
© Copyright 2008 Bronwyn L. Fredericks
So, you want to do Oral History with Aboriginal Australians …

Bronwyn Fredericks

Abstract
This paper takes as its starting point the enormous and long-standing interest in understanding historical studies with Aboriginal people. Whether motivated by curiosity, events or issues, the author argues that the outcome of this research has been that Aboriginal people are amongst the most researched people on the earth. This can become problematic when research into Aboriginal communities does not work for the benefit of Aboriginal people themselves; and so, in the words of Vine Deloria Jnr. (1991), there is a need ‘to eliminate useless and repetitive research and focus on community needs; it is both unethical and wasteful to plow familiar ground continually’. Systematic ethical guidelines to undertaking research with Aboriginal people, developed over the past decades, are outlined in this paper, which then sketches an exemplary oral history project being undertaken in Queensland. Designed along ethical guidelines, the project demonstrates how historical research can be conceived and framed in ways which promote active benefits for Indigenous communities, and in this case, changing the health of Aboriginal and Torres Strait Islander peoples.

Early Research in Australia
There has been a long history of research conducted on Aboriginal and Torres Strait Islander peoples; indeed it has been said that Australia’s Indigenous peoples are the most researched people in the world. Historically, the vast majority of this research has been carried out by non-Indigenous peoples. In the past the experience of being ‘researched’ has been ‘exploitative with little of value being accrued by Aboriginal people or their communities’. Some of this research has been invasive in terms of Aboriginal people’s lives and communities. Stephanie Gilbert, an Aboriginal researcher and social worker, argues that:

> In the name of western science Aboriginal and Torres Strait Islander people have been researched, poked and prodded. Our anatomy, teeth, skulls have been stolen and studied. The same western science that believed we would die out given the superiority of civilised cultures such as Anglo-Saxons. The study of Indigenous people didn’t stop at our anatomy. Our cultures, manners, beliefs and practices have been mocked, denied and forbidden.

Over the years, some research has been undertaken without permission and without regard to Aboriginal peoples’ rights to participate or not. Some communities have not been aware that non-Indigenous people have undertaken research while within their communities. Cruse puts it simply when she states, ‘[m]any researchers have ridden roughshod over our communities, cultures, practices and beliefs, and we are now in a position to prevent this from continuing’. For many years, Aboriginal peoples have raised questions about research which has been, and which continues to be, undertaken in their communities. Aboriginal peoples have been weighed, have given blood, urine, faeces and hair samples, have given their stories, explained their existence, been interviewed and recorded using video tape and audio tape, been questioned, observed, followed, interpreted, analysed and written about for years. From the data, reports were generated, books generated and theses generated. Roberts cites Aboriginal activist Kevin Gilbert in his summation of that research:

> Aboriginals have had the pants studied off them. There are unending, limitless sums of money wasted on bloody research and what the hell has it all led to apart from a recurring harvest of MAs, PhDs etc? Even the odd bit of action that does come out of it has to masquerade under the cloak of respectability of ‘research’.
Outside Australia too, Indigenous peoples have made similar statements about research within their own communities and in other Indigenous communities. Linda Tuhiwai Smith states that "[t]he word itself, "research", is probably one of the dirtiest words in the indigenous world’s vocabulary", continuing that:

[It] appalls us that the West can desire, extract and claim ownership of our ways of knowing, our imagery, the things we create and produce, and then simultaneously reject the people who created and developed those ideas and seek to deny further opportunities to be creators of their own culture and own nations.5

Smith further draws out the historical impacts of imperialism on Indigenous peoples being denied their claim to their own existence, right to self-determination and their own cultural knowledges. Henderson (2000), Kenny (2000), Monture-Angus (1995) and Wheaton (2000) all provide similar examples of exploitation of Indigenous peoples from the territories now covered by the countries known as United States of America and Canada.6

Aboriginal People Call for Change
In the 1970s, Australian Aboriginal peoples began to voice more strongly the concern as to what was happening and what still continues to happen in terms of research practices. In more recent times, criticism has focused on some of the inappropriate and offensive methodological instruments that have been used, and on reports presented in ways that were not useable by the communities they were written about. It is worth remembering, states Rigney, that,

the production, re-production and dissemination of academically generated ideas via traditional research has marginalised and misrepresented Indigenous ways of understanding and knowing by extracting and appropriating Indigenous cultural, spiritual, oral and intellectual testimony.7

In particular, higher education institutions in Australia have become sites where others have assumed ownership of Indigenous knowledges, ways of being and doing; this has also occurred in museums, libraries and art galleries.

Emergence of guidelines for research
A great deal changed between 1991 and 2003, with a greater number of Aboriginal and Torres Strait Islander people becoming involved in research, including oral history projects. At the same time, guidelines for conducting ethical research were produced. In the late 1980s and the early 1990s, publications began to emerge that included statements on issues regarding research with and within Aboriginal communities. Several publications on ethics in Aboriginal and Torres Strait Islander research followed. Guidelines on Ethical Matters in Aboriginal and Torres Strait Islander Research was approved in draft form by the 111th Session of the National Health and Medical Research Council (NHMRC) in Brisbane in 1991, later to be utilised in conjunction with the National Statement on Ethical Conduct in Research Involving Humans.8 The Aboriginal and Torres Strait Islander Commission (ATSIC) issued its own guidelines on Aboriginal and Torres Strait Islander research in 1994; however these were aimed primarily at non-Indigenous researchers and consultants rather than at Aboriginal and/or Torres Strait Islander peoples undertaking their own research.9 This was now increasingly taking place in formal degree programs within higher education institutions, and by Aboriginal and/or Torres Strait Islander peoples undertaking research as part of a consultancy project or a family oral history project. Additionally, some Aboriginal and Torres Strait Islander tertiary education centres, research collectives and research units produced documents pertaining to preferred research styles and ethics statements. The Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS) produced its very comprehensive research guidelines in 2000;10 these would be useful to anyone undertaking oral history research with Aboriginal and Torres Strait Islander peoples. There are also specific documents for disciplinary research. For example, the NHMRC produced Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research in 2003,11 replacing the 1991 Interim Guidelines. Values and Ethics should be drawn upon to undertake an oral history project within the health field or health sciences.
An Aboriginal and Torres Strait Islander Oral History Project

I wish to draw attention to an oral history project being undertaken by the Queensland Aboriginal and Islander Health Council (QAIHC), the History of Community Controlled Health in Queensland. QAIHC leads and governs the Centre for Clinical Research Excellence (CCRE), which has been funded by the National Health and Medical Research Council (NHMRC). Established in 1990, QAIHC is the state peak body for Aboriginal and Torres Strait Islander Community Controlled Health Services (AICCHS) in Queensland and is the state affiliate of the National Aboriginal Community Controlled Health Organisation (NACCHO). By 2005, the number of AICCHS in Queensland had grown to 23. QAIHC also has significant partnership arrangements with other health-related community-controlled sectors in Queensland through child protection and alcohol and other drug organisations.

Aboriginal and Torres Strait Islander Community Health Services are one outcome of contemporary Aboriginal and Torres Strait Islander political action. They demonstrate both the will and the ability of Aboriginal and Torres Strait Islander people to have control over Aboriginal and Torres Strait Islander health care. Additionally they embody models of community governance, primary health care, holistic approaches to health and well-being and a client-oriented/client-focused care that some non-Indigenous health services also aspire to. The process of individual health service establishment, development and on-going service delivery in Queensland has not been documented by Aboriginal and Torres Strait Islander peoples. Nor is the movement substantially documented elsewhere in Australia. The absence of documentation has been discussed at a range of levels (QAIHC and at NACCHO meetings) and is recognised as a need, and this is the backdrop to this research project.

The aims of this project include:

- documenting models of Indigenous governance;
- establishing and documenting differences between Indigenous and non-Indigenous governance and management, and what constitutes success or failure of a health service;
- measuring the historical impacts that community-controlled health services have had on community leadership, engagement, relationships and the demographics of particular geographic regions;
- documenting the assistance provided to the development of other health services and organisations and Indigenous health advocacy and activism in Queensland;
- recording the unwritten and undocumented knowledge of a period of time accessible to current oral history accounts.

This project will both document and develop a model for the background, development, structure, governance, operational framework and community benefits of Aboriginal and Torres Strait Islander Community Health Services in Queensland from 1973 to 2006. This will be undertaken by utilising contemporary community records; oral history; archival material at an individual, service provider, community organisation, government level; and using media materials. An outcome of the project will be a model enabling organisations and communities to plan, develop, implement and make sustainable similar services within and external to Queensland. It will have a training and governance framework based on the wide knowledge base and experiences of already established, early operational and emerging Aboriginal and Torres Strait Islander health services in Queensland. This will include identification and articulation of the barriers encountered and strengths developed by Aboriginal and Torres Strait Islander people in their experience of bringing these services into being.

The project represents a new approach to recording Indigenous history and the work of Aboriginal and Torres Strait Islander health services in Queensland. Indigenous participation in all levels and steps of the project is a major step in establishing Indigenous history as both positive and active in changing the
health of Aboriginal and Torres Strait Islander peoples and communities. The researchers for this project are Dr Bronwyn Fredericks (Monash University, Queensland University of Technology & QAIHC), Professor Wendy Brady (Charles Darwin University) and Mary Martin (QAIHC). The ethics for this project will be submitted to Monash University during 2008. The research principles, ethics and processes will be based on NHMRC’s guidelines *Values and Ethics*, the AIATSIS *Guidelines for Ethical Research*, and the research principles specifically developed by QAIHC with input from health services. The data collection tools developed in this research project will also be offered to other state /territory health representative organisations to utilise with their health services.

Nakata explains that one issue for Indigenous scholars is how to speak back to the knowledges that have been formed around what is perceived as Indigenous positionings within Western worldviews. Nakata essentially asks, ‘how do we speak to what is known about us, written about us and not owned by us?’ This research project will allow Aboriginal and Torres Strait Islander people to challenge the limited information that has been written about them in regards to the Aboriginal and Torres Strait Islander community-controlled health service sector. It will allow Aboriginal and Torres Strait Islander peoples to construct and affirm Indigenous knowledges in health, health service delivery, governance within the health service sphere and Aboriginal and Torres Strait Islander activism. The project seeks to better understand the Aboriginal and Torres Strait Islander position and to improve it.

---

8 National Health and Medical Research Council (NHMRC), *Interim Guidelines on Ethical Matters in Aboriginal and Torres Strait Islander Health Research*, NHMRC, Canberra, 1991; National Health and Medical Research Council (NHMRC), *National Statement on Ethical Conduct in Research Involving Humans*, Australian Health Ethics Committee, NHMRC, Canberra, 1999.
9 Aboriginal and Torres Strait Islander Commission (ATSIC), Draft Discussion Paper - Research Ethics For Undertaking Economic Development Research relating to, involving and about Aboriginal and Torres Strait Islander peoples, ATSIC, Canberra, 1994.
11 National Health and Medical Research Council (NHMRC), *Values and Ethics in Aboriginal and Torres Strait Islander Health Research*, NHMRC, Canberra, 2003.