

Yarning together: toward targeted, co-designed parenting programs for Aboriginal Australians

Simone Sherriff¹, Josephine D Gwynn² 

Participation of Aboriginal and Torres Strait Islander caregivers, including fathers, in culturally appropriate parenting programs is a fundamental right.¹ Macdonald and colleagues sought to explore their participation in trials of such programs in the scoping review published in this issue of the *MJA*.² The author team, including two Aboriginal researchers (including the first author), reviewed published randomised controlled trials (RCTs) of parenting programs in Australia that quantitatively measured at least one outcome related to the health, health behaviour, or wellbeing of children aged up to 18 years old. This is the first review of this topic, and the authors asked three questions: how well are Aboriginal parents represented in such trials; what is the involvement of Aboriginal fathers; and did investigators consider whether their program was culturally appropriate for Aboriginal Australians? In the 109 eligible RCTs published during 1990–2022, fewer than 1% of participating parents were Aboriginal, only two investigated interventions that were specifically for Aboriginal families, and the same two studies were the only ones that included consultation with Aboriginal participants during program development. No studies reported whether any participants were Aboriginal fathers, and none of the reports included the lack of consultation with Aboriginal families as a study limitation.²

These findings are concerning, given that most of the reviewed studies were published after 2009, by which time acknowledgement of the ongoing impact of colonisation on the health and wellbeing of Aboriginal peoples was increasing, as were the requirements for targeted, co-designed, community-led programs.^{3–5}

The review by Macdonald and colleagues was limited to RCTs, and other parenting programs may not have been examined in this manner. RCTs are generally not the preferred method of assessment for Aboriginal communities because direct benefits are not evident and they do not conform with cultural views on reciprocity and community-centred approaches.⁶ As Aboriginal people are less likely to engage with RCTs, alternative study designs, such as stepped wedge randomised trials, should be considered.⁷ The findings of this review could be augmented by another with the same aims but including studies other than RCTs to definitively determine whether any relevant research on parenting programs for Aboriginal parents and carers has been undertaken.

Parenting programs should adopt a co-design approach, the optimal method for designing and undertaking research in Aboriginal communities; if applied correctly, it is a deeply collaborative approach. Co-designed programs are more likely to respond to the needs of the communities involved and therefore more likely to engage Aboriginal families and to lead to positive outcomes.^{8–10} The benefits of ensuring Aboriginal governance and leadership in research and programs are clear.¹¹

An understanding of Aboriginal child rearing practices should be apparent in parenting programs of the type reviewed by Macdonald and colleagues. Their review would have been enhanced by including a discussion on how these practices, which are communal and often include the extended family, differ from those of other Australians, and the probable contribution of the lack of recognition of these practices to low levels of program participation by Aboriginal people.

The review by Macdonald and colleagues provides strong support for undertaking research that focuses on developing and evaluating Aboriginal parenting programs. That there are so few RCTs of programs including Aboriginal people or describing specific interventions for Aboriginal families is worrying, as is the general lack of consultation with Aboriginal people during program development. Researchers should be cognisant of the need to adopt a co-design approach, embed community leadership, take Aboriginal child rearing practices into account when designing programs, and consider alternative study designs to RCTs. Aboriginal ways of knowing, being, and doing must be privileged across all aspects of research in their communities.

Positionality statement: Our reflections for this editorial are informed by our world views.¹² Simone Sherriff is a Wotjobaluk woman living on unceded Wiradjuri lands, and a mother of two, a research fellow at the University of Sydney, and has worked with the Aboriginal community controlled health sector for thirteen years. Josephine Gwynn is a non-Aboriginal woman of Irish settler origin. I live on the unceded lands of the Awabakal people, am a senior lecturer at the University of Sydney, and have had the privilege of working with Aboriginal communities for more than 30 years.

Acknowledgements: We thank Brittany Wilson, a Wiradjuri woman, and Alicea Bong, both Aurora Foundation interns, for their contributions to this editorial. We also acknowledge the traditional custodians of the lands and waters across Australia and pay our respects to all Aboriginal Elders past and present. Josephine Gwynn also acknowledges her inspirational father, who was an editor and deputy editor at the *MJA* during 1958–1978.

Competing interests: No relevant disclosures.

Provenance: Commissioned; not externally peer reviewed. ■

© 2024 AMPCo Pty Ltd.

- 1 Prehn J, Guerzoni MA, Peacock H. "Learning her culture and growing up strong": Aboriginal and/or Torres Strait Islander fathers, children and the sharing of culture. *J Sociol (Melb)* 2021; 57: 595–611.
- 2 Macdonald J, Young M, Morgan P, et al. The participation of Aboriginal and Torres Strait Islander parents in Australian trials of parenting programs for improving children's health: a scoping review. *Med J Aust* 2024; 220: 331–335.
- 3 Aboriginal and Torres Strait Islander Social Justice Commissioner. Social Justice Report 2005 (Report no. 3/2005). 2006. <https://apo.org.au/sites/default/files/resource-files/2006-02/apo-nid4450.pdf> (viewed Jan 2024).
- 4 Gardiner-Garden J. Closing the gap. *Parliamentary Library Briefing Book*, 2007. https://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/BriefingBook44p/ClosingGap (viewed Jan 2024).

- 5 Apology to Australia's Indigenous peoples. Parliament of Australia, 2008. https://www.aph.gov.au/Visit_Parliament/Art/Icons/Apology_to_Australia_Indigenous_Peoples#:~:text=On%2013th%20of%20February,continuing%20cultures%20in%20human%20history (viewed Jan 2024).
- 6 Luke J, Verbunt E, Bamblett M, et al. Is all that glitters gold? Assessing the quality and ethics of "gold standard" randomised controlled trials conducted in Aboriginal and Torres Strait Islander settings. *Lowitja Journal* 2023; 1: 100007.
- 7 Coskinas X, Simes RJ, Martin AJ. Changes to design and analysis elements of research plans during randomised controlled trials in Australia. *Med J Aust* 2022; 217: 526-531. <https://www.mja.com.au/journal/2022/217/10/changes-design-and-analysis-elements-research-plans-during-randomised>
- 8 Tamwoy N, Rosas S, Davis S, et al. Co-design with Aboriginal and Torres Strait Islander communities: a journey. *Aust J Rural Health* 2022; 30: 816-822.
- 9 Blomkamp E. The promise of co-design for public policy. *Australian Journal of Public Administration* 2018; 77: 729-743.
- 10 Sherriff SL, Baur L, Lambert M, et al. Aboriginal childhood overweight and obesity: the need for Aboriginal designed and led initiatives. *Public Health Res Pract* 2019; 29: 2941925.
- 11 Gilroy J, Bulkeley K, Talbot F, et al. Retention of the Aboriginal health, ageing, and disability workforce: protocol for a mixed methods study. *JMIR Res Protoc* 2021; 10: e25261.
- 12 Kennedy MB, Mohamed J. Upholding our rights in research: calling for urgent investment in Aboriginal and Torres Strait Islander health research ethics. *Med J Aust* 2023; 219: 9-11. <https://www.mja.com.au/journal/2023/219/1/upholding-our-rights-research-calling-urgent-investment-aboriginal-and-torres> ■