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How respecting rights, respecting the evidence and respecting each other can make change happen.

Address to the
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Good morning ladies and gentlemen, brothers and sisters,

I acknowledge and pay respects to the traditional owners and custodians of the land on which we are meeting today.

Thank you for inviting me to speak at this 1st Biennial Australian Implementation Conference.

I want to talk today about making change happen for Australia’s First Nations, the Aboriginal and Torres Strait Islander peoples of this country.

I want to start with two examples, two stories if you will, about policy implementation and change in Aboriginal health.

I would then like to draw some lessons from these stories about what works and what doesn’t work when we’re talking about making positive change happen in our world.

I will identify three factors that are believe are key.

The first is respect for rights – positive change must be built upon the recognition of our rights as people and as First Nations.
The **second** is respect for the evidence – rights alone are not enough, they need to be combined with what we know works.

The **last** is respect for each other – we need to ‘Close the Gap’ in respect between Aboriginal and non-Aboriginal Australia, so that we are seen not just as a ‘problem’ that needs ‘solving’ but where our unique cultures, histories and abilities are recognised and welcomed.

I’d like to begin by giving my first example of policy and change.

It is a positive story, and let me say that positive stories are not always the easiest to tell.

The level of need in the Aboriginal world is vast, whether we’re talking about health or education or employment or dozen other areas.

We have a long way to go to achieve equity with the rest of Australia.

Given this, positive stories can sometimes feel like we’re letting ‘letting the side down’ so to speak.
Nevertheless, celebrating positive change is important

One such story comes from the Northern Territory, where the statistics are showing a continuing and significant decline in the death rate for Aboriginal people.

Much of this positive change results from increased funding for comprehensive primary health care built on a solid evidence-base – especially in areas such as maternal and child health and chronic disease management.

Reductions in alcohol consumption and petrol sniffing have also played a part.

Significantly, these improvements pre-date the Northern Territory Intervention and the COAG ‘Close the Gap’ campaigns.

Instead, the basis for these changes was laid down in the 1990s, with Aboriginal community-led campaigns for improved primary health care funding, and restrictions on alcohol availability and the introduction of Opal fuel to prevent petrol sniffing.
These community-led campaigns were supported by an evidence base that told us that approaches that prioritised not only treatment for the sick, but also prevention approaches and community engagement and control, would deliver results.

I’m glad to say that those who campaigned for that change – often against some fairly strong opposition – have been proved right.

I also credit the Federal Government of the time – it was the Keating Government in 1995 – for listening to the Aboriginal health sector, for listening to the evidence, and then having the courage to make some hard decisions that enabled the increase in health funding that has since driven these positive changes.

So ... to my second story or example.

This is also from the Northern Territory

As you will no doubt know, an election was held in August this year, which saw the Country Liberal Party elected and the Labor Party – in power since 2001 – consigned to Opposition.
The result of the election was not such a surprise – but how it happened was.

Historically, Aboriginal people in the bush have overwhelmingly supported the Labor Party.

This time, however, the Labor Party lost power because those people deserted them: the swing to the CLP was over 15% in the bush where the majority of voters are Aboriginal.

This result means that – for the first time – the vote of Aboriginal people has decided an Australian election.

The interesting question is why this happened.

There is no definitive answer to this question of course.

But it appears that the reasons for the disenchantment with the Government were largely related to policy changes which were being created and implemented without any meaningful engagement with Aboriginal communities (and in some cases against their wishes).

Three key policies have been identified by commentators since the election.
First, **local government changes** which saw the creation of ‘super-shires’ which were widely regarded by Aboriginal people in the bush as having undermined local autonomy, as having been introduced without proper consideration of their wishes, and which subsequently suffered significant problems in their implementation.

Second, **the reduction in support to remote area outstations**.

This decision was seen by many Aboriginal people as undermining their right to live on their traditional lands, as well as being in contradiction of the evidence which shows that outstation living is healthier than that in major centres.

Last, **the Intervention**.

This is complex, and I shall have more to say about it in a moment.

But some commentators argue that the local Labor Party was punished for the Federal policies of the Intervention, which included deeply unpopular moves to quarantine welfare payments and suspend the *1975 Racial Discrimination Act*. 
Others disagree that the Intervention (or ‘Stronger Futures as its ten-year extension is now called) was a factor.

But in my mind, it has at least contributed to a general sense of resentment amongst Aboriginal people in the bush about ‘top-down’ policies implemented without local consultation or input.

[pause]

So, what can these two stories – the improvement in health status resulting from increased primary health care and the defeat of a government apparently largely due to policies predominantly affecting Aboriginal people – tell us?

What are the lessons we could draw about the implementation of public policy in a way that supports positive, sustainable change?

I want to identify three key factors to consider in making change happen and making sure it is durable.

Each of the stories I have told illustrates some of these principles.
The principles are: respect for our rights; respect for the evidence; and respect for each other.

I want to suggest that these are inter-related and that making change happen requires us to put in the hard work of understanding their complexity and developing approaches that take account of all of them.

The first key element is a respect for our rights.

We need approaches that are based on the recognition of our human rights, as citizens of Australia and as First Nations peoples.

These rights provide the common moral and legal underpinnings of government action – by basing policy development on human rights standards, governments ensure that the solutions they adopt will be open, fair and just.

But they also provide a basis for creating sustainable solutions to complex challenges.

We cannot allow the debate to be conducted on the level of ‘human rights’ versus ‘practical solutions’ as if these were opposing principles.
They are not.

For example, the Australian Human Rights Commission\(^1\) has defined a commitment to ‘best-practice’ human rights as being consistent with international human rights standards including:

- engagement and participation with Indigenous communities;
- capacity building and community development;
- the support for sound Indigenous governance; and
- the fostering and recognition of Indigenous leadership.

These are deeply practical principles and it is hard to see the development or implementation or policy that does not take account of these delivering real change.

They are the basis for building the collaboration and commitment of communities, without which solutions will not last.

I would identify one other reason why they are important: our history.

Many of us remember when our rights and the rights of our families were openly and routinely violated.

The taking of traditional lands by force, the suppression of culture and language, the removal of children from their families ... these things are still remembered.

We cannot go back to the time when our families could be told where to go, how to live and what to spend their money on, back to a time when the state and its institutions had a right to be present, as it were, at the kitchen table.

I believe that over the long term, Aboriginal people, even those with the most goodwill, won’t cooperate with approaches that embody the denial of hard won rights.

Making those rights a central part of the development and implementation of policy is fundamental to making change happen.

[pause]

The second principle for making change happen is a respect for the evidence.
The positive changes to Aboriginal health I noted – as well being built upon the recognition of our rights – recognised the importance of the evidence of what works to change people’s lives and health.

We need to ensure that what we do is based on what we know works, and that ‘evidence-based policy’ is a reality, and not just an empty phrase.

Unfortunately, when it comes to policy on Aboriginal health in Australia, a respect for evidence is not always apparent.

Instead, all sorts of other factors seem to take their place ahead of the evidence when it comes to making the ‘big’ decisions on Aboriginal health and well-being.

Very often, these factors remain hidden.

Let me take, as an example, the most profound change in Government policy designed to affect the health of Aboriginal communities in recent decades – the Northern Territory Intervention.
As many of you will know, in 2006 I was asked by the Northern Territory Government to carry out – along with Rex Wild QC – an inquiry into child sexual abuse and neglect in the Territory.

The recommendations we made in our report – *Little Children Are Sacred* – was based on the published evidence about what works to protect and nurture children, and upon the experience and willingness of Aboriginal communities to address the issue of neglect and abuse.

However, the 2007 announcement by the then Prime Minister and his Federal Minister for Indigenous Affairs of the ‘emergency intervention’ into the Northern Territory ignored much of this.

Of course, the Intervention had many elements.

Not all of these were wide of the mark: there were moves to restrict alcohol availability, enforce school attendance, increase policing, and ban pornography.

However, many elements of the Intervention were deeply problematic.
They included compulsory health checks of Aboriginal children to check for abuse, blanket quarantining of welfare payments to all Aboriginal people, the compulsory acquisition of Aboriginal townships, and the scrapping of the permit system that allowed Aboriginal people control over access to their land.

These proposals were accompanied by a ‘get tough, quick fix’ rhetoric that made it abundantly clear where the problem lay: it lay with us, it was Aboriginal people who were to blame for the conditions in which we lived.

So, where was the evidence-base for these proposal, this radical re-shaping of policy, for this return to a paternalistic approach to problem-solving?

Simply: it was absent.

There was no attempt to justify the policy by reference to evidence.

There was no recognition of the substantial evidence which shows that successful approaches are based on empowerment and inclusion, rather than imposed solutions.
There was no recognition of the positive changes already underway, and which had been set in motion by community controlled health sector’s campaign for properly funded comprehensive primary health care.

And there was no recognition of the work of the many non-Aboriginal researchers and health professionals who had worked for many years alongside our communities.

So, if it was not the evidence, what did the former Government base its policy on?

I don’t think we’ll ever fully understand the process by which the Government decided on the Intervention.

But there has been plenty of speculation.

For some, the Intervention was a cynical political exercise to gain narrow political advantage in an election year.

Others have seen the Intervention as an ideologically driven attack on Aboriginal rights.
Of course, the government of the day described it as a genuine attempt to address the abuse and neglect of Aboriginal children.

But whatever the motivations behind the Intervention, one thing I know for sure: it was not undertaken with sole focus on the welfare of Aboriginal children.

And this seems to me to be a continuing theme in the history of policy-making and implementation relating to Aboriginal peoples: that action on Aboriginal disadvantage continually gets caught up in other, contradictory agendas.

This has been a huge barrier to genuine progress.

Because, you would think that if the nation-state was really serious about addressing the disadvantage so many Aboriginal communities suffer, there would be a rational process.

We’d sit down and look at what the problems were, look at what has already been tried and what we know works, look at the kind of principles that we know should underpin action – and then, a make a commitment to action and of resources.
Yet as far as we know, the whole Intervention was almost literally designed on the back of an envelope, over two or three days, in some offices in Canberra, by people who took little account of the evidence, and had no understanding of the historical realities of Aboriginal life.

Following their election victory a few months after the announcement of the Intervention, the Federal Labor Government withdrew some of the more controversial measures.

It softened the rhetoric.

It has now, belatedly, reinstated the operation of the *Racial Discrimination Act*.

But much of the thinking behind the Intervention remain in place.

Explicitly or implicitly, this thinking rejects self-determination as a ‘failed policy’.

It approaches us as the passive recipients of non-Aboriginal “help”, rather than as having anything valuable to offer or indeed of having achieved anything in the past.
This has left many Aboriginal people marginalized from the decision-making processes in their own communities.

It adds to the sense of disempowerment and stress that many already feel.

[pause]

Not all policy-making is as apparently cynical and haphazard as the Intervention.

Much is well-intentioned.

But there is often a ‘wilful ignorance’ as it has recently described by Professor Judith Dwyer\(^2\), where the system appears perpetually locked into a ‘business as usual’ approach even when we all know that ‘business as usual’ is not going to deliver the change that we need.

The making of policy and particularly its implementation is continually undermined by a lack of engagement with us and our rights on the one hand, and the evidence on the other.

Making real change means working through the complexities of these two principles.

There can be no easy, dogmatic assertion of one of these over the other: to say that our rights are more important than the evidence of what works, or to say ‘the evidence’ is more important than our rights.

The solutions that last, that really make a difference in the long-term, are those which recognise both these principles.

And we should recognise and celebrate those people and organisations who develop such solutions – for example, the Aboriginal health services who campaigned for better models of primary health care funding in the 1990s.

In a different context, the Lowitja Institute also provides an important model.

It has a commitment to Aboriginal and Torres Strait Islander health research that ensures that we have a strong voice in all its activities, and that research knowledge is translated into evidence-based practice and policy – key processes for making change happen.
The two principles I have outlined so far – a respect for rights and a respect for the evidence – are complex enough.

But to them I would add another, even more fundamental principle for making change happen: a respect for each other.

I don’t mean this in the sense of an individual commitment to respectful dealings with other people we know.

Instead, I am talking about a the need for a deeper re-setting of the relationship between Aboriginal and non-Aboriginal Australia, and the establishment of a more equal, respectful relationship between us.

An equal, respectful relationship between us is the basis open dialogue, for creativity, and for the development of the kind of solutions we need to see to make real, lasting change.

There are a couple of issues that I think we need to address in order to move towards a more respectful relationship.

The first is getting over the idea that Aboriginal experience and ideas don’t count.
Just as our peoples’ occupation of the lands of Australia was not recognised for over two hundred years until the Mabo decision in 1992, it seems that our experience is a kind of ‘terra nullius’.

Because the non-Aboriginal system can’t see it, it isn’t there.

The development of ‘super-shires’, the concentration of funding in ‘growth towns’ rather than outstations – these things made sense to a non-Aboriginal administration.

But they made no sense at the level of Aboriginal people’s local, lived experience.

But no one really listed to that experience.

Result: another failed policy.

The second issue I think we need to address if we want a more respectful relationship is the negative stereotypes about what it means to be an Aboriginal person.

We have to challenge the idea that an Aboriginal person is someone who is undisciplined, violent, “backward”, uneducated.
“Uncivilised”, drunk and dirty, etc.

A victim.

We have to challenge the idea that if you’re not those things then you’re not a “real” Aboriginal person.

These stereotypes which seemed to be on the way out, have re-emerged powerfully in recent times.

This is a challenge for all of us – Aboriginal and non-Aboriginal – because the power of some of these stereotypes is that they get taken up and believed in by Aboriginal people too.

Recently, we have seen a new generation of highly educated Aboriginal and Torres Strait Islander leaders under attack from both Aboriginal people and non-Aboriginal people for not being ‘real’ because of their education, or their confidence, or their background.

But if we want to build that respectful relationship, we must reject such narrow characterisations of what it means to be an Aboriginal person.
So, there is this deeper level which we need to address if we are serious about wanting to ‘close the gap’.

We need to realise that ‘closing the gap’ should not just be about more houses, better education, and proper health services.

It should not even just be about gaining equality in life expectancy between Aboriginal and non-Aboriginal Australia.

We know these things are important.

But there is a subtle but powerful gap in respect, a gap in the dialogue between us, and that is fundamental.

There is no straightforward way of closing that gap.

However, one route is through the recognition of Australia’s First Nations in the Constitution.

The development of a referendum to make the necessary changes to the Constitution has recently been delayed due to fears that it might fail unless more work is done to convince Australians at large of its necessity.
Although disappointing, the delay is widely seen as being necessary.

In the meantime, we should take it as an opportunity to really open up the debate about our peoples and place within this nation.

Marcia Langton’s recent paper at the Melbourne Writer’s Festival is a key contribution to that debate\(^3\).

In the end, when it does come (as I am sure it must) a proper recognition of Aboriginal and Torres Strait Islander peoples in the Constitution could be a key step to closing the gap in respect that continue to divide this country.

[pause]

In conclusion, then, I started with two stories, two examples, of policy and implementation pathways.

Some of these paths have led to positive change, change that is real and lasting.

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The pathway began by Aboriginal health services in the 1990s, which led with Government support to better health funding is such a pathway.

Such paths are not necessarily easy to travel – they can be frustrating, exhausting, and complex.

Amongst all this, it can be difficult to stop, take a breath and celebrate the successes.

But there are other pathways which have been dead-ends – failed policies, which lead to no real change and which end up being abandoned.

Significantly it is those policies which were developed without respect for our rights, without respect for the evidence, and without respect for Aboriginal experience, which have failed.

The ones which have grown, and delivered real change, are those which have respected our rights, the evidence, and the Aboriginal experience.
And it is these three principles that we must build into policy-making and implementation processes if we want to make real change that lasts for the health of Australia’s First Nations and, indeed, all its peoples.

Thank you