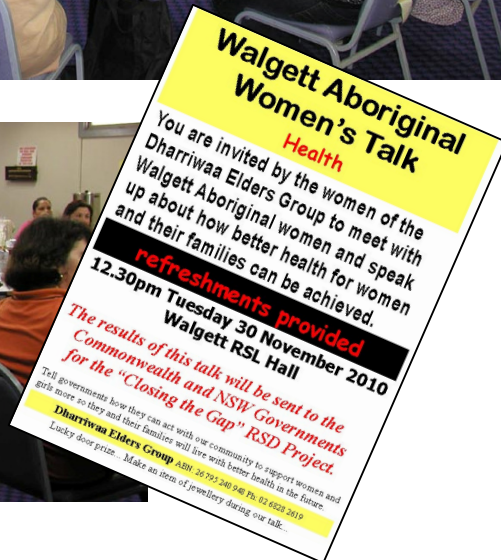
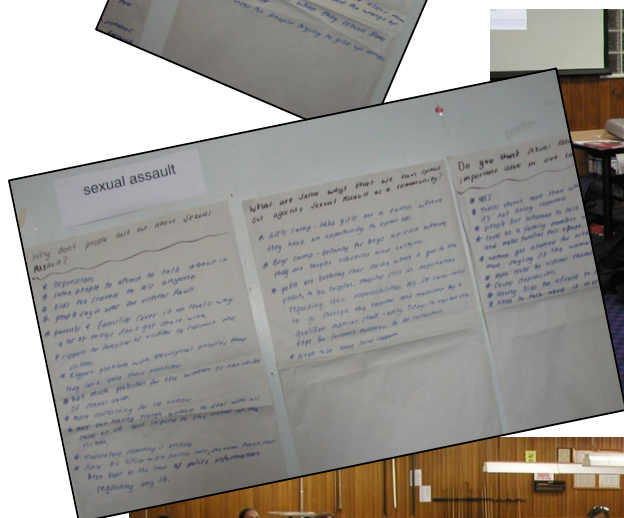
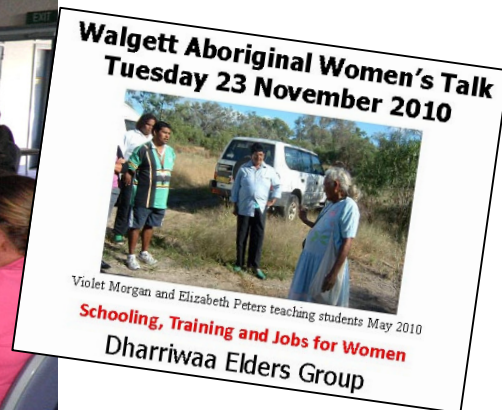


# Walgett Aboriginal Women's Workshops

Report endorsed by the Walgett Gamilaraay  
Community Working Party 23 February 2011



**Dharriwaa Elders Group** ABN: 26 795 240 948

Financial support provided by Commonwealth Government through the Department of Families and Community Services, Housing and Indigenous Affairs Indigenous Women's Program.

## Introduction to the Dharriwaa Elders Group Women's Program

The Dharriwaa Elders Group Women's Program was first funded by the Department Of Families and Community Services, Housing and Indigenous Affairs' Indigenous Women's Program in the 2006/07 year. It provided funds to employ a casual Aboriginal local woman and provide the DEG centre and services including transport for women members of the Dharriwaa Elders Group to meet separately as women and support activities they designed to do together. These activities included counselling each other, holding a fancy dress ball for children, making jewellery, undertaking regional shopping trips and meetings with other Aboriginal women in neighbouring towns, and becoming an organised voice which could be advocated for within the DEG advocacy service. The program was funded in 2008/09 and in 2009/10 funding was halved and the objectives changed by the funding body to *"four workshops for the Aboriginal women of the Walgett community, including the two reserves, Namoi and Gingie. These workshops will target issues identified by the women as priorities in their communities."* After much discussion by the women and men of the DEG, and the growing recognition of DEG members and staff that we would need to work harder to ensure that the RSD "Closing the Gap" Walgett Local Implementation Plan ("LIP") truly reflects the needs of the Walgett Aboriginal community, the aims of the project became to conduct four workshops with the Aboriginal women of Walgett to produce

- A list of priorities from Walgett Aboriginal women to be included in the Walgett RSD LIP
- The election of two representatives of Walgett Aboriginal women to attend the Community Working Party and other representative fora.

### Process

On 24 March 2010 a reference committee made up of representatives from Walgett AMS, Walgett Community Centre, Thayamali Violence Prevention Service (i.e. all the Walgett providers of women's programs at that time) and the FaHCSIA RSD Co-ordinator, met and determined how the proposed workshops would be a success.

Research was begun into providing a crèche service, and offering ECAV workshops. After discussions with ECAV, Dharriwaa Elders Group's Women's Group and Elders Council and service providers, the ECAV workshops were found to be unsuitable. Provision of a crèche service also proved difficult.

After this period of consultation and discussing the ingredients for achieving the aims, the Dharriwaa Elders Group directors decided to develop DEG's workshops with local Aboriginal women with expertise in each subject area that Dharriwaa Elders Group women selected as priorities which were determined as:

1. law, justice, family violence ,
  2. education, employment and training,
  3. health and
  4. providing information to assist with the follow-through and implementation of strategies and programs to address the issues identified in the first three workshops, particularly with the RSD.
- Information was to be provided that would inform understanding of processes needed to activate an Aboriginal women's representative body, and to elect two representatives to carry on with that task.

Planning consultations / meetings were held face to face with relevant local services and stakeholders (i.e. Walgett AMS, Thayamali Violence Prevention Services, Barwon Cottage, Walgett Community College, Walgett Police, Greater Western Area Health Service, Outback Division of General Practice, TAFE, FaHCSIA RSD team, and active community women) regarding "Health" workshop 11, 19, 22, 24, 28 October 2010; re the "Schooling, Jobs and Training" – 21 September, 25 October 2010, re "A Safer Community for Women" workshop - 23 September 2010 and the final governance workshop at various times throughout the period. In addition, the workshops were discussed and guided by meetings of the Dharriwaa Elders Group Elders Council and Women's Group, and with the Walgett CWP and RSD team. Extensive phone and email consultations and copies of meeting notes and workshop scripts were emailed until eventually a plan for each workshop, including scripted questions were finalised.

Fliers and personal invitations were produced and hand-delivered as well as delivered to services' reception and display areas, for each of the four sessions.

Four workshops were conducted. "A Safer Community for Women" (2 November 2010 – 32 attended), "Schooling, Jobs and Training" (organised for 26 October and rescheduled due to TAFE double commitment to 26 November 2010 – 16 attended), "Health" (30 November 2010 – 14 attended) and "Where to Now?" (14 December 2010 – 18 attended).

Catering was supplied by Café 64 and in one instance Walgett RSL Club. The Walgett RSL Club venue was selected for its cost, accessibility and neutrality. A lucky door prize of handmade scented soaps and moisturisers were won at each workshop. Beadmaking materials supplied by the DEG were provided as a hands-on activity to assist more relaxed conversation. Jewellery items made by the women were taken home by them.

Scribing duties were performed by Leigh Leslie, Wendy Spencer, Kylie Kennedy and some workshop participants on butcher's paper. Transcriptions were prepared from the combined scribing output and are provided in the Appendices of this Report. DEG provided a projector and notebook computer to project the main scribe's output so it could be seen clearly by workshop participants and checked throughout the workshops. At the end of the final workshop, the combined draft transcriptions from the previous three workshops were checked by the women present, and additional suggestions and additions were made.

Wendy Spencer facilitated the four three-hour workshops. This was requested by each of the planning meetings for three of the separate subject areas. In the case of the "Schooling, Jobs and Training" workshop a local Aboriginal schoolteacher had agreed to facilitate the workshop but on the day pulled out (although participated in the workshop) and so Wendy stepped in as facilitator for that workshop too.

At the request of the Walgett Gamilaraay Aboriginal Community Working Party ("WGACWP"), recommendations from the workshops were presented at the 23 February 2011 meeting of the WGACWP. It was agreed at a previous meeting that findings in the Report endorsed by the WGACWP will be forwarded to the RSD team for inclusion in the Walgett Local Implementation Plan for the Remote Service Delivery Project. This was reported to the women at the workshops, who requested that the Report be written to contain focussed recommendations as well as the complete workshop transcripts.

This Report has been prepared by Wendy Spencer. The first part of this Report is organised under the current Walgett LIP Building Blocks and footnote references are given to each of the outputs connected to that particular Building Block. This has been done to facilitate the incorporation of the output of the workshops into the Walgett LIP. This has meant that some recommendations have been repeated in different Building Blocks, but this duplication has been kept for ease of transfer into the LIP at a later date. As one would expect, many of the workshop recommendations are relevant to multiple LIP Building Blocks, but the cross-referencing has not been completed in this version and is left to the better resourced RSD team.

Because the Women's Workshops were limited by time (i.e. 12 hours) they focussed on the subject areas prioritised by the DEG Women's Group of health, schools, economic participation, safer community and governance. This meant that other very important subject areas (e.g. early childhood, essential services, culture and land, healthy homes) were not focussed on - however they were raised during the discussions, so this content has been included under these LIP Building Blocks in this Report. Because this Report contains only the recommendations from the four Women's workshops, it should not be seen as a definitive list of recommendations by Walgett Aboriginal women for the Walgett LIP, but rather as a substantial contribution from women which should be built upon by the RSD team and the community in the future.

## Early Childhood

The Health workshop referred to the importance of providing programs to prevent **foetal alcohol syndrome**<sup>1</sup>

Unanimous support was voiced in the workshops for a **Walgett-based birthing unit**. Until that is provided, more support including transport and accommodation should be provided for girls giving in birth in Dubbo<sup>2</sup>.

### **Early intervention social and emotional wellbeing services.**<sup>3</sup>

The need for more children's services including preventative and counselling programs was identified. It was suggested that DoCS provide more workers to deal with all cases of sexual assault ("SA") and respond to the needs of the victims including providing more protection for children when SA matters are heard in court.

The need for more counselling and other social and emotional wellbeing services were identified repeatedly, in particular for victims of sexual assault. Children need to be taught that SA is not their fault, and ways that they feel comfortable to report abuse, ask for help and resist shame. Age appropriate content should be used to teach children recognition of loving relationships and when sex becomes assault, about how to keep safe when there are parties at home, how their parents need to be aware of where they are, and about the location of safe places they can go to if they don't feel safe at home. Two workshops identified the need for parents and children's services to educate young boys in ways that will help them as men cope with social change and disadvantage, teaching how to build resilience. Young girls and parents need to learn that abuse is not acceptable and tactics for recognising and not accepting abusive behaviours.

### **Regular health screenings**<sup>4</sup>

The "Health" workshop identified that more health screenings and health promotions programs from an early age are required for Walgett children and strategies must be developed to intervene and address health issues.

### **Parenting / caregiver support services**<sup>5</sup>

The need for education programs for parents about keeping children safe at parties, how parents need to be aware of where they are, how kids are assaulted when parents are asleep, the impacts on children of sleep deficit and about safe places children can go if they don't feel safe at home. Age appropriate education programs for men and women and youth about loving relationships and when sex becomes assault are needed, as are programs that provide families with the support they need to stand up and say sexual assault is not acceptable in our family, and not to cover it up. Families need support in order to provide support for the victims of sexual assault and to take strong measures to sort out a perpetrator in their family. Community information is needed that maps existing local and regional family services and how families can access outreach services.

### **Program to involve parent's involvement in pre-schools**<sup>6</sup>.

Many times the workshops stressed the importance of parents' greater involvement in early childhood services so that parents can understand and be actively involved in their child's learning development<sup>7</sup>, and in delivering the health and other intervention strategies that may be identified by the regular health screenings and intervention strategies recommended above. Parents must be taught to understand that their child's early years are the formative years, the importance of reading

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<sup>1</sup> 1.1 Output: Families have access to and use culturally appropriate antenatal and postnatal care

<sup>2</sup> 1.2 Output: Families have access to and use culturally appropriate birthing settings

<sup>3</sup> 1.4 Output: All children have access to early intervention social and emotional wellbeing services

<sup>4</sup> 1.3 Output: All children have access to and utilise culturally appropriate health assessments and follow up allied health treatments, including NSW Personal Health Record Child Health Checks for 0-4 years and StEPS 4 year vision screen

<sup>5</sup> 2.2 Output: Parents and caregivers have access to and use parenting support services when needed

<sup>6</sup> 4.2 Output: Early learning services (playgroups, preschool, long day care) are linked to maternal and child health and family support services

<sup>7</sup> 2.1 Output: All families have access to information on the importance of early childhood development



and being around books and to find the time to read to their children at night and support their children's learning in other ways too. Programs should support cultural change and set "norms" re school and home behaviours that promote learning. Mothers' involvement could be improved by the provision of transport to playgroups and pre-schools. The Library and AIM programs were cited as good examples of parents' involvement. Once this participation is underway, the need for the provision of information to parents about support services, and consequent referral pathways to other services will need to be implemented.

Programs are needed to empower and educate parents regarding parenting, including to educate parents about parental responsibility and the appropriate uses of discipline. It was suggested that DoCS and Police also should have a role in delivering this information to community meetings.

### **Access to quality early childhood services<sup>8</sup>**

The need was identified for an Aboriginal Long Day Care Centre for 0-5 yrs – so families can put their child in a safe environment when they need to deal with their other issues. Women remembered such a service existed in the past and should be re-activated.

The need for affordable Day Care services was identified as providing a strategy for increasing women's participation in education and employment. Currently the shortage of Day Care places and their expense proves a barrier for mothers and grandmothers' economic participation. The expense of Day Care is a disincentive to work for low-income earners. In addition, women often have to leave work to look after grandchildren or children due to threats created by substance abuse and domestic violence. More accessible Day Care services would increase the participation of women in employment and further education.

There is a need for Day Care providers to regularly publicly advertise how many Aboriginal priority placements they have and when places become available, and to be seen to implement fair and transparent placings policies for Day Care.

## **Healthy Homes**

### **Safe homes for women and children<sup>9</sup>**

The need to reduce overcrowded housing was a priority identified in each workshop, but particularly as a strategy to improve the safety of women and children. The need to find strategies and implement support programs for women to enable safe separation from partners and to remove violent men from the home to cooling-off places was identified so that the safety of women and children can be improved.

**More frequent and honest services from local community housing providers<sup>10</sup>** are required, as well as higher quality housing maintenance.

### **Strategies identified to reduce overcrowding<sup>11</sup>**

Overcrowding and the need for more housing was emphasised in each of the women's workshops and was identified as one of the highest priorities. Recommendations included to provide more flats for young people as there will be less conflict at home when the younger generation can live independently. The women recommended that governments need to purchase new housing as patching up the existing houses does not solve the problem of houses getting wrecked from the same large amount of people living in them. The Land Council housing list needs to be "sorted out" and housing allocations have to stop being perceived as a family affair.

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<sup>8</sup> 3.3 Output: Options for additional learning settings explored, 4.1 Output: A range of quality early childhood services (playgroups, preschool, long day care, health services, family support services) are coordinated to be delivered in a number of locations, at different times, targeting a range of high risk groups

<sup>9</sup> 1.3 Output: Women and children have access to safe homes

<sup>10</sup> 2.1 Output: Access to appropriate and accurate housing information

<sup>11</sup> 2.3 Output: Strategies to reduce overcrowding

### **Access to essential services<sup>12</sup>**

Public transport to enable access to employment and training, and to health services was identified. In particular public transport for the frail and aged, and women with young children, is needed. Essential services required by the community that are currently not available are a regular dentist and doctors. Safe drinking water and fluoridation of drinking water were also identified as concerns.

## **Economic Participation**

### **Programs needed to increase economic participation of Aboriginal women in Walgett<sup>13</sup>**

Support is needed to assist Walgett Aboriginal women to have the freedom to make their own choices about their lives and be in a position to choose to work and undertake further studies so they can give their children and themselves a better lifestyle. A barrier to achieving this goal is the control and abuse imposed on women and girls by Aboriginal men, which takes away their freedom to make their own choices. Aboriginal men have lost more than women in society – “Everything was taken away from them which has led to substance abuse”. They are more likely to come into contact with the police and so are less likely to be employed than women. More women therefore earn for the family and this disempowers men and creates resentment.

The structure of ABSTUDY and other social benefits provide disincentives for women to work. Women might leave work as a result of their reluctance to talk up about harassment, intimidation, bullying. Many Walgett employment opportunities for Aboriginal women are only short-term funded projects e.g. pilot projects offering limited term casual work. Often the low incomes earned from employment are not worthwhile because childcare is either not available or affordable. Often women need to leave work in order to care for grandchildren due to substance abuse and domestic violence in the family. Discrimination prevents women accessing employment in some Walgett enterprises. Lack of a driver's licence and nervousness about criminal records are other barriers that prevent women from applying for work. If they do apply for a job, the Job Service Provider often writes their job application which leads to inappropriate job matching and often disappointment when the employer discovers the real skills of the applicant. If they succeed to the interview stage Walgett Aboriginal women are often too nervous to undergo the interview, and Job selection panels are often problematic either because they don't understand the community factions, are too choosy, or have undeclared conflicts of interest.

Strategies identified by the workshops to overcome these barriers to women's economic participation include:

- Mothers and early childhood and school programs educate young men from an early age to assist men to cope with the social changes, to build their resilience, hope and optimism
- Assist women to recognise abuse, that it's not acceptable and not to put up with it
- Support employment and training initiatives that offer flexible working hours so young mothers can work during school hours and attend to sick children when needed, and that provide working hours that are more targeted to their clients needs e.g. Youth activities need to be in afternoon and evening and weekends
- Examine social benefits and remove disincentives to work and study or combine the both.
- Provide transport options for women to travel to work.
- Affordable and accessible Day Care must be provided and Day Care services must promote their places more actively in the Aboriginal community.
- Protocols for job selection panels and processes need to be developed that are Walgett-specific and are sensitive to factions and the local employment situation, and promote the use of more than one Aboriginal person on selection panels.

### **Training needs<sup>14</sup>**

More resources for Aboriginal employment support and training programs were identified as urgently required. Employers must be encouraged to provide on-the-job training. Women must be

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<sup>12</sup> 3.2 Output: Access to essential services

<sup>13</sup> 1.1 Output: Provide opportunities to identify training and job interest and needs of community

<sup>14</sup> 1.2 Output: Provide access to training that meets their interest and job opportunities (check number)

provided training in the later stages of school to get them used to work and improve their skill sets for work. Career education should begin in the schools at Year 7. Women need programs that provide training to write the job application themselves and how to succeed in interviews. Opportunities should be provided for women to learn about different jobs<sup>15</sup>, and support and training provided to assist women to achieve their driver licence. Women need information about how criminal records may affect chances of job selection.

June Dally Watkins' self-esteem, grooming and deportment classes were remembered positively. Intensive self-esteem-building casual workshops for women and girls that promote confidence in public speaking and communicating with a wide range of people were identified as an important strategy.

Support programs for women generally, and women at work should transfer budgeting, managing finances, organisational and time management skills. Young mothers need training in parenting skills to learn how to support their children so grandparents don't have to do it. Skills in using GPS, software packages, typing, shorthand, literacy including job-specific literacy were training needs also identified. Locally-based Aboriginal counsellors are needed to assist women with gambling, drugs and alcohol and support them to remain employed if they have these health issues.

A mentoring team to mentor students, trainees and employees through family and other issues as they arise in their work was recommended. They would also supply transport and other support services for those beginning work.

### **The development of new local enterprises and associated training<sup>16</sup>**

The following enterprises that would provide CDEP<sup>17</sup> and women local employment and training opportunities they would like, were identified by workshop participants:

- Revegetate and repair around the rivers, eradicate weeds
- Carp eradication – dry them out and sell for fertiliser.
- Wind farms, domestic energy reduction programs & solar energy enterprises – addressing high cost of electricity
- Town beautification projects i.e. erection of picnic shelters, parks and gardens enhancements
- Community market garden and medicine garden
- Hairdressing
- Beautician
- Florist
- Funeral director / undertaker
- Kitchen work
- Cleaning work
- An administrative human resources agency – providing typing, clerical, and secretarial, administrative and project management services
- Fashion design
- WWW - based selling e.g. EBay

The NSW Catchment Management Authorities were identified as an agency that could provide more employment and training programs for Walgett and concern was expressed that they should be made more accountable for taking on this role and actively develop Walgett projects.

### **Walgett Aboriginal Employment Strategy<sup>18</sup>**

The workshops identified the goal to “make more Aboriginal people work at the front desk of every government organisation in Walgett”. Government Walgett employers should be required to have an Aboriginal Employment Strategy and mentors in the workplace, starting with the Shire. The

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<sup>15</sup> 2.1 Output: Opportunities are provided to the community to increase awareness of available economic participation options

<sup>16</sup> 2.2 Output: Economic participation opportunities are established

<sup>17</sup> 3.2 Output: Implement CDEP Community Action Plans

<sup>18</sup> 4.1 Output: Government agencies provide employment opportunities to the community

Employment Strategy when implemented would target people in schools, assist them to try out a range of different types of work experience and provide mentoring when they are employed. Mandatory cross cultural and cultural immersion training should be undertaken by all government agency staff in Walgett. Attitudinal change amongst non-Aboriginal people needs to be understood and promoted to build trust in Aboriginal people and trust in their abilities. Employers should be actively encouraged and incentivised to provide on-the-job training and supported to employ more than one Aboriginal worker in each workplace as a staff retention measure.

## Schooling

### **Need to understand the educational achievements of Walgett students and where the blockages in Walgett to achievements are.**<sup>19</sup>

The workshop participants all believed that Walgett students were underachieving at school and had little faith that governments actually know how to remedy this situation. They recommended that new education strategies designed for Walgett, be researched. Work needs to be done to understand the achievements of Aboriginal students and the support mechanisms that need to be in place for students to achieve improved outcomes. Then the support needed must be provided. A strategy for some of this research was suggested whereby the educational performance of Aboriginal students that travel to different schools be examined and conclusions drawn from why they have performed better while at other schools than in Walgett. The way statistics are collected about students' performance and achievements should be redesigned to reveal useful information like this. Other data should be used to identify where the gaps are in services and where extra supports need to be applied within the school. The relevance of teaching and its delivery in Walgett needs examination.

### **Structural changes**<sup>20</sup>

One strategy recommended to improve the resources in Walgett schools is the introduction of a community ratings system that rewards teachers according to their performances. Incentives for teachers to work in Walgett should be changed so that the good teachers are more likely to stay in Walgett. The good energetic teachers that sometimes come here as casuals should be offered permanent jobs and long-term locally based teachers who may be tired and not innovative in their teaching methods should be offered greener pastures.

A policy regarding regional positions should be changed to recognise Walgett's greater need so that currently regional educational services are concentrated locally. Team teaching should be adjusted so it works. The teaching teams need to employ similar teaching styles and the expertise of the teachers involved.

Other recommendations were to ensure consistency of policy implementation regarding behaviour which is currently perceived to be inconsistent between the primary and high schools, and to define the roles of AEOs so that they can be more effective.

### **The need for increased literacy**

The workshop participants felt that there should be a greater focus on literacy in the schools as there are "many illiterate kids in Year 9".

Strategies suggested for achieving a greater focus on literacy were to enforce the implementation of an 'Individual Education Program,' developed by teachers for each child in conjunction with the parents which plans to bring each child's achievements up to accepted norms with the support of tutors if required; and to devote more resources to attending students rather than those who don't attend.

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<sup>19</sup> 1.1, 2.1 Output: Activities and supports within the school that enhance our children's overall wellbeing and readiness to learn

<sup>20</sup> 1.1, 2.1 Output: Activities and supports within the school that enhance our children's overall wellbeing and readiness to learn



### **Other strategies required to enhance children's wellbeing and readiness to learn<sup>21</sup>**

Strategies that reduce housing overcrowding and that reduce the impacts of depression on the child need to be employed. A community dormitory / hostel should be trialled for those who think their children will achieve better at school if they live away from the overcrowded family home. The parents must be involved in planning and implementing this new project. While living there students would learn living skills, receive health services and would live according to a structured routine e.g. up early do exercise, shower, literacy, hands-on activities.

A team should be engaged to intervene when children and/or parents swear and abuse teachers which advises the subject of the school's high standards and that this behaviour is not acceptable. Well-behaved kids must be separated from misbehaving children so the learning of the well-behaved children is not interrupted.

### **Suspension strategy a failure**

Children must be kept in school during suspension and their teacher must set work for that child to complete before they are accepted back into their normal classroom. Counselling and other health strategies must be employed with the child to determine and address (e.g. to eradicate bullying, to deal with depression) the cause of their behaviours. The key to that child's interests must be found during this period so that they can be more effectively streamed into a learning setting that sparks their education achievement.

### **Try different learning settings**

Programs must be implemented that produce children that are able to learn. Classes could be located at Garule Wali for example and include cultural content. Well-behaved and badly behaved children would always be separated. All classes would need to accommodate the children's IEPs. Badly behaved children should be sent to the school's work farm where they are taught work life skills, ongoing routines, confidence building, work ethics, how to look after animals. Part of their program could incorporate looking after elders, making them cakes and listening to Elders as they need to learn compassion and respect.

### **Increase school health screenings and programs**

More in-school health screening and health promotions programs from an early age are required. Strategies to intervene with health issues need to be implemented by teachers (e.g. using hearing loops) and visiting health workers. In particular the need for more counselling and other social and emotional wellbeing services for children was identified repeatedly. Depression and bullying were two issues that must be addressed in order to help children be ready for learning. Programs for troubled kids – either from domestic violence or other problems affecting their wellbeing and readiness to learn must be introduced. These would include programs that would give children tactics and skills to build resilience and keep themselves safe and aware of risky situations.

### **Increased involvement of parents<sup>22</sup>**

The workshops discussed many times that parents need greater understandings of their child's learning needs and increased involvement in strategies designed to address health and other interventions to ensure their effectiveness. Strategies to promote these aims would start simply with the school leadership. The principal should be introduced to parents each year, and be more welcoming to parents throughout the year. Staff would regularly visit parents with troubled children. Teachers would work with parents on their child's Individual Learning Plan so parents are aware of their child's achievements and the extra supports they might need to catch up with the benchmarks. Parents would be taught to understand that their child's early years are the formative years, the importance of reading and being around books and to find the time to read to their children at night and support children to do their homework. Programs should support cultural change and set "norms" re school and home behaviours that promote learning. Parents need to be taught how to teach a child if they are to be suspended and at home (although in-school suspension is

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<sup>21</sup> 1.1, 2.1 Output: Activities and supports within the school that enhance our children's overall wellbeing and readiness to learn

<sup>22</sup> 1.2, 2.2 Output: Parents/caregivers have access to support that will empower their children to engage and be happy at school

recommended). A training and development day for carers and parents to understand the syllabus and benchmarks for their child's performance and learning was another helpful suggestion made.

Programs are needed to empower and educate parents regarding parenting, including to educate parents about parental responsibility and the appropriate uses of discipline. Programs are also required for parents and children that encourage more respect for women in the community, stop children using abusive language, and that counter the influence of America Rap and raunch culture. We need to "drum in to children that they must respect their culture and elders".

### **Programs that teach respect and understanding for culture, identity and elders<sup>23</sup>**

The DEG's Elders and Youth camps were cited as a worthwhile strategy that has been trialled in the past successfully to provide part of a strategy to encourage Elders and families to enforce respect in their children of Elders and cultural identity.

### **Develop multi-agency long-term strategy to close the gaps in education training and employment<sup>24</sup>**

The need for a multi-agency approach was cited in the workshops, and such a strategy would develop benchmarks for the performance of organisations to produce the Strategy's planned outcomes. In addition the proposed Walgett Aboriginal Employment Strategy when implemented, would target children in schools, assist them to try out a range of different types of work experience and provide mentoring when they are employed.

### **Services to support kids to remain at school and transition to work or further study<sup>25</sup>**

The workshop participants agreed that just attendance at school alone should not count as an education outcome and that real education outcomes need to be achieved by the students and measured. Therefore strategies that assist students to remain at school must support the production of real education outcomes for these students. It was also noted by participants that social benefits schemes like Abstudy, Newstart and family benefits need to be examined to reduce disincentives for staying at school.

Strategies to support the aim of students staying at school included to improve the relevance of attending school for students; provide more experienced teachers who earn more respect from their greater authority. Reversing the failure of school suspensions would also assist, as would countering the peer pressure and negative view of education that may be impacting on the students from their parents. Impacts of substance abuse and other family and health problems may also need addressing in order for the student to remain at school. Careers advisors based in the school should work in regular class time with students to promote information about the study and skills they will need to achieve the careers they are planning. This would give school more relevance and more focus. This careers program should begin in the first years of high school so that students can experience and try different jobs and further study and these career programs should be linked firmly with local enterprises and tertiary institutions so that clear career study paths become more achievable. They should also be linked to the economic participating strategies recommended above<sup>26</sup>.

### **Blockages to women continuing at school identified<sup>27</sup>**

According to workshop participants control and abuse is imposed on women and girls which restrict their freedom to make their own life choices. Therefore for women to stay at school strategies have to be engaged that assist young Walgett Aboriginal women to have more information about their possible life-futures and the freedom and self-confidence to make their own choices. Family expectations, peer pressure and the pressures to begin a family are part of this control of young girls. Strategies that can be employed to alleviate these pressures include an examination of why the young mothers' crèche trialled in 2003 in the high school wasn't supported and redesigning that program to succeed. A community promotion campaign to change community attitudes about the

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<sup>23</sup> 1.3, 2.3 Output: School and its environment welcomes and celebrates diversity of culture and abilities

<sup>24</sup> 1.4, 2.4 Output: Community embraces education and the local schools

<sup>25</sup> 3.1 Output: Access to supports and services for kids to remain in schools and then transition to work or further study

<sup>26</sup> 3.1 Output: Access to supports and services for kids to remain in schools and then transition to work or further study

<sup>27</sup> 3.1 Output: Access to supports and services for kids to remain in schools and then transition to work or further study

value of staying at school would assist, as would programs that provide girls with confidence and independent thinking. Another recommendation was that girls should be provided with more training in the later stages of school to get them used to work and improve their skills in readiness for work<sup>28</sup>. The introduction of more creative ways to deliver literacy and numeracy should be implemented, including more sports-oriented programs and women's sports activities. School programs should include more life skills teaching e.g budgeting, setting up bank accounts, clean house, saving for an event like the show, literacy etc. Service providers should be brought into the schools to deliver these specific programs with teachers and it was recommended that programs delivered by Aboriginal healthworkers should target young girls from Years 5 and 6 to prevent early pregnancy and to understand the responsibilities and implications of pregnancy<sup>29</sup>.

## Safe Communities

### **Must reduce incidence of sexual assaults<sup>30</sup>**

The "Safer Community for Women" workshop agreed that priority must be given to reduce sexual assaults in Walgett which are unacceptably high.

### **Under-reporting of sexual assault<sup>31</sup>**

All agreed that rape is under-reported and we must find ways to encourage the reporting by women and children of rapes.

A blockage that must be recognised and cleared was that women are reluctant to report domestic violence ("DV") because DoCs get involved and there is a likelihood their children will be taken away from them. Another blockage to reporting is the lack of local sexual assault examiners. Children are not reporting SA because they think it's their fault - it's complicated because usually close family member, shame etc. The community needs to understand who perpetrators of child sexual assault are in order to reduce offences in the current environment where assaults are seriously underreported.

Strategies recommended to encourage reporting include providing more pay phones around town; providing females who women can report to (instead of male police), and providing local sexual assault examiners so victims are no longer required to travel long hours, often with male police, without a shower, for forensic examinations. If travel is required the victim must be accompanied by a female. Other strategies recommended include providing more counselling for SA victims, providing more support for families of victims in order to support the victim, and providing more protection for females and children when matters are heard in court. Programs are required that create the situation where victims (including children) aren't afraid to report incidences and ask for help either because it is a close family member, or because the victims think it's their fault.

### **Strategies recommended for reducing sexual assault and its associated harms<sup>32, 33 34</sup>**

Overcrowded housing was identified as a major factor influencing the incidence of sexual assault. Another factor is the lack of understanding of loving relationships and when sex becomes assault. Backyard parties were identified as a risk for children. Adults are supplying children at these parties with alcohol, marihuana, ecstasy, speed, morphine, and valium. Kids are assaulted when the parents are asleep.

Strategies recommended at the workshops include the introduction of programs for men and women and youth and children (delivering age appropriate content) that educate about loving

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<sup>28</sup> 3.2 Output: Children have access to courses and training that meets their interests and enhances their skills

<sup>29</sup> 2.5 Output: Young people have access to programs that provide education on pregnancy choices and build life skills

<sup>30</sup> 1.1 Output: Develop a plan which includes a coordinated approach to addressing community safety by building on the Walgett Shire Council's Safety Precinct Plan as well as national, state, regional and local frameworks and plans to develop a coordinated, whole of community, Walgett Community Safety Plan

<sup>31</sup> As above

<sup>32</sup> As above

<sup>33</sup> 3.1 Output: Access to services and supports that prevent child sexual assault and for victims of child sexual assault

<sup>34</sup> 4.2 Output: Reduce youth substance abuse

relationships and when sex becomes assault. Local counselling services must be supplied for victims and their families and perpetrators. DoCS must provide more workers to deal with all cases of SA and respond to the needs of the victims. Programs are needed that provide support for families to stand up and say sexual assault is not acceptable in our family, support families to take strong measures to sort out a perpetrator in their family and to not cover up sexual assault. Information could be provided about who to be aware of e.g. an on-line perpetrators list. More protection is required for female and child when matters are in court. Services in the community should be mapped and information about them fed back to the community including information about the accessibility of local and regional outreach services, what triggers a response from JIRT etc.

Overcrowded housing must be addressed by ensuring that there is enough affordable housing in Walgett for the needs of the population into the future. More flats are required for young people and housing for young families in order to reduce the conflicts and risks that arise in overcrowded housing. Governments must recognise that houses will only be destroyed if they remain overcrowded. More housing will ensure that the existing stock last longer.

A Goodooga strategy to reduce the harms of backyard parties was cited whereby party-organisers ring the police and notify them of their backyard party. Others believed backyard parties should be stopped as children just shouldn't be placed at that risk. Education programs are required for children and parents to raise an awareness of the risks, to give information about safety strategies and promote greater parental child protection. There should be a support program for the temporary (overnight or a few nights) community carers of children by providing them with food vouchers and washing machines, bedding; and children should know who they are. An Aboriginal Long Day Care Centre for 0-5 yrs is required so families can put their child in a safe environment when they have to deal with family issues. A refuge (other than the hospital) should be provided for children from 10 to 18 years where children feel free to stay if they feel threatened, if they have to escape their home environment.

The Aboriginal Legal Service should be more involved in crime prevention programs.

Ways need to be found for women to separate from their partners safely, and cooling-off places and programs need to be supplied for men.

### **Improve relationship between police and community<sup>35</sup>**

The workshop participants agreed that more support is required from police for victims of domestic violence including sexual assault.

Unhelpful blockages to the relationship include women victims being told 'they are not a taxi service' by police; the inaccessibility of the single DVLO police officer who is often on leave or not available when a DVLO is needed indicating that numbers alone would prove the need for more than one DVLO; police currently not communicating with WAMS and other DV and SA client support services since Tim Preston left.

Strategies identified that would improve the relationship with the police included that police provide more DVLOs and involve ACLOS in DV and SA as well, and liaise and case manage DV and SA victims in partnership with WAMS and Thiyamali and Barwon Cottage and other agencies. Police must provide females who women can report sexual assault and domestic violence to (instead of male police), ensure the provision of local sexual assault examiners so no need to travel long hours for forensic examinations, and if travel required, supply a female to accompany the victim. Police should provide consistent information to parents re their children's safety on the streets, and provide a child sex offenders list on-line so community aware of who to beware. Parents would appreciate if police or others took on a policy to bring children home from the streets "strongly". Police should introduce a party safety program which would incorporate strategies for notifying police about backyard parties and controlling the presence of children at parties after a certain hour. Police should tighten controls of liquor and cigarette suppliers, so that kids can't go up to the bottle shop, Chinese Café, Hon Doo, IGA and fish and chip shop and buy grog and /or smokes, and make sure

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<sup>35</sup> 2.1 Output: Increase positive relationship between community and police

displays are covered up etc. Control must be tightened over the taxi service supplying grog to minors.

### **Reducing risks for youth<sup>36, 37</sup>**

The Safer Community for Women workshop highlighted the need to reduce the incidence of children being in risky situations. This means the need to reduce the incidence of school suspensions and the need to stop the supply of drugs to children from a criminal element, as well as reducing the risks of sexual assault and family violence as discussed above.

As highlighted above, programs that provide support for the temporary overnight care of children are needed, as is a refuge where children feel free to stay if they feel threatened, if they have to escape home environment. Programs that educate children and parents and reduce risks from overcrowding and backyard parties have also been discussed and recommended above.

Other strategies suggested that will reduce risks to children included that girls and boys should have the opportunity to attend a camp like Tukundi in Narrandera where they are taught lifeskills and culture; the greater involvement of parents in any interaction between police and juvenile offenders; programs that provide support for juveniles returning to their community after juvenile detention; and programs that reduce drug use and depression in youth. Good strategies previously tried which should be repeated include camps for girls which give them an opportunity to open up and maybe report more and gain more confidence; greater use of Garule Wali which was set up as a location near Walgett where camps can be held for programs such as these, so children are taught to respect elders and parents in hands-on ways; and a community circle sentencing program for young people / children.

More youth sporting activities should be provided for girls e.g. netball, mixed basketball, tackle football. An indoor/outdoor Community Sports Centre that will attract teenage girls and isn't locked into the school, should be provided. More security at bore baths – e.g. a caretaker, would assist the bore baths to be opened for longer hours.

### **Troubled children including bullying behaviour<sup>38, 39</sup>**

Workshop participants believe that bullying behaviours are learnt from TV and DV situation at home from a pre-school age. They believe that parents need to feel more in control of their children and to be able to give appropriate discipline. Elders need to feel safe and free from abuse and harassment. Participants expressed the need to reduce the numbers of Walgett youth being suspended from school and “to drum in to children that they must respect their culture and elders”. They also said that the numbers of Walgett youth committing crime and in juvenile detention must be reduced; and that young people in detention need to come home for funerals and have more contact with their family, be provided with more education and counselling in detention centres.

A program is needed that attacks the reasons why children want to be suspended from school i.e. they are bullied by students and teachers. This program should particularly target parent's involvement in pre-schools and playgroups and schools<sup>40</sup>. More information about support services for parents should be made available. There should be programs designed for kids troubled by domestic violence or other problems that gives them greater skills to keep them safe, build resilience and awareness of risky situations. There should be a greater concentration of counselling services available for children in the schools.

Another suggested strategy included regular community information sessions from DoCS and police regarding parental responsibility and control of children, in order to empower parents to enforce family discipline once again.

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<sup>36</sup> 4.1 Output: Youth diversionary activities

<sup>37</sup> 4.2 Output: Reduce youth substance abuse

<sup>38</sup> 4.3 Output: Address supports to juvenile offenders

<sup>39</sup> 4.1 Output: Youth diversionary activities, 4.2 Output: Reduce youth substance abuse

<sup>40</sup> 5.1 Output: Families are strong (family of victims and offenders)



Programs are needed that empower and educate parents re parenting, that encourage more respect for women in the community, that discourage children and men using abusive language and that counter the influence of America Rap and raunch culture are needed. Such programs would work to encourage Elders and families to enforce respect in children of their elders. Elders and youth culture camps<sup>41</sup> that teach respect and understanding for culture, identity and elders were cited as a strategy that has worked in the past. Culture camps that provide support and cultural learning for women returning from jail<sup>42</sup> would also be of benefit<sup>43</sup>. A youth circle sentencing program was also cited as a strategy elders supported in the past.<sup>44, 45</sup>

### **More family support services<sup>46</sup>**

Family support strategies to increase community safety recommended by workshop participants include providing follow-up counselling, including grief and loss counselling, and other support services for victims of sexual assault and their families to help cope with the trauma, and for perpetrators.

### **More services for men<sup>47</sup>**

The workshop stressed the need for Walgett to reduce the numbers of people going to jail from Walgett and returning there. The subsequent harms to children from witnessing the violent way their father is taken away and harms from losing a father to jail need to be reduced.

Reducing domestic violence and sexual assault would drastically reduce the numbers of men being taken to jail. Apart from the many strategies cited above, workshop participants recommended that a cooling-off place for men and another place for women is required. It should be located on a property out of town and provide counselling to teach men how their violent behaviours affect their families. Young men 13 – 18 should be housed separately to the older men and respected mentors be made available to counsel the men. Specific strategies need to be implemented to combat men's depression. For a start Probation and Parole need a locally-based service. The effectiveness of sentencing options need to be reviewed and alternative sentencing options made available in Walgett. Organisations should be funded and trained to provide programs for men re DV, mental health, anger management, drivers licence training and support for men once they come back to Walgett from goal to divert from boredom and violence and reduce recidivism. We need programs that work harder to find employment for men with convictions and records. Men need training in jail and in the community after returning from jail. If "they get bored and drink, there's not much unskilled work (e.g. cotton chipping) around, they feel useless. Men are depressed and drink." More jobs will lead to less violence. One woman suggested a program "to teach men to build homes for the homeless or their own homes" which apparently works well in Kenya.

### **Need for women to actively progress these recommendations with government**

The view was expressed that government needs to be more realistic if it truly wants to improve community safety for women in Walgett. "They need to come here and see what is really going on and not jump to conclusions". Women participating in the workshops wanted to be informed as to whether government listened to these recommendations, and receive from and give feedback on a regular basis to government about these important matters.

Suggested strategies for achieving this objective included that the women wanted to elect their representatives to attend the Walgett Gamilaraay Aboriginal Community Working Party<sup>48</sup> and follow through workshop recommendations with government.

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<sup>41</sup> 7.3 Output: Elders are provided opportunities to increase their capacity to work with their community

<sup>42</sup> 6.2 Output: Women are provided opportunities to tell their story, 6.3 Output: Provide opportunities to strengthen the bond between mothers and daughters, 6.1 Output: Women have access to Women's Gatherings and Yarn-Ups

<sup>43</sup> 6.4 Output: Elders are provided opportunities to increase their capacity to work with their community

<sup>44</sup> As above ie output 6.4

<sup>45</sup> 7.3 Output: Elders are provided opportunities to increase their capacity to work with their community

<sup>46</sup> 5.1 Output: Families are strong (family of victims and offenders)

<sup>47</sup> 7.1 Output: Structure for men's gathering is established (healing strategies), 7.2 Output: Men are provided opportunities to get back to land

<sup>48</sup> 7.4 Output: Opportunities are provided for men and women to get together to move forward with regards to domestic violence

They also wanted to start a representative group and attract resources to be able to convene workshops with women to feedback progress on recommendations through the Walgett Local Implementation Plan for the RSD project (“LIP”). Their organisation would also deliver some of the strategies discussed during the workshops including to provide a centre and advocacy service for Aboriginal women, working with girls to build self esteem, confidence and respect; provide healing for women – recognizing the incidence of post traumatic stress disorder amongst domestic violence victims; provide services to help women succeed in education and generally work to support men and keep them in Walgett and out of jail<sup>49</sup>.

## Leadership and Governance

### **An Aboriginal women’s representative organisation<sup>50</sup>**

As discussed above, the women attending all workshops expressed the need to actively know the progress of their workshops’ output with government and the RSD project. The last workshop captured the women’s ideas for the aims and purpose of such an organisation and provided information about how it might be structured. The women want to form an organisation that provides a centre, advocacy and other services (including some of the strategies outlined above) for women and works actively with elders, men and the men’s group.

### **Elders’ cultural leadership and teaching role<sup>51</sup>**

In each of the workshops the need for healing and counselling, Elders’ cultural leadership and teaching role was identified. Some strategies specifically relating to Elders were suggested and have been discussed above. Yundiboo magazine was raised in the Health workshop as an effective community media outlet that should be used by Health departments to promote information about health campaigns and services to the Walgett Aboriginal community.<sup>52</sup> This gave the Dharriwaa Elders Group the opportunity to explain that after 11 years of monthly production, the funding for this magazine had been stopped but it could be revived again with regular sponsorship income from government community information campaigns.

### **The need for men’s, youth, children’s, families and health services and programs<sup>53</sup>**

Many strategies were identified by the workshops that would most appropriately be undertaken by a Walgett Aboriginal men’s service. Most of the strategies that were developed by the workshops could be delivered most effectively by existing Walgett Aboriginal community and other non-government agencies if they are given the human and other resources (including supervisory resources) needed to undertake them. The link now has to be made so that these organisations and agencies can set about planning how their services could be given the capacity by the RSD project to undertake many of these important tasks.

## Health

The women’s “Health” workshop helpfully provided lists of perceived barriers to the Walgett Aboriginal Medical Service, Rural and Remote Medical Service and the Greater Western Area Health Service<sup>54</sup>.

### **Barriers to using RARMS**

- You have to wait a long time

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<sup>49</sup> 7.4 Output: Opportunities are provided for men and women to get together to move forward with regards to domestic violence

<sup>50</sup> 2.3 Output: Support targeted community groups, 1.3 Output: Aboriginal agencies have access to supports to increase their capacity to operate efficiently and effectively

<sup>51</sup> 2.1 Output: Support the critical role of Elders in the community, 2.3 Output: Support targeted community groups, 1.3 Output: Aboriginal agencies have access to supports to increase their capacity to operate efficiently and effectively

<sup>52</sup> 2.4 Output: Celebrate good news stories

<sup>53</sup> 2.3 Output: Support targeted community groups, 1.3 Output: Aboriginal agencies have access to supports to increase their capacity to operate efficiently and effectively, 2.2 Output: Young people have access to leadership capacity building opportunities, 2.3 Output: Support targeted community groups

<sup>54</sup> 1.1 Output: Planned approach, collaboration and coordination across the Walgett Health Service System

- Takes too long for an appointment - by the time you get in you're better
- Medication is not free through Vlad's
- Receptionist very rude

### **Barriers to using WAMS**

- Staff don't treat patients with respect
- Long waiting time – sometimes waiting for hours just to see a healthworker let alone doctor, however some people on 3 month health plan may get through the system a bit quicker – this good
- Can't access WAMS doctors if admitted to hospital
- More friendly environment in reception needed
- Could offer prescription appointments only
- May have to walk to WAMS

### **Barriers to using GWAHS**

- Sometimes they come to the DEG health program and sometimes they don't turn up
- We don't know what GWAHS offers as a health service
- Do they do home visits to Elders? I've asked and they haven't visited
- More interaction between Aboriginal healthworkers with patients when they are in hospital and when they return home
- Communications skills training for hospital staff needed re manners with Aboriginal clients

### **Need for co-ordination and collaboration across the health system<sup>55</sup>**

Women in hospital would prefer to see their own doctor.

Women expressed the need for doctors and other health personnel to access medication lists and health records immediately regardless of their location as patients need to regularly skip between doctors and many other health professionals and often can't keep up their own knowledge re medications and memory re treatments etc. Some patients have experienced trouble with new doctors trying new medication when unaware of the patient's health history. They discussed the possibilities of **E health** – i.e. that medical health records should be available anywhere. Some concerns were expressed about confidentiality but all thought these concerns would be allayed with community promotion and good design of program. It was suggested that E-health would be good for referrals and getting second opinions and reducing risks for penicillin alerts and allergy sufferers.

**Better discharge planning** is needed particularly when patients have just returned home after major surgery and need some follow up at home.

The need for **better access to specialist services** and the recent loss of Dr Cranswick heart specialist was cited, as was the current requirement to travel to consult heart, renal, respiratory, hearing, ophthalmologist specialists and alcohol services.

Solutions suggested were **better patient transport resourcing** for RARMS and WAMS locally and anywhere (including Sydney); and increased use of video conferencing between remote specialists and allied health professionals and locally-based GPs and AHWs<sup>56</sup>.

Women expressed the **need for more community awareness of existing services** and how to access them. For example they would like to know when the dentists and doctors and other services are in town.

Strategies suggested to address this need included to **promote more awareness of health programs and services** through a community calendar, better information flow between the Interagency and CWP, and more networking between services themselves and community. The employment of a facilitator position who would work with agencies to get message out to community

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<sup>55</sup> 1.1 Output: Planned approach, collaboration and coordination across the Walgett Health Service System

<sup>56</sup> 1.3 Output: WAMS has access to additional funds to respond to internal capacity building

about services, was suggested. This person would get around the community and have cups of teas with families to tell them about the services. The use and support of local community media was recommended e.g. Yundiboo magazine should be used for community health promotions and information dissemination via community noticeboards in town, Gingie and Namoi was called for. The women suggested that a more personalised approach should be used and that regular informal chats in people's houses or out in Gingie Shed should be implemented. Family Fun Days and BBQs were not considered effective community promotions as they communicate very little information about programs – just provide a good day out.

The women thought **a more personalised service from Aboriginal Health Workers<sup>57</sup>** is required, that health workers should be out and about visiting people in the community “like they use to” as the sick and elderly and their carers often cannot get to them. **Young carers need more information and support.**

More regular and better access to **permanent doctors and dentists<sup>58</sup>** is needed, and **a triage strategy** was suggested so that priority can be given to more urgent cases and waiting hours reduced. Script only days were also seen to be an effective way to cut down waiting times too.

An **emergency dental service** should be provided by doctors and nurses when there is no dentist available locally, and some dentists need to be taught how to work with children more appropriately.

An Elders' Health program that visits homes, provides information and access to other services, patient transport, follow up after returning from hospital and home delivered prescriptions is needed.

**More access to allied health services is required<sup>59, 60</sup>**

Grief and loss counselling, more understanding of dementia and palliative care services, knowledge about ACAT and support for carers were identified as needs for Elders and their families by the women present. Faster receipt of glasses from Eye Health programs was also mentioned.

Drinking water quality and water fluoridation were mentioned as important environmental health concerns. The over-chlorination causing diarrhoea and vomiting was cited.

**Need retention of health workers in Walgett.<sup>61</sup>**

The huge costs to bring in outside allied health people should be spent to train up, professionally develop and keep local people in these roles e.g. in podiatry, counselling, midwifery. Strategies suggested to implement this aim included making the hospital and WAMS friendlier workplaces and providing greater incentives for healthworkers who do work in Walgett. Traineeships should be offered by WAMS and the hospital to attract young school-leavers. One of the reasons young local people leave Walgett is because they want to be independent from their families but the housing shortage prevents their independence. Housing and a good salary should be provided to keep health workers in Walgett.

**More alcohol services needed in Walgett<sup>62</sup>**

More dry-out and other services including counselling for alcoholics are required in Walgett and the effectiveness of existing services needs to be improved. Drunks need support services when returning from dry-out and rehab, otherwise dry-out centres and rehab services are wasted. Alcohol programs need to address extreme depression in clients who self-medicate to cope. The combination of grog and marihuana needs to be addressed.

Women stated that alcohol counsellors should be interacting daily with and embedded wherever people are most comfortable for example with the Dharriwaa Elders Group for Elders, with the

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<sup>57</sup> 1.3 Output: WAMS has access to additional funds to respond to internal capacity building

<sup>58</sup> 1.3 Output: WAMS has access to additional funds to respond to internal capacity building

<sup>59</sup> 1.2 Output: Allied health services identified

<sup>60</sup> 1.3 Output: WAMS has access to additional funds to respond to internal capacity building

<sup>61</sup> 2.1 Output: Workforce is supported and given professional development opportunities resulting in retention of staff

<sup>62</sup> 3.1 Output: Increased access to drug and alcohol detox and rehabilitation

Community Centre for youth, the GGAMG for men. Other workers in these services should be provided with mental health first aid skills and referral pathways for their clients to counselling and other support services.

Programs are needed for young mothers to **reduce the incidence of foetal alcohol syndrome** and smoking foetal damage. More effective community awareness needs to be promoted to young people about these harms and young mothers need self-esteem building so they are strong enough to ask the midwife for help to give up drinking and smoking. Family understandings need to be developed so the families of young mothers can support them to give up grog and cigarettes during pregnancy.

**Need increased access to mental health services and knowledge<sup>63</sup>**

Improved community awareness of available mental health services and mental health issues especially depression and grief and loss counselling is required. Vulnerable families and children need help to develop coping skills when a death in the family or if they have a disabled child. More health workers are needed to provide outreach services for domestic violence and mental health.

**A full dialysis service is required in Walgett<sup>64</sup>** so those who cannot implement their own dialysis at home can receive dialysis in Walgett.

**Important health issues to teach in schools<sup>65</sup>**

Workshop participants were asked to prioritise a single health message to be delivered in schools but the women stated that they couldn't prioritise health issues as they are equally important. They listed issues they would like taught in schools by healthworkers to include drugs & alcohol, safe protected sex, the way your hormones work, hygiene, domestic violence in the home, sexual assault and rights of the child to say no, nutrition, food additives, sugar, eating healthy, prevention of pregnancy, having babies, POHPE, depression, mental health.

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<sup>63</sup> 3.2 Output: Increased access to mental health services

<sup>64</sup> 3.3 Output: Increased access to renal services

<sup>65</sup> 4.1 Output: That health strategies are incorporated into Early Childhood, 4.2 Output: That health strategies are incorporated into Schooling



## **Appendix 1: Workshop #1 Notes**

### **“Safer Community for Women” Aboriginal Women’s Workshop #1**

Held: 9.30 am 2<sup>nd</sup> November 2010, Walgett RSL Hall.  
Facilitator: Wendy Spencer  
Scribe: Leigh Leslie, Wendy Spencer and workshop participants.  
Attendance: 31 Aboriginal women, 1 non-Aboriginal Facilitator.

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Welcome: Aunty Gladys Walford welcomed women to the workshop and explained how it was organised by the Dharriwaa Elders Group Women’s Group.

Introduction: Wendy Spencer explained that the aim of the Dharriwaa Elders Group of these workshops is to capture information that the Aboriginal women of Walgett want to tell the Government about how they want to make their community safe through the RSD project. She read out the Six COAG Targets of the Closing the Gap on Indigenous Disadvantage: Remote Service Delivery Project, and outlined the four workshops which the DEG hopes many community women attend: A Safer Community for Women, Women’s Health, Schooling, Jobs and Training, Information for those wanting to set up an Aboriginal Women’s Group.

She explained how beadmaking gear had been supplied if women want to make themselves an item of jewellery to take home, while they are talking, and how butchers paper is supplied on each table for notetaking, as well as projected notes scribed by Leigh Leslie. She explained how at the final workshop the notes from the previous three workshops will be checked by the women before they are then sent to the Walgett Community Working Party for endorsement into the Walgett Local Implementation Plan of the RSD project.

After this introduction a series of questions were asked of the participants and following are their responses including the responses that introduce new subject areas.

#### **What is community safety for you and your family in Walgett?**

- More support from the police for victims
- Women get told “we are not a taxi service” by police

#### **What is a safe home for you and your family?**

- More pay phones around town
- More flats for young people
- Need more housing for younger generation therefore less conflict at home – currently 3 to 4 families in houses.
- Women too frightened to go home if a violent man
- Need teenage shelter. There is no safe house for boys under 18 or girls under 18. Need does start from early teenage years, starts at 10, and 15 years old.
- Need more support for elders that get stood over by their children and grandchildren

#### **Are liaison officers trying to connect to victims of DV?**

- There should be more DV officers; they only have one in Walgett and she’s often not available e.g. leave, rostered day off, etc
- Women are reluctant to report DV because DoCS get involved and there is a likelihood their children will be taken away from them
- More support needed from services for families; currently victims get their support from their family
- Victims of sexual assault have to return to the community and there is no follow-up counselling when it occurs, especially for males;

- There is a need for counselling services for victims and their families to help cope with the trauma.

### **When do women first start to experience sexual assault and violence?**

Starts at a young age 10 years of age – backyard parties are a risk for kids – there should be more control – young kids are getting drunk and at risk from drunks.

Adults are supplying children alcohol and drugs e.g. ecstasy, speed, morphine, valium

### **Some solutions**

- At Goodooga they have to ring up police and tell them they are having a backyard party
- Kids can go up to the bottle shop and buy grog and smokes – they don't ask for ID
- Some outlets still don't have their cigs covered up – it is known that a 16 yr old has bought smokes from Chinese Café – Hoon Doo and fish and chip shop
- Stop backyard parties – solution is to put a time limit on young kids being there
- Police should enforce the law more stringently
- IGA is an offender for cigs
- More payphones, more public housing; more public flats for single people
- Feel safer at home if less overcrowded – overcrowding causes conflicts – women are too frightened to go home if there are violent male in the house. Sometimes there are three to four families living in a house
- Taxi service picks up grog and delivers to the house; sometime underage people are ordering grog and the taxi delivers; Taxi driver should ask for ID
- Government needs to set aside money for new housing; patching up the houses does not solve the problem. The house gets wrecked because the same amount of people living the house
- Department of Housing are should buy new houses, and stop selling off stock
- Tenants only see the DoH every two weeks and need better DoH workers as current ones “full of lies”
- Prospective tenants are told they will get a house in two weeks and are still waiting 3 months later
- R&M e.g. grab rails have been asked to be installed for elder person and haven't been installed 1 year later

### **Are there Walgett children at risk of sexual assault?**

- Need children's safe house; where children feel free to stay if they feel threatened
- Need education programs to protect children and make them safe e.g. teach about parties at home, parents need to be aware of where their kids are, kids are assaulted when parents are asleep; parties going on while kids are trying to sleep; kids escaping the home environment because they don't feel safe
- Need more support for temporary (overnight or a few nights) carers e.g. food vouchers and washing machines, bedding. Need o'night service Wed – Sun every week. 24 hours
- Need more counsellors at schools
- Kids intentionally get suspended from school e.g. when they return to school the next day they try and get expelled again. Need to stop silly suspensions at school and kids being on street where they are at risk
- Kids want to get expelled from school because they are getting bullied by students and teachers
- They are learning bullying from TV and DV situation at home
- Bullying even starts at pre-school – can we try for parents to have more involvement at pre-schools?
- Aboriginal Long Day Care centre – so they can put their child in a safe environment so they can deal with their other issues – they use to be one but it folded; 0-5 yrs
- Mothers should be more involved in pre-schools
- There is a playgroup up at Euragai but some people living at Namoi and Gingie have not transport the access it; some women have 5 kids and no transport.

- Library has a playgroup one day a week with mothers and bubs; why isn't it happening in the schools?
- Inland Mission have a paint and play playgroup
- Gingie wants playgroup 3 times a week;
- Needs more information on Parent Support services
- Suggest mudmap of services

### **How can we reduce the number of people getting sent to jail (and returning to jail) in Walgett?**

- Reduce domestic violence
- Probation and Parole only visit once per week; use to have men's DV, mental health, anger management etc., but has folded; case load is overloaded for people to do community hours; there is no monitoring for people doing community hours
- Need drivers licence training
- There is no support once they come back to Walgett from goal so nothing to do but bash women
- Men with convictions and criminal records find it difficult to get a job
- There is training and education in goal; the environment in goal is better than in the community
- More support programs for men before they go into goal; they get bored and drink; not much unskilled work (e.g. cotton chipping) around; feel useless; men are depressed and drink
- Teach men to build homes for the homeless or their own homes e.g. in Kenya the program works well
- Men need programs when they are released from jail. Men need jobs when return from jail
- Need more programs for men before they go into jail, and more support when they return from jail
- More jobs will lead to less violence

### **Is it better for women when the males are in jail?**

- Young women use AVO's to have their partners locked up so they can have some freedom or to keep them away
- Affects children re losing father and the violent way their father is taken away

### **What are some of the needs of young people in detention?**

- Coming home for funerals
- More family contact for young people in detention
- More education in detention centres and jails
- Need more counsellors

### **Do you think that fewer kids would be sent to detention if they did better at school?**

- Some kids are in the street at night as young as 9 yr olds; where are the parents?
- 14 yr olds kids can walk out of the house and parents can't do anything about it
- Police tell people that Walgett is safe and their kids are safe going out at night, next thing they are bring kids home and tell parents that they will have their children taken off them if they are out at night
- There are a lot of troubled kids – not just from domestic violence
- Kids need education at school – then less would be in trouble
- Something needs to be done to get kids off street

### **How can police, DoCS, legal system support families?**

- Kids can say they are bashed when they aren't e.g. my parents punched me
- No ½ way house; going to people's houses for a feed; why would we want a safe house when all parents want is for their kids to come home?

- Community responsibility that used to be happening doesn't happen anymore because they might get into trouble with the law or the kids parents; people are afraid to discipline someone else's kids now.
- Parents do not feel in control of their children or able to properly discipline their kids because of the law and the threat of DoCs taking the kids away.
- "We can't handle it ourselves because the law and DoCS getting in the way preventing parenting."
- "When kids are out you worry"
- Kids need to be fed
- Kids need to be taken home strongly by police
- Why can't we stop the supply of drugs to the kids?

**What are some ways that people could show and/or encourage more respect for women?**

- Stop children from swearing and generally the way some men talk
- TV, music programs – American Rap culture have influenced the young people to behave disrespectfully

**Do you think that if kids were more proud of their own culture they would be less likely to follow American culture?**

- No respect for elders – use to be drummed into the older generation of kids – not happening now
- There should be cultural camps for kids; kids need to respect their culture and elders and be taught that their culture and identity, respect and understanding important
- Need to wack kids to instil respect for elders
- Youth Group camp didn't happen – kids disappointed

**Do you think sexual assault is an important issue in our community and why?**

- Yes
- A lot of unreported incidences
- People affected by sexual assault e.g. victims and family members are afraid to talk about it as shamed and also closely related usually to perpetrator
- Younger kids are too afraid to speak out because they think it was the victim's fault
- Male side of the community blame the female e.g. how she dresses, getting drunk
- Men are depressed
- Men are victims too
- Some victims carry the burden of guilt for years
- Kids are not given support to talk about their sexual assault. Kids need to be made comfortable enough to report sexual assault
- Need more houses at Gingie – current houses burnt due to poor building

**Will our issues be follow-up with government?**

- People want to be told what happens to this information when it goes to government – are they listening?
- Women's Group need to have representation on the CWP and other meetings to progress women's issues in Walgett
- .there needs to be follow up with women to see what happens from this

**What sort of support do families need?**

- Years ago, police and parents had community aid panel for youth e.g. circle sentencing;
- Police putting kids in hospital because there is no refuge for kids and they need to escape home environment

**What support is needed by families of men that go to jail?**

- Men get taken by police when they bash women. The police take the man to relative and then he goes back and bashes the women again
- An organisation should buy a property out of town – a cooling off place with counselling to teach men how their violent behaviour affects their family, male youths should also go to the property
- Separate place for young men 13 – 18 to be housed
- Respected mentor should be available for young men to talk to

### **How do you feel if a known perpetrator has a leadership role in the community?**

- No one wants to break the silence, shame
- We need to know who are perpetrators
- Girls Camp: take girls on camps so they have an opportunity to open up
- boys should also have them e.g. Tukandi – for boys at risk where they are taught lifeskills and culture at Narrandera
- No support for kids when they return from juvenile institutions
- More services for people trying to give up drugs
- More for kids to do; nothing for them in Walgett they use drugs to escape depression
- Garule Wali was tried in the past – need a place where suspended kids could be taken so kids could be taught to respect elders and parents in hands-on ways
- Mercy Camps; women in goal come out to do cultural camps
- Need more sports activities – teenage girls like netball, mixed basketball, tackle football
- Community Sports Centre in Walgett with multi facility e.g. indoor outdoor venue that isn't locked into the school
- Offer more activities at the pool. Bore bath closes at 4:00pm – keep it open later
- Need more security at the Bore Bath – a caretaker.
- More awareness regarding sexual assault programs

### **What prevents women reporting rape?**

- Have to report to male officer
- Have to leave town for examination

### **Do the victims get harassed by the families?**

- Yes and they get labelled as promiscuous and will sleep with anybody
- Town turns a blind eye

### **What will it take to have the community not turn a blind eye?**

- People who commit crimes and have done jail time are forgiven very quickly – but not forgotten
- Complicated for Aboriginal people to accept and tell the family that the same relative has reoffended
- Parents and family cover it up that's why a lot of things don't get dealt with
- Need support for families of victims to support the victim
- Need support for families to stand up and say this is not acceptable in our family
- Biggest problem with Aboriginal people; they can't voice their emotions
- Not much protection for the women or the child victims of sexual abuse. Need more protection for female and children when matters are in court. They have to live in the community after giving evidence
- A lot of families won't ostracise the offending relative
- More counselling for SA victims
- DoCs doesn't have enough workers to deal with all cases of SA and respond to the needs of the victims
- Mandatory reporting is online
- Need an offenders list on-line
- Should perpetrators be exiled? – wouldn't work



- Since DV officer with police left (i.e. Tim Preston) WAMS and other services have not been kept in the loop of police information regarding any SA. Poor communication with DV officer, police re DV services
- What would it take to report more assaults? – families need to deal with it internally
- DoCS and schools pass the buck for reporting an assault

### **Have the sexual assault services improved?**

- At the moment only one female SA doctor in Orange can do forensic examinations, one male SA doctor in Dubbo
- Police are bettering their service where it goes to the person, to the hospital. Hospital still in negotiation regarding their responsibilities. All SA cases need to go through the hospital and examined by a qualified medical staff – only 7 days to report the rape for forensic evidence to be collected.
- Needs to be more local support – all victims want to do is have a shower
- 2 doctors have put their hands up to be trained in Bourke – Bourke is closest DNA
- Need SANE nurses and no police transport for SA victims

### **Priority**

- Need more support for people from police and others in general for victims – i.e. women and children. Police always on leave – only 1 x DVLO
- Support for assault victims – grief and loss counselling
- Support for families of victims
- Support for families in general to prevent violence and provide support afterwards
- More education and awareness of what sexual assault is – when is it sexual assault?
- Map services in community and feedback to community
- Find out what brings outreach services for these programs if they do exist? What local and regional services exist , what triggers a response from JERT etc
- We want government to be more realistic, come here and see what is really going on and not jump to conclusions

## Appendix 2: Workshop #2 Notes

### **“Schooling, Jobs and Training” Aboriginal Women’s Workshop #2**

Held: 9.30 am 23<sup>rd</sup> November 2010, Walgett RSL Hall.  
Facilitator: Wendy Spencer  
Scribe: Leigh Leslie, Wendy Spencer and workshop participants.  
Attendance: 13 Aboriginal women, 2 non-Aboriginal women including Facilitator. Two guests from DEEWR and Australian Inland Employment Services were invited to attend to assist with information if required.

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Participants were welcomed and an introduction to the aims of the workshop was presented.

The Dharriwaa Elders Group is organising a series of 4 workshops and the aim of today is to end up with a list of programs in the area of education and training. We will collate the information and present to the last women’s workshop for checking and then the CWP for endorsement and to be entered into the LIP.

The fourth workshop is to provide information for those seeking to set up a Walgett representative Aboriginal women’s organisation, and to select a representative of Aboriginal women to sit at the CWP table. Hopefully the women present at the fourth workshop will follow through with today’s findings and in the future progress issues that the women of Walgett feel that are important through the CWP and provide information and feedback back to Walgett Aboriginal women.

She explained how beadmaking gear had been supplied if women want to make themselves an item of jewellery to take home, while they are talking, and how butchers paper is supplied on each table for notetaking, as well as projected notes scribed by Leigh Leslie.

After this introduction a series of questions were asked of the participants and following are their responses.

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#### **In an ideal world would you work? How would you be spending your time?**

We need to work to improve the conditions that we live in. Times have changed where traditionally women looked after the family, everyone had a role and everyone got fed, but now you have to work to adequately provide for your family. Aboriginal people are more disadvantaged, so we have to work harder.

#### **What do you want for your future?**

- Work to give kids a better lifestyle
- Further studies
- More support to stay at home to look after their families

This is a good start and we need to incorporate old world with the new.

#### **What are barriers to achieving this future?**

Some of the issues are around abuse, either young girls or women, and the control that is imposed on them i.e. women need the freedom to make their own choices. Some women feel like they can’t get out and work because of control, abuse.

If you look at Aboriginal men they have lost more in society - everything was taken away from them which has led to substance abuse, they are more likely to come into contact with the police, and so

men are less likely to be employed than women. It comes back to the women to earn for the family which disempowers men bringing about resentment.

### **Strategies to breaking these barriers**

- Women need to educate young men early, and assist men to cope with the changes – i.e. to build resilience and to have hope.
- Educate Women not to put up with abuse. It's not acceptable to be abused
- School-based traineeships

### **School-based traineeships**

Are there any school-based traineeships in Walgett? Would it be useful for women to have more training in the later stages of school to get them use to work and improve their skill set to work?

Not many opportunities for work experience, training

Strategy: Career education should start at year 7, so girls try different careers, try a few possibilities and make an informed decision about their career path. Gives them enough time to swap and change.

### **What sort of jobs would you like there to be for women in Walgett in an ideal world?**

- Repairing the destruction of the rivers, Native vegetation around the rivers – not a lot of work around it. Carp eradication – dry them out and sell for fertiliser. Setting up a Caring for Country project to eradicate weeds keeping the rivers health. Doesn't have to be huge just a small group of people to do it.
- Wind farms & solar energy enterprises – addressing high cost of electricity

Barriers: CMA is in Tamworth and don't come to Walgett to ask us what we want.

Anywhere in NSW you've got beautiful parks, picnic shelters and gardens. Its like areas of high Aboriginal population are out of sight out of mind. They get huge wages and don't come to Walgett – we need to make them accountable. Yet we are expected to do it voluntary all the time.

We need to form a group and meet with the CMA to make them accountable.

CMA came to Walgett and not many people turned up just a few DEG. They didn't plan/promote it properly. They just tick the boxes more genuine consultation needs to occur.

- Landscape parkland and town beautification projects. Beautification projects need to happen in Walgett long the river, community market garden, medicine garden, CDEP and other employment opportunities.
- A lot of young women ask for hairdressing traineeships big demand. Undertaker or funeral director, florist, beautician, deportment & grooming. Strategy: June Dally Watkins has visited to undertake self-esteem, grooming and deportment classes and this needs to happen again.
- kitchen work
- cleaning
- secretarial
- fashion
- WWW-based selling e.g. Ebay

Strategy: Create a pool of human resources e.g. typing, clerical, and secretarial, project management and submission writing.

TAFE: "We had these sorts of courses but no one turned up". This says more about the TAFE, not the people. Perhaps a training mentor is needed or mentoring team.

### **What sort of training needs to happen to improve employment opportunities?**

TAFE have an Aboriginal employment strategy.

“There should be more Aboriginal people at the front desk of every government organisation in Walgett”. Should be mandatory for government staff to undertake cross cultural and cultural immersion training. Need better selection processes for all staff in Walgett organisations. Start in Shire front office.

Probably need a mentor to mentor women and girls through family etc., issues e.g. not giving up the job because you've had a few days off through family issues.

Support resources for Aboriginal support and training for employment are stretched. There is an urgent need for this support in Walgett.

Strategy: target people in school and help them to try out a few jobs. If they decide to get employment at the Shire mentoring should be in the induction package

Strategy: The Shire and other government departments in Walgett need to have an Aboriginal Employment Strategy.

Strategy: Cultural immersion program for all new non-Aboriginal people coming to work in Walgett

Strategy: Mentors in the workplace

### **Are there any other barriers to employment?**

- Day Care is an issue for working women; although there is Aboriginal priority system in place at Coolabah Kids – but if a police officer comes to town they seem to be given a place straight away
- Organisations need to advertise how many Aboriginal priority placements there are
- Women can't access Day Care because it's full or too expensive
- Council was trying to setup a Day Care service but it folded
- Limited Day Care places mean that women can only work part-time. Women would like to work full time.
- Affordability of Day Care
- Application when written by the JSA does not match the person. Women need training to write the job application themselves
- More women need to be trained how to do well in interviews. They don't turn up for interview - nervous because of interview yet application was great. They need to go through a mock interview because Aboriginal people don't like talking about themselves. Need to be taught interview techniques and be mentored through process. This could be done at school.
- Selection panels need to be looked at e.g. the merit system needs to be overhauled. Selectors need to be aware that jobs are hard to fill in Walgett.
- Selection panels need to acknowledge conflicts of interest.
- Selection panels need to be sensitive to the factions in Walgett
- Sometimes on these selection panels the Aboriginal person is sitting on a panel with about 6 non Aboriginal people so Aboriginal person may be unable to participate effectively in selection process
- Criminal records are a problem – people don't apply for jobs because they think they'll be knocked back.
- Lack of drivers licence a barrier

**What sort of hours and working conditions would suit different women?** Women are different, young women don't have the time because of family. Young mothers would like to work 8:30 to 3:00pm so that they can be with their children after school.

### **What about when children are sick?**

- WAMS flexible work hours good for young mother - ideal

- Sometimes things like ABSTUDY restricts the hours of work because it pushes you over the threshold, and other disincentives to social benefits;
- Service providers need to deliver their services when required e.g. on the weekend or outside 9 - 5. Activity needs to be more targeted towards their clients and when they are needed e.g. Youth activities need to be in afternoon

### **Are there anymore blockages for women working? Why do some not stay at work?**

- Women might leave work because they might have a work related issue and reluctant to talk up - might be harassment, intimidation, bullying.
- short-term projects e.g. pilot project
- looking after grandkids due to substance abuse, domestic violence
- Sometimes money is not worth it because benefits and subsidies are cut, childcare takes a big slice of income (e.g. \$55 day) only leaving say..\$50.00 take home pay.
- There is a need for public transport i.e. transport to get to job
- The biggest hurdle is white people's attitude to Aboriginal workers; they believe they are smarter. There are a lot of Aboriginal people sometimes smarter. They don't trust their Aboriginal workers – so Aboriginal people need other Aboriginal people to support them in their workplace
- They are pre-judged before they start the job

### **Is on the job training important?**

- On-the-job training needed
- Cultural training should centre on non-Aboriginal culture e.g. where they come from – self awareness about their culture and attitudes. There should be two-way cultural awareness training for Aboriginal and non-Aboriginal people
- On-the-job training would be good to develop skills in use of GPS, Software packages, typing, shorthand, literacy, information about what Walgett organisations have to offer, job specific literacy

### **What about other types of support in your job?**

- Counselling in gambling, drugs and alcohol
- More Aboriginal counsellors at counselling services would make our women feel more comfortable;
- Need support mechanisms in place all the time e.g. have counselling services based in Walgett

### **Skills and knowledge needed in life by women?**

- Budgeting, managing finances
- Confidence – public speaking
- Confidence speaking with a range of people. When too shy to attend meetings need a push
- Work/life balance – better organisational and time management skills to cope with work and home/family;
- Parenting skills are not the responsibility of grandparents. Need to teach parenting skills, work with young families to learn how to support their children

### **School Years**

#### **Is there anything in particular that causes girls to leave school early?**

- Peer pressure e.g. boyfriend may not want them to go to school
- Drugs
- Home life
- Girls being suspended often



- Inexperienced teachers put kids off. More experienced teachers make it easier to stay at school because they are older there is more respect and authority figure
- School needs to be more relevant
- Parents need to understand that the early years are the formative years. Schools aren't relevant to the parent's life so they don't see the relevance of education and therefore their kids don't see its relevance
- Importance of reading and being around books. Parents need to find the time to read to their children at night and support children to do their homework.
- Working parents have a better appreciation of education
- Historically Aboriginal people were not able to access education so there were no 'norms' set
- Home and school require children to have different behaviour sets e.g. home-open discussion; school – to keep quiet and listen. Kids are taught not to ask questions at home and then are asked to be active in school. Many kids at home they are looking after kids and taking more responsibility - Young kids are responsible for their siblings which makes it hard for them at school
- Schools need to use their AEO better. Need to define the difference between AEOs and teacher at schools better. Need job description for AEO
- Do they have too many Aboriginal Education Officers at the school? No – they need to be utilised 'smarter,' and be more effective in their role.
- Young mothers bad experience at school gets carried over and instilled in their children

### **Is there a way that we can help parents understand more the importance of school?**

- Getting the parents involved early so they understand their roles and responsibilities re parenting and education early. Parents should get involved in playgroups. Parents want to get away and leave the kids with grandparent. Parents need to be educated in the responsibilities of parenting
- Overcrowding and depression impacts

### **Is there anything at schools to help student mothers?**

- There was a crèche at school but the problem was with the grandparents not wanting the grannies going to the crèche at the school. It was trialled in 2003 but stopped due to lack of support

### **What could have been done differently?**

- The crèche worked OK – but no support from the parents
- Need Aboriginal healthworkers to support young girls about young pregnancy, before they get pregnant. Should start program year 5 – 6 to education the girls about prevention of pregnancy
- Need promotion in community to promote value of girls to stay at school

### **Are there more young boys or young girls staying longer at school?**

- More young boys are staying at school because of ABSTUDY
- More boys achieve at school but are they learning? Just the numbers is not good enough for Closing the Gap. Just attendance alone does not count as an outcome; education outcomes need to be achieved by the student.
- Young girls when they get pregnant get social benefits
- Parents have to support kids until they are 25 before they get Newstart.
- Need careers advisors at school working with kids to look at what they need to do to get to where they want to go – this would give school more relevance and more focus
- More work needs to be done to understand the achievements of Aboriginal students. A lot of teaching is just babysitting. Support mechanisms needs to be in place for students to achieve outcomes – identifying the gap and then providing to support to close the gap.

Strategy: It would be good to follow stats of remote Aboriginal students as they move around to different schools and communities and compare their achievement between schools.

Strategy: more work to be done to design how stats collected re education achievements

Need more support for literacy rather than behaviour programs. If a class is engaged then they will be literate. Relevance of teaching and adequate delivery needs to be examined.

When students move schools they should be marked absent and not taken off roll unless they are enrolled elsewhere

**Do you think students should have to have clearer career paths to example ranger programs and the other enterprises and jobs you talked about wanting to see in Walgett earlier?**

- Need more linking between school careers programs and enterprises e.g. Caring for Country enterprise
- Should be more lifeskills e.g. budgeting, setting up bank accounts, clean house, saving for an event like the show, and other lifeskills.
- Literacy needs to be included into lifeskills
- Literacy should be more concentrated on as a lot of courses currently delivered leave kids not good enough to get into TAFE. Many illiterate kids in Year 9
- Needs to be an 'Individual Education Program,' developed by teacher for the child, to bring them into mainstream in conjunction with the parent, LST (Learning Support Team), student and teacher, which is an accepted methodology to learning. Parents can ask to meet with the child's LST. It's up to the LST to make sure that this IEP happens.
- Every child should have a personalised learning plan IEP and parents should ask for it.
- Why aren't the kids that turn up day after day learning? Need to focus on the ones that turn up at school as they are still illiterate
- If the IEP is implemented tutors can work with individuals but this doesn't happen in Walgett. Coonamble School has tutors to work one-on-one during school hours. Should be the teacher that prepares IEP – but you'll find the executive does it.
- Parents play a big role in education. Some kids can't sleep at night, kids take the fighting into the school from home
- service providers that deliver a specific service should be brought in to children's education and deliver specific programs and support teachers more

**Is there anything about the structure of the Community School that could be improved to help kids stay at school and achieve more?**

- Structure at top needs changing
- In some areas they could keep the family groups of students together
- The professional structure at the top e.g. the message from the top should be the same down the bottom e.g. with behaviour policy. Currently different instructions to primary and high school re behaviours - needs to be consistency in enforcing behaviour across both sites
- No teachers should put up with abuse from students or parents. School should have high expectations about behaviour and not accept any bad behaviour
- Children need to be talked to when they swear as there could be abuse going on at home, and they need to be told this is not acceptable
- Teachers, parents and students need to work together to work out how they want their education.
- Should have streams of well behaved kids and others for misbehaving children so good kids not disrupted
- Should be something like a work farm to teach work life skills e.g. work ethics, work experience to look after animals, look after elders, make cakes for elders, etc teach and help them learn compassion and respect. They know about respect because they show respect at funerals
- Location out of town e.g. investigate Warrengulla? They should be separated e.g. well behaved/bad behaved. Structure needs to accommodate the IEPs
- Teachers can't control kids on excursions
- Youth and Elders camp: after a week the attitude and confidence changed in some of the kids, could have a few nights out there.

- Need routines for kids and for it to be ongoing
- Teachers can be flexible, but it's no good teaching things if the kids are not listening
- Are dormitories the answer? A dormitory in community to learn living skills. It needs to be structured e.g. up early do exercise, shower, literacy, hands-on
- Parents need to be involved in the way education is delivered to their kids, in talking about the structure
- Sports program in schools and other creative ways to deliver literacy and numeracy education.
- Career program in schools
- Location of middle school at primary didn't work – teachers didn't want to look after kids
- Team Teaching should be delivered where the person with specific skill sets deliver those programs e.g. maths, science. But currently team teaching not working as teams of teachers don't work together well enough, and they mix different teaching styles. Primary school staff are currently teaching in secondary school within other key learning areas i.e. other subjects that they are not familiar with
- With the kids to teacher ratio the kids should be progressing
- Good energetic teachers are not being offered permanent jobs
- Long term experienced teachers tend to be tired and not innovative in their teaching methods
- Should teacher performance be linked to classroom educational outcomes? Strategy: Introduce a community ratings system tied to teachers performance
- Incentives are there to make teachers leave not stay. Long term local teachers need to be offered greener pastures
- Teachers benefits lurks and perks are good: Strategy: Reduce incentives to attract people who really want to be here and we might get better teachers
- Incentives should be examined and made more equitable across the board
- Need training and development day for carers and parents to understand the syllabus.
- Workers shouldn't be stretched over such a big area in area of biggest need. Need locally based services in Walgett
- Need women and girls sports organised
- Need benchmarks for the performance of organisations to produce these outcomes.
- Need multi-agency long-term strategy
- Boys could go to school in Bre, Girls in Walgett?

### **Suspension and discipline**

- Currently suspension doesn't work. Some kids behave badly to get suspended – and to keep out of school and spend more time on streets.
- Keep kids at school when suspended – in-school suspension and find out what will interest kids
- During suspension teacher should be preparing work to accept child back into classroom. This doesn't happen. Also counselling for child doesn't happen. The idea of the IEP is to prepare work so that the child can re-enter to classroom.
- The school should also provide counselling and school work to do at school for suspended children
- The kids have eye and ear problems. More health programs should be delivered in the school at an early age. WAMS do have screening programs, but teachers are too stubborn and won't use the equipment to improve the child's hearing
- Parents should be ensuring the school work gets done at home. Parents need to know how to teach during suspension.

### **How to involve parents more in child's schooling?**

- Principal should be more welcoming with parents – introduce Principal to parents each year
- Visit parents with problem children
- Teachers should have a IEP for each student so parents know where they are at
- the only way to make schools accountable is parents taking more control

Deidentify workshop comments. Present workshop notes as well as a more focussed report document

## **Appendix 3: Workshop #3 Notes**

### **Walgett Aboriginal Women's Health Workshop #3**

Held: 9.30 20 November 2010, Walgett RSL Hall  
Facilitator: Wendy Spencer  
Scribe: Leigh Leslie, Wendy Spencer  
Attendance: 11 Aboriginal women plus Non-Aboriginal Facilitator.

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#### **Introduction**

The Facilitator explained why the DEG women's group organised this workshop and outlined the COAG health targets for Closing the Gap. She also explained how at the end of this workshop the DEG wants a list of ideas from Walgett Aboriginal Women about how we can improve access to health care and what gaps there are in services. The DEG wants to know from Walgett Aboriginal women how they believe health can be improved by the state and Commonwealth governments, working with the local organisations and other services, over the next ten years.

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#### **Are you happy with the current health services for women?**

"To be honest I don't even know what is offered. They are probably there but community women don't know about them".

#### **How can services let the community know more about the services that are available?**

"This comes back to the community calender and letting women know about the Interagency and CWP meetings" (and what information is being shared at them).

What about Yundiboo magazine? It a community magazine that had been distributed to schools and other organisations to tell the community what's on in the community. DEG has lost the funding to produce the newsletter. It would be good if the health department and other health agencies used Yundiboo for community health promotions. Revisit the funding for the magazine.

#### **What other things do you think the health services could be doing to let the community know of their services?**

A workshop with the community e.g. let them know and ask people if they can do it in their house e.g. in someone's house and let the neighbours come over and join in. More personalised approach. Informal chats in houses or out in Gingie Shed

What about Family Fun Days and BBQ's and jumping castles – do you think these are effective health promotions? No – not very effective unless more information given about the programs. No-one talks to the people at these health promotions. Most people would turn up just to entertain the kids and get a feed.

There needs to a lot more networking in the community so that everyone is on the same page. Not everyone has email.

We need to employ a person that can get around the community, have cups of teas with families to tell them about the services. That's what the old Community Facilitator's role did, also notice boards at the communities. A Facilitator needs to work with agencies to get message out to community about services.

Health workers should be out and about visiting people in the community like they use to. E.g. a very sick elder who AHWs should be going into home and checking. People sometimes can't get

out and about (i.e. young carers of family members who are sick or elderly) so the services need to go to those people to tell them how they can access services and let younger people know where they can get support and be provided information to help the elders of their family.

Need noticeboards in Gingie and Namoi.

Better discharge planning, particularly when they have just returned home after major surgery for some follow up at home. They have health workers at the hospital and they were supposed to come and see me 48 hours after I arrived home to see if I needed anything after returning from hospital – but I only got a phone call – two months later!

### **What sort of health services do you access at the moment? Does everyone see a doctor?**

It takes 2 to 3 months to see a doctor – if it's an appointment day you can't get to see the doctor. There is no prioritising.

Can you get to see a dentist?

He visits the community – sometimes he is here for three months sometimes a week – we don't know how long he stays here and no one knows when he's here, some have to wait until January. Three present didn't know that currently a dentist in town as you have to go and physically find out. Some people have to go to Coonamble because you can't get in to see them (in Walgett). Different stories about emergency dental services – WAMS try and fit people in – 3 little children had to go to Bre, one had to go to Coonamble for emergency. Some have rung up when they had an abscess and got in straight away. There should be assessment for emergency cases – there needs to be assessment of how sick you are and priority given to the most urgent.

Walgett needs a permanent dentist.

Fluoridation should be in the water when they upgrade the water treatment plant.

Water purifier on domestic taps – sometimes there is too much chlorine in water which brings on dhiorreah and vomiting. Tap water quality OK except when chlorine added.

Water pressure in town is not sufficient e.g. Wee Waa St.

### **What other health services do you use at the moment?**

We have lost a heart specialist Dr Cranswick. We have received letter informing us that the specialist will no longer be visiting Walgett; patients need to take the letter to GP so they can get referral to another specialist. We will have to travel away to access specialist

Need RENAL specialist in Walgett – we have to travel to Dubbo to see a renal specialist.

### **What other specialists do you see at the moment?**

Optometrist: They have one at the AMS, but the take a long time before we receive the glasses back – there is an average of 6 to 8 weeks to get glasses – should be quicker. Lots of kids had to wait long time for glasses.

### **What about hearing services?**

Use visiting Australian Hearing Service at hospital. Hearing specialists go to the school and lots of kids also have their eyes checked. A lot of children had hearing problems and needed to go away from town to see specialist.

Otitis media – RIBAC comes to the school, David Kennedy is in the process of being trained for Otitis Media

## **Birth**

The problem is with the girls going to Dubbo to give birth. They are without support and have to go there 2 weeks before they deliver. Everyone present thinks a birthing unit needs to be in Walgett.

### **What services do you have to travel to get that's not here?**

- Respiratory – I have to go to Dubbo yet nice new hospital here and nothing in it
- Renal services – have to go to Dubbo
- Alcohol rehab – no support services, better D&A services required.

Needs to be full dialysis unit – can't believe stats only show one person in town needs dialysis. One woman reports has family that has to have dialysis and worried about returning to Walgett.

Discussion ensued regarding services and support for recovering substances abusers. Better alcohol detox services needed. Here there's only 1 person allowed at a time. Only one worker for the alcohol program who can't deal with whole problem. WAMS offers drug and alcohol rehab. Namoi House hasn't trained staff to work with drunks. Alcohol counsellor comes every fortnight – also need co-ordinator to co-ordinate activities of alcohol workers who needs to work with Men's Group, Community Centre. Community Centre needs qualifications re smart recovery and counselling and support. More support needed for alcoholics. Workshops should be held where people are comfortable. Alcohol counsellors should be going out with Men's Group on their trips.

Drunks are like mushrooms – you can pick them here and they just grow up somewhere else.

Need willpower and someone to support you through sobering up. Need support when returning from rehab, need follow-up when return to community. Alcoholics are sick people. Dry-out centres won't work - need support when you come back to the community, need follow-up. They see the same social group when they return. Many have extreme depression and self-medicate to cope. Drinking when pregnant; they should be advised by midwife, some are ashamed to say they have or are a drinking or smoking, needs to more education about foetal alcohol syndrome. Low self-esteem – that's where the family needs to come in. Is Imparja ad re foetal alcohol syndrome effective? Most had seen it.

### **What about other drugs?**

Marijuana and grog is a bad combination in Walgett.

## **Mental health**

When a child has depression is there anybody in town they can see?

There are counsellors at school that the students can see. School counsellor program working well. WAMS have a vesting counsellor that comes once a week/fortnight.

Did anyone know that there is someone you can go to for health and mental issues in town? Services not known about.

### **What services might you need which are not available in Walgett?**

Need services that help vulnerable families with coping skills. Some aware of Burnside – providing coping skills for families in the home e.g. when a death in the family – kids coping with grief. Dealing with grief – behaviours in the school yard. Showing families not coping with disabled children or grief and loss. One reports that Burnside going once a fortnight to convent school and once a month elsewhere.



**Is every one happy with visiting RARMS? Is there any reason why people are not accessing the service?**

- You have to wait a long time
- Takes too long for an appointment - By the time you get in you're better
- Medication is not free
- The WAMS doctors not allowed to visit their patients if admitted to hospital
- Some people alternate between the medical services e.g. if can't get into WAMS they go to Vlad and visa versa
- Receptionist very rude

**Is every one happy with visiting WAMS? Is there any reason why people are not accessing the service?**

- No problems accessing WAMS
- Staff don't treat patients with respect
- Long waiting time – sometimes waiting for hours just to see a healthworker let alone doctor
- More friendly environment in reception needed
- Could offer prescription appointments only
- Some people on 3 month health plan may get through the system a bit quicker – this good
- E-health
- Have home delivered prescriptions
- May have to walk to WAMS

**Is every one happy with using GWAHS? Is there any reason why people are not accessing the service?**

- Sometimes they come to the DEG health program and sometimes they don't turn up
- We don't know what GWAHS offers as a health service
- Do they do home visits to elders; I've asked 2 or 3 times and haven't visited

**VMO status**

- Would prefer to see own doctor in hospital but if they are away then would like to see the other doctor
- Needs to be access to medication lists between doctors. E health – medical health records should be available anywhere. Concern with confidential health information – current system not a good system. Dangerous now if doctor tries new medication when unaware of your health history. E-health also good for referrals, good for getting second opinions, for penicillin alerts and allergies

**What gaps are there in services, what types of services do you need that you cannot access?**

- Need more understanding of dementia, dementia services and support for carers
- Need more knowledge of palliative care services
- Not enough knowledge and info re how to access ACAT
- Need more health workers to provide outreach services for domestic violence and mental health

**Do you have transport to get to see a specialist in regional cities e.g. Dubbo, or to the local health service?**

- WAMS provide transport to their own patients but do not take Vlad's patients unless they are really sick
- What about if you are a patient of Dr Vlad's? – no transport, only by ambulance or air ambulance for hospital transfer – but once you are there if you're OK you have to find your own way back

- WAMS don't transport patients to Sydney – they should have the resources to take them anywhere
- Vlad's patients need to organise their own specialist appointments and then the patient has to negotiate with WAMS re transport
- Vlad provides Trish for local transport
- People who have no phone or car have to walk and wait at WAMS. Healthworkers should visit homes

**One area local Health Service Providers struggle with is recruitment and retaining local staff to their services, do you have any suggestions for incentives they could provide for our young people of Walgett to stay and work locally?**

Need more Incentives for health workers working in Walgett i.e.

- A decent home – people are sick of living with family so they move somewhere else to get a flat or house as private rental too dear in Walgett
- Kids are not independent – still living at home, (so potential local healthworkers often have to stay home to provide childcare for grandchildren)
- Good salary
- More of an effort to is needed to make it friendlier when they go and work in hospital. WAMS and hospital need to be more welcoming to young people
- Need big awareness days to promote services - Not enough communication about WAMS services and working at WAMS
- There is no incentive for training – need more paid traineeships at the hospital and WAMS when youth finish school so they can have a career in health.

**What do you consider to be the most important health topic that should be promoted to educate the students in our school system?**

Drugs & alcohol, safe protected sex, the way your hormones work, hygiene, domestic violence in the home, sexual assault and rights of the child to say no, nutrition, food additives, sugar, eating healthy, prevention of pregnancy, having babies, POHPE, depression, mental health.

Can't single out any priority – all equal.

**If you could change one thing about the way health services in Walgett are delivered what would it be?**

Health services should be networking amongst each other.

More allied health should be based locally so services don't need to travel. Need training for staff e.g. podiatry – huge savings could be made by training locally. Training in midwifery, more professional development in the workplace so locals can supply jobs. The huge costs of travel and accommodation costs to bring in outside allied health people could be spent on local people to be trained further.

## Appendix 4: Workshop #4 Notes

### “Where to Now” Walgett Aboriginal Women’s workshop #4

Held: 12.30 14 December 2010, Walgett RSL Hall.  
Facilitator: Wendy Spencer  
Scribe: Wendy Spencer  
Attendance: 17 Aboriginal women plus Non-Aboriginal Facilitator. Workshop starting time had to be changed at short notice, to be held in the afternoon as most participants attended a funeral in morning. Attendance numbers were affected by funeral and short notice change.

#### **Legal advice regarding starting a non-profit organisation**

Due to the floods, NSW Legal Aid could not attend the workshop as planned as the highway between Walgett and Gulargambone was closed. Instead, the Facilitator read out legal advice “*Starting an Organisation: Advice on Forms of Incorporation for Dharriwaa Elders Group 14 December 2010*” sent by Blakes Dawson for the workshop. Blakes Dawson offered pro bono advice in the future for Walgett Aboriginal women wishing to form a representative structure.

The document read to the workshop from Blakes Dawson first posed the question: “Do we need a legal structure for our organization?” and then extensively discussed the advantages and disadvantages of setting up an organisation with a legal structure. The document then discussed the suitability of different possible non-profit corporate structures, i.e. an Incorporated Association, Indigenous Corporation and Company Limited by Guarantee. A table was provided offering comparison between the three company structures.

#### **Brainstorm on aims and objectives for new organisation**

After considering the legal advice offered, and after a short break, the women present were asked to provide their recommendations for the aims and objectives (or Articles) of the organization.

Those present believe there are three groups of Aboriginal women in Walgett – grassroots, middle class workers and high achievers. A new representative Aboriginal women’s organization would cater for all three groups, supporting them to “walk together”.

The new organization would:

- seek to break the barriers between the community factions
- work with girls in the school on building self esteem, confidence and respect
- provide healing for women – recognizing the incidence of post traumatic stress disorder amongst domestic violence victims including male victims
- teaching our children to support our men
- work to support men
- work to keep men in Walgett and not in jail and thereby keeping father figures in town
- work to prevent crime including re-offending by lobbying for increased counselling services etc
- provide a place/centre with open doors to Walgett Aboriginal women
- address single parent issues
- involve women elders
- find ways to work together with the Men’s Group including healing rifts
- work to heal and repair divisions between community organizations so they can work more effectively together
- provide confidence-building activities so women can speak up
- provide governance training – so women can learn and understand about local, state and federal governments and community governance structures
- provide feedback to women about what is happening with the Walgett Gamilaraay Aboriginal Community Working Party
- deliver service to all women in Walgett
- help women to succeed with education

**Criteria for membership of new organization**

Aboriginal women who live in Walgett.

**Directors of women's organisation**

A DEG delegate from Namoi

A DEG delegate from Gingie

A DEG delegate from town

at least one younger woman of Namoi

at least one younger woman from Gingie

at least one younger woman from town

at least one younger woman 14 – 16 years old

**Preferred base for organisation**

The Foundation Hall

**Current representation of Walgett Aboriginal women**

All agreed that Kylie Kennedy remain the representative of Walgett Aboriginal women to the Community Working Party until new organization formed. Diane Walford will provide a back-up to Kylie. Camellia Boney will attend the February CWP meeting with Kylie when the women's workshops report is tabled.

**Appendix 4**

STARTING AN ORGANISATION: ADVICE ON FORMS OF INCORPORATION FOR DHARRIWAA ELDERS GROUP, advice supplied by Blakes Dawson 14 December 2010