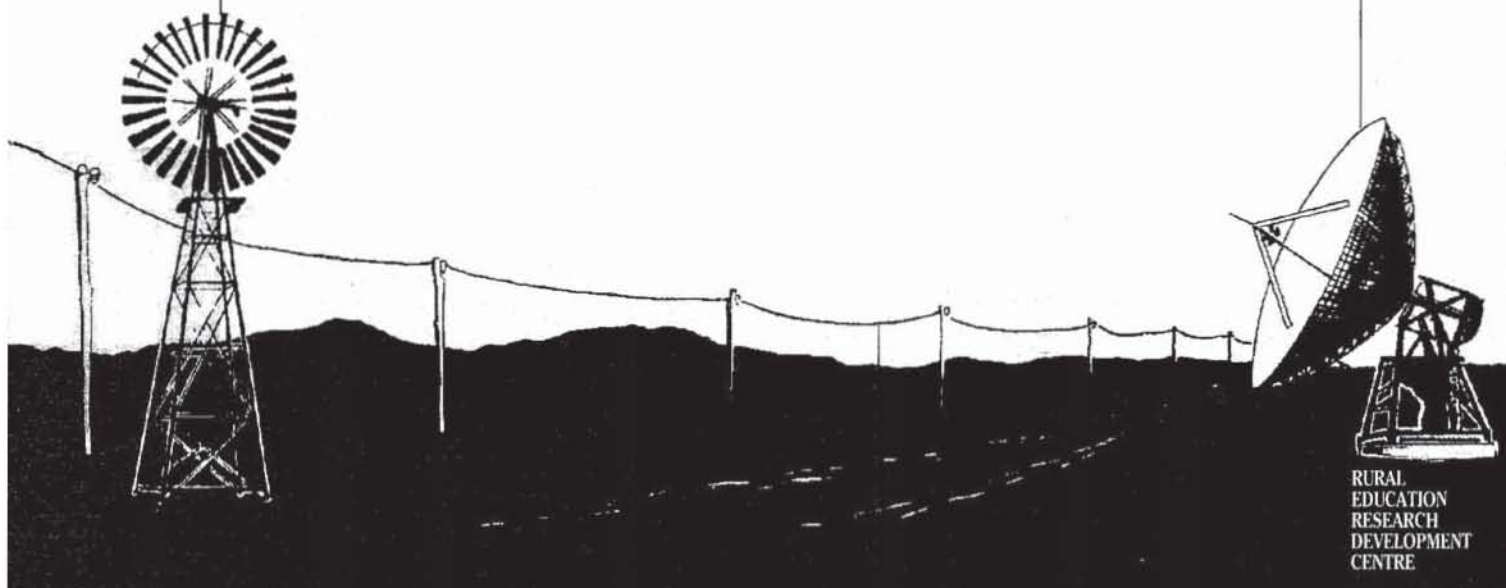




JAMES COOK UNIVERSITY OF NORTH QUEENSLAND

ISSUES AFFECTING RURAL COMMUNITIES

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RURAL
EDUCATION
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ISSUES AFFECTING RURAL COMMUNITIES FROM AN INDIGENOUS AUSTRALIAN'S PERSPECTIVE

Gracelyn Smallwood — Australia

ABSTRACT

Prior to the European invasion of Australia in 1788, indigenous Australians lived in harmony with themselves and their environment for over 60,000 years. Like all indigenous communities of the world who have been conquered, all have suffered:

- a) loss of land
- b) loss of culture
- c) loss of identity
- d) loss of self-esteem
- e) institutionalisation
- f) discrimination
- g) isolation

The consequences of these factors have left a profound legacy of poverty, appalling standards of health and an almost total dependence on the largesse or parsimony of Governments and their various bureaucratic arms. A recent delegation to Australia from the World Council of Churches, described conditions in remote Aboriginal communities as worse than fourth world.

Despite this tragic state of affairs we must all look for solutions that can lead to a healthy and independent future for our children.

There is no simple solution, but rather we must come to understand the interconnectiveness of all these issues, which impact on the socio-economic well-being of our people.

In other words, we need to ensure that all communities have access to the following:

- a) clean running water
- b) proper sanitation
- c) adequate housing
- d) accessible and affordable nutritional food
- e) comprehensive community controlled health services
- f) culturally relevant and appropriate educational facilities and curriculum
- g) development of an economic base that will lead to increased self-esteem and prosperity for the whole community
- h) reinforcement of traditional cultural values

Unless this is formulated and implemented we will continue to see further deterioration in indigenous communities.

Good morning Madam Chair, ladies and gentlemen. I would firstly like to give thanks to our indigenous elder Mr. Johnson, who welcomed us all at the conference opening. Secondly as an indigenous person, I wish to sincerely thank the conference organisers for giving me this opportunity to speak at this important gathering regarding issues effecting rural communities.

As this is an international conference, it is important that you all have an historical perspective of indigenous people before you can understand the present critical situation in our rural and isolated communities.

A quote from Jackie Huggins, an Aboriginal writer:

"Aboriginal Australians have lived in Australia for over 40,000 years. It has been a long argued view of European Anthropologists and pre historians that modern humanity migrated south to Australia. This fails to explain, however, why older forms of modern human beings have not been found outside this continent. The legends and religious beliefs of modern Aboriginal Australia have no stories of migration. There is no evidence of migration memories anywhere in our country. This is a religious position taken by Aboriginal Australians, and science has failed to refute it."

Before 1788 Aboriginal Australians enjoyed a nomadic lifestyle and I stress the word NOMADIC. The word, the concept, suggests to the colonisers that we had no roots to our land, albeit a very romantic view.

All men, women and children lived in harmony with each other and the environment. Mother Earth was regarded as sacred, which everyone respected and did not exploit.

The healthy lifestyle changed dramatically when the invaders arrived from England, headed by Captain Cook. The land was claimed by the British law of "Terra Nullius" meaning unoccupied land.

The legal position remained until twelve months ago when the Mabo decision was handed down by the High Court recognising Native Title and on exposing the lie of "Terra Nullius". It has been estimated that approximately 1 million Aborigines inhabited the country when the invasion occurred, and over a period of 206

years we have declined to a population of 300,000 (2% of the national population).

The British killed thousands of Aborigines with guns, poisoned water holes, and many died from western introduced illnesses because they had no immunity to foreign diseases. From the point of contact introduced diseases spread throughout the country like wild fire.

In the 1800's Darwin's theory, the evolution of mankind, placed Aborigines at the bottom of the evolutionary scale. In effect we were introduced to the world as the missing link. Henceforth government policies were formulated and implemented on the fanciful and utterly ridiculous notion that we are sub human. We don't see ourselves as the missing link, rather what is missing is the commitment of governments and people within the Aboriginal industry to change the institutionalised racism that we deal with every minute of our lives!!!

Back to the 1800's, scientists around the world, particularly from Britain and Germany, encouraged the killing of Aborigines for scientific research. Monies were actually paid for skeletons and grave robbers descended upon the burial scene waiting for the mourning party to depart. Thousands of graves were robbed, the British and Australian scientists ran one of the biggest grave robbing networks in the world.

Studies by an academic researcher in Oxford indicated that the graves of between 5,000 and 10,000 Aborigines were desecrated. Their bodies dismembered to support this archaic science. Even more bizarre, is the irony that the gateway to Australia's north is called Darwin. Rather than the 1 million Aborigines living in Australia at the time of contact, it is now theorised that there were 3 million Aborigines in Australia.

Many surviving Aborigines were placed on reserves and missions, where they were controlled by white management under paternalistic legislation. The hunter/gatherer foods were replaced with high carbohydrate rations. Language and ceremonies were forbidden as it was seen as paganistic to the invaders superior Christian values.

Aboriginal men were drastically losing their role in society by being used as slave labour. The women were used as domestics and sexual partners for the white invaders, rapes and killings continued as a sport.

Quote by Rhys Jones a pre historian script writer:

"One gorges at the Sunday afternoon manhunts of sexual mutilation, of burying live Aboriginal babies up to their necks in sand and kicking their heads off after trying the severed neck of the husband around the raped spouse".

Half caste children were being born and many sent away to welfare homes or to other reserves far away and many did not return.. It was estimated that one in every six Aboriginal children was taken away from their families this century, compared to the figure of one in 300 from the white community.

Like all indigenous communities of the world who have been conquered, all have suffered:

- loss of land
- loss of culture
- loss of identity
- loss of self-esteem
- institutionalisation
- discrimination and violation

The consequences of these factors have left a profound legacy of poverty, appalling standards of health and an almost total dependence on governments and their various bureaucratic arms.

In June 1993 the World Bank reported that, in general, health around the world was improving even in developing countries which are third world, white Australian health is also improving, however, indigenous Australian health is deteriorating and is now 4th world standards.

A recent delegation to Australia from the World Council of Churches described conditions in remote, isolated, indigenous communities as worse than fourth world. Last week, after the president of the Australian Medical Association visited isolated communities of Cape York, he stated that:

"if these conditions were in the white community there would be a public outcry"

The average white Australian has absolutely no idea what it's like to live in a remote, isolated community, and the majority of people who live in these communities are indigenous.

If I am in a remote community and I have been diagnosed with breast cancer, or my child is sick, I have no choices of health care. However, if I live in the city, I could visit three different doctors. In a remote community for 6-8 months of the year I can be cut off from the rest of the world because of unsealed roads and unusable air strips at times even helicopter access is possible.

Let us now picture a scenario of an indigenous child being born, and growing up, in a remote North Queensland community, suffering extreme poverty, hopelessness, overcrowding, lack of clear running water, raw, untreated sewerage pouring into the land, seas and rivers, alcohol/drug misuse and family violence.

This child is likely to be received by the authorities as being "at risk" of abuse and neglect. However, this assessment must be examined in light of the environment in which this child could be reared.

Firstly the mother to be is often very young, in her teenage years. During her pregnancy she can be subjected to violence and abuse from her partner and has limited access to nutritional foods, as the cost of living in remote communities is astronomical. For example, a cabbage would cost around \$12 and you and I pay \$2 in the city.

In many remote communities the government stores are still purchasing second rate fruit and vegetables and selling to our people at 130% mark up.

If mum is "lucky", she may have ante-natal care twice during her pregnancy. At 33 weeks she will be sent away to a hospital in the nearest regional centre - Cairns or Townsville - where the child is born forfeiting his or her birth right. The mother usually survives the culturally inappropriate, white male midwifery service, gives birth to an under-nourished baby, born premature, away from her support system.

The mother then returns with her new born babe to a poverty stricken, isolated and remote community. If she is not encouraged to breast feed, she can pay up to \$17 for a tin of milk formula which would cost \$7.50 in the city. The social security pension cheque arrives once a fortnight.

On the off pension week, she will usually run out of money and to make the milk formula last the baby receives weaker and weaker milk. The solution is - mum herself eats less, usually carbohydrates and fat, rather than protein. Because of this "coping strategy" the baby's weight will be low and regarded by the authorities as "failing to thrive". As baby will be underweight for his age and undoubtedly suffering from lactose intolerance, infected with gut parasites, skin and chest infections, glue ear and possibly renal disease. If this child survives to the age of two, he will still be regarded as "failing to thrive" and then there is western welfare intervention.....

A quote from an Aboriginal psychiatric nurse, Pat Swan's book "200 Years Unfinished Business".

"For 200 years non-Aboriginal Australia has made many mistakes on our behalf, and there is no western model that can address the Aboriginal situation. Aboriginal people must be empowered by education and resources to control decisions affecting our lives, including mental health services. It is clear to Aboriginal people that those with unfinished business have low self-esteem and those with high self-esteem don't self-mutilate".

Research has shown that governments spend approximately \$1,000 per white person in remote communities compared to \$600 per indigenous person, and that many indigenous people in remote areas are working for the dole under CDEP.

Despite this tragic state of affairs, we must all look for solutions that can lead to a healthy and independent future for our children.

There is no simple solution, but rather we must come to understand the inter-connectiveness of all of these issues which impact on the socio-economic well being of our people.

In other words we need to ensure that all communities have access to the following:

- (a) clean running water
- (b) proper sanitation
- (c) adequate housing
- (d) acceptable and affordable nutritional food
- (e) comprehensive community controlled health services
- (f) culturally relevant and appropriate educational facilities and curriculum
- (g) development of an economic base that will lead to increased self-esteem and prosperity for the whole community with meaningful employment.
- (h) reinforcement of traditional cultural values

Unless this is formulated and implemented we will continue to see further deterioration in indigenous communities.

In a quote from a TANU conference in Tanzania in 1971 stated:

"Any action that gives people more control of their own affairs is an action for development, even if it does not offer them better health or more bread. Any action that reduces their say in determining their own affairs of running their own lives, is not development and retards them, even if the action brings them a little more bread".

In closing, the former Federal Minister of Health, Senator Graham Richardson, for the first time in his political career, visited the 4th world conditions of Aborigines in remote communities in his own country and cried and grandstanded to a national television

audience by promising a double commitment of resources and monies to alleviate this deplorable conditions. His presence in one particular community was enough to put in one water tap.

He then returns to Canberra and within a few weeks he resigns, leaving the other political parties to debate in the highest levels of government the need for more resources and monies. The

promises that he made were never delivered. The remote community that he visited received a tap. Graham Richardson received a life time pension.

Ladies and gentlemen, I put it to you that if governments want to be part of the solution, then God help indigenous people, if they are part of the problem.

WORKSHOP REPORTS

Thursday: Community and Economic Development

Group 1 - Sustainable Economic Development

1. The experience of practical and indigenous people should be incorporated in decision-making at higher levels.
2. New ways of communicating between regional people and policy makers should be expanded and developed.
3. Communities need help to respond to change.
4. Time should be allowed for local people to adapt to policy change.
5. Local Communities should be allowed more power in policy making.
6. Micro economic reform should be reviewed. Cost recovery has led to declining services. There is a need to take into account the full community cost of reducing services.
7. Awareness of urban people of the importance of rural communities should be increased.
8. "Community adjustment" policies and support are needed where industries have declined.

Group 2 - Social and Community Development

1. The barriers between government agencies should be broken down. Organisational structures need to respond to the real need for integration.
2. The role of local coordinators should be expanded
3. Forums for coordinating discussions between local groups should be created.
4. Community leaders should be trained to know how they can be heard by policy makers.
5. Existing strengths in rural communities should be built upon by empowering existing groups to influence change.
6. Communities should be encouraged to develop procedures and protocols for consultation.
7. Governments need to develop clear protocols on consultation.
8. The issue of consultation should be put on the agenda for the interdepartmental Regional Managers forum (or equivalent).

Group 3 - Social Planning and Welfare Service Provision

1. Resources, education etc. need to be provided to assist with the facilitation of social movements such as self-help groups with support from a broad range of professional groups.
2. The development of negotiation skills is a vital aspect of assisting the local community to communicate with government and non-government departments.
3. A major research project needs to be funded to document the flow of resources into and out of rural and remote communities as one initiative within a regional/rural development strategy.
4. Locally-based childcare services are necessary to allow women in rural and remote areas to participate in employment or other activities.
5. Use of chemical technologies in rural production must take account of health and social issues. Women must be a part of the debate around the use of such chemicals.
6. Women in rural and remote areas need greater access to appropriate further education.

7. Inequitable gender relations in rural and remote areas must be publicly challenged to allow women to achieve positions of power in rural society.
8. Local government, producer representative bodies and other public organisations based in rural and remote areas should include women and focus on issues affecting rural women.

Group 4 - Rural Restructuring

1. The principles of the 'Kelty Report' (Australia) with regard to rural and remote areas development, recognising the centrality of both social and economic development are endorsed.
2. Regions should be empowered to establish a program to provide financial assistance for the support of rural and remote organisations for economic and social development .
3. These regional organisations should:
 - (i) be responsible for regional strategic planning for economic and social development; and
 - (ii) recognise the importance of the tertiary education sector to regional development, as catalysts for information, research and training.
5. Integrated service delivery should be developed at the regional level.
6. Governments should join with communities in the development of a strategy which assists in the economic and social development of agriculture, small business and other enterprises in rural and remote areas.

Group 5 - Sustaining Rural Communities

1. Rural land trust finance corporations should be established in order to repopulate rural communities to support their cultures and restore owner occupation.
2. Ways should be explored to link economic, social, cultural and environmental development.
3. Existing rural areas should be repopulated.
4. Ways to increase community participation in policy making should be explored.
5. Community groups should invite government agencies to provide locally funded facilitators to achieve the solutions to locally identified community needs with local accountability.
6. Rural development finance should be ensured.
7. Government funding guidelines should be broadened.
8. Funding to support local needs should be provided in such a way as to be directly community controlled.

Group 6 - Consumer Affairs in Remote Areas

1. A code of banking practice should be enforced.
2. Disclosure of written terms should be in plain English.
3. Financial institutions should have a duty of care.
4. A wider use of voluntary bankruptcy should be encouraged.
5. In remote areas, there should be a network of consumer credit advice and debt counselling services.

Group 7 - Community Development: Indigenous Perspectives

This Workshop Report has been included in "Tuesday, Group 5".