I was very pleased, in late February to again welcome Minister for Health Ms Meegan Fitzharris and Minister for Community Services Ms Rachel Stephen-Smith to Winnunga AHCS. I am genuinely grateful for the interest which both Ministers are showing in Winnunga AHCS and the Aboriginal and Torres Strait Islander community.

The primary purpose of the meeting was to update the Ministers on initial concept and design work which Winnunga AHCS has commissioned Judd Consulting to undertake in respect of the proposed new health and community services facility. A number of issues were covered during the discussion on plans for the new building. These included issues such as timing, project management, funding model, lease arrangements, ownership, design, construction and parking.

This is an incredibly exciting and important project for Winnunga AHCS and all of its clients and I am grateful for the collaborative approach which Minister Fitzharris, in particular, has adopted.

At the meeting with the Ministers we also discussed the plan announced recently by the Government to establish an Aboriginal and Torres Strait Islander Centre of Excellence in Health at the Canberra Hospital. I expressed some surprise that neither the reason nor rationale for the creation of the Centre of Excellence in Aboriginal and Torres Strait Islander Health had been conveyed to either me or anyone at Winnunga AHCS - the first choice for health care for the majority of Canberra’s Aboriginal community. The Minister advised that while she had understood that Winnunga AHCS had been consulted about the proposal she was most concerned that was not the case. I await with interest an explanation of what it is that the proposed Centre will do.

I also discussed with the Ministers my concerns about the continuing delay in finalising the tender process for the return of Boomanulla Oval to Aboriginal control and management.

The meeting with Ms Fitzharris and Ms Stephen-Smith was open and constructive and I look forward to their continued interest in, and support of the local Aboriginal and Torres Strait Islander community.
Crisis in Indigenous Offending and Incarceration Rates in the ACT

The latest Australian Bureau of Statistics (ABS) report on crime rates in Australia shows that the ACT continues to lead Australia in the arrest and imprisonment of Aboriginal people.

That Canberra, the national capital of Australia and the most prosperous city in the country is annually identified as the jurisdiction with among the highest arrest and imprisonment rates of Aboriginal people is an indictment of the Government and a serious reflection on its commitment to reconciliation and equality for Aboriginal peoples.

The ABS reports that the overall ACT offender rate is 784 offenders per 100,000 people and falling.

The ACT Indigenous specific offender rate is however 5,326 per 100,000 people and rising.

The gap between Indigenous and non-Indigenous offenders is increasing as ACT Police increasingly arrest more Aboriginal peoples and less non-Aboriginal people. The Aboriginal community while heartened by the categorical denial of the ACT Chief Police Officer that the increase in the number of Aboriginal peoples being arrested could possibly have anything to do with their race, would nevertheless welcome a believable contrary explanation.

It is also well past time that the ACT Government engaged seriously with the Aboriginal community in seeking to address the issue of Aboriginal offending, arrest rates and incarceration. Suggestions which Winnunga AHCS has made repeatedly which have been ignored include:

- A full and independent inquiry into poverty and the relationship between poverty and offending;
- The establishment of an independent and appropriately resourced Aboriginal Justice Centre;
Crisis in Indigenous Offending and Incarceration Rates in the ACT (cont’d)

- The establishment of an Aboriginal men’s hostel to support Aboriginal men exiting prison or at risk of offending;
- An Indigenous specific residential drug and alcohol facility and service;
- The engagement of an Aboriginal community controlled organisation to manage the throughcare of Aboriginal detainees exiting AMC;
- The engagement of and Aboriginal community controlled organisation to manage Aboriginal children and young people in the care and protection system.
- The development of an overarching Indigenous policy to be implemented by an appropriately funded Indigenous Authority with Indigenous leadership, located in a central Agency of the ACT Government.

Fact: ACT Corrective Services’ vision is:

To be an organisation that contributes to a safe, strong and cohesive community through the delivery of custodial and community corrections services and programs that are recognised for their level of excellence (source: http://www.cs.act.gov.au/act_corrective_services).
Julie Tongs and Caroline Hughes
Inducted in the ACT Women’s Honour Roll

The ACT Minister for Women, Ms Yvette Berry, announced on International Women’s Day that Ms Julie Tongs OAM and Ms Caroline Hughes, both proud Aboriginal women and acknowledged leaders in the Canberra community had been inducted in the ACT Women’s Honour Roll. Citations relating to this significant recognition were as follows:

Caroline Hughes
Mrs Hughes is a proud Ngunnawal woman who has made a significant contribution to women and girls in the field of education for over 30 years. As Director of CIT’s Yurauna Centre she has made an outstanding contribution to both Indigenous and non-Indigenous communities as a practitioner, manager and leader of the educational programs in community development and client support services. As Director at Yurauna she has increased the enrolments at the Centre and works with Indigenous women to help them gain qualifications to enter the workforce.

Julie Tongs OAM
Ms Tongs has been the Chief Executive Officer of Winnunga Nimmityjah Aboriginal Health and Community Services for over 20 years. She has been instrumental in growing the organisation from 10 to 70 staff servicing a client base of over 7000 clients serving 75% of the Canberra Aboriginal and Torres Strait Islander community. She has prioritised the specific and special health needs of women and children in service delivery. She is a strong advocate and has provided leadership for Aboriginal people in the Community.

The Aboriginal community of Canberra and the region applaud this timely and well deserved recognition of Caroline and Julie, two outstanding Aboriginal women who have worked tirelessly, selflessly and for many decades on behalf of Aboriginal and Torres Strait Islander people in Canberra and the broader capital region.

The ACT Women’s Awards are framed as recognition of those women in our community who have made an outstanding contribution to the lives of women and girls in the ACT. It is pertinent that any recognition of an Aboriginal woman for such an award recognise that their primary focus will almost certainly have been to address the incidents of the disadvantage and racial discrimination which Aboriginal men and women have endured in Australia for over 200 years. While we universally applaud all who work to address gender imbalance in our society, we should reserve special applause for Aboriginal leaders such as Caroline and Julie who deal daily with the consequences of racial discrimination on top of gender bias and sexual discrimination.

Fact: The ACT Women’s Honour Roll acknowledges and celebrates outstanding achievements of women in Canberra.
'Out of control': Rates of Indigenous kids in ACT government care jump again

Canberra Times, 9 March 2018, Sherryn Groch

Fewer than three per cent of children in Canberra are indigenous but they make up about a quarter of kids in the child protection system. That's the alarming picture painted by the latest report from the Australian Institute of Health and Welfare, as Canberra once again records the nation's second highest rate of indigenous children in state care.

Chief executive of Canberra Winnunga Aboriginal Health Service Julie Tongs said the crisis was now "out of control", a year after 2016 figures sparked community outrage and a government review.

"[It feels like] we've got more kids in out of home care now than what we did during the Stolen Generation," Ms Tongs said. "Nothing's been done. It's outrageous."

Last year, the total number of ACT kids in care jumped to 803, up from 748 in the 2016 financial year. Over the past five years, that number has climbed by more than 40 per cent, though in 2017 the amount of substantiated child abuse reports as well as the overall number of kids receiving protection services fell for the first time since 2014.

Indigenous children continue to be over-represented in those numbers. In 2017, the ACT had the nation's highest rate of indigenous child care and protection reports as well as the second-highest rate of indigenous children on protection orders. Canberra's overall number of children in the system is still a little below the national average.

"It's distressing for our community because Canberra is such a wealthy place," Ms Tongs said. "It seems like since the minister announced the review there's more kids in care."

She said it was disappointing to see the chair of the government's review into high indigenous rates had only recently been appointed this year, more than six months after it was announced.

ACT Minister for Community Services and Aboriginal Affairs Rachel Stephen-Smith said
"Out of control": Rates of Indigenous kids in ACT government care jump again (cont’d)

The over-representation of Indigenous kids in ACT care was "unacceptable", but was a "challenge faced by all jurisdictions".

Following questions from Fairfax Media on Thursday, the government announced that the review, now known as 'Our Booris, Our Way' would be led by a former public servant, Barbara Causon. It is understood the process had initially been slowed down to set up a partnership and "co-design" with a number of Aboriginal organisations, who will oversee the review. It is expected to run until September 2019 but will deliver a preliminary report later this year.

Ms Stephen Smith said the review's findings would be communicated through its life "so that any changes that do not need to await the final report can be implemented earlier".

Ms Causon described the review as an important opportunity for Aboriginal and Torres Strait Islander peoples to "have a real say in how to improve outcomes" and address the "alarming number of our kids involved in the child protection system".

Louise York, a spokeswoman for AIHW, said the rising numbers in the capital mirrored similar trends seen around Australia. "The national picture is that the number of children known to child protection is going up, but indigenous children are having higher rates of contact with services and those rates are increasing at a much faster rate," Ms York said.

"All of the states are trying to look at intervening earlier and trying to improve their services and the safety of children but the general direction of access to the services is up."

It was difficult to determine if the surge in numbers was driven by an increase in abuse or increased awareness about child protection and issues such as domestic violence, she said, but was likely a combination of the two.

Almost half of all kids in care in the capital were placed with a kinship carer, usually a grandparent, while another 35 per cent were in foster care, and about 5 per cent in group homes or residential care.

In 2015, the ACT government threw an extra $16 million behind the roll out of the territory's new out-of-home care strategy, which places more focus on early intervention services to limit the number of children entering care.

While it was "still too early" to say if the strategy was working, Ms Stephen-Smith said the 2017 report showed lower rates of children entering care than in 2016.

Ms Tongs backed efforts "to keep families together" but said all the service contracts went to large organisations, leaving no room for Aboriginal providers. "They're just throwing money at mainstream services and it doesn't work for Aboriginal clients," she said.

The government is currently undertaking a review of the new out of home care strategy.

Fact: Michael De'Ath is the current Director General of the ACT Community Services Directorate. He was appointed to this role in September 2016.
Road to Recovery

It’s not always easy to ask for help or to admit there might be a problem in your life, especially when it involves alcohol or drugs misuse, but for a number of members of our community – that’s exactly what they’ve done. Determined to overcome substance misuse, they’ve taken positive action by registering for Winnunga AHCS’ Road to Recovery program.

Maybe you or your friend or family member can do the same?

So, what is the Road to Recovery program? It’s a six-week alcohol and drug program, that’s delivered through a client centred and culturally safe manner for both individuals and families needing support around their alcohol and other drug issues. Each week, a different topic/module is covered which include: the program introduction, the effects of alcohol, yarning about drugs and alcohol, the effects on the body, healthy brain and relapse prevention, strength based and motivational counselling.

Clients receive information on the harms and impacts of substance misuse as well as discuss the underpinning issues, which often lead to ‘self-medicating’.

Winnunga AHCS’ Drug and Alcohol workers deliver the Road to Recovery program and provide invaluable support to clients. They work closely with participants exploring situations where people may drink or use drugs first without thinking about the impacts and consequences, and looking at what changes could be made for achieving more positive outcomes.

One of the workers is Craig Williams, a long-time Queanbeyan local, from Narrandera in the New South Wales Riverina area. The Wiradjuri man currently has clients who have chosen to do the program together as a family. Craig said the program allows great flexibility to participants. ‘It’s up to the client, what they feel comfortable with, if they want to do it on their own, with someone else or in a group’ he said. ‘Most of the time we get the client to come to Winnunga but if they have any problems getting here, we’ll go to them, like we have on occasions’.

‘There has been times when we’ve done the week’s module at a client’s house but most of the time, the clients come here. And if they can’t get here, we can arrange transport to get them here’ Craig explained.
The Winnunga Drug and Alcohol workers are aware that a client’s individual circumstances may affect them from completing the program, which is why a supportive and understanding environment is important.

‘Clients come in once a week to do the six week program but there’s flexibility if a client is unable to complete it within the six weeks. Winnunga will work with the client to support them complete the course. It’s all about making people feel comfortable enough to finish the program’ he explained.

Another one of Winnunga’s Drug and Alcohol workers is long-term ACT resident and Noongar man Sid Eades, who hails from the small country town of Cranbrook in Western Australia’s great southern region. Sid works alongside Mr Williams and the two other Drug and Alcohol workers, Kylee Shea and Lisa Barnes.

Sid said it’s the Team’s understanding of the issues of our mob that leads to the programs’ positive outcomes. ‘We are Aboriginal staff, we can assist with overcoming barriers that may exist if clients went to a non-Indigenous worker or agency. The fact of the matter is that us workers, we can relate to our clients because of our own backgrounds and experiences’ Sid explained.

‘Coming from each of our background, in some shape or form, we’ve had family impacted by alcohol and drugs. So we have an understanding of the culture, the importance of respecting the diversity of our Aboriginal and Torres Strait Islander community and by having us workers, we have that respect. Its important clients feel comfortable coming to Winnunga to us, and that they’re comfortable talking to us about their issues, their circumstances. People feel comfortable yarning with Aboriginal workers’ he added.

A major point the workers wanted to get across to clients (and prospective clients) is how seriously they take the issues of confidentiality and privacy. ‘Confidentiality is a big thing. What people talk to us about is really important. That’s the first thing we tell clients when they come. We tell them it’s between the worker and the client. We don’t disclose to any other agencies unless the client wants us to’ Sid stressed.

‘If clients went into a mainstream organisation, they could be stereotyped, judged, and this could be a deterrent for our people’ Sid said.

The Road to Recovery program is a voluntary program. Clients can refer themselves or be referred by someone else. ‘Some clients have taken part in other Winnunga programs such as the Mums and Bubs group, Anxiety group, Men’s and Women’s groups, Healthy Cooking group. Our clients see us at these groups and this provides an
Road to Recovery (cont’d)

opportunity for referrals, from building the relationships’ Sid explained.

The Road to Recovery program has been running at Winnunga AHCS for a number of years. Not only does it assist participants to overcome their substance issues but also it may assist in other aspects of their lives.

‘If people are in the criminal system or on parole, this program can be used as evidence for the courts to demonstrate they are working on their substance misuse matters. The courts can work with Winnunga and at times we have advocated on behalf of clients’ Sid explained.

‘Clients get a certificate of completion that shows they’ve completed the six weeks or six modules, whatever option they chose to undertake, there’s that flexibility’ he added.

If you or someone you know would like to know more about the Road to Recovery program, Craig had this advice.

‘If there’s anyone that’s got an alcohol or drug issue (or they think they have), you just need to come into Winnunga and ask for a Drug and Alcohol worker and we can come out and have a yarn and let you know about this program. There’s no pressure, it’s up to the individual if they want to get involved. It’s voluntary. People can even make a phone call to Winnunga, if they’re not feeling comfortable coming in and can talk to someone over the phone. Just ask for us and we can organise a time’ he said.

*If you or someone you know would like to take part in the Road to Recovery Program or would like further information, drop into Winnunga at 63 Boolimba Crescent, Narrabundah, or call us on 6284 6222 and ask to speak to a Drug and Alcohol worker.*

Fact: Alcohol use among Aboriginal and Torres Strait Islander people needs to be understood within the social and historical context of colonisation, dispossession of land and culture, and economic exclusion (source: http://www.aodknowledgecentre.net.au/aodkc/alcohol/reviews/alcohol-review).
Come Join us to Celebrate Winnunga’s 30th Birthday

Saturday 12 May 2018, 10am to 2pm
At 63 Boolimba Cres, Narrabundah ACT 2604

There will be food and entertainment for all ages.

As we will be dedicating significant time and resources to this important community event, Winnunga will not be hosting the Annual Sorry Day Bridge Walk this year.
Almost 30 per cent of AMC Inmates Report Heroin Use While in Canberra's Adult Jail

Canberra Times, 9 March 2018, Daniel Burdon

Almost 30 per cent of inmates at the Alexander Maconochie Centre reported using heroin inside the prison in 2016, amid an ongoing culture of detainee drug-seeking and seeming easy access to the centre’s methadone program.

The findings are part of an investigation into the prison's opioid replacement therapy program by ACT Health Services Commissioner Karen Toohey, sparked by Phillip Moss’ independent inquiry into the death in custody of Steven Freeman in 2016.

It is one of a series of Legislative Assembly committee inquiries, Auditor-General investigations and reports by independent consultants that raised similar concerns about the prison's methadone program over several years.

The commissioner's investigation did not look at the specific circumstances surrounding Mr Freeman's death, or the death in custody of Mark O'Connor in the prison last year, both of which are currently the subject of coronial inquests.

Ms Toohey's inquiry found that while "significant improvements" had been made to the opioid replacement therapy program in the AMC since Mr Freeman's death, more needed to be done and some existing policies were not being fully enforced. It also found inmates and staff maintained the view there was a "culture of drug seeking" among inmates and that it was relatively easy for some to get on the methadone program, which some were doing for "recreation".

The commissioner made 16 key recommendations to improve the rigour and consistency of decision-making on induction and assessment to reduce the chances of inmates been prescribed methadone when not genuinely opioid-addicted.

Fact: The Royal Commission into Aboriginal Deaths in Custody, was a Royal Commission appointed by the Australian Government to study and report upon the underlying social, cultural and legal issues behind the deaths in custody of Aboriginal people and Torres Strait Islanders.
"Further action is needed to minimise risks of diversion of methadone, and to ensuring that the particular needs of Aboriginal and Torres Strait Islander detainees are met in the provision of health services at the AMC," she said. The recommendations also included better assessment of inmates before putting them on methadone, more staff training and strengthening efforts to prevent diversion of drugs to non-prescribed inmates.

The investigation reviewed clinical files for 20 inmates inducted on the program from April to October last year, none of which had any evidence urine testing was undertaken to corroborate inmates' claims of opioid-dependency. It also found little evidence justice health workers tried to corroborate such claims with inmates' community general practitioners or the Winnunga Nimmityjah Aboriginal Health Service. The commissioner also found no evidence of any individual case plans for indigenous inmates, as required by the ACT's opioid treatment guidelines, or cultural supports being sought for those detainees.

It also found that despite new electronic iris-scanning "idose" machines operating at the prison since last August - which would make for safer dosing practices - one inmate overdosed on the drug as recently as February this year. That inmate had sought out a dose of methadone outside of the usual dosing period, and while the machine was off, staff instead gave the inmate a manual dosing, leading to an overdose which the inmate later recovered from.

The commissioner also recommended improving Throughcare practices for opioid-dependant inmates leaving the prison, ensure all indigenous inmates are offered annual health check ups and that the justice directorate work harder to progress a needle syringe program at the prison.

The report also cited the latest ACT Health Detainee Health and Wellbeing Survey, which was completed in 2016 but not publicly released, which found 29 per cent of inmates at the prison had used heroin while in the prison. That survey also found 55 per cent of detainees reported having ever used heroin, with 35 per cent reporting injecting illicit drugs once a day or more in the four weeks prior to incarceration.

The survey, the commissioner's report shows, also found 19 per cent of detainees had used other opiates while in prison and up 19 per cent reported injecting drugs in the AMC.

Ms Toohey’s report also cited the high rate of inmates on the official methadone program, at 30 per cent compared to the national rate of five per cent, though comparisons are difficult given varied practices from one jurisdiction to another.

The report also showed existing policies for preventing of 'diversion' - when a prescribed inmate passes the drug on to another - were not being followed rigorously, including allowing inmates to take a dose while wearing coverings such as hoods or items that could have obscured containers. Ms Toohey recommended the existing policy be enforced and staff be provided more training to ensure it was adhered to.

The commissioner will be working with justice health and corrective services to ensure changes implemented are maintained and continue to improve health services at the AMC.
Concern That Continual Erosion of Civil Liberties Disproportionately Impacts Aboriginal Community

While it was pleasing to see the ACT Bar Association and the ACT Law Society oppose new ‘warrantless’ powers of entry being granted to ACT police, their concerns were nevertheless ignored by the Legislative Assembly.

The new powers permit ACT police to enter a person’s home at any time without a warrant. The Bar and the Law Society said the most concerning aspect of the new law is that the laws were so broad the police can use the powers to investigate relatively ‘trivial’ crimes such as shoplifting or bike theft.

The new laws were purportedly enacted in response to difficulties that ACT Policing is apparently having in dealing with motor cycle gangs. It seems that the members of so called outlaw motor bike gangs have the embarrassing habit of out manoeuvring the ACT police despite its much vaunted intelligence led policing capability. The response of politicians in such circumstances is, unfortunately, a knee jerk law and order response designed as much to give the appearance of doing something irrespective of whether it will actually work and irrespective of the unintended consequences.

The consequences are almost invariably a diminution of the rule of law and civil liberties and result in the targeting of people who have no relationship to the group of people initially identified as the target of the new law.

The experience in NSW for example, following the introduction of non-consorting laws aimed at outlaw motor cycle gangs, is that more Aboriginal people almost none of whom have ever ridden a motor bike in their lives, have been served with non-consorting orders than members of motor cycle gangs.

The view within the ACT Aboriginal community is that the odds are London to a brick, on that more Aboriginal homes will be invaded by ACT police under the new warrantless powers of entry, than the homes of bikies.

Fact: Civil liberties or personal freedoms are personal guarantees and freedoms that the government cannot abridge, either by law or by judicial interpretation, without due process.
Family Violence Demands Greater Focus

The Australian Institute for Health and Welfare (AIHW) recently released the report: Family, domestic and sexual violence in Australia 2018. The report provides a detailed account of a myriad of data about violence in Australian families including among Aboriginal and Torres Strait Islanders.

The report’s key findings in relation to the Aboriginal community are:
* Family violence occurs at higher rates in Aboriginal and Torres Strait Islander communities than in the general population.
* Indigenous Australians have increased risk factors for family violence, such as social stressors like poor housing and overcrowding, financial difficulties and unemployment.
* 1 in 7 (14%) Indigenous women had experienced physical violence in the previous year. Of these, about 1 in 4 (28%) reported their most recent incident was perpetrated by a cohabiting partner.
* Indigenous women were 32 times, and Indigenous men 23 times, more likely to be hospitalised due to family violence as non-Indigenous women and men.
* 2 in 5 Indigenous homicide victims were killed by a current or previous partner compared with 1 in 5 non-Indigenous homicide victims.
* Indigenous children were about 7 times more likely as non-Indigenous children to be the subject of child abuse or neglect.

The AIHW acknowledges the high rates of violence in Aboriginal and Torres Strait Islander communities must ‘be understood as both a cause and effect of social disadvantage and intergenerational trauma.’ The report notes ‘The removal of their land, and cultural dispossession, over the past 200 years have resulted in particular social, economic, physical, psychological and emotional problems for Indigenous Australians. This is reflected in high levels of violence in their communities.’

While the AIHW report is explicit in reporting the vastly higher rates of family violence in Indigenous communities, it notes research which shows that up to 90% of violence against Indigenous women is probably not reported.

There is only minimal ACT specific data in the AIHW report but it does repeat the ABS crime data about those committing offences related to family violence in the ACT. The data reveals that from a population base of 1.7%, Indigenous offenders comprised 11% of all offenders charged with an offence related to family violence. This translates into an Indigenous offender rate of 1,189 offenders per 100,000 people compared to a non-Indigenous offender rate of 165 per 100,000 people.

Fact: Domestic and family violence occurs when someone who has a close personal relationship with you makes you feel afraid, powerless or unsafe. It can be physical, emotional and psychological (source: https://www.lifeline.org.au/get-help/topics/domestic-family-violence).
Gugan Gulwan
SCHOOL HOLIDAY PROGRAM

Gugan Gulwan School Holiday Program April 2018 is now open for applications!!

Week 1: 16th - 20th April for 8-10 years
Week 2: 23rd - 27th April for 10-14 years
Please note program will not operate on 25th April due to public holiday

School Holiday Program fee is $5.00 per day

APPLICATIONS CLOSE 21st March

For application or program information please contact Gugan Gulwan and ask to speak to Brendan or Amber on 6296 8900 or email:
ggyacadmin@gugan-gulwan.com.au
Name: Thomas Williams

Position: Medical Reception

Who’s your mob?
Queanbeyan, Condo and Wellington

Where’s your country?
Wiradjuri and Ngunnawal

Who is your favourite singer/band?
Chris Brown, Drake

What is your favourite song?
‘This is me’

What do you do on the weekends?
Play footy

What is your favourite food?
Pasta

What do you like most about working at Winnunga?
Everyone nice

My favourite pet?
I don’t have a favourite

What is your pet hate?
Hate being unorganised