



COMMONWEALTH OF AUSTRALIA

# Official Committee Hansard

## SENATE

SELECT COMMITTEE ON REGIONAL AND REMOTE  
INDIGENOUS COMMUNITIES

**Reference: Effectiveness of state, territory and Commonwealth government policies  
on regional and remote Indigenous communities**

TUESDAY, 9 JUNE 2009

CANBERRA

BY AUTHORITY OF THE SENATE

THIS TRANSCRIPT HAS BEEN PREPARED BY AN EXTERNAL PROVIDER



## **INTERNET**

Hansard transcripts of public hearings are made available on the internet when authorised by the committee.

The internet address is:

**<http://www.aph.gov.au/hansard>**

To search the parliamentary database, go to:

**<http://parlinfoweb.aph.gov.au>**

**SENATE SELECT COMMITTEE ON  
REGIONAL AND REMOTE INDIGENOUS COMMUNITIES**

**Tuesday, 9 June 2009**

**Members:** Senator Scullion (*Chair*), Senator Crossin (*Deputy Chair*), Senators Adams, Johnston, Moore and Siewert

**Senators in attendance:** Senators Adams, Crossin, Moore, Scullion and Siewert

**Participating members:** Senators Abetz, Back, Barnett, Bernardi, Bilyk, Birmingham, Mark Bishop, Boswell, Boyce, Brandis, Bob Brown, Carol Brown, Bushby, Cameron, Cash, Colbeck, Jacinta Collins, Coonan, Cormann, Eggleston, Farrell, Feeney, Fielding, Fierravanti-Wells, Fifield, Fisher, Forshaw, Furner, Hanson-Young, Heffernan, Humphries, Hurley, Hutchins, Johnston, Kroger, Ludlum, Lundy, Ian Macdonald, McEwen, McGauran, McLucas, Marshall, Mason, Milne, Minchin, Nash, O'Brien, Parry, Payne, Polley, Pratt, Ronaldson, Ryan, Stephens, Sterle, Troeth, Trood, Williams, Wortley and Xenophon

**Terms of reference for the inquiry:**

To inquire into and report on:

- a) the effectiveness of Australian Government policies following the Northern Territory Emergency Response, specifically on the state of health, welfare, education and law and order in regional and remote Indigenous communities;
- b) the impact of state and territory government policies on the wellbeing of regional and remote Indigenous communities;
- c) the health, welfare, education and security of children in regional and remote Indigenous communities; and
- d) the employment and enterprise opportunities in regional and remote Indigenous communities.

## WITNESSES

<b>ALLBON, Dr Penelope, Director, Australian Institute of Health and Welfare</b> .....	10
<b>ALLEN-KELLY, Ms Kandie, Chief Executive Officer, Australian Association of Social Workers</b> .....	35
<b>AL-YAMAN, Dr Fadwa, Social and Indigenous Group Head, Australian Institute of Health and Welfare</b> .....	10
<b>AZIZE, Ms Maiy, Social Policy Officer, Australian Association of Social Workers</b> .....	35
<b>CATTERMOLE, Ms Amanda, Group Manager, Indigenous Remote Service Delivery</b> .....	52
<b>COPLEY, Mr Ivan 'Tiwu', Indigenous Engagement Manager, South Australia, Australian Bureau of Statistics</b> .....	42
<b>CRETENDEN, Mr Ian, Assistant Statistician, Indigenous Education and Culture Statistics Branch, Australian Bureau of Statistics</b> .....	42
<b>GAHA, Ms Jo, National Manager, Indigenous Services, Centrelink</b> .....	17
<b>JAMES, Mr Matthew, Principal Advisor, Office of Indigenous Policy Coordination Group, Department of Families, Housing, Community Services and Indigenous Affairs</b> .....	52
<b>LOWE, Mr Paul, Assistant Statistician, Population Census Branch, Australian Bureau of Statistics</b> .....	42
<b>MALONEY, Mr Graham, National Manager, Income Management, Centrelink</b> .....	17
<b>Ms Chrissie Nichols, Coordinator of Remote and Indigenous Services, Carers Northern Territory</b> .....	2
<b>Ms Joan Hughes, Chief Executive Officer, Carers Australia</b> .....	2
<b>O'RYAN, Mr Francis Michael, Director, Policy and Program Development, Indigenous Land Corporation</b> .....	30
<b>PODESTA, Ms Lesley, First Assistant Secretary, Office for Aboriginal and Torres Strait Islander Health, Department of Health and Ageing</b> .....	64
<b>SAVAGE, Ms Joy, Assistant Secretary, Remote Services Development Branch, Office for Aboriginal and Torres Strait Islander Health, Department of Health and Ageing</b> .....	64
<b>THOMPSON, Mr John Gerard, Director, Business Projects Branch, Department of Human Services</b> .....	17
<b>TIDSWELL, Mr Grant, Acting Deputy Chief Executive Officer, Customer Services, Centrelink</b> .....	17
<b>WEBSTER, Mr Andrew, Acting Director, National Centre for Aboriginal and Torres Strait Islander Statistics, Australia Bureau of Statistics</b> .....	42
<b>WILSON, Ms Michelle, Section Manager, Welfare Payments Reform Policy, Department of Families, Housing, Community Services and Indigenous Affairs</b> .....	52
<b>YATES, Mr Bernie, Deputy Secretary, Department of Families, Housing, Community Services and Indigenous Affairs</b> .....	52



**Committee met at 9.06 am**

**ACTING CHAIR (Senator Crossin)**—I declare open this inquiry of the Senate Select Committee on Regional and Remote Indigenous Communities. This select committee is holding this public hearing as part of its inquiry into regional and remote Indigenous communities. On behalf of the committee, I would like to begin by acknowledging the traditional owners of the land on which we meet: we pay our respects to the Ngunawal people and their elders, past and present. The committee is due to report to the Senate on 25 June 2009.

Before we start taking evidence, I would remind all witnesses appearing before the committee that they are protected by parliamentary privilege with respect to their evidence. Any act that disadvantages a witness as a result of evidence given before this or any other Senate committee will be treated as a breach of privilege. However, I also remind witnesses that giving false or misleading evidence to the committee may constitute contempt of the Senate. These are public proceedings, although the committee may agree to a request to have evidence heard in camera or may determine that certain evidence should be heard in camera.

[9.06 am]

**Ms Joan Hughes, Chief Executive Officer, Carers Australia**

**Ms Chrissie Nichols, Coordinator of Remote and Indigenous Services, Carers Northern Territory**

*Evidence was taken from Ms Chrissie Nichols via teleconference—*

**ACTING CHAIR**—I welcome representatives from Carers Australia. Good morning to you both. Information on parliamentary privilege and the protection of witnesses and evidence has been provided to you previously. I understand that we have a submission from you and I now invite you to provide us with an opening statement.

**Ms Hughes**—Good morning. Today I would like to discuss the very real presence of Indigenous carers in regional and remote Australia, including the many family carers present in the communities affected by the Northern Territory emergency response, and the vital role that these carers play in supporting family and friends to live as best they can and to function from day to day. I come to this hearing not as an expert on Indigenous carers issues or speaking on their behalf but as the CEO of Carers Australia, extremely concerned about the needs of Indigenous carers, their families and communities.

As you all know, Carers Australia is the national peak body representing the diversity of Australians who provide care for people with a disability, mental illness, chronic condition or terminal illness or who are frail. I would like to put forth our assessment of the situation for Indigenous carers in regional and remote Australia. However, for the committee to understand the concerns of Indigenous carers in regional and remote areas, it is important to hear from those working closely with these Indigenous carers, their families and communities. Accompanying me today, via teleconference, is my colleague from the Northern Territory who works for Carers Northern Territory. Chrissie Nichols has extensive experience working on the ground in remote communities and has a great deal of valuable insight that she will be able to share with you regarding her experience working with Indigenous families and their communities in the Northern Territory.

At a national level, Carers Australia is concerned—and it believes that the committee should be similarly concerned—that carers have been overlooked in considering the changes to the communities in the Northern Territory and in the formulation of new policy and processes generally at a broader government level. Most concerning to us is the lack of consideration of the impacts of the response on carers. We do not have a complete picture of the situation of carers in these regional and remote communities, but Chrissie will be able to give you some insight into the lives of these people.

To gain a perspective, we believe that comprehensive research into the needs of Indigenous carers is urgently needed. Carers Australia started this process or this work in February 2008 and has put a submission to two federal government departments; however, we have received neither acknowledgement of nor response to those submissions. I am happy to leave with this committee the discussion paper and the funding proposal that we put to the government departments, if you think they would shine any light on extra issues to do with family carers.

We feel that the changes introduced by the response have the capacity to impact negatively on the long-term quality of life for Indigenous carers. Many of these Indigenous carers often ensure the ongoing wellbeing of their communities at the expense of their own health and wellbeing. From our perspective, Indigenous carers in these areas have been overlooked and not taken into consideration in the planning processes, and it is essential that this be remedied.

Unpaid family carers all over Australia, as you know, allow communities to continue to function. They ensure the ongoing viability of our health, aged care and community services. In many ways, carers' issues are the same regardless of location. We know that carers face increased social isolation. You have all heard, through many different hearings, of the high levels of stress, the additional financial costs—which Carers Australia refers to as the 'costs of caring'—and the increased inability to save and plan for retirement. Through committee hearings that I have been attending and speaking at for many years now, you also know that carers have been found to have the lowest health and wellbeing yet discovered of any group. Young carers, in particular, face a decreased ability to engage in education and make difficult transitions to long-term employment, and we feel that these things are exacerbated in Indigenous communities. It is clear that all carers take on the risk of a number of poor life outcomes when they take on the caring role.



While these similarities exist, carers are also a highly diverse demographic group, and individual situational factors can intensify the caring role and its impacts on the health and wellbeing of carers. Indigenous carers in regional and remote communities face the stresses of the caring role as well as the health issues and added difficulties associated with the remoteness that affect so many regional and remote communities and Indigenous Australians. We believe that, where health services are not accessed or are insufficient in these communities, family carers are taking on this additional responsibility.

The policies associated with the Northern Territory response have been designed to bring about substantial change to the everyday experience of Indigenous Australians in regional and remote communities. As the response moves forward, we would like to see clear consideration of the changes that would benefit family carers, including improvements to services. There must also be safeguards in place to ensure that Indigenous carers are not negatively impacted by the changes associated with the response. We have called on government to look at the inclusion of a carer impact statement in government policy; we think this is one way to encourage more positive impact on the lives of Indigenous carers.

The government must not ignore Indigenous family carers. We believe that carers in regional and remote Indigenous communities, as a group, are too easily overlooked, particularly in government processes and planning. Currently, the role they play is not appropriately acknowledged, despite its inherent value. Carers are a vital and important part of the stability of these Indigenous communities. Now I will hand over to Chrissie to discuss how the response has impacted, both positively and negatively, on the communities in which she is working. We then can answer questions.

**ACTING CHAIR**—Thank you, Ms Hughes. Ms Nichols.

**Ms Nichols**—Good morning, Senators. I am the Coordinator of Remote and Indigenous Services, Carers NT, a position I have been in for seven years. For two years prior to working at Carers NT, I managed a flexible aged care centre at Wadeye, Port Keats. I have lived in Alice Springs, Yallara, Aileron and Tennant Creek for most of my life. I am of Aboriginal heritage, but I do not wish to speak for all Indigenous people, only for the carers with whom I have been working for seven years.

This is my personal opinion, based on the intervention and my involvement with carers in Northern Territory communities. I think the whole emergency response has overlooked carers in particular, and it is an insult to most Aboriginal people. It has caused a lot of disempowerment in the communities. For our carers, the needs are probably still the same as before the intervention: respite within their own communities, such as through day respite centres and flexible overnight respite centres. Our carers are mostly grandmothers and, since the intervention, they are caring not only for people they were caring for before the intervention but also for many other grandchildren while the parents are in town. The parents have moved to town because of alcohol bans and the quarantining. So now these carers have a much bigger workload.

As for the positives of the intervention, there are probably a few more houses and there is more food being bought. Really, all carers want and need—which they do not have—on communities is access to respite, in order to build up their own resilience and wellbeing in their own community, and not to be told by other people what they need. This is why Carers NT programs work so well, including the Troopy programs and the camp programs. As I have said, carers are usually grandmothers who look after multiple recipients in the community: usually a son or daughter with mental health issues from drug and alcohol abuse; grandchildren with a disability; and other old people with health problems, such as dementia. Perhaps I could finish there, as I am not doing very well. I am ready to answer questions.

**ACTING CHAIR**—Ms Nichols, Senator Scullion has arrived now and he is the chair of the committee. I think it might be best if we go to questions.

**Ms Nichols**—Yes. If you ask me questions, I will be fine.

**Senator CROSSIN**—I understand. There are quite a few questions that I want to ask you. Even though the statistics tell us that quite a large percentage of Indigenous carers are 54 years and younger—

**Ms Nichols**—Young mothers, yes.

**Senator CROSSIN**—you are telling us that they are, in fact, grandmothers.

**Ms Nichols**—They are grandmothers. Because of the way the Centrelink payment works, once people are over 50, they automatically go on to the disability pension; then, when they reach retirement age, they go on to the age pension. None of our ageing carers are on a carer allowance or a carer payment; they are all on

disability pensions. Most of the carers that I deal with are not counted in the statistics; they are nearly all grandmothers and are all over 50.

**Senator CROSSIN**—Is that simply because there is a lack of information about applying for a carer's payment, or is it because there is a lack of coordination in the services?

**Ms Nichols**—Both of those. There is no access to information. Also, it is very difficult to get a carers allowance or a carers payment. The doctor has to fill out the form in the middle and, because the doctors visit most communities only irregularly, such as once a week or once a fortnight, and are there only for a few hours, they do not have the time to fill out the forms. I suppose it is easier for Centrelink to put people who are over 50 on to the disability pension; that means that they are never counted as carers.

**Senator CROSSIN**—If you are on a disability pension, can you also get a carers payment?

**Ms Nichols**—You can, but I do not know anybody who has been able to do so. They would need to have a good Centrelink person and a doctor, and they are things that they do not have access to on communities. Most carers that I deal with do not speak English very well or have literacy skills.

**Senator CROSSIN**—The carers form is fairly complicated.

**Ms Nichols**—Yes.

**Senator CROSSIN**—The requirements have been relaxed slightly. In communities in the Territory where Centrelink offices have been placed, such as at Maningrida and Nguiu, did you notice an increase in the payment of the carers allowance?

**Ms Nichols**—A massive increase. At Nguiu and Maningrida, it probably went from half a dozen carers being registered on carers allowance to most of our carers now getting carers allowance. That is because those offices are staffed by local people who speak the language. Also, there is a doctor on each of those communities, which makes a big difference.

**Senator CROSSIN**—One of the issues then is access to carer payment for support. To your knowledge, do you know whether any sort of scoping study has been done in any place in the Northern Territory to see what the potential is for delivering more-intense Centrelink support out in the bush and what such support would deliver?

**Ms Nichols**—I know that Centrelink itself has looked at it. I am part of a Centrelink advisory committee for carers. I know that they are trying, but it just seems to be a very slow and long process. I have been involved in that over the last five years. I think a study needs to be done on delivering services and it needs to be delivered by people who can speak the language and who are on community.

**Senator CROSSIN**—But, essentially, there is a severe lack of access to the payment.

**Ms Nichols**—Yes, definitely.

**Ms Hughes**—Perhaps I could make a comment here. Indigenous carers who are on the disability support pension would be on the carer allowance and not the payment, and there is a disadvantage with that now. As you would be aware, with the increases that have been announced to the base rate of pensions, there is also legislative reform—which is welcomed by Carers Australia—to the effect that those people on the carer payment and the carer allowance will receive an extra supplement each year and not have to rely on the whims of government or whether there is extra money in the coffers. So it seems to me that there is a great and urgent need to look at those Indigenous carers who could be on the carer payment because it is one of those payments that do receive extra benefits during different phases of government policy. People think, when they turn a certain age, they automatically need to go on the age pension—not at all. If you still have caring responsibilities, you are better off staying on the carer payment and not going across to the age pension. That is something that you can do within FaHCSIA and Centrelink policy and processes.

**Senator CROSSIN**—Essentially, just for the record, what range of disabilities are we talking about here?

**Ms Nichols**—It is the whole range of disabilities: children with severe disabilities, from cerebral palsy and meningitis; severe disabilities from motor car accidents; people with disabilities from drug and alcohol abuse; and disability among young people with depression, which can lead to suicide. It is every type of disability. As I have said, grandmothers are often caring for sons or daughters with mental health issues as well as grandchildren with cerebral palsy, who are peg fed and in wheelchairs, and husbands with dementia; they are not on the carers payment. Sometimes we get them on the carers allowance, but we have never managed to get anyone on the carer payment. Because they are over 50, they will be on the disability payment or pension.

**Senator CROSSIN**—There is no doubt that you interact with your networks nationally. Do you think this problem is confined not just to the Northern Territory?

**Ms Nichols**—I think it is confined to most remote Aboriginal communities but not just to those in the Northern Territory. Now, with the intervention, these carers are looking after additional grandchildren, with the parents having gone to town because of the impact of the quarantining—the men being disempowered and shamed by being labelled child abusers and alcoholics who do not care for their families and with CDEP being abolished. The whole disempowerment thing is causing more people to move to Darwin and Katherine, seeking solace in alcohol and ganja.

**Senator ADAMS**—I am Senator Judith Adams and I am from Western Australia. Could you explain a little more about disempowerment in communities? What has changed since the emergency response?

**Ms Nichols**—I think the acquisition of land has had quite a large impact on the people and their communities. They do not feel as though the land and the decisions made about their communities are theirs any more. Before all decisions were made as a community, such as whether the community would be alcohol free and who could come into the community, through the permit system. With CDEP, even though they were not full-time jobs, these people were partially employed, which gave them pride in their community. Since the intervention, all those things have impacted on people. When the intervention teams arrived, I was on quite a few committees and lots of people came to me feeling insulted and fearful. The teams arrived with Army escorts at communities where there have never been any problems; they have never had alcohol. Now they have two federal policemen and a Northern Territory policeman living there.

**Senator ADAMS**—Can you see any positives in having a police presence in a community?

**Ms Nichols**—I definitely think a lot of communities need a police presence, but they did not seem to put the police presence in the communities that needed it. A lot of communities need a police presence and they still do not have one; others communities that did not need a police presence and that manage their own communities well now have a police presence.

**Senator ADAMS**—You feel that is not a positive.

**Ms Nichols**—No. People feel disempowered because they made the decisions before and the government is making the decisions now. Before the intervention, most of our communities in the Top End were alcohol free, so that has not changed really; it is just that someone has come in and said, ‘We’re telling you now that this place alcohol free.’ It is more the loss of power.

**Senator ADAMS**—Would you like to provide the committee with a list of the communities that you feel are aggrieved by having a police presence?

**Ms Nichols**—I know that, on Goulburn Island and Croker Island, there has never been a police presence, nor has there ever been a large degree of violence.

**Senator ADAMS**—Why do you think the police are being put in there?

**Ms Nichols**—I do not know.

**Senator ADAMS**—There would have been some sort of planning; they do not just arrive just ad hoc.

**Ms Nichols**—It was just all part of the intervention, as far as I can see.

**Senator ADAMS**—You have spoken about the role of the army and sounded as though that was pretty heavy-handed. Would you like to describe why—

**Ms Nichols**—I do not think it was heavy-handed. They were there to escort the emergency health response teams to do health checks on the children. It is just that people are wary of any stranger coming into a remote community and, when a whole heap of strange people come into a community—medical people and Army people—people in a community will be very fearful and distrustful. It is not that long ago that there was the stolen generation, and people still remember that.

**Senator ADAMS**—As someone representing Carers Australia, do you have any communication with the general business managers in the communities?

**Ms Nichols**—Yes.

**Senator ADAMS**—Is that a positive or a negative?

**Ms Nichols**—We work closely with all service providers on the community in order to deliver our services.

**Senator ADAMS**—You have said that most carers are on disability pensions and you would like to see them get the carers payment. Have they been any help to you? Have you had any communication with the general business managers in that respect for some help or support?

**Ms Nichols**—No, I have not. I have had with Centrelink and Centrelink agents.

**Senator ADAMS**—So of what help have general business managers been to your organisation?

**Ms Nichols**—I am sorry; they have not been of any help to us. We always talk and consult with them, in making sure that they know what services we are providing for our carers, before we deliver such services in the communities.

**Senator ADAMS**—I am still trying to fathom out why carers are being affected by the emergency response; either Ms Hughes or Ms Nichols, can you elaborate on that?

**Ms Nichols**—I think they are being affected because of the many more families members they are looking after. As I said, they are mostly grandmothers and they already had quite a heavy caring role, looking after multiple care recipients; but now they are also looking after many others—it is usually grandchildren—because the parents have drifted into town.

**Senator ADAMS**—As far as food or help there, do you see the BasicsCard as a positive or negative, as far as concerns carers?

**Ms Nichols**—I think the situation is a little more positive since the BasicsCard was introduced. I definitely see more food being bought in the communities, but I also see the BasicsCard being abused in Darwin, where it is being sold at a much reduced cost to buy alcohol and cigarettes.

**Ms Hughes**—Perhaps I can add to what Chrissie has said. As I said in my opening address, the response has not factored in that communities will change. Change occurs with people who have had certain care responsibilities now leaving the communities, and the response has not looked at who will take on those extra responsibilities. It is often the older Indigenous women who take them on. They already have heaps of responsibilities in their communities and now are taking on added care responsibilities. We have been trying to explain to the committee that these people are under stress already and sometimes these responses just add to the stress of living and caring. Many of these people have the lowest rates of health and wellbeing. We know that there is a big gap in terms of the ageing of Indigenous populations. We also know that lack of access to really good health services in an ongoing way means that many of the families themselves have to pick up the provision of health to their members. They are the added stresses.

**Senator ADAMS**—As far as health services go, we have had evidence that more health services are available to these communities now than there were before. Could you expand on that?

**Ms Hughes**—Chrissie might know more about the individual communities; I do not have that knowledge base, although I know that there has been an increased commitment to providing health services. But you only have to go into these communities—through Chrissie, I have had the privilege of being able to visit some of them—and you will see the lack of services and the lack, I suppose, of provision by government to really build on those things that are working well. Some of these things will take a generation to make an impact. You cannot come in with extra services—although it depends on the service—and expect things to improve within a year. It will take a generation for some of these policies to really make what I think is a positive impact on these people and their communities.

**Senator ADAMS**—Ms Nichols, do you have anything to do with the town camps in Alice Springs?

**Ms Nichols**—No, and I would not like to comment on them. They are very different from our communities up here.

**Senator ADAMS**—Do you have any involvement in Alice Springs?

**Ms Nichols**—No.

**Senator ADAMS**—Does Carers Australia have any involvement in the town camps in Alice Springs?

**Ms Nichols**—No.

**Senator ADAMS**—Why not?

**Ms Nichols**—Because Carers NT run with the Carer Respite & Carelink Service. In Alice Springs, we have a counselling service but respite and caring are run by Frontier Services; likewise, in East Arnhem Land they are run by Anglicare. We do not cover those areas.

**Senator ADAMS**—Ms Hughes, you said that you received no response to your letters. Which departments did you write to?

**Ms Hughes**—Both the Commonwealth Department of Health and Ageing and FaHCSIA.

**Senator ADAMS**—How many letters have you written?

**Ms Hughes**—We sent in a proposal. In 2007, we had a national meeting in Melbourne. That meeting pulled together many of the elders who had been working with Carers Australia and the state and territory carers associations to see whether we could impress on the new government the importance of supporting Indigenous carers, their families and their communities. With the help of the elders, we pulled together a discussion paper. In that discussion paper, we have scoped where we have worked in Indigenous communities across Australia. Some of those services were evaluated; but it was typically where you would go in and come out, in that most of them were one-off projects, apart from the one that Chrissie is involved in. We think there is a lot of merit in looking at the Troopy program, which Chrissie coordinates, and seeing whether it has application for other remote Indigenous communities. So we pulled all of that together and put it to both departments because, obviously, they both have program responsibility for carers generally. That was sent through to them in February and March 2008.

**Senator ADAMS**—You have had no reply to that.

**Ms Hughes**—No.

**Senator ADAMS**—Have you requested funding to continue the program?

**Ms Hughes**—We have requested a few things. We want to look at where the programs might be applied across the nation. Also, we have put it into the context of the COAG initiative as well as the research we are aware of—and you will be hearing from the Australian Institute of Health and Welfare; they have done a fair bit of research in terms of Indigenous communities. We believe that we have what we call the discussion paper. But, as you know, when you work in Indigenous communities, you to have check that such a discussion paper is right and accurate. So this paper needs to go back into the communities to see whether we are on track; if we are, it needs to be funded.

**Senator ADAMS**—I note here that it has been running for six years, so obviously it has had recurrent funding.

**Ms Hughes**—The program that Chrissie is involved in has, yes.

**Ms Nichols**—It has been running for nine years and I have been coordinating for seven years.

**Senator ADAMS**—Do you still have money coming in?

**Ms Nichols**—Yes. We do not have enough funding, of course. We struggle every year to make ends meet. Luckily, the service providers on the communities who help us run the program usually do it for nothing. The program works because they care about the carers and care recipients on their community.

**Senator ADAMS**—Who is funding that at the moment?

**Ms Nichols**—The Department of Health and Ageing fund the Troopy program; FaHCSIA are funding the new mental health Troopy program, which has been running for just over a year now; and the Department and Health and Ageing also fund the Remote Respite Camp Program, which is for older people.

**Ms Hughes**—That is through the National Respite for Carers Program—

**Ms Nichols**—Yes.

**Ms Hughes**—under the Australian government Department of Health and Ageing.

**Senator ADAMS**—Does the Ti-Tree program have recurrent funding?

**Ms Nichols**—No, it has no funding. It had funding only to develop it and it has no funding to roll it out to the communities.

**Senator ADAMS**—Do you see that as being a very positive program that should be funded?

**Ms Nichols**—Yes, definitely.

**Ms Hughes**—That is one of the programs that could be funded nationally.

**Ms Nichols**—Yes. Education is very important for carers in teaching them how to increase their health and wellbeing and their resilience and to give them the skills to be able to do that on their own communities.

**Senator ADAMS**—Has that program been rolled out anywhere other than Ti Tree?

**Ms Nichols**—No, there was no funding. There was funding only to develop the program.

**Ms Hughes**—Carers Australia got the funding from the Sharing Healthcare Initiative, through the Australian Department of Health and Ageing, to look at piloting a program. That is what I was saying before. The program pilot was called Looking After Ourselves. It was evaluated. It was accepted really well by the community. We had a fantastic Indigenous worker rolling it out. We could have used her to train other Indigenous workers—and nothing. That issue is also part of the submission that I will leave with you.

**Senator MOORE**—Ms Hughes, we would really like to have a copy of those submission that you have put in. That would put a lot more detail to the submission that you have given us and would be very useful.

**Ms Hughes**—I seem to have one, yes.

**Senator MOORE**—Most of the questions I had have already been discussed. I note in particular—you have raised it here on a number of occasions—the role of young carers. Do you have any data on young carers in the Northern Territory? It seems that you have always felt that is an area that has been under-recognised.

**Ms Hughes**—We do know—this is in the submission that we have given you—that Indigenous people aged between 15 and 34 years are almost twice as likely to be carers as non-Indigenous people of the same age.

**Senator MOORE**—On what is that based?

**Ms Hughes**—That is based on some work done by the Australian Institute of Health and Welfare for the 2006 Census of Population and Housing. It looked at health and welfare of Indigenous people. Chrissie might have more detail of young people in the Northern Territory. Young Indigenous people came to Parliament House, when we had the Young Carers Forum.

**Senator MOORE**—We met a few and they are amazing people, as you well know. I am interested in those figures and we will ask the Institute of Health and Welfare about them. The data is so—I am trying to think of a diplomatic word, but I cannot find one—very hard to rely on, just getting people to identify and then working with them over a long period of time.

**Ms Hughes**—The data is variable.

**Senator MOORE**—That is a good word.

**Ms Hughes**—I know that we struggle sometimes with the data because, as you are aware, Carers Australia does its work through an evidence base and we rely for data on ABS and the Australian Institute of Health and Welfare. Our latest figures—they are from 2006—tell us that there are around 32,000 Indigenous family carers over the age of 15, more women than men. Because they do not live as long as non-Indigenous male Australians, we do have more Indigenous carers in that sort of young to middle-age group. Chrissie, I am not sure whether you have experience of young Indigenous carers in remote communities.

**Ms Nichols**—Yes. There are a lot of young Indigenous carers in remote communities; usually, once again, they are females—granddaughters caring for old people. They are not classified as young carers in their own communities, because culturally, once they have been through the women's or men's ceremony, they are adults. So their own community would not classify them as young carers; they would be men and women, even though they might be very young, like 15 or 16. The people they tend to care for are the elderly.

**Senator MOORE**—Does the same issue of lack of identification through the Centrelink process, which you raised earlier, apply to young people as well?

**Ms Nichols**—Definitely, when the Centrelink agent visits or camps' agencies put on Newstart.

**Senator MOORE**—Your submission relates to the NTER education interventions; they have been identified as a key element of the NTER. Would you like to put anything on the record about whether you think there should be any particular awareness of the education process of the young carers that you have identified?

**Ms Nichols**—It would be wonderful if they could be identified in the education process.

**Senator MOORE**—Are you aware of anything like that being taken into account?

**Ms Nichols**—No.

**Senator MOORE**—Have you, through your organisation, been asked to work on any program of that nature?

**Ms Nichols**—No there has never been any. I am sure that our young care worker here at Carers NT has tried to get programs up and running but, once again, it comes down to funding; young carers are underfunded.

---

**CHAIR**—I am Nigel Scullion, a senator for the Northern Territory. We are actually out of time, but I would like clarification of a couple of issues. You have explained that the Centrelink approach—this is how I understood it, anyway—is that, once you get over 50, basically you go on to a disability pension until you go on to the age pension.

**Ms Nichols**—Yes.

**CHAIR**—Is that just something that has always been a Centrelink convention?

**Ms Nichols**—Yes.

**CHAIR**—When you hit 50, on what basis do they put you on a disability pension?

**Ms Nichols**—Because Aboriginal people over 50 are considered to be frail aged.

**CHAIR**—The other issue is the BasicsCard. You talked about the BasicsCard being either sold or used fraudulently to get, I take it, materials for which its use is prohibited. Could you briefly explain that again and perhaps, on notice, provide some examples of that?

**Ms Nichols**—As for examples, that is mostly done by people when they are in town, in the long grass. They might have \$200 on their BasicsCard to buy food and clothing; they will sell that to another family member for \$50 to buy cigarettes and alcohol.

**CHAIR**—Then the family member goes along and just uses the food card to buy food; but that other transaction is \$50 for \$200.

**Ms Nichols**—Yes, it is a common practice.

**CHAIR**—So BasicsCards themselves are often used by people who are not the owners of the cards.

**Ms Nichols**—Yes; but that applies to all EFTPOS cards. All EFTPOS cards are used by people who do not own them. Everybody has everybody else's pin numbers and key cards.

**CHAIR**—There is one other issue I would like clarified. You have talked about doctors perhaps not having time when they are in the community. Is that because they acknowledge that there is both a carer and someone being cared for and they are focusing on assisting with those matters? Do you think they are aware of the fact that they should be completing that—I know it is fairly complex—paperwork? What do you think the reasons are behind that? It is simply through lack of time, or do you think doctors are unaware of the need? What do you think the reasons for that are?

**Ms Nichols**—Personally, I think it is because doctors are notoriously under-informed about carers and carers issues—and that is across the board. But, in remote communities, where they fly in and fly out, they are only on the community for a couple of hours; so obviously they are concerned mainly with dealing with higher care people on that community. Firstly, I do not think they are aware of carer issues and the need for carers to be on carer allowance or carer payment; and, secondly, I think it is merely the lack of time.

**CHAIR**—We may bring that issue to the attention of the AMA, but I am sure that the committee will discuss that in a little while. Ms Hughes and Ms Nichols, thank you very much for the evidence that you have provided today. If we have further questions on notice, they will be provided to you by the secretariat.

**Ms Nichols**—Thank you.

**Ms Hughes**—Thank you.

[9.50 am]

**ALLBON, Dr Penelope, Director, Australian Institute of Health and Welfare**

**AL-YAMAN, Dr Fadwa, Social and Indigenous Group Head, Australian Institute of Health and Welfare**

**CHAIR**—Information on parliamentary privilege and the protection of witnesses and evidence has previously been provided to you. The committee has before it your submission. I now invite you to make a short opening statement. At the conclusion of your remarks I will invite members of the committee to put questions to you.

**Dr Allbon**—We are pleased to be here today. The role of the AIHW is to provide evidence to improve health and wellbeing. In the case of Indigenous remote we have quite a deal of evidence and data which is able to be interpreted and analysed and used to inform policy. Our role is to provide that evidence to make sense of the data and also to provide commentary on the data so that it is fit for purpose to inform the issues that are being discussed here. For that reason we will make some comment as we go through about the quality of some of the data and the way in which the data can be used at various levels. There are some difficulties around interpretation of data for small communities and remote areas. Thank you very much. We are pleased to be here.

**Senator ADAMS**—I would like to draw your attention to the national peri-natal data collection. I am looking at table five, which is listed on page 13 of your submission, on live born, low birth-weight babies. I note that the data is 2003 to 2005. Do you have any updated data that you could provide to the committee on that particular area?

**Dr Al-Yaman**—I am sure that this is the latest published data that we have—

**Senator ADAMS**—Is it the latest? There is nothing since—

**Dr Al-Yaman**—It was the latest published when we did the submission.

**Senator ADAMS**—When do you expect to get more?

**Dr Allbon**—I will have to take that on notice, but I think it is coming up pretty soon. I could get back to you about that.

**Senator ADAMS**—As we have moved around especially in the Kimberley area and Fitzroy Crossing, the foetal alcohol syndrome was drawn to our attention. How can we find any further data on that as it is spread across Australia rather than just in one specific area? Are you looking at that under this peri-natal dataset?

**Dr Al-Yaman**—We are investigating that under the peri-natal dataset. But there is also in our hospital data under the coding system that we use there is a code of conditions in the hospital data. We are currently looking into that to see whether we have enough numbers to actually look at that issue. We are also investigating whether it is collected in the peri-natal dataset. Potentially it could be collected in the mortality data because it uses the same coding as the hospital data.

**Senator ADAMS**—What we are really looking at is the alcohol consumption and the risk factors with pregnancy on those low birth-weight babies and also following up if those children are diagnosed or not.

**Dr Allbon**—We did get some questions after Senate estimates and we have just started to follow up on those so we are hoping to get some answers.

**Senator MOORE**—We did not forget you. What is enough? You said you were seeking whether there was going to be enough numbers to code it. What is the base code?

**Dr Al-Yaman**—The numbers are likely to be coded. If you have only five cases in one year you cannot make much of it, so we are saying we might have to aggregate 10 years together to come up with a number because you are talking about national data now. We can disaggregate nationally but it means combining a lot of years together.

**Senator MOORE**—Are there any set cut-offs statistically for enough, or does it vary a bit?

**Dr Allbon**—We cannot publish where it might be identifiable, so we cannot publish small numbers. Often in a remote Indigenous community that is very much the case. Other than that, I guess it is an educated look at what the data is showing and we could publish anything small so long as we are confident enough that it is not identifiable.



**Dr Al-Yaman**—If you look for example it is one in one year and 20 in the next and 200 in another, there are issues in trying to assess the data and so on. As Ms Allbon said, if we are confident statistically around the data and we think we can estimate a rate that could be national and possibly broken down, again, that depends on the numbers, yes.

**Senator MOORE**—It is also reliant on the knowledge of the medical area in effectively diagnosing and identifying it?

**Dr Al-Yaman**—That is right.

**Senator ADAMS**—As to the Kimberley area where it has actually been identified and now that the supply of alcohol has been completely reduced in that area, do you have people on the ground or do you just rely purely on what comes through from the doctors?

**Dr Al-Yaman**—We do not have people on the ground. We rely on the data coming through states and eventually through national collections.

**Senator ADAMS**—Are you looking at the cause of the problem?

**Dr Allbon**—The cause of the foetal death or the—

**Senator ADAMS**—On the foetal alcohol syndrome, because I really want to work on that because it is something that seems to have been missed out in the data. I am trying to highlight the fact that there are huge problems and these go back a number of years. But the fact is that there has not been a paediatrician in the area to identify these children. Then of course as they start going to school, if they go to school, they have behavioural problems. Because they have not been diagnosed earlier there is no actual help in the schools for them or for their carers.

I am trying to get my head around the fact that you just get straight data but there could be a lot of changes. I have not brought the newspaper article with me but there is the change at Halls Creek since they have reduced the alcohol consumption there. The behaviour pattern of the residents in the town has been absolutely phenomenal and there is the lack of domestic violence and the lack of hospital admissions with acute care problems. There are these changes, but is there any way that the data you collect can show that with things like this it is a positive change in the behaviour of the community as a result of the alcohol consumption reduction? I know that sounds a bit complicated, but I am really very interested to see this.

**Dr Allbon**—It would have to be at a small local level. You would be looking at, say, the Kimberley region and to get data at that small local level specifically like that would probably require a special project—

**Dr Al-Yaman**—It is more like a special project. What we will be able to see in the national data is that if there is a change over time—let us say there has been a substantial reduction in alcohol consumption over time—we start to see, for example with foetal alcohol syndrome, a reduction in that. If we look at drinking during pregnancy, we start to see that the numbers are actually being reduced over time. Then by assumption you can link these two events together. But your question is actually more around picking up the children early and following them to make sure they get that appropriate care and so on. We can anecdotally collect that kind of information. As Ms Allbon said, it would probably be useful to try to collect this kind of information perhaps as an attachment to the peri-natal collection possibly.

**Senator ADAMS**—The fact that someone is pregnant for nine months means you have results coming through fairly rapidly, unlike other areas of health problems where it takes quite a lot of time for something to develop, whether it be kidney disease or similar chronic conditions. But with this particular one it really could show up quite quickly in the statistics. The reason that I am asking these questions is just to highlight it and to see the behaviour patterns and the results with babies as well as the other things that are happening as far as the mother perhaps being able to eat better and having antenatal care. With more health services going in there and the mums actually being monitored as well as the fact that the alcohol is not available—and hopefully they are having a much better diet—the child is going to be better when it is born and will be able to be educated. We really have to make sure that these children have a very good start in life.

**Dr Allbon**—It certainly sounds like it would be a really useful piece of work to do. But I think it would have to be a focused project and to provide the evidence that would then lead to possible resources being put in other places to allow the same thing to follow through. I do know that there have been some questions raised as to what evidence we have about acquired brain injury where that is also caused by alcohol. It is a similar kind of issue. I think a localised study would be a really useful thing. I am not aware whether WA is doing anything in the Kimberley region in relation to collecting that evidence.

**Senator ADAMS**—They are collecting data there, but I just wanted to know overall as to yours. I have been asking these questions when we have moved around other communities, not just in Western Australia, just to see if there is this pattern with the alcohol being available and in the dry communities whether the low birth-weight was there to see. But probably looking at the statistics here—just to quote from your statistics, the major cities have 31,431 low birth-weight babies. That is for non-Indigenous and for Indigenous it is only 857. So the numbers really for Indigenous areas are very low, but there is a much lower number of people—

**Dr Allbon**—But the percentages are high—

**Senator ADAMS**—out there than in the major towns and cities.

**Dr Allbon**—For that one it is 12.8 per cent rather than two per cent—

**Senator ADAMS**—I know. It is just because you are talking about numbers you need to actually come up with a result.

**Dr Allbon**—We are doing a lot of data development in relation to the COAG performance indicators in the National Indigenous Reform Agreement and in other places, I do not think anything in relation to foetal alcohol syndrome is in those performance indicators, but it may be something that we will be able to have a further look at as we are doing that work.

**Senator SIEWERT**—Is there anything being done to address there currently being no universally collected primary healthcare data?

**Dr Allbon**—Generally in terms of primary healthcare data it is a difficult area to get data on. We have, say, seven million hospital separations a year that we collect data on but a great many more are primary care episodes. Filtering out and trying to get a useful data collection out of that is an interesting problem. A few months back we published a report towards primary healthcare data looking at what existing data there is because there are various electronic collections that do collect data. It is certainly something that we are hoping to do further work on. I think the Primary Healthcare Strategy will be a key document from which data collection will be launched because that overall policy will be clear about what needs to be collected. It is really a case of what should be collected. We are doing some work at the moment with the states and territories on trying to develop a national minimum dataset, that is the minimum number of standard items that should be collected in relation to primary healthcare and community health. We are certainly trying to take it forward. There is of course the BEACH collection, which is Bettering the Evaluation and Care of Health, which random samples and provides the best information that we have. It is very useful information. It is not a full survey, but it is a random sample that is useful.

**Senator SIEWERT**—Do you have access to the data that OATSIH collects from the Aboriginal health organisations?

**Dr Al-Yaman**—We currently get access to the data collected under the Healthy for Life program. We analyse that data and we produce reports that go back to services about how to use the data to improve service delivery.

**Senator SIEWERT**—Does Healthy for Life cover maternal and—

**Dr Al-Yaman**—Healthy for Life focuses on three main areas: maternal and child health, chronic disease care and child and other health checks.

**Senator SIEWERT**—You only get access to that stream of data, not the other data that is provided?

**Dr Al-Yaman**—I would say currently they are streamlining all current reporting requirements. They have the SAR, the Service Activity Report, they have the DASR, which focuses on drug and alcohol services, and the Bringing Them Home reports, the BTHs. They are currently thinking of consolidating all of that together with the Healthy for Life to get a minimum dataset that is agreed across all of our OATSIH funded services that OATSIH would use. This data will be hosted by us and analysis would be done by us. That is the plan as to the way forward anyway. Just going back to Ms Allbon's question on primary healthcare, as to closing the data gap, again it is also a glaring gap in relation to Indigenous Australia, not just mainstream, and there is an intention to actually try to do more work in that space in terms of national key performance indicators for the primary healthcare sector.

**Senator SIEWERT**—One of the issues that you raise but which has also come up particularly when we were doing the petrol sniffing inquiring is access to good data that identifies Indigenous status. Nearly everybody on this inquiry was also doing the petrol sniffing inquiry. You have raised that as well. Are there moves to fix that or are there ways that you can address that?

**Dr Allbon**—That is something that preoccupies a lot of Dr Al-Yaman's time. I will leave her to talk about it.

**Dr Al-Yaman**—Basically our problem with Indigenous data is two-fold. Usually with survey data, sometimes people who are under survey think across regions. They can ask the question in urban areas but they change the question slightly in remote areas, and that makes the data not comparable. Or sometimes they drop a question completely because they think it is too sensitive in remote areas and therefore we are not going to ask the question, in which case we have a gap. But at least if you have a high-sample size survey which can be disaggregated to a lower level, then you will be able to compare across because a sample usually samples only Indigenous people. They are Indigenous specific surveys which will allow you to do that. Then you can compare and benchmark against the mainstream surveys.

Our problem is really mostly with administrative data. Identification level can be variable by state and variable by remoteness. People in remote areas are more likely to identify as Indigenous. They still look Indigenous and so on. They are still involved in Indigenous cultural practices and so on. As you move into major cities this becomes less clear. Therefore it is very difficult when we look at health status by remoteness for us to separate the fact of identification or whether there is an actual change in health status between the two areas, really.

**Senator SIEWERT**—Are you working with the states to try to address that issue for the cities?

**Dr Allbon**—We have a number of things underway. One of them is some proposals around data linkage, linking the data where the identification is not good with other data where we know it is good identification. There is a big process going on with all the states and territories on that at the moment. The other one is to do audits, so we send people in and they audit what the clerk at the hospital entrance recorded against what the actual person in the hospital bed says. I think overall the discrepancies—

**Dr Al-Yaman**—Again you can see that differentiation. In remote areas for a lot of people there is correct identification at the front desk and when you interview the patient. In major cities it is completely different, so you get a variable level of correct identification.

**Senator SIEWERT**—You raise the issue of smoking in your submission. In some states, and I think nationally too now, there are some efforts around smoking in Aboriginal communities. Are you starting to notice any impact from those programs?

**Dr Allbon**—It would probably be too early at this stage. We rely basically on the ABS's national health survey and the NATSI, the National Aboriginal and Torres Strait Islander health survey for that information. The national health survey is conducted every three years and the NATSI every six years. There would be no survey vehicle that would pick that up at this stage.

**Dr Al-Yaman**—The other source of data that we use to complement that is our peri-natal data collection which collects that data annually. It can pick up smoking during pregnancy. This does not go as long as the survey. If you look at the survey data over the last 10 years, there has been no change in smoking among Indigenous Australians. It has been at 50 per cent and it has not changed at all. As to the peri-natal data, we still have not seen much change yet, but that is more recent. Collection of data of smoking during pregnancy is more recent than that collection.

**Dr Allbon**—That goes to Senator Adam's question about the latest, so we will take that on notice.

**Senator SIEWERT**—I would like to ask about the issue of alcohol and look at whether you have been involved in any analysis or data collection around the alcohol controls in the NT in the prescribed areas and whether in the NT we are starting to see any response to the alcohol restrictions?

**Dr Al-Yaman**—We do not have access to the data on the alcohol program in the NT. I think there were initial discussions, but in the end it was not the data collection that we looked after. We look after only the child health check from the NT work.

**Senator SIEWERT**—I notice that the data you have on child health checks is to October 2008. The latest data has just been published on the web to December 2008. Have you had access to that data at all?

**Dr Allbon**—The child health data, yes. We collate, clean and analyse that so that goes up on our website and on the department's website. I think the next one—

**Dr Al-Yaman**—The next one is due soon. We do two progress reports each year to show how many kids have been followed up and how many have had health checks. That is an ongoing basis.

**Senator SIEWERT**—Your data is to October 2008. I presume you will update from there every six months?

**Dr Al-Yaman**—Yes.

**Senator SIEWERT**—You are slightly behind the government's—

**Dr Al-Yaman**—No, that is our data. We have put it on our report on our website. The data comes to us directly. The data comes in a paper format and we enter it and then clean it and analyse it and the produce that report every six months and that goes in our report on the website.

**Senator SIEWERT**—The December report is to-October figures?

**Dr Al-Yaman**—Yes.

**Senator SIEWERT**—Now I understand, I beg your pardon.

**Dr Allbon**—There should be another one within the next month or so.

**Senator CROSSIN**—Thank you for your submission. It is very comprehensive and I found reading it very useful. What I wanted to ask you about is an interest that I have, that is whether or not you have any data about alcohol and substance abuse consumption in remote communities in the territory?

**Dr Al-Yaman**—The only data we have really around alcohol consumption is through looking at national data. For example, you could look at hospitalisation due to alcohol use, particularly for the Northern Territory. But we cannot localise community in that particular dataset. We can disaggregate the data to the statistical local area and maybe look a bit further but it is really national data collection. As part of the intervention, I think there is an alcohol data collection, but we are not responsible for that data collection.

**Senator CROSSIN**—Have you done any research about the range of rehabilitation places or programs available?

**Dr Allbon**—No. We publish treatment statistics for alcohol and drugs, but I am not sure that that identifies anything at the remoteness level. It may be a useful source, but that is more as to treatment services in terms of counselling or other programs of gynaecological treatment.

**Dr Al-Yaman**—You might see change after a while because of all the policies in the NT and other datasets like, as I said, hospitalisation and possibly alcohol and other drug treatment services and mortality minimum datasets. You could look at all of these over time and say, 'Yes, there has been a change.' But as to the actual collection within the NT, which is looking at what is actually happening within communities, is the one we do not have.

**Dr Allbon**—We are not quite sure who does collect that data, but somebody is.

**Senator CROSSIN**—That is what I am trying to get a handle on. There does not seem to be any centralised or coordinated effort in terms of tracking drug and rehabilitation services, their effectiveness and whether there are actually, firstly, enough of them and, secondly, whether they are having an effect. That is not information that even at your institute you would have?

**Dr Allbon**—No, I think when the NTER was put in place there were discussions about the need for an alcohol data series, but it is not a responsibility given to us. We think that somebody does collect that information, but we are not sure who. The department would probably be able to tell you.

**Senator ADAMS**—I would like to move on to the aged care data. You have stated here that you are having problems with the demographic data; that with so many records missing you cannot report on aged care provision to Indigenous people in rural and remote communities. While I am speaking about that, we have just had Carers Australia give evidence. Is there any evidence that you record on the number of Indigenous carers in these communities, and specifically looking after the elderly population and people with disabilities?

**Dr Allbon**—We are not aware of anything specific in relation to Indigenous carers. We are doing some further work on carers at the moment, basically off administrative data sets for our biennial publication *Australia's Welfare*, which has not been published yet but may well have come up with further information. At this stage there is nothing further that we could suggest.

**Senator ADAMS**—We have just had evidence that most of the Indigenous carers are over the age of 50 and they are on disability pensions themselves when they get to 50. I wonder if that perhaps blurs the data of these people that are included on disability pensions; therefore, they would not be recognised as carers. Very few of

them can actually access a carer's payment or be recognised as carers. Do you have any way that you can work through that one?

**Dr Allbon**—That is something we would have to take on notice to see if we have any information.

**Senator ADAMS**—Thank you very much. As to aged care, multipurpose services and HACC, there must be data coming through somewhere to someone on those particular services.

**Dr Al-Yaman**—There is data. We analyse it, but sometimes the quality of the Indigenous identification is so bad that you cannot make sense out of the data. If you have a lot of missing Indigenous data in the data collection you cannot use the data, because you do not know whether the missing data is for Indigenous or non-Indigenous.

**Senator ADAMS**—How can that be improved? I think aged care and HACC services in those communities are very important. Somehow we have to get some sorts of records on it.

**Dr Allbon**—The responsibility for the HACC data collection is with the Department of Health and Ageing. That would be a question for them. Certainly, identification across-the-board is a critical issue for getting good Indigenous data.

**Senator ADAMS**—Just to wrap up with the Indigenous statistics, you are really having problems getting accurate data. Would that be over a number of issues?

**Dr Al-Yaman**—Yes.

**Dr Allbon**—Certainly for administrative data, where it is collected off a system that is in place it comes back to identification, whether it be on death records, hospital records or perinatal records. It comes down to the care that those who are supplying the data take around noting the Indigenous status of a person.

**Senator ADAMS**—How could you improve what you need?

**Dr Allbon**—We could probably take an example from the hospital data, the morbidity data. Together with the national advisory group on Indigenous statistics, NAGATSIHID, we took the decision that the quality of the Indigenous identification for some states was not good enough, and refused to publish it. We said it was not good enough. That had a major effect, particularly with the two big states, whose data was not published. Their data is now published because the audits have shown that has improved significantly. We do draw the line. We say that if it is not good enough to draw conclusions from we will not publish it. I think that has been really important in improving it.

It is also going back to those people. That is what happened in that case. The hospitals went back to their clerks and reception people to train them so that we did get better identification. It has to happen at that level, apart from things like the linkage programs.

**Dr Al-Yaman**—We also developed best practice guidelines to collect Indigenous status information, which goes through the process around asking for it. Some people find it confronting to ask, either through a non-Indigenous person not being happy and so on. We are saying that this is a way that they could do it, paraphrase it and so on. These guidelines are currently going through the final stages of consultation and once they get the feedback from various people who have contributed to the guideline it will be attempted to be implemented across all the states and all the programs.

**Dr Allbon**—The other area is through data linkages that we talked about before. You may be aware that in New Zealand the quality of the Maori data was considerably improved by the process that they call Ever-Maori. If you were Maori in one data set and not in another they actually link the data so that it demonstrates your Indigenous status, even if it has not been recorded on one data set. They have a unique identifier so it makes life a lot easier for these sorts of data manipulations. They were able to then link that so in a de-identified way you can get a much better understanding of the level of Maori people in the population. Some of the work we are doing is along the lines of that work to try to improve the quality of the data.

**Senator ADAMS**—Thank you.

**CHAIR**—Your submission was very comprehensive. In your submission you indicate that between 2002-03 there were some eight per cent of unknown identifiers, and back to 2007-08, when it was down to five per cent. There has been a three per cent differential improvement. What do you put that down to? Obviously you have been working on this. Is it because the department has actually asked the right questions on presentation? What are the changes that you are doing? Is it documentation?

**Dr Al-Yaman**—It is the feedback. This particular collection has a working group. Every collection we have has a working group from all the states. Basically we give them feedback on the level of under identification. We say, ‘In your jurisdiction it is that much and in your jurisdiction it is that much.’ They use that information to go back to the service provider to provide the feedback to help improve the quality of the data. It is really closing the loop in relation to feedback and what should be done about it.

**CHAIR**—I was also curious about access to justice, say, in the Northern Territory. When the boys in blue arrest someone, something has happened and it is never in the Territory. It is normally on a street or an identified place. It is the sort of identifier that is gathered. That is, ‘Hi, how are you going, son?’ You name comes and the second thing that comes is your address—where you live. The next issue is whether there has been an alleged crime or an incident. There is a lot of detail about the date and the place. Only having identifiers in terms of locale as a territory or a state is astonishing. Why is it that you are unable to get access to much more prescriptive forensic data about location?

**Dr Al-Yaman**—Part of the problem is when people decide on minimum data sets—juvenile justice is one, and child protection has the same issues—sometimes they focus on the area where the service is provided rather than the person or the child in the child protection system. That is a problem. With hospital data we collect both. We collect where the person comes from and where the hospital is. Some data collection suffers from focusing on where the service is delivered. A lot of the disadvantage comes from where the person lives rather than where the service is delivered. This kind of error needs to be corrected in the data collection.

**CHAIR**—Senator Siewert.

**Senator SIEWERT**—I would like to go back to the child health checks and the table that you put in your submission. Can you explain some of the issues there for me? I understand this is the referral or follow-up to the preliminary child health checks; is that right?

**Dr Al-Yaman**—Is that table 2?

**Senator SIEWERT**—Yes, table 2. Does it necessarily relate to children who have been through the NTER child health checks?

**Dr Al-Yaman**—It does. When you go through the NTER child health check one of the questions on the child health check form is ‘referral to?’. It can be referral to the clinic or pathology. All these things are actually on the form, whether they are a referral or investigation into pathology or some type of testing. This refers to the number of children and the proportion of children who have had the required referral as prescribed in their child health check form.

**Senator SIEWERT**—Are these the ones that have required referral and whether they have subsequently been seen or not?

**Dr Al-Yaman**—Yes.

**Senator SIEWERT**—This is the data up until October?

**Dr Al-Yaman**—Yes.

**Senator SIEWERT**—It states that some children have more than one related condition, which I accept. How is that dealt with in the chart?

**Dr Al-Yaman**—This is not presented here, but we can analyse the data by looking at children who have only one condition and one referral. A number of kids have two or three conditions and multiple referrals. We do not look at that.

**Senator SIEWERT**—In this chart one child may have eyes and ears, for example?

**Dr Al-Yaman**—Yes.

**Senator SIEWERT**—So, the number of checks or follow-up could be for the same child?

**Dr Al-Yaman**—Yes, some of them could be.

**Senator SIEWERT**—Thank you.

**CHAIR**—Senator Crossin, do you have any further questions?

**Senator CROSSIN**—No.

**CHAIR**—Thank you very much for the evidence that you have provided today. If the committee or senators require questions on notice they will be provided to you through the secretariat.

[10.28 am]

**MALONEY, Mr Graham, National Manager, Income Management, Centrelink**

**TIDSWELL, Mr Grant, Acting Deputy Chief Executive Officer, Customer Services, Centrelink**

**GAHA, Ms Jo, National Manager, Indigenous Services, Centrelink**

**THOMPSON, Mr John Gerard, Director, Business Projects Branch, Department of Human Services**

**CHAIR**—I welcome the representatives from the Department of Human Services. Information on parliamentary privilege and the protection of witnesses and evidence has previously been provided to you. The committee has before it your submission. I now invite you to make a short opening statement and at the conclusion of your remarks I will invite members of the committee to put questions to you.

**Mr Maloney**—We are happy to move straight to questions if you would prefer.

**CHAIR**—I have a couple of questions. I am not sure if you were listening a little earlier. We have had some allegations of inappropriate use of the BasicsCard. The individual who made those allegations knows the Darwin community very well. I think the term ‘long grass’ was used, but basically what she put to us is that the BasicsCard is sold. There might be \$200 left on the BasicsCard and its use is sold for \$50 cash. \$50 then goes out and is used for those items you cannot buy on the BasicsCard, so the person gets a benefit. Obviously there is a benefit on both sides and when that occurs clearly a market is there and those things will happen. Notionally most of those issues are repaired through some specific identifier to prevent anyone except for the person who owns the card being responsible for it. I took from the individual who made the submission that this was quite widespread. I have heard these allegations and anecdotes, as no doubt you have. What moves are you making to deal with that matter?

**Mr Maloney**—Yes, we have heard allegations and anecdotes around that issue. We have not had anybody come to us directly and complain about it, but as you have said this is something that may be of mutual benefit. One of the ways we keep track of this is to look at turnover in cards. Clearly, if somebody has a card and they gamble it or exchange it, they will undoubtedly come back to us and seek an additional card. It is probably worth noting, for the record, that 80 per cent of customers who have a BasicsCard still have the original card that was issued to them or the first replacement. We were expecting a reasonably significant turnover in cards as customers got used to the card itself. If you add those customers who are on their second replacement card, the figure goes up to 90 per cent, which is something that, at this stage, we are reasonably satisfied with. There is a small proportion of customers for whom there has been a high turnover in cards. We identify those customers through our records and we have conversations with them about security of the card. Again, it is probably anecdotal, but worth noting, that we have some customers who have a very high number of cards that they have used for whom the card is actually an excellent solution for them for the particular issues they have, including ‘long grassers’ around Darwin. As you know, they live pretty rough and conditions are difficult. They gain greater security of their funds through the card than they have through other mechanisms that might have been used in the past.

From our perspective we are reasonably happy about the turnover in terms of number of cards used. We are also keen to pursue any allegations of people exchanging cards for cash. I do have to say that there is a certain risk element associated with this if somebody were to exchange a card for cash in the sense that you could never guarantee that the person who gave you the card is not going to cancel it a couple of seconds later and you will have no value associated with the card whatsoever. It is a high-risk activity for customers who engage in that.

We are certainly keen to pursue any instances. We have had a couple of reports to us of fraudulent use of cards, which are being investigated by our fraud group. But I suppose the short answer is that people will find their way around any mechanism if they wish to do the wrong thing with the card. I have no doubt this has happened in the case of the BasicsCard, but I have no direct evidence of that and no customers that we have had to investigate on that basis.

**CHAIR**—As you have indicated yourself, it is one of those difficult things to get someone complaining when both sides of the party are quite happy with the process. I know you say that the long grassers are very keen on and they probably delight in the benefits of the BasicsCard. A number of them I know and have spoken to probably do not see it quite that way. Many of these groups of individuals are in the terrible cycle of substance abuse. Their choices are limited by their desires and also the pressure put on them physically and

otherwise by their friends to gain access to substances. It is in that environment that much of these circumstances will occur. It has been put to us that maybe one of the family members who is not in that circumstance will buy \$200 worth of groceries for \$50. Whilst you have not had a single direct complaint about the matter, I submit that you would possibly reflect—and you may comment on that—that that is probably not a true reflection of what is happening out there. I am sure many of the members of the committee would be astonished, like me—and it is not necessarily your view—that the fact that you have not had any complaints would be taken as a reflection on the amount of non-compliance in that area. I will go back to my original question and you can reflect on some of the things I have said. What further things are you doing about this and particularly in terms of identifiers? In other areas of non-compliance in this area if we could have the higher level of specific identifier on the card then the better the compliance. That is the conventional notion.

**Mr Maloney**—Not for a moment do I sit here and suggest that there is not some misuse of the card. My comment earlier was that it certainly has not been reported to us. In this case we are talking about two people who are probably gaining some mutual benefit out of the misuse. We have heard other anecdotes around people purchasing, for example, DVDs or CDs and then selling them cheaper.

Part of our problem, of course, is that we do not necessarily have access to those particular customers and we do have to use indicators, which as I said before are largely around people who have turnover of cards. There is potential there for them to be misused. We identify customers who have had seven or more new cards. We have a conversation, where they come in, about the appropriate use of the card and how they must keep it safe, and the various security mechanisms associated with the card to try to assist them to use it more sensibly. In terms of where we might go into the future, as you probably know, we are looking at a new card. A tender was issued on 29 May for a new card that will come into play from the beginning of April next year. We are looking at security around that particular card and seeking the assistance from the financial industry about how we might improve security of the card. We are looking at things like having the customer's name printed on the card to assist with identification. We are also asking the industry to come back to us with some suggestions of their own about how security on the card might be improved.

**CHAIR**—Thank you.

**Senator MOORE**—Can I follow up on that?

**CHAIR**—Senator Moore has some questions on this area.

**Senator MOORE**—Has the department seen this as a priority? I remember sitting in a community affairs committee eight months ago raising these issues about the use of cards at that time. We were categorically told at that community affairs committee that there was no problem. I am interested to know whether the department sees the allegations that have been raised consistently to this committee and generally in the community as a priority for Centrelink or Human Services to follow through. I am also interested to see what kind of investigative capacity Centrelink now has to go into the community and ask questions? Certainly the history of Centrelink has a long process of people following up on systemic abuse and having that priority, people who are specially trained in the area and working in that area. As to the BasicsCard, which now is a long-term issue in the rollout of this change, has the department seen it as a priority to look at any aspects of fraud? What capacity does the department have to follow up on it?

**Mr Maloney**—We take allegations and the anecdotes extremely seriously. It does concern us around misuse of the card and potential for things like humbugging of customers using the card. We do try to investigate. As I said earlier, one of our weaknesses is that we do not get very many reports at all about misuse of the card. We certainly hear anecdotes. I know when I am in the Territory every visit I hear a different anecdote about some misuse, and when you try to seek the specifics they are not there. I am certainly not saying that they do not exist.

We are focusing our attention at the moment on customer education in trying to assist our customers to use the card sensibly, and of course to use their income management money more sensibly. For some customers that conversation extends to the fact that maybe the card is not necessarily the solution for them, in terms of the way they use their money. As you recall in the communities, many customers used to have particularly their food money allocated directly to the store, and in some cases we are quite happy to have that conversation with customers again about whether that might be a better approach for them, rather than continuing to use the card if there are some issues around potential misuse or perhaps significant loss of the card.



**Senator MOORE**—So, there isn't a systemic alternative?

**Mr Maloney**—I do not think there is a systemic alternative at this stage.

**Senator MOORE**—We had not heard of that option in any previous discussions we have had with the department on whether there are different ways of operating. Certainly, to the best of my knowledge, we have not heard that before in any of our meetings.

**Mr Maloney**—There was a time as the card was rolled out that it was seen as something of a panacea. Frankly, everybody wanted one. Whilst we had a marketing and a rollout strategy, in effect the customers came to us seeking the card. We did not necessarily need to spend as much time in the communities because many of the customers came into the customer service centres seeking the card. It was seen as a highly desirable commodity. I do not think that is necessarily a bad thing. The card certainly has some significant advantages. It is not necessarily for everybody. We are up to about 95 per cent of customers on income management at the moment who have a BasicsCard. I am sure there is a small proportion of those customers for whom it is not necessarily the best answer to the use of their card.

Part of the conversation we have with people, particularly around those who have significant loss of the card or whatever, is around, 'Is this really the best way for you to use your money?' Notwithstanding that in some cases with some significantly disadvantages customers, even though there is a significant workload on Centrelink in terms of replacing cards, that may well be a better answer than allocations, which are not always possible in some places.

**Mr Tidswell**—In terms of whether the organisation pays a lot of attention to these sorts of allegations, I can say with certainty that we follow up each and every one of these. This has been a new area of business for us in terms of income management and now a BasicsCard. If there are potential things going on out there, such as the way the card should be used or income management should be used, we are keen to follow them up, learn from them and put in place checks and balances to make sure that does not occur again. There has been a whole range of suggestions and allegations. We have continually gone and looked at those and will continue to do that. We do have adequate resourcing to do that piece of work.

**Senator MOORE**—Is that through the fraud prevention area?

**Mr Tidswell**—That is across our whole business integrity division, which looks right across-the-board at all payments and services. This is challenging because it is new and different. You are dealing with retail providers, customers, their knowledge, what they have to do and so on. It is not an area that we have had a whole lot of experience in, but we are experienced in terms of people defrauding the system and making sure we have a good solid program to prevent that.

**Senator MOORE**—I understand the way the department has operated in the past is that within what I used to know as fraud prevention there used to be priorities, and there would be key areas that that group would be looking at. They would focus their resources around it, do specialised training and then that would be a particular issue. My specific question was: has the use of the BasicsCard been identified as a priority for that area?

**Mr Tidswell**—I would not say necessarily as a priority. In the big scheme of things, the evidence to us is not showing that this is a major area of fraud in the big scale of the \$70 billion that we deliver to Australians. In that context, each and every one of the examples is followed through and checked out to try to get to the veracity of the allegations.

**CHAIR**—You talk about evidence and why we are concerned. It is not about anecdotal evidence. There were 36,000 cards issued. There were 17,000 original cards and 18,000 replacements.

**Senator MOORE**—That is a lot.

**CHAIR**—That is more than the total amount of cards issued. This is not about anecdotal evidence; this should be like getting hit in the head with a brick. More cards have been lost and replaced than have been issued. This is preposterous. I do not understand how it could possibly have happened that 17,000 people have lost their cards. I am heartened that you say that you have identified a demographic that just goes through cards like water. Either they are blokes like me who lose things or there is a degree of non-compliance in a small demographic. I am not suggesting you are comfortable with the situation, but I do not understand it. Perhaps you could provide for us the percentage of that 17,000 that are having their cards replaced to the degree you said sometimes up to nine replacement cards and so on. The concern I have is that clearly the anecdotal evidence is about the sale of the cards. It is not saying, 'You can borrow that and you spend \$200

and then give it back.’ This is not a demographic that does business like that. You sell the card once, it is gone, ‘I need another card.’ There is that much left on it this week, or something along those lines. That would make sense to me. The amount of cards is more than the total number issued, which I would have thought would ring huge bells in terms of the priority.

**Mr Tidswell**—We are obviously happy to take that on notice and get that advice to you. We have to do some benchmarking with the banking sector. What is the reality out there in terms of the use of cards period, say, in terms of Commonwealth Bank key cards and so on. This may also be a factor, as you are fully aware, of the demographic that we are dealing with here. When you outline those figures it sounds very high, but that might be the norm in dealing with plastic cards across this demographic.

**CHAIR**—Thank you. Senator Adams.

**Senator ADAMS**—We have had evidence from the National Carers Association this morning. They were saying that as far as Indigenous carers go there are a lot of problems in their being able to get on to a carer’s pension rather than being on the disability pension, the reason being that a number of these carers are people over 50, and mainly women. The grandmothers are working in the carers area. Can you explain to me the issues around that? Is it that they do not know how to apply or is there any help for them to apply, or is it because the doctor has to fill out quite a large amount of paperwork and also perhaps the application forms are rather difficult to work through?

**Mr Tidswell**—I will make some opening comments and then I might see if Ms Jo Gaha has any further information. One of the things that we identified when we started this whole Northern Territory emergency response intervention work that we have done is that there were a lot of individuals in communities who were not on the right payments for their circumstances. Now that we are getting more people going into these communities there is a chance to look at whether they are on the right payment and service. Increasingly we are getting on top of that backlog and working through questions such as is it the disability support pension, is it the aged pension, is it a carer payment or carer allowance, who is looking after the children for family tax benefit, and so on? We are increasingly getting on top of that. The specifics of the issue I have not been briefed on previously, so it is not something I am familiar with, but my understanding is that it would be about the percentage of care, who is looking after that person and the differences that would play out in that space.

**Ms Gaha**—In recent times, the numbers of Indigenous customers accessing the carer payment and allowance and disability support pension have improved or have increased. We have had some concerns across Indigenous servicing that for a variety of reasons our Indigenous customers have accessed the Newstart payment in the past rather than disability or carer’s and that that changed once the remote area exemptions were lifted in remote areas and people had to comply with the participation regime, and we saw Indigenous people starting to apply for other payments. I think—and I am sure my colleagues in FaHCSIA would agree with me—that together we have identified a number of barriers in the way the policy is formulated as well as the way the form is put together and service delivery occurs that makes it harder for some Indigenous people to access carer and disability. It has to do with not having access to doctors or shared care. Many of the Indigenous languages do not have a term for ‘disability’ or ‘carer’, because it is part of the family cultural network. We have been doing some work with our colleagues in FaHCSIA around ways to make those payments more accessible to our Indigenous customers. I would be happy to get you some more information on that and answer your specific questions. It is certainly an issue that in general we have been concerned about.

**Senator ADAMS**—Have you had any correspondence from the Carers Association regarding this issue?

**Ms Gaha**—No, but I will check with the national manager who looks after that payment to see if that person has.

**Senator ADAMS**—One of the main issues in the evidence this morning was that there was a problem somewhere in that area. It is good that you are here. At least we can highlight the issue. Perhaps if it could be followed up with the National Carers Association—

**Ms Gaha**—I will be happy to take that on notice.

**Senator ADAMS**—and the evidence that was given this morning. As to the rollout of the Outback stores and general store management, can you give us an up-to-date comment on how that is going as far as Centrelink is concerned?

**Mr Tidswell**—That is primarily a question for FaHCSIA, but we are always working with stores across the Territory doing our bit to get them sorted out to be able to accept the BasicsCard. That is our role in it.

**Senator ADAMS**—What if they have a breakdown with their telephone line, as happened in Milingimbi when we were there. It was very good for this committee to see the problems associated with that. Have you got the message through to your store owners that perhaps a call to Centrelink might have helped in a situation such as that?

**Mr Maloney**—Yes. The Milingimbi one, as I mentioned last week, was unfortunate in the sense that the problem was intermittent and therefore the store owner did not feel the necessity to let us know, which is probably something we would have preferred, particularly with the benefit of hindsight. We regularly work with store owners, particularly with their account managers in the Northern Territory. We have about 12 staff up there whose sole job is to work with merchants in remote communities and in the urban areas to provide them with assistance and advice on what they should and should not be doing. We also have a substantial compliance regime where we check a certain percentage of the stores in terms of their compliance with both their BasicsCard and their income management requirements with Centrelink. That provides us with valuable feedback to go back to all the merchants if there are any systemic issues that we might be concerned about. We do spend a fair bit of time with them and we do constantly reinforce the needs to let us know. Usually, I have to say, they are pretty good. If the system is down they are very keen to let us know what is going on. We have a merchant hotline set up that they can call to let us know.

**Senator CROSSIN**—Have you or your officers had a chance to read the transcript of my questions in Darwin about the application of the BasicsCard?

**Mr Maloney**—No, I do not think I have, I am sorry.

**Senator CROSSIN**—That is a shame, because I wanted to follow up on that today. My understanding is that the BasicsCard cannot be used for lay-by. Have you had any discussions with FaHCSIA about this aspect?

**Mr Maloney**—Yes, it has cropped up a number of times since the card was brought in. As you know, FaHCSIA has policy responsibility for the merchant framework. We have raised the issue with them several times and I think, like most other aspects of that particular policy, they do review it from time to time. I do not wish to dodge the question, but I would probably refer it to my colleagues in FaHCSIA for a detailed response.

**Senator CROSSIN**—Are they reviewing it? Do you know if that is the case?

**Mr Maloney**—I am not aware that they are reviewing it at the moment, but I do know there are other aspects of that framework that they are looking at currently.

**Senator CROSSIN**—Are you involved in that?

**Mr Maloney**—No. We provide input into the policy. We do not necessarily get involved in the decisions around it.

**Senator CROSSIN**—Do you get involved in the review of it, though?

**Mr Maloney**—As I said, we certainly provide input both in terms of the feedback that we get from merchants and from customers to FaHCSIA. We certainly talk to them about our views around particular policy issues where they might be causing concern for merchants or customers, but we do not get involved in the final decisions. We do not make submissions—

**Senator CROSSIN**—What feedback are you getting about the use of the card on lay-bys?

**Mr Maloney**—I cannot say that in recent times I have had very much at all.

**Senator CROSSIN**—Have you had any feedback about the use of the card on lay-bys?

**Mr Maloney**—Certainly over time since the card went in there have been a number of comments from merchants that they cannot understand why the card cannot be used for lay-by, and we have passed that on to FaHCSIA.

**Senator CROSSIN**—Does your area do anything about looking at any barriers to it becoming used for lay-bys or is that an area you hand to FaHCSIA for them to look at and investigate?

**Mr Maloney**—I think it is a matter for FaHCSIA. It is a difficult policy issue. We have had discussions with them a few times about it. Some of it I think is about the certainty of customers being able to make future payments, and some of the issues around failing to fulfil a lay-by obligation that a customer might have could bring a customer into difficulty. I think that is their major area of concern.

**Senator CROSSIN**—Would it be your area of concern? Do you have any experience with that?

**Mr Maloney**—Area of concern in the sense—and I must admit I do not want to sit on the fence about this—that I can see some pluses for customers being able to save and put things on lay-by. I can also see some of the difficulties with some of the lay-by agreements that could bring our customers into some problems in terms of their purchases and they could lose some of their money.

**Senator CROSSIN**—Do you know how many people who have a BasicsCard might also have a MasterCard or a credit card?

**Mr Maloney**—No, I am sorry. Mr Tidswell mentioned earlier the need to do some benchmarking with the other financial institutions, but I would have to say they are not terribly forthcoming.

**Senator CROSSIN**—Why is that?

**Mr Maloney**—I suspect it is a matter of commercial interest for them.

**Senator CROSSIN**—You have had no discussions, though, with the Traditional Credit Union?

**Mr Maloney**—No, I do not believe that we have.

**Senator CROSSIN**—Do you intend to?

**Mr Maloney**—Not at this stage, no.

**Senator CROSSIN**—You do not see any benefit in that?

**Mr Maloney**—In respect of what?

**Senator CROSSIN**—In respect of feeding your input into any review about the use of the card. If the Traditional Credit Union was able to tell you that there were a certain number of Indigenous people in the Northern Territory who had a MasterCard albeit with, say, only a \$1,000 limit, surely that would then influence and feed in your view about whether or not a BasicsCard could be used for a lay-by?

**Mr Maloney**—I am not averse to talking to anybody about the use of the card so I will take that on advice. I suspect there are other financial institutions that would be far less forthcoming about their issues around lay-by.

**Senator CROSSIN**—What do you mean by that?

**Mr Maloney**—I mean in terms of the larger financial institutions, the banks, et cetera, who issue the majority of cards.

**Senator CROSSIN**—The basic premise here is that we cannot allow the BasicsCard to be used for lay-by purposes because we are unsure about the ability of Indigenous people to actually pay off an item. That is the bottom line here. I am wondering if there are any federal departments that have looked at the number of Indigenous people who are entrusted with a card such as a MasterCard or a bankcard through the banks or financial institutions to alleviate those concerns. It is about cross-checking, I suppose, any research or policy analysis that might determine a future direction in this area.

**Mr Tidswell**—FaHCSIA are the policy owners for this piece of work. They may well have done this sort of research. We administer the system as we are asked to do it. As Mr Maloney has indicated, when we get feedback about how it is working or not working we put that through to the policy makers and then they make their decisions. We are not privy to the sorts of conversations or debates that go on from there.

**Senator CROSSIN**—Is the feedback that you are getting at all across-the-board from merchants or clients that if we can use other cards for this means why not a BasicsCard? Do you have any data or any research that Centrelink collects that would inform a view about that?

**Mr Tidswell**—I think Mr Maloney said he does not have a lot of information or feedback that this is a particularly hot topic in respect of the BasicsCard, but you might have more information than we do.

**Senator CROSSIN**—As I travel out to remote communities I find it is a particularly hot topic amongst women who want to travel into major service centres, particularly in the lead-up to winter, to trying to lay-by a whole heap of warm blankets while in the store. It became an issue the other week when I was in a community with a family who wanted to lay-by a little chest freezer. They certainly could have bought it, but it would have used up most of their family's income for that week, so they wanted to put \$100 down on a lay-by and pay off the rest the following week and were not allowed to do that. It is a basic right as a citizen in this country to lay-by essentially.

**CHAIR**—I think you need to acknowledge that these are circumstances where some of these stores do not have that many items. They might only have one. And the reason they are lay-bying is not necessarily that they

do not have the money or are not budgeting, it is simply that they know that is going to be the last of that stock and their family are going to need it. They are going to be able to pay for it next time. It is simply because the availability of stock, particularly in these remote areas, is not as we are used to it here.

**Mr Tidswell**—I think these are questions for FaHCSIA.

**Senator CROSSIN**—I suppose the point I am trying to make is that with a client service focus it just cannot be all care and no responsibility. I understand FaHCSIA has the main policy role here for this, but there need to be crucial people like you and your officers in the field who are feeding input or else we will not have a change in the policies.

**Mr Tidswell**—That is what we do. Part of our role is to feed information back from the front line wherever we are right across all the things that we do, and we have a continuous process to do that. What I am not—

**Senator CROSSIN**—Sorry, what is that continuous process? How does that work?

**Mr Tidswell**—It could be a variety of things. It could be a specific request for information. It could be a specific request for information. It could be an exchange of emails between officers. It could be for us to gather some data in certain circumstances. This happens right across the country.

**Senator CROSSIN**—Who is responsible for gathering that data or if an email is exchanged between officers where does the last email end up? Is it in your in-tray?

**Ms Gaha**—My branch looks after the feedback to the policy department, although Mr Maloney's branch also does that in relation to BasicsCard. Most of the feedback that we get comes from the teams that go out to do the service delivery. Each week they send me or my branch all of the information that we require to report to our policy departments, to FaHCSIA and in some instances to DEEWR. I have not had any feedback in any recent times around the lay-by issue, although I have heard earlier on in the intervention that it was raised as a policy issue. But the material comes to me and then I work very closely with my counterpart in FaHCSIA and I pass that feedback through to my counterpart and to that branch.

**Senator CROSSIN**—Would your people, though, be actively going to stores and to businesses or would they be relying on feedback from clients?

**Ms Gaha**—The feedback I get is mainly from clients. The feedback Mr Maloney gets would also be from stores, because his people do that work.

**Mr Maloney**—There are two aspects to that feedback. As I said earlier, we have a group of account managers who liaise closely with the stores. As Mr Tidswell said earlier, we have teams out in the communities on a regular basis, probably on average about once every three weeks, and they would collect feedback that they would provide to us if there were an issue that they believed required attention.

**Senator CROSSIN**—How do you monitor the use of the BasicsCard?

**Mr Maloney**—There is a variety of ways that we monitor the use. As I mentioned earlier, with regard to merchants we have a compliance regime in place where we actually visit the merchant and go through their records, talk to their staff and make sure that signage, et cetera, that is required is in place.

**Senator CROSSIN**—What does 'their records' mean?

**Mr Maloney**—They are obliged as part of their BasicsCard agreement to keep their receipts for two years. We take the opportunity to go through—

**Senator CROSSIN**—The til receipts, you mean?

**Mr Maloney**—Yes.

**Senator CROSSIN**—If I own a roadhouse on the Stuart Highway, can you head into my roadhouse and say, 'I want to see your receipts for the last week?' and would those receipts tell you, firstly, what has been bought at my roadhouse and, secondly, what has been bought on a BasicsCard?

**Mr Maloney**—Roadhouses are a particular issue, I suspect. But as part of our compliance regime we expect the merchants to—

**Senator CROSSIN**—I want you to answer a question about roadhouses, because that is where I have a particular issue. Roadhouses have BasicsCards. There is a sign in their window stating 'We accept BasicsCards'. How do you monitor and police the use of that card?

**Mr Maloney**—By and large, BasicsCards for roadhouses—I know there are some nomenclature issues around that particular term—are usually for fuel only. They have not been approved for food or other goods.

**Senator CROSSIN**—Why is that?

**Mr Maloney**—It is a FaHCSIA policy issue.

**Senator CROSSIN**—I can go into a roadhouse and I can fill up my tank with petrol, but while I am there I cannot buy five toasted sandwiches for my family at the same time on my BasicsCard?

**Mr Maloney**—At this stage, that is correct.

**Senator CROSSIN**—Have you provided any input into FaHCSIA about how illogical that is?

**Mr Maloney**—I would suggest there have been numerous discussions between us and FaHCSIA around the issue of roadhouses. I understand it is under intense consideration again at the moment.

**Senator CROSSIN**—Are you able to ascertain whether a roadhouse has sold alcohol on its BasicsCard?

**Mr Maloney**—We should be able to tell if a roadhouse or any organisation has sold alcohol.

**Senator CROSSIN**—You should or you can?

**Mr Maloney**—I cannot categorically say that we could in absolutely every case, but as you know in some instances the receipts do not necessarily specify down to a particular level what a card has been used for. That depends somewhat on the accounting mechanism used by the organisation.

**Senator CROSSIN**—How often would petrol stations or roadhouses up and down the main highways get a visit from Centrelink?

**Mr Maloney**—We have a regime this year where we have visited 130 merchants in the Northern Territory. I could find out for you, if you like, how many those would include—

**Senator CROSSIN**—Only 130 across the Northern Territory?

**Mr Maloney**—That is right.

**Senator CROSSIN**—You are talking about any sort of shop, any sort of outlet, any sort of retail proprietor?

**Mr Maloney**—Of those merchants with a BasicsCard.

**Senator CROSSIN**—So, 130 in a year?

**Mr Maloney**—The card only started rolling out in September last year.

**Senator CROSSIN**—In an average week how many people would you send in to check what is happening?

**Mr Maloney**—Our agreement with FaHCSIA is to do a compliance check on 15 per cent of organisations per annum.

**Senator CROSSIN**—How many organisations per annum are there?

**Mr Maloney**—Our original aim was around 500 merchants in the Northern Territory.

**Senator CROSSIN**—In total?

**Mr Maloney**—Yes.

**Senator CROSSIN**—Who have access to a BasicsCard?

**Mr Maloney**—That is correct.

**Senator CROSSIN**—So, 15 per cent is 50 to 60?

**Mr Maloney**—Yes. We also have merchants in other states that accept BasicsCard, as you know, as part of other particular regimes and we are doing checks with those as well.

**Senator CROSSIN**—It is highly likely that roadhouses on a highway may well be selling alcohol through the day on a BasicsCard and it would be rare your people would visit them, pick that up and check on it.

**Mr Maloney**—I would not say it would be rare. We do our compliance checks on the basis of two premises. One is we do a random selection of merchants, particularly focused on those who might sell prohibited goods, which would include alcohol, and we also respond to any complaints or queries that we get from customers about misuse of the card.

**Senator MOORE**—Have you had many complaints?

**Mr Maloney**—About the sale of alcohol?

**Senator MOORE**—Yes.

**Mr Maloney**—No. We hear the odd anecdote. We hear about customers attempting to use cards in some fairly creative ways to purchase alcohol. I think there was an article recently on the ABC about an incident in Alice Springs where a customer attempted to purchase using a cleverly disguised BasicsCard and we followed both of those up.

**Senator CROSSIN**—What is the penalty if a retailer is providing goods that are prohibited on the BasicsCard?

**Mr Maloney**—The ultimate sanction is that the BasicsCard contract will be withdrawn.

**Senator CROSSIN**—Are there any such outlets under investigation in regard to that?

**Mr Maloney**—Not at this stage. As I said, we have had two queries. One was a media query about misuse in Alice Springs which we investigated and certainly could not find any substance to the particular inquiry, and the other one was an attempt by a customer to disguise a BasicsCard to purchase some alcohol from a liquor outlet and, frankly, it was physically impossible for that to have happened.

**Senator CROSSIN**—If you are in the middle of nowhere and you are selling alcohol through the day on a BasicsCard, the client and the seller are not about to raise a flag about it, are they? They have a nice cosy deal going on.

**Mr Maloney**—We discussed that earlier about some sort of mutual benefit. Certainly, as part of our compliance regime with those organisations that we looked at, we have not found a single example of a customer having purchased alcohol. Again, I would not put my hand on my heart and say that absolutely could not have happened, but if it has happened and we hear about it, we will certainly follow it up.

**Senator CROSSIN**—Many years ago now a Centrelink office was placed in Maningrida and we discovered that after 12 months it had proven to be a substantial benefit to that community and its surrounds, in terms of increased social security money, families being linked up, payments being made. Have you ever done an analysis or assessment of the benefit of putting that office in that community? I think since then Wadeye and Nguiu have got one.

**Mr Tidswell**—I will run through our approach to what we call remote area service centres around Australia.

**Senator CROSSIN**—I know that. I just want to know if you have done any research about the benefit of putting Centrelink offices into communities rather than flying teams in and out?

**Mr Tidswell**—What we have found in our exploration of that is that by having local Indigenous people as staff and training people that we are able to get better services to those communities. More people are able to get their right payments and right rate. In that instance, prior to the Northern Territory intervention in the territory, we were able to put in place arrangements for money to go into housing as well. Ms Gaha has probably got more information on that.

**Senator CROSSIN**—Is there a research or a document that you can provide the committee that qualifies and quantifies your view? You have obviously come to a view that that was a benefit?

**Ms Gaha**—Yes.

**Senator CROSSIN**—My first question is: do you have a research document that you have produced? My second question is: what plans or what initiatives have you taken to the relevant minister to prove to him or her that more of these offices need to be placed out bush? It would address some of the issues we heard this morning from Carers Australia, for example.

**Ms Gaha**—We have put together a case for further remote area service centres. We have got 12. We think they work extremely well, although we have to carefully pick where we put them because you need a particular size of population in order to get the staff that can work in the centre. Yes, we have put together an argument in favour of that. We also check on the amount of money that goes into every one of our customer service centres and how that benefits the community. In terms of our servicing, we would see that as a very important way forward to have more of these remote area service centres.

**Senator CROSSIN**—Are you able to provide this committee with any research you have done about the benefits of that?

**Ms Gaha**—I would be happy to.

**Senator CROSSIN**—And where your 12 centres are?

**Ms Gaha**—Yes, I would be happy to do that.

**Senator CROSSIN**—Finally, can you just take on notice for me what percentage of Australian Hearing Services budget is dedicated to Indigenous servicing?

**Mr Maloney**—That is the Department of Human Services.

**Senator CROSSIN**—I was going to ask you some questions about hearing services, but we are going to run out of time.

**Mr Maloney**—I am sure the Department of Human Services will take that on notice.

**CHAIR**—Indeed. There may be some other questions on notice, but you can see by the popularity, whilst we are running out of time, I have just made an executive decision to go to Senator Siewert and perhaps we can slide into our morning tea for five minutes.

**Senator SIEWERT**—I wanted to follow up on the audit issue. In your submission there is table 4 for allocated funds by priority items. I am just wondering how you came up with that list? I presume some of it will be obviously because you will have sat down with the clients and you know how much goes off for rent for housing, but for example, household goods and food, given that you audit only 15 per cent of people with BasicsCards, how do you know that 63.9 per cent—I have rounded it up—is spent on food?

**Ms Gaha**—This is not an audited amount, this is an actual amount that we keep track of on how money is spent.

**Senator SIEWERT**—How do you know that? That is what I am asking. If you do not know that people can or cannot buy alcohol, how do you know that people have spent 64 per cent of money on food?

**Ms Gaha**—We know that 64 per cent of money has been spent in shops that primarily sell food. We cannot actually say every single item, because they also sell clothes.

**Senator SIEWERT**—Exactly. There are household goods and all sorts of things.

**Ms Gaha**—That is correct.

**Senator SIEWERT**—You do not actually know that 64 per cent has been spent on food.

**Ms Gaha**—No. We know that that amount of money has been spent in shops that primarily sell food.

**Mr Tidswell**—As the table said, it is the allocated funds. When we sit down with customers, as you are well aware, we work through to allocate to their priority needs. That is where that data is taken from.

**Senator SIEWERT**—That is where that comes from.

**Mr Tidswell**—Yes. It is not after sale.

**Senator SIEWERT**—When you say ‘food’, what you actually mean is that is the percentage of money that is allocated to the store where they can buy things.

**Ms Gaha**—That is right, the store that primarily sells food.

**Senator SIEWERT**—For example, if they had been able to lay-by their blankets they could have spent all of the money they had allocated that particular fortnight on the blankets that they wanted to buy?

**Ms Gaha**—They could have, or they could have spent money that had accumulated in their fund and bought the blankets, or they could have spent their other 50 per cent on blankets.

**Senator SIEWERT**—Can you tell me how much, on average, people are accumulating in their income managed funds?

**Mr Maloney**—I can tell you how much is in there at the moment. I am trying to do the maths in my head as to what that equates to. There is about \$3.6 million in unallocated funds currently across the 15,000 or so customers. As you would appreciate, that goes up and down as people get paid and as people spend money and make allocations. But that figure has been reasonably steady for some time now.

**Senator SIEWERT**—You have another table that shows the type of customers under each of the different payment types, and 5.53 per cent are youth allowance. Are any of those students studying outside the NT?

**Ms Gaha**—I would have to take that on notice.

**Senator SIEWERT**—If you could, and if you could tell me the numbers of students that are studying outside the NT.

**Ms Gaha**—They would be typically on Abstudy.

**Senator SIEWERT**—If they are outside?



**Ms Gaha**—That is correct, because there is an allowance that covers them.

**Senator SIEWERT**—For those living outside?

**Ms Gaha**—Yes. I will check that for you.

**Senator SIEWERT**—That would be appreciated. We had a long discussion on Friday in the cross-portfolio estimates around SEAM and lists being provided or not provided to schools. We were told there that lists of students' parents or carers who are on income support are not supplied to the school. Is that the policy?

**Ms Gaha**—That is correct. I am not responsible for that; no-one here is. It is Ms Vicki Beath, who answered on Friday. We work closely together and that is policy, that it not be provided for privacy reasons.

**Senator MOORE**—So the Centrelink policy is that those lists are not given out; is that right?

**Ms Gaha**—Centrelink sought advice, that is correct.

**Senator MOORE**—Yes. That is it. It is not a department of education list; it is a Centrelink list. That is your ownership.

**Ms Gaha**—That is right.

**Senator MOORE**—The Centrelink policy is that that Centrelink list is not made available?

**Ms Gaha**—That is correct.

**Senator SIEWERT**—With each student that may not be attending or has been identified as not attending, does the school ring to find out whether that child's parents are on income support?

**Ms Gaha**—It is my understanding that the school needs to make contact with Centrelink if they are putting together a management plan to see if that child qualifies for the trial.

**Senator SIEWERT**—Do you keep an updated list around customers coming in for access to financial services on an ongoing basis?

**Mr Tidswell**—Across the entire organisation or just in terms of the—

**Senator SIEWERT**—I am particularly interested in the NTER.

**Mr Tidswell**—I do not know if we would have that.

**Ms Gaha**—It is just to make a referral.

**Mr Tidswell**—We keep data in respect to people that are referred to our financial information services offices. We would have to take on notice about the numbers.

**Senator SIEWERT**—I am interested in the numbers and whether you were auditing the success of those financial services with FaHCSIA?

**Mr Tidswell**—Would that be the service that is provided by FaHCSIA? I have to say it is not ours.

**Ms Gaha**—It is not our service, but we would refer to it.

**Senator SIEWERT**—Do you have financial counsellors in Centrelink?

**Mr Tidswell**—We do. We have what we call financial information service consultants. We can take advice and see what numbers have been referred. As I outlined on Friday, our role in that is described as very informal financial planning. Sitting down with people and working through what a basket of goods is going to be for the week or the fortnight is the first start in that process and then, as you have indicated, some people build up some unallocated funds and are then able to purchase other goods and all sorts of stuff. It leads to that kind of ability to start learning about budgeting, dollars in and dollars out.

**Senator SIEWERT**—I am interested in finding out how much that is actually operating.

**Ms Gaha**—Can I just check? Is that from the Northern Territory?

**Senator SIEWERT**—For the Northern Territory, yes, for the NTER. Where it applies to compulsory income quarantining, I am interested in knowing the level of referrals to the money matters programs, but also access to financial services within Centrelink.

**Mr Tidswell**—We will do that.

**Senator SIEWERT**—Mr Maloney, you commented that the people could trade the BasicsCard and they could then cancel them. I am wondering how many people have, in fact, come and asked you to cancel cards?

**Mr Maloney**—I do not have that information with me, but I can certainly find out for you.

**Senator SIEWERT**—You can take it on notice.

**Mr Maloney**—Yes.

**Senator SIEWERT**—That would be appreciated. Thank you. You raised in your submission the area around child support. You say:

CSP is currently formalising details with Centrelink Northern Territory Operational Group (NTOG) on joint community visits to priority customers and community groups in remote areas of the NT.

Has that program started?

**Ms Gaha**—What page are you on?

**Senator SIEWERT**—I am on page 3, at the bottom, on child support services. CSP is currently negotiating with Centrelink in the Northern Territory on community visits.

**Mr Tidswell**—I am not fully aware of when that is going to be put in place. I understand that the group that is responsible for that is the Northern Territory Operations Group and they would see it as part of the sensible expanded service offer as we go into communities.

**Senator SIEWERT**—I am not having a go; I have a record of looking at the child support program and I am interested if they have started and how it is being picked up.

**Ms Gaha**—I will take that on notice and find out for you.

**Senator SIEWERT**—Thank you.

**CHAIR**—Senator Adams.

**Senator ADAMS**—I have a question on the child protection and voluntary income management trials, mainly in Western Australia. How is Centrelink dealing with that as far as the staff go and, secondly, how many people have come forward and wanted to be voluntarily income managed?

**Mr Tidswell**—I will have Ms Gaha look for the details on that. This has been another challenging implementation issue for us to work with. We need to work closely with our state counterparts in Western Australia to do that work and to do it carefully in consultation with communities. We have put a lot of effort into training our staff, getting them familiar with what the approaches will be and how it will move forward, but building off the experience that we have got from putting in place income management in the Northern Territory.

**Ms Gaha**—What was your query about staffing?

**Senator ADAMS**—How are you coping with staffing of that particular trial? Obviously voluntary income management has been slightly expanded and it seems to be more popular. The other question is regarding those that have to come to Centrelink because of the child protection issues.

**Mr Tidswell**—I can say that as at 8 May 2009 there were 23 customers on child protection income management.

**Senator ADAMS**—How much voluntary?

**Mr Tidswell**—We have 19 Centrelink staff employed in Perth and the Kimberley region to deliver on that initiative. We are working very hard at getting it right.

**Senator ADAMS**—Did you say it is in Perth and Kennington?

**Mr Tidswell**—Correct.

**Senator ADAMS**—What about the Kimberley?

**Mr Tidswell**—That is in the Kimberley.

**Ms Gaha**—That is in the Kimberley. The voluntary income management numbers are 138. We tend to train and support all of our remote staff to do all of the pieces of work so that they are across everything that a customer might need servicing around. We increase the numbers as we need to, depending upon what service delivery we are delivering.

**Senator ADAMS**—Do you employ Indigenous interpreters?

**Ms Gaha**—Yes, we do.

**CHAIR**—It appears we are working through some priorities. We have one other question that cannot possibly be put on notice, I understand, from Senator Crossin.

---

**Senator CROSSIN**—That is right. Mr Maloney, do you have any local Indigenous people working in your Centrelink offices still on CDEP?

**Mr Maloney**—I could not answer that question.

**Ms Gaha**—Do you mean have we got any Centrelink staff on CDEP?

**Senator CROSSIN**—Yes.

**Ms Gaha**—Not to my knowledge.

**Senator CROSSIN**—Have they all been moved now on to the employment books of Centrelink?

**Ms Gaha**—That is my understanding. We employ people through our HR rather than through CDEP.

**Senator CROSSIN**—Can you check for me?

**Ms Gaha**—I will.

**Senator CROSSIN**—Otherwise, my next question will be why? If you still have people on CDEP, then I want to know why.

**Ms Gaha**—Yes, so would I.

**CHAIR**—Thank you very much. We will put written questions on notice. Just to give you a heads up, we do have some clarification in regard to some evidence we received this morning that we were not sure about, but you might be able to clarify for us that people over the age of 50 in Indigenous communities have some sort of convention that they go on to a disability payment until such time as they are retirement age, when they go on to a pension. That has been put to us. I wondered if you would be able to clarify that on notice.

**Ms Gaha**—Yes. I picked that up in the question that the senator asked and I will clarify that.

**CHAIR**—Thank you for your appearance today. Thank you for tolerating us sneaking ahead a little bit.

**Proceedings suspended from 11.27 am to 11.39 am**

**O'RYAN, Mr Francis Michael, Director, Policy and Program Development, Indigenous Land Corporation**

**CHAIR**—Information on parliamentary privilege and the protection of witnesses and evidence has previously been provided to you. The committee has before it your submission. I now invite you to make a short opening statement and at the conclusion of your remarks I will invite members of the committee to ask questions.

**Mr O'Ryan**—Thank you for the opportunity to appear before the committee. I want to apologise on behalf of our general manager, David Galvin, who had a previous engagement and unfortunately could not make it here today. The ILC has not been involved in the Northern Territory emergency intervention, so we do not have any particular comments to make about that issue. The ILC was set up in 1995 as a Commonwealth statutory authority. We have a seven member board, five of whom are Indigenous, including the chairperson, Shirley McPherson, and the deputy chairperson, Sam Jeffries. We have got two main functions, land acquisition and land management. Since 1995 we have acquired in excess of 220 properties for Indigenous people; 117 of those are in regional and remote locations, totalling some five million hectares.

As I said, we do two things: land acquisition and land management, and we do that in two ways. We call for applications from Indigenous groups and we also initiate projects on our own behalf. We operate 15 agricultural and tourism businesses in regional and remote Australia where the focus is on training that links to employment and also bringing land back into production. We do that through industry based training, the payment of industry wages, the provision of board and accommodation when we can do that and then mentoring and job placement assistance once people are placed in jobs.

We have four main priorities: socioeconomic development, education, sustainable management of land and also cultural and environmental heritage protection.

The ILC board has a high priority on training and employment and the achievement of training and employment outcomes. We have 100 staff in the ILC; 25 of those are Indigenous people. We run 15 properties around Australia and employ 128 full-time equivalent Indigenous people through our payroll company, National Indigenous Pastoral Enterprises. We are aiming to increase that employment to 200 by 2012. In 2009-10 we are aiming to achieve 300 job outcomes through the work that we do and to train 600 people.

Our submission points out that the ILC board finds CDEP very frustrating. It is particularly frustrating where people can leave paid jobs and return to CDEP or income support and on many occasions without any sanction being applied. The ILC board thinks that the CDEP scheme should focus on transitioning people into employment. The ILC chairperson has a particular view that CDEPs in remote locations should do more in terms of providing fresh fruit and vegetables to Indigenous communities. We have made that suggestion to the minister. We have indicated we are prepared to work with state governments and responsible Commonwealth agencies. In fact, we are about to commence a partnership with the EON Foundation in Western Australia to trial three fruit and vegetables gardens in schools in the Kimberley.

The ILC thinks that the government can do more in terms of developing training and employment outcomes in regional and remote Australia, including by focusing on industry opportunities in those places. The mining industry is an obvious example. The ILC's involvement in the agricultural and tourism industries demonstrates that where there are genuine commercial businesses operating people can achieve training and employment outcomes.

We have also got a partnership with the Department of Environment, Heritage, Water and the Arts involving the Indigenous Protected Areas program and their national reserve system which sees 220 rangers employed and 76 full-time jobs and 111 part-time jobs. I will do my best to answer any questions that the committee might have.

**CHAIR**—When you say that there is some frustration with the CDEP and no sanction being applied, when individuals leave, either voluntarily or otherwise, what is the process of reporting from your perspective?

**Mr O'Ryan**—Most of the people we engage on our businesses are engaged by group training companies and they are paid an industry standard wage to undertake training. It starts at certificate I, which is work experience, job ready type training and people can move through certificate II and III. Certificate III basically guarantees a person a job in a particular industry—agricultural, mining or pastoral industry—and even onto certificate IV. The process when people do not turn up and leave is that the group training company advise Centrelink that those people are no longer turning up for work. We do not have a particular responsibility

ourselves but we know anecdotally that people do leave jobs that the ILC provides and return to either CDEP or income support.

**CHAIR**—Are you aware in those circumstances whether or not the group training provider has reported that to Centrelink?

**Mr O’Ryan**—I would have to check that for you, but my understanding would be that would be the process, yes.

**CHAIR**—Whilst I understand it is always difficult to name organisations—not necessarily individuals—but if there are organisations that you know are involved we can always write to them and ask them if they are happy to provide some more material. Perhaps you could deal with that on notice.

One of the ongoing issues as to growing fruit and veg or any other project with Indigenous communities is that for it to work—in my history I have had a fair bit to do with it; there are a number of them around the country that have not worked simply because there was no covenant about who owns the vegetables when they are grown; who sells them; how do the proceeds flow back to the people that put in the effort and all those sorts of issues that you would no doubt be aware of. How have you gone about resolving those?

**Mr O’Ryan**—We are in the process of trying to do it. I used to manage the CDEP program for my sins in a former life, so I am very aware that a number of CDEP organisations did in fact establish market gardens. Unfortunately often the success or failure of a CDEP organisation depended upon the people who were there at the time. We saw a lot of those gardens working very effectively while there was some capacity, some knowledge and expertise on establishing them and then organising people to operate them. That is why we are talking to the EON Foundation, which is a not-for-profit organisation in Western Australia. We are aiming to focus the vegetable gardens around schools so that school kids have the opportunity to grow vegetables. They enjoy that. They learn from it and, better still, at the end of the day they can eat them. The focus is less on the marketing of the vegetables and more about the education that arises from growing them. In 2009-10 we are looking to establish three in the Kimberley with the EON Foundation. We are also hoping to get funding from the Western Australia Department of Agriculture to assist.

**Senator ADAMS**—Whereabouts are they going in the Kimberley?

**Mr O’Ryan**—One community is Mowanjum. The second one is One Arm Point, Noonkanbah. I am not sure of the third one. I will let you know. I am not even sure that that has been decided yet. We are still negotiating with the community because we will only do it in places where the community wants it to happen.

**Senator CROSSIN**—Is your program for the vegetable gardens in schools in some way going to cross over with the programs we have been running at the federal level that Minister Roxon has initiated. I think it is called the Gardens in Schools program.

**Mr O’Ryan**—I think that would be the logical way to go with it, yes, but that has not happened to date. We made the offer to put some infrastructure, some planning money and also some actual funding into the establishment of the gardens to our minister. We have made the health department aware of it as well. That is something that we would like to explore as a particular passion of our chairperson, as I said at the start.

**Senator CROSSIN**—They will dovetail together, will they, those sorts of programs?

**Mr O’Ryan**—We would hope so, yes.

**Senator CROSSIN**—Where does your area of activity start and finish under ILC and say IBA who might also be assisting communities or individuals to get market gardens going?

**Mr O’Ryan**—I am not sure that the IBA have a particular role there. Our fundamental existence lies around land. We acquire land with a view to divesting it to Indigenous groups. We will only do that where the property is viable and sustainable and the group has the capacity to manage it and more importantly to achieve benefits from the land. Then we can help Indigenous landowners to undertake land management on their land. We do things like help out with property planning, training, infrastructure and capital with the idea of bringing Indigenous land back into production but only where it can make money and/or achieve training and employment for Indigenous people. Viability can sometimes be one dollar more than outgoings, as long as the thing is viable into the future.

**Senator CROSSIN**—How many properties have you got in the Northern Territory then? Is it in your annual report?

**Mr O’Ryan**—Yes, it is all in the annual report. We have 220-odd nationally. I am not sure. I can find that out for you in two seconds.

**Senator CROSSIN**—No, if it is in your annual report, I can find that. Are there moves on the ground to look at acquiring more areas in the Northern Territory?

**Mr O’Ryan**—We are always looking for strategic opportunities and we are always considering applications from Indigenous groups to acquire properties. One thing we are looking at the moment is two properties called Elizabeth Downs and Fish River in the Northern Territory near the Daly River. There is a dual purpose there. We are working in collaboration with the Department of the Environment, Heritage, Water and the Arts under their national reserve system to acquire Fish River, primarily for environmental protection purposes. We would hope that that would be declared an Indigenous protected area and we would attract working on country rangers to look after the property.

Elizabeth Downs, which adjoins it, is a cattle property. We would look to run it as a cattle property. We would look to establish a training facility/academy on the property which would have two areas of focus, one on the agricultural industry and the other on natural resource management. They are about 400,000 hectares of property. We are in negotiations with the vendor, who wants a little bit more than we think they are worth, and we are just waiting on finalising details with the department to see what contribution they can make. You might know that under the national reserve system they can contribute up to 66 per cent of the acquisition cost of a property; it is sometimes more than that. They generally require an Indigenous group to partner with the acquisition. We are also working with the nature conservancy in that proposal, so hopefully it comes off.

More recently though we have done things like buying a property in Fogarty Street in Alice Springs, which we have acquired for artists in the town camps. Two hundred-plus artists will use the property—

**Senator CROSSIN**—Was that under Minister Garrett’s announcement to develop an art centre in Alice Springs, or is it separate to that?

**Mr O’Ryan**—No, we did that separately on application from artists and Tangentyere Council.

**Senator CROSSIN**—That will create a dedicated arts space, essentially a painting space for artists in Alice Springs?

**Mr O’Ryan**—It will provide art spaces. That was the first thing. The second thing was to hopefully secure profits from the art that is produced, as well.

**Senator CROSSIN**—How will that work? Will artists paint not on commission to you—

**Mr O’Ryan**—I am sorry?

**Senator CROSSIN**—Will artists paint in that space—

**Mr O’Ryan**—Yes.

**Senator CROSSIN**—And then give you a percentage of what they sell—

**Mr O’Ryan**—No. We are not getting any percentage. I think it is going to be managed by Tangentyere Council, but the point I am making is that it will be marketed and income will be secured for the artists as far as that is possible.

**Senator CROSSIN**—What is the wash-up from Roebuck Plains? What has happened up there?

**Mr O’Ryan**—What would you like to know?

**Senator CROSSIN**—What is the outcome now with respect to that property?

**Mr O’Ryan**—There are a number of things happening. That property was bought I think in 1998. It was bought with the purpose of achieving particularly training and employment outcomes for the people of the Kimberley. The ILC has operated it since that date. You will be aware that the Yawuru people have secured native title over not just Roebuck but parts of the township of Broome and surrounding areas. They have not wanted to talk to the ILC for the last period of time while they address concerns around native title outcomes on the Broome township itself. An ILC chairperson is actually meeting with the Yawuru tomorrow to talk to them about Roebuck Plains.

Separately from that we established a cattle export yard just outside of Cairns. That will employ about 10 to 12 people including boats going overseas in terms of the export of cattle—

**Senator CROSSIN**—Do you mean over in West Australia?

**Mr O’Ryan**—In Western Australia, yes. Minister Burke is coming up on Saturday to open the facility in Broome. But the discussions with Yawuru will commence tomorrow with a meeting between our chairperson and the chair of—

**Senator CROSSIN**—With a view to handing them Roebuck Plains?

**Mr O’Ryan**—There are a number of issues to talk about there. When the ILC acquires a property the general process is that we enter into a lease arrangement with the group. We lease it to the group for a period of time. Sometimes that can be up to three years. During that time the group has to demonstrate that the property is viable and sustainable and that they have the capacity to meet the landowning costs and responsibilities associated with the property and more importantly to achieve benefits for Indigenous people. If they do that we then grant the land to a group. In respect to Roebuck Plains itself, it is a \$30 million cattle property. The ILC board will want to be convinced that any group that that property is handed over to has the capacity to manage what will be a significant government investment. Those discussions are starting.

**Senator SIEWERT**—I understand that you have some resources to do some training. There is a grant to do some training to place people in jobs; is that correct?

**Mr O’Ryan**—No. It may be called a grant. We have a memorandum of understanding with the Department of Education, Employment and Workplace Relations. I may need to correct these numbers, but something like \$15,000 a year is provided under that memorandum of understanding to employ trainees on ILC businesses. As I mentioned before, we do pay industry award wages, and the balance of the wages is paid for by the ILC. Also that money is available in the market under the group training company framework, including Group Training Australia. It is not a grant per se; it is an arrangement that we have with the Department of Education, Employment and Workplace Relations to provide wages to employees.

**Senator SIEWERT**—How many positions does that support?

**Mr O’Ryan**—In 2007-08 about 100 trainees. As I mentioned before, we are aiming to make that 200 trainees over the next two years. You have to appreciate that they are full-time equivalents. In fact, last year we had about 280 people employed on properties. Not all of those were trainees per se; they were engaged in seasonal work, contract fencing work, mustering and that sort of stuff. Some of it is for two to three months.

**Senator ADAMS**—You mention in your submission at page two the boarding hostels. Could you tell me where they are going? You have said one will be at Weipa and there are three other sites to be determined. Have they been determined as yet?

**Mr O’Ryan**—No, they have not. As to the one at Weipa, we are about to receive a gift of land from Rio Tinto Australia on which that facility will be established. We are in the process of finalising a funding agreement with FaHCSIA, which is providing \$30 million for construction of the facility. The objective is to open up a 120-bed hostel in 2011. At the request of the Deputy Prime Minister we have also made \$15 million available to assist in the establishment of hostels in the Northern Territory. The ILC’s role could be acquiring land so that hostels can be established or it could be assisting in the construction of them. But we would then lease out the property to an appropriate operator to run the hostel. The discussions revolve around I think a preference from FaHCSIA for a hostel to be established at Port Keats. But I think our preference is for places like Tennant Creek and maybe Alice Springs and Katherine. That is not yet decided but will be in the near future.

**Senator ADAMS**—Is the age limit just for students at secondary school? As we moved around the communities something we have observed is that there is definitely a lack of education facilities and training for some of the older youth who unfortunately have left school very early and are now trying to get jobs but, because of their education level, they are not able to. Is there any way that they would be included in the hostel arrangements?

**Mr O’Ryan**—As it stands at the moment, that is not the intention, but we have been looking at that issue. There is a particularly good company in Mount Isa, Myuma Aboriginal Corporation, that has been very successful in securing jobs in the mining industry. The problem they have is with people who are having problems sticking with it after six months. The primary problem there is accommodation. We have been approached to work with that organisation to develop accommodation options for them in Mount Isa. We have been approached about a similar proposal in South Headland in Western Australia and another one in Port Hedland, I think is the other one. The ILC has not particularly been set up to do those things. But we agree with the view that education, training and employment are the key outcomes as the board’s priorities, so we

are prepared to partner up with responsible agencies where we can help with either the acquisition of land or the construction of something to make it happen.

**Senator ADAMS**—Could you give us a little bit more information in relation to the initiative you have at Mossman Gorge?

**Mr O’Ryan**—The ILC bought a nine hectare sugar cane plantation which is at the front of Mossman Gorge—

**Senator ADAMS**—I have actually seen it. I do know about it.

**Mr O’Ryan**—You know you have the Indigenous community of Mossman Gorge and then you have got the gorge itself. The road there is a very narrow road. It gets 250,000 cars on it a year. It is not built for that. It cannot park that many cars. Buses cannot turn around in it. It is having deleterious impacts on the environment and is also creating public safety concerns around traffic control. It is not having a good impact on the Mossman Gorge Aboriginal community itself.

The community itself have had an idea—and I think it has been around for 10 years or longer to set up a transit centre so people will park at the front of the gorge. There would be an art and craft shop. There is already an existing art gallery inside the community itself. It is very small, so there is an opportunity to expand that perhaps to get more art from the cape as well. They would have a kiosk. The Environmental Protection Agency would have an office there and people would be transported from there down to the gorge on electric carts.

Mossman Gorge attracts about 500,000 visitors a year and we are satisfied that a business like that is viable and we think we can offer up to 70 jobs to Indigenous people in the high season and about 40 in the low season. The idea would be it would operate from seven in the morning until six at night, so you would do it on two shifts. You would need cleaners and maintenance men as well as drivers, people in the shops and people in the admin/finance area to run the property. We are about to commence construction on that. We are just waiting on the Cairns Regional Council to approve the DA, the development application, for the proposal. There is a little bit of tension because some people are worried about being able to access the national park. We are not stopping that, but the actual entry to it will be a little bit further away than people are used to now. We have got a public consultation program on at the moment which we will feed into council and hopefully get the development application in and approved in October of this year for commencement to start after that and the actual facility to open in 2011.

**Senator ADAMS**—Is the road going to be widened at all?

**Mr O’Ryan**—It cannot be widened. It has a water pipe on one side and a river on the other.

**Senator ADAMS**—That was why I asked the question.

**Mr O’Ryan**—The road will be improved. It is going to have to be improved because the electric carts need to be on a smooth surface.

**Senator ADAMS**—Will private vehicles be restricted? They will not be able to go up there?

**Mr O’Ryan**—That is right. Emergency vehicles will be able to get there but we would ask people to park at the entrance. It will be signposted to achieve that effect. It will have a boom gate. Local residents will have a free trip on the buses.

**Senator ADAMS**—That is good. We went there as a committee about two years ago—not this committee but another one—and I just wondered how it was progressing. That is good.

**Mr O’Ryan**—If you go back in 2011, hopefully it will be running.

**CHAIR**—Thank you for that. There may be some questions on notice. If there are, the secretariat will provide those to you. Thank you for your evidence today.

**Proceedings suspended from 12.09 pm to 12.17 pm**



**ALLEN-KELLY, Ms Kandie, Chief Executive Officer, Australian Association of Social Workers**

**AZIZE, Ms Mai, Social Policy Officer, Australian Association of Social Workers**

**CHAIR**—I welcome the representatives from the Australian Association of Social Workers. Information on parliamentary privilege and the protection of witnesses and evidence has been provided to you. The committee has before it your submission. I will invite you to make some short opening statements and at the conclusion of your remarks I will ask members of the committee to put questions to you.

**Ms Allen-Kelly**—Our intention is to provide a little background on the AASW that you do not already have, why we needed to make a submission and just summarise some of our key recommendations or thoughts at this point.

As people will know, the AASW is the only national organisation of professional social workers in Australia and we accredit all the university's courses in social work. We are involved in a range of delivery of community services, including health, family and child welfare income support in the public, private and not-for-profit sectors. In the Northern Territory we have 100 members and there are approximately 250 qualified social workers working on the ground in the Northern Territory.

At this point, I would like to acknowledge and honour the Ngunawal people, the traditional owners of this land.

The AASW made a decision a couple of years ago to establish a national group called the AASW Aboriginal and Torres Strait Islander National Working Group, which we formed to promote the Aboriginal and Torres Strait Islander voice on Indigenous issues in the association and for social workers generally. I regret that no members of that group were able to come at short notice today, given their prior work commitments and that they are based in WA, the Northern Territory and so on, but I present this on their behalf.

One of our commitments as an organisation has to be to try to find creative ways of ensuring that Indigenous voices in their own association are more than token. One of the ways that we have worked with the Indigenous social workers has been to create a different kind of structure to get their voices on our agenda, as we normally require convenors of national committees and they prefer to have multiple people representing at different periods of time. The AASW also works closely with the National Coalition of Aboriginal and Torres Strait Islander social workers, which you may know has a broader membership and includes Indigenous welfare workers as well.

We have talked about the broad range of areas related to the wellbeing of Aboriginal and Torres Strait Islander people that we are involved in, from direct service delivery, as school counsellors, health workers, hospital and social workers, a lot of work in rural and remote communities with Indigenous people, in job centres and Centrelink offices, and working for Indigenous controlled organisations, and SNAICC is an example of one of those. We adopt a systems approach to facilitate change and recognise the physical, mental, cultural, social, emotional and spiritual health of Indigenous people, and that this can impact greatly on their educational aspirations and achievements and their ability to engage in meaningful work. We are currently in the process of finalising core curriculum content for all schools of social work on working with Indigenous people in this country.

To summarise our position on the Northern Territory Emergency Response, which you have from our submission, we acknowledge that the issues are complex. We also acknowledge the various policy approaches and program delivery models adopted by all levels of government to date have not been fully effective and, at times, have impacted negatively on Indigenous communities. This is the message we continue to get from the Northern Territory and other parts of Australia. We believe that in the long-term a whole-of-government consultative cross-policy approach is what is required to close the gap between Indigenous and non-Indigenous people right across Australia. Importantly, culturally sensitive and flexible approaches to service delivery are required to overcome disadvantage associated with the lack of essential services, such as health.

We would like to acknowledge some of the examples of good practice occurring. We gave some examples of those in our paper and I also want to acknowledge FaHCSIA's Indigenous Leadership program, which is showing great promise in terms of engaging Indigenous people across the country. We recently heard of a Queensland based organisation that is delivering certificate courses in Indigenous communities where they are paying Indigenous people to come and attend the courses and then to continue as workers in their organisation, which is another creative and promising example of good practice.

We have two position statements that we would like to table to the committee. One is on Indigenous health and the other one is on Indigenous employment and education.

Essentially, our recommendations to the committee are, again from our submission, to reinstate the racial discrimination act—we have a lot of feedback from Indigenous people and our own social workers with respect to the impact of this on themselves and on their daily lives; to provide long-term commitment to resources to address identified gaps between Indigenous and non-Indigenous Australians—I am aware that you have been doing this work for a long time and I am sure this is not the first time you are hearing any of this; adopt a model of support and empowerment to Indigenous communities, rather than a punitive model—I recently heard another Indigenous person from the Northern Territory express the feeling that is what it has been like for them; develop systems to collect reliable and consistent baseline data for the purpose of ongoing monitoring and evaluation—as we said, ensuring interdepartmental and cross-government collaboration to address the issues facing Indigenous communities; support the initiatives that are working well, and I think there are many examples across Australia where things are working well, but also be aware that there is not a one-size-fits-all.

We have some concerns about the quarantining of income support. We think it should be voluntary, except in very specific instances where the circumstances warrant it. We have recently heard from a woman in the Northern Territory who needed to visit relatives in South Australia because they were unwell and because her payments were quarantined, of course, she could not use her card in WA and therefore could not contribute to the extended families supporting her while she was there, leading to a great sense of letting the family down.

Finally, we would support the development of evidence based education and employment strategies to encourage the Indigenous workforce development.

**CHAIR**—Thank you very much. I am sure there will be a number of questions. I would like to kick off with just a general theme. You have made the remark that we have heard some of this before, but it is certainly great to hear it from your perspective. Issues like ‘desiloesation’ and those sorts of matters are fairly dramatic. In your executive summary you talk about providing greater support to communities rather than the punitive model. We are specifically looking at the intervention, but also against policy across the board and how it affects Indigenous communities. The example of the intervention is a good one in terms of the punitive stuff. If you do not turn up for CDEP, for work, then you are breached. We are soon to start breaching parents for the non-attendance of their children at schools. We are continuing to prosecute people who traffic or use prohibited substances within prescribed areas. The list goes on.

There are people, and I am possibly one of them, who think that these are not punitive; they are actually a safety net for other people in the community and that whole balance of ‘I’ve got a right to leave my kids at home’ and the kid also having a right to an education. We can go on all day about those balances that are difficult ones. If you went through those four issues that just sort of spring to mind that are the punitive edge of things, and there are plenty of others that you can put your mind to, do you think that having a less punitive edge would fix it?

**Ms Allen-Kelly**—It could, alongside of working very closely with the community itself. I think we find that very few Indigenous communities do not have resources within their own communities to start to address these issues if they are provided with the support and resources. Some of the feedback that we get fairly regularly is that much of what has happened—particularly in terms of the NTER—has been experienced as punitive, even if there were some values in it. For instance, I can think of an Indigenous woman that I spoke to a few weeks ago who was saying that she, herself, had volunteered for quarantining of her payments to make sure that she always had food to actually support the other kids, not so much her own, but being forced into that decision was considered punitive, not the quarantining of payments themselves.

**CHAIR**—It has also been the experience with things like school attendance where we have had information from headmasters that are enjoying great leadership and quite good attendance, comparable with anywhere, up in the 1990s, but they say, ‘What are we going to do about the last seven per cent?’ They basically say, ‘Unless there is something else, we can do all we can to bring kids to school, but with the remaining demographic, you won’t move them because they are not interested in engaging with us.’ What steps do we take then? Do you think there is a step at some point with some demographic, that you move to protect the rights of those children?

**Ms Allen-Kelly**—I think so. It is a question of how we do that. The association would take the view that that is about engaging with the community itself, rather than saying, ‘Your payments are going to be taken away from you if your children do not get to school.’ We would have the view that all that does is actually

harm children more, not necessarily achieve the outcomes that are intended. This is very much where we need a strong community development approach. It is not overnight work. It is not going to be today, tomorrow or even next year, but a long-term haul.

**CHAIR**—It seems like an awful long time for those kids not to go to school.

**Ms Allen-Kelly**—It is not about saying that they do not go to school.

**CHAIR**—They are currently not going to school. This is the problem.

**Ms Allen-Kelly**—It is about looking at how we actually get them to go to school and what the other people in the community think will need to be done to encourage those children into school.

**Ms Azize**—If you are interested, Ms Sally Cowling from UnitingCare, Burnside, wrote an excellent paper. I am not sure if you have spoken to Burnside in the course of this inquiry. If you would like to ask us the question on notice, then we can send you the paper.

**CHAIR**—Certainly. That will be good.

**Ms Azize**—She believes that quarantining has a dubious relationship to—

**Senator SIEWERT**—I have read the paper.

**Ms Azize**—She questions the evidence base.

**CHAIR**—The essential question was what do you do if you do not do that. There are plenty of ideas that people come up with that we can shoot down or say that is terrific, but the kids are still not going to school. As social workers you would have spoken to many people who are involved with this demographic, probably more than anyone else. Perhaps it can be a question on notice. We are often looking not only for what is not working, because there is plenty of that around, but also for what is working. Apart from engaging with the community, when we have over 90 per cent attendance at a school and the principal tells me that the others just simply will not come and they just do not care, then they are the ones that have a lot of the problems in the community. They are dysfunctional in every sense. The children, in that circumstance, really need intervention to go to school because the intervention will not come from the conventional place, the parenting or the conventional functional family. I guess the question is always: what do we do? I think we all get the community moving ahead with those things, but even the leaders in the community who have done so well will say, 'I don't know.'

**Ms Allen-Kelly**—I think some of it is perhaps also about taking the school to them. It is about how we make education something that matters to those kids. I do not pretend to be an educational expert in this area, but I do know that certainly some of the lessons that appear from overseas seem to be that if we take the school to the kids, rather than the kids to the school, there is some greater chance. It is also about trying to recognise and understand that we have got kids who often have several generations of abuse or whatever, that it is difficult work and there is no easy answer. Unfortunately, we do not have social workers who hang around long enough in communities to make that kind of difference.

**CHAIR**—One last question from me, which you may need to take on notice. Do you have a large number of social workers working in these communities that are based in these communities, and what percentage of those would be Indigenous people and from those areas? I am not sure if you collect any data like that, but it is very important.

**Ms Allen-Kelly**—We do not have a lot of data on that. Part of the difficulty is the difference between whether the people are professional social workers or call themselves social workers. We do know that we have quite a small number of Indigenous social workers in the country as a whole. We know we have not got a lot. We are also aware that there are, at times, real issues with Indigenous social workers working in communities that they are from, as much as where they are not from, because of some of the clan and family issues that then start to get in the way and create some difficulties.

**CHAIR**—There is also a large number of opportunities for cultural understanding, language and all those communication skills that they so naturally have. There certainly appears to be lots of social work to be done; I would have thought that this is an area of great employment potential.

**Ms Allen-Kelly**—Absolutely. I think so. I think that is one of the reasons the association has really tried to get together a very strong group of Indigenous social workers to try to drive that a bit further.

**CHAIR**—Thank you. Senator Siewert.

**Senator SIEWERT**—I will just follow on from there and just ask a general question about your opinion on the resources that are in community at the moment. They could be official social workers. I am looking more in terms of community support and taking the positive approach that you were talking about earlier. Have you done any assessment of the sorts of resources that are available? I am thinking of community support workers, child protection workers, safe houses, rehabilitation and those sorts of things. Have you done a survey of those resources in the NT?

**Ms Allen-Kelly**—We have not in the NT specifically. This is where it is a bit of a shame that we have not got one of our NT people here because they would be able to answer these questions much more directly. We can certainly provide you with some advice back on that.

**CHAIR**—That would be wonderful.

**Senator SIEWERT**—That would be useful because we have had quite a lot of people raise the fact that they do not think there are enough resources for rehabilitation, alcohol and other substance abuse and things like that. We have had comments like that, but we have not seen more quantitative data about what is or is not available in some of the communities. If anybody has undertaken that, then that would be very useful.

**Ms Allen-Kelly**—We will talk to our Northern Territory folk about that. I have a long background in working in rural and remote Queensland, so I am a bit more familiar with that. Yes, there are often not the services or resources at all, but even if they are there, they often are required to be spread so thin or they are not geared appropriately to the cultural issues.

**Senator SIEWERT**—You will have a male or a female, but you will not have both, for example, in terms of whatever service you are providing, particularly youth workers. That would be appreciated. The other issue I would like to ask about is whether social workers that are employed by Centrelink are part of your association?

**Ms Azize**—Yes.

**Senator SIEWERT**—There are a number of social workers employed by Centrelink in the Northern Territory. Are you able to get feedback from them? I am obviously not asking for specific information on client, but do they give you feedback on how they think the intervention is going?

**Ms Allen-Kelly**—We have only had informal feedback to date. Again, there has not been a culture more recently of people feeling comfortable making those statements, but we have very active members who work for Centrelink and we could certainly provide some more advice on that from them.

**Senator SIEWERT**—That would be useful. Going back to the school trial system and income suspension, have you done any evaluation of working specifically with the six schools in the NT? It is only running in the NT.

**Ms Allen-Kelly**—No, we have not done so as an association.

**Ms Azize**—No.

**Senator SIEWERT**—Do you know if any of those schools have social workers based at the school?

**Ms Allen-Kelly**—I would be really surprised. It has not been a usual part of it. We should try to make sure that we know that.

**Senator SIEWERT**—I understand that each of the schools is supposed to develop an attendance strategy. The point that has been made to me—and I am going to check this—is that they have not been given additional resources with which to do that. It seems to me it may be a problem if they are supposed to be developing attendance strategies but they do not have any additional resources. Have you received any feedback around how the trial is going for the specific schools?

**Ms Allen-Kelly**—No, not specifically. Again, there is just a sense that there are not the resources to do what is now being asked. Again, we have not looked into the detail of that. I think that is probably also not unusual. Schoolteachers would tell you themselves that just about every new public policy decision that is made ends up meaning more work for them in the classroom and no more resources for actually achieving it. This is probably another one of those, I suspect.

**Senator SIEWERT**—One of the issues that has come up is the movement of people into the big centres—Alice Springs and Darwin—and that there are more people in the long grass. Have you had any feedback or any comments from anybody around those issues?

**Ms Allen-Kelly**—We have had more feedback from people who are already in those long grass communities, for instance, rather than people being moved in. Their comments have been more around their differential treatment from, say, an Indigenous person who lives in the suburbs in Darwin whose kids may not be going to school, versus their experience of being in one of the communities that now has the big sign out the front.

**Senator SIEWERT**—The same policies are not being applied to everybody; is that the point you are making?

**Ms Allen-Kelly**—That is certainly the message that I am getting.

**Senator SIEWERT**—Is that in terms of other Indigenous people or is it across-the-board? I have had complaints from people saying, ‘It applies to us so why doesn’t it apply to everybody?’ Is it a comment around that, not applying to everybody?

**Ms Allen-Kelly**—I think so. The people that I have heard make those comments have essentially taken the line that quarantining should be voluntary, but if you are going to have such a thing then it should be across-the-board and it should be Indigenous people who live in the suburbs and white people who live in the suburbs that are on pensions or benefits and their kids are not going to school.

**Senator SIEWERT**—When we were in Darwin we heard from NAAJA and the Central Australian Aboriginal Legal Aid Service that there has been a significant increase in the number of Aboriginal people in the criminal justice system and being incarcerated because of the increased provision of police officers and the increased police presence. People want that, but it has led to an increase in the number of people who are, for example, not paying their fines, getting pinged for driving without a licence and ending up in the criminal justice system. Has anybody reported issues around that back to you?

**Ms Allen-Kelly**—We have not heard anything back recently around that, no. It would be interesting for us to take that back to the social workers in the NT and see whether that has been their experience as well.

**Senator SIEWERT**—Thank you. That would be appreciated.

**CHAIR**—Senator Adams.

**Senator ADAMS**—Can you tell me approximately how many social workers you would have in the NT that belong to your association?

**Ms Allen-Kelly**—About 100 in the NT.

**Senator ADAMS**—I am quite surprised in looking at your submission and the resources used for preparation of the submission that you do not have anything from the Northern Territory Emergency Response; that these are all from 2008. I would make the comment, reading the submission, that you have probably missed out on the fact that a lot of initiatives that you are talking about should happen have already happened. Could you tell me why you have not kept up to date as an organisation with what has happened and what has been implemented in the Northern Territory, because none of that is coming up in your submission?

**Ms Allen-Kelly**—I think our branch in the Northern Territory has. One of the things that we are aware of is some of the difficulties with a national organisation such as ours in getting back that information in a timely manner.

**Senator ADAMS**—I would have thought, knowing the terms of reference for this committee, as a national organisation you would have supplied that within your submission. Is there any reason why you have not?

**Senator MOORE**—It is important to tell the committee about how early your submission was. Your submission came very early in our process.

**Ms Allen-Kelly**—It was August in 2008 that we did the submission.

**Senator ADAMS**—That might answer one question, but there again you are appearing before the committee and it is now June 2009 and significant things have happened since. When I read it I thought it was quite outdated. I wondered why you had not put in a supplementary one.

**Ms Azize**—Prior to coming here we tried to contact members of the working group and members in the Northern Territory to try to get some representation here today, but unfortunately we were contacted at such short notice that we just could not gather that feedback. We had tried.

**Senator ADAMS**—I have been a member of a number of national councils and organisations. I find it rather strange that you have not had up-to-date information or brought it forward. But you say you might have

tried to do so very briefly. You have made several comments about things not being effective as far as the silos go. Something I would say with this committee and our community affairs committee for Senate estimates is that we have had a breakthrough with all of the departments in that they all appear on a Friday so that we can talk to everybody and get that cross-fertilisation. There is certainly a large effort, and with Senator Moore being the chair of the community affairs committee we have been able to do that. That has certainly improved our knowledge of what is going on and kept us up-to-date, because we have been able to have all those departments together to gain an overall idea of what is happening. As far as any examples of what is working well, can you give me an indication of what you really think is really worth carrying on with?

**Ms Allen-Kelly**—There are a couple of things that I mentioned earlier. Certainly my understanding of the FaHCSIA Indigenous Leadership Program that has been taken out to all six of the key sites appears to be working very well. It is attracting a lot of interest in the communities and having people wanting to be part of that. We listed in our submission a couple of other areas where things are working particularly well. I can go back to that.

**Senator ADAMS**—Have you had any feedback from your people on the schools program with the food program and how the children are coping since they have had that program in place?

**Ms Allen-Kelly**—Only in broader terms in that it seems to be meeting a need in terms of nutrition and so on.

**Senator ADAMS**—Have you had any grassroots feedback as to how that is affecting the communities?

**Ms Allen-Kelly**—I do not have any particularly, but we may well have it in the Northern Territory in our branch.

**Senator ADAMS**—Thank you.

**CHAIR**—Senator Moore.

**Senator MOORE**—I think that the process of our committee has thrown up a few times that when people put submissions in very early in the process and then get called to give evidence with a one-week turnaround it is a situation that any professional body would have trouble responding to. I put on record that I think your submission does take a wide view. With one week's notice to come and give evidence, as a small professional body with limited resources, I acknowledge the difficulties with which you work and I thank you for making yourselves available today. In terms of the process, it seems to me that your recommendations take the wider view with respect to the whole range of evidence that we have had. Your recommendations talk about a flexible service delivery model, looking at things in a holistic way and also looking at the way consultation takes place. That is very similar to a great deal of the evidence that we have received. I would like to ask you questions around the quarantining of welfare income becoming voluntary. You know that is a very sensitive issue that we have had discussion on. You put a couple of issues there, but I am just wondering whether you would like to put a bit more on record, from the social work perspective, about the whole approach of a program, which is across-the-board and compulsory, as opposed to one that is voluntary? It might be useful to have a little bit on record on that. I am sure you want to, so it would be good if you could.

**Ms Azize**—Some of the research that I have done in this area indicates that welfare quarantining is pretty immobilising. It restricts people's ability to move around. In that way it can really hinder the independence of individuals and families. I have also had a look at some research that was done recently by Uniting Care, which indicates that welfare quarantine can get in the way of people learning how to manage their own affairs.

**Senator MOORE**—We have heard that.

**Ms Azize**—If the object is to teach people how to manage their lives, there are some question marks around efficacy of that approach.

**Senator SIEWERT**—People are supposed to have come off compulsory income quarantining by now, but nobody has because it has been rolled over. Are you aware of plans to work with people as they come off?

**Senator MOORE**—If you have a look at the *Hansard*, we only heard this morning from Human Services that they are looking at a more flexible way of income quarantining. We had not heard until evidence this morning that the department is looking at perhaps different ways and that everyone will not need to have a BasicsCard. I did not know until this morning's evidence from the department that everybody who was on income quarantining did not have a BasicsCard. You would imagine how much evidence we have heard over the year and a half, and that was the first time. I thought it was actually what people had. There is a lot of discussion going on in terms of the process. Working with the customer is one of the things that needs to be

considered and that is what your submission brings out. I always ask about the resources levels of social workers, because it has always been professionally the idea that where you have people working through these processes you would have social work services there. It has been the model within Centrelink, child support and state governments, but consistently we find that it does not happen. Do you know whether the university in Darwin still does social work?

**Ms Allen-Kelly**—Yes, it does.

**Senator MOORE**—Do you have any idea how many graduates they turn out in a year? These are just things in terms of availability of resources.

**Ms Allen-Kelly**—There is still a relatively small course, but I know they are also combining with the welfare degree at the moment.

**Senator MOORE**—Batchelor does not have social work; my understanding is that it has a welfare equivalent.

**Ms Allen-Kelly**—They have both a bachelor of social work and a welfare degree again now. For some years Charles Darwin University lost their accreditation on their social work program, but that has been back in place three or four years now and they have gradually built the course back up. They are working very closely with the Indigenous communities. It was a bit of a shame that Dr Deborah West, who is the head of school, was at the Council of Heads of School meeting in Brisbane today otherwise we would have asked her to come as well.

**Senator MOORE**—We might follow up and talk to Dr West at some time, because she does have such knowledge in this area and has a wide professional experience as well. We might follow up and try to talk with her personally. I think that would be very useful.

**Ms Allen-Kelly**—I think at least two of her staff are working very closely with the Indigenous community in Darwin.

**Senator MOORE**—Senator Scullion did pick up the issue of trying to get more Aboriginal and Islander people into formal social work qualifications. I know that has been a goal for a long time, without a great deal of success. But we get there slowly. Months ago I asked Centrelink, with the rapid increase in staff members for the NTER, how many social workers were employed?

**Ms Allen-Kelly**—In terms of?

**Senator MOORE**—Centrelink employees. One of the commitments that made was that there would be a large number of social workers that would be moving through with that process.

**Ms Allen-Kelly**—I have not heard that there has been a huge increase in the employment of social workers. I can certainly talk with Mr Humphries, the second in charge over there, and find out.

**Senator MOORE**—We will have to speak Mr Humphries at some time as well.

**Ms Allen-Kelly**—Yes.

**Senator MOORE**—I think Senator Scullion explained the way this committee operates, that it is for the whole of the parliament; it keeps running. It may be useful, if you do have the opportunity to talk with your Northern Territory branch again, for you to put in an updated submission taking on board the sorts of things you have heard today and also the sorts of changes that have taken place. I am sure there is a lot of very strong knowledge in your membership that we would like to tap. I know you feed into the ACOS network, anyway, so your members are feeding through that way. Just from the professional point of view of social workers, it is always valuable to have their views. It would be great if you could give us some more information or refer us to people that we should talk to.

**Ms Allen-Kelly**—Yes, absolutely.

**Senator MOORE**—Thank you.

**CHAIR**—I thank the Australian Association of Social Workers for appearing today. There may be some questions on notice. There has been a great deal of interest. If there are some questions on notice they will be provided to you by the secretariat. We will adjourn until 1400 hours, when we will hear from the Australian Bureau of Statistics.

**Proceedings suspended from 12.54 pm to 2.02 pm**

**CRETENDEN, Mr Ian, Assistant Statistician, Indigenous Education and Culture Statistics Branch, Australian Bureau of Statistics**

**LOWE, Mr Paul, Assistant Statistician, Population Census Branch, Australian Bureau of Statistics**

**WEBSTER, Mr Andrew, Acting Director, National Centre for Aboriginal and Torres Strait Islander Statistics, Australia Bureau of Statistics**

**COPLEY, Mr Ivan ‘Tiwu’, Indigenous Engagement Manager, South Australia, Australian Bureau of Statistics**

**CHAIR**—I now welcome representatives from the Australian Bureau of Statistics. Information on parliamentary privilege and the protection of witnesses and evidence has been provided to you. The committee has before it your submission. I now invite you to make a short opening statement or statements. At the conclusion of your remarks I will invite members of the committee to ask questions of you.

**Mr Crettenden**—I will briefly summarise our submission. Assessing the wellbeing of regional and remote Indigenous communities and the effects of government policy on their wellbeing relies on good quality evidence that is comparable both between areas and over time. As the national statistics agency, ABS is concerned to ensure that the statistical evidence base is as high quality as possible. ABS has a wide range of statistics available for regional and remote Indigenous communities, from the special purpose collection, such as the National Aboriginal and Torres Strait Islander Social Survey and the National Aboriginal and Torres Strait Islander Health Survey, as well as things like the census, and from data collected for administrative purposes, such as birth and death registrations. In addition, our written submission provides details of collections from other agencies of which we are aware and which may be relevant to the committee’s deliberations.

High quality data can best be obtained when the procedures used are culturally appropriate and where the Indigenous community is highly engaged in the statistical process. This is particularly true for remote Indigenous communities. ABS, in its statistical collection activity, has developed, over a number of years, a national Indigenous engagement strategy to ensure that Indigenous communities are better engaged in the statistical process, understand the uses to which the statistical information is put in developing and evaluating policies that may impact on them, and have statistical information returned to them in ways in which they can use it. My colleague Mr Copley, the ABS’s Indigenous Engagement Manager for South Australia, will speak in a moment about his experience working with regional and rural Indigenous communities.

In seeking statistical evidence from Indigenous communities it is also important to be aware of the burden placed on those communities to ensure that full use is made of existing information, that improvements to existing collections are looked at in preference to developing new collections, and where data collection must occur that it is coordinated between agencies to ensure that the principle of collect once, use often is followed as much as possible within the constraints of legislation and consistent with ensuring the privacy of individuals.

Our submission outlines a number of strategies ABS has been developing to improve statistical collections. These include the Indigenous enumeration strategy for the Census of Population and Housing in 2011, and Mr Lowe will be speaking in a moment about our specifics plans for that.

A second major strategy is a planned expansion of the Indigenous Community Engagement Strategy to provide a stronger network of Indigenous engagement managers across urban, regional and remote areas. The data obtained from administrative sources, such as birth and death registrations and school enrolments, are very important improvements that will be required. These include improving the quality of the identification of Indigenous people, which relies on both an encouragement to Indigenous people to identify as such, and educating administrators in the importance of asking the Indigenous identification question.

Administrative systems are often not set up with a view to how they can be used to obtain statistics, and it is necessary to try to introduce improvements to system documentation and the use of common definitions and methods of counting. A third area of concern is often the limited accessibility of administrative data to outside agencies who may wish to use the data for gathering statistical evidence. Improved access to data would potentially provide a much greater level of useful information without burdening Indigenous communities.

Together, these planned enhancements to ABS statistical programs should significantly improve the range of data available to inform government and communities about the wellbeing of regional and remote



Indigenous people. I would like to ask Mr Copley to briefly outline his experiences working in our Indigenous Community Engagement Strategy.

**Mr Copley**—I am of Peramangk and Kaurna descent from the Adelaide plains. I would like to start by acknowledging the Ngunawal people as the custodians of this land. I have been welcomed to this land many times before by Matilda House and other elders, so I feel I can speak freely here today.

I handed out my personal profile before so that people could have a brief outline of my past, experience, knowledge and where I come from. I have 40 years working in the community, growing up in a fairly normal Aboriginal environment, in sand dunes as a child up to being educated and working now for the ABS in communities, in health and wellbeing, in service for nearly 40 years and been chair of Stolen Generations groups prior to the apology. I worked with that for near on 10 years as well in missions and homes in Australia and as historian for missions in homes in South Australia. That is a quick overview of my experience. I am not just talking to you as someone who is may be giving their opinion from hearsay. I am talking from experience and that is the reason I mentioned those things.

I would like to say that I was asked to come here by my employer, the ABS, to talk about facts and information relating to my work in the field to do with the ABS. I was not told to come here. It was a matter of choice. I came because I could see the importance and value towards Aboriginal people. I thought I would mention that, too. I am here because I can see the importance of it, not because I was told to come here.

I have worked with urban, rural, remote and very remote communities for most of my life. As I said, I am a descendent of the Peramangk, Kaurna and Minang nations, including over in Western Australia. I have family ties with the Ngarrindjeri and Nurrunga Nations, and I am known by many nations around Australia, including the Pitjantjatjara, Anangu, Utnamutna people and the people here in Canberra as well. These are friends of mine and I have had business associates right through those areas over many years.

I think there have been changes to the government, community councils, ATSIC, Community Development and Employment Programs and steps over the last four years, before and since the 2006 census, which this submission addresses. These changes have been recorded, debated, analysed and reported on since early settlement and, now, at this exact point in time, it is probably the best time that any committee or organisation like the ABS can make a decision on how the data is collected and the right protocols in collecting that information because of all the factors that have taken place over the last few years. In saying that, I am saying why we are in the best position? We have had an apology which increased this awareness right across all departments and the community. There was a closure of CDEP, which has forced the communities to change the way they do things, the way they put in submissions and the way they need to access funding for themselves to move forward.

Since 2004, the ABS has made huge changes in itself as well to keep up with this in the way that they have collected and worked with communities. I have been there since that time up and through the census, the Community Housing Infrastructure Needs Survey and the Health and Wellbeing Survey 2005, all of which collected information about communities. From that the ABS has structured what is in this report, the Indigenous Community Engagement Strategy, which over the last four years has constructed a Reconciliation Action Plan, and protocols and procedures for engaging Aboriginal and Torres Strait Islander people at a national level—all communities, all places, right across the islands and Australia as well. These are all structures that have been put in place by people like myself, Aboriginal and Torres Strait Islander specialists, working for the Australian Bureau of Statistics and working with community in formulating all of these procedures and protocols in the right fashion for the benefit of Aboriginal and Torres Strait Islander people and accurate data.

There has been a huge swing over the last few years that I am bringing people's attention to. This awareness has also been part of the ABS's protocols and procedures in ensuring that all the communities that are engaged are all engaged by a person like myself in each state and territory. That information is then useful back to them. There is a handing back as part of the protocols and procedures. Under the Reconciliation Action Plan it is that we hand information back and assist those communities. We have had web based training, training on how to access data and training of people in communities on how to collect data. I was speaking to someone this morning. They have had over 300 people through the census—Aboriginal and Torres Strait Islander people who were trained and used to collect information about their own communities.

There has been a big awareness process that has contributed to Aboriginal and Torres Strait Islander people's understanding of the importance of data for their best interests. There has been nothing like that in the past. My job is to go around and see that the information is being collected, the protocols are being followed,

the way that information that is being collected by interviewers, and so on. I am used as a conduit between many of the state and Commonwealth departments within the state. My colleagues in each state and territory, the other Indigenous engagement managers, are in exactly the same position. We are the network person between all these agencies, service providers, state and federal departments and it is becoming more and more obvious that they are using us as a specialist also to understand better how to engage with Aboriginal and Torres Strait Islander communities.

This is all good stuff. I just wanted this committee to see that it is an intricate part, and has been an intricate part, in establishing a very good framework leading up to the 2011 census. It is gathering information that, of course, everyone is going to need to try to bridge the gap that is talked about under this committee as well.

Part of that is a willingness by the community members to have an understanding of people like myself that have engaged for a certain period of time and their willingness to participate in giving accurate data during surveys and the census. Anyone can go into a community and start asking questions and getting 'yes' answers, but it does not mean that it is accurate and it does not mean that it is honest. I think that the ABS, through our Indigenous Community Engagement Strategy, has now got a very good position in place where that information is collected, is accurate and honest and there is a very good rapport with the communities.

That is all I wanted to say. I really wanted to be here to get across that there is a person and a structure in each state under the ABS in the Indigenous Community Engagement Strategy that has all the nuts, bolts and infrastructure in place to do a really good job. The community understands that. It has a willingness and is just grabbing hold of data now and using it themselves.

**CHAIR**—Thank you for your contribution and taking the effort to come here. Most people do not come here voluntarily. They are compelled, but they enjoy their time nevertheless. Are there any other statements?

**Mr Crettenden**—We noticed from your first report that you were specifically interested in the undercount of Indigenous people in the 2006 census. I will ask Mr Lowe from our census program to talk about the plans we have for the 2011 census.

**CHAIR**—Thank you.

**Mr Lowe**—After evaluating the results from the 2006 census, and particularly undercount for the Northern Territory, WA and Queensland, we have set up a working group that comprised representatives from state and federal agencies, local government, various development commissions and Indigenous organisations to look at the issue surrounding the conduct of the 2006 census. As a result of that working group we came up with over 30 recommendations on how we could address some of those issues. Some of those recommendations have now been included in our plans for the 2011 Census and we will continue to work closely with that working group in the lead-up to the 2011 census.

We are, firstly, aiming to reduce the overall national underenumeration rate for the Indigenous population and, in particular, for those problematic areas in the Northern Territory, WA and Queensland. We also hope to reduce the enumeration period for remote communities from 12 weeks. It took us nearly three months to conduct the enumeration in the remote communities in 2006—down to three weeks. Some of these improvements we hope to seek through earlier and ongoing engagement with Indigenous groups and communities and all levels of government, including the expansion of the current Indigenous Community Engagement Program, which Mr Copley has outlined.

We also plan to employ local engagement managers in particular problematic areas where census operations are particularly difficult. Examples of these would be Broome, Fitzroy Crossing, Tennant Creek, Mount Isa and so on. These local engagement managers will raise awareness about the census, the importance of the census, build networks in their areas and identify people and groups that can assist during census enumeration.

We also plan to provide a greater level of support for Indigenous people in completing their forms. In the past in rural and regional areas we have relied on our mainstream enumeration procedures to enumerate Indigenous households. It is clear to us now that we have to do more in these areas. We hope to employ an additional 300 Indigenous assistants that will provide assistance to Indigenous households in completing the questionnaires or perhaps even to do an interview. It is all about employing more field staff, more supervisors in the field so that we can quality assure the counts in the field, putting in place things like flying squads where we can fly people into particular problematic areas when we have those during enumeration, mobile teams and so on.

In 2006 we extended our post enumeration survey to include some remote Indigenous communities. In 2011 we plan to do that again and also expand the sample of remote Indigenous communities that are selected in the

post enumeration survey. We are also hoping to have an expanded public relations campaign that will raise the awareness of the census and the benefits of participating in the census. That is a quick summary of some of the improvements we are seeking for 2011. As I said, our overall aim is to reduce the national undercount and also the undercount in those particular problematic areas.

**CHAIR**—The Australian Bureau of Statistics is a department in itself. You have some very clear objectives, which everyone at this table would acknowledge are probably one of the most important aspects of our attempts to ensure that the gap is closed. We have had some wonderful pieces of data. We have social determinants, health determinants and something nearly a decade ago that was quite comprehensive. Different people are doing different things. But there seem to be some opportunities that are missing. Other departments contact and have interactions with Indigenous communities all the time. We still have issues where even identifying yourself as an Indigenous person is not collected by the Commonwealth government and all the other jurisdictions, local government upwards at any time. We have heard earlier today about the benefits of being able, even retrospectively, to pick that up, because at other government levels if someone has identified themselves and it has not been picked up in earlier databases it can be integrated. What is the go with this? Is it just simply that they are slow to pick up? This is the opportunity. Government touches every place in the community. Government generally should be able to pick those up at almost every level and yet it does not. What do you think we have to do to ensure that when you have a communication with government at every level we are identifying people as Indigenous, and other issues that are associated with that?

**Mr Crettenden**—The first thing to recognise is that a government agency is primarily interested in the person in front of them to whom they are delivering the service. An agency such as the Bureau of Statistics looks across the population of Indigenous people and tries to get an understanding of how many people are there to be dealt with. It is an issue that we have to take on as an agency. Over a number of years, as part of our engagement strategy, we have worked with some of the crucial government agencies and people like funeral directors who work with Indigenous people. We have worked with them to try to get them to understand why it is important to have people identify as Indigenous. That is the first step.

You would have heard from the Institute of Health and Welfare this morning that we are looking at using data from a number of different sources to try to link information. That is a wonderful opportunity to get an understanding of where one government agency may have picked up the fact that someone is Indigenous and be able to relate that to other sources. We are doing a number of things that are going to make a difference in that area. Mr Webster, did you have anything you wanted to add?

**Mr Webster**—The point that I come back to is that we do not force people to identify their Indigenous status in collections. People volunteer. People can be asked and they can decide whether or not they are going to identify their Indigenous status. There may be reasons why a person might want to tell a particular agency that they are an Indigenous person and another agency that they are not. There might be some sort of consequence that they imagine is there. It is not only about the government agencies having good systems in place; there is something about the level of trust that people have in government that is also at play here.

**CHAIR**—Whilst recognising that, if you look at some of the statistics in the access to justice system, they can only tell you that it happened in the Territory. They cannot tell you where anyone came from. That is the most sophisticated thing that they can provide us—that it happened in the Territory—not where or anything more than that. I would have thought the best way to get better data is, in fact, through the organisations such as the police in the Northern Territory and the justice system in the Territory context. Mr Webster reflected that many people may not wish to provide an answer, which is fine, but I am getting a feeling that many of the opportunities to ask questions are not being given the full light that they should be. Do you think that is reasonable?

**Mr Webster**—I do not really understand what happens within the criminal justice system, in terms of how that information is collected or what situation it is that a person is in. Are we talking about two things? Are we talking about what is happening when a person is asked whether they are an Indigenous person or not? Is the second question what then happens to that information when it is or is not collected, and how it can be used by other people?

**CHAIR**—I am speaking of both really. I am just using examples of how we can provide information so the Australian Bureau of Statistics can use that information, and looking at weaknesses within government at all levels about that. I just cited an example, which was more about content than the process. For example, in the justice system we have had complaints from people today and other submissions saying, ‘We’d really like to know geographically where all of these people are coming from, rather than just that it is the Northern

Territory.’ It would seem to be fairly self-evident that you ask more than, ‘Where are you from, mate?’ ‘The NT’ probably won’t do. There is a lot more evidence that I would have thought would have been out there and notated, but for some reason when it is reported to ABS or a higher level it loses that sophistication.

**Mr Crettenden**—When we work with administrative systems we are in the hands of the people who run those systems. We develop standards and we encourage people to adopt those standards. Indigenous identification is one of the issues in an area like criminal justice, but there is actually a paucity of data across-the-board in many of these areas, particularly where the administration is primarily with state and territory governments, which quite reasonably set up independent systems, have different legislative frameworks, and then we have to try to develop a national framework that fits around that. Our experience is that that takes a very long time and it does not go as fast as anyone, including us, would like it to.

**CHAIR**—Thank you. Senator Crossin.

**Senator CROSSIN**—I have pursued this for a long, as you probably no doubt realise. I just want you to take me to your post enumeration survey after the 2006 census. How many remote communities were involved in that?

**Mr Lowe**—I cannot remember off the top of my head. Certainly the remote communities were in the Northern Territory, Queensland and WA. The majority of the communities were in the Northern Territory. I cannot remember the actual numbers, but I can provide that information. I will take that on notice.

**Senator CROSSIN**—Is it a small amount, though, was it not?

**Mr Lowe**—It was a small amount.

**Senator CROSSIN**—Was it half a dozen or so?

**Mr Lowe**—No, it would have been more than half a dozen, but it was a small amount. It was an experiment that we conducted in 2006. We had never conducted a post enumeration survey in remote communities before, because we did not think it could be done. We have enough trouble trying to recruit people to do the work in remote communities.

**Senator CROSSIN**—Yes, I know.

**Mr Lowe**—The PES must be independent, so you must have different people working on the PES than you have working on the c

census. It was a bit of an experiment. We believe it was a success and that is why our plans are to expand the sample for 2011.

**Senator CROSSIN**—I remember having this discussion because it impacted on whether or not we got two seats in the House of Representatives for the Northern Territory. I do not know whether you are aware of all the discussion we had at the time.

**Mr Lowe**—Yes.

**Senator CROSSIN**—Have you done any formal research or analysis? When you say it has been successful, what led you to that conclusion?

**Mr Lowe**—When we looked at the results from the PES and the searching and matching, one of the concerns we had was that obviously when you conduct a post enumeration survey you do some matching on name and where that person was. One of the concerns we had was Indigenous people will use multiple names and whether we could match them up, but that proved not to be an issue for us. The other major issue we had was about recruiting sufficient numbers of independent people to conduct the PES, and we were able to do that. The matching process and the collection process worked well. We believe it was independent.

**Senator CROSSIN**—How much do you believe it moved the degree of accuracy by including those communities in the post 2006 census?

**Mr Lowe**—In improving the accuracy of the estimated resident population figures?

**Senator CROSSIN**—Yes. Is that what it is designed to do?

**Mr Lowe**—Yes.

**Senator CROSSIN**—It is a retest of the results you get in the census. Is that right?

**Mr Lowe**—Yes. The results of the post enumeration survey are used in the calculations of the ERP figures. The PES figures directly relate to the calculation of the ERP. The sample was very small, so the impact was not that great, in my view. A lot of this is anecdotal evidence, because the same size for the PES is so small. I

do not think the undercount in some of the communities was that great. There was a lot of movement of people out of the communities into rural and regional areas and I think that is where a lot of the undercount came. Not so much in the remote communities, but in these rural and regional areas where we were relying on our mainstream procedures to enumerate those people, and it just did not work.

With communities there will always be disputes over the figures that come out of the census because the community will say, 'No, you have undercounted the community' and things like that. But that is really around the perception of what we regard as usual residence and what they may regard as usual residence. Even someone who has not lived in the community for several years will still regard themselves as part of that community and think they should be counted in that.

**Senator CROSSIN**—Yes, because your count has a major impact with the Grants Commission funding. You realise that, do you not?

**Mr Lowe**—Yes.

**Senator CROSSIN**—It directly relates to that. Will that now gradually see an improvement in the accuracy of those figures that you provide for the Grants Commission to work off?

**Mr Lowe**—Yes. Any improvements that we can make to the post enumeration survey, whether through distribution, or where we go in the country, or the sample sizes will improve the ERP. The thing that we really do want to concentrate on is getting the census count right. You need to get the most accurate count up front.

**Senator CROSSIN**—What are the plans for the next round? You have the health and housing census first.

**Mr Lowe**—The census is in August 2011. That is the population and housing census. There is the CHINS survey, which I believe is due to be run—

**Senator CROSSIN**—In your 2011 survey are you thinking of including more communities in the post enumeration?

**Mr Lowe**—In the post enumeration survey, yes, we are. That is our plan at this stage.

**Senator CROSSIN**—If Professor John Taylor were to write another article about ABS collection statistics it might have a different slant on it, do you think, four years later, given the improvements you have made?

**Mr Lowe**—I hope so. Professor Taylor is one of the many people around the country we consult with. We take note of his views. He worked fairly closely with us in the 2006 census, as did CAPA. We welcome their input. As I said, we set up this working group after the 2006 census. It was not just us, it was from a variety of agencies right around Indigenous organisations. We do not have all the answers, so we seek the answers.

**Senator CROSSIN**—When you move into a community in the lead-up to a new count, particularly with your housing census, do you make use of tenancy lists that community managers or shire councils may have? I have found by and large that they are 80 per cent to 85 per cent accurate. Do you ask for a list of houses in the community and the tenants and use that as a starting point? The question I am really asking is: do you elicit assistance and lists from other sources in the community rather than just going in and providing a straight count?

**Mr Lowe**—Yes. We do try to do that. Mr Copley might be able to shed some light on some of the operations there. Just as a general point, as part of our engagement strategy in the lead-up to 2011, we are working with a variety of different agencies and state government agencies, in particular, in seeking access to administrative data sets that we can use in the planning for the census. To give you an example of this, the Northern Territory government has granted us access to its Housing Commission lists and those houses that have Indigenous families. In our planning we will be able to plan our workloads for those particular areas and in particular use Indigenous assistance in those urban areas.

**Senator CROSSIN**—Is that a change from 2006?

**Mr Lowe**—It is a change. We are putting a far greater emphasis on it. We have been talking to state government agencies for the last 12 months about getting access to some of these administrative lists. We need to be careful of the quality of some of the administrative lists, because sometimes they are not of the quality that we would desire.

**Senator CROSSIN**—It is better than nothing, I suppose.

**Mr Lowe**—It is better than nothing and we can use it to help us both in the planning stages and also in the validation of the counts that we do.

**Senator CROSSIN**—Mr Copley, did you want to add anything given your vast knowledge?

**Mr Copley**—There are some very valid questions that you are putting up there and interesting as well from my point of view as the engagement manager for South Australia and working with the other Indigenous engagement managers around Australia. It was all formulated in 2005 into 2006, getting ready for the census, learning, training and implementing the Census. Since that time there has been a lot more understanding, awareness and collection of information under the Indigenous Engagement Strategy. We have a national database, not for publication, not for access, but for use to validate. We have all the communities, outstations, homelands, longitudes, latitudes, people's houses and structures that we have loaded since then on that database for the exact reason that you are talking about—validation to see whether things are running true or not.

In 2005-06 the information regarding housing infrastructure, population and everything else was there as far as data was concerned, but since that time people like me have gone to all of those communities and outstations to physically see them and have a very good understanding of what is and is not there. If there is an administrative data list that is available I could look at it in South Australia without a second guess and say, 'That is accurate' or, 'That is way off.' Of course, since that time, with the closure of CDEP, a lot of the community organisations were associated there as a CDEP organisation and when the CDEP closed in that community the organisation had to close because it was registered under a CDEP. Basically, a lot of places then did not have a community organisation. They have been in this process now of reformulating and becoming a community organisation.

As to the impact of that, their housing organisation was working under a housing authority or a state department. When that happened that connections between the maintenance and the rental side of those places with the upkeep and so on were severed across many places. Between 2006 and now they have been re-establishing the community organisation or the association, and the community councils and that housing structure. A year ago, in most cases I would not even bother looking at administrative data to do with housing. I would not know whether that was accurate, because people were not keeping that record. They could not do that, because that whole thing was severed.

Over the last four years the ABS, in its Indigenous Community Engagement Strategy, has structured a very good understanding because of their community visits and the database that we use for validating and understanding what we are doing. As Indigenous engagement managers nationally, we have a very good local knowledge, understanding and connection with people in the communities of what is there and what is not there in all areas, which is a very big change from what it was in 2006 when we were just starting to formulate all of this structure. I hope that answers your question.

**Senator CROSSIN**—Yes. I know enough about it to understand what you are saying. Thank you.

**CHAIR**—Senator Adams.

**Senator ADAMS**—As far as your participation within the communities, especially in the Northern Territory Emergency Response communities, how much interaction do the general business managers have when they are working around there?

**Mr Copley**—In the NT?

**Senator ADAMS**—Yes.

**Mr Copley**—I could not say because I am from South Australia.

**Senator ADAMS**—These people—probably with you trying to advertise the importance of the Census in the lead-up to 2011—would be a key component of the community and especially by that time they hopefully will be fairly well embedded.

**Mr Copley**—I can speak for the other IEMs. Even in the Northern Territory the level of engagement is across so many areas. Like I said, it is a bit of a conduit position or a network person, because there have been the communities, the agencies, the service providers, the health departments and the state departments over the last couple of years. We have gone in there with strategies on educating communities and taking information back on their community profiles. In and all those different places departments and managers in those sections have been there at those things or we have invited them to be there. We would say, 'We are doing a presentation in the community. Would you like to be there?' They are involved in those community events throughout the country. There is quite a close understanding. I do not know if that answers your question.

**Senator ADAMS**—This is sort of specific to the Northern Territory. The person in that role has their fingers in every pie and really understand what is going on in the community. That would be a great vehicle for you to be able to advertise the Census.

**Mr Lowe**—We are using them as a conduit into the communities and we have already started that work. We have found it very useful already. As Mr Copley was saying, we are using them as a conduit and they are putting us in touch with the relevant people in the community. That is the key. It is not so much the business managers themselves. We can use them as a conduit into the community, but it is the community leaders and so on.

**Senator ADAMS**—I was just looking at them as the key to tell you where to go and how you can deal with it. As far as employment with CDEP and the ABS—having been an area coordinator myself in another life and trying to deal with itinerant people working on vineyards and things like that with no accommodation; it was quite a tricky job to find out where they are, who they are and what they are—will you be able to train up people through the CDEP program and moving on to work and have them employed to help? Is there any movement there?

**Mr Copley**—Are you asking about using CDEP participants?

**Senator ADAMS**—The new CDEP and the role of training people and getting them ready to go to work. When the Census comes up, will community people be able to be trained up to take on a role as collectors?

**Mr Copley**—Just going back on 2006, I can reflect on their being involved in that. I trained and set up most of the training for the staff in Aboriginal communities in South Australia. Most of those were at CDEP sites through the communities all around the state. It was used very well in terms of their understanding and providing opportunities to participants to advance. That was the concept of it. We had a report from some of the participants. One of them that was highlighted was in Port Augusta. It was in the *Courier-Mail* after the Census. That person went on to secure a permanent position—a mum with a couple of children—because she had a current work history and some training.

**Senator ADAMS**—That is exactly what I was looking at. There is another opportunity there as you get out into some of the more remote communities to give them a job that really matters.

**Mr Copley**—It is.

**Senator ADAMS**—That is then a stepping stone.

**Mr Copley**—It is interesting that you say that. I remember at Coober Pedy, which is fairly remote from everywhere else, even though people do not think it is in a lot of cases compared with the APY, there were three young Aboriginal women who were the collectors and interviewers. Within three months after the Census they had moved. They did not want to stay in Coober Pedy. They secured positions outside of that after the Census. The CDEP and assisting participants in training for future job opportunities is fundamental. It was in 2006 and I am sure in 2011 it will be utilised a lot.

**Mr Lowe**—It is the No. 1 preference to go in and employ people from within the community.

**Senator ADAMS**—That is good. I thought that probably was happening, but I just wanted it on record that that is the way it is moving. As to the 2011 Census and the working group that you set up to improve the situation, what would be the three main recommendations that have come from the group?

**Mr Lowe**—It is probably hard to pick three, because they are all interrelated. In my view, the three recommendations that will have the biggest impact will be earlier and ongoing engagement at the community level and community groups. The employment of an additional 300 Indigenous assistants is going to have a very positive impact on the counts in rural and regional areas. If I was going to pick a third one it would be the use of local engagement managers working closely with the Indigenous engagement managers, but especially in those problematic areas, as I mentioned before, such as Tennant Creek and places like that where it is extremely difficult to run a Census because of the nature of the areas. I think having these local engagement managers in there on the ground working very closely with local groups in identifying opportunities and promoting the Census is going to have a positive impact on those particular areas, which have been a problem for us for a number of years.

**Senator ADAMS**—There are town camps around Alice Springs.

**Mr Lowe**—That is another classic example.

**Senator ADAMS**—How do you approach those areas, especially now that you have a lot more itinerant people on the outskirts as well?

**Mr Lowe**—Again, these local engagement managers will play a key role in places such as the Alice Springs town camps. In 2006 we had a satellite office that we set up in Alice Springs, which was a bit of an experiment. That worked extremely well, because having a presence on the ground in some of these difficult areas made a real positive difference. Think the results we got in Alice Springs last time were excellent as far as the count goes.

**Senator ADAMS**—Do you employ interpreters?

**Mr Lowe**—Yes, we do, for both Indigenous and other population groups across the country.

**Senator ADAMS**—Were you going to say something about that, Mr Copley?

**Mr Copley**—Yes. 2006 was a great turning point. That is why I said before that I think this is going to be a point in time that is really fundamental in getting very accurate data that can be used because of the new awareness that everyone has around the needs and how to bridge the gap of Aboriginal and Torres Strait Islander people. There are a lot of tools and infrastructure in place that has been tested since 2006 and during the period leading up to now.

I think one of the things that was missing that answers your question about what would change and make a difference in 2011 is that the ABS and the Indigenous engagement managers were the instrumental people in formulating the protocols and procedures for engaging with any Aboriginal and Torres Strait Islander person in Australia. That was put into place at the end of 2008 by the ABS. All staff engaging or interviewing Aboriginal and Torres Strait Islander people must understand and follow those protocols and go through training before they do it. They never had that in the past. They had some training. This is a policy within HR that says that you must do this. That will make a big difference, as well, in 2011 because people will have this additional awareness and understanding of how to draw that information out.

**Senator ADAMS**—Thank you.

**CHAIR**—We are always looking for benchmarks in the past, because we would love to go back 10 years and say, ‘These are the ones we are going to lay out and at least we will be able to measure everything.’ The most recent national Aboriginal and Torres Strait Islander survey was done in 2008 and 2009. The data has been gathered. How are we going with it all? Where is it up to?

**Mr Crettenden**—We are having discussions about that almost as we speak, in fact. The enumeration was delayed by three months for a variety of reasons, which has put us three months behind on our timetable. It should be released, and may still be released, in October, but we are having discussions right now about how we are going to pick up those three months. I am hopeful that it will still be released around the end of the October.

**Senator ADAMS**—Will that be before estimates?

**Mr Crettenden**—I do not know when estimates are.

**CHAIR**—That is a good answer. I have another question in that area. The very first one was done 10-odd years ago. It was very useful for me and it was just about this one demographic of Australians. I am going to make some assumptions—and you can correct me if I am wrong—that as part of this it would be very useful to at least have those same line items, those same things in terms of measurables. What other new and interesting measurements can we have now that we may not have thought of 10 years ago that you think you will be adding to the list in terms of when you are trying to break down the data?

**Mr Crettenden**—That is one for you, Mr Webster.

**Mr Webster**—Two things come to mind. The first one is that, in returning to what was done in 1994, we have collected information on children. Children were out of view in 2002, but because there is a lot of policy interest on the wellbeing of children and what makes for resilience there is a range of information in 2008 on children. That is the first new cut of the data that we will be presenting.

The other interest has been around more information on the social and emotional wellbeing of people. I am not saying that that was not an interest in 1994. It has just become clearer in terms of the way that we have tried to describe the world or we get asked to provide information. While in 1994 we collected information on areas like the number of people who had experienced a child being taken away, which we did again in 2002, a whole lot of other information has been added to create a module or a range of views on social and emotional



wellbeing, including standard psychometric testing through the ###CASA### scale, which we have done for the general population, but also information that focuses more particularly on Aboriginal people, such as information on discrimination. The idea would be that you will be able to look at the full range of socioeconomic variables, whether that is education, employment or even health, in light of how people are tracking in terms of these wider social and emotional characteristics.

**CHAIR**—We note from the Australian Institute of Health and Welfare an increasing number of references to wellbeing as a determinant. We look forward to that suite of benchmarks being published. Senator Crossin, do you have any other questions?

**Senator CROSSIN**—I have completed my questions.

**CHAIR**—Thank you very much for your very interesting presentation. Mr Copeland, thank you for volunteering. You would be one of the very few volunteers we would get. I suspect there may well be some questions on notice, which will be provided to you through the secretariat. Thank you.

[2.56 pm]

**YATES, Mr Bernie, Deputy Secretary, Department of Families, Housing, Community Services and Indigenous Affairs**

**WILSON, Ms Michelle, Section Manager, Welfare Payments Reform Policy, Department of Families, Housing, Community Services and Indigenous Affairs**

**JAMES, Mr Matthew, Principal Advisor, Office of Indigenous Policy Coordination Group, Department of Families, Housing, Community Services and Indigenous Affairs**

**CATTERMOLE, Ms Amanda, Group Manager, Indigenous Remote Service Delivery**

**CHAIR**—I now welcome representatives from the Department of Families, Housing, Community Services and Indigenous Affairs. Information on parliamentary privilege and the protection of witnesses and evidence has been provided to you. I will invite you to make a short opening statement and at the conclusion of your remarks I will ask my colleagues on the committee to provide questions to you.

**Mr Yates**—We do not have a statement. I wanted to mention that we have received correspondence from the committee with a range of questions, which we have under production at the present time. We will have them with the committee as quickly as we can.

**CHAIR**—I will deal with that issue first. It is a small issue. In terms of process, as a committee we have gone to pretty reasonable lengths to provide departments, states and territories with as much notice as possible about questions we may be asking, not only to avoid the potential circumstance where people may perceive they are being ambushed; we are just really about information. I will just register my sadness that it was only today that we were informed that two of the issues that we suspected, perhaps naively, that you would be able to provide information to us on were, in fact, the bailiwick of other jurisdictions. Given that we have provided that to your organisation on 12 May, perhaps in the future—not by way of criticism, Mr Yates; I have nothing but admiration for your organisation—given that we in the process trying to provide you with as much evidence, if you think it is not your department can you tell us or the other department so there is not another long period that passes?

**Mr Yates**—Yes, apologies, Chair. That is a fair comment. They should have been passed through to the relevant department much more quickly.

**CHAIR**—There is another matter before we go to questions. Thank you for the provision of a section of facts marked ‘Confidential’. I would like to discuss this in general terms, and I do not think we need to go in camera to do that, because I will just refer to it as confidential material. To me, on the face of it, it appears that next to the other confidential material we were asked by this committee and other committees to look at this looks basically like a series of facts. There is perhaps one area there that might be a tad sensitive, but I suspect not. Is there any particular reason why that cannot be as much use to the committee as it possibly could be? As it is confidential we cannot refer to it or use it in any way at all. I wondered if you could clarify it was the intention to provide that material in that way and perhaps provide the committee with some motive about why it was provided that way? And I am assuming there is a chain of command and you are all part of the one organisation.

**Mr Yates**—I am not familiar with the precise documentation that was provided to you. If I were to sight that I could give you a fuller picture.

**CHAIR**—Certainly. It was provided by Mr Zissler, the commander of the Northern Territory Emergency Response Operation Centre.

**Mr Yates**—That was a situation report which feeds into more comprehensive reports that we produce and release publicly. In fact, the second of our major monitoring reports on the Northern Territory Emergency Response has now been finalised and it is on our webpage. I suppose we could have a look at it and exclude any material that could be particularly sensitive to information that may have been available to us from within communities. I would suggest that most of the information that is here is comprehended in our monitoring report that is public now, which we are updating on a six-monthly basis. I am more than happy to take on notice whether there is any information in the situation report that has been tabled that would be a problem for public use.

**CHAIR**—Before I go to questions, can you tell when we you are able to do that?

**Mr Yates**—I will do that this week.

**CHAIR**—You would not be able to do that during the time I am looking at you over my glass of water? I was hoping that I could use some of the information to ask you questions on. I will leave it that. You have taken that on notice, so that will be fine.

**Senator ADAMS**—Before we go to questions, can I thank you for the monitoring report, but I am quite annoyed that this was not mentioned last Friday in the community affairs estimates, because it would have really helped us if we had had these reports over the weekend to read. There was no mention whatsoever on Friday and I would have thought that that was a common courtesy, knowing that we were sitting today, with the same members of the committee, and looking at a number of issues to do with the Northern Territory Emergency Response. That is what this committee is all about. We were not told a thing about it. We got here this morning and we were given this. I do not think that is good enough.

**Mr Yates**—I am sorry. I suspect it was simply that the issue did not arise at the hearings on Friday. There is no sense in which we were in any way keeping it quiet. It just did not arise in the context of the questions. We were ready to refer to the monitoring report as an extensive document. We will ensure, in future, that anything recently released or which is becoming available is brought to the attention of the secretariat so that the committee can be alerted to that.

**Senator ADAMS**—I would certainly appreciate it. We have had time to flick through it and some of the data in this is on the yellow confidential sheet. That was one of the reasons why we were wondering why, when that is released in the monitoring report, which obviously is a public document, that the other was confidential. I would be very happy if you could take that on record. As far I am concerned, this would have been a great help for questions for today.

**CHAIR**—I understand that this is the first time that you have seen it, which is why we handed you the confidential paper; is that correct?

**Mr Yates**—These situation reports are made available regularly from the commander of the operations centre.

**CHAIR**—Sorry, the fact that it had been provided to us, you were not aware of?

**Mr Yates**—No, I was not aware of that.

**CHAIR**—I just wanted to make that clear. Senator Siewert, do you have some questions?

**Senator SIEWERT**—Yes, I do. I would like to go back to questions on notice that I asked before. This morning we were talking about the BasicsCard with Centrelink and human resources. They said that roadhouses were only licensed for fuel. We have had this conversation before and I know Senator Crossin has raised this issue around food and what you can buy. I asked a question on Friday at cross-portfolio estimates around the licensing at Tilmouth Well Roadhouse. I understand that Ti Tree Roadhouse and Laramba have been licensed. Have they been licensed for fuel only or for clothes and other things?

**Ms Wilson**—I can speak in general terms and we can give you the details of those particular roadhouses on notice. In general terms, roadhouses under the current NTER legislation are not part of the licensing regime that applies to community stores. However, that does not mean that they cannot participate in the income management regime under the BasicsCard. One of the things that the merchant approval framework does at the moment is restrict those roadhouses, as a general rule, to being only for fuel and motor vehicle expenses. However, currently that policy is under reconsideration and we are doing a bit of work in the department on that. Hopefully we will come to a resolution shortly, but that is the current state of affairs.

**Senator SIEWERT**—Could you tell me what Ti Tree is licensed for?

**Ms Wilson**—I can only take that on notice.

**Senator SIEWERT**—That is obviously one of the roadhouses that refuses to take Opal fuel.

**Ms Wilson**—The income management policy does not make a distinction between Opal fuel and other types of fuel. That is not part of the income management policy. The legislation says ‘motor vehicle expenses’, it does not refer specifically to particular types of fuel.

**Senator SIEWERT**—A number of people on this committee are quite keen to look at how you can stop the use of sniffable fuel, non-Opal fuel. One of the reasons that we have been told that you cannot do that is that you cannot not license them because you need to be able to buy the things at a roadhouse. If all they are licensed for is fuel, I would have thought you could, in fact, use that as a pretty strong incentive to get rid of

sniffable fuel. Here we have a government policy that rolls out Opal fuel and is encouraging people to have Opal fuel. On the other hand, you have another government policy that says it is okay to have a BasicsCard to go and buy sniffable fuel.

**Ms Wilson**—Sniffable fuel is not currently an excluded item under the income management policy.

**CHAIR**—I think that is probably a statement that I am sure Mr Yates is rapidly going to take on board.

**Senator ADAMS**—It was a recommendation from the other committee.

**Senator SIEWERT**—You cannot buy alcohol. Government is spending a lot of money rolling out Opal fuel.

**CHAIR**—One would have thought that sniffable fuel is something that you could not buy on your cards.

**Mr Yates**—That is a possibility.

**CHAIR**—Maybe these are assumptions that we have made. Because of some recalcitrant roadhouses, particularly, who would not move, we thought it would be a significant economic lever because they are also the providers of groceries and other things within their region. If they were not able to get access to the BasicsCard full stop because they were the purveyors of sniffable fuel, they may think about changing their mind on that economically, which would be a good thing. That was the context of the policy approach and it was the suggestion/recommendation across a number of committees reflecting our frustration with these recalcitrant roadhouses, which are still providing some of the only sniffable fuel. It is still coming from these places. We felt it would be a significant policy step in that direction. As you heard in estimates, I have written to the Chief Minister in the Northern Territory over another piece of financial leverage. I hope he accepts it. We have been told by the Commonwealth that the Commonwealth people only buy Opal. I will let Senator Siewert continue, but just to put that into context. Whilst there are two separate issues and one does not affect the other, from the committee's perspective we were intending it to inform or influence the policy. We thought it was quite legitimate.

**Mr Yates**—Has that been encapsulated in a recommendation that has come through from the committee?

**Senator ADAMS**—It was from the last petrol sniffing inquiry. These committee members are on both. It was definitely a recommendation from our last petrol sniffing inquiry.

**Mr Yates**—I cannot comment on the policy position, but I am happy to take it on board.

**CHAIR**—Just on notice, can you advise whether you have taken that into consideration? Perhaps with that you may wish to give us a paragraph on who remain purveyors of sniffable fuel in central Australia, because sometimes we make assumptions about where people are up to. It would be nice to get an update.

**Mr Yates**—Certainly. We will take that on notice.

**CHAIR**—Thank you. Senator Siewert.

**Senator SIEWERT**—When we were in central Australia earlier this year we came across the situation in Papunya where there was a room full of computers that had been installed and nobody was using them. They are now being used. There are some IT people going in, apparently using them very effectively and running training sessions. It brought the issue to my mind about how we know what is out there. I know that the committee has written to the minister about this. How do we know what infrastructure has now been provided under the NTER? Apparently no-one in the community knew that these computers were there. They were going unused for a period. The community found out that these were provided under the NTER. Do we have a list of infrastructure that has been provided per community?

**Mr Yates**—A major focus of the NTER measures was not on producing infrastructure. As part of a number of the steps taken under the emergency response there were some improvements to infrastructure, such as clean-ups and so forth. We will take that on notice in terms of what infrastructure is there. There are a number of initiatives in particular communities where there was a critical requirement, but it was not the focus, obviously, of the emergency response. I will take on notice and include it with the response to the questions that have been raised with us about whether we have a comprehensive picture of all of the services and infrastructure available across the 73 communities. Some of that information has been historically prepared, most regularly through the community housing and infrastructure surveys that we do every five years, but the most recent one of those is 2006. Our government business managers are on the ground and that is the sort of thing that we would hope they would be identifying. For example, if equipment that was there was not functional for some reason, we would hope that they would identify what steps might be practically taken to

bring that equipment back into operation. I thought that is what had happened in Papunya; the fact that those computers were available, but did not seem to have the relevant software or there was some breakdown in getting them fired up.

**Senator SIEWERT**—Papunya is a good example of where it is now being used and it sounds like it is very successful, but I want to know whether there are similar sorts of situations in other communities. It is not just infrastructure. Obviously, it is equipment as well. Should I ask about safe houses here or with Health and Ageing?

**Mr Yates**—Here is relevant.

**Senator SIEWERT**—I know that the safe houses are now installed, but are they now functioning?

**Mr James**—There is the report that we talked about before. That has an update on the situation with the safe houses. I will see if I can quickly find it. I know there is an update on that in there, which states how many of them are operational.

**Senator SIEWERT**—That does not sound very promising.

**Mr James**—I think they all were. This stat report has so much in it so I do not want to get it wrong.

**Senator SIEWERT**—It is on page 18. It does not tell me what I want to know from my quick reading. It states:

17 communities including Alice Springs and Darwin had new or refurbished safe houses facilities.

I knew that. What I recall out of February estimates is that very few of those were actually functioning.

**Mr James**—We would need to take that on notice to give you a comprehensive update on the safe house position.

**Senator SIEWERT**—Thank you. Again, I am sorry to have a go, but I would have thought that was one issue you would have been ready to tell me about. The only reason I did not follow it up last Friday was because we ran out of time. It is an issue that I have followed up every single estimates—around those safe houses—because of the problems in establishing them and getting staff into them.

**Mr Yates**—The problem is that I do not have all of the people that we had on Friday. I may have a briefing on the matter and I will seek to answer it while I am still here.

**Mr James**—On page 7 of the monitoring report it states that ‘by 20 May 2009, 17 of 22 safe houses were operational’.

**Senator ADAMS**—We have not had time to read it. That is the problem.

**Senator SIEWERT**—I went to the section that said safe houses. Is it page 7?

**Mr James**—Page 7 of part 1. It is ‘Supporting Families’.

**Senator ADAMS**—It is in part 1.

**Senator SIEWERT**—Could you take on notice: when it says ‘operational’, are they fully staffed?

**Mr James**—It is my understand that they are, but we will take that on notice.

**Senator SIEWERT**—And also which communities have fully functional safe houses?

**Mr James**—Yes.

**Senator SIEWERT**—As I understand it, as to the Hermannsburg questions that we asked on notice—picking up on what Senator Scullion just raised—I presume those are the questions that you are taking on notice or that you are still to respond to?

**Mr Yates**—Yes. We are still to respond to those.

**Senator SIEWERT**—Thank you. At our last hearing here in November you were saying that you were the lead agency for developing an Aboriginal and Torres Strait Islander engagement framework.

**Mr Yates**—That is right.

**Senator SIEWERT**—How is that progressing?

**Mr Yates**—That is well advanced. It is being considered by the minister at the present time.

**Senator SIEWERT**—That means that you have a draft that has gone to the minister?

**Mr Yates**—Yes.

**Senator SIEWERT**—How soon do you expect to get that out for consultation? I presume that the process will be that it will go out for consultation?

**Mr Yates**—We are touching base with a range of stakeholders on the way to finalisation, but we have given the minister an update on progress. Of course, we are trying to practise what we are looking to embody within that framework in the way in which we are doing our business now, including, for example, in the context of the Northern Territory Emergency Response redesign of measures to bring them into conformity with the Racial Discrimination Act. We are adopting a very comprehensive consultation approach. I cannot tell you exactly when the framework will be complete, but it is very well advanced and we are looking to give effect to the principles embodied in it through how we are doing business day to day now.

**Senator SIEWERT**—Are you already engaging with stakeholders before the draft has gone to the minister?

**Mr Yates**—In the finalisation of the framework we will be touching base with a range of stakeholders.

**Senator SIEWERT**—You have not done it yet because it is with the minister, but then you will be? But you are not putting it out for public consultation per se?

**Mr Yates**—Not yet, no.

**Senator SIEWERT**—I mean after the minister has ticked it off?

**Mr Yates**—I would have to take guidance from my minister on that.

**Senator SIEWERT**—I would have thought that an engagement framework would have gone out for public consultation.

**Mr Yates**—You have to do it in stages.

**Senator SIEWERT**—I appreciate you do it stages and I appreciate the minister probably does not want anything going out until she has had a chance to review it, but I would have thought it would have been a given that it would have gone out for public consideration given that it is about engagement.

**Mr Yates**—I understand your point.

**Senator CROSSIN**—Are you talking about the discussion paper that is out?

**Senator SIEWERT**—No, not the Future Directions discussion paper. This is the engagement framework that the department is the lead agency for. I have some more questions, but I will give somebody else a go and then I will come back.

**CHAIR**—Senator Adams.

**Senator ADAMS**—I would like to ask you about the Themis police stations. Are they mobile police stations? Exactly what are they?

**Mr Yates**—No. They are established police stations, actual facilities. They have infrastructure and facilities there as part of the stations.

**Senator ADAMS**—Are they temporary? I am just looking at this. You have four permanent police stations that have been upgraded and 18 temporary Themis police stations that have been established. I was not quite sure what they were.

**Mr Yates**—That is right. They are not mobile. They are temporary stations. It is just that the facilities are temporary facilities rather than permanent structures.

**Senator ADAMS**—Can they be lifted and shifted somewhere else if need be? How long do they stay there?

**Mr Yates**—The intention was that that was the way in which we could establish facilities quickly and then progressively they would be converted into permanent structures where we were looking for that to occur. The latest budget provides some resourcing for the conversion of at least some of those Themis stations into permanent stations.

**Senator ADAMS**—I must say that the map of the community stores is very useful, as far as the actual geography around the Northern Territory. It has helped quite a lot. As far as the general business manager at Hermannsburg, is that person also jointly overseeing Wallace Rockhole? Is that how that works?

**Mr Yates**—I would have to take that on notice. I think that is the case. I think it may be one of the locations where the GBM moves across more than one location, but I would have to take that on notice.

**Senator ADAMS**—There is another part to that, if you are going to take that on notice. The committee has been told that there are complexes and housing located at Wallace Rockhole but they do not have a GBM. That was the question. The reason I was asking was that it was so close to Hermannsburg and the GBM obviously resides there, but there is a facility and a complex at Wallace Rockhole with no-one in it.

**Mr Yates**—I will take that on notice for you.

**Senator ADAMS**—Coming down to Alice Springs, what is the Alice Springs Transformation Plan and is there an outline of the detail of the plan that could be provided to the committee?

**Mr Yates**—Yes, we can provide that. It was essentially embodied in a statement that Minister Macklin released a few weeks ago in the context of announcements on next steps for the conversion of the town camps. Ms Cattermole can speak to some of the detail of that if you would like.

**Senator ADAMS**—Thank you.

**Ms Cattermole**—The Alice Springs Transformation Plan is designed to provide services to Indigenous people in Alice Springs to support the housing and infrastructure plans in relation to the town camps in Alice Springs. The transformation plan is designed to ensure that people will have available to them a range of support services. For example, things such as tenancy management support, alcohol rehabilitation supports, the possibility of temporary housing in certain circumstances. This is designed to ensure that we are supporting all of the Indigenous people in Alice Springs, including people in the town camps, but other Indigenous residents as well.

Just to go into that in a bit more detail, the plan has two streams. The first stream is the proposal for \$100 million that the minister announced recently in relation to construction of housing and upgrading of housing in the town camps in Alice Springs. The second is \$25 million for the additional support services that I described. That includes alcohol rehabilitation, family support and family violence services, early childhood and, as I said, tenancy management services.

**Senator ADAMS**—How many houses are there within the town camps at Alice Springs?

**Ms Cattermole**—I am not sure that I have that detail on me. I would have to take that on notice.

**Senator ADAMS**—Thank you. Senator Crossin, do you have some questions that you want to ask?

**Senator CROSSIN**—My questions are on a total separate area, if that is all right.

**Senator ADAMS**—That is all right.

**Senator CROSSIN**—There is something that I have been wanting to ask FaHCSIA for a while. You might need to take this on notice. Can you provide us with the amount of funding that is part of the intervention as well as funding that is given to the Northern Territory government for drug and alcohol rehabilitation? Is that something that is done through FaHCSIA or is it better to ask that of the health department?

**Mr Yates**—It is the primary responsibility of the Department of Health and Ageing. Are you meeting with the health department?

**Senator CROSSIN**—Yes.

**Mr Yates**—It is probably easier to direct it to them.

**Senator CROSSIN**—I am trying to get a handle on exactly what capacity there is in the Northern Territory for drug and alcohol rehabilitation places.

**Mr Yates**—I will alert them to your interest to that.

**Senator CROSSIN**—They are coming soon.

**Mr Yates**—They are coming this afternoon.

**Senator CROSSIN**—When you report on the intervention, is that part of the reporting statistics? For example, can you not tell us, as part of your overall report, how many places are to be funded, how many are funded, what the take-up rate is, what the success rate is and how many people have been through rehabilitation?

**Mr Yates**—There is a range of alcohol and other drug response initiatives that are part of the NTER, particularly the establishment of a range of outreach workers.

**Senator CROSSIN**—Is this in the report that you have given us?

**Mr Yates**—Yes, on page 12.

**Senator CROSSIN**—Of part 1 or part 2?

**Mr James**—Part 2.

**Senator CROSSIN**—Why are there two parts?

**Mr James**—Part 2 is very long and part 1 is essentially the summary.

**Senator CROSSIN**—So, page 12 of part 2?

**Mr James**—Yes. There is some information provided there on the measures that have been implemented. They do not go down to the detail that you are looking for.

**Senator CROSSIN**—No. That is not detailed enough for what I am after. When you talk about ‘commenced provision of two dedicated hospital beds for detox’—two beds in Katherine and Tennant Creek—is that four beds altogether or one in each place?

**Mr Yates**—I cannot provide the answer on that, but our Health colleagues, I am sure, will be able to.

**Senator CROSSIN**—It is not in here, is it?

**Senator ADAMS**—I think it is—

**Mr James**—It says at both Katherine and Tennant Creek, so I think it is two in each, I think.

**Senator CROSSIN**—It says, ‘... to support these beds for an initial six weeks.’ What does that mean? If you are someone who is trying to be detoxed, you can sit in the bed for six weeks but after that you get moved on; is that what that means?

**Mr Yates**—The detailed operation of those arrangements is probably best directed to the health department.

**Mr James**—Yes. They provided this text.

**Senator CROSSIN**—It is not very clear, is it? It does not answer a lot of questions, does it?

**Mr Yates**—No. If we were answering all the questions then it would probably be several inches thick.

**Senator CROSSIN**—That is okay. We would not mind several inches thick. We would not have to spend hours trying to elicit fine details out of people if it was several inches thick.

**Senator SIEWERT**—Just think how it would shut us up.

**Senator CROSSIN**—We have got BasicsCards and more police officers. We have got alcohol restrictions such that for more than \$100 you have to provide ID. I now want to get a handle on what I think would have been the next phase of this strategy, and that is actually changing people’s lives by providing drug and rehabilitation places. I cannot seem to get a handle on exactly how many places there are in the Northern Territory and how long you can be in them for. Is that not something that comes past FaHCSIA’s door?

**Mr Yates**—We try to provide a balance between a readable report that is reasonably comprehensive and obviously detailed information regarding specific measures. Over and above that is best pursued with the responsible line department, which has all of that detail.

**Senator CROSSIN**—In section 1.4 you cannot tell me exactly how many drug and alcohol places are being funded in the Northern Territory?

**Mr Yates**—No.

**Senator CROSSIN**—I do not have any questions, then.

**Mr Yates**—What I am saying is that it is best pursued with the Department of Health and Ageing.

**Senator CROSSIN**—Can you perhaps take a note of that and put it in your next report or ask them to include it in your next report?

**Mr Yates**—Certainly.

**CHAIR**—I would like to go back to a question from Senator Adams on the Alice Springs Transformation Plan. It was a joint press release—on 2 May 2009, for your assistance—of Minister Macklin, Paul Henderson, the Chief Minister of the Northern Territory, and the Hon. Warren Snowdon. The heading was ‘\$125 million Alice Springs Transformation Plan’. What we were looking for was an outline of the detail of the plan, because it is obviously very important. It seemed a bit vague as to what we were talking about, so that reference will make it a little easier for you.

**Mr Yates**—Thank you.



**CHAIR**—Some of these statistics are interesting. These are safe places to be. We have 17 new safe houses. We have 70 night patrols and 63 additional police officers. As this committee goes around we get two themes. Firstly, that there has never been alcohol in this community. There has never been any sexual abuse of children, assaults or any of these things in this community. Knowing that that is the case, I think it may be useful in your statistics if you are able to provide amounts of alcohol. I know the media at one stage in Alice Springs had this wonderful big pile of grog that had been confiscated. It was all very appealing to the media. But I think for other reasons, perhaps less dramatic, it may be useful to the committee to see what efforts the police are making. There are a number of ways that we can report that. I just thought it might be useful to have data on arrests for assaults and those sorts of things in communities. A lot of people in the communities say the fact that the police officers are there and the fact that much of the grog is not coming into the communities any more mean life is better. It might be another indicator we can look at, whether it is assaults or reports. I just thought it would be very useful to do that. If you look at the statistics, there is a lot more support and compliance around the place. It would be very useful to have some sort of measure rather than just saying that the communities are safer. We have a fair indication of what they were like before. It is going to be difficult because how do you measure what it was like prior to police officers being involved. I acknowledge that. But I think that might be useful. If it is not too onerous could you take it on notice and perhaps provide some useful and measurable benchmarks around the police officers' activity on addictions, confiscations and those sorts of things?

In regard to the 70 night patrols, we have had some evidence that was taken last time I think in Katherine that said fundamentally the night patrols are pretty much a taxi service. I would acknowledge that in Katherine; it provides a very good service, and that is not to diminish the role they play. Because you have a taxi service that takes drunken people home, I am not sure but there may be a perception that it looks cleaner from the outside. Basically, the fundamentals of the night patrol appeared when people were giving evidence to be negative, that there is this sort of thing of, 'All they do is pick up drunks and they do not in fact take them home, they drive them somewhere else.' 'I want to go here. There is another party happening.' 'Beauty, we will take them there.'

Are we supplying money conditional to a particular service being provided? That is an assumption from me, not a statement. You will perhaps correct that if that is wrong. As to the 36,000 people who have had a trip in the night patrol truck, do you ask them where they are going? Is there a set of standards? Are those standards common in a contractual sense over who is providing for the night patrol? In your answer could you deal with the issues? I understand why Katherine would be always dealing with drunks because it is an area where access to alcohol is a great deal easier than that in Yuendumu, for example, or Galiwinku.

Do you have things such as: these are the rules under which you will be running your night patrol; these are the tasks of your night patrol, and these are the reporting parameters on the night patrol? If you have taken Joey Giraffe from this address, or picked them up at this address and taken them there, I would have thought just the whole duty-of-care issue would have some significant reporting issues there. Would you be able to tell me about the standards, what we are expecting of the night patrol, and also what the reporting requirements are and how we may be able to have a condensed version, I suppose, within each night patrol about the incidents? Are they exactly the same? One would suspect then it is perhaps a taxi service. If as a consequence of their interdiction, is it getting less? Those are the sorts of things we would be looking for.

**Mr Yates**—In relation to the night patrols, unfortunately these are not whole-of-government hearings and as such all of the relevant agencies who are responsible for managing these measures are not in front of the committee at the same time. Night patrol is managed by the Attorney-General's Department. My familiarity with how they work is that the officers running the patrols do keep records of incidences and what is involved in the handling of those incidences. How they are reported back through to the Attorney-General's Department I am not familiar with. A body of information would be available as part of the implementation of that measure, so I can those questions on notice and refer them to Attorney-General's, unless that agency is coming before the committee.

**CHAIR**—That would be useful. We do try that on Fridays. I am surprised governments survive the day. We just do not have enough room in the room. Could you pass it on to the Attorney-General's Department? What we would also be looking for, perhaps subject to the Privacy Commissioner's scrutiny, is whether or not we can be provided with some of the log books just so that we can have some understanding about where all this information goes? Does it just get written in a book and because it is part of a contractual arrangement it gets put over here, or not?

**Mr Yates**—I am happy to take that on notice and refer it to Attorney-General's. On your earlier remarks and interest in data around and beyond the police presence, there is some information on pages 25 through to 27 of part two of the monitoring report that tries to capture information about alcohol and substance abuse incidents, assaults and such matters that are drawn from reports from the NT police. Some of that material is available. Otherwise I will take your wider question on notice.

**CHAIR**—In regard to the information on page 25, I think that is very useful, but because we have such different communities wrapped up in that demographic, as the officer said, we have some communities that have access to alcohol. There is a pub there. There are plenty of pubs. There are bottle-Os. But many communities do not. I think if we could separate them community by community, or however we want to but at least by the demographics of those who are protected by being in a restricted area or otherwise, that would be a lot more useful. I look at these statistics and they do not really tell me a lot, apart from the fact that it is still pretty horrid in Tennant Creek and some places in Katherine. If we could have a look at that, it would be very useful.

**Mr James**—We do have the data at a community level, or at a police station level, but in terms of what we can provide we would have to check that with the NT police.

**CHAIR**—Is that simply because it is their information?

**Mr James**—It is partly because of that. It depends on what the incidents are; but if they are very small numbers you get into issues of potentially identifying individuals—

**CHAIR**—Yes, it is all subject to the Privacy Commissioner's scrutiny; if you could break that down and provide that to us on notice that would again be very useful.

By way of observation, some people in the media have been asking me about the NTER. You always used to be able to get these wonderful briefings. Mr Chalmers was a very talented media person and they have said, 'But we expected to have the guy that replaced him.' It is a very topical issue in the Northern Territory. In fact it is a very topical issue right around Australia. The line of information came from the person who was running the NTER, and that was then seen to be General Chalmers. They say to me that that is very difficult now. This is not perhaps the time to talk about whether it is policy, or whatever it is, but I take this opportunity to make the point that has been asserted to me. There may not be any deliberation in it, but it is one of the only ways—and people were used to that mechanism—of getting an update. Somebody stands up and says: there are these things. This is no slight on the current commander of NTER operations at all. I was not sure whether it was an instruction from someone that perhaps this is the new mechanism of providing information quarterly, and it is nice and clinical. It is non-subjective—

**Senator MOORE**—And a surprise.

**CHAIR**—Yes, certainly today. Are you able in your normal careful way to provide to us some assurances about communication with the media and to see how we are going with it because this has huge public interest? I think the wider Australian community in a general sense are concerned about the wellbeing of our first Australians in the Northern Territory. Forget about the intervention. Plenty of people on this committee have different views about that but I think we would agree that it is a significant public interest issue. Have you had any feedback in that regard? How do we get some level of comfort that if the media want to talk about the NTER and get updates regularly, the way that used to be provided was an individual used to provide it, but what is going to happen in the future?

**Mr Yates**—In those early days there was that intensive interest. The only information that we could share with the media was essentially information that was emerging from the visits that were being made by the operational commander at the time. As the emergency response has evolved over time we have tried to put into place systematic reporting on progress in the measures through the monitoring reports. The independent review that was conducted last year provided a major report on the progress of the review. The practice these days is that, where the media wants to pursue specific issues, as I understand it they are essentially channelled through the minister's office and the department assists in the response to that range of inquiries, coordinating the input from the operation centre as well as from our Northern Territory office.

Part of the reason for that is, as the emergency response has evolved, not everything is run out of the operation centre any more. That was the case in the initial phase, but increasingly line departments are taking up full responsibility for ensuring the effective progress of the measures. To provide an authoritative position around each and any one of the measures requires a further measure of coordination. To that extent we have tried to ensure that that cross-section of up-to-date material is provided systematically through the monitoring

reports. There is never all of the information that people might ideally want to have, but at least it does provide an extensive array of information available to the media and other interested parties.

**CHAIR**—I am not so sure that will satisfy the media, but that is not my task.

**Senator ADAMS**—The fact that there are Commonwealth funded programs that are just starting to get up and run and are getting a bit of a bite, but they are only funded for the year, seems to come up quite often. I know the three-yearly programs are a problem in themselves as well when you get a project that is really working and then you cannot get any recurrent funding for it. My question is: are there any plans to develop a Commonwealth policy for the funding of Indigenous programs to address the serious concern that most programs are short term? They operate on year-to-year funding but do not allow the organisations really to get them working as well as they should and then that leads to the problem of trying to retain the staff that are actually running them. That is something that seems to affect the rural areas probably more than the ones in the city. When you get out into a community and you have got something working, there is nothing more frustrating than having the funding chopped. They are supposed to be sustainable, and there is no way that they can be.

**Mr Yates**—It is a good point. I think a number of inquiries have identified this as a live issue that impacts particularly in remote areas, that is organisations trying to retain staff when they are not guaranteed secure funding over multiple years. There has been attention given to that issue in recent times. A number of departments, including our own, have been progressively moving to multiyear funding of programs and services, not necessarily to all providers where there are any issues with particular providers in terms of performance, but there has been a progressive shift. I do not know if we have got a comprehensive picture of that but I am happy to take on notice providing advice to the committee about some of the significant changes that have been occurring. In some of our program areas like CDEP we are moving to multiyear funding and a number of our other services. It is an issue.

In the context of the Northern Territory Emergency Response it has been affected by the fact that the funding has been for a year and then a review and then a year, and now we are moving to multiple-year funding for the NTER over the next three years. That will give us more leeway to be able to secure services beyond a 12-month time horizon. That will be important to providing organisations with assurance that they can recruit more confidently and put people on to multiple-year contracts rather than just 12 months and we will see where we are in a year's time. But it is a live issue. I guess the direction that we have been encouraging agencies to move in is to gear their funding arrangements to the performance of organisations and where there are low risks then they ought to be confident to be able to provide multiyear funding to put them on a much firmer footing in terms of their capacity to deliver.

**Senator ADAMS**—Often the evaluation of the program gets held up and this is where the problem is, the program has not been evaluated so therefore is it going to be re-funded or is it not? As you know, it is so hard to get competent people to commit to going out into remote areas. If they cannot have some expectancy that they are going to be able to stay there for 18 months or two years and know they have got a job rather than if evaluation is held up, you might have or you might not have; the first thing they do is disappear and then you start all over again.

**Mr Yates**—Yes. Sometimes it is evaluation. Sometimes the funding that is being made available by government is for only a limited period and then they review it and decide whether or not they will make further funding available. We have certainly been working across agencies to look at some of those issues of streamlining of funding agreements and reducing red tape, which can often be a real burden on Indigenous organisations with scarce resources. They spend a lot of their time preparing reports for government agencies when they are not providing the same scope of resources to actual direct service delivery.

We have done a major overhaul of terms and conditions of agreements for Indigenous programs that we and a number of other agencies are responsible for. We have developed a set of common terms and conditions across about seven or eight agencies so that, when an Indigenous organisation is dealing with a Commonwealth department, they do not have to deal with a different set of rules and requirements; we now have a common set. We have streamlined our common terms and conditions down from about 60 pages to about 20 and are working with organisations to try to progressively alleviate some of that. You have to get that balance between red tape and the due accountability that organisations are obliged to meet in terms of using taxpayers' funds. But there has been a gradual shift towards multiyear funding agreements. We want to see more of that, but it is often a function of whether governments are comfortable to guarantee funding for a program for more than a year. We have to work within those constraints.

**CHAIR**—On Friday we talked a lot about housing and how we were going with all that. That was very useful. Part of the process that was slowing down, as it was explained to me, is that this is basically due to the somewhat protracted process of negotiations over the land for the lease process to take place. I accept that. It has certainly been in the media that a petition of some form with some 400 signatures has been lodged with the Central Land Council in regard to the township of Hermannsburg. I am just relating what I have read and no doubt you have read in the media.

Do you think given the difficulties in other places where it has been so protracted that this is not a place where you would just simply say, ‘Look, this is not going to work.’ We are relying on the land council to provide information or advice to people in a particular area. I am not verballing you there, but I am assuming they would usually be the organisation that you would use. What are you going to do about that situation in terms of having people on the ground? There seems to be a complete lack of confidence. There is no mischief suggested, but there is a complete lack of confidence between the people in Hermannsburg and the Central Land Council about the negotiations with regard to their leasing of the land. They have made some allegations of not impropriety—I will not go there—but both sides have said some things. It would seem that is not the most harmonious situation. Given far more harmonious situations elsewhere have taken a long time, do you think you will be interdicting in that?

**Ms Cattermole**—Perhaps it might be worth clarifying the discussion that we had on Friday because I think it is important to say that, although negotiations have been required over those leases, in fact they have not held up the housing program at all. Not only do we have sufficient leases to pursue and finalise this year’s housing program but we also have leases to ensure that we can deliver the housing under the SIHIP program next year as well. Whilst I certainly acknowledge that those negotiations take time, it has not been the case that they have held up the housing program to date. Given that we are continuing to progress through land councils and negotiations with key communities in the centre, I think at this stage the view remains that it is something you do require allowing time for people to have those negotiations on the ground, work through the land councils, the bodies that we respect have that role, and then work through to the conclusion of the leasing arrangement.

Given our experience to date is that it does require work and detailed discussions, our experience is that whilst that does take time it certainly has not taken so long that it has actually held up the program. I would like to hope that that will remain the case and we will continue through land councils to have those discussions.

**CHAIR**—Land councils in the past in other circumstances have actually been very useful. The Central Land Council has and many other places. I am not sure whether you have read the media or listened to some of the people in regard to those matters, but I would see that as far less than harmonious. These people are at war. They do not want the council to represent them anymore. The council is sort of saying, ‘Well, that is interesting.’ But it does not seem that the land council will be out there any time soon continuing to negotiate or in fact explain the complex nature of the leases. I have to say I was actually quite satisfied that the reason that it has taken 22 months to do bugger all in terms of housing was for a very good reason. It is very difficult to go and negotiate the lease. I accepted that. I will perhaps have to rethink my happiness that I had when I left the estimates on Friday. You have to acknowledge that there is a completely different relationship between a land council that is doing a very good job and a community who accepts that. Off they go doing an excellent job in a very important role. Now the community has effectively put a vote of no confidence on the land council. You cannot just sit there and say, ‘Well, that is all very interesting’, because I would say it will not happen. Is there some consideration of perhaps using some other organisation or the Commonwealth coming in, explaining it and negotiating it rather than the land council or supporting some other organisation, perhaps a legal organisation, to give them advice on it? Surely we are not expecting to just keep going and saying, ‘That will all be fine.’

**Mr Yates**—That is ultimately a policy issue. Of course the land councils have statutory roles under the Northern Territory Land Rights Act. Obviously, depending on how things unfold, if there is a policy case for any change to those arrangements then that is a matter for government to consider, consistent with its policy.

**CHAIR**—You would have to say that when the ladder is falling off the wall and the paint is sitting on top of your head and it has all gone to poo, you have to accept that in these circumstances you cannot just keep saying, with respect to you, that this is a statutory authority, they have got a statutory obligation, therefore it will all be fine—

**Mr Yates**—I was not saying that.

**CHAIR**—I understand that, but you can see it from my perspective. I do not see it as a policy issue. It is quite a legitimate question. There is no mischief in my question. I would have thought it quite evident that to continue down the only path that currently exists, that is to ask the Central Land Council to keep doing it, is not going to be a positive role for them. Perhaps your answer may be—and you may want to take it on notice—that you know something I do not about the joyous nature of the future of that relationship, that they are working in a conciliatory nature to get them all back together so we can pursue it. I do not know any of those things. All I know is that the process at the moment to do very, very important work in terms of the housing out there is in fact seriously stalled, which is quite rare in these sorts of cases. They are very, very publicly saying they do not want a bar of each other. It is those circumstances. It is not a policy change. I was just hoping for some advice to the committee about what other things we may have been considering.

**Ms Cattermole**—I would have to take that on notice because the latest advice I had, whilst I accept there are always differences of viewpoints and there have been some difficulties, is that those discussions and negotiations are progressing. There certainly is an opportunity to work through those things because, as I said, the SIHIP program is fully subscribed into the foreseeable future so there is plenty of opportunity to have those what are often difficult discussions. While I take the point you are making that this has almost got to a point from your understanding of being more difficult, it is certainly the case that we have had to work through quite difficult circumstances in the past and we have been able to achieve sufficient leases to subscribe the program well into the future.

**CHAIR**—I will look forward to an update on that area. If there are no further questions, the last question I have deals with our report. We are reporting shortly. Would you be able to do your very best to provide answers to those questions on notice that I have asked—not necessarily Attorney-General's and others—by the close of business of Friday, 12 June, so that we can include the answers in our report? Anything you can get done by that day would be very useful. I know that puts some time strains on you, but I also know how capable you are, so we will look forward to receiving those by the close of business on Friday. Thank you very much again. I think if there are any further questions on notice—although there probably will not be in that short time—they will be supplied to you by the secretariat.

[4.01 pm]

**PODESTA, Ms Lesley, First Assistant Secretary, Office for Aboriginal and Torres Strait Islander Health, Department of Health and Ageing**

**SAVAGE, Ms Joy, Assistant Secretary, Remote Services Development Branch, Office for Aboriginal and Torres Strait Islander Health, Department of Health and Ageing**

**CHAIR**—Information on parliamentary privilege and protection of witnesses and evidence has previously been provided to you. The committee has before it your submission. I now invite you to make a short opening statement. At the conclusion of your remarks I will invite the members of the committee to put questions to you. I apologise; I will be leaving now and passing over the chairmanship to the very capable hands of Senator Crossin.

**ACTING CHAIR**—Did you want to make an opening statement today?

**Ms Podesta**—A very brief one. We provided a written submission to the committee on 20 February. The submission outlined the range of programs within the portfolio that have an impact on improving the health and wellbeing of Aboriginal and Torres Strait Islander people living in regional and remote communities within the context of the government's commitment to closing the gap.

Since then the Australian government has announced the 2009-10 budget. Importantly, this provides funding for ongoing and additional health measures in the Northern Territory and committed funding to a range of measures designed to meet the needs of regional and remote Indigenous communities in each state. We just wanted to put on the record that subsequent to the submission there have been a number of announcements that are relevant to the work of this committee. In particular we draw attention to the ongoing work and commitment that the department has post the Northern Territory Emergency Response, the legacy work that we are building in conjunction with the Aboriginal Medical Services Alliance, AMSANT, and with our department in reforming the health service delivery in remote Northern Territory communities through the expanding health service delivery initiative. This continues, as does the follow-up care to the children from the initial child health checks. Alcohol and other drug services are continuing and the mobile outreach service has now been expanded.

A big focus of the work of the department for Indigenous people and for remote communities in the next year will be developing and delivering the national partnership agreements on chronic disease management on Indigenous early childhood. The government has now issued the final response to the Northern Territory Emergency Response and we have supported the three health recommendations that came out of that report.

**Senator ADAMS**—Were you talking about the recommendations out of the monitoring report?

**Ms Savage**—No, I think Ms Podesta was referring to the recommendations of the Northern Territory review board report.

**Senator ADAMS**—What were they?

**Ms Savage**—There are three. I may not be able to say them verbatim but I can give you a flavour of the three recommendations. The first recommendation was in reference to continuing a tripartite agreement with the Northern Territory Department of Health and Families and the Aboriginal Medical Services Alliance of the Northern Territory. We have supported this and clarified in the government's response that a continuing partnership approach to the implementation of ESDI would continue.

We included the second recommendation related I believe to the inclusion of drug and alcohol and mental health services, expanding the ESDI to include these. We have supported these in principle and will work towards maximising synergies with other programs to ensure allied health services would be available.

I believe the third one was in relation to drug and alcohol services. The government's response has been to fund for the continuation of drug and alcohol services.

**Senator ADAMS**—What about dental treatment for children? Was that involved with AOD support?

**Ms Savage**—Yes, it was; in fact, that was the continuation. I am sorry, I should have included the drug and alcohol and dental services follow-up services. That indeed has been part of the \$131 million that has been announced for continuation of services in the Northern Territory, with a further three years funding for dental follow-up care.

**Ms Podesta**—There was \$15.228 million announced in the budget which will provide for the follow up of those services.

**Senator ADAMS**—On my favourite topic of the foetal alcohol syndrome, this morning we had the Australian Institute of Health and Welfare here talking about data and statistics. They had a graph on the low birth-weight statistics. When I asked about that they were very interested and said that maybe it could become a special project seeing that a woman is pregnant for nine months and then another two years later the child can be assessed. I know they can be diagnosed a lot earlier, but it was really leading onto the education problems that I discussed with you last time. Do you think that would be a possibility, that someone would be able to do a special project looking at the problems associated with it?

**Ms Podesta**—We followed that up arising from Senate estimates as well. We have included that on the agenda for a discussion between our agencies around what priorities are for new data collections that might be followed through. I think it is very possible that we might be able to look at a special data collection with AIHW around foetal alcohol syndrome; or if not with FAS, with impacts of alcohol-related issues with children and being able to record that in the datasets.

**Ms Savage**—We currently have four sets of data collection from the child health check: the child health check itself, referrals, audiology and dental. One of the pieces of work that is continuing in the Northern Territory is the development of 19 key performance indicators. That is a shared view of the indicators and data that would be provided from the range of services across the Northern Territory. In that suite of work we would look at a range of additional data collections, and low birth-weight certainly would be considered part of that process.

**Senator ADAMS**—Yesterday the *Australian* referred to Halls Creek having had three weeks without alcohol and the statistics that have come from those three weeks show the change in that community with domestic violence, admissions to hospital and the number of itinerant people around the town. It is quite incredible what three weeks can actually do. Despite the fact that the person with the licence does not have a viable business any longer I suppose is a downside for that business. But I think there is just so much evidence out there of what can happen. Especially having a town, as Halls Creek was, and being able to compare it to now, and hopefully as time goes on that will improve along with the health of the pregnant women in that area.

**Ms Podesta**—It was heartening to read. It certainly concurs with the anecdotal information that we have had as well about the quietening effects of the alcohol plans and alcohol bans and the introduction of low-alcohol beer sales only. You will be aware that health services have for some time advocated around some of these policy changes, and they are policy changes that we are fully supportive of.

**Senator ADAMS**—It is just so nice to see something positive in the paper instead of something that is a real negative. That is why I raised it.

**CHAIR**—I asked some questions today of FaHCSIA. You may need to take this on notice. But I am trying to get a handle on how much money is provided under the intervention or just in a general recurrent funding way to the Northern Territory for drug and alcohol services? When you talk about alcohol and other drug strategies continuing and we have continued our response to the drug and alcohol services, what services and amounts are we talking about exactly? How many places are we talking about?

**Ms Podesta**—There are three appropriations that relate to this. We have the data on one and we can give you further information. There are three. There are the alcohol and other drug services that transferred to the Department of Health and Ageing after ATSIC. They came into our base, so we continued to fund those. There are the additional drug and alcohol services funded under the two concurrent COAG decisions, which were approximately \$50 million each around drug and alcohol services. I will take on notice and give you the details about what is being delivered there in the Northern Territory. Plus there is the continuation of the alcohol and other drug measures that we commenced under the Northern Territory Emergency Response. Ms Savage can provide the specifics there.

**Ms Savage**—For 2008-09 there was a \$13.6 million appropriation for NTER follow-up that provided funding for drug and alcohol services. The further funding announced in this budget for the next three years—that is 2009-10 through to 2011-12—is \$4.387 million that is administered. Perhaps to go a little bit further, \$2.6 million was initially allocated this year under Closing the Gap follow-up care. Key elements of the NTER alcohol and other drugs response have continued. There are four elements. These include AOD workforce in the primary health care setting; two AOD RNs and 12 community support workers complemented by eight AOD positions funded under the COAG 2006 substance use measure which—

**CHAIR**—What sort of workers are we actually talking about here: counsellors, detox specialists, or what?

**Ms Savage**—No, these are community workers. I would not suggest that they have particularly high qualifications, but their work is around prevention and education of community. There has been the increased capacity for substance use treatment and rehab services. These have been enhanced in Darwin, Katherine, Tennant Creek, Yuendumu and Alice Springs.

**CHAIR**—How many places are we talking about?

**Ms Podesta**—We will have to take that on notice because it comes under three different areas.

**Ms Savage**—We will give you a breakdown of the existing services that we inherited: what money is going into them on a recurrent basis; the new money that is going in through the two COAG measures, alcohol and other drugs; and the additional activity that has been funded post Northern Territory Emergency Response. We are basically moving towards a bit of a revolution in alcohol and drug services. We are looking at different therapeutic models. A lot of the previous services were: you went in for a short period, dry out, go back home, come back through. We had really high numbers of people who were repeats. We are looking through the AOD measures in COAG for a bit more of a sophisticated response which works with family members and friends as well so that when people leave an extended period of resi care that they go back into a community where there is a bit of education and understanding to support people around sobriety as much as possible. You will also be aware that the therapeutic model that tended to be funded in the past was based on a 12-step model. It is very suitable for a—

**CHAIR**—Ten steps, I think it is.

**Ms Podesta**—It is very suitable for a number of people but not for everyone. We are looking at some other models as well to complement that. We have also been trying to focus on some family settings and some women-only settings because we have high numbers of women with alcohol problems. A lot of the resi services tended to be full of men, which was not always the most appropriate setting. It is a bit more sophisticated. The other thing we have been investing in increasingly—and we will give you the capital works investment that we have put into the territory—is really improving the stock and the safety and security of some of those buildings. Some of them were not terrific. The ones that we inherited from ATSIC were not great stock. We have been significantly improving the stock. It does not mean they are all fixed, but we have certainly been improving them?

**CHAIR**—Ms Savage, did you finish what you were saying?

**Ms Savage**—I was just going to add that part of the workforce support and development has in fact been the engagement of an alcohol and other drugs clinical director and a workforce training and development officer to support that community level work that I spoke of earlier with the provision of training and education. In addition to that there have also been funds for an AOD remote workforce coordinator under the COAG substance use measure. The team is basically the department of health and families and supports 22 alcohol and other drug positions.

**CHAIR**—I know there is a lot of money and effort going into the workforce and support workers and community support, but I just cannot seem to get a handle on the number of alcohol and other drugs rehabilitation places. First of all, how many 10-step programs are funded in the territory?

**Ms Podesta**—What about the two steps that are missing? Aren't they 12 steps?

**CHAIR**—I thought it was 10. Maybe it is 12 weeks. Whatever, three months, let us put it that way. I want to know whether or not there is any effort now to actually have the rehabilitation places that go on for that amount of time. I do not know if I am making myself clear enough here, but if I rang Banyan House, for example, they would be able to tell me they have got space for 15 places. That is what I want to know. I want to get a total feel for what you fund and what the Northern Territory government funds in terms of rehabilitation places, essentially. I guess what I am leading to is: what are we actually doing to turn people's lives around, to make sustainable changes in terms of giving up alcohol, ganja and other drugs out there in those communities?

**Ms Podesta**—We will take that on notice. I would make two observations. We are changing the therapeutic models. They have tended to be short-term residential drying out centres, which only have a limited impact on certain groups. There is a workforce issue everywhere to make those work properly. We have not tended to invest in the rehab. That is one of those grey areas in health financing. They have tended to be the responsibility of state governments. But increasingly under the COAG measures—that has been joint funding



because the COAG measure on alcohol and drugs is Commonwealth money—we have been working with state governments on models where they contribute, and we have included rehab.

I cannot tell you off the top of my head if the Northern Territory government has included rehab. I know there is definitely some in some other states. We will give you the information on what we funded in the territory. But what is possibly of interest to you is what is being funded through that COAG measure which includes a rehab component in other states and territories. There are some extremely innovative models which include much longer stays on the recognition that people with a long-term alcohol and other substance abuse problems need longer than a month's treatment—so, graduated return to community for example.

**CHAIR**—Of those that are happening what are we doing about replicating or putting them in the territory so that at the end of the day in five years' time when the initial legislation for the intervention is up for review we have actually significantly changed people's lives if they are alcohol or substance abusers?

**Ms Podesta**—We are really conscious of the legacy issue. It is part of the reason that expanding health service delivery has been our key focus. Obviously a big part of what we are working on is the prevention issue through the chronic disease and changing lifestyle issues. Alcohol consumption is one of them because the relationship to chronic disease is a critical one. We will take on notice the information that we can provide you about rehab services.

I have to say it is a relatively specialist area. There are not a lot of groups coming forward with proposals. Part of what we have done and part of the reason why it has taken a little bit longer than what people might have expected is that we searched to get some good models around this. We were not interested in just pouring money into exactly what we had. We did not think that was sufficient.

**CHAIR**—Does your department have some interaction with the Australian Federal Police or the police in terms of crime statistics? Do they ever say to you, 'Of the X amount of cases we prosecuted last year for domestic violence, 60 per cent, 90 per cent or 100 per cent of those were alcohol or other substance induced.'? Is there a link between the work they are doing and health dollars that are being spent?

**Ms Podesta**—No, we do not have a formal relationship with the AFP providing data to us. But as part of the original planning process and as part of the service development that we do with each health service, we identify what the numbers of incarcerations or alcohol and other related crime is within the area if it is a high issue. What you would find is that the profiles of most of the health services that we fund, if they are in a community which have high numbers of alcohol related injury or domestic violence et cetera, they tend to have invested as well.

We have discussed this for some time. We do not have the right—the luxury—to tell health services what they must do. We provide them with data and encourage the boards to consider those areas as priorities. It is why we cannot tell them they must do maternal and child health, for example. You would find that in most communities they assess that as a priority if they have a high number of alcohol-related injuries. What we do have is the data that comes out of the AIHW, the Australian Institute of Health and Welfare, which details hospital admissions and that goes down to a fine level of detail around alcohol-related hospital admissions—

**CHAIR**—They appeared before us this morning.

**Ms Savage**—The data we rely on comes from more than police prosecutions et cetera.

**Ms Podesta**—Precisely. Health services themselves would be much more au fait with their local police and the types of arrests or prosecutions that they are filing through which are alcohol related.

**Senator SIEWERT**—I wanted to ask some questions around the child health checks. I am aware that some of the data we were given is supposed to be confidential, which I have a problem with in the first place given that I actually thought this was publicly available data.

**Ms Podesta**—What do you mean?

**Senator SIEWERT**—We went through this with FaHCSIA. We were given some information that we have been told is confidential information, in particular around the child health checks.

**Ms Podesta**—Our data is published on the internet. We do a six-monthly report on the findings from the child health checks which are publicly available.

**Senator SIEWERT**—That is what I thought, which I find it quite perplexing that in fact we have been told this is confidential data.

**Ms Podesta**—Is this the monthly update?

**Senator SIEWERT**—Yes.

**Ms Podesta**—We understand what that is. We provide that information on an internal basis to the operations centre but then it is collated and approximately every six months we do a public report as to what we have found, how many children, what their conditions are, and what is happening. I guess if you take a point in time it is going to have been provided to the op centre on a confidential basis. That is partially just to keep it sensible. If you keep doing numbers they change every couple of weeks because different groups of children are provided, but it is all public after it is collected and made available.

**Ms Savage**—We are keen to have in the next publication the progress on one of the child health checks in July-August.

**Ms Podesta**—So we will have three.

**Ms Savage**—This is part of our internal government reporting and regular monitoring with the operational centre.

**Senator SIEWERT**—I will not therefore ask you necessarily about specific data from that, but could you explain the difference between the child health checks that were under the NTER and those that are under MBS?

**Ms Podesta**—Of course. We are happy to do so.

**Ms Savage**—The Northern Territory Emergency Response commenced, as you know, in July and the first lot of child health checks are directly undertaken under the Northern Territory Emergency Response through the recruitment and deployment of Australian government child health check teams, essentially. Those were not billed to Medicare at all, they were funded through the NTER funding. As the child health checks rolled out increasingly services took up a larger role in undertaking child health checks. Most of them have 19(2) exemption. They undertook the child health check using the child health check form that was developed by the department and were able to bill MBS. We have collections of child health checks, irrespective of whether they were undertaken by Australian government deployed child health check teams or Aboriginal community child health services who undertook child health checks through MBS in our collections with AIHW. It is a combination of both.

**Ms Podesta**—Essentially with health services there, you do not have to keep sending teams. We will do them and we will provide that data as part of a collection and we were more than happy to do that.

**Senator SIEWERT**—If I understand it correctly, from now on all health checks are done under health services under MBS.

**Ms Podesta**—That is from 2007-08.

**Senator SIEWERT**—Are the health checks comparable?

**Ms Savage**—They certainly are, up until the end of this month the form that was developed through the NTER continues to be provided by services.

**Senator SIEWERT**—These are the normal health checks that services have been doing anyway?

**Ms Podesta**—Correct.

**Ms Savage**—Yes, they were. It was certainly not the volume I guess that we have seen—

**Ms Podesta**—Prior to the intervention there was quite a small number of health checks undertaken. With the intervention and post the intervention—and to be fair with the significant increase in primary health care staff being provided—health services have increasingly taken up child health checks as a screening tool, and that is precisely one of the reasons why the additional investment into primary health care services is taking place. To be really blunt about it, we do not want to be in the position where we need to bring in teams of people to do child health checks. Our objective around expanding health service delivery is to have the capacity in remote communities for community health organisations to be able to take up that screening and to be able to follow it through.

**Senator SIEWERT**—Which is a nice segue into my next lot of questions, and that is around child health clinics and the infrastructure that is or is not available in communities for child health clinics—

**Ms Savage**—For health services?

**Senator SIEWERT**—For health services, yes.

**Ms Savage**—This year substantial funding has been provided under the NTER in the first instance, not for new, custom-built health centres; they take a long time just in the planning and gestation stage—

**Senator SIEWERT**—We can come back to that.

**Ms Savage**—to be done in the time frame that we were working with. But during the first year of NTER and certainly in this current financial year we have provided funding upwards of \$6 million to increase the capacity of existing buildings; in other words, whether there have been some renovations, an adjunct room, or the purchase of a demountable or a container, we have provided the means for services to be able to have the necessary infrastructure to deliver the expanded services by way of child health checks and also the general expansion of primary health care services to the whole community, not just children.

**Ms Podesta**—In 2008-09 under NTER we delivered or refurbished eight additional clinics and we propose to build or renovate up to 31 additional health service accommodation facilities. They are a mixture of some purpose built, some renovations and some demountables. We have been doing what we can to increase physical capacity.

**Senator SIEWERT**—Can we go through this a little bit more forensically, if possible? Funds of \$6 million in 2008-09 or was that the overall—

**Ms Savage**—That was the allocation. Because the funding was provided to services on an annual basis where there were some savings, services indicated to us small infrastructure projects and we provided them with the flexibility to undertake those small infrastructure projects. They varied from clinic to clinic, community to community.

**Senator SIEWERT**—It was \$6 million for the financial year 2008-09, or was it the overall expenditure for clinics in the NTER?

**Ms Savage**—That was the allocation for 2008-09, this financial year.

**Senator SIEWERT**—Was that just for infrastructure or the provision of services as well?

**Ms Savage**—Just for infrastructure.

**Senator SIEWERT**—You upgraded or put new facilities in eight centres—

**Ms Podesta**—And accommodation. There were an additional 31 places for accommodation.

**Senator SIEWERT**—That was out of the \$6 million?

**Ms Savage**—Yes.

**Senator SIEWERT**—Did accommodation link to a centre or was it where there is no centre where people could stay?

**Ms Savage**—No, it was usually linked to an existing centre.

**Senator SIEWERT**—Have you done an audit of the infrastructure in each of the communities?

**Ms Savage**—I am pleased you asked that question. We are undertaking some work at the moment to do a full regional infrastructure assessment. We expect that to commence next financial year.

**Ms Podesta**—You will appreciate that what we are doing at the moment is working on a regionalisation process with health services. We are reluctant—

**Senator SIEWERT**—Health checks in NT?

**Ms Podesta**—Yes, in the Northern Territory. We are reluctant to just say that we will build now if in fact the planning and consultation process that is genuinely taking place within those communities determines a type of delivery model that might be inappropriate. At the moment it tends to be refurb, make safe, and make good accommodation for the people who can recruit the additional staff, which they have. We will be looking at some longer term, bigger investments if we need to look at any greenfield sites or significant capital works.

**Senator SIEWERT**—I appreciate that there is consultation in the process of regionalisation. How much have you got in your budget for a longer term investment?

**Ms Savage**—The process in terms of the 2009-10 budget, which provides funding for the next three years, is that in this financial year we have an investment plan and that was the allocation within that investment plan. This year we actually have an extra \$10 million. I think it is \$50.01 million for ESD. Within that \$50.1 million we would expect that infrastructure allocation but it will be subject to decisions as to continuing to provide the necessary temporary infrastructure.

**Ms Podesta**—We have not done a nominal split of the \$50.1 million yet because we are going to do that. Do you want to know about the way we do this with the department of health and families and with AMSANT? We will have a discussion as to what it looks like; what are we going to need to spend the money on this year; where the priorities are; what is going to come online, when and where; and how much might that cost? We do a nominal allocation. The investment plan will go to the Commonwealth minister for sign-off. He does not know about that yet, but that is the process we have had until now.

Within the \$50.1 million there is a bit of flexibility there as to what we need and what is going to come on stream as it is. The great thing is that we have the money now for three years, so there is an opportunity to look a little bit beyond tomorrow to what we need over the three years. As well as that there was the election commitment for additional capital works in the Northern Territory that is currently being rolled out as well. That was about \$10 million? You might have to help me here. For the Northern Territory there was additional capital works there. As well as that, within our regular primary health care program we fund capital works all the time, so there are additional capital works. As well as that, in the rural health program there is a capital works program in that. That was just signed off last week as well. There are a whole lot of different sources of money that go into capital works in remote areas. I know the next question you ask me will be: is it enough? The level—

**CHAIR**—Very good.

**Ms Podesta**—The level of demand is very high. We do have to prioritise every time. I will be really frank. We have tried to keep the market reasonable. I probably should not say this on *Hansard* but in reality if there is a capital works project that is funded by the Australian government, the prices go crazy. We try to keep the market honest and reasonable about this. We try not to put billions of dollars into it because it just increases the prices everywhere. We try to be very realistic and pragmatic about building, keeping the costs within a contained environment, so that we just do not do this kind of: let us spend this much money here and have a Taj Mahal and the next one will be a Taj Mahal, and the tradies know that we are funding it so they increase the prices. We do try to be very tough about containing those costs and we get a good deal now. We have really ironed out some of the people who used to make a lot of money out of individual services because they were in a remote community. That is part of the reason we do the investment plan, doing as much as possible, contracting a number of service builds, and having contracts that are very tough on deliverables so that we get good value for that money.

**Senator SIEWERT**—Will the audit that you are undertaking this year be publicly available so that the committee can have a look at where we are at in terms of the construction?

**Ms Savage**—We have not commenced the work in earnest, but I would not foresee that there would be a problem. That sort of work would be done in conjunction with our partners, DHF and AMSANT—

**Ms Podesta**—If we told them it was confidential I think somebody would probably make sure other people saw it if they were not happy. We have been quite transparent about the whole way that this process has worked. It is why we have published all the data on the child health checks. This is a good news story about building a new health system. We have continued to be very clear about saying that this is the investment plan; that goes to all of our partners. All of the decisions that are made under the investment plan, even though it is within the Commonwealth minister's purview, people are all being very open and transparent. People are very aware it goes to the Aboriginal Health Forum. Every decision is discussed in detail in case it goes to the Aboriginal Health Forum. All of our partners know where we are going with that. I cannot imagine that the audit would be in any way a secret document.

**Senator SIEWERT**—It is all very well to have buildings but in terms of the staffing, do you have the resources and also access to staff with appropriate qualifications?

**Ms Savage**—As you would appreciate we fund individual services, many of which are part of the DHF network in related communities. We have created just this year an extra 175 positions and by and large I think most of them have been filled. I would not be able to go through each one of them and tell you exactly where they are and are they filled right now, but that is quite a substantial increase in the workforce in the Northern Territory. These are permanent positions. These are not the additional workforce that is provided through the supplementation to the remote area health corp that assists services; we further base professionals into communities. In terms of training and support, that is a matter for the individual services but, because of the high level of collaboration and transparency between the partners, where it makes sense and it is efficient to do a training program for all providers that services can access, we certainly support that.

**Senator SIEWERT**—I think you said in your submission that you were going to be undertaking an audit of child health checks on the evaluation?

**Ms Podesta**—Yes.

**Senator SIEWERT**—Is that done?

**Ms Savage**—The process certainly is. It was put out to tender. They are currently being assessed and we expect consultants to be engaged very shortly.

**Ms Podesta**—But all of the data for that evaluation has been collected. It goes through AIHW as the data custodian and they have been published. We will be using that and the consultant will use the publicly available data plus the qualitative work that they will undertake.

**Senator SIEWERT**—The December report that we have just got uses the October data, though. Will it then go up to the December data?

**Ms Savage**—It will be the latest data that is available through AIHW. We are not relying just on that data repository but also other sources, as Ms Podesta has identified.

**Ms Podesta**—We will have the next publicly available report in July 2009 and the consultants will have access to all of that data. We negotiated a memorandum of understanding with the three partners around the use of that data. It is robust; it is protected, but it is very public about what we are finding.

**Senator SIEWERT**—What is the time line for the evaluation?

**Ms Podesta**—I do not know.

**Ms Savage**—This is a rather complex and multifaceted evaluation. At this point we do not have a fixed time line but we would expect progress reports to be publicly available, if necessary, over the life of the evaluation.

**Senator SIEWERT**—Who is doing it?

**Ms Savage**—It is being finalised.

**Senator SIEWERT**—You cannot tell me?

**Ms Podesta**—We have not signed a contract yet.

**Senator SIEWERT**—Could you take it on notice and let us know when that has been finalised so that I do not have to wait until next estimates? That would be useful.

**Ms Podesta**—We have a meeting with all the key stakeholders later this month to go through that and we will have a meeting with the evaluation consultant, with a proposed consultant and that committee I think on 18 June. They are going to talk about how their protocols will work around liaison contact visits, et cetera. We will be very happy, depending on how long we get for any questions on notice, to provide that information to you.

**Senator SIEWERT**—I know what you are going to say to this question, but I have to get it on record. Will it be publicly available?

**Ms Podesta**—The evaluation report?

**Senator SIEWERT**—Yes.

**Ms Podesta**—That will be subject to the minister—

**Senator SIEWERT**—I just wanted to get it on record.

**Ms Podesta**—We are public servants, but I think our record speaks for itself. We have been very, very public about all of the funding that we have had and I cannot imagine that this would be treated in any other way. Our reports are about 300 pages long. They are very, very comprehensive reports on the child health check. I will go on the record to say that we made a very clear decision with our partners from the beginning that this was going to be treated very seriously and that the data that came from these child health checks are the most comprehensive datasets on the conditions of Aboriginal children in remote Australia ever. It will, to some degree, be a longitudinal report on the impact of diagnosis and treatment. We are genuinely making these of the highest quality. I cannot imagine that there would be any reason, but obviously we cannot speak for our minister. But the department has a very long tradition of making public the evaluation of that type of work.

**Senator ADAMS**—I have a question about the new directions for mothers and babies services. I note that the government has provided funding of \$90 million over five years to primary health care providers across

Australia. We have had a lot of comment as we have moved around about short-term funding for programs that last only for a year—I was speaking to FaHCSIA about the same thing—and trying to keep staff when they do not know whether they are going to get recurrent funding or not. With this particular program that was part of the 2007 election commitment, for how long will those services be supported over that time? Where are we at with it? I note you have new directions funding early in 2009 and five more in 2009-10. Are those five-year programs or are they shorter programs?

**Ms Podesta**—I am sorry that I do not have the answer off the top of my head. I am going to have to take it on notice but I will be very clear. Health service money tends to be recurrent. We have very few one-off activities and projects. We tend to fund what might be one-year contracts but they are rolled over every year and the health services are aware of that. I cannot tell you exactly if new directions are just a one-off project. It is a five-year program. I believe they would be five-year contracts but I will have to take it on notice. The way it tends to work in Aboriginal primary health care is that when we find a primary health care service and it is a core service we tend not to have one-off activities around core services. If they are funded and they are seen to work and they are able to provide the data that they are delivering those services, all of the programs in our base are recurrently funded. Additional projects, such as new directions, if they are for five years and the appropriation has been for five years, they tend to be contracts that go for five years, but some of these are being rolled out in year two or in year three. So, depending on the length of the program, they might be a three-year contract. I need to take it on notice. But, in general, ours are recurrent if they are core services.

**Senator SIEWERT**—I am following up on some questions asked in estimates around the pharmacy scripts and the increase in the dispensing fee which is now up to \$2.69. The point that has been put to me is that there is a difference between obviously \$2.69 and the amount that pharmacies in the cities get to dispense medicines and if we use that difference, which is about \$3.30 or whatever it is, that could be invested in additional education in Aboriginal communities and increase support in Aboriginal communities around pharmaceuticals and the better use of them. And it will create employment in fact for people in clinics to do that outreach work. Has any consideration been given to initiatives like that?

**Ms Podesta**—We have a project called QUMAX which does precisely that. It provides a subsidised capacity at each clinic which is outside the section 100 arrangements under PBS. It also provides additional funding to the peak bodies and to the services for better use of medicine. It is under the previous pharmacy agreement. It is a flexible program—

**Senator SIEWERT**—Is this the fourth—

**Ms Podesta**—The fourth pharmacy agreement included the QUMAX project, so there is funding available for metro and regional Aboriginal health services for precisely those reasons, to subsidise and to provide education and training on the better use of medicines. I know the specific question you are asking me is about the difference in the dispensing fee. I will have to take that on notice. I do not have that detail. It is administered through the pharmaceutical division.

**Senator SIEWERT**—Could you also tell me how much funding there is for QUMAX? I could probably look it up, but if you know what it is it is probably easier than me trying to find it.

**Ms Podesta**—I do not know off the top of my head. It is a substantial amount of funding that goes over three years. It is run through the Pharmacy Guild, NACHHO and the department. For some reason I am thinking it is \$90 million, but I would need to take it on notice.

**Senator SIEWERT**—If you could, that would be appreciated. I have just a couple of quick questions coming out of your answers, which I appreciate. Does 'regional' include remote?

**Ms Podesta**—No. Remote already has section 100. QUMAX is the sister program under the pharmacy agreement for the regional and metro that were not eligible for the section 100 program.

**Senator SIEWERT**—My question is specifically under the section 100 for remote communities.

**Ms Podesta**—We will take that on notice and give you that information.

**Senator SIEWERT**—I understand from our discussions in estimates that there is going to be a review of the arrangements under the fourth pharmacy agreement, how successful it has been, and they are still working that out. Will QUMAX be reviewed as part of that process?

**Ms Podesta**—It would need to be, yes. It is worth noting that under the new national partnership agreement with the Chronic Disease Management program, one of the new measures there includes a funds holding arrangement to provide, depending on the clinical circumstances of the patient, direct subsidy and support for

pharmaceuticals and other needs that they have to manage their condition, so that if an Aboriginal person who is part of the Chronic Disease Management program under the new COAG initiatives is diagnosed by their health service as requiring a range of pharmaceutical, specialist appointments, AIDS and other assistance and their circumstances mean that they are unable to meet the cost themselves, there is now flexibility under the new program for those things to be met through the new flexible funding arrangements.

**Senator SIEWERT**—How much would that be?

**Ms Podesta**—It is part of the \$805 million—

**Senator SIEWERT**—Are there boundaries around it?

**Ms Podesta**—There are some nominal amounts but in reality the implementation and the detailed guidelines around each one of those measures is being worked through with the technical reference groups now. We certainly have some nominal amounts that are allocated around those flexible ones, but we are basically working now with the technical experts, including all of our community sector representatives, to make sure that we have got those figurings in the guidelines right. They will all be very public very soon.

**ACTING CHAIR**—Thank you for your time this afternoon. It is much appreciated.

**Committee adjourned at 4.52 pm**