Chapter 6

Adelaideala nyinanytja - Living in Adelaide

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Abstract: In recent years a significant number of Anangu people from the northwest of South Australia have resided in Adelaide. This chapter outlines the earlier history of culture contact in the Anangu lands, identifies reasons for this movement, examines problems encountered as Anangu people seek to adjust to urban life and comments on organisations that seek to assist them in this adjustment. The chapter is based on a demographic survey and interviews conducted with Anangu people and service providers. Fay Gale's studies of an earlier Aboriginal movement to Adelaide provided a useful model and enabled comparisons and contrasts between the two movements. This preliminary study points to the need for further research into the issues confronting Anangu in Adelaide and the implementation of effective programs to assist them.

Introduction

When I first saw the 2009 AIATSIS conference theme, 'Perspectives on Urban Life', my immediate reaction was that because my primary experience has been in remote communities, I would not present a paper. However, soon afterwards, on 8 May 2009, having completed some banking business at Satisfac Credit Union in South Terrace, Adelaide, I looked across the road and saw a group of Aboriginal people sitting on the lawns of the south parklands. Wandering over in their direction I received calls and hand signals inviting me to join them. I discovered that the people in the group were sons and daughters of Pitjantjatjara people whom I had known well when I lived in the Pitjantjatjara/Yankunytjatjara lands from 1958 to 1980. Two were a son and daughter of a man who had worked closely with me in the office and store at Ernabella Mission and who had been my principal language teacher and a leading singer in the Ernabella Choir, which I conducted. One was a son of a man who had been head stockman of the cattle work at Fregon, established in 1961 as an outstation of Ernabella. Another

was a daughter of a couple who moved from Ernabella to Fregon and played leading roles in the development of Fregon. The parents of the others had been involved in the sheep, craft and other industries at Ernabella. I had known most of those sitting in the park when they were children at Ernabella and Fregon.

Before this chance meeting I felt that there was need for research to provide more detailed information on the movement of Anangu to Adelaide. I had been aware of the presence of an increasingly significant Pitjantjatjara/Yankunytjatjara population in Adelaide through my role as a Pitjantjatjara interpreter in the health and legal sectors, as people occasionally rang or called at our house seeking assistance and as we met Anangu in the streets, in art centres or at other events. On 2 March 2009 I attended a meeting sponsored by Uniting Care Wesley Port Adelaide at which representatives from several departments and organisations met to discuss ways of assisting remote area Aborigines living in Adelaide. Although many such meetings had been held and several reports written, there was an obvious need for demographic data and clarification of the issues facing these people. The AIATSIS conference theme motivated me to embark on such research. My aim in this chapter is to provide statistics, outline reasons the people give for living in Adelaide and the problems and issues they face in adjusting to urban living, and to identify and comment on some of the programs that seek to assist them in this adjustment. This chapter is a preliminary report on a work in progress.

Anangu people and their recent history

The people who are often referred to now as Anangu belong to the Pitjantjatjara, Yankunytjatjara and associated dialect groups that traditionally occupied the ranges and desert regions of the far north-west of South Australia and adjacent areas of the Northern Territory and Western Australia. They were among the last Aboriginal groups to have their social and cultural life disrupted by the encroaching colonial settlement, being safeguarded for several decades by 'the security of distance'.2 Their territories lay approximately 1500 kilometres from Adelaide. The first European intrusions into their lands were the exploratory expeditions of Ernest Giles and William Gosse in 1873. They were followed in subsequent decades by sundry surveyors, adventurers and prospectors. The government of South Australia proclaimed an area of 56 721 square kilometres as the North-west Aboriginal Reserve in 1921 in an effort to provide some protection and limit entry into the region. However, external contact increased as pastoral expansion extended along the eastern boundaries of the reserve and the payment by the government of a bounty for dingo scalps encouraged people, known as 'doggers', to enter the reserve to trade supplies of food for scalps. Some Anangu sought access to the newly introduced foods such as flour, sugar and tea by working on pastoral stations. This move was exacerbated by drought conditions on the reserve in the 1920s and 1930s.

Government and church bodies in Adelaide received reports of the exploitation of Aboriginal workers, abuse of women, inadequate exchange given by doggers and the spread of introduced diseases. An Adelaide surgeon, Dr Charles Duguid, decided to investigate the situation. After visiting the region he advocated the establishment of a mission as a buffer settlement, where the Indigenous culture and language would be respected, to provide protection from exploitation. As a result of his vision, a pastoral lease on the eastern boundary of the reserve was purchased and Ernabella Mission was established by the Presbyterian Church in 1937. Anangu were trained as shepherds, shearers and well-sinkers, and in fencing construction in the sheep industry. Others were employed in gardens, building and maintenance. A policy of bilingual education was followed at the school, which opened in 1940, and a clinic was established in 1942. A craft industry to provide employment for women commenced in 1948. The sixtieth anniversary of this enterprise in 2008 provided an opportunity to celebrate it as the oldest continuing Aboriginal art centre in Australia. By the 1950s Ernabella had a population of approximately 400 people, and other Anangu working on nearby cattle stations used it is a base during holiday periods and for ceremonies.

I commenced working at Ernabella in 1958 in the period of the assimilation policy. This was the policy advocated by governments and supported by leading anthropologists and a few Indigenous spokespersons of the day. It was widely recognised that remoteness and limited resources in many of the regions where Aboriginal people lived severely hindered the possibility of social and economic development. It was assumed that those who desired to share in the economic and cultural life of Australian society might eventually have to move nearer to urban areas where employment was available. The particular policy approach at Ernabella, reflected in the bilingual education program and respect for cultural practices, tended to modify this policy. Despite very limited financial resources, efforts were made to provide training and employment through expansion of the sheep industry, building programs and gardens. In 1961 Fregon, an outstation 60 kilometres south-west of Ernabella, was established as the centre for a cattle project. In the same year the South Australian Aborigines Protection Board established Musgrave Park, later named Amata, as a government settlement on the reserve west of Ernabella. Six families moved from Ernabella to form the original population of Amata. In 1968 the government opened its second settlement in the Anangu area, Indulkana, by excising an area of 12 square miles (approximately 31 square kilometres) from Granite Downs cattle station.

During that period, development was hindered by the limited financial resources available. It preceded the 1967 referendum, which authorised the provision of Commonwealth money for Aboriginal programs in the Australian states. Another factor that frustrated our attempts to provide more training and employment was remoteness from markets. Travel and cartage costs made it difficult to compete with producers sited nearer the markets. At the same time, changes in the pastoral industry decreased the demand for Aboriginal labour on nearby cattle stations. Changes in

the following decade, the 1970s, gave promise of a new era of development. In the economic sphere, increased financial grants following the 1967 referendum enabled the construction of new buildings, including housing, with local Anangu employed and increases in wages paid to these workers. Two cattle stations in the region, Everard Park and Kenmore Park, were purchased by the Aboriginal Land Fund Commission and placed under local community control. In the political sphere, communities were incorporated with their own elected councils and administration was transferred from mission or government bodies to these community councils. For example, the Presbyterian Board of Missions handed over control at Ernabella and Fregon from 1 January 1974.

At the same time, increasing income through pensions and other social security benefits and the growing number of privately owned motor vehicles enabled people to return to their homeland centres to the west of the main communities. Government support for this process led to the establishment of several outstations that became homeland communities. Although some of these outstations, including Kunytjanu, Iltur, Kunamata, Aparatjara, Walytjitjata and Putaputa, have not been maintained, others, including Pipalyatjara, Watarru, Kanypi, Nyapari and Angatja, continue to exist. Small satellite settlements have been established near the older communities such as Ernabella, Amata and Fregon. While enabling their residents to have some independence from the tensions of these larger communities, they draw on them for store, schooling and health services.

In 1978 a Homelands Health Service was established to provide medical services for the western homeland region. The nearest clinic staffed by nursing sisters was at Amata, approximately 150 to 200 kilometres to the east. As it was to serve several communities, rather than placing it at one of them which might then be seen as having a prior right to its services, it was sited at Kalka, a few kilometres from Pipalyatjara. Although it was planned originally as a base for medical staff and services only, it has become another community.

While the 1970s was a period of political and economic development for Anangu, it was also a time of widespread social change, reflecting to some extent the worldwide social changes of the decade. Some of the problems that became evident then have intensified and become important factors in contributing to the movement of a significant number of Anangu from their home communities to Adelaide. Although in the earlier years of Ernabella and Fregon, development was restricted by very limited funding, there were few social problems and they were safe communities. In fact, I have sometimes remarked that we did not have to warn our own children about people until we moved to Adelaide. There were no problems related to alcohol abuse, petrol sniffing, child abuse or drugs. Although there were severe problems related to infant health, with frequent epidemics of gastroenteritis, the general health of adults was good.

With increases in the availability of money through social service benefits and wages and the ownership of motor vehicles, the 1970s witnessed the beginnings of alcohol being introduced to the lands and the practice of petrol sniffing among youths and children. Marijuana was also imported into the area, at first by community staff members, and introduced to Anangu. Peter Sutton, based on his experiences at Aurukun in north Queensland, identifies this period as one of 'descent into dysfunction' (Sutton 2009:3). The growth of the cash economy also resulted in an increase in the demand for a wider range of goods in community stores and the sale of products that contributed to a dramatic rise in the incidences of diabetes, obesity, cancers and other health problems. All of these factors escalated over the following decades. The increasing use of motor vehicles and consequent lessening of the physical activity of walking and carrying loads also contributed to some of these health problems, as well as to deaths and serious injuries resulting from motor vehicle accidents. Several Anangu are now living in Adelaide to receive treatment for these medical conditions.

In recent decades there have been changes also in family and wider social relationships in Anangu communities. In the 1950s and 1960s these relationships were more stable. Most couples remained in long-lasting relationships, with their offspring having a sense of security within the family. The same applied in the very few cases in which a man had two or more partners. These relationships were established almost without exception within the language and cultural bloc stretching from Warburton Mission in the west, Areyonga settlement to the north and Granite Downs to the south-east, and including the Yankunytjatjara, Pitjantjatjara, Ngaatjatjara and Ngaanyatjara dialects. Motor and air transport facilitated the extension of ritual and marriage exchange to other dialect areas and to distant communities including Papunya, Wiluna and Yalata. Contacts made between distant Aboriginal churches led to a few marriage exchanges between Anangu and people from Arnhem Land. There has also been an increase in the number of marriages or partnerships between Anangu and non-Indigenous people. Cultural and geographical distance has placed severe stress on many of these relationships and the resultant breakdowns and problems have contributed to the drift of people to Adelaide. Even among those who have followed more traditional patterns of marriage exchange, the influence of the changing mores of the wider Australian society and the previously identified dysfunctional factors in remote communities has led to increasing instability in family relationships. The former stability has given way to more people entering into a series of relationships. Anangu women who have felt rejected or who have been physically abused during the process of these relationship breakdowns are among those who have sought refuge in Adelaide. Sutton refers to this period as 'a time of major decline in household stability...Domestic family life in many places was severely challenged and frequently transformed' (Sutton 2009:55). His comment, based on observations in north Queensland, applies to the Anangu region.

Adelaide

Adelaide was established as a colonial settlement in 1836 on the Adelaide Plains, a narrow stretch of flat country between the waters of Gulf St Vincent and the Mount Lofty Ranges. This was the traditional territory of people now identified as the Kaurna. Although the Letters Patent that authorised the colonial settlement included a clause that stated that the Aboriginal people should retain rights to the land they occupied, and initially there was some interaction between the settlers and Aborigines, introduced diseases soon reduced the Aboriginal population. A few surviving young men were moved to Poonindie Mission on Eyre Peninsula. Others were absorbed into neighbouring groups, the Ngarrindjeri and Narungga (Amery 2000:6). From the midtwentieth century there has been an increasing movement of people from these groups from rural areas to Adelaide. In recent decades some of those who can trace Kaurna descent have reclaimed their Kaurna identity and heritage. This has been expressed in a movement to revive knowledge and use of Kaurna language, based on research into written materials recorded by German missionaries during the early contact period (Amery 2000).

Aboriginal migration to, and settlement in, Adelaide is of particular interest because the pioneering research into urban Aboriginal life undertaken by the late Professor Fay Gale focused on this city. Having based her doctorate on research into Aboriginal communities in Adelaide in 1957, she continued this interest as Professor of Geography at the University of Adelaide and later as Vice-Chancellor. Earlier studies of Aboriginal life tended to focus on remote areas. Her surveys and analyses enable comparisons and contrasts to be made between two waves of Aboriginal migration to Adelaide. The first wave from the end of the First World War through the 1960s took place during the policy era of assimilation when Aboriginal people were expected to adapt and use existing facilities. Although there was government pressure to scatter Aboriginal families among the wider population to promote assimilation, Gale's research indicated a tendency to cluster because of kinship and cultural ties. The policy changes of the 1970s resulted in an increase in special services in areas such as health, education, welfare and housing (Gale and Wundersitz 1982:1). In 1972 Gale recorded six reasons given by Aborigines for their migration to Adelaide: kinship ties attracting others once some individuals had moved; availability of welfare services; health issues; employment opportunities; legal issues; and better educational opportunities (Gale 1972:4-5). Writers on other urban environments had confirmed the 'dual role of the city in both inducing change, and at the same time encouraging the continuance of some cultural features' (Gale 1972:255). Although Aborigines were making some adaptations as they found new opportunities in Adelaide, 'the new environment encourages the persistence of certain patterns of kinship behaviour' (Gale 1972:255).

In a later study Gale and her co-researcher Joy Wundersitz identified the following demographic features relating to this influx of Aborigines to Adelaide: the very youthful character of this population; the relatively low numbers of males; a 'floating' population of 'homeless' men who were loosely attached to Aboriginal homes; the northern section of South Australia contributed very little to this population (most came from Point Pearce and Point McLeay); Aboriginal houses were more crowded than others; a series of complex forces were operating to encourage spatial proximity on the one hand and dispersal on the other; the main concentrations of Aboriginal housing were in the Port Adelaide and Elizabeth/Salisbury areas (Gale and Wundersitz 1982:19, 26, 27, 43, 64, 75).

Gale and Wundersitz noted that in the early years of this migration there were employment opportunities in Adelaide, even for unskilled workers, but this declined in the 1970s. This decline affected males more severely and led to an increase in welfare dependency (Gale and Wundersitz 1982:106, 111). It is salutary, in the light of recent focus on problems arising in contemporary Aboriginal communities due to 'social welfarism', to read the final sentence of their 1982 publication: 'The ultimate social cost of ever-increasing dependency upon welfare should not be underestimated' (Gale and Wundersitz 1982:182).

Anangu in Adelaide

As Gale and Wundersitz noted, in the earlier period Anangu contacts with Adelaide were very limited. A few children of mixed European/Anangu parentage were brought to the Colebrook Home in Quorn in the 1930s, and later to Adelaide. They were separated from their Anangu heritage. Some have moved back to the Anangu lands in recent decades. During the 1950s and 1960s a few individuals spent short periods of time in Adelaide for medical treatment for polio, tuberculosis and serious injuries. They were accommodated in private homes or medical hostels. In 1980 the Department of Education commenced a program under which rotating groups of eight children from Anangu schools spent four weeks in Adelaide, attending Ingle Farm High School. They were accommodated at Wiltja Hostel. Over the following years this has developed into the Wiltja Program in which students spend the whole year in a larger hostel and attend a Wiltja enclave at Woodville High School for several years of secondary education.

From the late 1970s a small number of Anangu came to Adelaide or nearby areas after forming relationships with non-Anangu partners. In the early 1980s a woman from Ernabella, concerned about the increasing social problems in the Anangu lands, moved to Adelaide with her son and two daughters in the hope that they would access better educational opportunities. Although she was one of the first to be diagnosed with diabetes in the lands, her primary motivation was this concern. A man from Amata brought his family to Adelaide because of fears of recriminations following a

motor accident fatality. During this period there was a trickle of such movement, with most of these people later returning to their communities. Having lived in the Anangu lands for more than two decades, my family moved to Adelaide at the end of 1980. My wife, who as a nursing sister at Ernabella from 1958 to 1963 had worked closely with the woman who had brought her family to Adelaide, was in 1981–82 the matron of Wiltja Hostel where we resided. We thus had continuing contact with Anangu. As more people came to Adelaide for medical or legal matters, I was asked to interpret in the health and legal sectors. As a result of the social conditions referred to earlier, this demand increased to 220 interpreting assignments in 2007.

While these earlier movements were of a temporary nature, during the 1990s and early years of this century they have increased in numbers and have tended to lead to more permanent residence in Adelaide. The Anangu whom I come across in Adelaide can be classified under four categories. First, there are those living in households in which at least one of the residents is living in Adelaide on a long-term basis. Second, an increasing number of people live in supported or supervised accommodation, either because of health problems or because they are under some form of legal restraint. Third, there is a small floating population of itinerants who move between their home communities, regional towns, such as Port Augusta, and Adelaide. Fourth, there are a few individuals who tend to have little contact with other $A\underline{n}$ angu, having formed relationships and taken up residence with non-Aboriginal people or non-Anangu Aborigines in Adelaide. My main focus in this chapter is on the major group of householders, although reference is made to others as their presence impacts on the first group. For example, members of this group, when interviewed, frequently identified the itinerants as a major cause of problems they encounter as they seek to adapt to life in an urban environment.

In the course of this research I have identified 26 Anangu households in Adelaide. The total population recorded for these households is 139, comprising 89 adults and 50 children. This number fluctuates widely as family members and other visitors move between home communities and Adelaide. The gender of households was recorded as follows: female, 16; male, three; joint male/female, seven. The primary reason given by households for being in Adelaide was identified as follows: a resident required dialysis, seven; other health problems, seven; social issues, ten; family relationship problems, two. In addition to those living in these households, another nine people, including eight adults and one child, were recorded as living in hostels and institutions for health and legal reasons.

Although the total of 148 people is a relatively small number in an urban situation, two factors must be recognised. First, there are indications that the number will increase considerably in the next few years. At a meeting held in July 2009, it was reported that an additional 15 people could move to Adelaide in the near future for renal dialysis. In the past Alice Springs has been the nearest medical base for Anangu living in the north-west of South Australia, and several people have commenced

dialysis treatment there. In September 2009 the Northern Territory Department of Health and Families advised that 16 people from South Australia's remote Aboriginal communities were on dialysis in Alice Springs (Department of Health and Families 2009). However, because of the demands on dialysis services in Central Australia, the Northern Territory Department of Health and Families has introduced a new policy that 'no new clients from outside the Northern Territory are able to access the Territory's renal dialysis treatment centres' (Huntington 2009). This will force more Anangu families to move to Adelaide for this treatment.

Second, while my research is confined to Anangu people from the far north-west of South Australia, there are migrations of other remote Aboriginal groups to Adelaide. There are a significant number of Warlpiri people from the Northern Territory who have been attracted to Adelaide for similar reasons as the Anangu. Others are from the far west coast region of South Australia. They include some southern Anangu who had moved south from their traditional lands in the 1930s to live at Ooldea Mission and then were moved further south to Yalata Mission in 1952 because of the British atomic testing at Maralinga. Thus the Anangu presence in Adelaide should be seen as part of a wider migration of Aboriginal people from remote areas.

Issues and problems related to this migration

In recent years several meetings have been held and reports written as government and other agencies have become aware of problems confronting Anangu in Adelaide. For example, on 20 March 2007 representatives of the Uniting Aboriginal and Islander Christian Congress, Uniting Care Wesley Port Adelaide, Aboriginal Housing Services and SA Health met with several Anangu at the Parks Community Centre, with Mrs Mona Tur interpreting. Those present identified 29 issues that required attention. At another meeting, sponsored by Uniting Care Wesley Port Adelaide, on 2 March 2009 several Anangu met with representatives from several government, Aboriginal and church agencies. Background information provided by Uniting Care Wesley Port Adelaide for this meeting listed the following 15 issues, which were similar to those identified at the previous meeting:

- 1. Overcrowding.
- 2. Extended families creating disturbance and substance abuse.
- 3. Family violence.
- 4. Very limited living skills.
- 5. This often leads to ongoing property damage, increasing their Housing SA debt and neighbourhood complaints.
- 6. Parenting.

- 7. Non school attendance. Anangu young people are being enrolled under the federal government's National Action Plan for Indigenous education to enable transport and regular school attendance.
- 8. Behaviour of children leading to poor outcomes.
- 9. Going back to the lands for funerals and business and leaving homes vacant for long periods of time.
- 10. Centrelink issues.
- 11. Issues with gambling.
- 12. There is the belief or misunderstanding from Anangu families that they can obtain housing easily.
- 13. There is currently no tracking system in place. We do not know who is coming down and where from and no consultation process between service providers and Anangu Pitjantjatjara Yankunytjatjara Inc.
- 14. Chronic health, hospital admissions, missing hospital and clinic appointments, follow-up at home, medication.
- 15. Poor dietary intake.

On 24 July 2009 representatives of the Uniting Aboriginal and Islander Christian Congress, Housing SA, Families SA and the state government's Social Inclusion Unit met in the office of the Minister for Housing. The same issues were discussed.

A report funded by the Department of Family and Community Services SA on housing for traditional Aboriginal people living in Adelaide was published in November 2003 (Walker and Ireland 2003). The report listed several recommendations. There appears to have been little action undertaken to implement these recommendations. A research report on housing needs for Indigenous South Australians, funded by the same department, was published in July 2006 and noted that Anangu 'are being increasingly attracted to Adelaide' (Roberts et al. 2006:124). Interviews with Anangu revealed that they saw Adelaide as a safer place than their home communities and as providing better access to a range of services they required (Roberts et al. 2006:124–5). The issues raised in these meetings and reports are similar to those identified by Gale in her studies of the earlier period of Aboriginal movement to Adelaide. In relation to some of these issues there is a marked correspondence between both movements. In others there are significant differences.

Problems related to medical treatment as identified by Gale in the earlier movement are again a major factor in the relocation of Anangu to Adelaide. While access to renal dialysis is the main health reason, others who have been interviewed have identified heart and respiratory problems and the need for care resulting from motor vehicle accidents. A recent arrival has indicated her child's failure to thrive as the reason for her moving to Adelaide. Once an individual settles in Adelaide, kinship ties attract other family members to join him or her, another factor noted by Gale. These include spouses, parents, sons and daughters, nieces and nephews,

and grandchildren. This often leads to another of the factors referred to by Gale, that of overcrowding in the available houses. In recent surveys, two of the houses each had 11 residents. These numbers are at times swelled by visitors from home communities.

The surveys also indicate that new arrivals for health treatment are accommodated with families already in Adelaide while awaiting allocation of their own housing. Recent plotting of Anangu residences in Adelaide indicates that most of them are in northwestern and northern suburbs where cheaper housing is available. The same applied when Gale reported that the main concentrations of Aboriginal housing were in the Port Adelaide and Elizabeth/Salisbury areas. Gale noted the presence in Adelaide of several 'homeless' Aborigines who from time to time attached themselves to Aboriginal households. One of the central problems raised by Anangu is the disturbances caused by itinerants who seek refuge in their homes. As they are often affected by alcohol or drugs, their presence leads to abuse, fighting and noise and subsequent protests by neighbours. I have at times interpreted at meetings where these issues have been discussed with residents. In one instance in the Port Adelaide area, I translated some housing rules drawn up in consultation with Anangu. There were reports that these were effective. Whereas the troublemakers reacted negatively to their kin laying down rules for them, they took some notice when residents pointed to the rules attached to the wall of the house.

Two other factors identified by Gale in the earlier movement were its youthful character and the low number of males. The relevant figures for the current Anangu situation are as follows: adults, 89; children, 50; adult males, 35; adult females, 54.

Gale noted that in the post-war movement from settlements nearer to Adelaide, employment opportunities were a motivating factor. This has not been so in relation to Anangu. The majority either have medical conditions that prevent them from engaging in regular employment or lack the skills required for work opportunities in Adelaide. The exceptions to this are a very small number of women who have obtained employment in education services where they have been able to use their language in translation and the production of literature. However, a significant development has been the increasing involvement of several Anangu in the production of art. Further reference to this is made later in this chapter.

Gale identified the seeking of better educational opportunities as a factor in motivating some of the Aboriginal people involved in the earlier movement. Although it was an expressed motivation by one Pitjantjatjara woman in the 1980s, it does not appear to be a reason why children are brought to Adelaide now, apart from those attending the Wiltja school program. In fact, the irregular attendance of Anangu children at school in Adelaide is one of the troubling factors in the current situation. It partly reflects the decline in school attendance rates in home communities in recent decades and a perceived lack of relevance of schooling to what the children see as their future prospects. This is an issue that requires urgent attention.

Other problems raised in the meetings and reports referred to above are the apparent limited home management and budgeting skills of those moving to Adelaide, diet (with the availability of junk foods), gambling (with the close proximity of poker machines), dealing with Centrelink and work agencies, and difficulties in returning to home communities for funerals and other cultural responsibilities. In recent weeks I have interpreted for Anangu in the legal system. Some have been charged with driving offences; for example, driving without a licence or driving an unregistered vehicle. Others are charged with assault or breach of bail. In some cases fines mount up and become a considerable drain on social security income. Anangu women are at times vulnerable in the legal system when, for example, they enter into abusive relationships with non-Anangu men. When the woman reacts in a traditional manner, she may be charged with assault or property damage.

The problems therefore that confront Anangu living in Adelaide are many and varied. Their problems reflect the serious health, education and social crises of their home communities. They are probably less prepared to adapt to the urban environment than an earlier generation before 'social welfarism' undermined motivation to work, and when there was better health, little or no involvement with alcohol and drugs, and a tradition of regular school attendance. In contrast to many of the Aboriginal people who moved to Adelaide a half-century ago to seek a better lifestyle with employment and educational opportunities, the Anangu now coming to Adelaide are in general a people suffering from a range of chronic health and social disabilities. In my interaction with them I am amazed at the resilience some of them show under these conditions.

What assistance is provided for Anangu in Adelaide?

Government and other agencies are seeking to provide help to Anangu in Adelaide. They include units related to government health, housing and education departments, Aboriginal organisations such as the Aboriginal Legal Rights Movement, and church bodies such as Uniting Care Wesley Port Adelaide. Most of these units are struggling to cope with demands and to find answers to the problems. At this early stage of my research I will focus on two agencies that seem to be making effective contributions.

The first of these is the Uniting Church's Uniting Aboriginal and Islander Christian Congress. The congress's church facilities at North Salisbury offer one focal point where Anangu gather for worship and lunch on Sundays and fellowship and lunch on Wednesdays. The Reverend Dean Whittaker has a small team of staff and volunteers who provide a range of transport, counselling and other services. The gatherings at the church provide a place where problems can be discussed and from which issues can be taken up with appropriate government or other agencies. Dean Whittaker, who has had experience in Arnhem Land, in his pastoral role visits Anangu in their homes and hospitals when they are facing crises and supports them during court appearances.

The second of these agencies is a privately run business, Better World Arts, situated in Commercial Road, Port Adelaide. Opened in 1992 to provide a commercial outlet for traditional craft from overseas, Better World Arts entered into an agreement with Kaltjiti Arts Centre at Fregon in the Anangu lands under which designs created by Kaltjiti artists were crafted into rugs by Kashmirian craftspeople. This later expanded to Kaltjiti designs being incorporated into silverware and wooden artefacts by Incas in Peru. Some of the Anangu artists who now live in Adelaide brought paintings to Better World Arts. Previously they had at times sold them cheaply in their neighbourhoods. The relationship between Better World Arts and these artists has developed over the years and there is now a space where the artists can work, and where canvasses, paints and other materials are provided. Recently, an arrangement was made with Meals on Wheels, whereby lunches are delivered to the site, thus overcoming to some degree the dietary problems. To assist with other social problems and to ensure the active participation of Anangu in running their own affairs, the Ngura Wiru Winki community centre based at Better World Arts has been incorporated.

Conclusion

The above is a preliminary discussion of some of the issues related to the movement of Anangu people to Adelaide. I have attempted to situate this discussion into a wider perspective of the history of Aboriginal people in the Anangu lands. At present there is intense focus on the situation in remote Aboriginal communities in the writings of Noel Pearson, Peter Sutton, Helen Hughes and others. The Northern Territory intervention measures have stirred fierce debate. As John Taylor noted in a recent paper in Australian Aboriginal Studies, all of this 'has stimulated interest in the issue of rural-urban migration' (Taylor 2009:4). While, as Taylor has confirmed, such migration is not reducing population levels in remote communities, there are signs that the migration will continue and the now small pockets of Anangu and other populations in Adelaide and other urban centres will grow. There is thus need for urgent research, planning and action to alleviate the problems outlined above.

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Notes

- 1. Throughout this chapter I refer to the people under discussion as Anangu. This term, meaning person, is used increasingly as an identifier for Pitjantjatjara and Yankunytjatjara people and speakers of other neighbouring dialects belonging to the Western Desert language and cultural bloc.
- 2. This phrase, which I have used in other writings, plays on the phrase popularised by the historian Geoffrey Blainey, 'The tyranny of distance'.
- 3. Wiltja is the Pitjantjatjara term for shade, shadow, bush shelter.
- 4. Noel Pearson's reflections and comments on the situation in his own region of Cape York in his recent work *Up from the Mission* have resonated with my experience of the contemporary scene in Anangu communities (Pearson 2009:139–42, 155, 200, 234).