Dear Committee,

Much of my research in the past 22 years has been on youth suicide, especially in Aboriginal communities here, in New Zealand and in Canada. In 2001 and 2005 respectively, two editions of my book *Aboriginal Suicide is Different: A Portrait of Life and Self-Destruction* were published. Several journal and newspaper articles have been published and in 2010 I made a submission to the Senate's Community Affairs Reference Committee (published as *The Hidden Toll: Suicide in Australia*).

I have worked in the Territory since 1961 and know much of its geography, history, sociology, administrative and political life. Given the short time available for submission, I address one strategy here — the matter of sport and its relationship to suicide. My long paper on this — "Aborigines, sport and suicide", in Chris Hallinan & Barry Judd, eds, special edition of *Sport and Society: Indigenous People, Race Relations and Australian Sport*, Routledge, 2011 — should be available by the end of the year. Attached is a shorter version of that essay, submitted formally as a submission.

It is clear enough that the medical world and its associated professions have no interest in social strategies to deal with suicide or its prevention. I cannot see any sign that ARC and NHMRC grants will be applied for to examine the sport–suicide connection. I am aware that staff at the Centre for Remote Health in Alice Springs (in particular Dr Melissa Lindeman, Head of Research) are keen to seek funding to undertake research of this kind. However, in the absence of funding from health research bodies, this means that sports organisations and community affairs bodies will have to initiate some action research and learn from the outcomes. The Australian Sports Commission, through Carl Currey, has helped introduce sports projects in five Territory communities. Mr Currey has said publicly that there is no impediment to measuring the rates of suicide at these centres in order to document what I have established in other communities, namely, that sport, *when it is available as a regular activity*, acts as a deflector, an alleviator or even a preventer of young suicide. (There is strong evidence that newly introduced sports programs have considerably reduced the high rates of suicide in the Inuit communities of Nunavut.)

I submit the attached short paper, as part of my submission, for your consideration: it sets out, however briefly, the major issues. If you have any questions, please use the contact details below. I would be willing to participate in a teleconference as your final report develops.

Best wishes,

Colin Tatz
The Setting

The biomedical domination of current Western society insists that all physical and mental illness lies within the individual and the individual alone must be treated by pharmaceutical, psycho-therapeutic or surgical means. Under the domain of priests, suicide was once considered as badness; later, under early psychiatry, it was sadness; now, in the hands of the biomedicalists, it is madness or, more politely, "mental health issues". In two decades we have had a 35-fold increase in "diagnosed" mental illness. Anglo-world children are now said to have more mental than physical disabilities. Broadly, we are swamped by anxiety disorders, mood disorders, impulse-control disorders and substance-use disorders. "Happiness" is considered both a norm and a birthright: not happy is somehow an abnormality.

At a far remove is the collective indigenous perspective. In the words of Chief Jean-Charles Piétacho to the Canadian Royal Commission on Aboriginal Peoples in 1996:

Collective despair, or collective lack of hope, will lead us to collective suicide. This type of suicide can take many forms, foreshadowed by
many possible signs: identity crisis, loss of pride, every kind of
dependence, denial of our customs and traditions, degradation of our
environment, weakening of our language, abandonment of our
struggle for our Aboriginal rights, our autonomy and our culture,
uncaring acceptance of violence, passive acknowledgement of lack of
work and responsibilities, lack of respect for elders, envy of those who
try to keep their heads up and who might succeed, and so on.

These are most appropriate words in a context where Australian Aboriginal
youth commit suicide at a rate close to 40 per cent greater than the national
average. Enduring political, legal, social and environmental contexts underlie and
explain the current crises in Aboriginal life, a collective despair in many, but not all,
communities. Such despair isn't "chemical imbalance" in the Aboriginal brain, or
misfiring neurotransmitters; it isn't genetic, and it doesn't respond to an "evidence-
based" need for psychoactive drugs or psycho-talk therapy.

The Aboriginal policy slogans come and go. Yet each generation of policy-
makers and administrators believes it can discover fire, or invent the wheel, each
convinced it can start afresh; each, in turn, admits cynicism or defeat — and awaits
the next cohort who will finally "close the gap" on vital statistics, health, nutrition,
education, housing, employment, and training. But as life expectancy and infant
mortality appear to improve, so deaths from non-natural causes worsen. As more
babies survive their first years, so more young adults develop diabetes, heart,
respiratory and renal disease. As more education, training and intervention
programs are established, so more and more youth are imprisoned. And as more and
more money is spent on suicide prevention, so more young people take their own lives.

**Significant inquiries**

Four Aboriginal enquiries last century had positive outcomes: voting rights, land rights, the Stolen Generations report and the royal commission into Aboriginal deaths in custody in 1987. There were indeed rumours and accusations about "assisted deaths". Public agitation about conspiracies, corruption, murders and cover-ups led to a massive enquiry into 99 custodial Aboriginal deaths between 1 January 1980 and 31 May 1989.

No common thread of abuse, neglect or racism was found but "their Aboriginality played a significant and in most cases a dominant role in their being in custody and dying in custody". Importantly, that Commission helped bring the wider Aboriginal suicide phenomenon to light.

In 1989 the Criminology Research Council (CRC) funded my study into whether or not sports facilities and competition reduced the growing rates of delinquency. More anthropological than sociological in approach, It was conducted over five years, with visits to 80 communities country-wide, and 520 interviews. This 1994 report, *Aborigines: Sport, Violence and Survival*, was the impetus for my later analysis of Aboriginal youth suicide in New South Wales, the Australian Capital Territory and New Zealand. My study coincided with the work of the royal commission and its investigators in the field. On visits, especially in South Australia, I began to hear far too many "stories" about youth suicide and attempted suicide (or
parasuicide). It did not take long to conclude that there was far more self-destruction and self-harm outside than inside custody, and that the royal commission was looking very narrowly at the visible tips of ominous icebergs.

**Marx and Turnbull**

Suicide was a surprise. Perhaps it shouldn’t have been. In the 1970s I read the work of anthropologist Emanuel Marx on violent behaviour among North African youth in Israeli immigrant towns. There is a social context to this violent behaviour: it occurs more frequently among a dislocated or transported or "socially engineered" people from a different culture and geography. They are what the unconventional anthropologist Colin Turnbull called "disordered societies". Marx wrote of "appealing violence", a cry for help used by someone at the end of his/her tether, a person who feels unable to achieve a single social aim without the assistance of others. The person who cannot persuade his/her family to help, or to share his/her responsibilities, repeatedly attempts suicide as a desperate means of gaining family support. In sum, this kind of appealing violence leads to harm to self or to others. At Raukkun in South Australia I witnessed a classic case: a young Aboriginal man had attacked his brother with an axe early in 1989. Admonished later by a local policeman’s wife, he replied: "Sorry, I’ll never do it again: I’ll only hurt myself."

The much-vaunted human values of affection, social grouping for work or for play, systems of law and religion, respect for the old, care of the young, are not inherent in humanity. Colin Turnbull argues that such values are "a luxury of ordered societies". He was writing of the Ik, the Mountain People of Kenya and Uganda. Originally hunter-gatherers, they were forced to become farmers; forbidden hunting,
faced with poor land and drought, they have struggled for bare survival. While Turnbull didn't like the Ik people, his portrait of relocated and dislocated peoples is generally considered acute.

Turnbull's breakdown of values and of systems, and Marx's harm to self and to others, was what I had been seeing and reporting across Australia and what was so elegantly yet painfully expressed by Chief Piétacho in 1996.

**Suicide in the literature**

In my *Aboriginal Suicide is Different* book I noted that prior to the 1960s there were no references to suicide in the records of missionaries, government officials, in anthropological and medical journals, fiction, memoirs, in Aboriginal languages or artistic depictions. In the late 1960s and 70s, diverse studies in the Territory by Malcolm Kidson, Ivor Jones, John Cawte, Harry Eastwell saw "nothing alarming" about Aboriginal suicide rates. In my own field research in the Territory, I had occasion to look long and hard at Aboriginal health, and found only two references to suicide. Richard Kimber told the royal commission that there was no evidence of suicide in traditional Centralian communities; (the late) anthropologist Lester Hiatt had never heard of a case of suicide in the Liverpool Region of the Northern Territory in his 40 years of field work there — until the first report in 1998. Ernest Hunter’s study of 25 suicides in the Kimberley showed that in the decade 1959 to 1969, there was one suicide; between 1969 and 1979, three; between 1979 and 1989, nineteen. Hunter stated that "some three decades ago the suicide of an Indigenous Australian was a rare occurrence", but this is clearly no longer the case.
The NSW Police confirmed that in the period 1971 to 1981 there had been one Aboriginal death in custody and five parasuicides; for Queensland, nine suicides and eight parasuicides; For the Northern Territory, five completed suicides in that decade. So, there were no undue alarm bells before 1980.

Suicide was something new in Aboriginal life, but it escalated to a rate that was amongst the highest in the world by 2000. By 2002, Aboriginal male suicide rates in the Territory reached a staggering 66.3 per 100,000, as compared to the national rate of 10.3. The Aboriginal and non-Aboriginal rates are doubtless much higher: we have a serious coroner problem of reporting suicide, resulting from both the lack of training of most coroners in rural areas and from a British court precedent that doesn't allow coroners to presume suicide — even in the face of the very obvious.

Something happened, or something "snapped" as the century was ending. Elsewhere I have speculated on the causes of what looks like patterned, institutionalised and even ritualised self-death. The rates for those in the 15 to 24-year-old age cohort are astounding, with some 48 deaths per 100,000 Aboriginal people in New South Wales alone, compared to a national rate of 20 per 100,000 for that age cohort. Hunter and Harvey report a Queensland mainstream young male rate of 14.5 per 100,000 and an Aboriginal rate of 23.6 for the same cohort, a figure they believe is much higher than is reported. More disturbing is the NSW rate (some 15 per 100,000) for those under 15, a statistic not usually reported, let alone discussed, in the literature. Some people make a living on these decimal points, but the arithmetic hardly matters: simply, people are killing themselves at younger and
younger ages.

**Sport and delinquency**

Sport has had a marked impact on "junior" crimes against property and on assaults. Port Lincoln in South Australia is striking: in winter, during the football season, Aboriginal juvenile offending is virtually nil. Off season, it soars. Neither the police nor the Aboriginal community doubt the relationship. Broome and Geraldton in Western Australia, Yuendumu, Barunga and Nguiu in the Northern Territory, Cherbourg and Woorabinda in Queensland, and Condobolin in New South Wales, among many others, bear out both the assertion and the relationship.

The 1994 report concluded that:

- sport plays a more significant role in the lives of Aborigines than in any other sector of Australian society;
- sport provides a centrality, a sense of loyalty and cohesion that has replaced some of the "lost" structures in communities that so recently operated as Christian missions and government settlements;
- sport has become a vital force in the very survival of several communities now in danger of social disintegration;
- sport has helped reduced the considerable internalised violence prevalent in some disordered communities;
- sport is a cheap enough option in the way it assists in reducing the second-highest cause of Aboriginal deaths, namely, from external and non-natural causes;
• sport has been effective in keeping youth out of serious (and mischievous) trouble during football and basketball seasons;

• sport has given several communities some autonomy and sovereignty when they organise sport and culture carnivals — such as at Yuendumu and Barunga in the Northern Territory;

• sport takes place despite the absence of facilities, equipment, money for travel, discrimination against teams and/or access to regular competition;

• sport is essential to counter the morale and moral despair of many Aborigines.

**Sport and adolescent suicide**

These conclusions apply to sport and suicide. Several studies call sport one of the protective factors against suicide, but as yet there has been remarkably little attention among suicide or sports scholars, particularly in Australia — curious in one of the world’s foremost sports-orientred societies. A recent *Australasian Psychiatry* journal contained 20 original articles on aspects of Aboriginal emotional and physical wellbeing. Apart from a brief mention of Australian football by McCoy, not one other author has mentioned, let alone considered, sport as part of that major agenda. Nor does sport figure anywhere in the literature on non-Aboriginal suicide.

A 2005 study of a representative sample of 16,000 United States public and private high school students found a significant reduction in the odds of participants considering suicide as well as reduced odds of planning a suicide. Being enmeshed in
a social network of team mates, coaches, health professionals, community and family, the athletic participants experienced less anomie and a much greater sense of social integration.

A study of 1,102 male military recruits found that "students actively involved in sports exhibited less hopelessness". An even more compelling study looked at sports participation as a protective factor against depression and suicidal ideation. Sport typically boosts self-esteem, improves body image, increases social support and has an impact on substance abuse. As sports participation increases, the odds of suffering from depression decreases (by 25 percent), while the odds of having suicidal thoughts decreases (by 12 percent). Another American study of 4,728 college students found that non-sporting men were 2.5 times more likely to report suicidal behaviour and non-sporting women 1.67 times more likely to do so. Another significant study showed "dips" in suicide just before and during two important ceremonial sports events — the last days of the World Series baseball and the Super Bowl Sunday football event. For a decade, the suicide rates for the population were lower than normal on these specific days and higher thereafter. Most of these studies tested the Durkheimian propositions about the relationship between suicide and socially integrative activities — in this case, sport. It wouldn't be difficult to replicate that study at the times of the Barunga festival, the Yuendumu Games and the Nguiu football final in the Northern Territory and of the Aboriginal Rugby League Knockout weekend in New South Wales. The Australian Sports Commission and FaHCSIA are currently initiating sports projects in five major Territory communities and it would be a great opportunity to measure suicide and attempted suicide rates
while these projects are up and running.

David Denborough in Adelaide has been working on narrative therapy with remote communities. Sport, he contends, is a realm within which and through which life can develop richer meaning. It not only provides lasting memories but enables "young people who have experienced grave difficulties to speak differently about their lives". These strategies involves getting youth to ask what they like about a game, about creating a team of life, celebrating goals, tackling problems, avoiding obstacles, and assisting others, whether in sport or beyond. It makes eminent sense to use metaphors and experiences that are known, are not threatening, give pleasure (albeit transiently), which do not involve what for many are the alien worlds of white coats, consulting rooms and heavy-duty pharmaceuticals. Plato told us some 2,391 years ago that sport (gymnastics) was not just good for physical strength but for "psychic harmony", and a way of avoiding physicians.

Brian McCoy has analysed the meaning of kanyirinpa among Aboriginal desert society people. It is a process of holding, a manner of looking after and nurturing young people. When boys mature, there is a shift from their care by women to older men who induct them into social meanings and behaviours. Despite enormous onslaughts on traditional culture, kanyirinpa has persisted in holding generations together, even of regenerating a society. McCoy has shown how young men have explored experiences that offer the possibility of kanyirinpa, including petrol-sniffing, playing Australian football, and location in prison. Without kanyirinpa "men grow up lost".

Michael Kral reports a similar approach with a mix of scrabble, chess and ice
hockey in Nunavut, Arctic Canada. Michael tells me that a school in Nunavut
established a racquetball team: "The students loved it, the team did well against
other community teams, and the suicides in their community stopped." Almost all
the literature on strategies to combat youth suicide suggests or even insists that
they must be culturally sensitive or appropriate. These initiatives bode well. But
many modern, organised competitive sports are integral to Aboriginal life, whatever
their domains. They have seen these sporting activities live, or on television or film,
and they have played one or another of its forms, even on the most bizarre of
"courts" and "ovals". They have long had teams and heroes they barrack for, identify
with or have fantasies about. Modern western sport is culturally appropriate;
certainly, as we research and read the history of Aboriginal involvement in sport
since the mid-nineteenth century, it has not been yet another colonial imposition, an
institution they have had to "endure" as some form of oppressive intrusion. Sport is
there: it is not a strategy we have to invent, and then sell. What is lacking is access to
it.

**A matter of access**

Space is a factor in rural suicide, a domain where Aboriginal suicide appears to be
occurring at a greater rate than in urban contexts. Rural and remote community
space is precisely where every facility for a reasonably normal life is lacking, with no
tolerable sports facilities, let alone regular competition. Kalumburu, Lombadina and
Djarindjin in Western Australia, Wujal Wujal and Mornington Island in Queensland,
Oenpelli, Kintore and Mt Liebig in the Northern Territory, Gingie Reserve in New
South Wales and Yalata in South Australia have either nothing or salt pans to play
on.

Aborigines, Torres Strait and South Sea Islanders rarely get onto squash courts or championship golf courses or into ski lodges. They don't hang-glide, play polo, sail yachts, ride bikes for Yamaha (apart from the amazing Chad Reed, now in the United States) or drive cars for Ferrari. On remote or rural reserves, where many Aborigines have lived, there was and is no grass, no facilities, coaches, nutritionists, physiotherapists, personal trainers, motivators, let alone floodlights or change-rooms. Scholarship money is rare and even then transfer to urban sports institutes down south pose a problem for most Aboriginal sports apprentices: homesickness.

Sporting success has not ended their harsh experiences back home. Much remains unchanged: the short life-spans, the gross ill-health, lack of housing and sanitation, massive unemployment, and so on. But sport, however minimal and sparse, provides a sense of belonging and a feeling of coherence. It has ritual, a set of formal and informal rules, and it provides a real sense of what sociologist Ferdinand Tönnies called *gemeinschaft*, a sense of belonging to an association that puts the group ahead of self and self-interest. Sport is more important to Aborigines than it is to any other segment of Australian society. It gives youth a sense of belonging, something to stand for. It provides what the existential psychotherapist and Nazi camp survivor Viktor Frankl called meaning and purpose, without which life is not worth living. There is enough evidence to show that even if sport does not actually prevent suicide, it clearly defers that action, often allowing a time-out period to reconsider life's chances. It also offers a chance for a period of wellness.

In one sense, sport is ephemeral, here today, gone after the game. In another
sense, it is an institutionalised behaviour, providing another game a week later and practice sessions in between. The off-season is a problem. Sport for non-players could be another difficulty, but only if one views sport narrowly as actual playing. Brian McCoy suggests that sport is not always inclusive and that those who don't or can't play are outsiders. Often true, but in reality all manner of activities are available for the non-athlete: working on the team newsletter or website, keeping records and scores, making rosettes and flags, engaging in publicity, becoming a touch judge or referee, organising competitions and fund-raising — or, at the very least, attending matches as a fan. The sports organisers — whether trainers, coaches, managers — can as readily be, in McCoy's terms, the "holders" of both players and their non-playing but involved supporters. In his book, *Suicide — The Ultimate Rejection?*, English academic Colin Pritchard posits that suicide is the culmination of unwantedness. The very essences of active involvement in sport is being wanted in some capacity; it is almost always embracing rather than rejectionist. Even the bitterest of enemy teams see themselves as belonging and as bonded to a code and a culture.

Sport is a powerful weapon in the fight against rampant diabetes; and many of today's illnesses, especially of the cardiac, renal and respiratory systems, are better controlled by physical regimens, including sporting competition, especially where they are associated nutritional and dietary expectations. *Sport is survival*: it provides purpose in life, an activity of real meaning, a sense of coherence, a reason for being, a sense of power and empowerment, a space of enjoyment, of being and holding together, and a feeling of autonomy, however brief. Sport may or may not
prevent suicide, but it can alleviate and defer suicidal ideas and actions, and even deflect or counter them. In the words of one Aboriginal Tiwi Islander, "for the Tiwi people football means hope, it means pride and most of all it means life."

Nobody knows why people commit suicide. As psychoanalyst James Hillman argues, we don't [and can’t] understand the soul of the suicide and we cannot really get into the being of one who wants cessation of life. We, as a society, and sociology as a discipline, see suicide as a negative, as a wasteful exit from life, not as an entrance to death, a voluntary death in the words of Jean Améry, a Holocaust survivor who suicided and who wrote that "people kill themselves out of a sense of dignity, preferring annihilation to the continuation of an existence lived in ignominy, desperate pain (physical or mental), or utter helplessness". For us, the young suicide is particularly "unacceptable": he or she appears to engage in the reverse of Pritchard's ultimate rejection — it is not we who are rejecting the suicide but the suicide who is rejecting us — our love, family, faith, imagination, creativity, civilisation.

The echo of Durkheim

The artificial enterprise we call sport provides what Emile Durkheim deemed essential where there is a lack of true social coherence, namely, a truly collective activity, something that can fill the empty place within a life. For many young Aborigines, the emptiness is all too evident. They live in places of despond, with little or no social distractions apart from the video and game parlours.

Sport has a unique capacity to lay down rules and places of engagement, to
codify its conduct and to spell out the sanctions which referees and umpires can administer. It can and does establish a body of lore, anecdote, mythology. It has the ability to become a cultural icon and a social institution; it can attract attention, gain adherents among players and supporters and elicit loyalty across racial, caste and class barriers. It becomes what Durkeim, in 1897, saw as essential — an occupational group, a domain of meaningful social affiliation. It can help reconstruct, or at least imitate, a sense of kinship and reciprocity that once was. Sport fills lives that are meaningful and those that are empty. Perhaps more than anything, *sport is a present and essentially future-oriented activity*. It is these qualities that give it such a significant role as a protector, perhaps even a prophylactic, against self-destruction.