

Anyinginyi Health Aboriginal Corporation

Culturally Responsive

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Dear Commissioner Margaret White AO
Dear Commissioner Mick Gooda

Please accept the Anyinginyi Health Aboriginal Corporation submission to the Royal Commission into the Protection and Detention of Children in the Northern Territory.

Anyinginyi Health Aboriginal Corporation has deliberately kept this submission short and succinct, capturing the key elements to address Youth Detention and the Care and Protection of Children in the Barkly Region.

Anyinginyi Health Aboriginal Corporation would like the opportunity if invited to discuss this submission.

Yours sincerely

Ross Williams Jakamarra
Chairperson
31/10/16

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CHILDREN OF THE BARKLY

**Submission to the Royal Commission into the
Protection and Detention of Children in the
Northern Territory**

**Submitted by
Anyinginyi Health Aboriginal Corporation**

October 2016

Children of the Barkly Region: Submission to the Royal Commission into the Protection and Detention of Children in the Northern Territory by Anyinginyi Health Aboriginal Corporation

1. Anyinginyi Health Aboriginal Corporation (Anyinginyi) is founded on a holistic definition of health (in line with AMSANT's policy) which calls for a service delivery approach that addresses physical, emotional, mental, spiritual and social wellbeing. This approach extends further to embrace a culturally responsive approach for the Barkly Region where people's lifestyles are a blend of traditional Aboriginal and mainstream Australian cultural practices. Anyinginyi's structure reflects this practice ideology with a division into sections that deal with primary health care (both central clinic and outreach clinics), family well-being and sports and recreation. Our services to children, youth and young adults, including those at risk of offending, fit across all of these areas.

2. As in other parts of Aboriginal Australia, people of the Barkly Region have endured a traumatic frontier and colonial history including displacement from countries, mission life, loss of work in the pastoral industry, stolen generation, stolen wages, displacement of many to fringe camps in Tennant Creek, widespread unemployment, welfare dependency, housing shortage and overcrowding, substance abuse associated with family violence, suicide and depression, mental health problems and much more. These complex historical factors have resulted in longitudinal or inter-generational transmission of problems within many families and community groups as well as inter-group conflicts today. This is the context in which Anyinginyi works with young people in the Barkly, drawing on only limited resources and support from government. When government won't even build houses to reduce family living stresses in the overcrowded Tennant Creek (see Memmott et al report), the problems of addressing child well-being becomes extremely challenging.

The majority of adults in Tennant Creek are on welfare support with limited employment. The major industry in Tennant Creek is welfare support. In short, Tennant Creek is a welfare town. Any strategy for improving well-being of children must address the inter-generational problems of welfare dependent people

3. We are informed that the numbers of children from the Barkly in detention are relatively low. Our submission focuses on prevention and diversion which is more where our expertise lies. We are of the view that detention should be a last option, but in such cases the detention should still be on the traditional country of the child (ren) and in proximity to their kin.

4. Our Aboriginal staff have canvassed a wide range of Aboriginal views and opinions from our people of the Barkly region over the last few weeks. There have been two consistent views emerge: (1) That diversion of offenders should occur on to traditional country where there is proximity for visitation by Elders and kin, and where 'two way learning' can occur, i.e. teaching them in both Aboriginal and mainstream education; (2) That there is an urgent need in our Barkly communities for an adequate range of after-school and weekend activities for children and youths, with pathways for older youths into employment prospects and self-development interest.

5. Concerning the details of a detention facility, such as policy, management, services, design, etc., we see this as a matter which we shall leave for more-qualified others to make recommendations on. However we generally align with the

submission to the Commission by Dr E. Grant and its two key recommendations:

- a) No segregation in detention, and
- b) Children exhibiting at-risk behaviours to be transferred to a care facility (e.g. Aboriginal Clinic, Residential Clinic etc.).

6. We would request adequate support (consultation funding) to facilitate our community to develop (and own) a Ten Year Plan for a Preventive and Diversion Program that would be community-driven and delivered by multiple Aboriginal-directed agencies. The Plan would have to have two parts: (a) a Tennant Creek Plan for our regional centre, and (b) a Barkly Region Plan to encompass our many small bush communities. The planning would have to include pathways strategies for infants, children, teenagers and young adults to capture all relevant developmental issues.

7. The Tennant Creek planning would also include such elements as Strengthening Youth Leadership, youth input into Community Governance, Youth Service Hubs, Youth Patrol (for detection and monitoring of at-risk persons), Stronger Family and Parenting initiatives, Strengthening Social Capital to build better safety nets for children, numerous sporting and activities options, educational program options and incentives, and strong Mentor roles. The planning would have to develop ways to extend, adapt or grow such elements to work in the remote bush communities.

8. A holistic approach is needed to address this problem but such an approach cannot be achieved with drip funding from government which is what is normally provided in these situations. Assistance is required (feasibility planning funds) to develop an alternate funding proposal (e.g. Social Impact Bonds and Philanthropy) to provide for long-term stable service delivery.

9. The Barkly planning approach must be founded on a process of strengthening positive self-identity through the connection of children and youth to their country, family and kin, all of which needs to be embedded in a regional Cultural Framework for culturally secure service delivery.

10. A culturally secure diversion program for the Barkly Region would also require strong and effective linkages during its development and delivery stages with the N.T. Police and Justice systems.

11. The Aboriginal child placement methods in the Barkly Region should generally align with those principles of priority prescribed by the S.N.A.I.C.C. organisation, by having a strategic approach that aims to keep children in close connection with their country and kin.

12. All outcomes and recommendations of the Royal Commission should align with and support the International Convention on the Rights of the Child (Australia is a signatory of this Agreement).

References

Anyinginyi Health Aboriginal Corporation 2016 2015/2016 Annual Report, Good Governance. Tennant Creek.

Grant, E. 2016 The use of segregation for children in the Northern Territory Youth Detention System. Submission to the Royal Commission into the Protection and Detention of Children in the Northern Territory.

Memmott, P, Nash, D., Baffour, B. and Greenop, K. 2013 The Women's Refuge and the Crowded House: Aboriginal homelessness hidden in Tennant Creek, Report No 50, Australian Homelessness Clearinghouse, Dept of FaHCSIA, Canberra, August 2013, viewed 30 August 2013, <http://www.healthinfonet.ecu.edu.au/key-resources/bibliography/?lid=25791>