (Cohen, 2003). Political ideology can distort as well as organise information through its biasing impact on attention, information processing and the encoding and recall of memory (Jost, 2006), and this biasing effect may also explain how political orientation predicts attitudes.

The effect of group dynamics and the biasing effect of ideology on attitudes to moral issues are likely to be stronger when individuals lack factual information particularly for complex issues such as climate change response. Brechin (2003) found that despite similarly low levels of understanding of the main causes of climate change (less than 20% of both Europeans and North Americans), the proportion of European citizens disapproving the United States government’s withdrawal from the Kyoto Protocol was almost double that of United States citizens who disapproved. Brechin (2003) interpreted this to mean that in the absence of information or understanding, individuals are likely to adopt the stance of the political party they support. Notably, the proportion of Australians in that study who understood the main causes of climate change was also less than 20%, so the relatively low levels of understanding in the community may cause the attitudes of individuals in this research sample to align with the political party that they support as well.

Given the relationships between
political orientation and moral foundations discussed above, individuals’ attitudes to particular moral issues such as climate change may be influenced by either political orientation or by moral foundations, or by a combination of both through mediation. Van Leeuwen and Park (2009) attempted to draw together the findings in respect of trait based needs to manage uncertainty and threat (Jost, Glaser, Kruglanski, & Sulloway, 2003), and moral foundations by postulating a conservative pattern of higher perceptions of social dangers, leading to a greater emphasis on those moral foundations that offer most protection from threat which are In-group/Loyalty, Authority/Respect and Purity/Sanctity because of their emphasis on retaining the status quo and opposing change. They found that the pattern of moral intuitions partially mediated the relationship between perceived threat and political orientation.

Whilst the work of Van Leeuwen and Park (2009) greatly assists us to understand an aspect of the interrelationship between political ideology and moral decision-making, it does not provide guidance as to the relationship between political orientation, moral intuitions and specific moral issues that require a political response. One recent study which has attempted to do so looked at which variables best predict individuals’ opinions and policy judgements on moral issues such as abortion, stem-cell research, and gun control (Koleva, Graham, Haidt, Iyer, & Ditto, in press). Opinions were general statements of approval of behaviours, and judgements were support for laws and government policies that might be implemented. They found that for opinions on issues, moral foundations was superior to political ideology for 9 of the 13 issues, and was very close for 2 of the remaining 4. For policy judgements however, they found that political ideology was the better predictor for 7 out of the 11 policy issues.

A limitation of the Koleva et al. (in press) study is that not all issues were common to both the opinion and the judgements studies. For the two issues that were common and yielded statistically significant responses, both opinions and judgements were best predicted by the same variable, but that key variable differed between the issues. This tentatively suggests that specific issues may elicit particular and tailored response patterns. Unfortunately, global warming was only considered in the judgement study, so the question of whether there are response patterns specific to particular issues is yet to be fully addressed. The study did find that the best predictor of judgements on the issue of global warming was ideology, and of the moral foundations the most significant predictors of response selection were the individuals' scores for Purity/Sanctity and for Harm/Care. This was interpreted as reflecting that nature is held sacred, and intuitions about harm extend to the planet as well as future generations (Koleva et al. in press).

Whilst Van Leeuwen and Park (2009) found correlations between moral intuitions, political affinity and perceived threat they did not look at specific issues such as climate change. Another study which did look at the relationship between attitudes to climate change policies and perceived threat of climate change measured perceived threat in terms of economic, health and environmental outcomes (Zahran, Body, Grover, & Vedlitz, 2006). They found that perceived threat of climate change was strongly correlated with support for political policies designed to counter climate change, and objective risk had little predictive value. Perceived risk may also influence moral decisions in favour of self-interest however because of the finding that individuals perceive much greater risk for other people than specifically for themselves (Bord, Fisher, & O’Connor, 1998).

In the light of the Bord et al. (1998) study, Kellstedt, Zahran, and Vedlitz (2008) distinguished between risk to individuals and to the general public in their study of the relationship between political ideology and
perception of climate change threat. Kellstedt et al. (2008) found reliability was high enough to combine the scores on perceived public threat and perceived personal threat into one measure however. They also found a predictive link between political ideology and perception of climate change threat. The Kellstedt et al. (2008) study contributed a further nuance to the research in this area by including political partisanship which had almost double the predictive value of political orientation. Their study is limited however because opinions were included in the study but policy judgements were not, which is the opposite situation of the Koleva et al. (in press) study discussed above. The findings of Kellstedt et al. (2008) in respect of perceived threat and political ideology are worthy of further attention and replication.

The gaps in the research on response to climate change and moral decision-making outlined above are the focus of this study. Inclusion of both opinions on climate change and judgements on policy responses as well as perceptions of the threat may build upon the findings of Koleva et al. (in press), Kellstedt et al. (2008) and the Zahran et al. (2006) study. Additionally, perceptions of threat information may shed light on the possibility of individuals' preference for policies in their self-interest because they may perceive the risks as greater for others which can be implied from the Bord et al. (1998) study.

Despite the gaps in the literature to date, it was hypothesised that individuals' moral foundations scores would predict all of the dependent variables which represent attitude to climate change, similar to the findings of Koleva et al. (in press). Specifically, it was expected that relatively high scores for Harm/Care and Fairness/Reciprocity would predict individuals' preferences for a stronger response to climate change; and that relatively high scores for In-group/Loyalty, Authority/Respect and Purity/Sanctity would predict individuals' preferences for a weaker response to climate change. Political orientation was also expected to predict individuals’ attitudes to climate change, replicating the findings of Kellstedt et al. (2008); such that affinity with relatively left-wing politics would predict individuals' preferences for a stronger response to climate change and relatively right-wing political affinity would predict individuals' preferences for a weaker response to climate change.

Overall however, it was anticipated that whilst individuals’ moral foundations scores would predict attitudes to climate change, political ideology was expected to mediate those predictive relationships. The lesser weightings placed by more politically liberal individuals on intuitions concerning In-group/Loyalty, Authority/Respect and Purity/Sanctity compared to politically conservative individuals which have been found in other studies (Haidt & Joseph, 2008, Graham et al. 2009; Haidt et al., 2009) were expected to occur in this Australian study. That linkage between the political orientation and the pattern of relevance of moral intuitions is the underlying reason why a mediated relationship between moral foundations and opinions and judgements about climate change was expected.

**Method**

**Participants**

Participants were 211 males and 276 females aged between 18 and 86 (M = 43.74, SD = 12.96) with access to the internet, living in Australia, who chose to complete an online survey. Participants were drawn from all states and territories but predominantly from NSW (82.19%), with 75.91% resident in capital cities, and 24.09% from provincial centres and rural areas.

**Materials**

Opinions of perceived threat of climate change. Kellstedt et al.’s (2008) questions about the perceived threat of climate change were used with minor alterations to refer to Australia. The first three questions addressed perception of personal threat and was preceded by the statement “There are a range of attitudes to Climate Change and we would like...”
your views. Please indicate how strongly you agree or disagree with the following statements”. Responses were captured on a four point Likert scale (from Strongly Agree = 1 to Strongly Disagree = 4) for the following three statements “Global warming and climate change will have a noticeably negative impact on: my health in the next 25 years; my economic and financial situation in the next 25 years; and the environment in which my family and I live”.

The next three questions addressed perception of public threat and they were preceded by the statement “On a scale from 0 to 7 (where 0 = No risk at all, and 7 = Extreme risk) please indicate the degree of risk you think exists for the following statements”, which were “In your opinion, what is the risk of global warming and climate change exerting a significant impact on; public health in Australia?; economic development in Australia?; and the environment in Australia?”

Respondent scores for opinions of personal threat were reversed to reflect the direction of scores for opinions of public threat; and mean scores for public threat were halved to allow comparison with scores for opinions of personal threat. Reliability scores for the items were 0.88 so the two scores were amalgamated and averaged to create one overall score for the variable Opinions of Threat, which was the same approach followed by Kellstedt et al. (2008).

Opinions about the moral aspect of climate change. The question used the same format and scale as used by Koleva et al. (in press) for policy judgements, and to explicitly involve the consequences of the moral stance taken so that self-interest was considered by respondents. This item was preceded by the statement “Which one of the following statements comes closest to your view”, and responses were captured by selection of one of the following statements (coded in the following order as 1 to 4):

“Climate change should not be addressed by our generation”;
“Climate change should be addressed by our generation as long as there are no negative consequences for our generation”;
“Climate change should be addressed by our generation even if there are some negative consequences for our generation”;
“Climate change should be addressed by our generation even if there are significant negative consequences for our generation”.

Judgments about the response to climate change. The question and scale of Koleva et al, (in press) was used, but altered to include the expression “and climate change” to better reflect the terminology that is commonly used in public discourse in Australia. No other changes were made except to reflect that one issue was being tested rather than a group of issues. This item was preceded by the statement “The following statements reflect possible policies in response to climate change. Individual opinions on these topics vary widely and there are no ‘right’ or ‘wrong’ answers. Which statement about global warming and climate change comes closest to your view?” Responses were captured by selection of one of the following statements (coded in the following order as 1 to 4):

“The government should increase restrictions on emissions from cars and industrial facilities such as power plants and factories in an attempt to reduce the effects of global warming”;
“The restrictions currently in place are sufficient to reduce the effects of global warming”;
“The government should decrease current restrictions because global warming is a theory that has not yet been proven”;
“Don’t know”.

Judgement scores were reversed to reflect the same direction as moral opinions and opinions of threat; and all “Don’t know” responses to this item were excluded from the
Morality and political ideology

Political orientation. A self-report rather than an implicit measure of political orientation was used as it has been shown to provide valid responses consistent with implicit measures (Graham et al., 2009). Political Orientation was captured on a seven-point rating scale from “Very Left” to “Very Right”. Whilst other studies have used the labels “liberal” and “conservative”, the labels “left” and “right” have found to be sufficiently clear in countries other than the United States (Van Leeuwen & Park, 2009). This latter type of labelling was necessary in Australia because one of the conservative coalition parties is called the Liberal Party which may have caused confusion for the participants and produced invalid data.

To ensure that the labels were correctly understood, the following statement of definitions drawn from the ideology literature (Jost, Nosek, & Gosling, 2008) was provided:

In the context of politics “Left” means political ideas and beliefs that tend towards progressive social change and equality; whereas “Right” refers to political ideas and beliefs that tend to be conservative and to maintain the status quo and tradition. In Australia, left-wing ideas are often but not exclusively supported by the Greens and the Labor Party; and right-wing ideas are often but not exclusively supported by the Liberal Party and the National Party. We are interested in where you see yourself in the political spectrum.

Moral foundations. These were measured by the Moral Foundations Questionnaire (Graham, Nosek, Haidt, Iyer, Koleva & Ditto, in press) which is a self-report measure, consisting of 2 sections of 16 items each, where 3 items per section measure each of the five moral foundations of Harm/Care, Fairness/Reciprocity, In-group/Loyalty, Authority/Respect and Purity/Sanctity. Participants were asked to rate the sixteen items in the first section according to how relevant they are to them when making moral judgements, and responses are captured on a six-point scale from “Not at all relevant” = 0 to “Extremely relevant” = 5. An example statement for Authority is “Whether or not an action caused chaos or disorder”. Participants are then asked to rate the sixteen items in the second section according to their agreement with the statements made, and responses are captured on a six-point Likert scale from "Strongly disagree" = 0 to "Strongly agree" = 5. An example statement for Authority is “Respect for authority is something all children need to learn”.

In the moral relevance subscale there is a question about “maths” (altered from “math” to reflect the Australian short form) which is intended to flag those participants not using the bottom end of the scale; and in the moral judgements subscale there is a question about “good” which is intended to flag those participants not using the top end of the scale. The results from the moral relevance subscale and the moral judgements subscale were amalgamated for each of the five foundations as suggested by the developers of the questionnaire (Graham et al., in press).

In order to assess the impact of the specific pattern of scores that are relevant to political orientation and to allow mediation to be tested, an additional variable Progressivism was created as suggested by Van Leeuwen and Park (2009). This score is derived by adding scores for Harm/Care and Fairness/Reciprocity together, then subtracting the scores for In-group/Loyalty, Authority/Respect and Purity/Sanctity. Lower Progressivism scores indicate higher scores on the last three foundations suggesting a more conservative and right-wing political orientation; and higher Progressivism scores indicate lower scores on the last three foundations suggesting a more liberal and left-wing political orientation.

The Moral Foundations Questionnaire
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has been found to have high test-retest validity and high external validity against other scales that measure each of the five constructs that underlie the five foundations (Graham et al., in press). Test-retest reliability for the five foundations ranges from 0.68 to 0.82 over an average 37.4 day period (range 28 to 45 days) (Graham et al., in press).

Procedure

The web-based survey was hosted on SurveyMonkey™ and it was designed to ensure that all items were completed and responses were within the possible range of scores for each variable. Internet snowballing was used to obtain the participants. An email was sent to participants known to the researcher which included the link to the survey, with a request that respondents also forward the email to individuals known to them. Ethics approval was obtained from the Ethics Committee of the School of Psychology at Charles Sturt University prior to the dispatch of emails.

Results

Preliminary analysis

A total of 496 people responded to the questionnaire, of which 54 participants failed the two check questions of the Moral Foundations Questionnaire. Their responses were compared to the remainder of the sample and no significant differences were found other than for the responses on the two check questions. Thus instead of automatically dropping these respondents as suggested by Graham et al. (in press), a visual examination of their responses was conducted. Nine participants who demonstrated a uniform pattern of responding suggesting a lack of thought were dropped from the total sample, reducing the final sample size to 487.

Scores for Moral Opinions and Moral Judgements were correlated with each other (r = 0.56, n = 450, p < 0.001) and also with Opinions of Threat (Moral Opinions r = 0.58, n = 487, p < 0.001 and Moral Judgements r = 0.60, n = 450, p < 0.001). Given the high degree of relationship, we decided to create a single dependent variable labelled Attitude by amalgamating those three scales. Attitude was very negatively skewed indicating a preference for a relatively strong response to climate change, but transformation via a reflect and logarithm procedure (Tabachnick & Fidell, 2007) was successful in normalising the data. A further transformation was performed by multiplying the scores by -1 so that the transformed variable scores reflected the direction of the original scores. For the resulting variable (transformed Attitude), low scores reflect a preference for a reduced response to climate change whereas higher scores reflect a preference for a stronger response.

Descriptive statistics and reliability scores for all variables other than Partisanship are shown in Table 1. Reliability scores for the moral foundations variables differed little from those found by Graham et al. (in press) when developing the Moral Foundations Questionnaire. Whilst the reliability scores are lower than 0.75 for all but Purity/Sanctity, these were considered adequate by Graham et al. (in press) because only six items are used for each foundation, and the same approach has been taken in this study.

An initial analysis was conducted to see whether gender and age were related to any variables of interest and an Independent Samples t-test indicated that women in this sample showed greater concern than males for Harm/Care and Fairness/Reciprocity, were more progressive and politically orientated more to the left than men. Effect sizes (manually calculated eta squared using \( \eta^2/(\eta^2-N-2) \), Pallant, 2007) were small except for Harm/Care which was moderate. Consequently, gender was controlled in all further analysis in order to prevent confounding. Age was also found to correlate with a number of the variables. However, age and gender were related, and partial correlations showed that once gender was
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controlled for there was no relation between age and any of the variables of interest.

**Hypothesis Testing**

The pattern of moral intuitions scores showed clear differences in the relative importance of the five moral foundations as individual political orientation shifted across the spectrum from left to right as can be seen in Figure 1. This finding is very similar to that of other studies (Haidt & Joseph, 2008, Graham et al., 2009, and Haidt et al., 2009) in that individuals who had a more right-wing political orientation focussed more on In-group/Loyalty, Authority/Respect and Purity/Sanctity than did individuals with a more left-wing political orientation.

Partial correlations controlling for gender were calculated to investigate the relationships between transformed Attitude scores, and the five moral foundations scores, Progressivism scores, and Political Orientation scores, and these are shown in Table 1. Positive partial correlations with transformed Attitude scores were found for Harm/Care, Fairness/Reciprocity, and Progressivism indicating a preference for a stronger response to climate change.

Conversely, negative partial correlations were found with In-group/Loyalty, Authority/Respect, and Purity/Sanctity for transformed Attitude suggesting a preference for a less strong response to climate change for those who place importance on these three moral foundations. Negative partial correlations were found for Political Orientation and transformed Attitude scores indicating that a left-wing political orientation is associated with a preference for a stronger response to climate change, whereas a right-wing political orientation is associated with a less strong response to climate change.

To further explore the relationships indicated by the partial correlations and to specifically test the ability of moral foundation and Political Orientation scores to predict transformed Attitude scores, two standard multiple regression analyses were conducted. The results of these analyses including effect sizes (manually calculated as $f^2 = R^2/(1 - R^2)$, Cohen, 1988) are shown in Table 2. Separate models were required for the five individual moral foundations scores and for the Progressivism scores because the latter is derived from the five individual moral foundations scores, and hence there would have been a problem with multicollinearity. Model A found that the five moral foundations scores and Political Orientation scores accounted for 26.6% of the total variance in transformed attitude.

![Figure 1: Relationship between moral foundations and political orientation](image-url)
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Morality and political ideology scores (F (7,442) = 22.92, p < 0.001).
Squared partial coefficients for the statistically significant predictors indicated that the largest unique contribution made to the explained variance in transformed Attitude scores was Political Orientation (11.02%), but that Harm/Care, Fairness/Reciprocity and In-group/Loyalty scores also made unique contributions totalling 4.79%.

Model B investigated the relationship between the combined moral foundation variable Progressivism and Political Orientation scores on the transformed Attitude variable. This second model accounted for 24.2% of the variance (F (3,446) = 48.90, p < 0.001). In this case Political Orientation again accounted for the largest amount of variance, and the Progressivism score accounted for a similar amount of variance as the individual moral foundations scores included in Model A.

The results for the two regression analyses suggest that Political Orientation and both three of the individual foundations (Harm/Care, Fairness/Reciprocity and In-group/Loyalty) and a combination of the foundations (Progressivism) uniquely contribute to the variance in transformed Attitude scores.

The Progressivism variable was used as it includes all of the moral foundations scores, and most importantly it captures the pattern of relative weightings placed on the five moral foundations where relatively low scores on the In-group/Loyalty, Authority/Respect and Purity/Sanctity foundations correlate to left-wing political orientation, and relatively high scores on these foundations correlate to a right-wing political orientation. In order to test whether the relationship between Progressivism scores and transformed Attitude to climate change was mediated by Political Orientation, the Baron and Kenny (1986) method was followed. First, three separate standard linear regressions controlling for gender were performed to calculate direct effects between each of the variables. The results of these regression analyses are illustrated in Figure 2. Increasing levels of Progressivism predicted a preference for a stronger response to climate change. Progressivism was inversely related to Political Orientation, such that increasing levels of Progressivism predicted a more liberal and left-wing political orientation. Political Orientation was inversely related to transformed Attitude, such that increasing conservative and right-wing political orientation predicted a preference for a lesser response to climate change.

### Table 1

| Partial Correlations Controlling for Gender and Descriptive Statistics |
|---------------------------|-----------------|-----------------|-----------------|-----------------|-----------------|
|                           | Transformed Attitude | Political Orientation | Harm/Care | Fairness/Reciprocity | In-group Loyalty |
| Political Orientation     | -0.43**           | -0.16**           | -           | 0.22**           | -               |
| Harm/Care                | 0.22**           | -0.18**           | 0.56**      | 0.27**           | -               |
| Fairness/Reciprocity     | 0.24**           | -0.18**           | -           | 0.21**           | -               |
| In-group/Loyalty         | -0.18**           | 0.26**           | 0.27**      | 0.21**           | -               |
| Authority/Respect        | -0.21**           | 0.36**           | 0.13*       | 0.13*            | 0.67**          |
| Purity/Sanctity          | -0.15**           | 0.28**           | 0.29**      | 0.22**           | 0.59**          |
| Progressivism            | 0.37**           | -0.45**           | 0.35**      | 0.39**           | -0.63**         |
|                           |                   |                   | 0.44**      | 0.39**           | -0.73**         |
| Mean                     | -0.56             | 3.52              | 3.56        | 3.51             | 2.35            |
| SD                       | 0.26              | 1.49              | 0.80        | 0.68             | 0.92            |
| Cronbach’s α             | 0.73              | 0.64              | 0.64        | 0.74             | 0.74            |
| Progressivism            | Mean = 1.14, SD = 0.93 |

Note. ** p ≤ 0.001   * p ≤ 0.01
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The final step of the mediational analysis was to perform a hierarchical multiple regression controlling for gender and introducing first Progressivism and then Political Orientation to see whether the strength of the relationship between Progressivism scores and transformed Attitude scores would be reduced by the introduction into the model of Political orientation scores. As shown in Figure 2, the regression weight dropped from 0.38 to 0.23, and the coefficient was significant (t = 4.81, p < 0.001) indicating that there was still a direct effect. The decrease in the regression weight however suggests that there was partial mediation. In order to test for this, the Sobel test (Howell, 2002) was used. A significant indirect relationship between Progressivism and transformed Attitude was found (t = 7.50, p < 0.001), indicating that the relationship between Progressivism and transformed Attitude was partially mediated by political orientation.

Discussion

The main aim of this study was to see whether attitudes to climate change would be better predicted by moral intuitions than by political orientation, and whether political orientation would mediate the relationship between moral intuitions and attitudes to climate change. The focus was confined to the moral and political aspects of individuals’ views because, whilst it is acknowledged that economic and scientific information is also relevant to proposed responses to climate change, the selected response will be determined through political processes which must reflect majority public opinion. The study extended earlier work on Moral Foundations Theory by Koleva et al. (in press) and Van Leeuwen and Park (2009) by applying the model specifically to climate change, and extended the work of Zahran et al. (2006) and Kellstedt et al. (2008) by including a broader set of variables.

The results of the study show that attitudes to climate change reflected both individuals’ moral intuitions and their self-reported political orientation. Individuals’ moral considerations also appeared to be of general relevance to their political orientation. Of the five moral foundations, regression analysis showed that the significant predictors of attitude towards climate change were Harm/Care, Fairness/Reciprocity, and In-group/Loyalty. Whilst these intuitions were each found to uniquely contribute to the explained variance in attitudes to climate change, together their contribution was approximately half that of political orientation. Together the five

<table>
<thead>
<tr>
<th>Variable</th>
<th>Beta</th>
<th>t</th>
<th>Sig.</th>
<th>Partial Correlation</th>
<th>Unique Contribution to Variance %</th>
<th>Model B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Political</td>
<td>-0.344</td>
<td>-7.388</td>
<td>0.000</td>
<td>-0.332</td>
<td>11.02%</td>
<td>-0.337</td>
</tr>
<tr>
<td>HarmCare</td>
<td>0.165</td>
<td>3.023</td>
<td>0.003</td>
<td>0.142</td>
<td>2.02%</td>
<td>7.213</td>
</tr>
<tr>
<td>Fairness/Reciprocity</td>
<td>0.127</td>
<td>2.460</td>
<td>0.014</td>
<td>0.116</td>
<td>1.35%</td>
<td>-0.323</td>
</tr>
<tr>
<td>In-group/Loyalty</td>
<td>-0.146</td>
<td>-2.511</td>
<td>0.012</td>
<td>-0.119</td>
<td>1.42%</td>
<td>-0.323</td>
</tr>
<tr>
<td>Authority/Respect</td>
<td>0.002</td>
<td>0.028</td>
<td>0.977</td>
<td>0.001</td>
<td>0.00%</td>
<td>4.808</td>
</tr>
<tr>
<td>Purity/Sanctity</td>
<td>-0.013</td>
<td>-0.711</td>
<td>0.459</td>
<td>-0.025</td>
<td>0.12%</td>
<td>0.222</td>
</tr>
<tr>
<td>Progressivism</td>
<td>-0.014</td>
<td>-0.741</td>
<td>0.459</td>
<td>-0.025</td>
<td>0.12%</td>
<td>-0.323</td>
</tr>
</tbody>
</table>

\( \hat{r} \) = 0.266  \( \hat{r} \) = 0.242
\( F \) = 22.915  \( F \) = 48.904
\( f \) = 0.36  \( f \) = 0.32

Table 2

Predictors of Attitudes
Individual moral foundations and political orientation accounted for a quarter of the variance in attitude, which indicates that both moral foundations and political orientation appear to be important predictors of attitudes to climate change.

Returning to the specific foundations which yielded significant results, the finding that moral intuitions about Harm/Care predicted a preference for a greater response to climate change is consistent with the findings of Koleva et al. (in press). This result is unsurprising because the issue concerns the welfare of the planet and the impact on future generations and thus considerations relating to Harm/Care are likely to be directly relevant. Similarly, the positive relationship between Fairness/Reciprocity and attitudes to climate change may reflect a recognition of a duty to ensure future generations are not unfairly burdened with damage due to present actions.

Moral intuitions about In-group/Loyalty predicted the opposite attitude to climate change, in that those who placed high importance on this moral foundation did not support as strong a response to climate change as those who placed little importance on this moral foundation. This result may suggest that taking action which reduces economic prosperity and lifestyles relative to other countries is a key element of attitudes to climate change. When interpreted at the level of agreement between countries, this reluctance to take action on climate change may reflect a preference for the national interest over the common global interest. It may also reflect a concern to protect the economic interests of future generations of one's own country. Again, this is not unexpected given that the decision to subordinate self-interest in favour of the common good is central to the moral dilemma presented by climate change.

A further point arises from the finding that attitudes to climate change in this Australian study appear to be predicted by moral intuitions about Harm/Care, Fairness/Reciprocity, and In-group/Loyalty only rather than by all five foundations. This supports the findings of Koleva et al. (in press) that particular issues appear to elicit focus on some foundations more than others. They found that Purity/Sanctity tended to be the most significant predictor of all of the moral foundations of attitudes to the various issues raised overall (such as abortion, same-sex marriage and gambling), but that other individual foundations were predictive for different issues. They found for example, that Harm/Care was most predictive for the issues of animal testing and death penalty, but In-

Figure 2. Direct and indirect effects.
group/Loyalty was most predictive for defence spending. For global warming the only intuitions that Koleva et al. (in press) found to be predictive of attitudes were Purity/Sanctity and Harm/Care.

Another aspect of these findings is the specific differences in the findings themselves between this study and the Koleva et al. (in press) study. Whilst the relative importance of Purity/Sanctity in each of the studies is quite different, it is unclear whether there are differences involving the extent of religious belief between Americans included in the Koleva et al. (in press) study and the Australians in this study. Another difference was that the Koleva study found no predictive relationship for Fairness/Reciprocity or for In-group/Loyalty. Cultural differences are unable to be discerned as the sample in the Australia study was not random, but a further study using a random sample of Australians may be able to shed light on it. Taken together however, these findings in the context of climate change do provide further empirical support for the relevance of Moral Foundations Theory to moral decision-making in general, and important additional information about how the moral intuitions may operate in practice for the particular issue of climate change.

Central to the current study was the expectation that political orientation would be associated with patterns of relative weightings that individuals’ place on the moral foundations of In-group/Loyalty, Authority/Respect, and Purity/Sanctity, and this was found to be the case. As political orientation moved further across the left-right spectrum from liberal to conservative, the relevance to the individual of these three foundations rose to similar levels as for Harm/Care and Fairness/Reciprocity. This finding replicates the results of other studies (Haidt & Joseph, 2008; Graham et al., 2009; Haidt et al., 2009) supporting the link between moral intuitions and political orientation. The Progressivism variable was created to simplify into one variable the different pattern of relevance to individuals’ of the five individual foundations. It represents the difference between focus mainly on Harm/Care and Fairness/Reciprocity and a more even focus on all of the five moral foundations. As anticipated, Progressivism was found to positively correlate with a left-wing political orientation and to negatively correlate to a right-wing political orientation.

Progressivism was expected to predict a preference for a stronger response to climate change, and this was found to be case. Both political orientation and progressivism made unique contributions to the explained variance in regression analyses of attitudes to climate change and together accounted for a quarter of the variance. Again the contribution of political orientation was approximately double that of the pattern of moral foundation scores encapsulated by progressivism. Both regression models involved political orientation and moral foundations, and though the latter variables were used in different ways the results were very similar. Together the models indicate the importance of both the moral foundations and political orientation as predictors of attitudes to climate change.

The finding of unique contributions to explained variance for both moral foundations (individually and combined as Progressivism) and political orientation is similar to that of Koleva, et al. (in press) who found that moral foundations made unique contributions to the variance in moral opinions and moral judgements when political orientation was included in the analyses. The finding that political orientation predicted attitudes to climate change also replicated the findings of Kellstedt et al. (2008) and Zahran et al. (2006).

The findings of the hierarchical regression analysis confirmed that the mediation was partial rather than full, as depicted in Figure 2. Effect sizes for the
components of the indirect relationship which comprised the relationship between progressivism and political orientation, and thence the relationship between political orientation and attitude to climate change were medium. Similarly the effect size for the direct relationship between progressivism and attitudes to climate change was also medium. These findings mean that whilst the impact of progressivism on attitude to climate change is partially mediated by political orientation, it also has a direct relationship with attitudes to climate change. Additionally the relationships were not only statistically significant but indicate that the differences in attitudes found were of practical significance to the way individuals may respond to climate change.

The negative skew of attitude indicated a majority preference for strong action on climate change. This was not the case in the United States studies by Zahran et al. (2006), Kellstedt et al. (2008), or Koleva et al. (in press) which may suggest that the attitudes to climate change of the Australian participants in this study are different to those of the American participants on these other studies. Specifically, the Australians in this study appear be more positive towards action on climate change irrespective of other variables, but replication of this research utilising finer scales which would allow a greater spread of responses would be able to explore this more fully. It may be that climate change is more salient to the Australians in this study because of the relatively harsh climate compared to other countries, or they may be better informed about the issue than they were at the time of the Brechin (2003) study of knowledge about the cause of global warming. Inclusion of measures of individual’s knowledge about the causes and likely consequence of climate change in future research would assist in clarifying the relationship between attitudes to climate change and objective knowledge about climate change and would extend the work of Zahran et al. (2006).

As noted earlier, it is also possible that this result is due to the fact that this was not a random sample. Though a relatively high proportion of non-capital city dwellers were included, it was very much a Sydney-based sample and Sydney residents may be wealthier, better-educated and more environmentally-aware than the ‘typical’ Australian. Accordingly, the attitudes to climate change found may not be generalisable beyond this study. Similarly the snowballing technique used may have led to the inclusion of participants who have a strong interest in climate change and a preference for strong action through their agreement to participate and also because the friends and acquaintances they may have forwarded the survey to might be like minded. Nevertheless, this study does not purport to be a representation of typical Australian attitudes to climate change but rather a study of the interplay of moral intuitions and political ideology. By using an Australian sample, however, this study makes an important contribution to the existing body of scholarship in respect of Moral Foundations Theory because it tested the robustness of the model in a culture outside of the United States.

The relationship between attitudes about climate change and specific moral foundations has implications for the public debate about the response to climate change. At the very least, the relationships found between the pattern of moral foundations and political orientation may provide the opportunity for increased understanding of the positions of each side of the debate on the basis of individuals’ deep moral concerns. Understanding opposing positions such that the underlying issues can be addressed may be an important step towards consensus. Specifically concerns related to Harm/Care and Fairness/Reciprocity appear to be shared by the Australians in this study irrespective of political orientation. The differences in attitudes to climate change appear to be related to the relative importance placed on In-group/Loyalty however which is also reflected in political orientation itself along
with Authority/Respect and Purity/Sanctity. This suggests that the debate over the response to climate change may be improved if issues are framed so as to acknowledge all of the relevant perspectives, particularly the moral foundations elicited by the issue of response to climate change. The partial mediation found in this study suggests that individuals’ attitudes are grounded in something more than that which follows from political orientation alone, so the debate must also explore how all salient moral foundations can be addressed, if political solutions are to reflect people’s moral views and not just political partisanship.

While the results of the present study show a relationship between moral foundations and attitudes to climate change, it is not possible to say whether the inclusion of moral foundations concerns in the debate will alter attitudes to climate change. This study is a cross-sectional correlational study, and hence the causal relationships between moral intuitions and political choices cannot be identified. Longitudinal studies will be required to investigate those. From the perspective of psychology generally, new aspects of morality and moral decision-making are worthy of further research if moral psychology is to be of great utility in this era of polarised political perspectives (Jost, 2006).

The relevance of public opinion and thus political action in response to climate change remains high as international efforts to determine mutually agreed measures are still in progress. This study contributes to our understanding of which aspects of morality are salient to individuals in respect of climate change, and suggests that together moral foundations and political ideology will influence attitudes about the response to climate change. It is hoped that this work may shed some light on the key predictors of public attitudes to the response to climate change and contribute a small step towards establishing a better understanding of factors relevant to opposing viewpoints. It has also contributed to the growing body of scholarship concerning Moral Foundations Theory.

References


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Aboriginal Concepts of Place and Country and their Meaning in Mental Health

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There is a lack of knowledge within Western psychology about Australian Aboriginal conceptions of mental health. The majority of psychological services available to Aboriginal people are based on Western world-views, and are of questionable benefit. Because of the ethnocentrism apparent inherent in services, many Aboriginal people avoid psychological assistance. If there is to be any change in the state of Indigenous mental health, there needs to be a change in the type of services provided to Aboriginal people, and in the value systems of practitioners. This research extends the work of Vicary (2002) by looking specifically at the importance of place in Aboriginal world-views. There exists a wide gulf between Aboriginal and non-Aboriginal understandings of mental health, in particular, a culture more generally. Concepts such as ‘country’ need to be understood by non-Aboriginal practitioners for them to be able to provide a quality service that is culturally appropriate.

Within Australian psychology there is a lack of culturally appropriate psychological resources, services and interventions for Indigenous people (Australian Institute for Health and Welfare, 2009; Berry, 2009; Garvey, 2000; Graham, Reser, Scuderi, Zubrick, Smith, & Turley, 2000; Hunter, 2007; Vicary & Bishop, 2005; Westerman, 2004, 2010). While there has been significant governmental policy change, there is a lack of training or education in cultural propriety for non-Indigenous practitioners (Vicary & Bishop, 2005; Zubrick, Kelly & Walker, 2010). This lack of practical information regarding interventions with Aboriginal clientele is generally not recognised until a non-Indigenous practitioner attempts to work with an Indigenous community. It then becomes clear that there are few studies available to mental health practitioners that provide any useful insight into the Indigenous world-view (Dockery, 2010; Gonzales, 2000; Vicary & Andrews, 2001; Wand, Eades & Corr, 2010). This lack of understanding of the Indigenous world-view is problematic as it causes Indigenous people to feel discouraged from accessing mental health services proactively (Brown, 2001; Eley, Young, Hunter, Baker, Hunter, & Hannah, 2007; Hall, Hunter & Spargo, 1993; Hunter, 2004; Vass, Mitchell, & Dhurrkay, 2011; Westerman, 2004, 2010). Consequently, Indigenous people are generally only seen in a mental health services setting when they reach a crisis point or have had a long history of psychiatric symptomology, and are thus over-represented in psychiatric admissions (Hunter & Harvey, 2002; Zubrick et al., 2005).

Indigenous people are disadvantaged in the Western mental health system (Hunter, 2007), and there is a need for empowerment and self-determination in the provision of psychological services for Indigenous people (Casey, 2000; Dudgeon, Grogan, Collard & Pickett, 1993; Hunter, 2007; Peeters, 2010; Zubrick et al., 2005). International writers have argued that use of Western
psychotherapeutic techniques on indigenous people is another insidious form of colonisation (Appo & Haertel, 2003; Holdstock, 2000; Tapping, 1993) and that attempting to employ a monoculturally-designed western mental health system with Indigenous people is actually a form of racism (Appo & Haertel, 2003; Paradies, 2006; Riggs, 2004; Riggs & Augoustinos, 2005; Waldegrave, 1985; Westerman, 2010).

Dudgeon et al. (1993) have suggested blending Indigenous and non-Indigenous forms of intervention and models of mental health to create a service for Indigenous people that is culturally sensitive and of high quality. Others suggest the creation of population specific psychologies (PSPs), arguing that no two populations, communities, or cultures are exactly alike, with different pressures operating on them (Watts, 1994). Therefore, it is argued that different methods of intervention should be developed and utilised to address the individual needs of the specific population, community, or culture.

The Legacy of Colonisation

It is an unfortunate fact that many Australians remain unaware of the Indigenous version of Australia’s history, both pre- and post-colonisation (Dudgeon, 2003; Parker, 2010). The dominant notion within Australia of forgetting the past and ‘getting on with the future’ indicates the denial that exists within Australia about significant elements of its past (Collard, 2000). Furthermore, humans are products of our history; we engage in retrospective thought and discussion in an attempt to contextualise our present. An awareness of our past situates us in our present (Collard, 2000). Therefore, it is necessary to provide an account of what colonisation meant – and continues to mean – for Aboriginal people before the reader can reach a thorough understanding of the psychological ramifications of the process of colonisation.

Any attempt to understand the Aboriginal world-view is incomplete without an awareness of the history of contact between Aboriginal and non-Aboriginal people (Dudgeon, 2000a; Dudgeon, Wright, Paradies, Garvey, & Walker, 2010).

British colonisation severely impacted Indigenous peoples. The disruption to well-established patterns of living, dispossession of land, marginalisation through various government acts and discrimination has led to trauma (Atkinson, 2002; Atkinson, Nelson & Atkinson, 2010; Dudgeon, Mallard, Oxenham & Fielder, 2002; Dudgeon et al., 2010; O’Shane, 1995). While Australia is currently undergoing a reassessment of government responsibility to Indigenous needs in an alleged effort to promote self-determinism and empowerment within Indigenous peoples, new policies are proving to be just as damaging to Indigenous life as previous policies, having resulted in the creation of dependencies and dysfunctions adding to the trauma suffered by Indigenous peoples (Atkinson, 2002). Hage (1998) discusses the White nation fantasy, whereby the voice of the ethnic other is silenced and constructed as a passive object by both white racists and white multiculturalists. The ongoing debate between the white racists and the white multiculturalists is such that it excludes Aboriginal people themselves from participating in that debate. Aboriginal people will continue to be prevented from becoming empowered unless they are allowed to shape their own debates and articulate for themselves what change is needed within Australian society.

Ongoing colonialism is predominantly responsible for the continuing health problems of Indigenous communities (O’Shane, 1995). As such, no treatment will be effective in addressing these problems unless health professionals themselves develop an understanding of the impact of colonialism, and have taken measures to identify and extinguish ongoing practices of colonialism, and properly acknowledge the
effects of the ongoing history of colonisation (O’Shane, 1995). There is a documented relationship between powerlessness, substance abuse, and violence to self and others, including rape, self-mutilation, homicide, suicide, child neglect and abuse (Berry, 2009; Dudgeon, 2003; Graham et al., 2000; Hunter & Harvey, 2002). Post-colonial Australian history has been built on racism and oppression – “the systematic conflict, removal, displacement and incursion of people into prisons, reserves and missions” (Dudgeon, 2003, p. 40), while at the same time this history is denied. Atkinson et al. (2010) discuss echoes of the past, and the transgenerational impacts on communities leading to many dysfunctions. For Indigenous Australians to enjoy the same respect, socio-economic conditions, and quality of life as other Australians there needs to be a change in our political climate and this challenges health professionals to join the political campaigns aiming for these goals (O’Shane, 1995). Australian Psychology and Indigenous Research

While there is currently a lack of research being done with Indigenous Australians to expand non-Indigenous practitioners’ understandings of Indigenous world-views, Australian psychology has a long history of research conducted on Indigenous people (Bishop, 2007; Garvey, Dudgeon & Kearins, 2000; Vicary & Bishop, 2005). This has resulted in a general scientific perception that Indigenous people are culturally and genetically inferior, and so has been used as a justification for the forced cultural dislocation of these people (Wilson, 1997).

Research into the psychology of Indigenous Australians has been conducted for over a century, with the vast majority of this research serving to validate the practice of colonialism and cultural suppression (Bishop, 2007; Davidson, Sanson, & Gridley, 2000; Garvey, 2007). European visits to Australia almost four centuries ago led to reports about the appearance and apparent lifestyle of Australia’s Indigenous people. Much of the late 19th and early 20th century scientific and psychological literature was based on the racist, primitive, and derogatory premises that these early reports provide (Dudgeon, 2003; Garvey, 2007; Gould, 1981; Moane, 1999; Prilleltensky & Gonick, 1996; Prilleltensky & Nelson, 2002). Early studies focusing on the cognitive and social limitations of Indigenous children and adults in education and employment found theoretical grounding in social Darwinism, or social evolutionary theory (Garvey et al., 2000). Problems and limitations were attributed to genetic inferiority, and subsequently to cultural inferiority (Davidson et al., 2000). This type of research constructed Indigenous adults as inferior role models and incapable parents, thus supporting the forced removal of children from their families and communities (Wilson, 1997).

In the last three decades Australian psychologists have recognised the lack of culturally appropriate services for Aboriginal people, and have taken measures to improve the quality and availability of these services. Since the 1970s, Aboriginal mental health professionals have been working to establish within Australian psychology a place and a voice for the issues surrounding and involving Aboriginal mental health (Gridley, Davidson, Dudgeon, Pickett, & Sanson, 2000). The formation of the National Aboriginal Mental Health Association in 1979 highlighted the concern held by Aboriginal mental health professionals that mental health providers were guilty of the neglect of Aboriginal mental health problems. As a consequence, mental health training was incorporated into all Aboriginal health worker training over the next 20 years (Gridley et al., 2000). At the Australian Psychological Society’s (APS) annual conference in 2008, the Australian Indigenous Psychologists Association was created.

The APS (2007) Code of Ethics now includes guidelines for the conduct of
research and the provision of services for Indigenous Australians and advocates the following principle:

They [psychologists] have a high regard for the diversity and uniqueness of people and their right to linguistically and culturally appropriate services. Psychologists acknowledge people’s right to be treated fairly without discrimination or favouritism, and they endeavour to ensure that all people have reasonable and fair access to psychological services and share in the benefits that the practice of psychology can offer. (p. 11)

The implications of these additions to the code of ethics are positive, however the real problem of the lack of cultural knowledge and understanding currently available to non-Aboriginal practitioners is not addressed (Vicary, 2002; Vicary & Bishop, 2005). Indigenous people still experience rates of physical and psychological illness that are far higher than national averages (Australian Medical Association, 2002; Graham et al., 2000; Hunter, 2007; Zubrick et al., 2005). For example, they remain at risk of self-harm and substance abuse, and continue to suffer from physical, emotional, and sexual abuse (Gordon, 2002; Silburn, Glaskin, Henry & Drew, 2010; Thomson et al., 2012). For non-Aboriginal practitioners to provide a quality service to Aboriginal clientele they must have an understanding of the Aboriginal worldview. The cultural, historical, and social issues and pressures surrounding Aboriginal people must be understood and used to guide therapy and interventions in an empowering manner (Dudgeon, 2003).

Garvey (1995, 2007, 2010) discusses cultural appropriateness as a dynamic, interactive and conscious process, employing cognitive, behavioural, and affective dimensions. If psychology is to truly adopt notions of cultural appropriateness, it must consider differences in interpretation, perception, and explanation of phenomena – the subjective reality and consequent interpretations of that reality. The focus of application must shift from the production of a culturally appropriate end product to include the process of initial assessment, rapport-building, intervention and evaluation – the means are just as important as the end. Practitioners implementing cultural appropriateness may experience emotional responses; the nature of cultural appropriateness is such that it requires us to leave our comfort zones in an effort to transcend the limitations of our own experiences and understandings, however it is an important step in changing and challenging the status quo. It is vital to be aware that cultural appropriateness is a process of continuing review and refinement, and psychologists must be aware of change.

**Sense of Community and the Importance of Country**

There is a conceptual problem associated with notions of Aboriginal communities. The use of the term Aboriginal community contains an intrinsic implication that Aboriginal society is homogenous, with shared interests, and positive forms of collectivity (Dudgeon, 2003). As mentioned above, this conceptualisation of Aboriginal community is misleading and problematic in terms of the provision of appropriate psychological services for Aboriginal people (Vicary, 2002). Furthermore, the use of the term community in relation to Aboriginal groups has direct connotations to delivery of services and funding. From a governmental perspective, “it is cheaper to call a group of 500 or more black or brown skinned human beings a community, than a town” (Dudgeon et al., 2002, p. 255). By labelling such a group or groups as a community, governments can avoid the costs involved with the provision of the infrastructure that is
necessary for a town. As Garvey (2010) argues “the jargon used to reflect ‘community’, merely serves to erect linguistic and technical barriers that cement the divide between you [psychologists] and them [Aboriginal people]” (p. 9).

Having issued that caveat about the use of the term community, Dudgeon et al. (2010) have argued that the Indigenous conception of the community differs from that of non-Indigenous people and is fundamental to the concept of self. Dudgeon et al. (2002) report the diverse and pluralistic nature of the Aboriginal community. While there is no precise definition of the notion of community within Aboriginal society, there are a number of core values, beliefs, and attitudes concerning community. Aboriginal communities can be conceptualised as geographical, social, and political (Dudgeon et al., 2010). They report the defining dimensions of Aboriginal conceptions of communities as sense of belonging based on family lines and country, or area of origin. Therefore, community can be considered in terms of two dimensions – filiation and affiliation. The primary family and clan connection to a specific geographical area represent the filial dimension of community, with Aboriginal people defining themselves as belonging to a particular region or country.

Prior to colonisation/invasion, Aboriginal people occupied the whole continent, hunting and gathering in defined areas. Each group had a special relationship with its country. These people did not own the land; rather they belonged to certain areas, with the land being similar to a religious text, in that it formed, and forms, the basis of spiritual life. As such they were – and in some areas still are – obligated to look after their country by caring for their sacred sites and performing ceremonies for the well-being of the country. Certain sites hold particular significance as ancestral beings performed special actions at the time of creation on these sites. Thus different groups become the custodians of different stories, with much knowledge of sacred sites being earned or gender specific (Dudgeon, 2003; Dudgeon et al., 2010).

Approximately 500 different clan groups existed within Australia before it was colonised/invaded, and each group associated with a different territory, history, dialect and culture (Collard, 2000). The Dreamings of each society communicated the oral traditions of the land, the seasons, and religious spirituality. While the land provided sustenance for its people, it also represented a physical reflection of the journeys of spiritual ancestors from the period of creation. The land was and is a representation of spiritual life and may be thus conceptualised as a type of religious text (Collard, 2000). Cowan (1992) describes a Dreaming landscape, a physical incarnation of spiritual and mystical realities that cannot be easily translated into words. Therefore, the Dreaming represents the land as a symbol, an expression of the mystical nature of individual attachment to it. The Dreaming can be seen as “the pragmatic voice, the geographical articulation and the mytho-poetic dream thoughts of the country” (San Roque, Japaljarri, & Petchovsky, 2001). The Dreaming represents a pattern of connectivity, joining lines of sites, lines of songs, and lines of familial relationship, along lines of country – it serves to link country to all other aspects of life. The Dreaming forms a channel through which all cultural associations pass through the generations (Atkinson, 2002), and provides a basis for decisions to be made regarding relationships, law, marriage, and cultural and intellectual power and politics (San Roque et al., 2001). Furthermore, the Dreaming is not something that happened a long time in the past, rather it is “the processes of human action in co-creation with the great Creators and the ancestral beings, which continue in the present, the continuing birth, life, death, rebirth, renewal that is human activity across millennia” (Atkinson, 2002, p. 32).

Groups belonged to certain areas of land or country – rather than owning the land,
Aboriginal people had specific relationships to the land, with spiritual and familial bonds existing between individuals and their country (Dudgeon, Garvey, & Pickett, 2000). Land, or country, is central to the formation of identity in Aboriginal people, as it provides a guide for all human interaction. Within Aboriginal culture, country is not seen as something separate from the self. Rather, country forms one aspect of the self and the identity of the individual and the group. Furthermore, subjectivity is attributed to all beings, including non-human (Petchovsky, 2001). Country is perceived as being alive, in a sense, and capable of thought and reflection (Bishop, Colquhoun, & Johnson, 2006). Country also provides a sense of wellness – that is, the wellness of the people reflects the wellness of the country – if the country is sick, then so are its people; and conversely, if the country is well, then so are its people (Atkinson, 2002). So the maintenance of country – and thus the maintenance of the Dreaming – becomes important as a psychological process, maintaining the health of the people, the country, and the nation (San Roque et al., 2001). Sites of conception and birth are highly significant as they establish much of the physical journeying of the individual, and the inter-relationships with others. These are re-enacted at death, with such rituals allowing the spirit to continue its journey into other realms and realities (Atkinson, 2002). These values and ways of operating continue today in many Indigenous Australian peoples, even those that appear – on the surface – to be completely western, and to have rejected their cultural heritage (Dudgeon et al., 2010).

**Methodology**

**Vicary’s Study**

Before commencing his research, Vicary (2002) spent 18 months in consultation with Aboriginal people throughout the Kimberley and the metropolitan areas of Western Australia, speaking to male and female Elders, Aboriginal health workers, Aboriginal policy and program personnel and individuals within the Aboriginal community with direct experience of the mental health system. This consultation process involved the discussion of the main areas of interest and aims of the research, and identification of any potential problems. Through this consultation process, Vicary found that many Aboriginal people experienced frustration when dealing with the western mental health system, with a general impression that non-Aboriginal practitioners were confused about Indigenous concepts of mental health, and that the myths surrounding Aboriginal culture and traditional health practices made it more difficult to develop a relationship with a non-Aboriginal practitioner.

Many of the consultants expressed concern at the generic use of Aboriginal programs, and believed that this practice was due to the misguided belief that Aboriginal groups are homogenous. Lack of consultation with Aboriginal members of the community was another concern, with the belief that consultation with the Aboriginal community would greatly assist in developing an understanding of the Aboriginal world-view. Overall, Vicary (2002) received an enthusiastic response to the proposed research, with the belief that the information gathered could benefit Aboriginal communities, in improving mental health services to Aboriginal people through the application of culturally derived work practices. Some concerns were expressed regarding the methodology, resulting in the recommendation of a number of pre-conditions for effective research with Aboriginal people:

1. developing a relationship with and collecting data from a potential study participant by ‘yarning’ with them;
2. working with local Aboriginal cultural consultants;
3. providing feedback to study participants;
4. involving the Aboriginal community as much as possible; and
5. assembling an Aboriginal Steering Committee (Vicary & Bishop, 2005).

Vicary (2002) formed a Steering Committee and met with them on a regular basis for guidance and advice on cultural aspects of the research, process and methodology. The Steering Committee included Aboriginal men and women from the Kimberley and Perth metropolitan areas, who had extensive experience with Indigenous research. They recommended a qualitative research design, so that relationships were developed between the researcher and the participants, and that the research be conducted in a transparent and non-threatening manner. To achieve the goals of the Steering Committee, it was further recommended that:

1. the study’s target cohorts be informed and regularly updated about the progress of the study;
2. the Aboriginal community be consulted regularly;
3. potential participants be completely comfortable with data collection methodology;
4. potential participants be clear about the objectives of the study;
5. the results of the project be returned to participants for their comments;
6. the data be collected primarily through an informal interview or ‘yarn’;
7. local Aboriginal cultural consultants provide guidance and advice to the researcher; and
8. the research be easily understood and presented in language familiar to Aboriginals (Vicary & Bishop, 2005).

The Steering Committee identified potential participants, and ‘vouched’ for the researcher, expressing positive information about the research. The Committee sent a document to various agencies outlining the objectives, proposed questions and areas of interest of the study, informing participants of the research, the possible questions, objectives, and its confidential and voluntary nature. Vicary obtained ethical approval from Academic Supervisors, the Steering Committee, the School of Psychology Doctoral Research Committee, the Curtin University of Technology Ethics Committee, and Family and Children’s Services.

The questions to be used in the interviews were developed with the aide of the Steering Committee and representatives of the Aboriginal community in both the Kimberley and the Perth metropolitan area. Through this consultation process, a total of 380 questions were generated and then screened for cultural propriety, use of language, question content, clarity, nature of the question, and relevance. This process resulted in the elimination of all but nine semi-structured questions. This questionnaire was then piloted on the members of the Steering Committee, with generally positive feedback, however it was recommended that the order of the questions be reversed, allowing participants to become more relaxed, providing a context for their answers, and increasing the face validity of responses.

Interviews were conducted by Vicary, the primary researcher, and Pearson, who was then a Senior Aboriginal Advisor for Family and Children’s Services. Respondents were given the choice of locality for the interview to take place, with most choosing their place of work. No time restrictions were placed on the interviews, with the length of interviews ranging from 40-310 minutes. A total of 70 interviews were included in Vicary’s study, with 35 participants from each geographical location ranging in age from 19-68 years, with a mean age of 38 years. The Kimberley group consisted of 11 men and 24 women, while in the Perth group there were 19 females and 16 males. All participants had completed secondary school, with well over half having also completed tertiary study.
Procedure

The transcripts of the 70 interviews were analysed to see to what extent the issue of country had been discussed. As Vicary’s (2002) original research was concerned with Aboriginal conceptions of mental health, the notion of country was not discussed in all of the interviews. Therefore it was necessary to examine the interviews in terms of the degree to which each interview addressed the notion of country. From the original 70 interviews, 34 were found to address the notion of country in enough depth to be useful for the purposes of the current research. These 34 interviews comprised 300 pages of data. The 34 interviews were thematically analysed using NVivo (Richards, 1998).

Two levels of analysis were utilised to generate a number of themes and phenomena. The first stage of analysis – open coding – generated eighteen themes relating to country. These were traditional law, traditional beliefs, spiritual connection, traditional explanations of mental illness, reconnecting, feeling whole, sense of belonging, sense of identity, kinship, effects of separation, grieving, burials, security, loss of culture, wellness, imprisonment, infrastructure, and therapeutic approach. Axial coding (Miles & Huberman, 1994) was used to develop the second level of analysis and four phenomena central to the notion of country, within which each of the eighteen themes existed were identified. These central phenomena interrelate to shape conceptualisations and beliefs about country, as will be discussed below.

Findings

Analysis of the interview transcripts identified the importance of country as a cultural phenomenon, with participant responses in general being fairly similar across the sample. There were no real differences in conceptualisations of country between the various regions included in the research. One factor that seemed to influence variations in responses was that of cultural magnitude. Participants who had experienced a stronger traditional cultural influence throughout their lives were more likely to provide answers that were more strongly grounded in traditional beliefs. However, there were no major conceptual differences arising between the groups.

The open coding phase of analysis generated nineteen categories in relation to country. Axial coding identified four central phenomena within which these categories exist: Traditional Elements, Identity, Physical Attachment, and Provision of Services. Traditional Elements includes the categories of traditional law, beliefs, spiritual connections, and traditional explanations of mental illnesses. The Identity phenomenon involves reconnecting, feeling whole, sense of belonging, sense of identity, and kinship. Physical Attachment includes effects of separation, grieving, burial, security, loss of culture, and wellness. Provision of Services concerns imprisonment, infrastructure, and therapeutic approach. Each of the central phenomena identified interrelate with each other to shape the general notion of country.

Traditional Elements

The central phenomenon of Traditional Elements included the general categories of traditional beliefs, traditional law, cultural explanations of mental illness, and spiritual connection. Participants in Vicary’s study expressed that there are traditional and cultural explanations for behaviours that within a Western framework may be diagnosed as mental illness. Factors such as being away from country for too long, and walking on sacred sites or on sites for women’s or men’s business without permission may result in behaviours identifiable from a Western perspective as mental illness. However, if treatment for these behaviours does not address the cultural or traditional cause of the problem, then the treatment is likely to be ineffective.

This issue relates back to Kleinman’s (1973) discussion of symbolic pathways. A symbolic pathway comprises words, feelings,
values, expectations, and beliefs. It connects events and forms with affective and physiological processes. The nature of this symbolic pathway is such that the description, diagnosis, and treatment of a disorder constitute a symbolic reality for individuals, communities, and practitioners. Therefore, any therapies or treatments must consider the clients symbolic pathway before they can be effective.

The issue of traditional explanations for mental illness highlights the importance of implementing culturally appropriate processes and services, and the significance of context in working with Aboriginal clients and communities. Practitioners must conceptualise reality as subjective, and consider the clients interpretation of reality within delivery of therapeutic services (Garvey, 1995, 2008). Furthermore, given that Aboriginal communities are not homogenous, and that there exists great cultural variation between communities (Vicary 2002), it is important that practitioners consult with members of the community in question, and determine from them the traditional explanations for mental illness.

Furthermore, the role of traditional healers within the therapeutic process should not be overlooked. Aboriginal people often experience some difficulty in communicating the nature and interpretation of their problems to non-Aboriginal practitioners, with the concern that spiritual issues may be misrepresented or misunderstood by a non-Aboriginal practitioner. In such cases, access to traditional healers may assist in the therapeutic process (Swan & Raphael, 1995). However, practitioners must be aware that a traditional healer should only be involved at the request of the client, or those responsible for the client (Dudgeon, 2000a).

The spiritual connection to country interrelates with traditional beliefs and law to affect identity formation and sense of self. As country is not separate from the self, but forms a part of the whole individual (Bishop et al., 2006; Petchkovsky, 2001; San Roque et al., 2001), the spiritual connection to country – and consequent problems associated with separation – must be considered as an important contributing factor to any therapeutic process. Identity

The Identity phenomenon incorporates the categories of sense of identity, sense of belonging, feeling whole, kinship, and reconnecting. “As Aboriginal people your country is actually you and you are your country”. History, ancestry, and cultural heritage are all specific to country. Different regions have specific Dreaming and stories, providing a context of rules, values and norms by which individuals live their lives. Individuals need to be aware of their history before they can determine where they belong, establish their place in society and look to their future (Collard, 2000).

As previously discussed, place identity forms a fundamental part of the development of self and social identity (Cuba & Hummon, 1993), with place existing as an autobiography or extension of the self. Practitioners should be aware of the importance of country to the formation of identity when working with Aboriginal clients, as many presenting problems are likely to be identity-related, and so also related to issues of country.

When Aboriginal children were taken from their families and their country, they were also deliberately – and often violently – discouraged from displaying any cultural practices, including speaking their own language. They were indoctrinated into a belief system of White supremacy, with the power dynamics observed around them reinforcing this notion (Dudgeon, 2000b). As a consequence of this forced relinquishment of identity, many health problems experienced by Aboriginal people today will be identity-related. This is especially evident in Aboriginal youth, many of who feel that they have no legitimate connection to their
Aboriginality. Because they have not had the opportunity to grow up within a traditional society, they have had less experience of outward expressions of Aboriginal culture and so are led to question their identity as Aboriginal people (Beresford & Omaji, 1996). Non-Indigenous practitioners must develop an understanding of the interaction between country and identity, and the consequent mental health problems that have arisen as a result of Aboriginal people being displaced from their country, in order to design effective therapeutic practices.

**Physical Attachment**

This phenomenon comprises the categories of effects of separation, burials, grieving, loss of culture, security, and wellness. Individuals reported the experience of positive feelings when they are in their country that they do not experience at other times. Similarly, when they are away from their country they experience negative feelings that dissipate once they return. This physical attachment to country is reflected in the need expressed by many, especially elderly, people to be buried in their country, and the need to return home in order to properly grieve and heal. Loss of culture is associated with separation from country. Similarly country is related to feelings of security, with comfort gained from the knowledge that there is always a place to return to; a place of belonging. Wellness is another aspect of the physical attachment to country, with wellness increasing when an individual is at home.

The importance of physical attachment to country cannot be emphasised enough in terms of its contribution to therapeutic processes. Practitioners must have knowledge of this issue if they are to work effectively with Aboriginal clients. Practitioners may find that many clients presenting with any range of problems will show a marked improvement simply by returning to their country (Vicary, 2002; Vicary & Bishop, 2005). The need expressed by many of Vicary’s (2002) participants to return to their country to die and be buried is another important issue of which practitioners should be aware, especially when dealing with clients who are elderly or sick. Similarly, when dealing with issues of grief or depression, a knowledge of the effects of separation from country may assist the practitioner in developing a more effective treatment, which may include a recommendation that the client return home.

The loss of culture experienced as a result of separation from country may be the underlying cause of many presenting problems. As previously mentioned, country can be conceptualised as a type of religious text, representing and storing the history of Aboriginal people from the time of the Dreaming (Collard, 2000; McMillan, Kamperas, Traynor, & Dewing, 2010). Country formed the basis of all life within traditional Aboriginal society – regional boundaries, social norms and practices, stories, languages, traditions, and a multitude of other factors (Dudgeon, 2003). Thus country contributed largely to the development of the identity of its people, and so many of the subsequent problems associated with loss of country, and consequent loss of culture, may also be associated with loss of identity, as discussed previously.

Within the Aboriginal world-view, health is conceptualised in terms of wellness within all aspects of life. A Western perspective identifies physical health, mental health, emotional health, and spiritual health as separate entities, requiring individual attention and study. However the Aboriginal world-view considers all of these phenomena to represent aspects of one larger entity, which may be referred to as wellness (Vicary, 2002; Vicary & Bishop, 2005). It is important that practitioners understand the concept of wellness within the Aboriginal world-view; as such an understanding will allow the practitioner a richer insight into the issues affecting the Aboriginal client. Furthermore, understanding the contribution of country to
the notion of wellness, in relation to the issues discussed above, will further aid the efficacy of the therapeutic process.

Provision of Services

The final phenomenon of Provision of Services includes the categories of therapeutic approach, imprisonment, and infrastructure. The issue of country needs to be considered within the provision of each of these services. That Aboriginal groups are not homogenous (Collard, 2000; Vicary, 2002) requires that different programs be developed for different regions. Practitioners should adopt a value of cultural relativism, and understand that each culture is unique and self-contained, and as such can and should only be understood in terms of itself (Watts, 1994). Once practitioners reach this understanding, it will then become possible to involve the community in developing therapeutic processes and programs that are congruent with their world-view. The use of the Indigenous world-views and belief systems in designing such processes and programs will result in the development of interventions that will develop the strengths, while minimising the existence and influence of conflicting values (Watts, 1994). Practitioners should not expect Western models of mental health to work for Aboriginal populations, rather there is a need for the development of new health models designed by Aboriginal people (Briscoe, 1978). Practitioners working with Aboriginal populations must have an understanding of the diverse and complex nature of Aboriginal communities (Dudgeon et al., 2002), and of the impact of spirituality, community, country, and colonisation on the lives of Aboriginal people before any processes or programs will be effective (Schilder, 1990).

The implications of country in the promotion of wellness, as discussed above, have direct connotations for the process of imprisonment. The purpose of rehabilitation is not assisted if it involves the removal of an Aboriginal person from his or her country, as that person will then experience some loss of identity and sense of self. As previously discussed, country is not understood as a separate entity within Aboriginal culture (Bishop et al., 2006). Rather, country represents another aspect of the individual, similar to spirituality/religion, in that it contributes to the definition of self, and assists in answering the questions of “who am I?”, “where do I belong?”, and “why am I here?”.

It is not always possible for Aboriginal people to live on their country as the necessary infrastructure may not be established within those areas. This relates back to the problematic use of the word community to describe a large group of Aboriginal people living within a specific geographic area. As previously mentioned, if such groups are labelled as a community rather than a town, governments are able to avoid the costs of infrastructure necessary for a town (Dudgeon et al., 2002). As such, many Aboriginal people are not able to live on their country because such infrastructure has not, and will not be provided.

Conclusions

The broadest and most important conclusion that can be made from this research is to emphasise the vastness of the cultural divide between Aboriginal and non-Aboriginal. Examination of one aspect of the Aboriginal world-view has revealed an immense difference between Aboriginal and European conceptualisations, formations and explanations of identity, mental illness, wellness, family structure, social structure, and any number of other elements impacting on individuals and communities. If other aspects of the Aboriginal world-view create similar differences in other areas of life, it becomes difficult to comprehend how western therapeutic techniques have ever been expected to work for Aboriginal people. Given the vast differences between Aboriginal and Western conceptualisations of country, it becomes clear that it is unacceptable for a non-Aboriginal
practitioner to adopt a general practice of cultural sensitivity without a thorough knowledge of this issue. The results have indicated that country is hugely important to the development of the psyche of Aboriginal people, and is one of the most important aspects of wellness and mental health within Aboriginal society. As such, non-Aboriginal practitioners cannot claim cultural sensitivity without a thorough understanding of the dynamics of country within the Aboriginal world-view.

The importance of country needs to be understood for therapeutic purposes, as it impacts on every aspect of life. Aboriginal clients may present with identity-related problems, so the practitioner would need to understand the influence of country on the formation of identity. Similarly, loss of culture as a result of displacement also affects notions of identity. If a client exhibits psychotic symptoms, the practitioner should consider the possibility that the client may have been somewhere without permission – sacred sites or sites for women’s or men’s business – or that they have been ‘sung’ as a form of punishment (a powerful spell designed to do ill to a wrongdoer). Thus country should always be considered within any therapeutic process when working with Aboriginal people, and practitioners should ensure the cultural sensitivity of not only their therapeutic process, but also their own belief systems.

Practitioners must adopt and internalise values of cultural sensitivity and respect for diversity before they will be able to work effectively with Aboriginal people. They must exert a conscious effort to understand, accept, and appreciate the unique aspects of the Aboriginal world-view, and also identify those areas where the Aboriginal and the Western world-view may overlap. It is within these areas of overlap that non-Aboriginal practitioners will be the most effective. However, until more Indigenous people become practitioners, there is still a need for non-Aboriginal practitioners to work in areas outside of their own world-view.

Practitioners working in such areas must acknowledge their lack of knowledge, and approach members of the Aboriginal community within which they are working for assistance in understanding the unique dynamics of that community. While the importance of developing a cultural understanding cannot be overemphasised, practitioners must be aware of – and acknowledge – those situations in which their cultural understanding is limited. Practitioners must also be aware that there are certain aspects of Aboriginal culture that they will never understand, and within this awareness, again approach members of the community for assistance. This assistance may exist in the form of a cultural consultant, a practitioner of the opposite sex, or a traditional healer.

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Note

1. There is contention about the use of the terms ‘Aboriginal’ and the more inclusive ‘Indigenous’ term which includes people from the Torres Strait. We use the latter term generally, but refer to the participants in Vicary’s study as Aboriginal people.

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Muslims in Australia have a long and varied history that is thought to predate European settlement (Yasmeen, 2008). Despite this long history of Muslims in Australian society, Muslims have been marginalised by the media and national policies since the 19th century, and frequently misrepresented as undesirable immigrants who are morally inferior (Sanitosis, 2004). This notion of Islam and Muslims as a threat to Australian, or more broadly Western social and cultural values, gained popularity during the 1990s due to local and global events (Aly, 2007). While anti-Muslim sentiment had previously existed, the extreme terrorist act of September 11 in 2001 and the subsequent ‘war against terrorism’ once again threw the spotlight on Islam and Muslims – in the popular media, political debates, and the general public consciousness (Sirin, Bikmen, Mir, Fine, Zaal & Katsiafas, 2008).

People of Middle Eastern backgrounds, often presumed to be Muslims, also tend to experience negativity (Poynting & Noble, 2004). This is despite the fact that Islam is not a monolithic religion which is only limited to a particular race or ethnicity, and Muslims are made up of people from culturally and geographically diverse backgrounds (Human Rights and Equal Opportunity Commission [HREOC], 2004). In a recent study by Pedersen, Dunn, Forrest and McGarty (2011; Study One), a national sample of Middle Eastern Australians were asked about their experiences of discrimination in everyday situations. Middle Eastern Australians reported more discrimination than other Australians including experiences at work, in education, housing, dealings with police, when out shopping, and in sports, as well as instances of being disrespected, treated with distrust, and called names because of their perceived ethnicity.

However, Australians are not as explicitly prejudiced against Muslim
Australians as others in Europe (Pew Research Center, 2008). Prejudice and discrimination are linked to real world effects such as racist violence and various forms of unfair treatment (Abu-Rayya & White, 2010) which are in turn associated with a host of concerns. For example, racism has detrimental effects on general health and well-being, contributing to depression, psychological distress, unhealthy behaviours such as substance misuse, and poor quality of life for minority ethnic groups in Australia (Paradies, Forrest, Dunn, Pedersen, & Webster, 2009). As these authors note, it is especially damaging to young people since such experiences may affect identity formation and reduce access to education and employment at a critical stage of life. This has important implications for the largely young Muslim community in Australia.

Integration of Muslim Australians
The increase of discrimination against Muslims could lead to the undermining of the ability of a segment of the Muslim community to feel ‘at home’ and therefore less integrated in the dominant society (Guimond, de Oliveira, Kamiesjki & Sidanius, 2010). Although used interchangeably in everyday language, integration involves the incorporation of the dominant society’s way of life but without relinquishing one’s familial culture, or culture of origin, whereas assimilation involves relinquishing one’s culture of origin, in favour of a full incorporation into the new or dominant society (Abu-Rayya & White, 2010). Feelings of integration would thus refer to the degree to which an individual from the minority group interacts with the larger society, and the ability to negotiate multiple identities and cultural norms without feeling any psychological conflict (Ozyurt, 2009). It is important to identify any protective factors which might be able to contribute to the level of integration among Muslims in Australia.

The research outlined above suggests that social-psychological variables present in individuals may relate to their feelings of integration. These factors can be broadly placed in three categories. The first is socio-demographic factors which may include gender, ethnicity and visibility of being Muslim. The second is personal identity factors such as self-esteem and ingroup evaluation. The third is interpersonal factors such as intergroup contact (both amount and quality) and experiences of discrimination.

Socio-demographic Factors
We describe these three socio-demographic factors which may be relevant to integration issues with respect to Muslim Australians.

Gender. Pedersen et al. (2011; Study One) found that Australian males of Middle Eastern background reported significantly more discrimination than their female counterparts with respect to dealings with police, public levels of disrespect, distrust and name calling. Pedersen and Hartley (2011) found that Muslim males faced more prejudice than Muslim females. This is consistent with research which refers to Muslim women as the ‘oppressed’, and Muslim men as the ‘oppressors’ (Aly, 2007). However, other research has found that reported abuse and attacks were experienced more by Muslim females, especially among those who wear the hijab; in addition, Muslim females tended to report feeling more vulnerable to discrimination (HREOC, 2004) which could then lead to them feeling less integrated than their male counterparts. So the jury is still out on the point of gender; especially in relation to integration which is a question that has not been asked or answered.

Ethnicity. Pedersen et al. (2011; Study One) found that Middle Eastern Australians had significantly more experiences of discrimination in all nine areas of potential discrimination compared with non-Middle Eastern Australians. Increased reports of discrimination by Middle Eastern Australians compared to non-Middle Eastern Australians have been found in other research (Poynting & Noble, 2004). It remains to be seen whether any ethnicity effects may impact of
feelings of integration.

Visibility. As a response to prejudice against Islam, many Australian Muslims have taken to publicly identifying with their faith to demonstrate their pride in it (Nader, 2005). However, this public identification of their faith could also serve to reinforce the stereotype that Muslim and Western values are incompatible. Eighty-three percent of Australians believe that this is the case, adding on to the distress from identity conflicts for the majority of Australian Muslims of dual-identities (Issues Deliberation Australia [IDA], 2007). This could possibly lead to more prejudice and discrimination from the outgroup, and subsequently to reduced feelings of integration among Muslim Australians.

Identity Factors

Self-esteem. Psychological well-being is well associated with high self-esteem (Luhtanen & Crocker, 1992). This association between having a high evaluation of own worth and good psychological functioning and well-being has especially been found among minority youths (Verkuyten, 1995). Minority individuals such as Muslims in Western societies are often confronted with conflicting values and demands from both ingroup and outgroup which might affect their psychological well-being (Verkuyten, 2007). Thus, having good and stable self-esteem may deflect these negative effects, allowing them to participate better in society and feel more integrated.

Ingroup evaluation. This is also linked to a minority individual’s self-esteem (Verkuyten, 1995). Verkuyten’s work involves how positively or negatively an individual thinks about his or her own social group based on eight general attributes used to describe members of a social group. Positive ingroup evaluation can have a positive effect on an individual’s self-esteem and can influence the social behaviours that could contribute to feelings of integration (Verkuyten, 1995).

Interpersonal factors. Another category of interest which may affect feelings of integration is interpersonal factors. There is a lot of research on the prejudice-reducing effects of intergroup contact (Pettigrew & Tropp, 2006). However, there are only a handful of studies which specifically look at the association of feelings of integration with intergroup contact (e.g., Ata, Bastian & Lusher, 2009).

Contact: Both Quantity and Quality

Having positive experiences and contact with the mainstream outgroup may help individuals from the minority group to feel more integrated as it would help in minimising the negative attitudes from the outgroup. This may then lead to a cycle of more positive interactions between the minority group and the dominant group. In their meta-analysis of empirical studies on the effects of intergroup contact, Pettigrew and Tropp (2006) found that in 94% of studies, intergroup contact was significantly associated with lower intergroup prejudice. In addition, a recent review of Australian contact data that separated results based on the type of contact being measured (quantity or quality) found that quality of contact was the strongest predictor of prejudice (Pedersen, 2009). Based on these findings, if more contact, in terms of both quantity and quality, can reduce prejudice towards minority groups, this could then possibly lead to reduced feelings of ‘otherness’ or social exclusion as experienced by the minority group and to increased feelings of integration.

Discrimination. While the contact variables might contribute to positive feelings of integration, experiences of discrimination is likely to have the opposite effect by contributing to reduced feelings of integration.

Overview of the Present Study

Much of the literature on how anti-Muslim sentiment has affected the Muslim community is either based in the United States or in Britain. In our study, we aimed to
contribute to the emerging literature on Muslims and Islam in Australia. But first we would like to be upfront with our values which informed the present research (see Prilleltensky, 2001, on the issues of community psychology and values). Author 1 is a Muslim woman from a Singaporean background. Author 2 is an anti-prejudice activist who works primarily with asylum seekers some of which are Muslim. We are both opposed to any form of prejudice and discrimination. While we do not pretend to be value-free, we do try to be as objective as possible throughout the paper.

First, we investigated whether the constructs used in the Pedersen et al. (2011; Study One) study on Middle Eastern Australians would also be useful in terms of understanding the experiences of Muslim Australians (and subsequently, their feelings of integration). More specifically, we investigated whether there were any differences in the experiences of discrimination between genders, as well as between people from a Middle Eastern background and people of other ethnicities. Based on the findings by Pedersen et al. (2011), it was expected that if any gender differences occurred, they would involve male Muslim Australians experiencing more discrimination. It was also expected that Muslim Australians from a Middle Eastern background would face significantly more discrimination as compared to Muslim Australians of other ethnicities. In addition, the present study looked at any differences in the experiences of discrimination between those who reported being visible Muslims and those who did not. It was expected that visible Muslims would face significantly more discrimination than non-visible Muslims.

A second aim of the present study was to examine the protective factors for Muslim Australians to feel integrated in Australian society. We were particularly interested in the socio-demographics, the personal identity and inter-group variables outlined previously. Given the lack of social-psychological research in this area, we made no specific predictions in this regard.

The third aim involved qualitatively exploring the issues and concerns among Muslims in Australia. As all methods have their own individual strengths and weaknesses, it was hoped that using both quantitative and qualitative data would enable a fuller understanding of the experiences of Muslims living in Australia. Using both quantitative and qualitative methods in research have been found to be beneficial, especially when looking at cultural or social issues (Cohen, 2007).

Method

A questionnaire was posted online in early December 2009 until the end of March 2010; 110 responses were collected overall. Invitations to participate, including a link to the questionnaire and a request to send it on to other individuals and groups, were emailed to various Muslim organisations in Australia (as noted, Author 1 is Muslim and had contacts with these organisations). Only Muslims above 18 years of age and who were Australian citizens were eligible to participate. The questionnaire consisted of six sections in the following order: quantitative measures for socio-demographics, self esteem, ingroup evaluation, integration, contact, experiences of discrimination. There was then a single open-ended qualitative question.

Socio-demographics

Participants were asked to state their age in years, sex (1 = male, 2 = female), their political orientation (1 = strongly left to 5 = strongly right) and education level (1 = did not complete secondary school to 6 = postgraduate degree). They also indicated if they were born in Australia, or if they came as refugees or migrants to Australia, as well as responded to questions relating to their ethnic or cultural background. In addition, participants were also asked to indicate if...
they considered themselves as visible or identifiable Muslims in terms of their everyday appearance and to provide details of such if they responded ‘yes’.

Rosenberg Self-esteem Scale

This was used to rate participants’ level of personal self-esteem. Items were responded to using a 7-point Likert scale. Harborg (1993) found this scale to have good validity and reliability (.79). Higher scores indicated higher personal self-esteem.

Ingroup Evaluation

Participants were asked to indicate the extent of their agreement with eight general attributes which may be used to generally describe members of a social group. For our study, participants were instructed to specifically refer to members of the Islamic faith. Items were responded to on a 7-point Likert scale. Islam and Hewstone (1993) found the scale had an adequate reliability (.67). Higher scores indicated a more positive evaluation of the ingroup.

Muslim Cultural Integration Scale (MCIS)

This was developed by Ozyurt (2009) to measure the participants’ attitudes towards the dominant society and culture. He found it to have an adequate reliability (.73). Items were responded to on a 7-point Likert scale. For the present study, references to America have been changed to Australia. Also, two questions were added to make the scale more balanced as it appeared biased towards negativity. After appropriate recoding, higher scores indicated a higher level of integration.

Contact with Outgroup

Participants were asked to indicate the amount (0 = None, 6 = A lot) and quality (0 = Negative, 3 = Both positive and negative, 6 = Positive) of contact with non-Muslim Australians.

Experience of Discrimination

Participants were asked how often they experienced discrimination and felt that they are treated negatively because of their perceived religion in everyday situations (1 = Very rarely to 5 = All the time). The nine everyday situations were: discrimination at the workplace, in education, housing, policing, shops/restaurants, public places, generally treated with disrespect, distrust, and called names (Study One of Pedersen et al., 2011; The Challenging Racism Project, 2011).

Qualitative Question

There was an open-ended question at the end of the questionnaire where participants could give their thoughts on their experiences living in Australia, explain their answers, or give more specific examples to any of the questions in the questionnaire. Fifty-two participants (47%) responded to this question.

Results

Demographic Information

The sample of 110 Australian Muslims were predominantly from Western Australia (88%), had an average age of 30 years (range 18–70), most of which were female (66%). Most participants were highly educated with 76% of the sample holding a degree or postgraduate qualification. The political preference of the majority of the sample was neither strongly left nor strongly right (39%), 25% leaning towards left-wing, and 16% were somewhat right-wing. Twenty percent of the sample indicated not having any political preference.

Slightly more than half of the participants were migrants (55%), there were two participants who were refugees (2%), and the rest were born in Australia (43%). The participants came from diverse ethnic backgrounds, the most common being Asian (33%), followed by Middle Eastern (17%), European (16%), from the Indian subcontinent (16%) and African (4%). There were also 15 participants who described themselves as having with dual ethnicities (14%). About half of the participants considered themselves as visible or identifiable Muslims (51%) in terms of their everyday appearance and clothing. Of this group, they tend to be females wearing the
hijab (81%; with 3% wearing the niqab, or full face veil).

Scale Descriptives

Table 1 presents the descriptive characteristics for each scale, setting out the scale means and standard deviations, the range of scores, the number of items in each scale, and the scale $\alpha$ coefficients. As can be seen, all scales had satisfactory reliability. As previously noted, two questions were added to the MCIS; the addition of the two questions increased the MCIS reliability from .67 to .75.

The level of integration of the sample of Muslim Australians was just above the midpoint. Participants tended to have a favourable evaluation of their ingroup. The amount of contact with non-Muslims was above average, with the quality of contact likely to be quite positive. The frequency of discrimination scores indicated that participants generally did not encounter discrimination; the negative encounters that did occur were more likely to happen in shops or restaurants, while the least discrimination occurred in policing situations.

Aim 1: Experiences of Discrimination among Muslims in Australia

By gender. A 2 x 9 MANOVA was used to examine if there were gender differences in the frequencies of discrimination. Univariate analyses identified one significant difference which was in housing situations $F(1,66) = 7.15; p = .009$ where males ($M = 2.13; SD = 1.22$) reported more discrimination than females ($M = 1.49; SD = 0.76$).

By ethnicity (Middle Eastern vs. Others). A second MANOVA was conducted

<table>
<thead>
<tr>
<th>Scales</th>
<th>M</th>
<th>SD</th>
<th>Range</th>
<th>$k$</th>
<th>$\alpha$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Integration</td>
<td>4.01</td>
<td>.85</td>
<td>1-7</td>
<td>9</td>
<td>.75</td>
</tr>
<tr>
<td>Self-esteem</td>
<td>5.60</td>
<td>.88</td>
<td>1-7</td>
<td>10</td>
<td>.84</td>
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<td>.98</td>
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<td>8</td>
<td>.86</td>
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<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Contact – quality</td>
<td>4.30</td>
<td>1.19</td>
<td>0-6</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Frequency of discrimination</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Workplace</td>
<td>2.12</td>
<td>.90</td>
<td>1-5</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>2. Education</td>
<td>1.96</td>
<td>.98</td>
<td>1-5</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>3. Housing</td>
<td>1.81</td>
<td>1.08</td>
<td>1-5</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>4. Policing</td>
<td>1.71</td>
<td>.97</td>
<td>1-5</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>5. Shops/restaurant</td>
<td>2.57</td>
<td>1.03</td>
<td>1-5</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>6. Public places</td>
<td>2.35</td>
<td>1.00</td>
<td>1-5</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>7. Disrespect</td>
<td>2.51</td>
<td>.81</td>
<td>1-5</td>
<td>-</td>
<td>-</td>
</tr>
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<td>8. Distrust</td>
<td>2.29</td>
<td>.91</td>
<td>1-5</td>
<td>-</td>
<td>-</td>
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<tr>
<td>9. Name calling</td>
<td>2.27</td>
<td>.97</td>
<td>1-5</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Discrimination scale</td>
<td>2.21</td>
<td>.67</td>
<td>1-5</td>
<td>9</td>
<td>.83</td>
</tr>
</tbody>
</table>
to examine any differences in experiences of discrimination in terms of ethnicity, more specifically, between Middle Eastern (ME) and non-ME Australian Muslims. Univariate analyses identified four significant differences between the two groups. With respect to housing, ME Australians reported more discrimination ($M = 2.67; SD = 1.41$) than other participants ($M = 1.56; SD = 0.82$) $F(1,66) = 11.59; p = .001$. With respect to dealings with the police, ME Australians reported more discrimination ($M = 2.33; SD = 1.23$) than other participants ($M = 1.59; SD = .93$) $F(1,66) = 4.54; p = .037$. With respect to shopping, ME Australians reported more discrimination ($M = 3.44; SD = 1.01$) than the other participants ($M = 2.39; SD = .95$) $F(1,66) = 9.51; p = .003$. With respect to discrimination in general public places, ME Australians reported more discrimination ($M = 3.00; SD = .71$) compared with other participants ($M = 2.15; SD = .94$) $F(1,66) = 6.65; p = .012$.

By visibility. Another MANOVA was conducted based on participants’ reported visibility as a Muslim. Univariate analyses identified two significant differences. With respect to shopping, visible Muslims ($M=2.74; SD=0.99$) reported more discrimination than non-visible Muslims ($M=2.23; SD=1.00$) $F(1,62) = 4.02; p = .049$). With respect to disrespectful treatment, visible Muslims ($M=2.71; SD=0.58$) reported more discrimination than non-visible Muslims ($M=2.27; SD=.87$) $F(1,62) = 5.79; p = .019$.

Overall, males reported more discrimination in one setting, Middle Eastern Muslims reported more discrimination in four settings, and visible Muslims reported more discrimination in two settings.

**Aim 2: Identification of Protective Factors for Integration among Muslims in Australia**

As can be seen from Table 2, there were significant correlations between integration scores and four variables: participants who reported being visible Muslims, and those who had a higher evaluation of their ingroup, had lower integration scores. In addition, participants who had higher amount of contact, or more positive contact with the outgroup, had higher integration scores.

Using these correlated variables, a hierarchical multiple regression analysis was conducted to establish which of them could account for a significant proportion of the variance in integration scores (see Table 3). Visibility, as a socio-demographic factor, was entered as a predictor on step one. The significant personality variable (ingroup evaluation) and interpersonal variables (amount and quality of contact) variables were entered on step two.

The one socio-demographic variable included (visibility) predicted integration scores on step one. At the end of step 2, visibility and both contact variables significantly predicted integration. More specifically, the higher the integration, the more likely it was that the participants reported being a non-visible Muslim and the more quantity and quality of contact with non-Muslims. In combination, the predictor variables accounted for 33% of the variance in integration scores.

**Aim 3: Current Issues and Concerns among Muslim Australians**

The percentages noted for each theme in Table 4 are based on the total qualitative data (the number of participants who made comments and not on total sample). Thematic analysis was conducted on the qualitative responses. Themes, which are simply particular characteristics or patterns found in the data, were generated inductively, using a form of open coding as suggested by Corbin and Strauss (1990). An independent rater coded the data as well to ensure the validity of the coding. Inter-rater reliability was determined according to the guidelines of Landis and Koch (1977) on the measurement of categorical data (kappa analyses). As most of the responses were
### Table 2

**Correlation matrix**

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Integration</td>
<td>1</td>
<td>0.83</td>
<td>0.05</td>
<td>0.88</td>
<td>0.03</td>
<td>0.10</td>
<td>-0.23*</td>
<td>0.12</td>
<td>-0.25*</td>
<td>0.36**</td>
<td>0.339**</td>
<td>-0.146</td>
</tr>
<tr>
<td>2. Age</td>
<td>1</td>
<td>-</td>
<td>-0.21</td>
<td>0.19</td>
<td>-0.205</td>
<td>0.19</td>
<td>-0.026</td>
<td>-0.14</td>
<td>-0.025</td>
<td>-0.06</td>
<td>-0.056</td>
<td></td>
</tr>
<tr>
<td>3. Gender</td>
<td>1</td>
<td>0.04</td>
<td>-0.032</td>
<td>-0.130</td>
<td>0.34**</td>
<td>0.148</td>
<td>0.219*</td>
<td>0.095</td>
<td>0.195</td>
<td>0.017</td>
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<tr>
<td>4. Political position</td>
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<td>-0.029</td>
<td>0.196</td>
<td>0.101</td>
<td>0.140</td>
<td>-0.108</td>
<td>-0.094</td>
<td>0.048</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>5. Education</td>
<td>1</td>
<td>0.050</td>
<td>0.001</td>
<td>0.090</td>
<td>0.071</td>
<td>0.194</td>
<td>0.161</td>
<td>0.004</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Ethnicity</td>
<td>1</td>
<td>-0.194</td>
<td>-0.005</td>
<td>0.028</td>
<td>0.095</td>
<td>-0.021</td>
<td>-0.260**</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Visibility</td>
<td>1</td>
<td>0.206*</td>
<td>0.240*</td>
<td>0.38</td>
<td>0.101</td>
<td>0.276**</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>8. Self-esteem</td>
<td>1</td>
<td>0.227*</td>
<td>0.202*</td>
<td>0.143</td>
<td>0.161</td>
<td></td>
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</tr>
<tr>
<td>9. Ingroup evaluation</td>
<td>1</td>
<td>-0.063</td>
<td>-0.062</td>
<td>-0.007</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Contact (quantity)</td>
<td>1</td>
<td>0.139</td>
<td>0.124</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Contact (quality)</td>
<td>1</td>
<td>0.141</td>
<td></td>
<td></td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>12. Discrimination scale</td>
<td>1</td>
<td></td>
<td></td>
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</tbody>
</table>
only a few sentences long, the unit of analysis was each response taken as a whole. This also allowed the same comment to be coded for different themes.

Three major themes were identified – existence of prejudice, issues within the Muslim community, and the role of the media in prejudice. Of the three variables, as per Landis and Koch (1977), one had an almost perfect match (0.81 – 1.00), and two had a substantial match (0.61 – 0.80).

Existence of prejudice. Among the responses which mentioned prejudice, participants either commented on their experiences of discrimination or did not feel it was a big issue in Australia (coded 1 = Did not mention prejudice, 2 = Experiences of discrimination, 3 = Did not think it was a big issue). Inter-rater reliability was substantial, k = .69 (p < .001).

Issues within the Muslim community. Two issues were apparent in the data. First, respondents pointed out certain behaviours of some Muslims which may contribute to the prejudice towards themselves. Second, some respondents mentioned ingroup discrimination which often arose out of cultural differences and practices within the ingroup (coded 1 = Did not mention, 2 = Muslim behaviours contributing to prejudice, 3 = Ingroup discrimination). Inter-rater reliability was substantial, k = .73 (p < .001).

Role of media. Some participants also acknowledged the role of the media in espousing prejudice towards Muslims (coded 1 = Did not mention media, 2 = Mentioned media). Inter-rater reliability was almost perfect, k = .88 (p < .001).

Discussion

The broad purpose of the present study was to provide an avenue to achieve a greater understanding about Muslims and Islam in the Australian context. The quantitative aspect of the present study looked at experiences of discrimination and predictors of integration; the qualitative to give a fuller understanding of the experiences of Muslim Australians.

Aim 1: Experiences of Discrimination among Muslims in Australia

Our results only partially supported the findings of Pedersen et al. (2011; Study One) regarding gender differences. In our study, only one significant difference was found with males reporting more discrimination in
housing (there were four differences in the previous study). Differing results may be due to the different ethnicity of the present sample as well as location. In the Pedersen et al. study, participants came from across Australia, while most of the participants in the present study were primarily based in Western Australia. Context matters (Dunn Forrest, Burnley, & McDonald, 2004).

In terms of ethnicity, we found significant differences in four out of nine areas where Middle Eastern Muslims reported significantly more discrimination – in housing situations, dealings with police, in shops and restaurants, and in general public places. While Pedersen et al. (2011; Study One) found significant differences with all nine measures, they were comparing with a wider population than in our study which investigated Muslim experiences. While there is an interchangeability of ‘Muslims’ and ‘Middle Eastern’ in the public discourse (Fozdar, Wilding & Hawkins, 2009), our study indicates that discrimination is experienced more by Muslims of Middle Eastern background indicating the presence of racism in public attitudes. Other Australian research finds that Middle-Eastern and Asian children report relatively high levels of discrimination (Runions, Priest, & Dandy, 2011). Such findings are of continued concern as prejudice and experiences of discrimination have been found to have negative effects on health and psychological well-being (Paradies et al., 2009) as well as to contribute to social problems (Abu-Rayya & White, 2010). Coupled with previous research regarding Middle-Eastern children, our findings are worrying.

In terms of visibility, our study found that participants who reported being visible Muslims experienced significantly more discrimination in two out of nine areas as compared to those who were not visible Muslims – being treated with disrespect and called names in the public sphere (shops/restaurants and public places). This finding supports anecdotal evidence of such discrimination in previous research for Muslim women who wear the hijab which was the main covering for participants in our study (Browning, Jakubowicz & Gold, 2004; Poynting & Noble, 2004). Such findings are a cause of concern since as previously mentioned, many young Muslims in Australia and elsewhere have taken to publicly identify with their faith as a response to the escalating anti-Muslim sentiment (Nader, 2005).

**Aim 2: Identification of Protective Factors for Integration among Muslims in Australia**

Results from the correlations and regression indicate that protective factors

<table>
<thead>
<tr>
<th>Themes and subthemes</th>
<th>% within the theme</th>
<th>% overall</th>
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</thead>
<tbody>
<tr>
<td>Existence of prejudice</td>
<td></td>
<td>40.7</td>
</tr>
<tr>
<td>Experiences of discrimination</td>
<td>22.2</td>
<td></td>
</tr>
<tr>
<td>Didn’t see prejudice as big issue</td>
<td>18.5</td>
<td></td>
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<tr>
<td>Issues within Muslim community</td>
<td>29.6</td>
<td></td>
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<tr>
<td>Muslim behaviours contributing to prejudice</td>
<td>22.2</td>
<td></td>
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<tr>
<td>Ingroup discrimination</td>
<td>7.4</td>
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<tr>
<td>Role of media</td>
<td>20.4</td>
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override simple experiences of discrimination in terms of affecting feelings of integration among Muslims in Australia. From the correlations, it was found that participants who reported being visible Muslims, and those who had a more positive evaluation of their ingroup, had lower integration scores. While we envisaged that being a visible Muslim could negatively affect integration, we did not anticipate that being positive about being Muslim would negatively affect integration. This unexpected result, however, could simply be because of society’s expectations of assimilation. In addition, participants who had higher amount of contact, or more positive contact with the outgroup, had higher integration scores. This supports past related research as previously outlined; in particular Pettigrew and Tropp (2006). No relationship was found with self-esteem and integration; this stresses the need to emphasise group processes over individual ones when looking at cultural issues (Pedersen, Attwell & Heveli, 2005).

The regression indicated that out of the four correlated factors, three (one socio-demographic and two interpersonal factors) had a significant effect on feelings of integration among Muslims in Australia. More specifically, Muslims who were less visible, and had higher amount and more positive intergroup contact, were more likely to feel more integrated. To the best of our knowledge, there are no studies in the existing literature on protective factors for integration using all of the variables used in the present study. However, the findings from the present study, especially with regards to the contact variables, support previous research on the role of contact in intergroup relations, specifically in reducing prejudice (Pettigrew & Tropp, 2006). Since intergroup contact often leads to reduced prejudice by the dominant group, it could also work the other way by increasing feelings of integration for the minority group (Ata et al., 2009). The contributions of contact in reducing prejudice have been found elsewhere (IDA, 2007; Mavor, Kanra, Thomas, Blink & O’Brien, 2009). Regarding the finding that high visibility impeded feelings of integration, we then come back to the two way street of integration as argued by Hollands (2001) – this involves not only Muslim Australians but the actions of the host country. Previous research also notes the ambivalence some Australians feel about the hijab (Dunn 2009; Pedersen & Hartley, 2011; Yasmeen, 2008).

**Aim 3: Exploring the Current Issues and Concerns among Muslims in Australia**

In order to understand the full picture of the experiences of Muslims in Australia, it was important to get an idea of their concerns regarding integration. This was done through the qualitative aspect of the present study. The three relevant themes identified from the sample were the existence of prejudice, the role of the media in prejudice, and issues within the Muslim community.

*Existence of prejudice.* This first theme is relevant to the first quantitative aim of the present study, which is the exploration of the experiences of discrimination by Muslims in Australia. Among participants who did refer to prejudice and discrimination, they referred to their personal experiences mostly in the public sphere, in the workplace and general insensitivities towards Muslims. For example, “I usually find that after certain events like terrorist bombings, 9/11, Bali bombing etc, public opinion was worse. I found that strangers in shopping centres always make derogatory comments or give us evil looks.” These qualitative data support the quantitative findings of the present study where the participants mostly reported experiences of discrimination in terms of treatment in public spheres. Regarding workplace discrimination, one participant noted: “After wearing a hijab I was treated much differently by my colleagues and supervisors where they did not think I was good enough to do the same job anymore ...”
Other research also finds discriminatory practices on the basis of culture; for example, what employers call ‘organisational fit’ (Colic-Peisker & Tilbury, 2006, p. 211).

An example of general insensitivities towards Muslims is:

Cultural awareness is an official policy of all government workplace, yet very few, if at all, understand what it means, including those who advocate it, such as DIAC. ... A racist environment is endemic and all white Australians grow up conditioned to it. ...they don’t even understand that many of their friendly attitudes and behaviour are lined with racism though not outwardly so. Ignoring you or not to notice your presence is the worst form of racist attitude Australians comfortably pass on.

Conversely, over half of the participants did not mention prejudice or did not feel it a big problem within Australia; for example:

If a Muslim applies for a job for which they are qualified and are pleasant throughout the interview, but calmly and clearly explained their requirements such as wearing hijab or time to pray, I believe that most Australian employers would be happy to oblige.

These responses reflect the diversity of opinions and experiences of Australians, Muslims and non-Muslims alike, as well as findings that the majority of non-Muslim Australians are not explicitly prejudiced especially in comparison to European countries (Griffiths & Pedersen, 2009; Pew Research Center, 2008).

Role of media. The second theme also relates to the first quantitative aim of the present study in terms of its contributions to experiences of discrimination. About a quarter of the participants acknowledged the role of the media in espousing prejudice towards Muslims. For example, “I think the media is playing almost the biggest role in structuring an image of Muslims in people’s heads. It’s not only giving bad impressions to non-Muslims, but also to Muslims between each other.”

This is consistent with previous research on the negative construction of Islam and Muslims in the public discourse and how it contributes to prejudice (e.g., Al-Natour, 2010; Aly, 2007; Ata, 2010; Dunn et al., 2007; IDA, 2007; Kabir, 2007; Pedersen & Hartley, 2011). Relatedly, with regard to print coverage of the Cronulla Riots, Quayle and Sonn (2009) found that discourse of ‘White Australia’ dominated over discourse from a Muslim (or Lebanese) viewpoint.

Issues within the Muslim community. Instead of just focussing on prejudice from non-Muslims, slightly less than a third of participants also recognised that there were problems within the Muslim community itself. Two issues were apparent from these data. Among those who mentioned Muslim issues, about two-thirds of the participants pointed out certain behaviours of some Muslims which may contribute to the prejudice. For example:

... [in] my experience as a Muslim so far a lot of Muslims choose to seclude themselves and not integrate into society, however I feel the option is there for them to become contributing members of society and I think as time goes on the general public are becoming more aware and more accepting of Muslims.

This particular behaviour of secluding themselves and engaging in cultural huddles not only has a direct effect on feelings of integration, it could also potentially lead to the dominant group having the misconception that Muslims are not accepting of Australian
values and are refusing to integrate (these were common themes of non-Muslim Australians as found by Pedersen & Hartley, 2011). This could then potentially lead to increased prejudice (which then in a cycle, contributes to reduced feelings of integration).

Secondly, about a third of the participants who mentioned Muslim issues specifically mentioned ingroup discrimination which often arose out of cultural differences and practices within the ingroup. For example: *Sometimes I feel more judged/stereotyped by other Muslims than non-Muslim. From my experience in both non-Muslim and Muslim communities I think identifying with a particular cultural background can bring more negative experiences than identifying with a faith.*

These responses imply that cultural-specific ideas of Islam and Muslim practices continue exist and be reaffirmed by some Muslims (Yasmeen, 2008). It also indicates the Muslim community’s acknowledgement that prejudice is a dynamic concept, which is neither unidirectional, nor limited to outgroup experiences (Yasmeen, 2008).

**Conclusions**

The present study makes an important contribution to the emerging literature on the status of Australian Muslims in the current political climate in terms of their experiences of discrimination and how this affects feelings of integration. Our findings suggest that Muslim Australians still face discrimination in significant areas of their everyday lives based on their religion. However, a more important finding from the present study is that there are protective factors, especially intergroup contact (both quantity and quality) which override these simple experiences of discrimination in terms of affecting feelings of integration among Muslims in Australia. It might then be more beneficial for future research to move away from exploring the relationships between the individual psychological variables, and more towards using inter-group variables in studies specific to feelings of integration.

What is clear from past and present studies is that an individual’s level of integration in society is not something clear-cut; there are many overlapping identity and interpersonal factors unique to each individual which affects their experiences of living as a Muslim in Australia (Ata et al., 2009). The qualitative data suggests that at least some segments of the Muslim community recognise that prejudice is not a single, unidirectional concept and that they have to take an active role in feeling integrated in society. This does not take away from the fact that prejudice and discrimination exist against Muslim Australians (also see Griffiths & Pedersen, 2009), and it is the responsibility of mainstream Australia to take action against this.

Positive integration is possible, and the data suggest that in spite of the everyday discrimination still faced by the Muslim community, Muslims recognise that they do not have to let it affect their sense of belonging and limit their participation in society. They also recognise that they have to take on a more active role in integrating in Australian society, by reducing prejudice both from outside and within their community. Such increased positive engagement with the wider society could only naturally lead to increased feelings of integration. It is hoped that future studies would expand on the findings from the present study in order to understand Muslims in Australia better, and possibly contribute in the generation of basic non-discriminatory social policies which are integral to a nation’s development.

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The total number of international migrants has increased from an estimated 150 million ten years ago to an estimated 214 million (United Nations, 2009). With the increase in migrant numbers, the Australian government has established numerous laws, legislations and policies to monitor the labour market outcomes of migrants. However, many of these laws and policies are either inadequate or inadequately utilised. For example, prejudices and discriminations toward asylum seekers, skilled or unskilled workers from overseas and anyone with ‘a Middle Eastern appearance’ demonstrate the perpetual xenophobia among Australians (Poynting & Noble, 2004, Jupp, Nieuwenhuysen, & Dawson, 2007). Likewise, the Equal Employment Opportunity (EEO) legislation which focuses on the equal employment of women does not have a policy to adequately address the concerns of migrants or migrant women. Thus, many migrant women continued to be employed in low paying and low status gender segregated occupations (Martin 1984; Parr & Guo, 2005). This policy also treats women as a single homogeneous group and fails to consider their multiple and intersecting identities. As a result, issues and challenges faced by ethnic minority women remain largely ignored (Syed & Ali, 2005). This is a considerable issue when you consider that a large proportion of migrants to Australia in recent years are women (Australian Bureau of Statistics, 2006). Previous international migration research has also tended to focus explicitly on men and neglected migrant women’s acculturation experiences (Kofman, 2000; Pedraza, 1991; Zlotnik, 2003).

Acculturation has been conceptualised as an ongoing process of adjustment in which migrants adapt to the cultural values and life styles of the new society or culture (Bhugra, 2004). According to Bhugra (2004), the adaptation process consists of four stages: Pre-migration, beginning, middle and final
stages. Each stage requires different skills or abilities that affect adjustment. Individuals who possess the requisite skills and who are motivated to migrate will adjust better compared to those who are unwilling to migrate or who do not have the necessary skills for new adjustment. Another model of acculturation is the model proposed by Berry (1980, 2001) who posits that acculturation occurs when individuals are exposed to a prolonged, continuous and first-hand contact with a new culture with consequential psychological as well as cultural changes. This bi-dimensional model hypothesises that acculturation entails two orthogonal behavioural changes, namely: (1) losing customs, beliefs and values specific to their minority culture, and simultaneously (2) gaining customs, beliefs, and values of the host culture (Berry, 1980, 1997; Birman, 1994). Therefore, acculturating individuals can adopt one of four acculturation strategies. The most positive outcome is integration when individuals adopt the new culture and retain the old (Tartakovsky, 2007). Assimilation occurs when individuals relinquish the practices of their original culture and adopt the culture of the host society. If a person decides to retain the practices of his or her original culture and reject the new culture, that person is selecting the separation strategy. Finally, some individuals may choose marginalisation from both original and new culture.

Despite its widespread popularity, some theorists have argued that this model underemphasised the influences of contextual and individual factors. Recent evidence suggests that demographic factors may affect migrants’ acculturation experiences and acculturation strategies (Aroian & Norris, 2000; Bakker, Van der Zee, & Van Oudenhaven, 2006; Berry, 1997; Dion & Dion, 2001; Phinney, 1990). Previous studies have found that migrant women undergo comparatively different acculturation experiences when compared to their male counterparts (Ho & Alcorso, 2004; Sam & Berry, 2006). Migrant women experienced fewer employment opportunities. Ho and Alcorso (2004) reported that, after three and a half years in Australia, 61% of male migrants were successfully employed compared to only a third of migrant women. Once in the workforce, migrant men tended to be employed in higher status occupations and earned a higher salary than migrant women. Migrant women who were employed often worked in low status, low pay and gender segregated work such as care-giving, nursing, restaurant, hotel services, and domestic work. These jobs are widely perceived to be an extension of women’s unpaid work in the family (Dustmann & Schmidt, 2001) and thus not valued as an economic activity. Indeed, many migrant women experienced significant occupational downgrading because their overseas qualifications were not recognised or because of their poor proficiency in writing and speaking English (Driedger & Hallis, 2000). Furthermore, migrant women who work experience a “double burden” or “role overload” which can lead to negative psychological outcomes (Dion & Dion, 2001; Noh, Wu, Speechley, & Kaspar, 1992). According to this hypothesis, migrant women are more susceptible to psychological distress because of the compounded pressures from employment work, household and child-care responsibilities (Dion & Dion, 2001). Power hypothesis argues that the psychological distress experienced by migrant women is in part due to the unequal allocation of power (e.g., decision marking) in the family (Dion & Dion, 2001).

Similarly, Itzigsohn and Giorguli- Saucedo (2005) found that men and women adopted different acculturation strategies with women more likely to identify with the receiving host country than men. According to Berry (1997), changes in psychological distress among migrants vary across the adoption of the four strategies. Berry (1997) argues that integration provides the best form
of adaptation to psychological distress as opposed to assimilation, separation or marginalization. However, there are mixed results on this: some studies found psychological distress to be lower in migrants who adopted integration as their adaptive strategy (Tartakovsky, 2007; Ward & Rana-Deuba, 1999) while others reported that integration was negatively associated with migrants’ self esteem and psychological health (Phinney, Chavira, & Williamson, 1992). Given these contradictory findings, Berry’s (1997) model may be limited in its ability to fully explain the relationships between the experiences of acculturation and psychological distress.

Psychological Distress

Psychological distress refers to a range of feelings experienced by people who may have identifiable mental health problems such as anxiety or mood disorders, or who may be highly stressed for situational reasons (Goldberg, Gater, Sartorius, & Ustun, 1997). Previous studies have reported that migrant women are highly susceptible to psychological distress (Aroian, Norris, & Chiang, 2003; Aroian, Norris, González de Chávez Fernández, & Averasturi, 2008). For example, Jirojwong and Manderson (2001) found high levels of psychological distress in a group of unemployed Thai women in Australia. Female migrants from the former Soviet Union reported greater psychological distress than male migrants (Aroian et al., 2003). Similarly, a meta-analysis of published research from the 1990s, which compared gender differences in migration responses, found that 83% of papers reported greater levels of stress among migrant women than in migrant men (Aroian, 2001). These findings suggest that the acculturation experiences of male and female migrants differ with more migrant women than migrant men reporting psychological distress. Psychological stress is also positively associated with strokes and suicides in the migrant/migrant women population (Bhugra, 2004; Carney & Freedland, 2002). Given this positive association, psychological distress is an important factor to consider when investigating female migrant populations. Additionally, there are contradictory findings about the impact of acculturation on the psychological health of migrants. For instance, while several studies have found that acculturation led migrants to experience ill health and psychological distress (Fitinger & Schwartz, 1981; Sue & Marishima, 1982), other studies have found that acculturation actually contributed to better health and social outcomes (Fitinger & Schwartz, 1981; Ortega, Roseheck, Alegría, & Desai, 2000). Ferguson (1999) and Michael (1996) both found that despite suffering from tremendous migration difficulties with little or no support afforded to them, a group of female Vietnamese refugees in Australia and a group of migrant girls in New York City had better than expected health outcomes. These studies suggest that migrant women may be more resilient than often portrayed in the literature (Trueba & Spindler, 1999).

Resilience

Rutter (1985) defined resilience as the display of self-confidence and social competence that increases through mastery and meeting responsibilities. Resilience is most often identified as a response to adversity. Adversity is the catalyst for the development of resilience (Rutter, 1987, 2007). According to Gordon (1995), resilience is the ability to thrive, mature, and enhance one’s competence in the face of adversity, whether biological or environmental, chronic or once-off, or consistent or infrequent. Resilience requires that individuals draw upon all their resources - biological, psychological, cultural, economic, social or environmental - in order to overcome adversity. Resilience is thus an ordinary, long-term process of adjustment to adversity that all individuals experience (Masten, 2001) but some have more resources on which to draw than others.
Resilience has been found to have a positive effect on mental health (Campbell-Sills, Cohan, & Stein, 2006) and to be a significant predictor of migrant women’s psychological health (Christopher & Kulig, 2000). However, it has rarely been directly measured (Gillespie, Chaboyer, Wallis, & Grimbeek, 2007; McAllister & McKinnon, 2009) or investigated as a mediating factor in migrant women’s adjustment to a new culture or society.

To address this gap in the literature, the present mixed-methods study is conducted to firstly explore the acculturation experiences of a group of migrant women in Australia, and secondly, to investigate the mediating role of resilience in the relationship between acculturation and psychological distress.

**Method**

**Research Design**

The methodology applied in this study included both qualitative (semi-structured interviews) and quantitative (survey) methods. This is to ensure concurrent triangulation which aims to result in “well-validated and substantial findings” (Creswell, 2003, p. 217). The quantitative part of the study is conducted with a survey, whereas the qualitative part of the study is conducted with semi-structured interviews. Semi-structured interview was considered the most appropriate method of data collection because it allowed participants the freedom to express their personal views which may be highly sensitive (e.g., they may have encountered upsetting racist comments). The structured interview guide also provides a clear set of instructions for interviewers and can provide reliable and comparable qualitative data. The survey was then conducted to quantify the issues identified in the interviews and to understand how prevalent they may be in a larger population.

The study was conducted after gaining approval from the University of Queensland’s Human Research and Ethics Committee. Participants in the interview were assured that no identifiable personal information would appear on any work resulting from this research. Survey participants were asked to sign a consent form indicating that their participation was entirely voluntarily and were likewise assured that no identifiable personal information would appear in any work as a result of the research.

**Participants and Procedures**

Participants were recruited via respondent driven sampling, a form of snowball sampling which produces estimates that are “asymptotically unbiased” (Heckathorn, 2007). Specifically, the researchers elicited co-workers, friends, and acquaintances for the interview. These initial friends and acquaintances then in turn asked three of their co-workers, acquaintances, or friends if they would be willing to participate in the interview. Recruiters were also contacted two weeks later by the researchers to ascertain the recruiters’ relationship to the successful recruits. The criteria set for the study was that participants must all be female aged 18 years or above and who have migrated to Australia after the age of 15. They must have high school level English proficiency, had engaged in permanent work at some point in their life and were not suffering from a mental disorder as defined in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV). Refugee women were excluded since prior research indicated that their pre-migration experience was significantly different from that of other migrants (Sam & Berry, 2006).

**Part 1: Semi structured interview.**

Prior to participating in the interview, interviewees were provided with a brief information sheet that outlined the purposes of the interview and the confidential and voluntary nature of their participation. An interview guide was also used for the semi-structured interview. The semi-structured interview instrument consisted of questions...
about participants’ demographic background (e.g., age, country of birth, age they came to Australia etc), current/past employment status and acculturation experiences. At the start of the interview, participants were told that the researchers were interested in their migration experiences and were asked to describe some of the challenges they faced when they migrated to Australia such as, “Can you describe to me some of the major challenges you faced when you moved to Australia (for example, social, work and personal challenges)?” Questions were framed in an open-ended manner to facilitate dialogue and, when necessary, follow-up questions were used to clarify ambiguous responses. The interviews were all held at venues convenient to the participants, most commonly being at their homes or workplaces. Interviews were all conducted in English and taped recorded. On average, each interview lasted between 60 to 90 minutes. A total of 30 migrant women were recruited for the interviews. All agreed to participate which corresponded to a 100% response rate. The mean age of the interviewees was 47.83 years and on average they have lived in Australia for 20.22 years. Interviewed participants migrated from a variety of regions, including Africa, Europe, North America, Scotland, and South East Asia.

**Part 2: Survey.** After the interview, participants were asked to recruit one subject for the survey. Each participant was given a survey package containing a uniquely coded questionnaire, consent form, basic information about the study which outlined the purpose of the research and emphasised that participation was voluntarily as well as confidential, and a return paid self-addressed envelope. The survey was uniquely coded so that only one respondent could answer the survey. The successfully recruited participants were then asked to recruit one other participant. Out of a total of 185 questionnaires distributed, 108 questionnaires were returned, representing a 58% response rate. Participants comprised 108 female migrant women recruited from Brisbane and Sydney in Australia. Inclusion criteria were the same as for Part 1 of the study. The mean age of participants was 48.98 years ($SD = 16.23$). The average length of residence in Australia was 20.87 ($SD = 15.89$). Eighty percent of the participants lived in Brisbane and the remaining 20% lived in Sydney. Participants migrated from a variety of regions, including Southern Africa (23%), Europe (50%), Asia (12%), the Americas (7%), Middle East (3%) and New Zealand (4%). Eighty-three percent of participants completed high school with 51% of participants also receiving tertiary qualifications (i.e., trade certificate, diploma, undergraduate degree, postgraduate degree, masters or doctorates).

According to the 2006 Census data, 23.9 per cent of Australia’s female population was overseas-born (ABS, 2006). The largest group of overseas-born female migrants came from Europe (i.e., mostly from the United Kingdom), followed by New Zealand, China, and South East Asia (e.g., Vietnam, Philippines, & India). Although the majority of migrant women arrived in Australia through the family migration scheme, there has been an increase in the number of migrant women arriving in Australia as principle visa applicants (Iredale, 2005, p. 161) with many having tertiary level educations (ABS, 2006). This suggests an increase in the educational status of migrant women. Migrant women are also older than Australian born women. In 2005, the median age of Australian overseas born women was 47.1 years compared to the median age of 36 years for Australian women (ABS, 2006). The demographic profile of migrant women in our sample reflected the demographic profile of Australian migrant women as a whole especially in terms of age and educational level. However, we also have migrant women from South Africa and the Middle East in our sample. This may be
explained by the fact that there are more South African and Middle Eastern migrants living in Brisbane and Sydney respectively. Indeed, according to the 2006 census, the top five countries of birth of overseas born Australians in Brisbane were England (4.5%), New Zealand (4.1%), South Africa (3.7%), Scotland (3.2%) and Germany (2.9%) while the top five countries of birth of overseas born Australians in Sydney were England (4%), China (2%), New Zealand (1%), Lebanon (1%) and Vietnam (1%) (ABS, 2006).

Measures

**Demographic Information.** At the start of the survey, participants were asked to provide their demographics such as age, age at migration, length of residence, marital status, educational background, reason for migration, and country of origin.

**The Connor Davidson Resilience Scale (CD-RISC).** The CD-RISC (Connor & Davidson, 2003) is a 25-item scale used to measure resilience. Items in the CD-RISC are based on a 5-point Likert scale rating system ranging from 1 (Rarely true) to 4 (True nearly all of the time). Example items include: “I am able to adapt when changes occur” and “I tend to bounce back after illness, injury, or other hardships.” The questions are rated based on how the participants feel over the past month. The CD-RISC has been tested in general populations and patient samples and has been found to have adequate internal consistency with Cronbach’s alpha for the full scale being reported as .89. In the current study, Cronbach’s alpha for the full scale was .89.

**Asian American Multidimensional Acculturation Scale (AAMAS).** The AAMAS (Chung, Kim, & Abreu, 2004) is a 15-item measure of acculturation based on orthogonal assessment of three cultural dimensions. In other words, participants were asked to respond to the items based on three referent groups: 1) their culture of origin, 2) their culture of original within the majority host nation, and 3) the mainstream majority host culture. These items are scored on a 6-point Likert scale ranging from 1 (Not very much) to 6 (Very much). AAMAS also consists of four specific acculturation domains, namely language, food consumption, cultural knowledge, and cultural identity. The items were reworded slightly to facilitate administration across different ethnicities. For example, “How much do you identify with your own culture?”, “How much do you identify with others like yourself in Australia,” and “How much do you identify with Australians?” Previous research using migrants from Asian, American and European have found the AAMAS to be a reliable measure with high alpha reliabilities ranging from .76 to .91 (Chung et al., 2004). Cronbach’s alpha for the total score on the AAMAS in the current study was .74.

**General Health Questionnaire (GHQ).** The GHQ-28 (Goldberg & Hillier, 1979) measures general psychological distress across three areas: somatic symptoms, anxiety and insomnia, social dysfunction and depression. The GHQ-28 contains 28 items using a 4-point Likert scale ranging from 1 (Not at all) to 4 (Much more than usual). Example items include: “Been feeling run down and out of sorts” and “Felt that life is entirely hopeless.” Scores on the GHQ-28 range from zero to three, with higher scores indicating higher levels of psychological distress. Previous research has found the GHQ-28 to be a reliable scale with reliability coefficients ranging from .78 to .95 (Goldberg et al., 1997; Jackson, 2006). Cronbach’s alpha in the current study was .89.

Results

Grounded theory was used to analyse the data from the semi-structured interview using constant comparison, aiming for methodically coded data (Glaser & Strauss, 1967; Strauss & Corbin, 1990) in three stages: theoretical sampling, where decisions about which data should be collected next are
determined by the theory that is being constructed; constant comparison; and composition of theoretical elements.

Based on this process, preliminary categories were generated to organise the data. Two decision criteria were used to extract potential categories: The word ‘migration’ or ‘acculturation’ or words similar in meanings, such as moving to a new country were examined and noted. Secondly, phrases used to describe the challenges encountered by participants were also noted. These initial categories were then refined by eliminating some and adding others as more information was gleaned from the interviews. When data collection had been completed, each interview transcript was re-analysed to identify common themes. Several core categories were thus identified: Job opportunities, better political opportunities, safety, egalitarian country, democratic, freedom, housekeeping, juggling work, and juggling family responsibilities. These themes were constantly compared across the transcripts and then grouped in terms of similar meanings or themes. For example, themes such as housekeeping and juggling work and family responsibilities were categorised as acculturation challenges. Thereafter, interrelationships between the themes and statements within each category were analysed (Glaser & Strauss, 1967). The relevance of each category to the core issues under investigation, namely, migration, acculturation process, and migration challenges was also compared. This process was repeated until saturation was reached and all of the categories were labelled and distinguished as recommended by Glaser and Strauss (1967). To check for the accuracy of coding, two independent raters who were not associated with the research were used as raters. Results indicated a Kappa coefficient of .88. Disagreements were discussed until they were resolved.

Three distinct but related categories emerged from the qualitative analysis.

Migrant women in our sample experienced acculturation experiences specific to their status as migrants and as women. More importantly, many women reported that they have become more resilient as a result of all these acculturation experiences. The following sections provide a detailed discussion of the experiences of some of these women. Quotes are coded with the participants personal information, for example, the code (A1, F, South Africa, 52) indicates the participants ID number, gender, country migrated from and age.

**Acculturation challenges.** Acculturation challenges refer to the difficulties migrant women face as they try to adopt the cultural values and life styles of the host population. While many of these challenges were specific to their status as women and as migrants, there were also common acculturation difficulties that all migrants faced. For example, loss of family support and friends, work-family conflicts, downgrading of professional qualifications, and language difficulties. The following excerpts demonstrate some of these challenges:

*I think the biggest challenge was having no family here, particularly when we had children. At times, I felt really alone and isolated (A17, F, Canada, 21).*

*The biggest thing is that you lost your family, friendships and connections back home- all the backup systems that you used to be able to fall back on. You don’t have any support and this can be very isolating (A1, F, South Africa, 52)*

*If you do not work, you do not have any money and we needed the money. It was not easy and I had to juggle between work and family. I had to work most of the nights, take care of the kids, look after the*
housekeeping and helped my brother out at the cake shop. I also had to do my husband’s paper work because my husband has his own hand business. I have so many roles and I am always busy (A11, F, China, 37).

It is difficult to balance between work and family. I think it is more difficult for women because you have to deal with work, the home, the kids and then a husband. My husband has been a good support to me but I have had to deal with all the work, family and children issues on every level (A12, F, Switzerland, 49).

I had a nursing degree from England but I found it very hard to get a job. But I pushed and pushed and then I finally got a job at Meyers (A30, F, England, 38).

My professional identity was completely lost because my medical degree was not recognised in Australia. So, I ended up in a position as head of a laboratory that includes much more administration and management responsibilities (A7, F, Italy, 51).

The biggest challenge for me was the language. I spoke Russian and my English was almost non-existent. I could not communicate with people in Australia (A19, F, Russia, 44).

I was born in Korea so I could not communicate in English in the beginning. I had to go to an English school for six months and even now English is still difficult for me (A16, F, Korea, 50).

Psychological health. Statements about psychological health were present across all interviews. In this study, we refer to psychological health of migrant women as the experiences of emotional illnesses since migrating to Australia. Fifty-seven per cent (57%) of participants stated that they had experienced some psychological health problems since migrating to Australia. In contrast, 43% of the participants did not experience any significant health problems since their migration to Australia. The following quotations illustrate participants’ perceptions of their mental health.

I had days and times when I was a bit depressed. I was very anxious. I still am anxious about the family (A2, F, Czechoslovakia, 82).

I became really depressed and anxious after I migrated to Australia. I think it has been brewing my whole life. But the stress of migration I think triggered it. The adaptation, the family life, and work life all became too much (A7, F, Italy, 51).

I believe my worst period of anxiety was directly as a result of the family problems I had after the migration (A14, F, South Africa, 57).

The first six months (after migrating to Australia) was really difficult and I was really anxious and at time depressed too, I think. (A19, F, Russia, 44).

No, I have not experienced any anxiety or depression since migrating to Australia (A20, F, Canada, 23).

No changes in my health since migrating here (A6, F, Israel, 48).

I would say that my anxiety levels have decreased since migrating here, due to the safety of Australia in comparison to South Africa. Not just the increased
safety though, but knowing that if something goes wrong, your government looks after you and that’s always been in the background of my mind (A13, F, South Africa, 46).

Resilience. Despite all the hardships they experienced, ninety percent (90%) of the women in our study reported that the process of acculturation has made them more resilient. This conceptualisation aptly describes many of the migrant women we interviewed in our study. Furthermore, many of the migrant women reported that they were highly flexible and open to adopting different coping strategies and accessing resources (e.g., step back from stressful situation, write down solutions, develop coping skills for big and small issues etc). This suggests that many of the migrant women interviewed were proactive in adopting different coping styles to make the required psychosocial adjustments when faced with adversity (Gordon, 1995; Rutter, 1987, 2007; Masten, 2001).

I would say that the challenges I faced during the migration have made me more resilient because we had to adapt to a new society, find a job and prove that we could do it. We probably had to manage more difficult situations than a normal Australian would have to. You carry these things and experiences for the rest of your life. These things change how you think about things and they will also change your personality (A19, F, Russia, 44).

I think my resilience comes from migrating to England as a child and having to leave Nazi Germany. I had one suitcase and 10 shillings and flung into a fairly difficult English household. There was just something in me that could take it (A29, F, Germany, 83).

Being put in a situation where you have to be adaptable and have to focus on the end game and not the small hold ups of every day life I think made me more resilient. I had to make the best of things and consider myself lucky (A20, F, Canada, 23).

Migration made me stronger. You have to cope more because you have more problems and difficulties when you migrated compared to when you living in your home country (A18, F, Hungary, 35).

I am a very forceful and persistent individual. You can say I have a very strong character and I think I have cope rather well since coming to Australia (A13, F, South Africa, 46).

Yes I am resilient. I think it’s the whole experience of migration and all the emotional things that are tied to the migration like family issues and everything make me more resilience. I don’t think I was resilient in the beginning, but we did have to be very flexible. (A17, F, Canada, 21).

I think I am more able to deal with the smaller things now because of the difficult things I have had to deal with in the past. I think the stress related to migration definitely added to my level of resilience (A10, F, South Africa, 43).

The data analysis approach adopted for the survey questionnaire was based on Baron and Kenny’s (1986) procedure for testing mediation. According to Baron and Kenny (1986), certain criteria are necessary to support a mediation model: Firstly, the independent variable (acculturation) must have a significant effect on the mediator.
(resilience); secondly the independent variable (acculturation) must have a significant effect on the dependent variable (psychological distress) in the absence of the mediator (resilience); thirdly, the mediator (resilience) must have a significant unique effect on the dependent variable (psychological distress); finally, the effect of the independent variable (acculturation) on the dependent variable (psychological distress or depressive symptom) must be significantly reduced (partial mediation) or become non-significant (full mediation) upon the addition of the mediator variable (resilience) (Baron & Kenny, 1986).

Participant’s age and length of residence in Australia were controlled for by including them as predictors in all the multiple regression analyses conducted. The means, standard deviations and bivariate correlations for all the variables are provided in Table 1.

The first stage of data analysis involved testing the direct relationships between the focal variables in order to test the first three hypotheses and determine whether the criteria for mediation were met (Baron & Kenny, 1986). To test Hypotheses 1, 2, and 3, standard multiple regressions were conducted. To test Hypothesis 1, acculturation was entered into the regression equation as the predictor and resilience was entered as the criterion variable. In support of Hypothesis 1, acculturation was significantly positively related to resilience, $\beta = .36, t(92) = 3.61, p < .001$ and uniquely accounted for 12.39% of the variance in resilience, $F (3, 92) = 4.36, p < .01$. This indicates that high levels of acculturation are related to high levels of resilience.

To test Hypothesis 2, acculturation was entered into the regression equation as the predictor and psychological distress was entered as the criterion variable. As hypothesised, acculturation was significantly negatively related to psychological distress, $\beta = -.27, t(91) = -2.69, p < .01$ and uniquely accounted for 6.97% of the variance in psychological distress, $F (3, 91) = 4.36, p < .01$. This indicates that high levels of acculturation are related to low levels of psychological distress.

To test Hypothesis 3, resilience was entered into the regression equation as the predictor, while psychological distress was entered as the criterion. Again, as predicted, resilience was significantly negatively related to psychological distress, $\beta = -.36, t(94) = -3.79, p < .001$ and uniquely accounted for 12.53% of the variance in psychological distress, $F (3, 94) = 6.77, p < .001$. This result suggests that high levels of resilience are

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### Table 1

<table>
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<th>$M$</th>
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*Note. * $p < .05$, **$p < .01$
related low levels of psychological distress. Thus, Hypothesis 3 was supported.

The next stage of analysis involved testing the mediating role of resilience on the relationship between acculturation and psychological distress. As demonstrated in the previous multiple regression analyses, the first three conditions necessary to conduct mediation were present (Baron & Kenny, 1986). To establish whether the final conditions needed for mediation were present, a standard multiple regression analysis was conducted (Baron & Kenny, 1986). Specifically, in order to test for mediation, resilience and acculturation were entered into the regression equation as predictors and psychological distress was entered as the criterion (see Table 2). Resilience was found to be a significant unique predictor of psychological distress \( \beta = -.30, t(87) = -2.86 \ p < .01 \), and uniquely contributed 7.62% of the variance in psychological distress. However, acculturation was not a significant predictor of psychological distress, \( \beta = -.16, t(87) = 1.52, p = .13 \), and did not contribute uniquely to the variance in psychological distress (sr\(^2\) = .02). These findings represent a full mediation, as the direct effect between acculturation and psychological distress was non-significant when resilience was included as a mediator. This effect is summarised in Figure 1.

Consistent with this pattern of results, application of the Sobel test indicated that this was a significant mediation, \( z = -2.24, p < .05 \). Therefore, in support of Hypothesis 4, these findings demonstrate that the relationship between acculturation and psychological distress is fully mediated by resilience.

**Discussion**

In part 1 of our study, we conducted an exploration of the acculturation experiences of migrant women in Australia, many of whom lived in Brisbane and Sydney. Consistent with other migration studies, the results indicated that most of them encountered acculturation challenges specific to their status as migrants and as women. For example, ninety-seven per cent (97%) of migrant women reported that the loss of family support and friends to be particularly difficult for them. A number of past studies have found that the loss of kinship support was one of the major causes of isolation and loneliness in migrant women (Ahmad, Shik, Vanz, Cheung, George & Stewart, 2005; Berger, 2004; Remennick, 2003). The loss of social and family support networks have also been found to contribute to high levels of

<table>
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*Note.** \( ** p < .01 \)
depression in migrant women (Lipson & Miller, 1994). If this problem is not dealt with appropriately, it can adversely affect the ability of migrants to partake in and contribute to the new culture.

Eighty-seven (87%) of migrant women reported that work-family conflicts, downgrading of their professional qualifications (63%) and language difficulties (53%) to be the next three stressful challenges since their migration to Australia. Work-family role conflict generally refers to the extend when simultaneous pressures from the work and family domains interferes with each other and is typically defined as, “a type of inter-role conflict that occurs as a result of incompatible role pressures from the work and family domains” (Greenhaus & Beutell, 1985, p. 77). A review of work family conflict found that work family conflict is associated with negative outcomes such as stress (Lee, Um, & Kim, 2004; Matsui, Oshawa, & Onglato, 1995), depression (Lee et al., 2004), lowered job satisfaction (Noor, 2002), as well as physical and emotional well being in women (Matjasko & Feldman, 2006).

Previous migration studies have found that migrant women experienced significant occupational downgrading either because their overseas qualifications were not recognised or because they could not speak or write fluently in the language of their adoptive country (Driedger & Hallis, 2000). This is consistent with the findings in our present study where women reported occupational downgrading and language difficulties. Although many migrant men also experienced the problem of downward mobility in the workplace, studies have shown that migrant women's lives were made much more complicated by the demands of children and family life (Ng & Ramirez, 1981; Seller, 1981). In addition to significant occupational downgrading, migrant women earn less than their male counterparts (Ho & Alcorso, 2004). This reflects not the migrants' skill compositions, but processes of exclusion and labour market segmentation operating in the Australian industry and labour market institutions (Gray & Agllias, 2010; Islam & Fausten, 2008). According to these theorists, this can be attributed to pure discrimination (e.g., unwillingness on employers’ part to recognise qualifications obtained from migrants’ original countries) and gender barriers (Martin 1984; Parr & Guo, 2005).

There are inconsistent findings on migrants’ health with a number of studies suggesting that some migrant groups may actually be healthier than the host population, while other studies suggest that migrants generally suffer poorer health (Aroian, 2001;
The results from Part 1 of our study confirmed this with 57% of migrant women reporting that they had experienced some psychological health problems since migrating to Australia and 43% of migrant women reporting that they had no significant psychological health problems. Similarly, there are also mixed findings regarding the protective effect of length of residence in host country for migrants (Burvill, 1998; Wong, 2002). For example, Dunn and Dyck (1998) found that as length of residence increased, migrants were more likely than the Canadian born population to report poor health status in the host country. Similarly, Vissandjee, Desmeules, Cao, Abdool, and Kazanjian (2004) found that although recent immigrant women (2 years or less in Canada) were likely to report poor health than Canadian-born women, immigrant women who have been in Canada 10 years and over were more likely to report poor health than Canadian-born women. These studies suggest that duration of stay in host countries does not guarantee good health in migrants. More pertinent to our current study is a recent study by Cakir and Guneri (2011) of Turkish migrant women in the UK. In this study, Cakir and Guneri (2011) found that length of stay was not a significant predictor of empowerment or resilience. In other words, length of stay in host country did not contribute to the resilience in this group of migrant women.

The aim of Part 2 was to investigate the potential mediating role of resilience on the relationship between acculturation and psychological distress. Resilience research over the past three decades has shown that poor psychological outcomes or adjustments are not inevitable in high risk or vulnerable populations. Luthar, Cicchetti, and Becker (2000) for example, found that individuals with a resilient personality were able to actively resist or overcome adversities such as life challenges or stressful conditions (e.g., acculturation). In doing so, these individuals were able to effectively maintain healthy psychological functioning (Grothe, 2003; Luther et al., 2000). Graham and Thurston (2005) interviewed migrant women in Canada and found that despite experiencing stress, guilt and frustration associated with acculturation, these migrant women demonstrated resilience which enabled them to develop effective coping strategies. Similarly, Berger (2004) in her book, Immigrant Women Tell their Stories, found that the one thing that bound all the women she interviewed was their strong sense of resilience especially after their migration. As argued by Rutter (1987, 2007), exposure to stressful situations (e.g., acculturation) may be beneficial for personal growth in that it enabled individuals to develop new competencies and resilience in order to survive. This is particularly important for many migrant women who shared the belief that they are ‘the backbone of the family’ and have the responsibility to help their children and family cope in the new country. According to Rutter (1987), psychological toughening can occur through exposure to stress; suggesting the possibility that exposure to acculturation may strengthen migrant women’s resistance to poor mental health. Therefore, as predicted in Hypothesis 1, results indicated that there was a significant positive relationship between acculturation and resilience.

Numerous studies have found that acculturation contributed negatively to migrants’ psychological health (Falcon & Tucker, 2000; Oh et al., 2002). In particular, studies have found that migrant women were especially susceptible to psychological distress (Aroian et al., 2003; Aroian et al., 2008). We therefore proposed in Hypothesis 2 that acculturation is negatively related to psychological distress. This hypothesis was supported in our study and confirmed that acculturation to the new culture is negatively
related to psychological distress in the migrant population (Falcon & Tucker, 2000; Oh et al., 2002).

More pertinent to our present study is previous research which found a negative relationship between resilience and psychological health outcomes (Campbell-Sills et al., 2006; Connor & Davidson, 2003). For instance, Aroian and Norris (2000) and Christopher and Kulig (2000) have shown that resilience is negatively associated with psychological health problems in migrant populations. In other words, the higher the levels of resilience, the less likely it is that migrants will experience poor psychological well-being. Given these theoretical and empirical considerations, we speculate that resilience is negatively related to psychological distress (Hypothesis 3). Again, our findings support this prediction.

Finally, it was hypothesised that resilience would mediate the relationship between acculturation and psychological distress (Hypotheses 4). As predicted, our result indicated that resilience fully mediated the relationship between acculturation and psychological distress. This finding is consistent with Rutter’s (1987) resilience model which reflects the protective role of resilience and is consistent with the conceptualisation of resilience as a facilitating (or mediating) factor in the relationship between acculturation and psychological distress.

Limitations and Future Research Directions

A number of limitations associated with the overall current research must be acknowledged. First, although the use of a qualitative approach provided rich and detailed information about the acculturation experiences of migrant women in Australia, a limitation of this study is that the data was obtained from a relatively small sample (N=30). Therefore, the findings of this study may not be generalisable to the greater population. However, it should be noted that previous studies using grounded theory tended to have a small sample size (Chaudhury & Miller, 2008; Khan & Watson, 2005). In addition, the cross-sectional design of both Part 1 and Part 2 meant that the causality of these findings could not be inferred. Therefore, future research would benefit from the use of a longitudinal research design and a larger sample size.

Second, resilience as currently measured is a western concept based on the value of autonomy. This suggests that resilient individuals have the ability to solve and tackle problems independently without the help of others (Cohler, Stott, & Musick, 1995). It should be pointed out that migrants from collectivist societies (e.g., Japan, China etc.) may place higher value on interdependence and to be resilient may involve facing problems as a group or as a community (Cohler et al., 1995). Therefore, resilience, as currently defined and measured may not be applicable to all types of migrants and future research should consider investigating resilience across cultures.

Third, many of the migrant women we surveyed have been in Australia for a number of years. As considered in our discussion, length of residence should not necessarily be construed as a limitation. Rather, migrants who have stayed for a period of time in Australia captured the very essence of what being resilience is all about. That is, the idea that, despite adversities, these individuals continued to thrive, mature and increase their competencies over time (Gordon, 1995). To do so would mean that individuals have spent some time in the host country. However, we do acknowledge the role of selectivity and diverse sample in our study as limitations of our study. Thus, caution is needed in interpreting our findings.

Fourth, the fact that many of the migrant women were from professional and/or middle social economical class may also be a variable which mediated psychological distress. In future studies, investigation should control for social class. For example, the issue of being a visible minority should be attended to. This is because according to

Voices of migrant women
Bourhis, Moise, Perreault, and Senécal (1997), the context of acculturation such as immigration policy and economic situations of the receiving society can provide or restrict possibilities in which identities and acculturation strategies are developed. In other words, a host country which discriminates against its visible minorities may make them feel so uncomfortable that they not want to integrate or assimilate with the host country. Indeed, low perceived permeability of the receiving culture predicted (depending on self-prototypicality) either separation or marginalization in migrants (Piontkowski, Florack, Hölker, & Obrdžálek, 2000).

Fifth, while we have tried to control for as many confounding variables as possible (e.g., participants must be able to speak and write in English of up to high school level, be in a permanent work position at some point in their life, non-refugees and not suffering from any mental disorder as defined in the DSM-IV), we could not control for all variables. In our defence, we would like to suggest that our aim is to preserve as much of the diverse characteristics of modern migrant women to Australia as possible. Thus, the commonalities of the migration experience and as women merit having a heterogeneous sample of migrant women.

Despite these limitations, this research has contributed to the literature in three important ways. First, it added to the literature in positive psychology by identifying resilience as a form of human strength in tackling life’s adversities. In doing so, it may encourage researchers to adopt a more positive line of inquiry. Second, we added to past acculturation research which has tended to focus on migrant men and neglected the experiences of migrant women. Even when they did focus on migrant women, they have tended to use a vulnerability-deficit model, therefore depicting migrant women as victims of acculturation. The current research addressed both of these gaps through investigating the acculturation experiences of Australian migrant women (Part 1) and directly testing resilience as a mediator between acculturation and psychological distress in a group of Australian migrant women (Part 2). Finally, the use of both qualitative and quantitative research methods is highly beneficial as it can validate data and produce a more complete and coherent picture of the investigated domain (Udo, 2006).

Practical Implications

Whilst the current research has found that migrant women are resilient in the face of acculturation, it is important to note that many migrant women do face high levels of stress in their daily lives. For example, many of the migrant women we interviewed faced labour market barriers, such as the loss of their professional qualifications which have reduced their overall earning capacity. At the same time, many of the women interviewed were fully responsible for household and child-care responsibilities with very little support. It is therefore important to provide migrant women with resources necessary to help them cope with both work and home conflicts. This is especially true for migrant women who are contributing to the social and economic fabrics of Australia in the longer terms. For instance, governmental agencies should try to provide this group of migrant women with better access to child care services and support groups. Other governmental programs such as social support, friendship networks, information on medical health access, and workers’ rights should be disseminated to permanent migrant women so that they are provided not only with the information but also skills they would need to build a productive life for themselves as well as their families in Australia. These programs should enable migrant women to reduce their sense of isolation and to lead a more socially productive life.
References


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Re-examining Prejudice Against Asylum Seekers in Australia: The Role of People Smugglers, the Perception of Threat, and Acceptance of False Beliefs

Aries Suhnan
Anne Pedersen
Murdoch University, Australia
Lisa Hartley
Curtin University, Australia

Previous research finds a relationship between prejudice against asylum seekers in Australia and negative ideas invoked through political rhetoric; these include perceptions of threat and the acceptance of false beliefs. In recent years, political debate has also seen an increase in hostility towards people smugglers. In this study, we examine whether the expected link between prejudice and perceptions of threat and false beliefs still holds, and we extend this by examining how people smuggler prejudice affects asylum seeker prejudice. A total of 138 members of the Perth community completed a questionnaire regarding their views on these issues. Regression analyses indicated that all three variables significantly and independently predicted prejudice against asylum seekers. Results also showed that prejudice against people smugglers was significantly higher than prejudice against asylum seekers. Our results are consistent with public political rhetoric on community attitudes regarding this topical issue.

Few social justice issues in Australia have attracted as much attention and controversy in recent times as the issue of asylum seekers. Being a signatory to the United Nations Refugee Convention of 1951 (United Nations, 2007), the protection of asylum seekers and refugees is sanctioned under both international and Australian law. An asylum-seeker “is an individual who has sought international protection and whose claim for refugee status has not yet been determined” (The United Nations High Commissioner for Refugees [UNHCR], 2011, p. 3). In contrast, a refugee is an individual whose protection has been deemed necessary by the UNHCR or a State who is a signatory to the Refugee Convention. This Convention was a response to the persecution of Jewish populations and other minority groups during WWII; it was hoped that with this in place, no individual would be without the protection of the international community when faced with persecution (Crock, Saul, & Dastyari, 2006). As such, the Australian government is obliged to process asylum seekers’ claims and to offer them refugee status if their claims have been verified.

Despite however, Australia’s Commitment to the Refugee Convention, asylum seekers have occupied a prominent place in recent political history; since the early 2000s, a number of critical events have placed asylum seekers at the centre of the divisive border-security debate in Australia (McKay, Thomas, & Kneebone, 2011). In late August 2001, a group of 438 shipwrecked asylum seekers were denied permission to disembark at Christmas Island, the closest Australian territory, after being rescued by passing Norwegian cargo ship the MV Tampa. The then Howard Government’s refusal to allow the Tampa to dock at Christmas Island drew widespread criticism from national and international bodies for ignoring traditional maritime practices; conversely, a large proportion of the Australian community supported the Howard Government’s actions, reflecting the growing opposition against asylum seekers in the community (Marr & Wilkinson, 2003;
McKay et al., 2011). Related events like the ‘Children Overboard’ affair in which Mr Howard and some of his senior ministers falsely claimed that a group of asylum seekers had deliberately thrown their children from their boat in order to be rescued by Australian authorities further polarised the community’s attitudes and prejudice against asylum seekers (Marr & Wilkinson, 2003).

It has been argued that the stance taken by the conservative Howard Government (1996-2007) on asylum seekers was particularly draconian (Briskman, Latham, & Goddard, 2008) given that relatively few people request asylum in Australia when compared to other countries (UNHCR, 2011). Much of the Howard Government’s rhetoric on this issue focused on creating the narrative that mainstream Australia had a reason to fear asylum seekers by positioning them as ‘the other’. Asylum seekers were increasingly represented as a threat to national sovereignty and identity during this period, as well as a threat to the safety and wellbeing of the Australian community (Marr & Wilkinson, 2003). Asylum seekers who arrived at Australian territorial borders without prior authorisation (i.e., a visa) were depicted as illegal or deviant “boatpeople” who undermined established legal processes (Pickering, 2004), and who were potential criminals and national security threats (Al-Natour, 2010). Furthermore, people who arrived in this manner have been described as people who unfairly disadvantaged other refugees waiting in orderly humanitarian migration programmes (Hoffman, 2010). This political rhetoric culminated in Howard’s infamous 2001 election campaign slogan for harsher asylum seeker policies: “We will decide who comes to this country and the circumstances in which they come” (Howard, 2001).

Although the law of indefinite mandatory detention for unauthorised asylum seekers was first introduced by the Labor Party government in 1994 (Crock et al., 2006), it became a key border-security policy for the Liberal-National Party Coalition during the Howard era. Whereas most western countries detained asylum seekers for a short time in order to perform health, identity, and security checks before being released into the community, Australian policy required that asylum seekers travelling by boat be kept in detention for the entire duration of their claims being processed (Marr & Wilkinson, 2003). Additionally, a major procedural change to Australia’s Refugee and Special Humanitarian Programme involved the linking of a part of its ‘offshore’ component, which resettles refugees from other countries after referral by the UNHCR, with the ‘onshore’ component, which allows for the assessment of claims made by asylum seekers within Australian territory (Mares, 2002). This meant that a place was taken from the ‘offshore’ programme for every ‘onshore’ asylum seeker found to be a refugee, which affected the annual quota for the selection of overseas applicants. Perhaps one of the most contentious of all the border-security practices at that time was the implementation of ‘temporary protection visas’ (TPVs) which only granted temporary residence status to ‘boat people’ found to be refugees; TPVs were the subject of much criticism as they did not, among other things, allow for immediate family members living overseas to reunite with the TPV holder in Australia, and recipients had to reapply for refugee status every three years (Briskman et al., 2008).

To mental health professionals, probably the most concerning issue about the border-security debate is the consequences that these policies have had on asylum seekers. Psychologists and researchers in allied fields have shown that these tougher policies have contributed to the increase of detrimental psychological conditions in asylum seekers over the last decade. Prolonged immigration detention has been
linked to a higher incidence of mental illness (e.g. depression, post-traumatic stress disorder [PTSD]), increased risk of self-harm, and suicidal ideation (Davidson, Murray, & Schweitzer, 2008; Schweitzer, Melville, Steel, & Lacherez, 2006).

Furthermore, one study has shown that holding a TPV was the strongest predictor of PTSD, anxiety and depression (Momartin, Steel, Coello, Aroche, Silove, & Brooks, 2006); the restrictive conditions imposed by TPVs have been described by many refugees as “a continuing gross injustice and punishment” (Coffey, Kaplan, Sampson, & Tucci, 2010, p. 2075).

When the Australian Labor Party took office in 2007, the language of the asylum seeker debate was toned down, arguably signalling a more compassionate approach to the issue. Indeed, former Prime Minister Kevin Rudd (2007-2010) declared that his government’s stance on asylum seekers was “tough but humane” (Prime Minister Kevin Rudd joins the 7:30 Report, 2009). Some of the more controversial border-protection practices, like the use of TPVs, were abolished (Department of Immigration and Citizenship [DIAC], 2008). However, despite the progress made on this pivotal issue, the mandatory detention of unauthorised asylum seekers has remained a cornerstone of government policy and the link between the offshore and onshore program still remains. Mandatory detention was implemented as a way to deter asylum seekers from making the boat journey from transit countries to Australia, and while there is no evidence that mandatory detention actually functioned as an effective deterrent (Edwards, 2011; Hoffman, 2008), political leaders have continued to affirm that this policy can ‘stop the boats’. Reflecting on the current situation, the Australian Psychological Society – the country’s peak professional body for psychology – has criticised the system of mandatory detention and the associated increase in psychological problems in the asylum seeker population (The Australian Psychological Society, 2011).

Asylum seekers who enter Australian territory by boat have engendered a large amount of prejudice in the community, despite the fact that these asylum seekers have not broken any laws that have formally adopted the guidelines of the UN Refugee Convention (Asylum Seeker Resource Centre, 2010). There is consistent evidence that prejudice against asylum seekers is a widespread phenomenon across the Australian community (Klocker, 2004; Pedersen, Attwell, & Heveli, 2005; Schweitzer, Perkoulidis, Krome, Ludlow, & Ryan, 2005). A number of researchers have argued that political rhetoric and inaccurate media representations continue to propagate unfavourable community sentiments concerning asylum seekers (Every & Augoustinos, 2008; Pedersen, Watt, & Hansen, 2006; McKay et al., 2011). With this in mind, three concepts are particularly relevant to the present study of prejudice against asylum seekers – attitudes towards people smugglers, perceptions of threat, and the acceptance of false information as true. These three concepts will be outlined below.

**Attitudes towards People Smugglers**

Although much of the attention has been focussed on asylum seekers, people smugglers have become increasingly central to the Australian border-security debate. For the purpose of this paper, people smugglers are defined simply as people who transport, or attempt to transport, asylum seekers to a safe destination. In the modern context, people smugglers have been characterised in starkly contrasting ways – some argue that people smugglers are inherently immoral and pose a potential threat to border-security, while others suggest that they help to restore the security of those who seek their services (Maley, 2001). In Australia, people smugglers are legally defined as criminals, and government policy has concentrated on
punitive measures and mandatory jail sentences; furthermore, they are usually maligned in the Australian discourse (Hoffman, 2010). Hoffman (2010) further argues that there has been a discernible shift in the language of the asylum seeker debate, where the people-smuggling business is increasingly represented as the central issue in Australia’s border-security discourse. If so, it is possible that the Australian community’s negativity has been transferred from asylum seekers to people smugglers. Certainly, former Labor Prime Minister Kevin Rudd famously denounced people smugglers as “the absolute scum of the earth” and that they should “rot in hell” (Rodgers, 2009, n.p.).

This emphasis on people smugglers in the border-security debate has continued under the leadership of the current Labor Prime Minister, Julia Gillard (also see Smit, 2011, on this point). On December 15, 2010, a boat (later named SIEV 221) carrying between 70 and 100 asylum seekers sank in turbulent weather just off the coast of Christmas Island, killing at least 28 people (Rourke, 2010). Reflecting on this event and her government’s approach to border-security, Ms Gillard noted: “what this is about is smashing the people smugglers’ business model. I don’t think Australians want to see people risking their lives on a dangerous journey. They certainly don’t want to see a repeat of the kind of scenes we saw at Christmas Island around Christmas time when asylum seekers drowned in the water” (Gillard, 2011). It is apparent here that negativity has been directed more towards people smugglers than the asylum seekers themselves. As an aside, it is interesting to note that Dr Khalid Koser, the academic who developed the term ‘business model of migrant smuggling’, has said that “the Prime Minister doesn’t appear fully to understand the model, and thus her government’s efforts to ‘smash’ it are unlikely to be effective” (Koser, 2011, n.p).

There is limited research into the social backgrounds of people smugglers, especially in the Australian setting. However, it has been found that people-smuggling operations in this region are likely to arise in response to local problems (Hoffman, 2010), an observation that has previously been found in the overseas literature (Marfleet, 2006). Hoffman (2010) noted that some people smugglers have also been identified as UNHCR refugees themselves, becoming involved in people-smuggling after arriving in Indonesia; at the time of her research, people-smuggling was not yet considered a criminal offence, and these people smugglers stated that they were trying to help other refugees reach safety in Australia.

At the time of writing this article, 12 judges have spoken out to condemn the mandatory 5-year prison sentences that they were obligated to give to the crew of people-smuggling boats; as Western Australian Chief Justice Wayne Martin pointed out, most members of these crews are “impoverished and illiterate” Indonesian fishermen (Dodd, 2012). Prominent refugee lawyer George Newhouse, who represented the survivors and the families of the deceased on SIEV 221 at the coronial inquest in Perth, took these points further. Specifically, due to the government’s policy of imposing severe penalties for people-smuggling, untrained fishermen are often put in charge of boats by the smugglers; further, because the confiscation of people-smuggling vessels is part of government policy, the boats used in these voyages are often not seaworthy which can have potentially disastrous results (G. Newhouse, personal communication, February 18, 2012).

While the corpus of research exploring the factors shaping people’s attitudes towards asylum seekers has grown rapidly in recent decades both internationally (e.g., Lynn & Lea, 2003) and domestically (e.g., McKay et al., 2011), to our knowledge no empirical research has examined whether prejudice towards asylum seekers is influenced by
Prejudice against people smugglers. Given the salience of people-smuggling in the border-security debate (for example, Rodgers, 2009), it is important to consider whether the community’s perception of asylum seekers is influenced by their attitudes towards people smugglers in order to understand this issue more completely.  

**Asylum Seekers and the Perception of Threat**  
Some research regarding asylum seekers has been conducted in terms of perceived ‘realistic’ threats (those that are believed to jeopardise the welfare, economic status, and political dominance of the ingroup) and perceived ‘symbolic’ threats (those that are believed to undermine the norms, values, and culture of the ingroup) (Corenblum & Stephan, 2001; Schweitzer et al., 2005). Here, antipathy towards a particular group can be based on a purely perceived threat that may not actually constitute a real danger to the ingroup. To illustrate, previous research has suggested that people who are prejudiced against asylum seekers are also more likely to perceive them as a potential threat to Australian economic resources; additionally, the belief that asylum seekers present a challenge to Australian culture is an example of a symbolic threat (Schweitzer et al., 2005). It would appear that the perception of threat plays a large role in the formation of prejudice in the national discourse of asylum seekers.

**False Beliefs about Asylum Seekers**  
Previous research has shown that false beliefs are implicated in people’s attitudes about asylum seekers. False beliefs involve the acceptance of information that is factually inaccurate or incorrect – for example, the belief that asylum seekers are ‘queue jumpers’ (Pedersen et al., 2005). For the vast majority of asylum seekers, an actual ‘queue’ does not exist because originating countries often lack Australian consular assistance; furthermore, Australia employs a quota system rather than a queue in deciding on refugee intake. The perception of ‘queue jumping’ is an artefact of changes to policy; as mentioned above, the Howard Government merged the ‘onshore’ and a part of the ‘offshore’ components of the Refugee and Humanitarian Programme (Mares, 2002) effectively reducing the number of places available for the resettlement of refugees and asylum seekers, and reinforcing the rhetoric of ‘queue jumping’ (see also Refugee Council of Australia, 2011). More recently, other false beliefs have come into widespread circulation, including the belief that it is unnecessary for asylum seekers to seek asylum in Australia due to their travelling through ‘safe’ countries like Indonesia and Malaysia, despite the fact that these countries are not signatories to the Refugee Convention and have no legal obligation to offer protection (Hoffman, 2010; Pedersen & Hoffman, 2010).

Such beliefs are common, and early research has found a relationship between prejudice against asylum seekers and false beliefs (e.g., Pedersen et al., 2005). This relationship has also been found with respect to other minority groups such as Indigenous Australians (Pedersen, Griffiths, Contos, Bishop, & Walker, 2000) and Muslim Australians (Pedersen, Aly, Hartley, & McGarty, 2009). Given that the Australian debate about asylum seekers is dynamic, it would be interesting to examine whether this relationship with prejudice still holds when we consider the influence of more recent false beliefs. If refugee advocates are aware of common myths, and how they relate to prejudice, this may provide a starting-point for educational interventions.

**Overview of the Present Study**  
This study is based on community psychology principles. As noted by Dalton, Elias, and Wandersman (2007) “there are no truly individual problems” (p. 6). Hence, although we investigate individual attitudes with regard to this important social justice issue, we also examine potential social
Prejudice against asylum seekers

antecedents that implicate governmental policy and rhetoric. As also noted by Dalton et al. (2007), policy research and advocacy are important issues with respect to community psychology. Community psychologists stress the need for an ecological approach (e.g., Duffy & Wong, 2003; Nelson & Prilleltensky, 2005) and we aim to investigate the interaction between the individual and the community within our study. We do not claim to be value-free; indeed, we wish to state plainly that we are critical of the current approach to asylum seeker processing especially concerning the mandatory detention of asylum seekers. The importance of values is a key principle underpinning the field of community psychology (Prilleltensky, 2001).

Previous research indicates that a relationship exists between prejudice against asylum seekers in the Australian community and negative inflammatory political rhetoric (Pedersen et al., 2006); most relevantly for the present study, the perception of threat and the acceptance of false beliefs about asylum seekers. Furthermore, in recent years, commentators have noted that the political rhetoric surrounding asylum seekers has changed in its content towards a more negative focus on people smugglers (Hoffman, 2010). This contextual change provides an opportunity to consider whether the expected link between the ideas circulated in popular political rhetoric and the community’s attitudes towards asylum seekers still holds, especially concerning the rhetoric about people smugglers. It is possible that studying the recent political strategy of demonising people smugglers – as opposed to demonising asylum seekers – can extend our understanding of prejudice towards asylum seekers more generally and again provide useful information to activists attempting to address anti-asylum seeker sentiment. While social-psychological research on asylum seekers continues to expand, research on attitudes towards people smugglers remains scant. Indeed, to our knowledge, there is no quantitative research linking prejudice against asylum seekers with prejudice against people smugglers.

With this in mind, our study had three aims. Our first aim was to compare prejudice levels against asylum seekers and people smugglers. In light of the relatively recent emphasis in the Australian discourse on people smugglers as a group (Hoffman, 2010), we predicted that prejudice against people smugglers would be significantly greater than prejudice against asylum seekers. Our second aim was to examine whether prejudice against asylum seekers can be predicted by social-psychological variables related to political rhetoric. We predicted that the four independent variables (prejudice against people smugglers; realistic and symbolic threat; false beliefs) would significantly predict prejudice against asylum seekers. Because previous research has found a positive relationship between holding false beliefs about asylum seekers and prejudice (Pedersen et al., 2005), our third aim was to investigate whether the relationship between prejudice and false beliefs still stood, in light of the emergence of more recent political rhetoric (e.g., “temporary protection visas will stop the boats”). We predicted that the higher the prejudice, the greater the acceptance of inaccurate or incorrect information.

Method

Participants

A total of 138 people participated in this study drawn from SCORED (the Social and Community On-Line Research Database) in Perth, Western Australia. This is a psychological research database that allows willing participants to complete questionnaires posted online by researchers. The mean age of the sample was 40.56 years, and there were more female participants (59.4%) than males (40.6%). Overall, the participants were highly educated, with 42.8% holding or currently completing
bachelor’s degrees, while a further 37.0% had achieved or were completing higher university degrees. Most participants, 84.8%, were from a White European background. The majority of the sample (59.4%) was more left-leaning in political orientation, with 21% reporting that they were neutral or undecided, and 19.5% reporting a right-wing political orientation.

Procedure

Potential participants in Perth were contacted through the SCORED administrator. They were sent an invitation email which included an outline of the study, the web address to access the questionnaire, and the researchers’ contact details. Participants were able to access the questionnaire for a period of approximately 2 months (June to August 2010), although most participants responded in the first few weeks.

Measures

Prejudice towards asylum seekers and people smugglers. This scale, adapted from Wright, Aron, McLaughlin-Volpe and Ropp (1997), was comprised of six semantic differentiation items (example of item: negative – positive) and were responded to on a Likert-like scale ranging from 0 to 100. This scale was used to measure prejudice towards asylum seekers and people smugglers separately. The original scale developed by Wright et al (1997) had an alpha of .71 demonstrating satisfactory reliability. Reliability using this scale has been even higher in the Australian community; reliability with respect to a prejudice against refugees scale was reported by Turoy-Smith, Kane, and Pedersen (in press) to be α = .93. After appropriate recoding, higher scores indicated higher prejudice.

Realistic and symbolic threats. The perception of threat was measured using a scale adapted from previous research (Corenblum & Stephan, 2001; Schweitzer et al., 2005) and tailored to be specific to asylum seekers. This scale included two subscales containing four realistic threat items and four symbolic threat items. Responses to these items ranged from 1 (not threatening) to 7 (very threatening). An example of a symbolic threat item is: “The values and beliefs of asylum seekers regarding family issues and socialising children are compatible with the values and beliefs of most Australians” (reversed). An example of a realistic threat item is: “The quality of social services available to Australians has remained the same, despite asylum seekers coming to Australia” (reversed). In the Schweitzer et al. study, the realistic and symbolic threat scales were both reliable, with an alpha of .91 and .87, respectively. After appropriate recoding, higher scores indicated higher perceived threat.

False beliefs. This scale was adapted from Pedersen et al. (2005) and involved specifying how much participants agreed with given statements about asylum seekers, all with varying degrees of factuality. Previously established false beliefs about asylum seekers (for example, that they are queue jumpers; Pedersen et al., 2005) were included alongside some new false beliefs that are currently in circulation in Australia; for example, “Asylum seekers are safe when they arrive in Indonesia or Malaysia, so travelling to Australia is unnecessary” (Asylum Seeker Resource Centre, 2010; Pedersen & Hoffman, 2010). After appropriate recoding, higher scores indicated higher acceptance of false beliefs. The original scale by Pedersen et al. had an alpha of .73.

Socio-demographics. Information concerning each participant’s gender, age in years, education level, and their political orientation was also collected. Previous research has suggested that these socio-demographic variables are related to prejudice. In particular, prejudice has been linked with low levels of education and right-wing political views (that is, a preference for
conservative politics) (Pedersen & Griffiths, unpublished).

**Results**

During a preliminary analysis, a large correlation were found between the symbolic and realistic threat scales ($r = .762; p < .001$). Accordingly, we factor-analysed all of the threat items together. The obtained scree plot clearly indicated the existence of one underlying factor. After an inspection of the corrected item-total correlations (CITC), no items produced a CITC under the target value of .30. As such, a modified scale was constructed and labelled as “Threat – Asylum Seekers”, which included all symbolic and realistic threat items; no items were deleted from this scale.

**Scale Descriptives**

Table 1 displays the descriptive statistics for each scale including the scale means, standard deviations, the number of items in each scale, alpha coefficients, and the potential range of scores for each scale. Prejudice was high towards people smugglers but less so for asylum seekers, with the mean just below the midpoint. The means for false beliefs and the perception of threat were just below the midpoint. Reliability for all scales was satisfactory, all being over $\alpha = .85$. One item, however, was removed from the false belief scale to increase reliability (the item involved the notion that issuing temporary protection visas will stop the boats).

**Aim 1. Differences in Prejudice towards Asylum Seekers and People Smugglers**

Our respondents reported more prejudice against people smugglers than against asylum seekers $t (124) = -14.175, p < .001$. This was a 31% difference between the means of the two corresponding scales.

**Aim 2. Prediction of Prejudice against Asylum Seekers**

A number of moderate and strong correlations were found between prejudice against asylum seekers and the independent variables, as presented in Table 2. Participants scoring high on prejudice against asylum seekers reported significantly less formal education and more right-wing political preferences. They were also significantly more likely to score higher on prejudice towards people smugglers, perceived threat, and false beliefs.

The extent to which the independent variables contributed to the prediction of prejudice against asylum seekers was then examined. To this end, we constructed a multiple regression equation with two blocks of predictors. As two socio-demographic variables – education level and political preference – were significantly correlated with prejudice, they were entered into the regression equation on Step 1. Following this, the three social-psychological variables – prejudice against people smugglers, perceived threat, and false beliefs – were entered into the regression equation on Step 2. Despite the high correlation between the perceived threat and false beliefs items, multicollinearity was not an issue in the analysis.

The predictors accounted for a significant proportion of variance in prejudice against asylum seekers ($total R^2 = .640$) (see

<table>
<thead>
<tr>
<th>Scale</th>
<th>$M$ (SD)</th>
<th>No. of items</th>
<th>$\alpha$</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prejudice against asylum seekers</td>
<td>43.36 (23.25)</td>
<td>6</td>
<td>.94</td>
<td>0-100</td>
</tr>
<tr>
<td>Prejudice against people smugglers</td>
<td>74.42 (20.07)</td>
<td>6</td>
<td>.88</td>
<td>0-100</td>
</tr>
<tr>
<td>False beliefs</td>
<td>3.65 (1.50)</td>
<td>7</td>
<td>.86</td>
<td>1-7</td>
</tr>
<tr>
<td>Perceived threat</td>
<td>3.38 (1.43)</td>
<td>8</td>
<td>.90</td>
<td>1-7</td>
</tr>
</tbody>
</table>
Table 3). Only political preference was significant on Step 1 of the regression analysis – that is, the more prejudiced the participants were against asylum seekers, the more likely they were to identify as politically right-wing ($R^2$ change = .231). At the end of Step 2, neither socio-demographic variable was significant. However, high prejudice against people smugglers, perceived threat, and false beliefs all significantly predicted participants’ prejudice towards asylum seekers at Step 2 ($R^2$ change = .409).

**Aim 3. Whether the Relationship between Prejudice and False Beliefs still stands after Changes in Government and Recent Political Rhetoric**

Generally, there was a strong relationship between prejudice and false beliefs. However, as noted previously, there was one item that did not relate to prejudice and was excluded from the false belief scale (that temporary protection visas will stop the boats). The bivariate correlation between this item and prejudice was $r = -.137, p = .111$.

**Discussion**

The present study examined the relationship between prejudice against

Table 3

**Multiple Regression for Prejudice against Asylum Seekers**

<table>
<thead>
<tr>
<th>Variables</th>
<th>$r$</th>
<th>$\beta^a$</th>
<th>$\beta^b$</th>
<th>$R^2$ change</th>
<th>Total $R^2$</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Step 1</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>-.181*</td>
<td>-.094</td>
<td>.043</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Political preference</td>
<td>.473***</td>
<td>.455***</td>
<td>.049</td>
<td>.231***</td>
<td></td>
</tr>
<tr>
<td><strong>Step 2</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prejudice against people smugglers</td>
<td>.409***</td>
<td>.121*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Threat</td>
<td>.754***</td>
<td>.469***</td>
<td>.469***</td>
<td></td>
<td></td>
</tr>
<tr>
<td>False beliefs</td>
<td>.730***</td>
<td>.304**</td>
<td>.409***</td>
<td>.640***</td>
<td></td>
</tr>
</tbody>
</table>

Note: * $p < .05$, ** $p < .01$ (all two-tailed). $^a$ denotes beta weights obtained on step 1 of the regression; $^b$ denotes beta weights obtained on step 2 of the regression.
Prejudice against asylum seekers and the perception of threat and the acceptance of false beliefs about asylum seekers; two concepts that we argue are evoked by negative political rhetoric. We also examined the relationship between people’s attitudes towards asylum seekers and people smugglers given the increase in focus on people smugglers in the present debate. As predicted, the three independent variables were implicated in prejudiced attitudes. A detailed analysis of the findings, together with implications and limitations/future research, are discussed in the following section.

Aim 1: Differences in Prejudice towards Asylum Seekers and People Smugglers

Following on from Hoffman (2010) who noted that people smugglers provoked more hostility than asylum seekers in the present political climate, we set out to measure the differences in prejudice against these two groups. Supporting Hoffman’s (2010) observation, our results indicated that participants reported significantly higher prejudice scores with regard to people smugglers compared to asylum seekers. This is an important finding, as a quantitative comparison of these two social groups has never been performed. Hoffman (2010) argued that the Rudd Government’s stance involved rhetoric that shifted negativity from asylum seekers to people smugglers by portraying the latter as morally dubious, potentially connected to criminal organisations, and as profiteering from the desperation (and the possible death) of asylum seekers who travelled by sea. By contrast, political representations of asylum seekers became more sympathetic, often making reference to their vulnerability and suffering; their position has been restructured as a ‘humanitarian plight’ (Hoffman, 2010) as opposed to one that centred on deviancy and criminality which had occurred in previous years (Klocker, 2004; Pickering, 2004). It is possible that our results are reflective of this change in the language and tone of the asylum seeker debate. However, this change may not be as clear as a simple decrease in prejudice against asylum seekers; we will return to this point in the following sections.

While we acknowledge the criminal nature of people smuggling, it has been noted that most people charged with this offence are not the organisers of the people-smuggling business; instead, most are poor Indonesian fishermen who are themselves vulnerable, and merely seek to supplement their family’s meagre income (Jackman, 2011; Murdoch, 2010; Pedersen & Hoffman, 2010). Regarding the organisers, most are not part of larger criminal syndicates; in fact, people-smuggling syndicates represent loose networks based on kinship and ethnicity rather than criminal organisations (Hoffman, 2010). Interestingly, Hoffman (2010) found that where most of the Iraqi asylum seekers she interviewed were critical of people smugglers, approximately one-quarter saw them positively; in their view, the smugglers helped them to safety.

It is clear that people smugglers, like other social groups, are not a homogeneous group (also see Hoffman, 2010), and that this matter is complex and nuanced. These points are vitally important in any discussion on asylum seekers and people smugglers, especially given the relationship found between these two groups in our study; it is not as easy as condemning people who supposedly prey on the weak and vulnerable. We stress, however, that we are not condoning the behaviour of criminal syndicates or people traffickers who exploit asylum seekers. We are simply addressing the complexities of the situation and how government policy may, in fact, be exacerbating the problem.

Aim 2: Prediction of Prejudice against Asylum Seekers

We also explored whether relevant socio-demographic variables (education, political orientation) as well as the social-psychological variables (prejudice against
people smugglers, perceived threat, and false beliefs) predicted prejudice against asylum seekers. With respect to the socio-demographic variables, only one, right-wing political orientation, was significant on Step 1 of the regression. Although all three social-psychological variables were significant at the end of Step 2, neither education nor political orientation was. Our results indicate that although the socio-demographic variables are relevant to prejudiced attitudes, as previous research has shown (e.g., Pedersen & Griffiths, unpublished), social-psychological variables are significantly more relevant.

The regression analysis showed that prejudice against people smugglers significantly predicted prejudice against asylum seekers. Theoretically, these two groups should be seen as distinct from each other, especially if the public believes that people smugglers are exploiting asylum seekers. However, as mentioned above, the results were not as straightforward as this; our data indicated a moderate correlation between people’s attitudes towards people smugglers and asylum seekers and this relationship held with respect to the regression analysis. This result suggests that prejudice against asylum seekers may be legitimised through the expression of antipathy towards people smugglers. Other research has also found a link between attitudes towards asylum seekers and people smugglers. In a recent study by McKay et al. (2011), participants expressed opinions such as “if asylum seekers were genuine, they would not use people smugglers to facilitate their journey to Australia” (p. 12). As these authors noted, some participants felt that asylum seekers’ willingness to use people smugglers implied that they were themselves morally dubious. Clearly, both in our research and that of others, the two prejudices are inter-linked.

A higher perception of threat (both realistic and symbolic) was also predictive of prejudice against asylum seekers. This finding supports previous research (e.g., Schweitzer et al., 2005); participants who felt somehow threatened by asylum seekers were more likely to hold prejudiced attitudes about them. To illustrate, related studies have found that a high perception of threat was related to support for harsher treatment of asylum seekers (Louis, Duck, Terry, Schuller, & Lalonde, 2007; also see Marr, 2011, for a discussion on asylum seekers, fear and politics) and that people who felt asylum seekers were a threat to national border security also believed that they were linked to terrorism (McKay et al., 2011). With regard to the present study, participants who scored high on the prejudice scale may desire a preservation of the social cohesion, safety, and economic condition of the Australian community which may be seen as under threat. While the desire to safeguard the community is not in itself socially harmful, it can have negative consequences when, on one hand, it is used to marginalise groups of people not considered part of the mainstream, and on the other, this maintenance of the status quo is legitimised through erroneous information.

There was a particularly high correlation between the acceptance of false beliefs and prejudice. Certainly, the acceptance of information that may be factually inaccurate or incorrect has been linked to prejudice against minority groups, including asylum seekers, in prior research (e.g., Pedersen et al., 2006). The transmission of false beliefs could well exacerbate feelings of perceived threat in the community; for example, it is simple to imagine how the notion that ‘Australia is being flooded by asylum seekers’ (A Just Australia, 2011) could galvanise hostility towards this group. McKay et al. (2011) similarly found that their respondents had limited accurate knowledge about asylum seekers – and that the ‘knowledge’ that they presented as fact was dependent on media reporting.
Aim 3. Whether the Relationship between Prejudice and False Beliefs still stands after Changes in Government and Recent Political Rhetoric

Previous research has found a positive relationship between prejudice towards asylum seekers and holding false beliefs about this group (Pedersen et al., 2005). Generally speaking, the relationship between prejudice and false beliefs still stands. This echoes other recent research that has also found that the “queue jumping/illegal” rhetoric continues to be a common fixture in the discourse surrounding asylum seekers (McKay et al., 2011; Sulaiman-Hill, Thompson, Afsar, & Hodliffe, 2011). Similar findings were found in another Perth study investigating the role of personal contact on prejudiced attitudes (Turoy-Smith et al., in press). In the Turoy-Smith et al. study, participants were asked whether their experiences with refugees affected their attitudes. A thematic analysis of the results indicated that some participants did not report attitudes specifically concerning refugees or their experience with refugees; almost 20% of responses included common false beliefs about asylum seekers which was irrelevant to the question being asked of them. Our results, coupled with the two aforementioned studies, point to the power of political rhetoric in shaping attitudes regarding asylum seekers. It is difficult to shift attitudes once they are formed although this is not set in stone as found by Pedersen, Paradies, Hartley, and Dunn (2011) with respect to increasing positivity towards asylum seekers.

One item, however, did not support the relationship pattern between prejudice and false beliefs. This item involved the statement that the giving of temporary protection visas will stop the boats. No relationship was found between prejudice and this item; this result was later replicated by Croston (2011). Although it has been found that temporary protection visas did in fact not stop the boats when they were introduced in 1999 (Hoffman, 2008), the rhetoric in the public sphere lives on. Indeed, the idea of reintroducing temporary protection visas has recently been proposed by commentators and politicians. For example, the leader of the Federal Opposition, Tony Abbott, with his parliamentary colleagues Scott Morrison and Michael Keenan, stated in July 2010: “… the Coalition has announced it will restore the strong regime of border protection policies that were so effective under the last Coalition Government, in particular … temporary protection visas…” (Abbott, Morrison, & Keenan, 2010). The Howard rhetoric, even though it is not as prevalent as in years gone by, has persisted in the community.

Practical Implications

Our results point to how community attitudes towards asylum seekers may be shaped by negative political rhetoric. Our findings support the arguments of many community psychologists as to the importance of the ecological approach to understanding social phenomena (Nelson & Prilleltensky, 2005; Sonn & Quayle, 2012). Individual attitudes are not formed in a vacuum and political rhetoric is clearly powerful with regard to the asylum seeker issue (Gale, 2004).

We previously argued that all three independent variables are in some way related to political rhetoric. Firstly, as noted above, the public discourse currently focuses negativity towards people smugglers (Hoffman, 2010), and this was mirrored in our findings. However, given the results of the regression analysis, a lingering association existed between asylum seekers and people smugglers. At a practical level this is important. Where a political message is phrased so it will not cause general offence (e.g., by stating people smugglers are “the scum of the earth”), it is still open for interpretation and clear to those for whom the message is targeted; this can be referred to as ‘dog whistle politics’ (Marr & Wilkinson, 2003). The danger is that by not challenging
this ‘dog whistle’, the debate becomes oversimplified and fear is created; all people smugglers can be labelled as evil, and those who engage their services can be demonised through association. It also removes the focus from understanding the reasons why asylum seekers might choose to pay for a people smuggler’s services. It is clear from our results that refugee advocates and activists need to directly confront these arguments.

Secondly, there is a great deal of political rhetoric that has the potential to inflame the public’s perception of imminent threat. Around the time the present study was conducted, a headline ran: “Tony Abbott warns millions of asylum-seekers could arrive by boat” (Kelly, 2010). It is conceivable that such a headline could lead the Australian community into perceiving a heightened level of threat. Such inflammatory media reporting continues to be prevalent, with a recent article proclaiming that “thousands of asylum seekers are expected to flood the suburbs as the Federal Government rolls out bridging visas allowing boat people to live and work in the community and collect welfare” (Marszalek & Benson, 2011). Contrary to this reporting, Australia only receives a small number of people seeking asylum (UNHCR, 2011). In fact, one of the items in our false beliefs scale measured whether people believed that Australia takes many asylum seekers compared to other Western nations. Results indicated that 75% of participants believed that Australia does take a comparatively large amount of asylum seekers.

Thirdly, previous research has documented the relationship between false beliefs and political rhetoric. False beliefs about asylum seekers have been identified in the rhetoric of the former Howard Government (Pedersen et al., 2006) and it would appear that they are still present in public discourse. The perpetuation of false beliefs can be attributed to the fact that very few people (if any) are likely to have encountered asylum seekers in their daily lives, and even fewer have encountered people smugglers. With this in mind, it is unsurprising that many people may be influenced by the rhetoric expressed by politicians (Pedersen et al., 2006; Lawrence, 2007; Schweitzer et al., 2005) as well as negatively-framed or inaccurate representations conveyed by the popular media (Gale, 2004; McKay et al., 2011). This is an important point to consider; these misconceptions persist in the absence of credible information from public figures, as well as from media outlets. Given that the community is generally not well-acquainted with the contexts of individual asylum seekers and people smugglers, a greater effort should be made to widely disseminate accurate information so that all who are involved in the national discourse are better informed and better able to combat old prejudices.

Prilleltensky (2001) has noted that community psychology is dedicated towards “the elimination of oppressive social conditions conducive to problems with living” (p. 750), as well as the cultivation of societal ‘wellness’. In light of these values, psychologists, in addition to other healthcare professionals and researchers, have frequently highlighted the deleterious effects that the policy of indefinite mandatory detention has had on the asylum seeker population in Australia. Some have observed that Australia’s system of mandatory detention does not exist in almost all other refugee-receiving countries (Crock et al., 2006). It seems that the anxiety over the asylum seeker issue, dating back at least to the 2001 Tampa Incident, is still a factor in the community and in government policy. Given the strong link found in the present study between prejudice against asylum seekers and both perceived threat and the acceptance of false beliefs, the chances of indefinite mandatory detention being abolished are relatively slim; social change
regarding this longstanding policy is unlikely to occur without the support of the wider community.

Previous research makes it clear that the perception of prejudice and/or discrimination negatively affects the health of marginalised groups (Paradies, 2007). It detracts from refugees’ wellbeing (Werkuyten & Nekuee, 1999) and increases integration problems (Davidson et al., 2008). It should be remembered that most asylum seekers have been found to be genuine refugees and have been settled in Australia (Refugee Council of Australia, 2012). Decreasing prejudice against asylum seekers is beneficial for both the asylum seekers themselves and our society in general.

Limitations and Future Research

The findings reported herein are not without their limitations. Firstly, participants with university training and education were over-represented in this study. Also, the views expressed in this study were from members of the Perth community and did not include views expressed by individuals from other parts of the state or country. Given the contextual nature of prejudice (Dunn, Forrest, Pe-Pua, Hynes, & Maeder-Han, 2009), further replication and extension of our study would be especially useful. Additionally, because there have been a limited number of empirical studies that specifically examine people’s views on people smugglers, further research would likely contribute to the collective research on asylum seekers, and enrich the social-psychological literature more generally. In saying this, people smugglers were treated as if they were a homogeneous group in this study to gauge participants’ views about the entire group; in reality, this group is fairly nuanced in terms of their individual circumstances, and future research should aim to address this. While the present study provides some new insights into this area of research, it is clear that more work needs to be done to follow up on the current findings.

Concluding Remarks

We believe that the current study makes a valuable contribution to the existing corpus of research concerning attitudes towards minorities and outgroups. It is the first study to analyse and compare participants’ attitudes towards both asylum seekers and people smugglers; this is particularly novel given the recent changes in political rhetoric about asylum seekers arriving on Australian shores. Our study has also extended the knowledge about what influences prejudice against asylum seekers, and points to the role of politicians and the media in influencing attitudes. Certainly, the media plays a major role in shaping attitudes to asylum seekers (Sulaiman-Hill et al., 2011).

The asylum seeker debate has captured the attention of the collective Australian psyche for well over the last decade and is a debate that is likely to continue unabated for some time yet. The commentary in the political realm has served to polarise and foment division in the broader Australian community. In spite of this, it is hoped that research will continue in this area, as educating and informing the public is one of the goals of community psychology and science in general. It has been noted that community psychology “is concerned with understanding and disrupting … oppression …” (Sonn & Quayle, 2012, p. 262). We hope that, in a small way, we have contributed to the understanding of oppression and perhaps given some tools to refugee advocates to tackle the oppression of asylum seekers. In closing, we add that one of the great and admirable goals of Australian society is to live up to the international duties that it has enshrined in law, as well as to adhere to its own egalitarian tradition of the ‘fair go’. Only a better understanding of the challenges that we face as a community can help us to achieve these goals.

References
Coffey, G. J., Kaplan, I., Sampson, R. C., & Tucci, M. M. (2010). The meaning and mental health consequences of long-term immigration detention for people seeking asylum. Social Science and Medicine, 70, 2070-2079.


Note
1 Since this article was submitted for review, a number of concerning policy changes have reinforced the border-security debate. In particular, in September 2012, the Gillard Federal government re-committed itself to offshore processing, whereby asylum seekers who have arrived in Australia by boat are transferred to Nauru for the processing of their refugee claims. Asylum seekers are also due to be transferred to Manus Island in Papua New Guinea. This policy change follows the release of the report to the Expert Panel on Asylum Seekers on 13 August 2012. The Panel was provided with a number of terms of references by the government, including offering policy advice on how to best prevent asylum seekers risking their
lives by travelling to Australia by boat and the development of an inter-related set of proposals in support of asylum seeker issues, “given Australia’s right to maintain its borders” (for the full report, see DIAC, 2012). A number of key human rights organisations have condemned Australia’s offshore processing policy, including the UNHCR and Australian Human Rights Commission (AHRC). See AHRC (2012) for more information.

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Fathers, Adolescent Sons and the Fly-in/fly-out Lifestyle

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The effects of Fly-in/fly-out (FIFO) employment on the relationships between adolescent boys and their fathers are poorly understood. Using a phenomenological methodology, this study investigated the experiences of male adolescents whose fathers have FIFO employment. In-depth interviews were conducted with 8 male adolescents to understand how the FIFO lifestyle influences their lives and relationships. Analysis identified two main themes of (1) opportunities afforded by the lifestyle and (2) family relationships. Adolescents reported lifestyle benefits associated with their father working FIFO, described how they maintained father son connections and how FIFO impacted on their family. Further research into the long term impacts of FIFO employment on adolescent development is indicated.

The resources industry in Western Australia includes both offshore oil and gas and land-based mining. Together, these sectors directly employ more than 75,600 workers; more than 80% of whom are male (Chamber of Minerals and Energy, 2008; Department of Mines and Petroleum, 2010). The geographic remoteness of many sites and the prohibitive costs of establishing infrastructure to service these sites has led mining companies to increasingly utilise fly in/fly out (FIFO) employment in their operations (Price, 2008). It is estimated that more than 20,000 families in Western Australia alone are involved in the FIFO lifestyle (Gallegos, 2006). FIFO is defined as:

...work in relatively remote locations where food and lodging accommodations are provided for workers on the work site, but not for families. Schedules are established whereby workers spend a fixed number of days working at the site, followed by a fixed number of days at home. (Storey, 2001, p. 135)

Early studies into the effects of FIFO on family functioning focussed primarily on the effects of this lifestyle on workers and their partners (e.g., Morrice & Taylor, 1978; Morrice, Taylor, Clark, & McCann, 1985; Storey, Lewis, Shrimpton, & Clark, 1986). More recently, studies have emerged with the primary goal of examining the potential impacts of FIFO on the well-being of children and families (e.g., Beach, 1999; Gallegos, 2006; Kaczmarek & Sibbel, 2008; Sibbel, 2001). However, to date, no research has sought to explore the psychosocial impacts of FIFO on adolescent well-being and development.

Adolescence

Adolescence is a transitional period, typically described as between 12 and 24 years of age. It is characterised by significant cognitive, social, emotional and physical changes (Australian Institute of Health and Welfare, 2007; O’Brien & Scott, 2007). Identity formation, self-esteem and social competence are associated with the adolescent’s ability to successfully gain independence, strive towards their educational aspirations and form meaningful peer relationships in their communities (Goldstein, Davis-Kean, & Eccles. 2005). Challenges to the formation of social identity and connectedness can place them at risk of being socially isolated within their...
communities (Hall-Lande, Eisenberg, Christenson, & Neumark-Sztainer, 2007; O’Brien & Scott).

Positive parent-adolescent relationships have been found to protect against social isolation through the provision of social support and creating a sense of family connectedness (Hall-Lande et al., 2007; O’Brien & Scott, 2007; Richmond & Stocker, 2006). A sense of connection to family can enhance individual feelings of self-worth and hence ameliorate the impacts of social isolation (Amato & Booth, 1997; Rubin & Mills, 1988).

Historically, fathers were seen as peripheral influences to children’s development; that is, important as material providers for their offspring but providing little in respect to the children’s social and psychological development (Mott, 1994). However, more recent understandings acknowledge the separate contributions made by fathers and mothers to their children’s development (Davis, Crouter, & McHale, 2006; Rohner & Veneziano, 2001). Studies have repeatedly found that when the mother-child relationship is controlled for, fathers exert a unique parenting influence over and above that of mothers (e.g., Flouri & Buchanan, 2000, 2002, 2003a, 2003b; Veneziano & Rohner, 1998). In particular, a positive father-child relationship has been found to contribute to better academic outcomes and higher social competence for some adolescents while reducing the likelihood of anti-social behaviour (Davis et al., 2006; Zimmerman, Salem, & Maton, 1995). In addition, whilst paternal involvement has a significant role in protecting against psychological maladjustment in male and female adolescents (Flouri & Buchanan, 2003a; Flouri & Buchanan, 2003b), this effect appears to be greater for boys than girls (Bronte-Tinkew, Moore, & Carrano, 2006). Fathers frequently play a more active role in their sons’ development than in their daughters’ and this involvement with their sons increases as they age. By the time children reach adolescence, compared to girls, boys report a greater degree of emotional and behavioural connectedness to their fathers (Videon, 2005).

Absence of Fathers Due to Employment

There is however some evidence that work-based demands placed on parents in Western cultures can negatively impact on parents’ and children’s opportunities to develop and maintain supportive family relationships (Pocock, 2001, 2003). Such demands include extended working hours and the ‘spillover’ of workplace-based stress into the home (Galinsky, Kim, & Bond, 2001). Long hours of employment, such as 12-hour shifts, can impact directly on the worker and have flow-on effects to the family (Pocock, 2001). For example, Bond, Galinsky, and Swanberg (1998) found long working hours can negatively influence father-child relationships through the reduction of time available for family interaction. In addition, the spillover of stress and negative interactions from the workplace to the family can impact on a father’s emotional capacity to positively engage with his children (Bumpus, Crouter, & McHale, 2006; Crouter, Bumpus, Maguire, & McHale, 1999; Hughes & Parkes, 2007).

However the relationship between parents’ working arrangements and home life is complex (Pocock, 2001). For example, in her review of the literature on the effects of long working hours on family life, Pocock reported that increased income resulting from longer working hours can relieve family stress associated with financial strain. She also reported that while children acknowledged the benefits associated with increased family income, they also expressed a need to have more time with their parents. It has been suggested that the combination of stressful, demanding jobs and extended working hours can have the most negative effects on families (Pocock, 2001).
Australians generally work longer hours when compared with workers in other countries (Australian Institute of Family Studies, 2008). Recent data indicates that 15% of Australian men work more than 50 hours per week (Australian Bureau of Statistics, 2010) and 38% work weekly overtime (Australian Bureau of Statistics, 2009). These longer working hours potentially impact on family wellbeing and the opportunities for children to engage with their fathers (Pocock, 2001). Hughes and Parkes (2007) found that conflicting work demands and family needs often resulted in work interfering with family life leading to lower family satisfaction and higher psychological stress. When compared with younger children, adolescents were more likely to feel they did not have enough time with fathers and that when fathers were available they were not able to engage fully due to the demands of their fathers’ work (Cruter, Bumpus, Head, & McHale, 2001; Cruter et al., 1999; Galinsky, 1999).

The type of industry in which the father works can contribute to the disruption of parent-child relationships. Industries that use shift work or FIFO work practices result in families whose fathers are absent for varying periods of time, potentially creating disjointed routines in the family environment (Zvonkovic, Solomon, Humble, & Manoogian, 2005). The resource sector is one such industry which utilises both shift work and commuting practices.

Approximately 47% of Western Australians who work in the resource sector are employed in a FIFO capacity, which requires them to live away from home for various periods of time (Chamber of Minerals and Energy, 2008). However, due to differing work requirements within the resource sector, FIFO rosters (the time away and at home), can vary widely ranging from 5 days away/2 days home to 9 weeks away/4 weeks home (Beach & Cliff, 2003; Gallegos, 2006; Pilbara Regional Council, 2004). In the current economic and employment climate, 8 days away/6 days home is an increasingly more common roster for land-based mining, while even time rosters such as 2 weeks away/2 weeks home are more usual in the oil and gas industry.

The effects of land-based mining and oil and gas off shore FIFO employment rosters on families have been investigated in both the international and Australian contexts since the 1980s. These earlier studies particularly focussed on the potential impacts of FIFO on family function and relationship stress between employees and their partners (Clark & Taylor, 1988; Eastman, Archer & Ball, 1990; Morrice et al., 1985; Storey, Shrimpton, Lewis, & Clarke, 1989). Typically the practice was associated with increases in stress and loneliness for the at home partner, and difficulties negotiating roles and responsibilities for each adult in the relationship, however there was also evidence of the use of positive coping strategies by the majority of these couples. More recent Australian studies have demonstrated that FIFO families are generally resilient to the particular challenges of the lifestyle and their levels of family functioning are similar to those of the general community (Keown, 2006; Reynolds, 2004; Sibbel, 2010; Taylor & Simmonds, 2009).

Other Australian studies have explored the experiences of children from FIFO families. Those few that have been completed were undertaken with younger children and have yielded mixed results. For example, Beach (1999) found that FIFO disrupted family relationships such that children had difficulty re-engaging with their fathers on their return. These families were all on a longer roster (4 weeks away and 1 week home). On the other hand, Kaczmarek and Sibbel (2008) found that compared to a control (community-based group) group, children aged from 8 to 12 years who had a parent engaged in FIFO did not display raised levels of depressive symptomatology or
anxiety. In her qualitative study of families with children aged between 10 months and 13 years, Gallegos (2006) found children were adaptable to the lifestyle but the degree of adaptability was influenced by the parents’ ability to manage the frequent transitions associated with the particular roster.

To date, little research has been completed on the impacts of FIFO employment on the adolescent sons of FIFO employees and thus the impacts are currently not well understood. In particular, little is known about adolescent boys’ perceptions of the impacts of their fathers’ FIFO employment on themselves and their families. Understanding these experiences is important as the FIFO fathers’ constant ‘comings and goings’ have the potential to impact on the relationship with their adolescent sons which in turn could significantly influence their psychological and social well-being and educational aspirations. Adolescents have different durations of experience of FIFO. For some, it is a familiar lifestyle as their fathers may have been engaged in this type of employment for a long period of time. However, for other adolescents it may be a new experience as a consequence of the migration of workers into the resource sector in response to industry workforce requirements (Chamber of Minerals and Energy, 2008).

**Method**

**Research Design**

Qualitative methodologies assume that people actively create their social worlds (Smith, 1990). The current study sought to understand the lived experiences of adolescent boys whose fathers were currently employed in a FIFO capacity and thus a qualitative methodology was deemed appropriate. In particular, a phenomenological approach was utilised as understanding the participants’ subjective experiences and the meanings they associated with FIFO living were central to the study (Crotty, 1998). Phenomenological approaches are based on the epistemological understanding of personal knowledge and subjectivity, that people are “active creators of their world and have a consciousness that communicates to them everyday experiences and knowledge” (Sarantakos, 1993, p. 48). The reality of an experience is inextricably linked to an individual’s consciousness of that experience as well as the outward experience (Becker, 1992; Liamputtong & Ezzy, 2005). Phenomenology also requires researchers to bracket or set aside their own preconceived ideas about the phenomenon in order to understand it through the voices of the informants (Creswell, 2003).

**Participants**

Eight adolescent males, as described in Table 1, participated in this study. Informants’ ages ranged from 13 years 9 months to 21 years 10 months. Each of the adolescent informants was a member of a two-parent family in which the father was currently engaged in FIFO work in the resources sector. Two informants lived with their biological mother and step-father. The majority of the fathers (n = 7) were employed by resource companies; six worked in the offshore oil and gas industry and one in land-based metalliferous mining. The remaining father was self-employed, operating contracts for a number of companies covering both
Australian-based and international mining projects.

The number of years the fathers had worked in a FIFO capacity ranged from 1 to 20+ years. Three informants had grown up with FIFO, and the remaining five had experienced their father having FIFO employment and non-FIFO employment at different stages of their upbringing. The fathers’ FIFO rosters were typically even rosters (symmetry between the days at work and days at home). One father’s roster varied as a consequence of his type of work and as such was not regular. Most informants had experienced different rosters in the past including; 2 weeks away/1 week home, 4 weeks away/2 weeks home, 7 weeks away/1 week home and 3 months away/1 month home.

Procedure

Following ethical approval from the Edith Cowan University Ethics Committee, informants were recruited through school newsletters and snowballing techniques. Informants completed face to face interviews guided by a semi-structured interview schedule which encouraged them to provide in-depth accounts of their experiences of having a father work in a FIFO capacity. The interview schedule was informed by earlier research that acknowledges the difference in experiences that occur when the FIFO worker is at home and when he is away. Questions included: What do you and your dad do together when he is at home? Tell me about how things are at home compared to when he is away? What is it like for you when dad goes away? What do you feel when he goes? How do you think dad’s being away affects your mum?

Interviews were digitally recorded and transcribed on completion. Ethical considerations such as voluntary participation, confidentiality and freedom to withdraw from the research at any time were adhered to. Sampling was undertaken until data saturation was achieved (Creswell, 2003).

Data Analysis and Research Rigour

Each interview was transcribed as soon as possible after the interview to access the essential meaning of the description of the phenomenon. Transcripts were initially analysed using Creswell’s (2003) data

Table 1

Demographic Information of Participants

<table>
<thead>
<tr>
<th>Pseudonym</th>
<th>Age</th>
<th>FIFO Duration</th>
<th>Current Roster</th>
</tr>
</thead>
<tbody>
<tr>
<td>Michael</td>
<td>13yrs 9mnths</td>
<td>20+yrs</td>
<td>2wks on/off</td>
</tr>
<tr>
<td>Jacob</td>
<td>15yrs 6mnths</td>
<td>16+yrs</td>
<td>2wks on/off</td>
</tr>
<tr>
<td>Toby</td>
<td>15yrs 5mnths</td>
<td>15+yrs</td>
<td>Variable</td>
</tr>
<tr>
<td>Sean</td>
<td>21yrs 10mnths</td>
<td>8yrs</td>
<td>1mnth on/off</td>
</tr>
<tr>
<td>Travis</td>
<td>17yrs 4mnths</td>
<td>7yrs</td>
<td>4wks on/off</td>
</tr>
<tr>
<td>Mark</td>
<td>19yrs 4mnths</td>
<td>7yrs</td>
<td>1mnth on/off</td>
</tr>
<tr>
<td>Josh</td>
<td>15yrs 10mnths</td>
<td>2yrs</td>
<td>1mnth on/off</td>
</tr>
<tr>
<td>Andrew</td>
<td>14yrs 1mnth</td>
<td>1yrs</td>
<td>2wks on/off</td>
</tr>
</tbody>
</table>
The analysis spiral, which employs a process of “moving in analytical circles rather than using a fixed linear approach” (p. 142). This iterative approach provides for alternating cycles of analysis and reflective consideration and is deemed appropriate for analysing phenomenological data (Creswell, 2003). Key words and phrases were extracted from each transcript and coded. Bracketing of the researcher’s preconceived ideas and judgements of FIFO was an essential part of this process (Crotty, 1998). Common issues were then grouped resulting in two overarching themes and five sub-themes (Miles & Huberman, 1994). Individual transcripts were also compared to identify experiences which were common across participants and those that were unique. This enabled the identification of patterns of occurrence and meaning occurring across the participants’ lives.

A reflective journal was kept by the primary researcher (the first author) to record thoughts and feelings encountered during the analysis (Liamputtong & Ezzy, 2005). Research rigour was achieved by the review of transcripts and themes by an independent reviewer and member checking. Four participants were also contacted by telephone to seek feedback regarding the accuracy of the themes and issues identified from their interviews. All expressed agreement with interpretations of the data.

Findings and Interpretations
The aim of this study was to explore adolescent boys’ experiences of their fathers working FIFO and the meaning they make of the experiences including the impacts on themselves and their family. Analysis of the interview transcripts identified the following overarching themes and sub-themes (see Table 2). The interviews revealed the boys’ experiences of the FIFO lifestyle were generally described as positive; however, although they were aware of the benefits afforded by the lifestyle, they were also mindful of the challenges FIFO presented for themselves and their families.

A number of developmental differences were evident in the perspectives offered by the informants. Younger informants appeared to have a more egocentric focus and spoke predominantly of how FIFO affected their personal lives while older informants were generally more aware of the effect of FIFO on the family system and their parents, as well as themselves. The ability to recognise multiple dimensions of experience develops into adolescence and development of this skill is influenced by the parent-child relationship (Burack, Flanagan, Peled, Sutton, Zygmuntowicz, & Manly, 2006).

Table 2
Adolescents’ Perceptions of the FIFO Lifestyle

<table>
<thead>
<tr>
<th>Themes</th>
<th>Sub-Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opportunities afforded by the lifestyle</td>
<td>Financial rewards</td>
</tr>
<tr>
<td></td>
<td>Extended periods of time at home and away</td>
</tr>
<tr>
<td>Family relationships</td>
<td>Relationships when Dad’s home</td>
</tr>
<tr>
<td></td>
<td>Relationships with Dad when he’s away</td>
</tr>
<tr>
<td></td>
<td>Comings and goings</td>
</tr>
</tbody>
</table>

Adolescent sons of FIFO fathers
Opportunities Afforded by the Lifestyle

One of the two major themes that emerged from the adolescents’ perceptions of FIFO was the opportunities afforded by the lifestyle for both the individual and their family. In particular, informants recognised the financial benefits of FIFO employment and the opportunities for extended interaction with their fathers during their ‘chunks of time’ at home. However, as discussed later, there was also recognition that these benefits came with a cost.

Financial rewards. Informants perceived that one of the main reasons for their father having FIFO employment was the high level of income and the resultant financial and material benefits for themselves and their family rather than preferring the FIFO lifestyle itself. Travis commented “he gets good pay in his job” while Sean acknowledged “he made a lot more money than when he worked at home.” However Michael’s comment that, “if he had a job with the same amount of money with the same type of work that he does...but it was in Perth he’d take that straight away,” indicates an awareness that the financial rewards rather than the FIFO lifestyle itself was the main reason his father had FIFO employment.

A particular perception of many of the informants was that their father’s FIFO employment provided them with the resources and opportunities to enjoy a lifestyle which included for example, outings and local, interstate, and international holidays that might not be available to them if their fathers had non-FIFO employment. Some families enjoyed regular outings to the theatre and concerts and meals at restaurants. Several informants mentioned their family holidays. For example, Michael described their travel to New South Wales, Tasmania, China, and Hong Kong, stating that the latter trip was “for my birthday because I really wanted to go overseas.” Josh mentioned surfing trips to the south west region of Western Australia and a trip that was being planned to Bali, while Andrew talked about a family holiday to Queensland. There was an understanding that these trips were possible because of the FIFO income.

While their father’s role as material provider was recognised by all the participants, two demonstrated a particular regard for what it meant at a personal level. Jacob stated, “(I am) proud of him. I’ve got a Dad doing something he doesn’t want to just so Mum and I can have a good life. In that way I find dad a pretty good man.” Michael described his dad as a “saint” and stated “he makes sacrifices all the time. I think he misses out on a lot more than I do.”

Furthermore, participants such as Jacob, Michael and Sean recognised the conflict between the financial cushion provided by the lifestyle and the cost in the form of the effect on their fathers (Galinsky, 1999; Pocock, 2001). Jacob stated:

That’s why he’s doing all this...because he feels that if he doesn’t...that it’s letting mum and I down. So he’s given us this house and the car and my school... He feels he has to do it because he wants the best for mum and I.

Extended periods of time at home and away. In addition to the comfortable lifestyle and increased recreational activities afforded by the financial benefits the informants described the positive outcomes of the concentrated ‘blocks’ of time at home that are characteristic of FIFO work (Gallegos, 2006). Most informants stated that one of the best things about FIFO was when their father was home he did not have to work. Josh described how he looked forward to his father coming home because “we get to spend time with him.” Similarly Sean commented that:

The best thing about him being home [is] that he has more time...The fact that he doesn’t come home in the afternoon and is
tired from working all day and then just wants to have dinner and go to bed. He is more sociable and can spend time doing stuff with us.

Sean’s comments reflect the value placed on the quality of the time with their fathers as well as the quantity of time FIFO allowed them to have with their fathers. In particular Sean was better able to interact with his father because he wasn’t tired from working all day in a standard residential job.

Andrew’s life experiences included both the FIFO and standard work-hours lifestyles as his step father had only commenced FIFO within the past year. In a comparison of the two work types he stated he believed he was not disadvantaged by FIFO stating:

Yeah. It’s almost the same now because I never used to see him back then as well because he was always going in and out. It’s good here because I get to spend more time with him now. I like this job better actually because on the old job he’d have to get up at six o’clock and he’d never get home until about 5.30. So we’d get that hour but he’d be pretty tired. He did that for weeks and [unclear] bad business and that’s why we moved over here [Western Australia] in the first place. They would always pull him in on weekends to do stuff. I’m glad he changed jobs because now I get two weeks and nothing interrupts.

Some participants acknowledged that in addition to the benefits associated with their father’s extended periods of time at home, there were also positive experiences for themselves and their family when their father was away (Mauthner, MacLean, & McKee, 2000). These positive outcomes varied between the informants. For example, Toby commented that home was “more relaxed when he (Dad) was away” and that if his father had a standard job where he was home every day Toby’s life would “probably be a lot more stressful.” Travis’s experience related to a perception of having more freedom when his dad was away, “Mum lets us have people over like not too many but Dad would hardly let us have anyone over.”

For Andrew, it related to time with his Mum:

Sometimes it gives me and mum more chance to relax together because when he’s home I’m usually spending more time with him than I would do with her. It gives us a lot of time but like I said before it does cause strain.

Family Relationships

The second major theme arising from the informants’ narratives was that of family relationships and in particular the relationship between FIFO father and son. Within this theme two sub-themes were apparent: relationships when the FIFO father was home and relationships while he was away. The overall impression of the father-son relationships was that they were generally positive and healthy with the majority of respondents talking about their fathers with warmth, affection and humour. However, Toby’s narrative also reflected the complex nature of father-son relationships and highlighted the difficulty in understanding the particular contribution of the FIFO lifestyle to these relationships. Toby described his father as “a stressful, critical person ...who always has to be right (and) get his own way. He always thinks he’s always the victim and never anyone else,” but when asked what the best thing was about having his father home, Toby replied, “he is pretty funny and he is good to talk to about stuff.”

Central to the father-son relationship is the range of roles that the fathers play in their son’s lives. Despite the regular absences of their fathers, the boys described a variety of roles their fathers played in their lives, such as “mates” (Michael, Josh, Travis, Mark,
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at home afforded by their FIFO lifestyle were valued by the participants as extra opportunities for this type of interaction with their fathers. These findings are similar to the experiences of adult participants in earlier FIFO research who valued the extra time afforded by the FIFO lifestyle to interact with family members (e.g., Gallegos, 2006; Sibbel, 2010).

Another related finding to emerge from this study regarded the informants’ perceptions of their father-son relationships compared with that of their friends whose fathers were home every day. Previous studies have found that the quality of father-son interactions is more important than quantity in determining positive adolescent outcomes (Flouri & Buchanan, 2003b; Parke, 1996). When asked to compare their father-son relationship with that of their friends, the participants were unanimous in their perceptions that their relationship was no different from that of their friends, and indeed some boys described it as better. Although some said they would have preferred their father to be home, they also believed they were not disadvantaged by not having their father home every day. As Mark explained, “It doesn’t really bother me much because when he’s home it’s good.”

Many indicated they believed that their relationship was actually stronger because of FIFO. For these adolescents FIFO employment meant that when their fathers were home they was not distracted by work and could therefore concentrate on interacting with their sons (Crouter et al., 2001; Crouter et al., 1999). As Travis described:

I think I get along better with my dad [than my friends with their dads] because their dads are always there. They’re all stressed out because they’re working every day. When dad gets back he doesn’t have to work.
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Relationships with Dad when he’s away. Previous research has demonstrated that ‘quality’ father involvement can be measured by how often fathers talk to their adolescents, and their knowledge of and involvement in their adolescents’ activities. This has been found to have a strong positive association with adolescents’ well-being (Bronte-Tinkew et al., 2006; Brotherson, Yamamoto, & Acoc, 2003; Carlson, 2006).

Earlier FIFO related research has found maintaining relationships during the away part of the roster can be a particular challenge for FIFO couples and families (Gallegos, 2006; Sibbel, 2001). In this study, a common factor in maintaining the connection between father and son was the ability to communicate while the father was away. The opportunity to keep in contact during the away periods depends in part on the availability of communication facilities at the FIFO worksite and these can vary between sites (Sibbel, 2010). Each of the participants had a number of available options and communicated with their father either by telephone, Skype or email with varying frequency and duration depending on personal preference, either the father’s or the son’s. These conversations might be just a quick hello or a longer conversation about such topics as “school” (Toby, Andrew, and Michael), “sport” (Travis, Andrew) and general events that had been happening in the family (Toby, Sean, Mark, Travis). As Josh described, “he rings about once every three days but that’s only for about two minutes because he has to get back to work. Sometimes not even two minutes so it’s real quick say hello.”

For Andrew, the communication was initiated by his father and maintained their common sporting interests even when apart. This seemed to provide some security in his relationship with his dad:

He always calls up to wish me ‘good luck’ in my game every Friday. He always checks the score afterwards, checks with Mum if I played good or not... I’m glad he’s keeping tabs. I wouldn’t want him not to because I like him to know what I’m doing, if I’m doing good or not.

Despite the regular separations it seems these adolescents and their fathers were able to establish levels of communication between them that were relevant and acceptable to meet their personal needs and that maintained healthy connections between them. Such paternal contact is an important positive influence on male adolescent development (Dolgin & Rice, 2008).

Concern for their father during his absence emerged as a common theme for a number of informants. This included concern for safety as well as for their father’s physical and mental health. Some adolescents were aware of the often physical demands of FIFO employment and worried about its effect on their fathers. “He’s really the one who supports the family and he works very hard for it, too” (Michael). “He’s getting old and he’s doing a physically demanding job...He’s working so hard (Jacob).” Several also worried about their father’s safety: “Sometimes I wonder if the helicopter crashed on the way out” (Andrew) and “Sometimes [I] worry about him. He’s done a lot to himself” (Jacob). Sean commented about the dangers of working overseas:

When he was working in Africa it’s a fairly dangerous place and half the countries in Africa have travel advisories not to go there at all... If you saw something on the news you’d think: “Is it anywhere near Dad? ”...and then when the hurricanes went through the Gulf of Mexico he was there...

In a discussion about the possibility of having FIFO employment Josh expressed concern for his father’s emotional well-being:
I’d try not to FIFO work. [unclear] I know it’s affecting Dad at the moment. I don’t really want that. Because he has to do it. He doesn’t want to do it. I know he doesn’t want to do it. He feels he has to do it. He feels he has to do it because he doesn’t want to feel like he’s left mum and I down. He feels he has to do it because he wants the best for mum and I. I know he doesn’t want to do it…

However safety issues were of no concern for other informants, as Travis explained, “He’s the Safety Officer so he should be safe.”

Comings and goings. Previous research has identified the impacts of the regular comings and goings on household routines and relationships (Beach, 1999; Gallegos, 2006; Storey et al., 1986). Informants in this study described their perceptions of the impacts of FIFO on household routines and family relationships. For some, the home routine was unchanging in the face of their father’s departures and returns, “when dad’s home it’s still the same” (Michael), whereas others reported changes: “sometimes it changes a lot because he comes back and there’s a lot more tidiness around the house” (Andrew). Nevertheless many eagerly anticipated their father’s return: “Excited...I want him home all the time” (Michael) and “I love it when he’s home” (Andrew).

On a personal level several respondents described the impact of their father’s return on their daily activities as “curbing their freedom. We can't have people over because we have to spend the time we do have with him [dad]” (Josh) and “he doesn’t like us listening to heavy music” (Toby).

The adolescents were also aware of the impact of the FIFO lifestyle on individual family members and on family relationships. In particular this was apparent in their descriptions of the effect on their mothers and changes seen in their father. Each of the participants perceived FIFO as having some negative impacts on their mothers. Consistent with findings from earlier studies (e.g., Reynolds, 2004; Sibbel, 2001; Storey et al., 1989) these included loneliness and having to take on extra household responsibilities while the father was away. This was evidenced by: “She’s a lot more happier when he’s here because she misses him while he’s away” (Josh), “Mum’s always stressed out” (Travis), “Mum’s more relaxed, happier when dad’s home” (Mark), “she doesn’t enjoy having to solve all the problems when dad isn’t here” (Sean), “she gets annoyed at little things far more when dad’s away” (Andrew), and “she does it hard” (Jacob). Toby’s description demonstrated insight into the complexities of the FIFO lifestyle and its impacts:

When he’s here she can be a little more stressed. Also feels better. When he’s gone it’s the same thing....So it’s sort of the same both ways but she is more happy when he is here. But when he is not here she is probably really happy as well but can do other stuff. So it sort of balances.

Informants had varying views on whether their mother’s stress impacted on their relationship with their mother. While each of the participants appeared to have a good relationship with their mother, some made statements indicating the occurrence of occasional stress in the relationship. This is consistent with some earlier findings (e.g., Sibbel, 2010). Andrew saw that his stepfather’s absence provided an opportunity to develop a closer relationship with his mother but that “it also leads to more arguments” and that “mum says I don’t listen to her has much as I listen to [step-father].” Sean believed that his mother’s stress meant that “small things blew out of proportion” and that “little things...got between us.”
Previous research has demonstrated that the comings and goings of the FIFO lifestyle often results in ongoing adjustment to the roles and responsibilities of family members (Gallegos, 2006; Sibbel, 2001, 2010; Taylor & Simmonds, 2009). Awareness of such impacts was shown by the participants’ descriptions of the roles and relationships within their families. In this study the participants reflected more traditional views of parental roles. Mothers were seen as responsible for the day-to-day care and running of the household, while fathers were seen as providers and protectors. Informants recognised that mothers carried a heavy burden but this recognition did not generally translate into a desire to assist; rather it was often seen as the father’s role to help out at home when he returned from work. When asked what the best thing about Dad being home was, Travis replied his father “…helps Mum out so she doesn’t have to do everything and stuff like that so Mum’s not angry.” Mark also saw his father as fulfilling a role assisting his mother with household duties: “…it's not just mum doing everything. He (Dad) can help out as well.”

Previous research has identified the impact of the periods immediately prior to the FIFO employee’s leaving for work and returning home on family dynamics (Gallegos, 2006). In the present study informants reported that they observed changes in their father’s moods during the time when he was at home. Consistent with previous findings nearly all reported that their father was tired on returning home and consequently slept for the first day (Beach, 1999; Collinson, 1998; Gallegos, 2006). Some reported that their father’s fatigue made their father ‘grumpy’ while others saw no change. There was a divergence of opinions regarding fathers’ moods while he was home. Comments ranged from “relaxed” (Sean), and “happy” (Andrew), to “grumpy and uptight” (Jacob). Four participants reported a change in their father in the days leading up to his departure, for example, “He’s getting more business-like, getting ready into the role of work, stepping out of the family man and getting into a role... an emotional (change)” (Andrew). Sean observed:

...as it gets closer to the day he is away again he isn’t as relaxed...there is a subtle change... He is planning to go back to work where he’s getting into that working headspace. He’s quite focussed on organising a lot of things... He just seems a little bit preoccupied...

Mark said his father became more “sentimental” while Michael said his father became “grumpy”. However, while acknowledging their fathers’ different emotional states the adolescent also seemed to accept these as just part of their lives. Gallegos (2006) found that FIFO workers and their partners experienced a similar range of contradictory emotions surrounding the worker’s departure and return including: anticipation, relief, conflict and anxiety and that families developed individual ways of coping with these times.

**Conclusion**

The findings from this study present an emerging understanding of male adolescent experiences of the FIFO lifestyle and the meaning they make of these experiences. The adolescents in this study appeared to be resilient to the impacts of the FIFO lifestyle and recognised the opportunities it provides for them and their families. Despite regular father absence adolescents acknowledged their fathers’ contribution to their social and psychological development.

Informants described predominantly positive relationships with their fathers despite the frequent and prolonged paternal absence. All informants expressed positive regard for their father and, while most missed him, this did not translate into a belief that
they were in any way disadvantaged by not seeing their father every day. Indeed, the participants believed that their relationships with their fathers were no worse than other father-son relationships where the father was home every day and, in some cases, there was a belief that aspects of their father’s FIFO employment such as the extended periods of time at home provided opportunities to strengthen their relationships.

Shared activities, particularly sporting, were crucial to the underpinning of the father-son relationship. The mutual experience of these activities fostered the connectedness between father and son, both when the father was home and when he was away. Sport was often the conduit through which conversations flowed. Sport was also important to bolstering adolescent identity as seen through the pride expressed by the participants when their fathers attended matches. This connectedness to their fathers was evident for all informants. Thus these adolescents perceived their FIFO fathers had a continuing active role in their development (Videon, 2005).

There was an awareness of the subtle effects of the FIFO lifestyle on family dynamics. In particular, the impacts of the fathers’ comings and goings and the shifting of family responsibilities onto the mother were commented on. They acknowledged their mothers’ loneliness and the burden of extra household responsibilities assumed while their father was away (Beach, 1999; Taylor & Simmonds, 2009). This was evidence of an appreciation of the sacrifices parents were making in order to have a particular lifestyle which included the informant’s comfort and wellbeing. It appears however that these families were able to adjust to the comings and goings and work out strategies to maintain connectedness (Hall-Lande et al., 2007; O’Brien & Scott, 2007; Richmond & Stocker, 2006).

Past studies have demonstrated that the separation of work and home lives by FIFO employment can protect families from the potential negative effects of shift work and spillover between work and home lives (Gallegos, 2006; Sibbel, 2010). This study further supports these earlier findings. Participants frequently described how the chunks of time their father had with them was uninterrupted by the pressures of work intruding into the home (Bumpus et al., 2006; Crouter et al., 1999; Hughes & Parkes, 2007).

Limitations

This exploratory study represents the lived experiences of a small group of adolescents engaged in the FIFO lifestyle, thus the findings should not be seen as generalisable to the wider FIFO population. However, these findings can be used to inform understandings of the impacts of a FIFO lifestyle on adolescents and their families.

The participants’ age range of 13 to 21 years represents a broad cross section of potential adolescent developmental perspectives. Adolescence is marked by evolving relationships, and therefore it is difficult to separate the impacts of FIFO from general adolescent development in any discussion of family relationships. Furthermore, two participants were members of blended families and were not the biological offspring of the fathers mentioned, thus adding another dimension to the experiences of these boys. Finally, each participant’s father’s profile of FIFO differed with respect to length of roster, type of operation and duration of FIFO employment demonstrating that there was no typical FIFO experience that could have influenced these findings.

Future Directions

FIFO will continue to be a common employment practice in the Australian resources sector in the foreseeable future. As such, it is important that we continue to evolve our understandings of the impacts of this lifestyle on the wellbeing of employees,
their families and communities. The findings arising from this study provide an initial understanding of adolescent experiences of FIFO. Further research using both qualitative and quantitative methodologies is warranted to extend understandings in this area. Investigation into the experiences of adolescent females in order to gain insight into the potential effect of FIFO on father-daughter relationships could also be undertaken.

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“Shaking the World Awake”: A Constructionist Cross-case Analysis of the Phenomenon of Mature Spiritual Activism

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Socially engaged spirituality is emerging in lay and scholarly literature but little researched in community psychology. Mature spiritual activism is completely absent from community psychology investigation. Multiple case studies of 3 exemplar-networks from Buddhist, Christian, and Native American faith traditions explored mature spiritual activism. Two female exemplars and 1 male exemplar participated, ages 37 to 79 years old, along with 22 individuals from the exemplars’ social networks. Data were collected through in-depth semi-structured interviews, documents, and direct and participant observation and analysed using a case study and constructionist grounded theory hybrid. Cross-case analysis determined the qualities of mature spiritual activism. Findings suggested that mature spiritual activists underwent positive and healthy transformations of self and contributed to positive shifts in others and in the collectives of which they were a part through their dual spiritual and social engagement. The model inducted posited that personal and sociocultural changes may be catalysed through the dynamic intersection of the exemplar’s nature, behaviours, and sociocultural collectives. Catalysing personal change entailed learning and growing cognitively, evolving spiritually, developing resilience, and deepening in humanness. Catalysing sociocultural change involved making a difference, calling others to greater freedom, enabling philosophical and structural changes, and empowering others.

World-renowned environmentalist Paul Hawken (2007) believes that we are in the midst of the largest human social movement in our history. The totality of this movement remains shrouded, mysterious. This movement propels social transformation, or “intentional attempts to change a particular social group or some aspect of an entire society for the better according to some kind of shared norms” (Ruffing, 2001, p. 18). It arises when change agents decide the status quo is disadvantageous and persuade others to join a collective project of social refashioning. Social transformation has always been central to community psychology (Rappaport & Seidman, 2000).

Social transformations in the emerging integral worldview (Ferrer & Sherman, 2008; Rothberg, 2008) include the manifestation of an entirely new emergent (Gebser, 1949/1985) form of cultural consciousness that includes “a sense of connectedness to the whole of humanity, a sense of oneness, an experience of foundational love, [and] a direct intuition of evolving consciousness” (Wall & Louchakova, 2002, p. 254). As such, in the integral worldview, spirituality is embedded in new spheres of influence beyond limits of modernity and is no longer isolated into an individualised and privatised subjectivity (Rothberg, 2008). In contemporary discourse on societal betterment, for instance, spirituality has shifted from irrelevance (Falk, 2003; Rothberg, 1993, 2008) and alienation (Walsh-Bowers, 2000) to interest and inclusion (Dalai Lama, 1999; Jones & Dokecki, 2008; Loy, 2003; Sarason, 2001; Sivaraska, 2005).

Given that a common definition of spirituality has yet to and likely will not be established (Jones & Dokecki, 2008), for the purposes of this article, spirituality is defined as the “doctrines and practices that help facilitate lived transformations of self and community toward fuller alignment with or
expression of what is ‘sacred’” (Rothberg, 1993, p. 105). As such, spirituality in this article is not to be confused with religion. In spirituality, faith is experienced “through a direct relationship with the divine” (DeYoung, 2007, p. 8) in contrast to a religion where one is a part of a system with a particular set of beliefs, rituals, and ethics (Hill, 2000). As the current concept of spirituality means being in “fuller alignment with or expression of what is ‘sacred’” (Rothberg, 1993, p. 105), it is connected to mysticism (Rohr, 2009; Woods, 1996). Mysticism, while impossible to define fully given its ultimate ineffability (DeYoung, 2007), is commonly misunderstood. In some Eastern traditions mysticism refers to the attainment of non-dual consciousness, “the highest [human] expression of human awareness and psychological maturity” (Costeines, 2009, p. 1). In some Western traditions, mysticism involves union with the divine (McGinn, 2006). Mystics undergo a “transformative process that supports self-transcendence” (Ruffing, 2001, p. 12), “a transformed life” (McGinn, 2006, p. 519), and the direct apprehension of the nature of reality (Rohr, 2009). Spiritual and/or mystical development is viewed positively as it shifts values and enables personological growth that fosters “individual and collective survival” (Grof & Grof, 1993, p. 252), increased tolerance and compassion, profound understanding of the interconnectedness of life, a far-reaching concern for humanity. Maton (2001) writes that spiritual development is correlated with increases in individual wellbeing and “a glimpse of the reality that we are all a part of a larger whole [in which we are all]... valuable, necessary, and interdependent” (p. 611).

Marrying Spirituality and Social Change

A growing number of experts in international development (Edwards, 2004; Hochachka, 2007), community development (Kaplan, 2002; Macy, 1991), social justice (Rakoczy, 2006), peace studies (Burdge, 2006), social work (Brenner & Homonoff, 2004; Ryan, 2000), service (Dass & Bush, 1992), social activism (Horowitz & Maceo Vega-Frey, 2006; Rothberg, 2008), and public service (Houston & Cartwright, 2007) advocate for the incorporation of spirituality into social change theory and action, stating that the combination of inner spiritual development and outer social change functions dialectically to engender constructive transformation.

Marrying spiritual development and social change efforts is the principle focus of socially-engaged spirituality, which can generally be described as an emerging model that combines the work of social transformation with the work of individual development (Movement Strategy Center [MSC], 2007). Socially engaged spirituality is viewed as an innovative and promising alternative to secular social change (Rothberg, 2008), fundamentalism (Rothberg, 1993), and disengaged forms of religious/spiritual traditions (Edwards & Sen, 2000).

Conversations in community psychology regarding spirituality and social change began receiving more attention in early part of this century (Dokecki, Newbrough, & O’Gorman, 2001; Hill, 2000; Walsh-Bowers, 2000). Spirituality is described as essential to the development of personal and community wellbeing (Maton, 2001), related to how communities are bound together (Dokecki et al., 2001) and built, and motivating meaningful action (Trout, Dokecki, Newbrough, & O’Gorman, 2003). Community psychology experts have drawn relationships between spirituality and the adequacy and competency of the social change agent, or community psychologist (Wolff, 2010). Wolff (2010) advises that developing and maintaining spiritual grounding is essential so that social change agents can sustain “clear connections to what
Little in the field (Jones & Dokecki, 2008) has been published in the last decade that has continued these investigations. Jones and Dokecki (2008) explain that the aspects that religion/spirituality regard as “mysterious, yet essential, aspects of the human situation related to wellness, oppression, and liberation have often been hidden to community psychologists simply because they have been reluctant to venture into the ultimate aspects of the spiritual realm” (p. 151). Walsh-Bowers (2000) cautions that “only a holistic psychology can enable community psychologists to effectively study and respectfully engage in emancipatory action” (p. 222).

The Emergence of Mature Spiritual Activism

A growing focus of the field of socially engaged spirituality is the contribution of advanced levels of spiritual development to social activism, a phenomenon that has been termed mature spiritual activism in this study based on Kornfield’s (1993) concept of spiritual maturity. Kornfield (1993) outlined 10 determinants for spiritual maturity: non-idealism, kindness, patience, immediacy, integrated and personal, questioning, flexibility, embracing opposites, relationship, and ordinariness. Non-idealism refers to a spirituality that is not based on seeking perfection but it based on “the capacity to let go and to love” (Kornfield, 1993, p. 311). Kindness implies attaining a foundation of self-acceptance, which nurtures “a compassionate understanding” (Kornfield, 1993, p. 312). Patience allows one to move beyond “gaining or grasping…to open to that which is beyond time” (Kornfield, 1993, p. 313). Immediacy refers to the here and now focus of attention in spiritual maturity as well as its manifestation in the transcendent and immanent. With immediacy, “we become more alive and more present” (Kornfield, 1993, p. 314). Being integrated means that life is no longer compartmentalised and the personal quality honours “spirituality through our own words and actions” (Kornfield, 1993, p. 314). These two qualities acknowledge that being of service to the world starts with oneself. Questioning means open-mindedness, an ability to discern, and a willingness to see life as it is rather than how we would like it to be or how we have been conditioned to see it. Having flexibility means being able to be present and let go and “to respond to the world with our understanding and our hearts [and] to respect the changing circumstances around us” (Kornfield, 1993, p. 316). Embracing opposites means being able “to hold the contradictions of life in our heart” (Kornfield, 1993, p. 317). Relationship means that all things are seen as sacred, and community and interconnectedness are honoured. Lastly, spiritual maturity manifests in ordinariness, which is disinterested in “attaining mystical states or extraordinary power” (Kornfield, 1993, p. 319), but that shows itself as “a simple presence” (Kornfield, 1993, p. 319) that listens and allows the mystery to reveal itself.

The concept of mature spiritual activism is theoretically analogous to DeYoung’s (2007) concept of mystic-activism. DeYoung (2007) found that mystic-activists were motivated by their religious faith, had a worldview that emerged from the margins of society, had an identity [that] was rooted in a belief that we share a common humanity, and held an ethics of revolution that demanded structural change. In DeYoung’s (2007) words, mystic-activists are leaders who experience an unmediated relationship with the divine and:

…whose activism consumes them yet is deeply rooted in their faith and in the mystery of the divine. Their activism compels them to reach passionately inward toward the divine for sustenance, wisdom, perseverance, and belonging. (p. 7)
DeYoung (2007) elaborates further that the: …lived faith of mystic-activists gives birth to unique worldviews, identities, and ethics…[which] compel faith-inspired activists to reach for authenticity in their leadership and propel them to struggle for a society that aligns with the vision for social justice in the Scriptures. (p. 138)

While mature spiritual activism might be quickly equated to liberation theology’s consciousness-raising process (Trout et al., 2003), mature spiritual activism differs in that it requires the attainment of non-dual consciousness, which is related to but not equivalent to liberation theology’s consciousness awakening (Watkins & Shulman, 2010).

Although community psychology offers its theoretical development and findings in the nexus of spirituality and social change, empirical investigations on mature spiritual activism are non-existent in community psychology. Study of mature spiritual activism stands to benefit community psychology by broadening horizons of understanding and providing practical guidance for social change agents who desire more holistic, grounded, and potentially more effective social change methods.

Method

A hybrid research methodology of multiple case study (Stake, 2006; Yin, 1994) and constructionist grounded theory (Charmaz, 2006) was utilised. The central research question studied was, “What is characteristic of social change agents identified as spiritually advanced?” Multiple case study informed participant selection, data collection, procedures, recruitment, analysis, and presentation of results while grounded theory guaranteed an inductive style of data analysis and interpretation. Adequate data were available to enable limited theory building and provided the possibility of making cautious generalisations (Stake, 2006; Yin, 1994).

Participants

Participant selection was based on achievements in social change, level of spiritual advancement, and ability to meet the requirements for case study research. Exemplars had completed a minimum of 10 years of social change work, some of which was direct action. Spiritual advancement was determined using multiple factors to ensure the selection of the most qualified participants given that an appropriate and reliable empirical measure of spiritual advancement does not yet exist. These factors included a community accreditation of spiritual advancement, my felt sense of the participant’s level of spiritual development, and in some cases, exemplar nomination and public recognition of degree of spiritual advancement. Exemplars selected for study had achieved a non-dual level of spiritual development and qualified as mystic-activists according to DeYoung’s (2007) criteria. Exemplars had to work with others willing to participate in the study (e.g., co-workers, family members, friends, spiritual and/or religious mentors, colleagues, and those from populations served).

Exemplars were no less than 35 years of age to ensure that they met the minimum requirements for social action and spiritual advancement. The nationalities represented were American (Phileena Heuertz), Native American (Grandmother Mona Polacca), and Srkan (Dr. Ari. T. Ariyaratne). Grandmother Mona and Phileena identified as heterosexual, and Dr. Ari did not identify as any sexual orientation. Grandmother Mona is divorced, and the other exemplars are married. Phileena has a bachelor’s degree, Grandmother Mona and Phileena identified as heterosexual, and Dr. Ari has a master’s degree, and Dr. Ari has a doctorate degree. Each participant came from a different faith tradition: Buddhism (Dr. Ari), Christianity (Phileena), and Native American/Indigenous (Grandmother Mona).

Grandmother Mona’s ethnicity is Hopi-Havasupai, Phileena is European-American.
(German and English), and Dr. Ari is Sri Lankan/South Asian. All self-identified as abled, indicating that none was experiencing a disability.

**Procedure**

I recruited and found exemplar participants using mixed purposeful sampling and through nominations. I invited socially engaged spirituality experts to nominate exemplars and my literature review generated a qualifying candidates list. Before a participant was chosen, he/she was verified to be qualified by at least one socially engaged spirituality expert. Non-exemplar participants were nominated by exemplars in the cases of Phileena and Grandmother Mona and were selected through convenience sampling in the case of Dr. Ari. In the cases where exemplars nominated non-exemplar participants, I directed exemplars on how to select such participants based on how well the exemplar perceived that this person was able to understand the his/her personality and developmental growth. As consistent with theoretical sampling, I changed the recruitment for non-exemplar participants after the first case (Dr. Ari) because some of the non-exemplar participants recruited through convenience sampling did not know the exemplar very well and therefore very little useful data was able to be collected from such participants. I decided that greater value and priority would be placed on recruiting non-exemplar participants that had more significant experience with and understanding of the exemplar so that more intimate data could be collected. Given the paucity of time and financial support available for field research, greater reliance had to be placed on the exemplar for recruiting these participants.

I selected cases based on the opportunity they provided for learning (Stake, 2006) including the overall selection of cases and their inherent diversity. Recruitment for each of the exemplars ranged from six to seven months. Once I received nominations for Dr. Ari and Phileena, email contact ascertained interest and availability. I contacted Dr. Ari first through Sarvodaya’s international volunteer department and then directly. I emailed Phileena directly. I invited Grandmother Mona in person during her workshop in Sarasota, California, and I corresponded with her assistant to determine research feasibility. Once interest was indicated, I screened the exemplar candidates. After I obtained consent, in-person meetings were scheduled to complete the semi-structured interview protocols. Three non-exemplar participant interviews were conducted by phone. I secured translators to conduct interviews with participants that did not speak English.

The ethics review board approved participant identity disclosure following case study’s methodological recommendation to reveal participant identity (Stake, 2006). Exemplars signed a supplementary consent form.

**Data Collection**

Multiple sources of data included documentation, interviews, direct observation, and participant observation. I created a case study database and maintained a chain of evidence in a Microsoft Excel spreadsheet. I utilised theoretical sampling and saturation (Charmaz, 2006) to assure successful data analysis. I pilot tested exemplar, family member, and co-worker interview protocols to assess question wording and order. Formal exemplar interviews lasted 90 minutes (Dr. Ari), 150 minutes (Phileena), and 190 minutes (Grandmother Mona) and were audio-recorded. Five (5) formal interviews were completed with Dr. Ari, 3 with Grandmother Mona, and 2 with Phileena. Non-exemplar participant interviews (co-workers, family members, friends, spiritual guides, colleagues, and recipients of social action) lasted 60 to 90 minutes and were audio-recorded. Eleven, five, and six non-exemplar participants were interviewed in Case 1 (Dr.
Ari), Case 2 (Grandmother Mona), and Case 3 (Phileena) respectively.

I completed direct and participant observation during field visits. I spent 22 hours with Dr. Ari in direct and participant observation. Data were collected through meals or tea, trips to local and nonlocal Sarvodaya events, and morning meditations. I spent 15 hours with Grandmother Mona in direct and participant observation activities, including sharing a meal, spending time together travelling to other interviews, e-mail conversations, a conversation at her sister’s home as well as earlier participation in one of the exemplar’s workshops. I spent 17 hours with Phileena in direct and participant observation through four shared meals, a yoga class, tea, a staff lunch, a staff meeting, weekly community prayer hour, and a spiritual accompaniment meeting.

Data Analysis

I developed individual case descriptions using data analysis strategies from social constructionist-based grounded theory (Charmaz, 2006). I utilised line-by-line, incident-by-incident, and focused coding. Constant comparison was employed to discover code matches and nuances demanding new code creation. Memoing (Corbin & Strauss, 2009) inducted focused codes from initial codes and themes from focused codes. Chosen themes captured a vital aspect of the central research question. Exemplars reviewed and approved their case report drafts. After individual case analysis, I conducted cross case analysis to cull out overarching themes. Triangulation was employed, and insiders and outsiders to the research examined the cross case report and commented on its veracity. I engaged in indwelling (Anderson, 2000), or ‘taking breaks,’ which enabled intuitive/nonlinear levels of analysis.

Biographical Findings

Dr. Ari T. Ariyaratne

Dr. Ari has worked for social change for 54 years and is “one of the most successful living examples of blending Gandhi’s ideas with the Buddha’s” (Ingram, 2003, p. 121) for his development of Sarvodaya, a nonviolent movement of more than 3 million individuals in 15,000 villages in Sri Lanka (Sarvodaya, n.d.). The movement has grown from work camps for privileged high school students in 1954 to the vision for sarvodaya, or awakening for all. The movement emphasises “decentralization and self-reliance” (Ingram, 2003, p. 119) and implements highly effective programs in community development. Dr. Ari is an active practitioner of Buddhism and has maintained a consistent meditation practice for the 40 years. He claimed to have forged his own spiritual path through different teachers and religious resources. He has been the recipient of many awards for his social engagement.

Grandmother Mona Polacca

Grandmother Mona has worked for social justice, environmental sustainability, indigenous rights, and healing for 40 years. She is widely known for her participation in the International Council of the Thirteen Indigenous Grandmothers as well as her contributions to United Nations’ committees working with indigenous human rights; research in the social sciences on alcoholism, domestic violence, and culturally appropriate treatments for Native Americans; and, leadership in the Native American revitalisation movement. She is a life-long spiritual practitioner and an active practitioner of Native American spirituality having participated in the Native American Church since 1978. She cites ancestors and elders both living and deceased as her spiritual teachers.

Phileena Heuertz

Phileena has worked to live in solidarity with the world’s most impoverished and disadvantaged for 17 years as an integral part of the WMF movement. WMF serves vulnerable populations through a prophetic ministry and incarnational and holistic missions in Asia, Latin America, Europe, and
Africa. She is most widely known as the international executive co-director of the WMF movement, a New Friars movement leader, and a contemplative activism luminary. She has engaged with marginalised and oppressed communities that include abandoned children, people living with HIV/AIDS, sexually exploited women and children, people recovering from drug addictions, homeless children, refugees, and children of combat and war. Her conversion to Catholicism from Protestant evangelism represented a key spiritual development. Significant spiritual experiences led her to identify with the contemplative activism of Clare and Francis of Assisi. She engages in a number of spiritual practices and personal development systems.

Cross Case Analysis Findings
The macrotheme “Shaking the World Awake”: Living Transformation: Self, Other, Society describes the emergent phenomenon. Contained within the macrodynamic are three domains referring to the exemplars’ interior-individuality (Exemplar Nature), their exterior-individuality (Exemplar Behaviours), and their sociocultural milieus (Social Systems and Cultures). Exemplar Nature and Exemplar Behaviours relate to the ‘I’ realm, and Social Systems and Cultures relates to the ‘We’ and ‘It’ realms. Where each of these domains intersects, interaction occurs and dynamic processes are catalysed. The thematic dynamic, Catalysing Personal Change, results from the intersection of the Exemplar Nature and the Exemplar Behaviours domains. When Exemplar Behaviours meets Social Systems and Cultures, the thematic dynamic Catalysing Systems Change occurs. Finally, where Exemplar Nature joins with Social Systems and Cultures, the thematic dynamic Catalysing Cultural Change is produced. Changes in social systems and cultures were combined and treated together in the thematic dynamic Catalysing Sociocultural Change.

See Figure 1 for a graphic depiction of the dynamic.

Social Systems and Cultures Domain
The exemplars engaged with intersubjective and interobjective systems categorised in the following themes: Socially Engaged Spirituality Movements; Marginalised, Impoverished, and Privileged Populations; Family Systems; Governments; and Organisations. For example, while variance occurred, all exemplars interfaced with socially engaged spirituality movements, were leaders in movements, and engaged with marginalised, impoverished, and privileged populations. Exemplars also connected to family systems, local, national, and global governing bodies, and various organisations.

Exemplar Nature Domain
All cases included interior qualities spoken of by exemplars and characteristics and dynamics perceived by non-exemplar participants.

Possessing virtues and skills. Exemplars embodied virtues of compassion, honesty, generosity, humility, kindness, strength, perseverance, devotion, discipline, industry, tranquillity, mercy, and equanimity. Phileena was described as having “compassion beyond belief [and]…a heart for other people” (WMF Board Member). Phileena’s priest shared that she is able to keep her ego in check and explained, “One of the dangers of delving into developmental [work is]…your ego exerts its ugly head…. She does not do that. She is able to listen to that voice and laugh at it.” Grandmother Mona is “always positive, vibrant, happy, bringing a joyful presence” (Family Member) to her life and to others, and, when she enters a new situation, she believes that “whatever it is, it’s going to be good” (Family Member).

All demonstrate social intelligence abilities of interpersonal effectiveness including social awareness, seen through empathy, attunement, and social cognition and social facility including the skills of influence, concern, self presentation, and
synchrony with others. Grandmother Mona was described as having skills of social cognition and social facility:

She reflects back on what people are able to do and from a heart point of view. When I was at the community meeting, she was really in tune with what people in the community were thinking, saying, and feeling, and reflected back to them what she heard them think and say and feel…. She’s almost like a mirror where she mirrors back how people are thinking and feeling. (Co-worker)

The exemplar confirmed her attunement stating, “I’m feeling them, I’m watching them seeing how they’re responding.” One of Dr. Ari’s co-workers described him as “a friend to everybody,” and a friend confirmed stating that “his kindness is not for one particular group or whatever particular person but to everybody.” A Sarvodaya villager explained that when Dr. Ari is speaking, “he understands the level of the people, [and] when he is talking to the people, he can communicate.”

Figure 1. Theoretical model of mature spiritual activism advanced in this research.
Committing. The exemplars had lifelong commitments to their faith traditions, spiritual development, and spiritual practices. Exemplars committed to social change in their late teens (Grandmother Mona) or early adulthood (Phileena and Dr. Ari) and continued their social engagement uninterrupted. Commitments to social change were deep and passionate. The exemplars remained in close connection the populations with which they engage in order to increase the wellbeing of those groups. Dr. Ari’s family member stated, “The movement and his life, it’s just one.” Grandmother Mona’s family member, in describing her commitment style, observed that “this is her life. She doesn’t have a job per se or a home per se, she just goes wherever this leads her.”

Being empowered. Participants described exemplars as empowered, and exemplars appeared to act from an empowered state. Her priest characterised Phileena as “empowered by the Holy Spirit, and also she’s often empowered by others.” Dr. Ari’s family member stated that his “spiritual development, the meditation practices makes a person to be strong and able to face any obstacle in the society, and I feel his meditation practice has helped him to develop and to bring this movement into this level.”

Finding calling. Part of the exemplars’ intrapsychic landscapes included an inward experience of feeling called and living this calling. Grandmother Mona stated:

So it’s like sometimes people ask, “So how did you become a grandma?” [laughter]. I can’t even begin to tell them… It’s been the journey – it’s been the journey of life, and it’s everything. I guess in some ways it’s just like [my sister] was saying. It’s just the path I’ve been put on.

Dr. Ari had a strong vision for his work and has lived that calling for most of his life. One co-worker described how Dr. Ari wanted to change the country, and his travel assistant explained that without “his visions Sarvodaya wouldn’t have been here today. If not for his visions Sarvodaya wouldn’t have survived for 50 years.” Dr. Ari understands his path as “a very, very rare chance opportunity we have got to consciously try to understand the way that we can attain spiritual enlightenment.”

Perceiving interconnectedness. The exemplars perceived a sense of interconnectedness. According to Dr. Ari, this state of interconnectedness and non-separateness did not develop at any point in his conscious awareness. In his words, “I could see the unity of even two separate things always.” Grandmother Mona sees that “nothing is separate” and explained that when she sits in circle with others, “we become one mind, one heart, one body, one spirit.”

Phileena stated that she has a “sense of connectedness to all beings, all created beings [and]…a sense of oneness that we are all the same and we’re not different.”

Feeling responsible. Each exemplar spoke of an internal drive toward responsibility that was other- and/or self-directed. Grandmother Mona stated that she recognises and acknowledges “ourselves as being the ones that we’ve been waiting for” meaning that she knows that responsibility rests with her. Phileena contends that “as a white, affluent, North American, I have the responsibility to respond,” but acting responsibly for her means examining choices thoroughly:

I often think about how so many of our good deeds help, and so many of those things end up hurting people…. Were the slaveholders’ intentions really bad? No, they probably convinced themselves that no, this is good…. So I am just constantly thinking about what is it we’re doing now that we think is good and right?
Feeling stress and pain. Engaging in mature spiritual activism was intrapersonally challenging for the exemplars and feeling stress, including compassion fatigue and/or burnout, was common. Exemplars experienced pain and difficult emotions such as anger, fear, and anxiety. Dr. Ari stated “I feel…sometimes very upset when something goes wrong.” Grandmother Mona commented that she gets “mad” when indigenous cultures are not honoured, and she feels the continuous stress of having to “walk in two worlds…and live in the Western society,” which is not her own. Phileena noted:

At the peak of the busyness of life, building WMF, and the height of…my travel schedule, we had set a pretty intense pace, and it was catching up to me…. A mentor asked me, “Do you ever doubt the goodness of God?” and I answered yes. I think that was a definite moment of recognising, beginning to recognise my limitations in a world of need and the effects that it was having on me.

Exemplar Behaviours Domain

Engaging in mature spiritual activism meant the exemplars acted in specific ways categorised in the themes Living Spiritually, Living Virtuously, Relating Through Love and Solidarity, Exercising Self-Care and Managing Stress, Leading for Transformation, Marrying Spirituality and Social Action, and Facing Challenges.

Living spiritually. All exemplars’ spiritual living included engaging in a committed spiritual practice; having spiritual experiences; adhering to and being guided by spiritual teachings, their faith tradition, and spiritual elders and guides; following a spiritual path; and emanating the fruits of their spiritual development. Dr. Ari stated, “I am trying to tread the noble eight fold path to attain supreme happiness called nibana.” From the time Grandmother Mona was a child, prayer has been “the beginning of every day [and]…an everyday part of life.”

She stated:

Before I get up, I give thanks, and I’m stretching my body, moving my body before I get up and thinking positively, feeling good…. I give thanks for the water, and I give thanks for the air I breathe, and then I go outside. The first time I walk outside I breathe the day, give thanks for the day, greet the day and Mother Earth because I’m going to walk on her. I make a motion toward the earth and bless myself, make a motion toward the sun and bless myself. Give thanks and I walk the day. So everything that happens throughout the day is part of that prayer.

Phileena’s spiritual director viewed her practices as helping her “to know who she really is and be able to embrace that.” She stated that spiritual practice “opens her up to the pain in a way that if she were not as attentive to contemplative prayer, she might be able to gloss over it…. My suspicion is it also makes her much more compassionate.”

Living virtuously. The exemplars’ virtues are lived, and they lived compassionately, generously, humbly, with strength, discipline, and perseverance. Participants noted the ways exemplars demonstrated these virtues in their daily living. While Dr. Ari and others agree that he has not attained spiritual enlightenment, he is described as spiritually advanced by participants. A Buddhist monk elaborated:

Bodhisattva means someone who practices all the good virtues and qualities without hatred, grudge, and all these bad thoughts. With kindness, compassion, generosity, if you can work [with] somebody, he’s a bodhisattva. [Dr. Ari] can be one of them. Without any selfish motive and any one can work with kind heart, with compassion to help
everybody, he’s a bodhisattva… Bodhi means realisation, sattva means being. Someone who working toward the highest realisation.

Grandmother Mona’s co-worker noted that the humility she possesses is not “something she went looking for” rather it is “something she just is.” A co-worker added that “she doesn’t move in her life from her ego,” and another co-worker stated that “her spiritual understanding translates into direct action that is very honest and forthcoming but also compassionate and loving.” Living virtuously has meant persevering. A WMF board member stated that Phileena “never lost that faith…. There has been a lot of struggle, but there has never been a desire to give up the fight.”

Relating through love and solidarity. Exemplars cared for and supported others. Dr. Ari described his sense of love as a “friendliness towards all that is living.” His friend remarked that Dr. Ari gives “everything for the benefit of others,” and radiates “kindness, love, compassion to the enemies and to everybody” without discrimination. Grandmother Mona’s co-worker noted that people “choose to be around her [to] feel her warmth, tenderness, and spiritual strength.” Phileena remains in social action because of her connection to others, stating, “I want more for them, and I want more for myself; and it’s in relationship with each other that we can really start to find that…we need each other, and that’s why I stay.”

Exercising self-care and managing stress. Examples of self-care included engaging in meditation, study, relaxing activities; maintaining healthy boundaries and avoiding unhealthy interpersonal entanglement; expressing emotions appropriately; maintaining consistent spiritual practices; avoiding overworking; taking time for vacation and retreats; and, enjoying life.

Grandmother Mona explained that from a young age her elders taught her self-care:

- The number one thing we’ve heard all of our lives [and]…anytime we’re getting ready to leave the house…. Our grandparents… [would] always say to us, “Now take good care of yourself”…
- They’d say, “Do you hear?”…. They never had to tell us what taking care of ourselves meant. We just feel it inside, and you feel it inside your heart, your being that it means everything about life.

She stated, “There are times when I feel like I need to back off and stay home, relax, and enjoy my quiet time alone or with my family.” Phileena stated that by taking care of herself, she was taking care of everyone else because “in order for me to be fully present, available, and effective in the area of justice, compassion, and being an agent of social change required that I be in my best condition and be able to offer my best.” Dr. Ari explained that managing stress comes with spiritual maturity:

- For example, we work very hard and so you put up a series of houses for victims of war. Then after those people settle down there, violence breaks out again and those houses are all destroyed. Naturally you get disappointed, frustrated, you become angry. So at that point remember, everything is impermanent…. So a person who is spiritually awakening…will never get disturbed by all these obstacles because your ultimate goal is spiritual.

The exemplars exercise self-care and manage stress by relying on support networks. A family member shared that Grandmother Mona “surrounds herself with good people… that take good care of her.” A co-worker stated:
There are people that throughout the world wherever she goes, they take care of her that are providing prayer also for her, providing a nice massage, or providing a place for her to stay and have some quiet time.

**Leading for transformation.** All of the exemplars were described as leaders, and all were leading movements for social change. Each was seen as pioneering innovative social action interventions, working for structural change, teaching, guiding, healing, modelling, building bridges, and being inspirational. Dr. Ari “with loving-kindness, he collects thousands of people but well, maybe they’re not all Buddhist. They are Hindu, Christian, Muslim…. I have seen thousands, tens of thousands of people” (Friend). Another co-worker stated laughing that “most people follow him, [and] even some people [who] have negative thinking, they’re also following him [and] his philosophy.” As a teacher, Grandmother Mona is guiding and shepherding and many learn from her. Her family member stated, “You’re constantly accumulating these gifts of knowledge and little pearls of wisdom about the global community and about the universe as a whole [from her].” As a leader, Grandmother Mona explained:

I go in there with the full determination and confidence that there is going to be a change in that. [laughter]…. Part of that presentation is that there is change, [and] there is hope. When they start looking at what they’ve done in the past with regard to protecting their territories, they see that they’ve been successful. Grandmother Mona’s nephew stated that that “when she talks people listen.”

**Marrying spirituality and social action.** Marrying spirituality and social change for the exemplars referred to the integration of personal spiritual practices into social engagement, which was associated with a depth of engagement and a strong feeling of the presence of Spirit in their work, all of which appeared to be connected with an embodied understanding of interconnectedness. Grandmother Mona described how the teachings from the Native American Church guide her philosophically, stating:

In that circle inside the tepee and the altar is a half moon. That’s the spirituality; that’s the prayer. But, when you walk out the door, what you do and how you walk your life is what makes the moon full. So you have to do this. The prayer and spirituality is important, but you also have to live life and put it into action. Put that prayer into action.

Another co-worker remarked that the exemplar’s spirituality and work are “inseparable,” and her family member named the exemplar’s spirituality as “critical to all of [her] successes.” Dr. Ari stated that:

…in almost everything I did, there is a very strong spiritual content to that….If I go to a village for the first time, before I step into that village even at a distance, in my own mind I think, may all these people I am going to visit, be well and happy in their body and mind. May they get some benefit from my visit…. Sometimes I could feel that they got it long before I came.

He shared that he has worked from a profound intuitive sense his “whole life. From the time I can remember. Never intellectual, never argumentative, never analytical. Always intuition.” He explained that intuition comes “from unbounded love [and] from reducing and reducing to the point to elimination, the ego. It can come when your five senses as well as when the mind are rested.” One of Phileena’s co-workers stated that Phileena’s “spirituality drives her action.” Phileena sees contemplation and action as naturally “intertwined,” where social action:
...ought to lead us...to a place of solitude, silence, and stillness, and then that place of solitude, silence, and stillness would naturally lead us back out into the world.

Facing challenges. The theme Facing Challenges includes how the exemplars made sacrifices and confronted external threats and faced the difficulties engendered by their personalities. Grandmother Mona shared that she wrestles with feeling an “us against them” adversarial dynamic in her social engagement. She explained, “I can’t say anything good about the multi-national corporations and the mining companies who are destroying Mother Earth. And all the contamination from all of these oil extractions from the natural resources. I cannot say anything good about that.” Phileena’s husband explained that she has endured many “forms of death.”

I think there is the dying of the illusions of sort of formulaic answer-filled fundamentalism, [and] in some sense, there was a real grieving of that. Subsequently, I think [with] Phileena’s awakening and the growth and the depth of her spirituality, especially as it’s practiced now, there was a real sense of loss in terms of being understood by friends and family, and I think for her folks in particular. It’s really difficult for them to see her join the Catholic Church.

Catalysing Personal Change
As the exemplars’ internal states and experiences and outward actions met their interobjective world, self development and self growth occurred in processes of learning and growing cognitively, evolving spiritually, and developing resilience. Dr. Ari’s family member reported, “That change is there.” Dr. Ari himself noticed “a very big, big change as time went on,” stating that “certainly in my conduct, in the words I speak, the thoughts that come to my mind, certainly I can see a very, very big change as time went on.” His family member observed that “the wisdom that he practices and preaches comes from [his] practices like meditation.” Without her spiritual growth and development, Grandmother Mona’s family member stated: She would be a very different person. She might be that rich lady living up the hill hording all her wealth. Instead, she’s the humble person that we all should be striving to become [laughter]. Because that’s what this is all about – being humble before everything – the universe, everything that’s out there it’s being aware of that.

Another co-worker described Grandmother Mona as growing through spiritual challenge: When you’ve gone through enough tests, because Spirit will initiate you through the doorway of challenge – when you’ve met those challenges, they weather you and they deepen you and they test one’s integrity. It’s like when a potter puts a pot inside of an oven, the kiln, and they heat it up for a while and they pull it out and then heat up for a while. It’s got to be just right before they cool it or it will crack and it won’t hold when it was made for. And when someone has reached that level of spiritual integrity where it can hold what’s being poured into it by Spirit, then it operates differently.

Phileena related how she had grown: I had this deep longing in me…. It was moving from me holding my faith as something that I control and determine to this faith holding me. And so there was the sense of it doesn’t matter. I don’t need answers…. It’s this new sense of trust in the unknown…. That if we
can take that leap of faith into the unknown, there’s this deeper trust of that unknown holding us.

Catalysing Sociocultural Change

Catalysing sociocultural change meant that the exemplars have impact through calling others to greater freedom, enabling philosophical and structural changes, and empowering others. Phileena is credited with profoundly reworking the WMF movement’s culture and practices and stimulating change in the larger ecumenical community. Phileena has been “a huge benefit for us [WMF staff] and the community,” (Coworker) and her willingness to share what she has learned has “had a sweeping effect to even people in other countries.” Phileena’s:

…contemplative awakening changed everything for WMF….
It’s arrested our activism – literally arrested our activism and reoriented it and redefined it. When we self-describe as contemplative activists, that’s because of the reform that Phileena brought. (Husband)

Her priest further commented that the exemplar’s own spiritual development allowed her to see how to lead the WMF more thoughtfully and safeguard the community from compassion fatigue and burnout. One co-worker shared that Phileena brought an emphasis of accountability to the movement and created structures to support the community’s growth, including the development of a comprehensive approach to handle and prevent personal crises and staff burnout. She has redefined the WMF organisational culture and challenged the standard that contemplation cannot be supported structurally in the workday. Her husband elaborated further that Phileena “really brings peace in the places, the lives, the communities, the organisations, and the things that she connects to.” Furthermore, Phileena and her husband are catalysts in the ecumenical world to move from “saving souls to being in solidarity with people” (WMF Board Member), and Phileena “has been a major force for a lot of people in recognising the humanity of people [globally] and in the inter-exchange” of culture and ideas. She and her husband have challenged the established practice that prioritises pastoral care within mission-based organisations and are instead enabling the development of more autonomous missionaries capable of self-care.

Participants commented that they see Phileena empowering others, and that they have felt empowered by her. A co-worker stated that Phileena has empowered those in the WMF community to redefine the limits of their traditions and find healthy balance. In particular, he remarked that Phileena has done a great service to women and men in redefining what it means to be a woman. He explained:

She’s really allowed, especially the women in our community, but I would say it goes beyond that to the men as well, to take a hard and thoughtful and even a renewed theological perspective of what it means to be a woman, a woman of God, a woman in the church, a woman in social action among the poor. What does motherhood mean? What does being a single woman mean? But all of that kind of rethinking, again, going back to some of the social and cultural and religious traditions that we had come from and trying to unravel from that. I think it’s been really interesting because she’s…opened up conversations…with the women, but it has [had] an effect on the men who are in relationship with the women.

He added that he has felt personally empowered by her to have the courage to check out and perhaps “embrace other ways of expressing” his faith and its forms.
Dr. Ari was seen as enacting significant change in Sri Lankan society and beyond. A co-worker stated that he has “has contributed so much for the well being of ordinary people.”

The difference between his compassion and his concept of sharing to mine is that his is scientific. He would always say we have to remove the root cause of the poverty…. That is the specialty with him…. But he will ask that person why don’t you have a shirt, why don’t we do something to get a shirt. He will eventually give him a shirt, but he will try to remove that root cause of poverty.

One co-worker stated that Dr. Ari was bettering society by applying his utopian vision and achieving tangible results. Village beneficiaries of the movement spoke of how Dr. Ari brought house- and road-building projects to their village, and a co-worker explained that Dr. Ari helped villages learn how to work collaboratively, “as a team,” rather than to maintain distance between family groups. Three participants spoke of how Dr. Ari encouraged them to develop meditation practices, which they continue to maintain, sometimes more than 20 years later. One co-worker explained how she shared Dr. Ari’s teachings with her family and helped her family members become happier. His family member explained, “Though we cannot solve everything…in our own way, I think we have helped so many people now.”

Dr. Ari builds bridges across “party lines” (Friend) and collaborates with diverse groups:

Through this work of Sarvodaya, he [Dr. Ari] managed to unify, get everybody into one place and work together for the benefit of the country and [for] the benefit of the people and [for] benefit of all the living beings…. He is good with every politician. Whatever the leader coming to power, he works with him. (Friend)

Moreover, Dr. Ari fosters sociocultural change by inspiring others. His travel assistant said that after he heard Dr. Ari speak for the first time:

I got bowled out. I thought, “Oh my God, this man is talking something totally different. This is the kind of vision we need for this country.” That evening I didn’t drink. I went home, and I isolated myself, and I meditated upon what he said.

Finally, Grandmother Mona makes sociocultural change happen:

[Laughter] almost like a butterfly. A butterfly that lives like in a cocoon and then the butterfly comes out, and the butterfly represents change. Wherever she goes she helps make change to happen whether it’s individually or collectively or globally or whatever the case may be. She draws her energy to make change happen…. Positive changes take place through her efforts. (Coworker)

Another co-worker called her one of “the echo people” who will leave a mark of her presence even after she passes. One co-worker noted that the exemplar has done much for her tribal communities by helping them preserve their language and cultures. Her advocacy efforts brought sweat lodges and cultural activities into the Arizona prison system for Native Americans, she advocated with the Joint Commission for Hospital Accreditation to permit talking circles be acknowledged as a valid form of treatment for Native Americans in substance abuse and mental health programs, she helped bring spirituality into the treatment protocols in Native American behavioural help services, and she advocated at the United States Congress to persuade congressman against
separating substance abuse and mental health issues in Native American populations. Finally, her advocacy in the United Nations established spiritual practice and belief as basic rights of indigenous people in the Universal Declaration on Human Rights. Grandmother Mona’s positive impact occurred in her ability to empower others. One colleague stated that the exemplar helps “people recognise their own gifts,” and she “helps communities see their own capacities to hold the role that they have to protect their own traditional territories” so that they can take action. Grandmother Mona identified creating opportunities as one of her mission statements: “Some of the things I have done I do not get paid for…but the payoff is creating opportunities for people who provide service to a bigger circle.”

**Discussion**

The purpose of this investigation was to explore the phenomenon of mature spiritual activism through the lived experience of three mature spiritual activists and those who know them. Overall, the results support the assertion made by theorists and practitioners who argue that marrying social and spiritual engagement enables a synergistic interaction promoting healthy transformations in self and world. Results also affirmed the necessity of personal development for the exemplars as mature spiritual activists. The cross case analysis suggested that personal change was being catalysed as the individual psychological-phenomenological experiences and personality traits of mature spiritual activists met outward actions in social contexts. Catalysing Personal Change was identified as an intrinsic process, which when combined with Catalysing Sociocultural Change, seemed to lead to a dynamic, living macroprocess that yielded ongoing individual and sociocultural transformations. It is evident from the results of this investigation that the exemplars believed combining spiritual and social engagement was critical for their own needs, and each supported its perpetuation throughout their affiliated movements. This analysis suggested that the exemplars mitigated stress and resisted experiences of compassion fatigue/burnout through resilience, and engagement in committed, long-term spiritual practice was a key component of developing resilience.

**Limitations**

Study limitations included being predominantly cultured within dominant cultures and being European American raised in the United States thus benefitting from racial and socioeconomic privilege. It is hoped that my more limited experience of being a social outsider combined with previous immersions in non-dominant cultures (e.g., Peace Corps Haiti) as well as my familiarity with varying types of spiritual leaders and degrees of spiritual advancement have offset these primary social biases to some degree. As was seen in the data collection, those from less privileged populations commonly ‘mythologised’, and my privilege might have even served to limit unfounded positive projections. The qualitative method and data treatment chosen only interpreted data made accessible by participants. Multiple streams of data were collected to offset this limitation. Cross-cultural differences likely affected both the data collection and the data analysis as misinterpretation of semantic and conceptual meanings is common in cross-cultural settings. It is hoped that exemplar approval of their case studies signified that the cross-cultural differences were managed effectively.

My bias in this study posed a limitation. I believe that mature spiritual activism is a positive development that offers a more constructive approach to social issues than either social change or religious/spiritual traditions offer independently of one another. In order to minimise this risk, memoing allowed a forum to analyse conjectures versus empirically-valid evidence of processes, whereby safeguarding against...
unfounded thematic presentations. Additionally, I worked closely with my committee chair and grounded theory methods expert as well as other committee members to receive feedback on areas where my own bias interfered with conclusions drawn.

Data collection did not include more negatively critical commentators of the exemplars, which likely led to a less complete and more inherently positive view of spiritually mature activism. It is widely known that religion/spirituality is not universally good (Sarason, 1993; Walsh-Bowers, 2000) and groups exist that “espouse the spiritual, or religious, or transcendent to be intolerant or destructive of others with different perspectives” (Sarason, 1993, p. 600). Also, organised religions foster disconnection from social conditions and justifications of the status quo (Walsh-Bowers, 2000). While the purpose of this study was not to ignore the pernicious aspects of religion, there was an intentional focus to investigate more integrated forms of spirituality coherent with integral era epistemology to empirically uncover the potential of healthy forms of socially engaged spirituality. In addition, this study did not collect sociological and/or anthropological data, which would have provided a more nuanced understanding of the historical, ethnographic, and sociocultural factors that contributed to the factors assessed in this study. The results garnered are limited to the perspectives provided by the lenses utilised and potentially overstate the positive impact of personal and spiritual growth on the exemplars’ social activism. The case studies presented are not necessarily representative of all related cases, and the results of the data analysis are not generalisable to the wider population. However, as Lukoff, Edwards, and Miller (1998) elucidate, it is possible the results generated will gain credence as valid general principles because conclusions drawn were triangulated.

**Conclusion**

The current investigation of mature spiritual activists and activism added relevant findings to socially engaged spirituality, community psychology, social action, and religious and spiritual traditions. The results of this study tentatively indicate that mature spiritual activism is capable of catalysing personal and sociocultural transformations. Results supported the theory that mature spiritual activism enables balanced and deep engagements in both spiritual and social domains. The study endorsed the theory that committed social action and profound spiritual engagement can function synergistically where the sum of both is greater than its constituent parts alone. The potential potency of profound spiritual development and social engagement further confirms the relevance of spirituality in community psychology.

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Mature spiritual activism

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Rethinking Community Psychology: Critical Insights

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At first sight there appear to be, internationally, many diverse, radical, manifestations of community psychology. However, community psychology has gradually become decreasingly diverse and decreasingly radical the more it has become academically and professionally established and evangelised and it is now endangered as a critical alternative to the disciplinary ideologies, theories, procedures and practices of mainstream psychology. As a consequence, the interests of people whose lives are most characterised by immiseration, suffering, social injustice and oppression are increasingly blighted and increasingly threatened. However, these reactionary developments were and are not inevitable and can be reversed by those collectively committed to community critical psychology.

In this paper, despite many differences in our constituting contexts, approaches and work, we come together in solidarity as community critical psychologists to emphasise our common commitment to the development and enactment of community critical psychologies, and our common opposition to the dominant community (acritical) psychologies. The ordering of terms is significant here. We are committed to the wider spectrum of critical psychologies which expose and contest community injustice and misery rather than to the subset of community psychologies which are critical in standpoint. We are critical in relation to oppressive and unjust societal arrangements but also critical in relation to community psychologies, and other manifestations of ‘psy’, which collude with or actually construct and maintain oppression and injustice.

Although the concept of community is central to community critical psychology, it is remarkable how seldom and how superficially the notion of community has been subjected to critical – that is, historical, political and ideological – critique by community psychologists who use the term (Fryer & Laing, 2008; Kagan, Burton, Duckett, Lawthom, & Siddiquee, 2011).

In dominant discourses, community is usually positioned either as a ‘safe’, ‘warm’, and ‘friendly’ ‘place’ or as one which is marginal, amoral, anomic, foreboding, forbidding and frightening. Because the uncritical construction of community can lead to a justification for processes of ‘othering’, exclusion and apartheid-construction through boundary drawing (Bourdieu, 1986; Coimbra & Menezes, 2009; Towley, Kloss, Green, & Franco, 2011), we have an obligation as community critical psychologists to critically reflect on the concept of community, to clarify to which community we refer when we use the term ‘community’, to consider who is being ‘othered’ by being placed outside of ‘community’ through our talk, thought and action, and to theorise how the
concept has been constructed historically and is reconstructed and deployed today. This is especially the case when community is positioned as a place of familiarity, shared interests, shared space, shared identity and so on and when othering is achieved through positioning in terms of alien exteriority.

The concept of community has been transformed and employed by various interest groups for varying political and economic purposes and is rooted in regulation (Ferreira, Coimbra, & Menezes, 2012; Walker, Johnson, & Cunningham, 2012). For example, historically, the concept of community was tied to the management of workers under colonial direct rule in East Africa where ‘community’ was constructed to classify and regulate South Asian immigrant skilled manual workers (Bauman, 2001). The construct ‘tribe’ had been used to administer the African workforce but this was regarded as inappropriate for South Asian workers so a new concept had to be created. During the dramatic social upheavals of the English Industrial Revolution, community was constructed to transfer the regulation of society from regulation by nature (agriculture and artisanship) to the regulation of society through bureaucratic social administration and the mechanisation of working practices (agribusiness, commerce and industry). More recently, in the United Kingdom, community was incorporated in ‘third-way politics’ – transferring responsibility away from social institutions to ‘communities’ (Mountian & Duckett, in press), with the consequence that ‘community’ has become the site of a political project which mediates between the individual and social institutions.

It is essential for community critical psychologists to undertake critical analyses of ‘community’ because it is important to understand the constitutive material, social, socio-economic, cultural, ideological and discursive contexts within which attempts are made to anchor its meaning, the ideological purposes for which it is invoked, and the types of subordination it creates.

The larger context within which the objects of study and intervention of community psychology are, in contemporary times, inevitably immersed, is in perpetual socio-economic, cultural, political, ideological and historical flux. We believe that contemporary ‘hyper-’, ‘late-’, ‘post-’, ‘liquid-’ or ‘modern-’ societies (Bauman, 2000; Beck, 2000) are impossible to comprehend on the basis of single organising principles, which at least once appeared to be the case, when traditional societal organisations seemed more stable, rigid and simple; that is, less complex and more predictable (Coimbra & Menezes, 2009). Contemporary societies have become increasingly characterised by paradox and contradiction, developmental trends working in divergent and sometimes opposite directions, accelerating social change, unremitting scientific and technological innovation, rampant consumerism, elimination of common cultural/collective reference points, the gradual disappearance of successive grand-narratives and the emergence of individualising life narratives. Relations between traditional societies and contemporary ones have been ruptured.

We believe these changes have cumulatively changed the means through which personal existence can be rendered meaningful. As consequences, people have found it increasingly difficult to construct a sufficiently coherent understanding of themselves and the social world in which they live; isolated and victimised persons have been blamed for their own social exclusion, unemployment or have been ‘othered’ in myriad ways (Fryer, 2012; Fryer & McCormack, 2011); and governmentality has been increasingly achieved through uniquely subtle modes of control in which psychology has been central because both constructing ‘known’ psychological dimensions of ‘reality’ and itself a
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manifestation of the psychologised-therapeutic cultures which it has played a part in constructing (Lipovetsky, 1983; Stambe, Fryer, Dauncey, & Hicks, 2012; Walker & Fincham, 2011).

‘Community’ is an ambiguous concept which has, in diverse lay and expert discourses, a wide variety of sometimes contradictory meanings, serving the interests of a wide variety of ideologically distinct interest groups. The growing individualisation and privatisation of life has been paralleled by a mythologising of ‘community’ which has ignored the often inequitable and unfair aspects of communities and refrained from consideration of the problematic specificities of particular communities in their socio-historical context, that is, power imbalances associated with ethnocentrism, classism, heterosexism, ageism, sexism, embodied diversity and, especially, patriarchy and colonisation (Coimbra & Menezes, 2009; Fryer, 2011; Nic Giolla Easpaig & Fryer, 2011).

We believe that colonialist practices constitute one of the most important causes of community mental health problems (Fanon, 1963). There are a number of examples of colonialist practices to be drawn upon, as the pioneering work of Ignacio Martin-Baró (1984, 1996) emphasised many years ago. However, here we focus upon problematic uncritical western funded projects misleadingly referred to as ‘civil society’ organisations – often non-government organisations – which have come to constitute an encompassing network recently imported and now operating widely in the third world (Samara, 2001).

During the first two decades of resistance to the Israeli occupation, the Palestinian people in the West Bank and Gaza Strip managed to establish an extraordinary network of grassroots organisations and community level committees, including student unions, women’s groups, workers’ groups and a wide variety of professional organisations (Makkawi, 2009). Underlying this sense of community and collective responsibility was spectacular participation in volunteering and contribution to the public good. When the first Intifada erupted in 1987, these grassroots community groups engaged in sustained resistance to oppression and provided much needed social and psychological support to victims of political and military violence (Hiltermann, 1991).

When the second Intifada erupted in 2000, the situation was quite different. The Palestinian community in the West Bank and Gaza was less prepared to sustain collective struggle and provide the level of social and psychological support it did before because indigenous, grassroots, and community based voluntary organisations had been disabled by an invasion by a plethora of Western non-government organisations providing individualised, depoliticised, psycho-social training-cum-mental health care services to a broad variety of groups including women, children and victims of military violence (Bakeer, 2012). Not only were these projects sporadic, overlapping, ill-defined, seldom properly evaluated, and generally unrelated to any strategic plan or to a clearly-defined movement to enhance the mental health of oppressed Palestinian communities, they were also constrained by the economic and political agendas of the funders and contributed to the construction of demoralised, depoliticised and pacified communities through psychologising, medicalising and individualising collective injustice and oppression stemming from the brutal repression and military violence perpetrated through the occupation (Samara, 2001; Qassoum, 2002). The work of these non-government organisations was anything but praxis towards liberation and social justice for the communities they purported to serve. Within this oppressive context, mental health research and practice became part of
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the problem rather than part of the solution (Haj-Yahia, 2007).

We call for the development of community critical psychologies up to the task of understanding and contesting the constructed consequence of prolonged colonialist oppression and profound social injustice recently reproduced in recent reactionary, so-called, ‘innovations’ in mental health social policy and practice in Western Europe which fail to address the most basic social, political and economic issues and, paradoxically, contribute to the creation of oppression, injustice and suffering.

Take the example of the United Kingdom which currently has one of the highest rates of child poverty in Europe (United Nations Children’s Fund [UNICEF], 2007), although the relevance of this – even at a time when the discourse of ‘evidence-based practice’ is dominant – tends to be underplayed or actually ignored. The United States and the United Kingdom in the 1970s and 1980s exemplified the political, economic and social changes that came to be known as neo-liberalism which encouraged a right-of-centre focus on the supply side of the economy. Corporate interests were placed at the heart of the political agenda and in country after country, markets were deregulated, state planning and power dismantled, welfare cut and/or criminalised and full employment policies abandoned. These changes were directly responsible for grossly inflating the number of people living in poverty, growing social inequality, decreasing occupational security, work intensification and homelessness (Walker, 2009) – phenomena that the current economic crisis is certainly aggravating, particularly in southern Europe (e.g., Fishman, 2012).

Regarding mental health, the overwhelming focus of inquiry has been on the individual. Individual discourses of suffering have been promoted in medicine, the media and politics. This is exemplified by Layard (2005), who, in his work in the economics of happiness and in his affiliation with the Blair government, became a prominent spokesperson and influential lobbyist for individualistic interventions in relation to mental health. Layard contended that 10,000 extra therapists and 5,000 extra clinical psychologists needed to be trained over a short time and the consequent ‘Improving Access to Psychological Therapies Programme’ was the United Kingdom government’s solution to the mental health crisis. The aims of the programme included the provision of psychological therapy to help people stay in work and improve their well-being. More recently, the government announced plans to provide cognitive behaviour therapy to people made redundant. All the while the government, in conjunction with a business community with growing influence over social and economic policy, and bolstered largely by uncritical, compliant or even collusive institutionalised psychology, has continued to collude with damaging economic and labour market practices that contribute to increasing social distress (Fryer, 2012).

We believe that social science relevant to health and community is characterised by four broad forms of intellectual labour and knowledge production operating alongside each other, sometimes in synergy and sometimes in uneasy co-existence. These synergies and tensions speak to the ambiguities and challenges inherent in the broader quest to advance liberatory forms of scholarship and praxis in community psychology and other social and human sciences (Seedat, 2006).

The first form of labour, knowledge brokering, is characterised by utilisation of a range of mathematical and statistical techniques and formulae to make meaning of what is assumed to be objective, measurable phenomena. Such meaning and understanding, in the form of empirically-
produced data, are used as instruments to construct and legitimate pronouncements and recommendations.

The second form of labour, evidence-led model development, is characterised by the promotion of various models of service delivery guided by the principles of community psychology and emphasises partnership, equity, prevention, positive mental health, appreciation of context, experimental efforts dedicated to developing replicable, cost-effective and culturally appropriate modes of psychosocial services.

The third form of labour, rebellion, is characterised by recognition of community members as authentic and vibrant intellectual agents and attempts to synergise particular analytical and methodological skills with project participants’ investigative and dissemination skills such as story-telling and narrative exposition. Like any innovation, this form of labour produces new and unexpected tensions and questions about how to restrict the dominance of certain forms of knowledge creation within and outside of science and how best to foster egalitarian relations when science meets society.

The fourth form of labour, critical introspection, is characterised by introspective critique of the production and reproduction of material and discursive inequalities in the system of knowledge-creation (e.g., Freire, 1968; Lather, 1986; Menezes, 2010; Seedat, 2006). Community psychology has become academically and professionally established in recent years but is gradually becoming increasingly diverse, increasingly radical and increasingly a critical alternative to the disciplinary ideologies, theories, procedures and practices of mainstream psychology. As a result, the interests of people whose lives are most characterised by immiseration, suffering, social injustice and oppression are increasingly at risk. However, we believe these reactionary developments in community psychology are not inevitable and can be reversed by:

- drawing upon subjugated literatures and conceptual frames of reference from outside the mainstream Anglo-Saxon psychological disciplinary tradition;
- problematising individualism, the psychological and ‘the community’ as modes of conceptualisation and bases for intervention;
- critiquing mainstream psychologies as disciplinary practices;
- emphasising capitalist neo-liberal globalisation, colonialism and patriarchy as fundamental causes of misery and ill-health in contemporary societies;
- emphasising the development and deployment of politically progressive community critical psychologies as contributions to the task of collectively transforming social reality to promote health, well-being and social justice;
- recognising the obligation to reflexively turn the critical gaze not only on the disciplinary ideologies, theories, procedures and practices of mainstream psychology but also on those of community psychologies; and
- the reconstruction, root and branch, of the interconnected conceptualisations, practices, procedures, technologies and ideologies which constitute both elite ‘psychology’ and popular ‘psy’.

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Facing a World of NO: How Accessible is a Career in Psychology for Aboriginal and Torres Strait Islander Australians?

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As a discipline and profession, psychology has far more to gain than lose by attracting and supporting Aboriginal and Torres Strait Islander Australians to pursue careers in psychology. The availability of Indigenous health professionals is an important, if not critical, component of providing culturally appropriate services to Aboriginal and Torres Strait Islander people. If psychologists are genuine about addressing the wide gap between Indigenous and non-Indigenous health outcomes, an important way forward is to increase the number of Aboriginal and Torres Strait Islander psychologists from the current total of fewer than 50 Australia-wide, which represents only 0.3% of the profession. This paper draws together interviews with 3 Aboriginal women who have completed 4 years of accredited study in psychology. Their comments provide insight into the barriers confronting many Indigenous people embarking on a career in psychology, whether it is pursued via a supervised practice pathway or accredited postgraduate study. Learnings include the importance of addressing institutional and interpersonal racism, challenging culturally-bound approaches within psychology curricula, and ensuring cultural safety and support for Aboriginal and Torres Strait Islander students and graduates.

Aboriginal and Torres Strait Islander people experience alarming disparities in health, including a 10-17 year gap in physical health and life expectancy between Indigenous and non-Indigenous Australians, as well as being twice as likely to report higher levels of psychological distress compared to non-Indigenous Australians (Australian Institute of Health and Welfare, 2009). The links between the social context (particularly the impact of colonisation) and poorer health outcomes for Aboriginal and Torres Strait Islander people are well established (Garvey, 2008) and have led to a number of government and community initiatives such as ‘Closing the Gap’ (Department of Families, Housing, Community Services and Indigenous Affairs [FaHCSIA], 2009).

Increasing the number and capacity of Aboriginal and Torres Strait Islander professionals who can respond to the needs of their own communities has been widely acknowledged as vital in meeting closing the gap targets (Behrendt, Larkin, Griew & Kelly, 2012). Yet their significant underrepresentation in the higher education system compounds the high levels of social and economic disadvantage faced by Indigenous people (FaHCSIA, 2009).

Supporting and graduating Aboriginal and Torres Strait Islander people “qualified to take up professional positions across community, government and corporate sector will [therefore] help to address this disadvantage” (Behrendt et al., 2012, p. ix).

Psychology as a discipline and profession has much to gain by attracting, supporting and increasing the number of Aboriginal and Torres Strait Islander Australians pursuing careers in psychology. Along with increased capacity to provide culturally safe, equitable and accessible services (Garvey, 2008), the input and influence of Indigenous knowledge, traditions and experience has the potential to enrich and
diversify the field of psychology and make it more culturally relevant and accessible to Aboriginal and Torres Strait Islander people. While this is relevant to the whole discipline, it aligns particularly with the field of community psychology, which explicitly espouses key values of empowerment and self-determination, diversity, social justice, partnership and inclusivity, and requires that “all students become knowledgeable of and sensitive to the needs of people from a range of cultural backgrounds... with special attention to the particular strengths and needs of Aboriginal and Torres Strait Islander Australians” (Australian Psychological Society, 2010, p. 25).

There are currently fewer than 50 Aboriginal and/or Torres Strait Islander registered psychologists, representing only 0.3% of the profession1. According to the Australian Indigenous Psychologists Association (AIPA, 2010), this number should be closer to 625 to achieve parity (2.5 percent of the Australian population are Indigenous), which AIPA points out will take another 293 years to achieve at the current uptake of Indigenous people pursuing careers in psychology.

Given the very low number of Indigenous psychologists, it is important to understand the barriers and opportunities that exist for Aboriginal and Torres Strait Islander students and graduates on the path to registration. This paper explores how accessible this path is from the perspective and experiences of three Indigenous people who have completed four years of APAC-accredited psychology study. Given the relatively small number of Indigenous students who enrol in undergraduate psychology programs, and the even smaller number who are admitted to and successfully complete a fourth year, it is likely that there is much more to be asked and said about those first stages of the journey. But the focus of this paper is on that very small number of Indigenous students who do reach that point.

Method

We approached three Aboriginal graduates known to one or more of the authors who were currently working in the health and community services sector, to share their experiences of studying and pursuing psychology as a career. These graduates were selected opportunistically as information-rich cases, given the potential of their experiences to shed light on undergraduate, postgraduate and supervised practice components of psychology, and to provide perspectives on the psychology curriculum as experienced by Aboriginal students. They represented a diversity of experiences in terms of location, career and life stages, and had completed their undergraduate and fourth year psychology studies across four different universities. They did not know each other.

All three graduates had been mature-aged students, one was pregnant with her first child, and one was a recently separated mother of two young children. Two had extensive work histories in both Indigenous-specific and mainstream settings, including family violence and child and family services. At the time of interview in 2011, Sally2 had attempted to pursue the supervised practice (intern) pathway, but discontinued the route and was on track to qualify as a family therapist instead; Kellie was attempting to complete supervised practice in the public sector despite her first supervisor having withdrawn in frustration at what both saw as the registration board’s unreasonable expectations; and Jayne, having failed to gain entry to a Masters program, continued working with Indigenous people in the areas of social and emotional wellbeing and education, and was considering resuming the supervised practice pathway to complete her training as a psychologist before her ten-year limit post fourth-year expired.

The graduates were interviewed by the first author as part of a practicum placement with the Public Interest team at the Australian Psychological Society. She explained to the interviewees that this was not a formal research
project but an opportunity to document the experiences of one or more Indigenous psychology students or graduates and thus inform the Reconciliation Action Plan project that was underway at the APS. Interview questions focussed on their experiences of psychology studies, what had supported them in their studies and subsequent pathway to registration as a psychologist, and what barriers they had experienced along the way. They were also asked where they saw their Aboriginality fitting with these experiences, what advice they would give another Aboriginal student interested in psychology, and how they would like the data from the interview to be used. All three were very keen to be involved, with comments like “anything that will hopefully get the [registration] board to understand our issues” and “the APAC [Australian Psychology Accreditation Council] guidelines do need to be tackled if we want to get heaps more Indigenous psych[ologist]s into Masters programs”. Their responses are summarised here under the broad headings of barriers to and facilitators of access to study and career pathways in psychology.

**Barriers to Access: Continuing Study and Registration Pathways in Psychology**

The three graduates were invited to comment on any barriers they had experienced or observed during their psychology studies and/or as provisional psychologists en route to registration.

*Seeking registration through a supervised practice pathway.* Pursuing the supervised practice pathway to achieve full registration as a psychologist was described as extremely stressful by all three graduates interviewed, as well as unaffordable for one. Of the three, only one was still pursuing this path at the time of interview. Overall, procedural requirements towards meeting competency in the prescribed assessment tasks led to feelings of frustration and hopelessness, as resubmitted case studies were deemed not satisfactory, and one graduate’s supervisor had withdrawn from the process in protest. Two graduates described the tone and content of letters advising the outcome of assessments as having a particularly negative impact on their confidence and capacity to achieve the competency. Sally described her experience of the process as “punitive” and “rigid”, with unclear expectations. She said that after a while:

> I would receive letters from the Board but did not want to open them. I would not open them for days or wait until my next supervision session (to open them)... There was no joy (in the process) and I thought I’m not going to finish it. They (the Board) were asking me to jump all these hoops, but did not tell me which ones or how. They gave me no instruction on what the problem was with the case study. I had already written it twice and I did not want to be refused a third time... Sometimes I got so angry and thought ‘don’t they want more Indigenous psychologists?’

Sally commented that many Aboriginal people find mainstream education “difficult to navigate” in addition to dealing with discrimination and abuses of power throughout their lives. As an Aboriginal person she said, “You already face a world of no” and in the face of what she described as the “rigidity and rejection (of the Board)...you are going to throw it in”. The graduates felt that the internship process should be more supportive and flexible; otherwise, as highlighted by Kellie, Indigenous graduates are, “set up to fail” and while “you don’t want special treatment” there should be “some leeway and greater support”. Sally’s suggestion was to “maintain the requirements but provide constructive criticism; the approach should be to support and guide (the graduate) to achieve competence.”

*Seeking registration through postgraduate study.* Aboriginal and Torres Strait Islander Australians face major
disparities not only in health but also in education, income and employment. Two graduates identified significant disadvantage in not having completed secondary education, combined with financial disadvantage for one. This disadvantage was not taken into consideration when seeking entry into a psychology Masters program. After discontinuing an earlier attempt to engage in the supervised practice route, Jayne had recently applied to undertake a Masters course. She was advised that she met all other requirements and received strong support for her application from within the university faculty but she was unsuccessful due to not meeting the minimum standard set by APAC for postgraduate entry: a distinction average of 70 per cent and above; Jayne’s results had ranged between 65-75. It was suggested she repeat her fourth year of study, pursue the supervision pathway a second time, or undertake further study outside psychology. She described feeling a mixture of anger and hopelessness and thinking “what’s the point, why do I want this, it’s not worth it”, as well as self-blame; “I should have worked harder.” Upon reflection, Jayne suggested that a rigid application of the entry requirements impacts heavily on Indigenous people, resulting in the exclusion of many who are already socially and economically disadvantaged. While wanting to be accepted on her own merits, she also reflected that:

Having completed year 10 at secondary school and not having turned on a computer until I went to university yet nonetheless completing four years of training in psychology, as well as having many years experience working in the community services area and being a single parent of two children, it was difficult to be told that under the current standards I had not done enough.

Encountering racism and culturally bound approaches. All graduates spoke of their experiences of racism within psychology; two reflected on the broader Eurocentric approach of psychology while one had experienced racism in the classroom. Kellie described how racist and ignorant remarks denying Indigenous experiences of colonialism both past and present featured throughout one course unit and permeated her whole experience of that year of study. In addition, she felt pressure from fellow students (as the only Indigenous person in the class) to know everything relating to Indigenous people. This led to a great deal of stress and hurt and was the first time she had ever felt “really oppressed as an Indigenous person.” She would regularly go home from class in tears until she said she eventually “shut up” in that class and when asked for her opinion would decline to comment. When she took this stand her lecturer backed her which she said was the only time he did so. Not receiving back up or support from her lecturer until that time was of particular concern to her; it added to her distress and experience of no support. With the exception of one fellow student who followed her out of a particularly distressing class, she said she received no other support from within the university.

Sally questioned the approach of psychology particularly as it relates to Aboriginal people. She expressed concern that the clinical model of assessment tends to label people and doesn’t take the social context into account. As an Aboriginal person she said she is “sick of labels” and that labels are “not helpful.” She emphasised that “the context is everything” for Indigenous Australians given what they have been through, and that “putting people into boxes reflects racism.” Aboriginal people, she pointed out, have been identified as having higher rates of depression but the context of past and current structural oppression is not fully taken into account within a traditional psychology approach. As an example of the
ongoing or current impact of structural or institutional racism, Sally pointed out that proportionally more Aboriginal children are taken from their families through child protection systems across Australia today than non-Aboriginal children – representing more children than were taken away during the Stolen Generation.

Aboriginal ways of knowing as described by Jayne are completely different to the cognitive and counselling models offered by psychology. She described her psychology studies, particularly at an undergraduate level, as culturally-bound and not relevant from an Aboriginal perspective. If offering advice to another Aboriginal person studying psychology she said:

I would tell them to be aware that their own personal opinions are irrelevant until you are trained and qualified in a (white) man’s way. But I would also tell them that even if they find the content of the course is not relevant to them that this does not matter, as the skills you learn such as writing, research and analysis are very relevant. Finally, I would advise them to get support and surround themselves with other Aboriginal students and community members.

Facilitators of Access: Cultural Safety, Equity and Support

Graduates were asked what they found enabled or supported them during their studies. These reflections point to opportunities to increase access and retention of Aboriginal and Torres Strait Islander students within psychology and to ensure the curriculum is culturally relevant.

Building culturally appropriate and safe environments within universities. Two interviewees identified the Indigenous Student Support Services (Indigenous Education Units) within their respective universities as the most helpful support and resource while studying. Sally described how staff at the centre encouraged her to apply for scholarships which she then received. This enabled her to put all her time and attention fully on her study without the need for a part-time job. The centre also provided access to a computer with a library connection, a comfortable and supportive space where people were friendly and good to talk to – “You could attend the centre to study or just hang out.” As a result, she did not encounter any barriers to pursuing psychology at that time, and she had a sense the university was supportive and open to Aboriginal students. Up until then she felt she hadn’t connected much with the local Aboriginal community, and this experience “supported me to connect more with my Aboriginal identity.”

Kellie described seeking counsel with an Indigenous elder as the most helpful support, particularly given her experience of racism in class. Through this counsel she felt supported and reassured and was able to continue and successfully complete her fourth year studies. Some, but not all, universities have established ‘Elder-in-residence’ programs, and it is common in Aotearoa/New Zealand for a university or other public body to appoint respected Māori elders (Kaumatua) of either gender as consultants on Māori protocol.

Incorporating Aboriginal and Torres Strait Islander knowledge and perspectives. Sally’s experience highlights the importance of ensuring that Aboriginal and Torres Strait Islander knowledge and perspectives are incorporated into the curriculum and that the program of study is culturally and locally relevant. Having discontinued the supervised practice path, Sally undertook further postgraduate study outside of psychology. The course targeted Aboriginal workers with a particular focus on regional centres. It was delivered in a way that recognised the expertise of the students and was highly collaborative. For example, she said “when presenting theory, lecturers would ask how
this theory fitted within the local Indigenous context” and would modify the application of theory for each setting based on the ideas and experience of the students participating in the course. She is now on track to qualify as a family therapist, not a psychologist.

**Discussion: Addressing Barriers along the Road to Registration**

The experiences of the Aboriginal graduates interviewed highlight the numerous and interrelated barriers that prevent successful entry into psychology courses and detract from retention once within the discipline. They also identify critical ‘success factors’, which are important for strengthening opportunities for Indigenous Australians wishing to pursue a career in psychology.

These experiences concur with recent research and government reviews which have found that “to succeed at university Aboriginal and Torres Strait Islander students need access to a range of social, financial and academic support... (and)...once at university, the focus on support must be maintained because ‘access’ without effective support is not opportunity” (Behrendt et al., 2012, p. 57). As identified by the graduates interviewed, financial disadvantage has an impact on the experiences of Aboriginal and Torres Strait Islander students studying psychology. If access to and continuation of study within psychology is to be achieved, not only is the availability of financial support (e.g., income support, scholarships) important, but also essential is the readiness of academic staff and processes (e.g., faculties/schools/course administrators/entry requirements) to take into consideration the impact of this disadvantage in course entry, initiatives to support retention, and assessment methods.

Part of this support is also about providing a culturally safe learning environment at both classroom and university levels. The support provided through Indigenous Education Units, such as enrolment and access to assistance, tutoring, accommodation support, meal preparation, computer access, culturally safe pastoral care (such as an ‘Elder in residence’) and a culturally safe study and social space for students, has been widely acknowledged as creating a “supportive and welcoming place to come to within an often challenging unfamiliar environment” (Behrendt et al., 2012, p. 60). This support is particularly important given the higher number of mature aged and rural and remote Indigenous students who are likely to be living away from their communities and/or supporting extended families.

The interviewees’ experiences of feeling culturally unsafe concurs with research that highlights the need for tertiary institutions to focus on fostering cultural bonding between students and their peers, and identifies the responsibility of educators to create culturally safe learning environments. It also supports the recommendation recently made to the Australian Government (Behrendt et al., 2012) that while Indigenous Education Units are essential in the support they provide to students, responsibility for supporting Aboriginal and Torres Strait Islander students should be a whole-of-university effort where faculties should be primarily responsible for supporting the academic success of Aboriginal and Torres Strait Islander students, given the discipline-based knowledge and staff available to them (tutoring, mentoring, connections to the professional world, employment opportunities).

The cultural (in)appropriateness of psychology, as a discipline and profession, was raised by all three graduates as deterrents to continue pursuing a career in the field. Psychology’s decontextualised approach, lack of acknowledgement of the impact of colonisation on current experiences and failure to adequately address contemporary Indigenous issues and equip students with
appropriate skills to respond, led to the graduates questioning the relevance of the discipline for their careers and communities. The Social Health Reference Group for the National Aboriginal and Torres Strait Islander Health Council and National Mental Health Working Group (2004) made a an important distinction between Indigenous understandings of social and emotional wellbeing and non-indigenous concepts of ‘mental health’:

The concept of mental health comes more from an illness or clinical perspective and its focus is more on the individual and their level of functioning in their environment, whereas the social and emotional wellbeing concept is broader than this and recognises the importance of connection to land, culture, spirituality, ancestry, family and community, and how these affect the individual. (p. 9)

Curriculum that encompasses both discipline- and Indigenous-specific knowledges and perspectives, and that is localised (like the family therapy course discussed by Sally), has been linked to success in higher education for Aboriginal and Torres Strait Islander students, as well as “playing a critical role in building new and dynamic approaches to learning, research and innovation” (Behrendt et al., 2012, p. 94). Ways Forward

Clearly there is significant potential and opportunity for the profession to address the barriers raised in these interviews and promote psychology as a viable and attractive career for Aboriginal and Torres Strait Islander students. While many of the barriers cited by the interviewees in this brief snapshot might be encountered by any trainee psychologist, Sally’s point that as an Aboriginal person, “You already face a world of no” is particularly poignant. Moreover, it could be said that the profession (and community) needs Indigenous psychologists more than they need psychology.

The APS, the largest professional association for psychologists in Australia, has developed a Reconciliation Action Plan (RAP), committing the profession to “building respect, relationships and understanding between Indigenous and other Australians to close the gap in mental health and wellbeing outcomes” (APS, 2012, p. 8). The RAP has a stated goal of working toward reaching a total of 80 Aboriginal and Torres Strait Islander registered psychologists by 2016, by facilitating “mechanisms for increasing the employment of Indigenous people, and in particular psychologists” (p. 20) as well as contributing to “national debates and policies that impact on the Indigenous psychology workforce” (p. 19). The plan commits the APS to advocate for “mechanisms that support and retain Indigenous psychology students such as affirmative action, recognition of other learning (crediting other subjects), and flexibility with entry requirements” (p. 21). It is also suggested that research and practice supervisors of Indigenous students and graduates be required to demonstrate cultural competence. These aims cannot be achieved while our own processes for admission to postgraduate study or guiding interns through their supervised practice experience remain rigid, impervious to change, demoralising and discouraging to supervisors and supervisees alike, and completely embedded within western notions of ‘professionalism’ and what constitutes ‘psychological’ practice.

As a discipline and profession psychology has far more to gain than to lose by attracting and supporting Aboriginal and Torres Strait Islander Australians to pursue careers in psychology. With Aboriginal and Torres Strait Islander young people increasingly aspiring to engage in post-secondary education and pursue professional careers, it is likely from their practice records that all three graduates interviewed will...
Indigenous Australians pursuing psychology careers

continue to achieve success in their careers whether within or outside psychology. Ultimately, the loss will be the profession’s if we squeeze them out of psychology. We want to ensure that psychology is in a position to benefit from these aspirations, so as a discipline and profession we can better contribute to closing the gap through improved career choices and greater economic and professional opportunities for Aboriginal and Torres Strait Islander people, and more culturally relevant services for Indigenous clients and communities. Psychology will be greatly enriched in turn by the wealth of knowledge and wisdom that exists in Aboriginal and Torres Strait Islander cultures.

References


Notes
1 In February 2012 there were 28,632 psychologists registered in Australia (Psychology Board of Australia, 2012). AIPA (2010) noted that only 39 Aboriginal and Torres Strait Islander psychologists were identified at the 2006 census, when 625 would be expected if parity existed within the profession (2.5% of the Australian population and the profession). Part of the challenge is identifying the number of Aboriginal and Torres Strait Islander psychologists. The 2006 census identified 39; however, subsequent investigation by AIPA and the APS has shown numbers to be around 42.
registered psychologists and up to 60 when postgraduate students and/or APS members who are not fully registered are included.

2 The graduates’ names and identifying details have been changed to protect their confidentiality, but all have read a draft of this manuscript, provided feedback, and consented to its publication.

Acknowledgements
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Author biographies
Jacinta Wainwright is a provisional psychologist undertaking postgraduate studies in Community Psychology at Victoria University. She conducted and wrote up the interviews for this paper in ongoing collaboration with the interviewees, as part of her practicum placement in the Public Interest team of the Australian Psychological Society (APS) in 2010-11. She is an experienced practitioner in the fields of family violence and child and family services in regional Victoria.

Heather Gridley, FAPS, is a community and counselling psychologist, and was a founding member of the APS Aboriginal and Torres Strait Islander Peoples and Psychology Interest Group. As APS Manager, Public Interest, she supervised Jacinta’s placement at APS.

Emma Sampson’s background is in community psychology and she is currently employed within the APS Public Interest team where she has contributed to the society’s Reconciliation Action Plan.

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Heather Gridley
Australian Psychologists’ Current Practice, Beliefs and Attitudes towards Supporting Women Survivors of Childhood Maltreatment

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Child maltreatment survivors have an increased risk of developing various mental illnesses in adulthood, which may lead survivors to access psychological services. This study explored the frequency with which Australian psychologists encounter child maltreatment survivors in their clinical practice and their attitudes and beliefs about routine screening and supporting survivors. The results showed that 81.1% of psychologists surveyed saw clients with co-morbid mental illness and child maltreatment experience on a daily or weekly basis. The majority of psychologists believed that child maltreatment was a health care issue which impacts upon mental health, routinely asked about child maltreatment experiences, and believed that screening and supporting survivors was very important. Self-reported confidence and a belief in the importance of screening and supporting survivors for child maltreatment experiences were showed to predict actual screening behaviours, whilst comfort in screening did not. Highlighting the complexity of supporting survivors, 75.4% ‘agreed’ or ‘strongly agreed’ that they would benefit from further training in screening and supporting survivors despite reporting high levels of confidence and comfort in this area. Further education to better equip psychologists to screen and respond to survivors, may therefore facilitate early intervention and provision of appropriate psychological services to survivors.

In Australia, 339,454 reports were made to local child protective agencies in 2009 regarding possible or actual child maltreatment (Australian Institute of Health and Welfare, 2010). Child maltreatment comprises of five different forms: physical abuse, sexual abuse, emotional abuse, neglect and witnessing violence (Taylor, Moore, Pezulla, Tucci, Goddard, & De Bortoli, 2008) and studies have found that specific types of child maltreatment (and its combination) are associated with different problems in adulthood. For example victims of child sexual abuse (CSA) and victims of CSA and physical child abuse (PCA) had higher posttraumatic stress symptoms compare to victims of PCA only and those who were not abused in childhood (Hetzel & McCanne, 2005). In a study on adolescents depressive symptoms were experienced more frequently by those who were exposed to both CSA and PCA, compared to those who experience PCA only and those with no abuse history (Danielion, de Arellano, Kilpatrick, Saunders, & Resnick, 2005). Child maltreatment survivors have also been documented to have a higher number of medical conditions (Chartier, Walker, & Naimark, 2007) and an increased prevalence of various mental illnesses (McLaughlin, Green, Gruber, Sampson, Zaslavsky, & Kessler, 2010) such as depression (Banyard, 1999; Bifulco & Moran, 1998; Miller, Wolff, & Scott, 2000), anxiety (Miller et al., 2000), and post-traumatic stress disorder (Foa, 2000; Miller et al., 2000).

The reason for this higher prevalence of mental illness in adult survivors of child maltreatment may be due to multiple disruptions to normal child development that
can occur as a result of child maltreatment. Child maltreatment experiences can disrupt a person’s early attachment (Bowlby, 1973; Stien & Kendall, 2004). This may disrupt the formation of the sense of self, others, and the world (Bowlby, 1973; Stern, 1985; Stien & Kendall, 2004), potentially resulting in the child viewing themselves as unloved or unworthy of others’ attention or disrupting the development of interpersonal skills necessary to draw on social support to help in resolving emotional distress. Neurological development as well as physical growth can also be disrupted (van der Kolk, 2003; van der Kolk, Pelcovitz, Roth, Mandel, McFarlance, & Herman, 1996). These factors may reduce the person’s ability to cope in later life, affecting trust in others, inducing feelings of self-blame, and predisposing them to mental illness (Sanderson, 2006).

The importance of intervening early with child maltreatment survivors has been previously demonstrated. As a group they have higher access of primary and tertiary healthcare services (Hulme, 2000) and psychological services (Walker et al., 1999), with resultant higher healthcare costs. However, most maltreatment survivors do not seek assistance until adulthood (Sanderson, 2006), so the onus is often on clinicians to be sensitive to early signs of child maltreatment-related distress.

Research further indicates that women are more vulnerable than men to experience CSA (Finkelhor, Ormrod, Turner, & Hamsby, 2005) and were shown to have higher death rates from CSA (Taylor et al., 2008). A meta-analysis looking at prevalence of CSA around the world, reported the highest combined prevalence from 217 publications to be in Australia for women compared to men (Stoltenborgh, van IJzendoorn, Euser, & Bakermans-Kranenburg, 2011). When other demographic factors were controlled for, women survivors were documented to be more likely than men to acquire a mental illness in adulthood (Thompson, Kingree, & Desai, 2004) with higher prevalence rates for depression, anxiety and post-traumatic stress disorder (PTSD) following sexual violence in women (World Health Organization [WHO], 2011) compared to men. Women are also more likely to seek psychological support compared to men (WHO, 2011). Given the findings of prior studies indicating that women are more vulnerable than men to CSA and are more likely to acquire mental illness in adulthood and are more likely to seek psychological support, this study focused on psychologists’ contact with women survivors.

Despite survivors’ increased risk of developing mental illnesses in adulthood and their potential increased access of psychological services, there is a paucity of research into Australian psychologists’ current practice, attitudes and belief in screening and supporting women survivors. There is also a lack of research exploring whether confidence in screening and supporting survivors has any predictive capacity to actual screening of clients. Past research investigating psychologists’ professional practice in the area of child maltreatment often focused on the issues of mandated reporting, in particular professional ethical constraints (Walters, 1995), barriers to reporting (Beck & Ogloff, 1995), and practitioner characteristics that facilitate reporting (Renninger, Veach, & Bagdade, 2002; Waldecker, 2010) rather than exploring psychologists actual practice with survivors. This study redresses this gap by exploring the current practices, attitude and beliefs of psychologists in working with and supporting adult survivors who present for psychological services. Assessing childhood maltreatment experience of clients is extremely important for a holistic understanding of the client and for the implementation of appropriate management and therapies. Overlooking this complex issue may result in delivery of inappropriate psychological interventions that treat symptoms rather than address the underlying cause.

In addition to exploring the practices of psychologists in screening adult survivors of
child maltreatment, determining why some psychologists ask and assess for childhood maltreatment experience while others do not is also important, as this may help in developing education resources to promote better management of child maltreatment survivors. Bandura’s self-efficacy theory may provide a framework for understanding psychologists’ screening behaviour. The theory posits that the beliefs one holds about their ability influences the way in which they will behave (Bandura, 1986). Within the context of screening behaviour, psychologists with a higher belief about their ability to conduct screening and support identified survivors are expected to be more likely to conduct screening. It is therefore hypothesised that higher levels of confidence in conducting screening will predict actual screening behaviour, over and above other practice related factors. Beyond a demonstration of predictors of screening behaviour, a further aim of this study was to provide a preliminary insight into the current practice, beliefs, attitudes and confidence of psychologists in screening and supporting women child maltreatment survivors. A final aim was to explore the perceived training needs of Australian psychologists.

**Method**

**Participants and Procedure**

A total of 127 psychologists participated in this study by completing an electronic survey from January 2010 to June 2011. Psychologists were recruited from a recurring advert placed on the Australian Psychological Society (APS; the professional body representing psychologists in Australia) webpage. Psychologists interested in participating were given the option to contact the first author or click on the link listed on the advertisement, which took them to the secured survey hosted by Survey Methods (an online survey delivery tool). Opportunistic sampling was utilised, as only those who wished to take part would have proceeded to complete the survey. Responses were collected automatically by the online survey software. The first author collated all responses at the end of recruitment period and transferred all responses into a statistical package for analyses.

The protocol for this research project was approved by Alfred Research Ethics Committee, Monash University Human Research Ethics Committee, and Latrobe Regional Hospital Human Research Ethics Committee.

The majority of respondents were female (89%) and the average age of respondents was 45.8 years ($SD = 11.4$). All respondents reported an interest in mental health and 90% of respondents had undertaken additional training in mental health. More than half were private practitioners (55.1%) and most had gained their psychology training in Australia (92.4%).

**Questionnaire**

To our knowledge, there were no established questionnaires to ascertain the characteristics of practice, attitudes, beliefs, and confidence of health practitioners in assisting women survivors. To allow assessment of these characteristics, the Clinician Feedback Questionnaire (CFQ) was developed. The CFQ comprises 41 items and includes 6 items adapted from a British survey (Richardson, Feder, Eldridge, Chung, Coid, & Moorey, 2001) that looked at health professionals’ attitudes and clinical practice with women who experience domestic violence and survivors of childhood sexual abuse. To develop the remaining CFQ items, a set of domains relating to key aspects of psychologist practice relating to treatment of adult child abuse survivors were identified from a review of the literature. These included: prevalence of clients with the comorbidity; attitudes and beliefs; confidence and perceived importance of aspects of practice; comfort with screening for abuse sub-types; perceived training needs and beliefs about screening. A pool of potential
items were developed for each domain and refined in consultation amongst the study authors to develop the final survey. As a final phase of validation, pre-testing was conducted with a sample of clinicians including a general practitioner, a psychiatrist, a neuropsychologist, and three clinical psychologists to ensure face validity, and appropriateness of items, and format. Comments received were incorporated into the finalised questionnaire. As the survey was exploratory in nature, formal psychometric testing of reliability or validity was not performed.

The final CFQ consists of 41 items:
- Six items were adapted from a British survey (Richardson et al., 2001) which looked at health professionals’ attitudes and clinical practice with women who experience domestic violence and survivors of childhood sexual abuse. The term ‘domestic violence/child sexual abuse’ was replaced with ‘child maltreatment’. Original scale anchors of ‘agree, uncertain or disagree’ and ‘yes/no’ were changed to scale anchors which ranged from 1 ‘strongly disagree’ through to 5 ‘strongly agree’.
- A further four items were added asking about clinicians’ attitude and beliefs using the same scale anchors.
- Fourteen items explored clinicians’ demographics and current practice.
- Eleven items explored the importance, confidence and comfort level in dealing with issues surrounding screening, supporting and referring survivors; scale anchors ranged from 1 ‘not important’ through 4 ‘very important’, 1 ‘not confident’ through 4 ‘very confident’, 1 ‘not comfortable’ through 4 ‘very comfortable’ respectively.
- The remaining items asked about: the need for further training in responding to adult women survivors of child maltreatment; who clinicians believe should be screening survivors; and perceived barriers to screening for experiences of childhood maltreatment in their practice.

**Analyses**

Data analyses were conducted utilising IBM SPSS Statistics 19. Descriptive analyses such as percentages and means was utilised to demonstrate cumulative responses of psychologists. To explore whether psychologists’ current beliefs about importance, confidence and comfort in screening and supporting survivors predicted self-reported screening behaviour, logistic regression was used due to the skewed distribution of the dependent variable (self-reported screening behaviour).

**Results**

Approximately 81.1% of surveyed psychologists reported seeing women survivors with mental health issues and comorbid childhood maltreatment experiences on a daily or weekly basis (see Table 1). The majority of psychologists (66.1%) provided ongoing treatment within their practice for women survivors of childhood maltreatment hence did not need to refer clients for ongoing treatment. Practice characteristics, attitudes and beliefs of psychologists in relation to responding to the adult consequences of child maltreatment are summarised in Table 1. The total number of psychologists responding to each variable ranged from 121 to 127 as some participants did not answer some of the questions.

Ninety-four per cent of the sample ‘agreed’ or ‘strongly agreed’ that child maltreatment is a health care issue. Almost all respondents (96.8%) ‘agreed’ or ‘strongly agreed’ that child maltreatment was an issue for their clients and discussed the issues of childhood maltreatment with their clients. The majority (94.4%) also routinely asked clients about mental health issues. All but one respondent (99.2%) ‘agreed’ or ‘strongly agreed’ that the experience of childhood maltreatment impacts upon mental health;
Table 1

Psychologists’ Practice Characteristics, Attitudes and Beliefs in Caring for Women Survivors of Child Maltreatment

<table>
<thead>
<tr>
<th>How often do you:</th>
<th>Frequency (%)</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>see adult female clients with mental health issues who has had childhood maltreatment experience ($n = 127$)</td>
<td>Daily</td>
<td>42(33.1)</td>
<td>61(48.0)</td>
<td>18(14.2)</td>
</tr>
<tr>
<td>see adult female clients with childhood maltreatment experience who has mental health issues ($n = 121$)</td>
<td>Weekly</td>
<td>37(29.1)</td>
<td>57(47.1)</td>
<td>19(15.0)</td>
</tr>
<tr>
<td>refer a client with childhood maltreatment experience for ongoing treatment* ($n = 127$)</td>
<td>Monthly</td>
<td>2(1.6)</td>
<td>6(4.7)</td>
<td>24(18.9)</td>
</tr>
<tr>
<td>To what extent do you agree with the following:</td>
<td>Frequency (%)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>Disagree</td>
<td>Uncertain</td>
<td>Agree</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Child maltreatment is a health issue ($n = 127$)</td>
<td>2(1.6)</td>
<td>3(2.4)</td>
<td>3(2.4)</td>
<td>38(29.9)</td>
</tr>
<tr>
<td>Child maltreatment is not a problem for women in my practice population ($n = 126$)</td>
<td>91(72.2)</td>
<td>31(24.6)</td>
<td>2(1.6)</td>
<td>1(0.8)</td>
</tr>
<tr>
<td>I believe that women should be routinely screened for childhood maltreatment experience/(s) ($n = 127$)</td>
<td>3(2.4)</td>
<td>18(14.2)</td>
<td>40(31.5)</td>
<td>41(32.3)</td>
</tr>
<tr>
<td>I put off talking about childhood maltreatment experience/(s) because it takes too much time ($n = 127$)</td>
<td>92(72.4)</td>
<td>31(24.4)</td>
<td>3(2.4)</td>
<td>0(0.0)</td>
</tr>
<tr>
<td>I do not talk about childhood maltreatment experience/(s) because I do not know what to do ($n = 127$)</td>
<td>90(70.9)</td>
<td>33(26.0)</td>
<td>1(0.8)</td>
<td>1(0.8)</td>
</tr>
<tr>
<td>When women disclose child maltreatment experience/(s) I give information about help available ($n = 127$)</td>
<td>3(2.4)</td>
<td>2(1.6)</td>
<td>8(6.3)</td>
<td>57(44.9)</td>
</tr>
<tr>
<td>Experience/(s) of childhood maltreatment impacts on mental health ($n = 126$)</td>
<td>1(0.8)</td>
<td>0(0.0)</td>
<td>0(0.0)</td>
<td>25(19.8)</td>
</tr>
<tr>
<td>I routinely ask all women about their mental health ($n = 125$)</td>
<td>3(2.4)</td>
<td>2(1.6)</td>
<td>2(1.6)</td>
<td>29(23.2)</td>
</tr>
<tr>
<td>I routinely ask all women about their childhood maltreatment experience/(s) ($n = 127$)</td>
<td>4(3.1)</td>
<td>16(12.6)</td>
<td>8(6.3)</td>
<td>47(37.0)</td>
</tr>
<tr>
<td>I would like specific training on child maltreatment and how to treat women survivors ($n = 126$)</td>
<td>6(4.8)</td>
<td>8(6.3)</td>
<td>17(13.5)</td>
<td>62(49.2)</td>
</tr>
</tbody>
</table>
However, only 77.9% routinely asked clients about childhood maltreatment experience. The majority of respondents believed that screening, supporting, and referring clients with childhood maltreatment experiences was ‘very important’ (Figure 1) and were ‘very confident’ in screening, supporting, and referring when necessary (Figure 2). Most were also ‘very comfortable’ with screening clients for all five types of childhood maltreatment (Figure 3).

Despite feeling confident and comfortable with screening, supporting, and referring women survivors when necessary, the majority of respondents would still like further training (Figure 4) on child maltreatment and its impact (75.2%), how to treat (75.4%), screen (66.1%), support (81.6%), and refer women survivors to appropriate services (57.3%).

**Figure 1.** Importance of screening, supporting, and referring women survivors.

**Figure 2.** Confidence in screening, supporting, and referring women survivors.
Logistic regression was used to assess whether psychologists’ current beliefs about importance, confidence and comfort in screening and supporting survivors impacted upon the likelihood of self-reported screening behaviour, after controlling for other predictors in the model. The choice of analysis technique was influenced by the dependent variable (self-reported screening behaviour) being significantly skewed or not normally distributed, related to the majority of participants responding that they ‘agreed’ or ‘strongly agreed’ that they routinely screened clients. To adjust for the potential impact of this skewed dependent variable it was dichotomised into ‘Not Agree’ (for those who responded ‘strongly disagree’, ‘disagree’ and ‘uncertain’) and ‘Agree’ (for those who responded ‘agree’ and ‘strongly agree’. Given the similarity of psychologists’ responses on their comfort in screening for the five different types of child maltreatment experiences, a composite variable Comfort

Figure 3. Comfort with screening for different types of maltreatment.

Figure 4: Need for further training
Screening for Abuse were formed from five questions to prevent collinearity between predictors biasing the regression model (Pallant, 2007). All logistic regression assumptions of sample size (minimum ratio of valid cases to independent variables of 10

Table 2
Summary of Direct Logistic Regression Analysis for Variables Predicting Psychologists Screening Behaviours

<table>
<thead>
<tr>
<th>Predictor</th>
<th>B</th>
<th>SE B</th>
<th>Wald</th>
<th>df</th>
<th>e^B (Odds Ratio)</th>
<th>95% CI for e^B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>-.07*</td>
<td>.03</td>
<td>4.99</td>
<td>1</td>
<td>.93</td>
<td>.87  .99</td>
</tr>
<tr>
<td>Gender</td>
<td>.55</td>
<td>.98</td>
<td>.31</td>
<td>1</td>
<td>1.73</td>
<td>.25  11.85</td>
</tr>
<tr>
<td>Practice Length</td>
<td>.06</td>
<td>.04</td>
<td>1.85</td>
<td>1</td>
<td>1.06</td>
<td>.98  1.15</td>
</tr>
<tr>
<td>Importance screening women for childhood</td>
<td>1.22**</td>
<td>.35</td>
<td>11.91</td>
<td>1</td>
<td>3.39</td>
<td>1.70 6.78</td>
</tr>
<tr>
<td>maltreatment experience/(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Importance supporting women with childhood</td>
<td>-.45</td>
<td>.76</td>
<td>.35</td>
<td>1</td>
<td>.64</td>
<td>.14  2.82</td>
</tr>
<tr>
<td>maltreatment experience/(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Confidence in screening women for childhood</td>
<td>1.70**</td>
<td>.61</td>
<td>7.71</td>
<td>1</td>
<td>5.45</td>
<td>1.65 18.06</td>
</tr>
<tr>
<td>maltreatment experience/(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Confidence in supporting women with childhood</td>
<td>.48</td>
<td>.66</td>
<td>.55</td>
<td>1</td>
<td>1.62</td>
<td>.45  5.82</td>
</tr>
<tr>
<td>maltreatment experience/(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comfort with screening women for childhood</td>
<td>.28</td>
<td>.60</td>
<td>.22</td>
<td>1</td>
<td>1.32</td>
<td>.41  4.26</td>
</tr>
<tr>
<td>maltreatment experience/(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Constant</td>
<td>-6.87</td>
<td>3.28</td>
<td>4.40</td>
<td>1</td>
<td>.00</td>
<td></td>
</tr>
</tbody>
</table>

Note: CI = Confidence Interval.

Importance and confidence screening and supporting women for childhood maltreatment experience/(s) scored from 1 for ‘not important’ or not confident to 4 for ‘very important’ or ‘very confident’.

Comfort screening women for childhood maltreatment experience/(s) scored from 1 for ‘not comfortable’ to 4 ‘very comfortable’.

Did not agree to routinely ask women about childhood maltreatment experience/(s) is the reference category.

*p < .05 **p < .01 ***p < .001
to 1) (University of Texas, 2006), multicollinearity, outliers, and independence of errors (Tabachnick & Fidell, 2001) were fulfilled.

The regression model contained eight independent variables: age, gender, practice length, importance screening and supporting women survivors, confidence screening and supporting survivors and comfort screening women survivors. The full model containing all predictors was statistically significant, \( \chi^2 (8, N = 121) = 52.86, p < .001 \), indicating that the model was able to distinguish between those who ‘did not agree’ and those who ‘agreed’ that they routinely asked women about childhood maltreatment experience. The model as a whole explained between 35.4% (Cox and Snell R square) and 53.5% (Nagelkerke R square) of the variance in self-reported screening behaviour, and correctly classified 86% of cases. As shown in Table 2, only age, importance, and confidence screening women for childhood maltreatment experience made a unique statistically significant contribution to the final model, with confidence screening being the strongest predictor.

**Discussion**

This paper explored current practices of psychologists in screening and supporting women survivors of child maltreatment. Key findings revealed that 81% percent of psychologists saw clients who presented with mental health issues and a comorbid child maltreatment experience on a daily or weekly basis. Most respondents agreed that child maltreatment was an issue for their clients and that it impacts upon client’s mental health. Despite high levels of self-reported confidence and comfort in screening and assessing clients, most respondents wanted further training on the impact of child maltreatment and how to screen for and support survivors of child maltreatment.

The finding that 81% of psychologists saw clients with comorbid mental illness and child maltreatment experiences on a daily or weekly basis is consistent with the literature highlighting the significant prevalence of mental illness in child maltreatment survivors (Briere & Runtz, 1990; Chartier et al., 2007; Freeman, Collier, Parillo, & Nova Research Co, 2002; McLaughlin et al., 2010; Miller et al., 2000). This also highlighted that psychologists regularly provide care to child maltreatment survivors, and as a result must be equipped to identify and assist in treating the presenting concerns of survivors.

To help guide the development of future training, logistic regression analysis found that psychologists were more likely to routinely screen for childhood maltreatment experiences if they were more confident in conducting screening, rated the importance of screening more highly and were younger. Clinical experience alone is not sufficient to increase the likelihood of screening for maltreatment history. Comfort in screening clients for different forms of maltreatment experiences also did not significantly predict actual screening behaviour, which may indicate that psychologists who may not be comfortable screening clients for maltreatment experiences can still do so.

Despite the majority of psychologists reporting high levels of confidence and comfort in screening for and supporting survivors, most still expressed a desire for more training in this area. Given that training received by psychologists may differ, targeted and continual education and training for Australian psychologists in the area of screening and supporting survivors is warranted. This will hopefully improve screening for childhood maltreatment experiences which may contribute to current presenting problems, allowing for better treatment.

The finding that self-confidence in conducting screening was the strongest predictor of actual screening behavior was expected on the basis of Bandura’s self-efficacy theory which proposes that a person’s belief in their self-competence
influences whether they perform a particular task (Bandura, 1982, 1986). Provided education must therefore aim at building confidence and belief in clinicians in their ability to effectively identify and provide appropriate support to maltreatment survivors. Enhancing clinician belief about the importance of conducting screening was also suggested by study findings as a possible means of enhancing the conduct of screening. To achieve both aims, ongoing education should detail the mechanisms by which maltreatment experiences may increase the risk of and contribute to adult mental illness; how to screen (e.g., standardised measures or common screening questions); how to provide treatment for symptoms related to child maltreatment experiences; and how to refer on patients for specialist support if necessary. Psychology training programs may also wish to include screening and supporting survivors as part of core content of their training programs to equip new practitioners with the knowledge to ask and support survivors, given the prevalence of prior maltreatment experience in clients who present with mental health concerns.

Whereas the effect of self-confidence was expected, the effect of age on screening behaviour was not expected. One previous study did, however, find that younger physicians and nurses were more likely to initiate the topic of intimate partner violence with their patients (Gutmanis, Beynon, Tutty, Wathen, & MacMillan, 2007), but they did not explore the link between age and screening behaviour specifically. A recent study that conducted interviews with staff in the context of a program looking to enhance screening of women for partner abuse, found that a number of personal barriers to questioning were reported, including: discomfort with the question/lack of confidence to ask, fear of offending the women, and forgetting to ask (Wills, Ritchie, & Wilson, 2008). It could be speculated that with the recently increased awareness of the importance of early intervention to prevent the negative consequences of child maltreatment, training programs that younger psychologists have participated in may have provided greater coverage of how to conduct screening, resulting in higher levels of screening in younger psychologists. However, further research is required to explore this finding.

A potential limitation of this study was that 89% of respondents were female. However, the high number of female respondents in this study sample reflects the higher number of female registered psychologist (78%) in the Australian workforce during the study period (Psychology Board of Australia, 2011). Given that only 11% of respondents were male, it was not statistically meaningful to conduct a gender analysis on attitudes, beliefs and practice in relation to this issue. Future research may wish to explore gender differences on practice by utilising matched sample of female and male psychologists.

The recruitment of respondents mainly via advertisement through the APS website may be a potential limitation. While this allowed for psychologists Australia wide to participate, it is likely that many psychologists did not see the advertisement or chose not to participate. There is also the possibility of selection bias against psychologists who do not access the APS website which could not be avoided. It is likely that psychologists who responded may have an interest in this area, which may have contributed to the high reported rates of confidence in screening and supporting survivors, so the extent to which this finding is reflective of the whole psychologist population in Australia is unclear. The nature of the questionnaire utilised may also be a potential limitation. Due to a lack of any previous published measures of relevance to addressing the studies’ research questions, a questionnaire was developed by first author based on practice experience and a review of
the available literature and refined in consultation with other study authors. Although the final questionnaire was sent out to various practitioners to determine the face validity of the questions, it could not be tested for reliability and consistency due to the nature of the questions.

Strengths of this study were that the findings provided an insight into the current practices of 127 psychologists around Australia in screening, assessing and supporting clients who may be survivors, which has not been looked at previously. This provided information on practices of psychologists, which at times due to confidentiality and privacy may not be open knowledge to other practitioners. It also provided information on the perceived training needs of Australian psychologists in this area, which may contribute to assisting women child maltreatment survivors.

Future research is still much required to identify the reason for the discrepancies found in this study between psychologists reported confidence in conducting screening and their perceived training needs. In particular qualitative research exploring the factors that contribute to psychologists’ level of confidence in supporting survivors of child maltreatment, specific training topics which psychologists might be interested in and how these specific training topics would increase their confidence levels may be helpful. Further studies may also wish to consider asking psychologists about their own childhood experience to explore whether it influence screening behaviours and to identify psychologists’ views on support, treatment options and beliefs about the various types of child maltreatment.

In summary, findings confirmed that not only do Australian psychologists regularly provide care to clients with comorbid mental illness and child maltreatment experiences, but that confidence and belief about the importance of screening for child maltreatment experiences were the strongest predictors of actual screening behavior. Psychologists are also reporting that they want further training in the area of screening and supporting women who were maltreated as children. By providing further ongoing education in this area, psychologists are likely to be better equipped to identify early and provide more appropriate and holistic intervention to child maltreatment survivors.

References


Acknowledgements

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Author Biographies

Ms. Adeline Lee is a senior research officer at Monash University and a Registered Psychologist. She has been an active clinician and researcher since 2006. She has conducted clinical and research work in the area of mental health with an interest in trauma and its impacts upon vulnerable populations. She is currently completing her doctoral thesis, which examines the relationship between women’s mental health and childhood maltreatment as well as clinicians’ practice and views on supporting survivors.

Dr. Stuart Lee is the mental health service evaluation senior research officer at the Monash Alfred Psychiatry Research Centre (MAPrc), The Alfred and Monash University. Dr Lee has conducted a number of quality
improvement and research projects exploring key aspects of service delivery within inpatient and community psychiatry, psycho-oncology and neurology services. A focus of his research has been to maximise identification and early intervention for psychological distress and promotion of recovery and rehabilitation of functioning for patients.

Associate Professor Jan Coles is an academic General Practitioner who has worked in clinical medicine and general practice for 25 years. Her main area of research is sexual violence and women's health and the impact of childhood sexual violence on early mothering. She has been received a number of research grants and hosted national events such as the National Summit 2010 on women's health and sexual violence: "Happy Healthy Women: Not Just Survivors", which won the Constance Stone Award of the Victorian Medical Women's Society. She is engaged in national and international sexual violence research collaborations and is the chair and executive member of a number of research committees.

Professor Jayashri Kulkarni became a Fellow of the Royal Australian and New Zealand College of Psychiatrists in 1989. She commenced her appointment as Professor of Psychiatry, The Alfred and Monash University in 2002. She founded and directs a large psychiatric research centre, the Monash Alfred Psychiatry Research Centre (MAPrc). The aim of Monash Alfred Psychiatry Research Centre is to develop new treatments, new understanding and new service deliveries for people with mental illness. It is a world leader in the translation of cutting edge neuroscience discoveries into innovative, life-changing treatments for people with mental illness. Jayashri is a passionate advocate of person-focused real world mental health research.

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Working Together is a book I not only recommend all community psychologists to read (and psychologists generally for that matter), but also one I’d recommend them to keep in that accessible part of their bookshelf next to the other equally important Community Psychology Bibles. The topic (or rather the range of subjects) covered in this book are so fundamental to our professional identities, so relevant to the work most of us are involved in, and so intertwined with the knowledge areas we as a profession are aligned to, that I feel embarrassed that so much of what I read in this book was still so new to me. Most importantly I think we need to become more culturally safe, competent and aware of the topics covered in this book because whether we are Aboriginal or not; the history, policies, social and political contexts that have led to the mental health issues as they are today in Aboriginal communities are the histories and political contexts of all of us.

The richness of detail, topics and references which Working Together draws on and includes make this the kind of book I struggle to sit down and read in one sitting. Instead I need to focus in on one of its areas, reflect on that, and spend time talking to other colleagues, psychologists or Aboriginal mentors to make sense of it within the work I do. The contributors to the book number 39 and their expertise is equally broad with both Aboriginal and non-aboriginal, current and historical writing, as well as outlining programs and ideas for future work. It also crosses topics about social and emotional and mental illness perspectives, including relevant information for treatment, counselling and other ameliorative aspects of mental health services, as well as topics relevant to population level interventions, health promotion and wellness perspectives. A chapter that I loved reading was all about the social determinants of mental health. The book also encompasses broader academic perspectives that might interest those in research or policy settings, as well as a more specific focus on case studies of culturally competent programs and services.

As a non-aboriginal community psychologist myself, I found it useful to read the chapter by Heather Gridley, Debra Rickwood and Pat Dudgeon which provided the history of psychology as this maps onto Australian history relevant to Aboriginal and Torres Strait Islander People. It reminded me of how culturally specific the tools are that we often have been uncritically taught to use, including psychological tests and counselling models. Just as importantly, the chapter reminds me that the psychology profession has been shaped by many political and social forces including those that make up the colonial history of Australia. As so many of the other chapters further reinforce, this reflection leads me once again to the need for us as a profession and practitioners to remain critical, and seek ways to be collaborative, empowering and potentially decolonising of our own perspectives, whatever our area of work.

Later in the book, I found the two chapters focusing on culturally competent mental health practice enormously useful and practical. The first, on working as a culturally competent mental health practitioner (Roz Walker and Christopher Sonn) and the next...
one on communication and engagement: urban diversity (Pat Dudgeon and Karen Ugle) were chapters we gave out to health workers who attended a training I helped to facilitate on Aboriginal and Torres Strait Islander cultural competence for health workers. These chapters were very practical and easy to understand, with tools for being critically reflective in practice, information on culture, language, community obligations, and other things that people often ask for at training sessions. Further chapters follow in this practice section of the book to cover diagnosis and assessment, perinatal mental health, and dealing with grief, loss and trauma.

In general it has been a book I have loved to read. While much information is there for me to glean it isn’t hard to notice the same themes that community psychologists grapple with in many areas of our work: empowerment, collaboration, respect for the expertise of the people and communities themselves along with recognition of how colonisation (and history) has played out in a real way within the lives of Aboriginal and Torres Strait Islander people today.

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It is with great pleasure I review Tom Wolff’s book “The Power of Collaborative Solutions”. I have been a fan of Tom’s for a long time, receiving his collaborative solutions newsletters. Not only has Tom been involved at the ground floor level with so many different community projects he has been able to translate all this work into a well-substantiated and grounded research. He is one of the foremost people that links community work and research, which for many of us that are either in community work or research, Tom is a crucial translator.

This current book brings together a plethora of examples of community work in an overarching framework with which to effectively manage and build healthy communities. The book is written in an engaging manner and offers to the reader linkages to many tools on the web or at the back of the actual book. It is a real “how to” book. Tom presents a framework of six guiding principles to building healthy communities. At the heart of these principles is collaboration that builds an active citizenry in social change process.

In Tom’s self-effacing style, he details many examples where things went wrong, and real lessons learned, which provides insight into the difficulty of community work but also provides motivation for those new to community work. Working with others does not always transpire the way we had intended in the beginning so our ability to evaluate is an important lesson in our own reflective practice. Tom embodies this reflective practice.

For me, the central message of this book is about communication. People want to be heard, and this book argues that all people should be heard. If you want to work to change things in our world then you need to do this with other people, many people, all people. This point is so simple yet really powerful. Tom’s book illustrates to us the power of collaborative solutions.

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The volume’s editors, Melinda Tankard Reist and Abigail Bray, bring together a collection of international contributors – social and health researchers, feminists, activists, health educators, lawyers, psychologists, and commentators – who together argue that our lives are increasingly coloured by the “proliferation and normalisation” (p. xiv) of pornography. In discussing pornography, most of the contributors used the feminist definition of the term that considers the sexual oppression of women and others with less power (e.g., children, animals, gay men, and people of colour).

The book comprises five parts. The first, Part 1: Pornography Cultures, highlights the sexualised objectification of women, the sexualisation of children, the pornification of sexuality, and the medicalisation of sex that enables increasingly pornographic desires to be enacted. In this section, the authors articulate the increasing prevalence of porn sub-genres (e.g., bukkake, twink porn, crush, spankwire, wired porn, teen sex, pre-teen sex, animal sex, among many others); document the almost ubiquitousness of media-related porn (e.g., Internet, music video clips, advertisements, electronic games, sexting); describe the pornographic colonisation of couples therapy; and illustrate the partnering of pornography with the pharmaceutical industry.

Part 2: Pornography Industries, details the ways in which pornography is increasingly profitable. In this section, the contributors align pornography with capitalism to show that the increasing violence and sexual subjugation occurs in the name of power and profit. Far from being freeing, empowering, and harmless, the contributors demonstrate that pornography is damaging to women, children, and men.

Part 3: Harming Children, presents the various ways in which children are victimised by pornography. Here, the authors describe the ways in which pornography is used in the grooming of children as victims of sexual abuse; critique the use of the term ‘incest’ in describing intra-familial child sexual abuse (as argued by the author of one chapter, such usage denigrates the victim by implying that the child abuse is/was consensual); and demonstrate the continued victimisation of child victims that occurs every time an image of their abuse is viewed, shared, sold, or downloaded.

Part 4: Pornography and the State, documents the role of governments in sanctioning pornography. Here, chapters are devoted to presenting the role of rape in genocide, the failure of legislation to deal with the escalating technologies of pornography, and the trend towards liberalisation of legislation that in effect promotes sexual enslavement. An author of a chapter included in this section presents a compelling discussion about the differences between free speech and fair speech, much like the distinction between free trade and fair trade, to argue that this conflation of free speech with fair speech occurs in order to defend and promote pornography.

Finally, Part 5: Resisting Big Porn Inc, is concerned with anti-pornography activism and resistance to mainstream pornography. These contributors in this section outline a vast range of actions ranging from informal, individual acts to highly-organised protests, petitions, lobbying, education tools, and marches, as well as articulating the ways in which they resist the attacks they attract from
having an explicitly anti-porn stance. Each of these five parts includes extracts and autobiographical accounts so, as the editors articulate, we are reminded that, “real people suffer real harm through pornography” (p. xxii).

There is content in this book that, once read, cannot be un-read. Some of the topics in this book are extraordinarily confronting and have stayed in my mind in the months between commencing the reading of this book and writing my review. For instance, after reading a chapter detailing child sexual abuse and its effects, I put the book away for about two months and contemplated finding another reviewer. Eventually, I chose to complete the reading of the book and the writing of the review so that I don’t take the easy way out and ignore the atrocities documented in this book. Even now as I write, I’m finding it difficult to put my thoughts into a cohesive structure because of the emotional and cognitive ‘noise’ the book created.

Some reviewers of this book have compared it to works like Rachel Carson’s Silent Spring or aligned it with other works of literary activism against Big Food, Big Pharma, Big Oil, and so on. I’d like to think this book might have a similar effect. However, the book’s multiple authors have resulted in the absence of a single voice or thesis and there are inconsistencies in the use of key terms such as pornography and incest. Despite this, there are several strengths of this book. From a community psychology perspective, I was very interested in the book’s challenge to the co-modification of the discourses of choice, empowerment, liberation, and free speech; its contention that the harms of pornography must be scrutinised as a social justice issue; and its discussion about collective resistance to an increasingly powerful and global industry.

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When we go to sleep at night with a child in the next room on some new medication, we expect the treatment will be at least marginally better and safer than treatments we may have been prescribed when we were children. After all, the music system is so much more advanced that the one around when we were young and there is a computer now where there was once a typewriter. But this is not the case for many drug treatments. There is every chance our family members will be taking a drug, whether an antibiotic or antidepressant, that is less effective than the one we were treated with or a new drug whose hazards remain to be discovered. (Healy, 2012, pp. 206-207)

Borrowing from Charles Medawar’s prediction that “we are heading blindly towards Pharmageddon,” Healy explains the coup d’etat on health care. Healy’s thesis is that pharmageddon goes beyond the medicalisation and pharmaceuticalisation of language and our understandings of illness to the complete pharmaceutical colonisation of health care. Healy outlines a plethora of new diagnostic tools that “don’t lift a threat to our lives; instead, they effectively make a diagnosis of some drug-deficiency disorder, and they often enter medical practice as part of the marketing strategy for a new drug” (p. 5). The result is the creation of illnesses and disorders (physical and mental), many of them deemed chronic. Care is replaced with assessment of risk factors and the monitoring of ‘numbers,’ with little to no positive impact on health and wellbeing – and for this we pay exponentially more.

Healy’s book comprises an introduction and eight chapters. In chapter 1, They Used to Call it Medicine, Health describes the incestuous relationship between medicine and pharmaceutical marketing, a $30 billion industry in the United States (and $11 billion in Australia; Medicines Australia, 2010). This industry enjoys mark-ups of up to 2500%, blockbuster drugs, brands, trademarks, patents, and monopolies and positions patients as consumers – the aim of making a profit has superseded treating or curing the sick. In the 1950s, Jonas Salk refused to patient the polio vaccine. Healy argues that such a decision would not and could not occur today.

Healy provides several examples where a minor change in compound was developed, patented, and marketed – Depakote for mania (far more expensive but no more effective than the compounds it replaced); Zyprexa for psychosis (although much better at increasing cholesterol that reducing psychosis or stabilising mood), and the advent of SSRIs for anxiety and depression (despite lower efficacy than older medicines and being no more selective in their action on serotonin!). In fact, Healy shows that terms such as SSRIs and mood stabilisers, although now frequent in medical and psychological publications, are not scientific terms but were terms created by the pharmaceutical marketing machines in order to sell more drugs. Healy argues that this “rebranding reengineers disorders from the ground up” (p. 37) and provides examples of the ‘creation’ of bipolar disorder and reflux disease, while “medical diseases with a pedigree going back two millennia, such as catatonia, can vanish if no company stands to make money out of [them]” (p. 38).

In chapter 2, Medicine and the
Marketers, Healy argues that pharmageddon is most obvious in the marketing of defect-causing prescription-only drugs to pregnant women who, at the same time, will refrain from hot showers and ham sandwiches for fear of harm to their unborn child. On the other hand, Professor Barry Marshall, whose Nobel prize-winning discovery that gastric ulcers were caused by a bacterium and therefore could be cured, found no interest from pharmaceutical companies initially intent on marketing long-term prescription and use of acid-reducing drugs for chronic ulcers; now these drugs are prescribed for ‘reflux disease’.

In chapters 3, Follow the Evidence, and 4, Doctoring the Data, Healy outlines the ways in which research data are (mis)represented to prescribing doctors and the consuming public. While a randomised controlled trial might elicit a statistically significant positive effect for a drug, Healy argues that there are likely to have been many more (unpublished and unpublicised) trials that elicited the opposite effect. Here, Healy summarises the effects of several psychological heuristics (e.g., conjunction fallacy, confirmation bias, illusory correlation, self-serving bias) to explain why drugs ‘work.’ This is despite of the lack of transparency in data and research protocols, the absence of ethical review, ghost-written journal articles, and funding by pharmaceutical companies. Healy argues, “These trials had the appearance of science but were no longer science” (p. 98), yet protected by proprietary.

In chapter 5, Trussed in Guidelines, Healy highlights that the advent of best-practice guidelines for medical care has not only removed professional discretion in prescribing treatments but are a vehicle for the pharmaceutical industry; they are “pharmaceutical marketing by proxy” (p. 154) and are used to create new illnesses such as bipolar disorder in children and infants. This critique is extended in chapter 6, The Mismeasure of Medicine, where Healy argues that the ascendance of screening assessments (e.g., peak flow meters, rating scales) is another mechanism by which chronic illnesses (e.g., asthma, female sexual dysfunction) are created in otherwise healthy people, who are then deemed to require pharmaceuticals (e.g., inhalers, testosterone) at the expense of public health approaches. The media is complicit in announcing the latest ‘medical’ advance when it is often a marketing (directly or indirectly) a pharmaceutical launch.

Healy devotes chapter 7, The Eclipse of Care, to the lack of regulation of the pharmaceutical industry. He cites instances of Food and Drug Administration (FDA) employees who, on the side, author journal articles promoting pharmaceutical research (e.g., studies of antipsychotic drugs in children) and questions the notion that the FDA can be impartial in approving pharmaceutical licences. He claims that in the US, “the FDA acts essentially as an auditor for drug company data and no more” (p. 205). He goes on to describe examples where the FDA and its British counterpart, the Medicines and Healthcare products Regulation Agency, have been aware of and did not act upon data manipulation where, for instance, suicides occurring before or after drug trials were recoded as occurring in the placebo group, thus masking the increased suicide risk occurring in the treatment groups. After the release of drugs, doctors substantially underreport adverse effects to regulators, meaning that it takes years (and several lives) for the data manipulations to come to light.

Finally, in chapter 8, Pharmageddon, Healy summarises his key points and provide some strategies for person-centred health care – transparent data that are analysed and interpreted appropriately so that adverse effects are neither ignored nor dismissed and where case studies are not written-off as mere anecdotes; much stronger regulation of
drugs and investigation of their effects (desired and adverse); reconsideration of prescription-only status as it is a key driver of the physician-pharmaceutical alliance; the development of medicine as a far more sophisticated discipline that is savvy to the marketing and other mechanisms employed by Big Pharma, including doctors who are freely able to record and report adverse effects (Healy states that fewer than 5% are currently reported); elimination of drug patents; and a critique of the medico-pharmaceutical complex.

On the whole, I enjoyed reading this book. It is well-written (apart from an obvious typographical error on p. 246) and the use of the pronoun “we” (e.g., “we have focussed on mental health in this chapter,” p. 156) in a sole-authored book. As a Professor of Psychiatry in the UK, Healy’s own experience with patients is scattered throughout the chapters, and this links his arguments to the lived experiences of patients. Healy’s critique of the blind reliance on evidence-based medicine and its links to disease mongering is especially relevant with the upcoming release of the DSM5 (American Psychiatric Association), which will serve the interests of Big Pharma.

References

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“What made all the difference to me was the collaborative company of two therapists [Gab and Viv] who’d done time in the mill, whose personal material had been processed into a fine-grained perspective on what ails all of us ...” (Jones, 2011, p. 193). This quote towards the end of Jones’ memoir summarises what had benefited the author most after four decades of searching for professional assistance to help her manage her psychological needs. There is quite an industry now in the mainstream book market of memoirs – what makes “Barking Mad” different to the usual memoir is the ability of the author to sit between client and therapist. The book provides the reader with the opportunity to reflect on a personal journey of a woman who experienced some significant challenges throughout her life, beginning with her troubled relationship with her mother. She was able to narrate her life experiences with intimate details of day to day experiences while complementing this with her understandings of the impact of her early life experiences on her future development and life journey. The account of the death by suicide of her son is particularly wrenching. For me, as a mother, it was at that point I found the book difficult to put down as I became curious to find out how Jones had been able to get through the days ahead: not least how she found the commitment and stamina to write the book but also to find some kind of resolution with what life had thrown at her. I particularly enjoyed her unique ability to balance her vivid descriptions of distress and unbearable sadness with irony and humour.

Throughout the book, the author’s skill is in her ability to juxtapose between herself as an individual with herself as a professional. It takes the reader on a journey from which the personal aspects are reflected upon through a professional lens. Although at times this became distracting as it required the reader to think on a number of levels, on the whole it reflects how in fact the personal and professional worlds can collide and, importantly, the ways in which strength and knowledge may be drawn from both arenas of one’s life to inform and support the other. This approach of including a professional voice along with the personal seemed to reduce the uncomfortable sense of voyeurism I sometimes feel when reading memoirs.

One of the other striking features of the book is the way in which the author shows the impact of the various therapies on her – on how she saw herself, how she responded and how she felt – often judged and blamed. From a strength based perspective, it was interesting to read about her ability to recognise that although the therapy she had received had not met her needs she could continue to reach out in attempts to get the support she was seeking. The author, four decades on, was able to look back and reflect on the needs of her 19-year-old self when she first sought professional help – when she was searching “with no map, no compass and no idea: how to understand and empathise with myself and forgive my mistakes” (Jones, 2011, p. 192). This may be a useful way for therapists to think about what it is they are charged with when consulted by clients. It seemed suitably just that the epilogue provided a critique of the therapy she had received – almost a turning of the tables on those whose approaches had led to her disempowerment over many years.

For me as a community psychologist, the book forced critical reflection about the role of therapist or counsellor. As individuals
often seek support at the most vulnerable periods of their lives, there is both a sense of privilege and responsibility that arises for the professional from whom assistance is sought. When considering the training and counselling work I have undertaken I feel relieved that we now have approaches to therapy (such as Narrative Therapy) which openly acknowledge the power imbalances inherent in the client-therapist relationship and work towards “decenter[ing] the voice of the therapist [which has] the effect of bringing to the centre of the therapeutic endeavour some of the “knowledges” of life and skills of living of the people who consult therapists” (White, 2011, p. 3). This is perhaps near to what Jones felt when she described her positive experiences with Gab and Viv who “cut their cloth to suit their clients’ needs. Thus better clad, I was able to face my worst fears and learn a better way of being with them” (Jones, 2011, p. 192).

From a community psychology perspective, I was particularly interested in Jones’ descriptions of the freedom she felt after recognising the systemic nature of her difficulties, particularly society’s expectations on women to nurture other’s needs before their own, the ongoing role of patriarchy in contemporary life and the potential role of family factors in mental illness. Her recognition that she was angry at “the system that grinds down generation after generation of people like my parents, people excluded by circumstances beyond their control from ever calling the shots” (Jones, 2011, p. 178) led to her better understanding what it was she needed from a therapist – for them to be politically savvy and acknowledge the social, not just the genetic and physical, roots of anxiety and depression. I would have liked to have heard more about how she reached this understanding and how useful this understanding may be to others seeking support.

Overall, the book provides a useful resource for those mental health professionals who provide counselling services to be challenged by the rawness of the story and hear firsthand about the potential effect of their interactions with clients. For Community Psychologists in particular the book provides powerful affirmation of the importance of the value of empowerment and reminds us to always view individuals within the context of broader societal factors.

Reference
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Manuscripts
The Australian Community Psychologist publishes work that is of relevance to community psychologists and others interested in the field. Research reports should be methodologically sound. Theoretical or area review papers are welcomed, as are letters, brief reports and papers by newer contributors to the discipline. Contributions towards the four sections of the journal are sought.

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Contributions are state of the art reviews of professional and applied areas and reviews and essays on matters of general relevance to community psychologists. They may be up to 10,000 words, including all tables, figures and references; however, authors should be as concise as possible.

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This section is for the publication of empirical research reports relevant to community psychology theory, method, and practice. They may be up to 10,000 words, including all tables, figures and references; however, authors should be as concise as possible.

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The acceptable word processing program format is Microsoft Word. All manuscripts are submitted electronically to the Editor: Lauren Breen Email: lauren.breen@curtin.edu.au

If authors experience any difficulty with electronic submission, hard copy materials together with a disc copy should be sent to: Dr Lauren Breen School of Psychology and Speech Pathology Curtin University GPO Box U1987 PERTH WA 6845 Australia

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The complete manuscript including title page, abstract, text, tables, figures, acknowledgements, and references.
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