

## **INQUIRY INTO OVERCOMING INDIGENOUS DISADVANTAGE**

**Organisation:** Dubbo Neighbourhood Centre Inc.

**Name:** Ms Jackie Wright

---

## **INQUIRY INTO INDIGENOUS DISADVANTAGE**

**ORGANISATION:** Dubbo Neighbourhood Centre Inc.

**Name:** Ms Jackie Wright

**Position:** Senior Manager

**Telephone:** 02 6882 2100/0408978327

**Date received:**

Submission to the Inquiry into Overcoming Indigenous Disadvantage  
in NSW

Dubbo Neighbourhood Centre Inc. welcomes the current Inquiry and the opportunity to provide feedback about opportunities for addressing the entrenched disadvantaged experienced by Indigenous Communities in this state.

The information that has been gathered to include in this report has been provided by a number of people employed in an Indigenous Capacity Building Project and their associates/community members and by direct experience in working with indigenous communities with a primary focus on community development for a number of years.

The areas of disadvantage have been well investigated and documented. It is distressing to note that many recommendations that have been made both via formal reports and via community consultations have not been sufficiently acted upon over the years to make a significant difference to date.

The Neighbourhood Centre makes no claim to expert status in this area, but we have heard over many years some consistent claims by the community about what may make a difference and wish to offer these suggestions to the Inquiry.

### **Background Information about Dubbo Neighbourhood Centre Inc.**

This service has been developing since 1974 and has the following objects as stated in our Constitution:

#### **2. OBJECTS**

The objects of the Association shall be as follows:

##### ***Primary Objects***

To establish a community service to include the following purposes:

- I. For the relief of poverty, distress, sickness and helplessness,
- II. To provide family and youth support,
- III. To provide support and assistance for the disabled of the community
- IV. To provide care for the aged and care for children and young persons.

The agency provides a range of services including;

- After School Care (3 centres);
- Vacation Care (3 centres);
- Adolescent Family Counselling service;
- Child Youth & Family Worker (focus on violence prevention);

- Neighbourhood Centre Project
- Community Transport (Frail Aged and disabilities and carers)
- Community Visitors Scheme (visiting service for isolated aged people in nursing homes);
- Community worker Aged Disabled
- Community Activities Program (aged and disabled)
- Migrant Support Worker
- Home Maintenance and Modification Scheme (HACC clients)
- Aboriginal Community Night Patrol
- Indigenous Capacity Building Project (Dubbo Community Development Project 0-99 )

Most significant to this Inquiry is the Capacity Building Project funded by a range of state and federal departments. The objectives of this project from the major funding bodies are as follows:

#### **FAHCSIA**

- Provide mentoring/management support to this project and;
- Leverage and complement mainstream government funding and;
- Build capacity of the Indigenous community in East and West Dubbo to lead and participate as effective decision makers in enhancing the delivery of both mainstream and Indigenous specific services.
- Provide structured and accredited governance and management committee training of new members and refresher training for existing members of the community and GNC.
- Family Violence Prevention awareness
- School Holiday Activities
- Transport
- The development of strengthening ties between the East & West communities;
- Maintaining and enhancing family structure in a changeable environment;
- Upskilling the East & West Community Centres Indigenous staff

#### **Department of Housing**

- Staffing of community facilities in East and West Dubbo;
- Coordination of service delivery;
- Contributing to the development of services and programs run from the facilities and;

- Assisting the Department to establish an independent, tenant based community Service organisation.

#### **DEEWR**

- Structured training and employment

#### **DEWHA**

- Arts Project culminating in an exhibition and competition.
- Market Day with focus on cultural exchange

Our primary operating location is the Gordon Centre in the Gordon Estate, currently subject to the Transformation Strategy being implemented by the Department of housing. The Gordon Neighbourhood Centre has been operating as a focal point for primarily indigenous activities since the 1970's. There have been a number of ebbs and flows with the Centre as a result of both short term funding and inadequate funding for servicing a complex range of community needs. Some of the activities that currently operate include job network training for indigenous clients, wakes for funerals of community members, a comprehensive range of activities for children and young people, extended opening hours and a location for outreach health, employment and other services. All staff are indigenous and have established positive relationships within the community that also support the identification of high risk individuals

who may then be referred to services or targeted for more intensive interventions.

The Centre is open from 10.00a.m Monday to Friday, closing at 6.00 Monday to Wednesday and 10.00 pm Thursday to Saturday. Opening times for Saturdays is 2.00 p.m.

We have observed a significant shift in behaviour of children and young people over the past 18 months. At the outset weapons were brought to the Centre daily, violent and aggressive behaviour was prevalent as was vandalism and graffiti and damage to vehicles parked near the Centre . Family members now actively support staff in providing boundaries around acceptable behaviour. We attribute the change to having a sense of security and well being in an environment which is safe and applies reasonable boundaries. The relationships that kids are able to form with reliable adults are clearly important to the changes in behaviour.

We have recently received advice of funding from the Department of Health and ageing to encourage indigenous people aged from 5 to 25

years into a variety of active lifestyle activities. The aim is to provide opportunities to explore a range of options to increase the likelihood of active lifestyle choices being made by this at risk group of people. The opportunity to add programs such as this onto an existing service dealing with the target group allows options to be explored. It is well documented that engagement in sports and physical activities has significant benefits both for health and well being. What is to be offered here is a range of activities (tae kwon do, boxing, gymnastics and dance) that allow participation beyond the usual football codes and major team sports that do not appeal to everyone.

### **Terms of Reference**

#### **b(ii) Health and Wellbeing**

We think of health and well being as having a number of elements that focus on the development of relationships with people who care in a genuine way for the people and the community and understand enough about a range of issues that impact on families and individual's ability to provide optimal care for their kids and communities. These qualities will allow the development of relationships that may lead to people having a greater willingness to



address some of the hard issues that impact on all areas of life, including, health, employment, education and housing. This requires a meaningful acceptance that people have experienced a range of traumatizing experiences personally and historically that have a real and ongoing impact on individuals and families. This would encourage engagement and empowerment rather than deliberate or inadvertent exclusion and continuing disengagement.

Consultations and feedback from communities held over the last 10 years have yielded a consistent message from communities of disadvantage, both indigenous and non-indigenous. Communities want services to be delivered in their own communities as they are not confident, or often able physically, to access mainstream services in other parts of the city/community.

The need for community access to services and resources does not necessarily preclude progress on a mainstreaming agenda. Again, the need is for the development of relationships with people that can be trusted. Once these are established, people are far more likely to make the effort to go to people away from their communities.

The area of work that is regularly identified but difficult to address is working with families with multiple needs from unresolved sexual assault, drug and alcohol abuse, lack of secure housing, poor literacy and numeracy and lack of employment readiness. In our view, none of these issues can be addressed as a stand alone issue by agencies with limited areas of responsibility as they inevitably blend into creating/entrenching a disadvantaged reality for the family as a whole. Services must be offered according to the needs of the family/individual community in a genuine partnership between all parties. This way, tough realities are more likely to be faced up to and impacted upon over time, increasing the likelihood that both adults and children in their care are less adversely affected by events than otherwise.

A model of working with this level of complexity in an inclusive and empowering way has been called Family Decision Making or Family Group Conferencing etc and is derived from New Zealand where it was developed to work with Maori families. I have seen this work

first hand and have also provided some exposure to the concept to a small group of indigenous service providers and community members who appeared to support the concept. Funding has not been available to implement this type of service model beyond pilot levels as they are quite resource intensive to facilitate effectively. Clearly the cost of not providing successful options for families is more expensive in the long term.

Health and wellbeing encompasses a variety of conditions and characteristics that must be addressed and considered on a community and family level, rather than those elements prescribed by a range of department's core business. It is for this reason, amongst others, that community services that are funded recurrently and provide a soft entry point for services is critical for impacting on disadvantage reduction over time.

It is our belief that greater access to programs that either have proven to successfully impact on highly at risk children and families or may do, before they become offenders as juveniles or adults are required.

Such programs may appear expensive at a superficial level, but are not when compared with the long term costs of failing to act early from a social, personal, and community perspective.

Funding for programs and services needs to be structured to provide maximum likelihood of successful outcomes – this will require greater capacity to evaluate programs and modify or discontinue. Services that do prove to hold promise need to be able to either secure recurrent or reasonable duration funding eg 10 years with external evaluations along the way to identify strengths and short comings. Services and programs need, where possible to be added on to services that have shown the capacity to deliver sound programs and management infrastructure.

**Summary:**

- 1. People employed in positions relevant to Aboriginal people need to have a genuine sense of care and understanding of the issues faced by Indigenous people.*
- 2. Services need to be available in the community/ies.*
- 3. Relationships are the pivotal building block.*
- 4. Empowerment is critical.*

5. *Services must be holistic and address entrenched/unresolved issues from past.*
6. *Services must be tailored to suit families/communities needs, strengths and preferences.*

**b(iii) Education**

A couple of key concepts are at the forefront of our concerns re education. The first is that often children, including junior primary school aged children are excluded or suspended from school, without adequate effort being applied to this being made into a developmental experience. More often, in our experience the children return to the care of families who have very chaotic lives and have contributed to the lack of ability for children to cope with the educational environment in the first place. The children are often happy to be “off the hook” and not attending school, reinforcing the problematic behaviours that had them suspended/excluded in the first place. Services need to be “wrapped around” high risk families to support their re-engagement with education in a meaningful way.

A number of children struggling at school may be suffering from a combination of social and health issues impacting on their ability and

motivation to learn. It has been suggested that more comprehensive health services should be integrated into the school environment, or at least that health related options be explored by schools in partnership with parents where learning or behavioural problems are manifesting at school.

Many children who do not attend regularly for a range of reasons are not detected and picked up by the system for up to a term, or even longer if the children's families have moved from one location to another. The limitations placed on working in the community for education staff preclude the type of engagement that may be successful in maintaining high risk students in the education system. For example, a successful program was run in Dubbo for approximately 4 years that was designed to identify children of school attending age who were not at school. This position allowed a partnership between the school system and families and the community and resulted in transitional families being linked with educational facilities for their children. Children who were non-attending due to family disorganization were identified, families engaged in a non-threatening way and often negotiations between

families the worker and the schools resulted in improved school participation. This position operated almost as a community based school liaison position and was a great loss when funding ran out. The service could have been strengthened by more formal partnerships between the non-government agency and the Department of Education to evaluate the longer term impact on school participation and to ensure that matters referred to the Department were consistently followed up in a timely fashion.

**Summary:**

- 1. Exclusion/suspension should be accompanied by the development of services to suit the family of concern.*
- 2. Assessment of health and social needs should occur when early risk indicators begin to emerge, in partnership with families.*
- 3. Early signals of poor attendance need to be more promptly detected and responded to.*
- 4. Community based interventions will support the efforts of government agencies in addressing and responding to school attendance problems.*

**b(iv) Employment:**

The issue was raised here again, about the need for the approach of service providers to be genuine and able to understand the personal impact of the challenges faced by many Indigenous people. This will be particularly relevant when thinking about the remaining unemployed in a close to full employment labour market. Lack of confidence is a critical factor for many long term unemployed indigenous people. Those people that are not currently employed are likely to require more than “just a job” to enter or re-enter the workforce in a sustainable way. A support system within the employment structure has also been identified as important, reducing the risk of indigenous people being dismissed as a result of maintaining significant cultural responsibilities eg funerals, family sickness, some structural support in compliance with administrative requirements (leave forms etc).

Given that low levels of educational achievement in the remaining pool of unemployed people is probable, a shift from a punitive approach to those people either struggling to secure work or to be motivated to work via breaches is required. We would like to see a supportive process of assisted engagement in education or meaningful



training options to be required of the Job Network providers. This may require additional tutoring or other individualized support options to allow people to cope in a formal learning environment that may be quite intimidating in the early stages, to support their upskilling and build confidence.

With regards to CDEP the feedback was that people believe in the need for a CDEP type program to support a transition into work for highly marginalised people. Their needs to be concentrated effort on securing “work that matters”, not just the first unskilled laboring work that becomes available. Unsuccessful job placements result in breaches when the people concerned fail to participate adequately, regardless of the appropriateness of the placement.

The funding formula for Job Networks appears to encourage an approach that supports expediency rather than comprehensive assessment and understanding of strengths and weaknesses of potential employees that would foster a better matching of staff to positions.

Staff employed in CDEP services also need to be adequately trained and skilled in the various elements of their work. I have found this to be an area of weakness in the service system.

A more comprehensive induction process has been suggested as being necessary in the CDEP and Job Network programs. This relates both to staff employed to provide service and incoming applicants for work.

Some additional supports and mentoring may be extended to agencies attempting to employ indigenous staff to reflect the community demographics, where those people may not be fully skilled or qualified to commence a position without additional training. This may be particularly relevant where there is only one Indigenous person on a team

A final comment from people I discussed this with was simple – “Give us a go!.”

**Summary:**

1. *People need to be linked with “jobs that matter”.*

2. *Employees working in this area need to understand barriers affecting Indigenous people and support processes to increase likelihood of engagement and success.*
3. *Those with low educational achievements need to be transitioned into meaningful training, with support as require, rather than being breached.*
4. *Job Network formulas and CDEP programs need to have systems that support overcoming lack of self esteem, education etc. to provide successful pathways into meaningful employment.*
5. *Consider some additional means of assisting employers to recruit and retain Indigenous people to reflect community demographics.*

**b (vi.) Incarceration and the Criminal Justice System**

Successful early intervention in high risk families will logically be the best outcome in this area. Such intervention will need to address the underlying causes of the problems that lead young people into the justice system. With a lack of adequate services to meet the basic rehabilitation needs of those attempting to give up drugs and alcohol

there are extremely limited options for seriously addressing the causes of the symptomatic dependence. I focus on this area as one of the most consistently identified causes of family violence, risk to children and inadequate parenting etc.

We see that this area is closely associated with child protection issues and a failure to adequately address risk issues early poses a serious threat to adults and children alike in the family and community.

In a full employment context and with serious unmet need in addressing issues that increase risk of incarceration new approaches are required to support a different response. One such response has been a suggestion by the DOHA employed worker with Division of General Practice in Dubbo (Maureen Thornhill), that interested community members be provided with some training and ongoing support to mentor those trying to give up or recover from alcohol, tobacco and other drugs abuse.

It is well recognised that a sense of belonging is an important element of protecting people of all ages against the risks of social isolation and

social and financial disadvantage. It is not difficult to identify young children with clear risk factors. Oftentimes by the age of 6 years and older, children without adequate supervision and parental guidance can be seen wandering the streets and engaging in offending and pre-offending behaviour that needs to be addressed in a comprehensive way to prevent entry into the justice system as soon as they become old enough to be charged. Services must concentrate on building the capacity of families and surrounding communities to provide alternative sources of support and guidance for these highly at risk children. Linking known high risk children (particularly boys) with related and family friends who are men and providing opportunities for relationship building with support of services and culturally respected people seems to offer some opportunities for both the children and adult men to develop different roles and reduce isolation and sense of powerlessness.

**Summary:**

- 1. Early intervention programs that address family needs holistically and comprehensively are essential.*
- 2. Child Protection is critical to interrupting the cycle of disadvantage that often involves multi generational abuse.*

3. *Develop people in communities to respond to skills shortages in critical areas eg D & A, mental health.*

Jackie Wright

Senior Manager

Dubbo Neighbourhood Centre Inc.