

# LEGISLATIVE ASSEMBLY OF THE NORTHERN TERRITORY 11th Assembly Select Committee on Youth Suicides in the NT

# Public Forum Transcript

10.00 am, Wednesday, 9 November 2011 Barkly Education Office, Tennant Creek

Members:	Ms Marion Scrymgour, MLA Chair, Member for Arafura Mr Michael Gunner, MLA, Member for Fannie Bay Ms Lynne Walker, MLA, Member for Nhulunbuy Ms Kezia Purick, MLA, Member for Goyder Mr Peter Styles, MLA, Member for Sanderson
Participants:	Karla Lake Sharan Lake, Community Service Manager, Barkly Shire Larissa Knight, MHACA Valda Shannon Olivia Barett-Ohio, Catholic Care Bronwyn DiAldi Geoffrey Shannon Jupurrurla Carla Boton, Steps John Van Loon, Steps David Grant Heather Rosas Billy Walker Karina Files, BYSP

**Madam CHAIR:** Good morning, everyone. My name is Marion Scrymgour, Chair of the inquiry into youth suicide in the Northern Territory - the current and emerging crisis we see not just in our urban or regional centres, but our remote communities as well. Thank you all for coming.

Perhaps we can start with this young lady and then the panel members can introduce themselves.

**Ms K LAKE:** My name is Kara Lake. I have just started with the Barkly Shire in the Community Services Section and, to be honest, this is the first I have heard of this. I thought I would come along and see what it was about, get involved and get as much information as I can.

**Ms S LAKE:** My name is Sharen Lake. I pinched Kara from Anyinginyi Health. I am the Community Service Manager at Barkly Shire. I have come over from FaHCSIA for 12 months to cover youth, sports and recreation, aged care, school nutrition programs and a number of programs - a really broad banner that falls under us. We currently only have three staff and in the Barkly Shire we get not \$1 for youth services.

**Ms L KNIGHT:** My name is Larissa Knight and I work with MHACA, Mental Health Association of Central Australia. I am based in the Barkly with a portfolio to help destigmatise mental health, to give mental health and gatekeeper training, and to support the community with mental health and wellness activities. We are a non-clinical service but we have links with the clinical services, with referrals and stuff like that. One of the things that has been used often by live promotions in Alice Springs with MHACA is Suicide Story.

I would like to introduce Valda Shannon, our Suicide Story coordinator here in the Department.

**Ms SHANNON:** My name Valda Naparula Shannon. I am a local. I am currently working for the Mental Health Association and am the only Indigenous trainer delivering Suicide Story training to remote Indigenous communities with much interest from everywhere, even the urban centres. We have several other Indigenous trainers but they only come on contract and if work permits. That is where we are at with this. Suicide Story is a resource we deliver which has been developed by our mob to take training out to remote communities and train our mob to understand what suicide is all about and how we can break the cycle of people thinking of taking that path and working together. I am based in Tennant Creek.

**Ms BARRETT-OHIA:** My name is Olivia Barrett-Ohia. I have come to give apologies for Pat Bruen, who has asked me to come in her place today. I am working at Catholic Care PHAMs, Personal Helpers and Mentors, as a coordinator.

**Ms De ALDI:** I am Bronwyn De Aldi, manager of the Barkly Mental Health Service. We provide case management, consultation and assessment services to the Barkly region.

**Mr SHANNON:** My name is Geoffrey Shannon. I work with Julalikari as a cultural advisor and consultant. I work with staff at Julalikari and work with communities commander.

Mr BOTON: I am Carlos Boton. I work with STEPS on the volatile substance abuse and ...

# Madam CHAIR: Carlos?

**Mr BOTON:** Yes, it has been on the Counsellors' recommendation of volatile substance abuse problems in youth connection.

**Mr Van LOON:** My name is John Van Loon. I am definitely (inaudible) one of the hottest ones in the room because I have been in Melbourne for four and half weeks working with Steps, I am doing youth work, and I am really here to listen because I can learn probably a lot - I have had some experience with suicide in Melbourne, my nephew suicided, and my girlfriend, so it makes me all the more interested in it.

Ms WALKER: Can I ask what STEPS stands for?

**Mr Van LOON:** STEPS Group Australia is a non-profit organisation for disability and all their services and is based in Queensland, and is now in the Northern Territory in Alice Springs, Darwin and Tennant Creek.

**Mr GUNNER:** My name is Michael Gunner, I am the member for Fannie Bay, so I am a Darwin based member. I actually worked at the primary school in Tennant Creek and I think this could be one of my old classrooms.

**Ms WALKER:** My name is Lynne Walker; I am the member for Nhulunbuy up in Northeast Arnhem Land. It is an electorate which has more than its share of suicide, attempted or completed suicide, but there is some hope that this will start to turn around particularly in communities with a grassroots driven program driven by a strong group of women who are tackling suicide head-on and talk about it openly amongst the community, and the result of that is we have seen quite a dramatic reduction in suicide attempts and completed suicides.

**Ms PURICK:** My name is Kezia Purick, I am the member for Goyder which is in the rural area outside of Darwin - Humpty Doo, Noonamah, Bees Creek, Virginia. You are remote here, but statistics in Darwin, and the information I get from various people in my area, is that more happens in the rural area than urban areas, and it seems the more rural you go, the greater the incident of suicide for a lot of reasons. I have an interest in that and trying to work out why, and trying to help the young people in the rural area because they have been neglected and let down.

I was speaking to a lady a couple of days ago, she is horse lady, and within her network in the rural area outside of Darwin, she has known of five suicides in the last 12 months - mostly men - but I just found that alarming, but she knew them and the families personally.

**Mr STYLES:** My name is Peter Styles, and I am the member for Sanderson which is in the northern suburbs of Darwin. I worked with youth for 20 years, and I have been to way too many funerals of young people I have worked with.

My brother-in-law also suicided not so long ago, so it is pretty close to my heart, and I am very keen to listen to your experiences and how we might prevent these things from occurring.

**Madam CHAIR:** My name is Marion Scrymgour, and I am the Chair of this Committee. I am the member for Arafura which, like Lynne, takes in quite a vast bush electorate. In my seat are the Tiwi Islands, which is the home of my people, where suicide rates was four or five times the national average, but reducing and, putting control back into the hands of communities and empowering people, has shown that you can reduce this. Nevertheless, there are parts of my electorate in western Arnhem Land where those statistics are actually increasing rather than decreasing.

So, as you can see, and I thank you all for coming, as members of the committee we all have varied and diverse backgrounds, but with a deep commitment to looking at these issues, and travelling around listening to people.

The committee has a very short time frame in terms of our travel. We have up until the end of February to submit our report onto the floor of parliament. It is completely bipartisan between the ALP and the CLP, because we take the approach that this is above politics, and this is about us showing the leadership and working with the community to look at this issue and come up with a report that is going to look at the gaps, not just in our government system, but also across our non-government sector, and how we get a better outcome for, particularly, our youth out there who are feeling vulnerable and alone. They should not be feeling like that, but how do we address this, and how do we move forward together and take the time to deal with this?

We have only just commenced - the debate was held recently, in August, and the Committee was established, and we have only just commenced our enquiry around the Northern Territory. It is quite hectic because we all have electorates we have to deal with, but we are also quite committed to ensuring we can travel throughout the Territory to listen and pick up on the concerns. We are ably accompanied by Russell Keith, who is the Deputy Clerk of the Legislative Assembly, and the head of committees, Julia, and young Lauren, so thank you.

I had just finished introducing members of the committee: Michael Gunner from Fannie Bay; Lynne Walker, who is the member for Nhulunbuy; Kezia, who is the Deputy Leader of the Opposition and the member for Goyder; and Peter Styles, who is the member for Sanderson in Darwin; and my name is Marion Scrymgour and member for Arafura.

**Ms ROSAS:** I am Heather Rosas, I work at Julalikari night patrol and that is my young brother, who also works there with me, David.

Madam CHAIR: In Darwin last week, all the relevant government agencies appeared and provided submissions to the committee. We also had the peak Aboriginal organisations in the Northern Territory also

provide submissions. We are still hearing submissions from some of the government agencies, but one of the agencies that presented to the committee last week was the NT Police and the Commissioner of Police. They presented whole-of-Northern Territory statistics for both attempted and completed suicides. The more shocking statistics were the attempted numbers, which are around 419 attempted suicides. My question was how much research or analysis has been done on those numbers, the 419, into the high levels of the completed suicides so we can try to look at whether those kids have fallen through those gaps. They have come to the notice in the system and, for whatever reason, they have fallen through that gap and ended up in the completed numbers.

**Ms PURICK:** The other thing was the Department of Health people in the Mental Health section said 60% of the people who committed suicide were not known to the health professionals. I do not know how they collected that data because I questioned her ...

**Ms De ALDI:** It is somewhat anecdotal because I do not think anybody has ever really done any research or study on it or collection of stats. Anecdotally, I could say that, just recently, the suicides that have occurred in the Barkly region, Mental Health has had no contact with them.

Ms PURICK: Yes, not known to anyone?

**Ms De ALDI:** Yes, or not known to anybody. Most of the referrals we get are related to self-harm or suicide attempts. Yes, as Marion was saying, it would be really interesting to see just how many of those self-harm suicide attempts go on to complete suicide.

**Ms PURICK:** Well, interstate there is research - because I did preparation for a speech - and there is data from interstate where a big chunk of those who tried eventually do kill themselves - both men and women.

**Ms De ALDI:** Yes. I am a bit doubtful about interstate stats because most of the people I see are Indigenous. Indigenous suicide is different. Each area has common problems, but different problems. So you have to really be careful about what sort of guidelines you are using to collect your data. That is something that has to be done in combination with people in the communities.

**Madam CHAIR:** When you say it is different from the other suicides - Indigenous suicides - is it impulsive or the method in which it is done?

**Ms De ALDI:** This is anecdotal, but most of the people - well I could say pretty much 99% of the people - I see, it is impulsive. It is generally in response to stress, family or relationship issues, and/or anger or frustration.

Ms PURICK: Would they be mostly sober or not sober? A mixture?

Ms De ALDI: Usually not sober. Because that is when the inhibiting processes are in place ...

Ms PURICK: Alcohol and drugs are a factor?

**Ms De ALDI:** Yes, very much because that tends to open up so people can let out that anger and that worry and stuff, and usually comes out in an angry way, or a frustration way - especially with children and young people. It is an expression – well, I have found when talking with them - of how angry they were and wanting whatever was happening to stop. It was a way for them to get away from the situation they were in.

**Ms L KNIGHT:** MHACA heads a response group to suicide, both here in the Barkly and in Alice Springs. You will hear more from Laurencia Grant about that tomorrow, I am sure. Anecdotally, yes, when we get together to look at the Coroner's report and the information, to work out community response, it is also the fact that so many of our response units work from 8.30 until 4.21 ...

Madam CHAIR: That seems to be the common theme through our hearing.

**Ms L KNIGHT:** ... and that is not when suicides are completed. A lot of the strategies we have talked about putting into place have to be really strongly community-based and backed our mob looking after ourselves, simply because there is not the formal backup. We need the community strength building in the communities to actually support communities, because the government knocks off at 4.21 pm.

**Ms De ALDI:** That is suicide prevention or response to, but I believe that community involvement is also part of suicide prevention. Because we work from 8 am to 4.21 pm and government resources are limited because of the amount of money you can put into something, as well as there are various non-government organisations that also have bits of money for mental health issues, there just seems to be a lack of coordination between services to provide an area-wide approach, utilising and benefiting each other from use of resources and pooling of resources ...

**Ms L KNIGHT:** An exhaustion of the communities that are supporting. It is exhausting, it takes a community to support one person who has suicidal ideation. It takes a 24-hour watch. It takes seven to 14, or 21 days of constant support. That is a lot of community resourcing, and there are many very strong Indigenous people who are really exhausted and are feeling the system is failing them because there is no backup, no support and no respect.

**Ms PURICK:** How do we get around the fact that people like yourselves have your day, and you say many suicides are at night. How do we change the clock or get more people or ...

**Ms De ALDI:** The majority of people I see are attempted. Usually the community is very good at interceding and getting appropriate services in. They generally present to our local hospital, which is very good at responding, and it refers to us and we follow-up. Completed suicides tend never to get that far and - we send out education and talk with communities about identifying somebody who may be at risk, but I feel we are working at this end and not the end where it all begins. The end where it all begins requires a huge amount of resources and organisation because you are talking about working closely with communities that are spread over a huge area. The only way to make any significant changes or impact is to work closely with those communities because the communities need the support and help to identify what their issues are and then to support them in working out how to face those issues. Those issues are social and drug and alcohol-related and are causing many of the problems within communities.

Madam CHAIR: Early intervention and prevention is a ...

Ms De ALDI: Yes.

**Madam CHAIR:** ... major issue. Valda, Heather, David or Geoffrey, you say the system is letting Indigenous people down and is not inclusive to - in relation of our young people or our people out there, are you able to provide some information or insight into that? What is it that ...

**Ms SHANNON:** I do not think we are doing a good job keeping in contact with our people on the ground - our families that are struggling. From suicides we have had in the Barkly, the people we lost have been struggling with this issue for a while. We have come in contact with some of the people but they still struggle. They do not need that one contact.

I am talking about the time Larissa and I were at the park giving out information during Mental Health Week - mental health wellbeing information and suicide prevention, and those people in that sorry business with the suicide that happened recently came in contact with us and said they wanted help. We asked them to come back, but it is very difficult. How do we keep in contact with our mob? Night patrol - you mob out there at night and you see these people. Nearly every time you see them they are still struggling with that part. How do you get help for them?

**Ms PURICK:** It is not one step back? Getting help is one issue, but is it not identifying the person who has the need in the first place?

**Ms L KNIGHT:** The identification of the people in crisis is pretty simple and easy to see in a community. We all know people who are struggling. What we are finding is that many of our organisations are working in crisis response and there are not the resources and energy to work in the destigmatising, the education and the support. You cannot get people to think of thoughts or feelings when they are concentrating on shelter and food. We are that far behind in the communities, for no fault in some ways of anyone, and it is not for want of trying.

Resourcing is one thing, utilising the resources smartly is another, and being aware that mental health crosses every aspect of life. It is mental health, it is not just looking at illnesses, it is actually looking at what makes you feel well, and how do you keep well. But if you have constantly lived in crisis, if you have lived with pain all your life, the degree of pain becomes overwhelming and you never know when you are actually feeling well. I think that would probably be a way to describe some of our communities, that they are

constantly in pain and the little steps we can make to start towards wellness are not enough, because you are constantly behind the eight ball and running.

**Ms S LAKE:** Sorry, if I can just something. If we are going one step back, if we look at Tennant Creek and the Barkly Region we have no youth services after 5pm, we have no youth crisis accommodation and we have no youth case workers people can come and talk with, feel safe with, but they have nowhere where they come to that one person and that one person case manages them and helps them into employment. I know we have employment providers and all of that, but saying: 'Okay, you are not working, do you want us to do this, and let us look at getting you over to (inaudible) or over to ITEC. They miss that gap.

We have so many kids who leave school, they are not working, they are not getting Centrelink, and they completely fall through the gap, so their families are supporting them, feeding them, all of that. They are just missed. No one is capturing those children. Tennant Creek, I do not want to use the word 'desensitised', but our young people are doing it so regularly it is like, oh no not again!

Madam CHAIR: People think it is a normal process.

**Ms S LAKE:** 'I went to bingo one night, I never normally goto bingo There was a young man who spoke to me on the way past as I was reversing (Margarie's sisters son), saying hello you know, how are you going, By the time I got home from bingo he had already hung himself.' And the family were just distraught, screaming down the street. From things like that, now we have this unit that has emergency response, but before that young fellow, there had been three in succession and they were all friends and they were all feeling exactly the same. There is nowhere for people to go.

**Ms PURICK:** No youth drop-in centre type place?

Ms S LAKE: No.

Ms L KNIGHT: Not after 5pm.

**Ms S LAKE:** No, there is no youth drop-in centre.

**Ms L KNIGHT:** There are a couple of things that we run in schools and stuff but everything shuts after...

Madam CHAIR: So from 4.30pm that is it? Or 4.21?

Ms S LAKE: Pretty much, yes.

Madam CHAIR: So if you're a young person in this town, what do you do? What happens?

**Mr STYLES:** Remember football and Clontarf and the gym and stuff like that are going on.

**Ms K LAKE:** ... to mix with people that go to school, with the ones that are not attending the school; again, they are missing out.

**Madam CHAIR:** So, if you are not at school you cannot access those programs. One of the things we should find out is to get the statistics.

**Ms K LAKE:** There is not enough of it.

Madam CHAIR: Well, how many young people in this town are not in school?

**Ms WALKER:** We should try and capture that data.

**Ms S LAKE:** Yes, because I know. I have actually sat down and said: 'Hey, mate, you have been out of work for six months.' They have gone to employment providers who have said: 'You know what, you mob do not need to come back for six months.' Or: 'You do not have to report back.'

Now, I thought we were meant to be in the earn-or -learn revolution. That does not happen. This is honest to God true facts: those kids can go and sit down and not have to re-present at the job centre for another six months. There was one young girl who I actually dropped off, and she was back before I got

home. I said: 'What happened?' And she said: 'I do not have to go back for another six months'. I phoned them, and that was correct, and a part of that was she needed a driver's licence, she needed identification, she needed bank accounts, she needed all of this stuff, and she had nothing. So they just get overwhelmed, and it is easier to just sit at home and go and do what everyone else is doing; and then they get into the same cycle.

Kara's just been helping the high school, the high school kids phoned Kara last week about doing a project called .....

**Ms K LAKE:** Year 9 students are doing a project called; 'Are you mad, are you making a difference' and they are identifying, I suppose, problem areas with the youth. One of them is boredom, obviously. They get bored, they go out, they drink, vandalism, all that type of stuff. So, we're in the process of organising like dive-in movies at our town pool and that type of thing.

Ms S LAKE: Really utilising our pool, hey?

**Ms K LAKE:** Yes, so – I mean the kids are taking notice, it's just the ones that aren't going to school aren't getting involved and they aren't...

Ms L KNIGHT: They miss out on the organisation.

Ms S LAKE: They miss out.

**Ms De ALDI:** Yes, just listening to people, when you get a critical mass of people who are positive and have the energy to put into developing programs, it is all fairly positive for awhile. One of the main issues we have with anything we develop or any of the organisations do in this town, or anywhere in remote areas, or even Alice Springs, is the high turnover of staff. Where people are so desperate for staff, they'll just get staff. So, you get people who aren't specifically skilled in certain areas, which puts pressure on them, so they will leave. Also, there's accommodation for staff, appropriate wages for staff, so anything you set up, if that core person who set it up leaves, which is highly likely, then it all falls flat.

Ms S LAKE: And that's why we need to fully concentrate on our school-leavers.

Ms De ALDI: Yes.

**Ms S LAKE:** And the kids, if they're not doing okay at school, they can start coming into programs where, yes, they still go and do their English and Maths, but then they're in employment. I know we came here for six months, I said to Tony: 'I am not going there'. We come to manage Wangkana Kari the student hostel. That was 20 years ago. I do not want to concentrate on people who are fly-in fly-out to make a couple of bucks. We need to build the capacity of our young people, of our local people, of people whose families have been here for generations; that is, Indigenous and non-Indigenous.

When there is football on, when – like when we did that match – what did we call it – I do not know, it was a NAIDOC match and Janapurlalki and YDU, the Youth Development team played. That night, it just went off. That was from the team saying 'Let's have a game. Let's have a special game to celebrate to NAIDOC with two Indigenous teams..' That had Anyinginyi, it had the shire, it had BAFL, and people come together for those things and things like the Youth Development Unit, even Janapurlalki set in solid, no alcohol on Friday nights. If you get drunk, you do not play football. There was camaraderie, those young fellows looked up to the older blokes, and there many comments from a couple of the fellows that were: 'I feel like I belong to part of the family' and that is because people are going: 'You know what. Come around on Friday night. Let's have this'. They knew where they were going, they knew what they were doing, and they were surrounded by positive people and their own mob.

Ms PURICK: Do you know if they have *MindMatters* in the high school here, that program?

**Madam CHAIR:** Yes, *MindMatters*. It is *KidsMatter* for the young primary, and then you have *MindMatters* which is aimed at middle school and secondary.

**Ms KNIGHT:** I think they were actually looking at introducing it, but I do not think there was actually the capacity within the school ...

Ms PURICK: I am not sure how it is - you people must know about it ...

**Madam CHAIR:** Can I ask how the Mental Health Coalition – how much or what your role is, whether you have any input with the school here?

**Ms KNIGHT:** I have only been in this position for 12 months and tried very hard to get involved with some of the school stuff. I attend the Peak Youth Organisation here of youth development when I can. Unfortunately, quite a few times we have been in Alice Springs doing other things, but do the best to be involved. It seems that mental health seems to be put into the too-hard basket if you talk mental health. If you talk social and emotional wellbeing, there are many little pools of money to cover social and emotional wellbeing, but there does not seem to be an overall town coordination of it.

I have tried in the centre, as part of our brief in Tennant Creek, to head a reference group here. Again, it has been difficult because it has been sent out under the mental health banner despite the fact – I am getting to know and linking into some of the groups, when I hear of something that is happening with youth or in the schools: how can we support, how can we coordinate this, is there anything we can do? Some of the links are getting there. But, it is slow. Being here only 12 months - although Valda has been here all her life and has been working with Matt now – 18 months? ...

Ms SHANNON: About two years.

**Ms KNIGHT:** Two years, and only working part-time; it is very, very difficult to get the background mental wellness message out to people who are in crisis mode.

Ms S LAKE: It is really important we talk about social and emotional wellbeing ...

Ms De ALDI: And emotional.

**Ms S LAKE:** People could think: 'Oh my God, that is such a flogged-up word'. I know personally of people as young as eight and nine wanting to die. We find out the reason for that is sexual abuse. But, a parent trying to find out why this child is so dark - there is nowhere to go, no information for parents to find what could be making their child behave or feel like this. If you are not thinking of sexual abuse, well then, just trying to get help for your child where do those parents go?

**Ms De ALDI:** Can I answer that? There is a child and youth psychologist who used to come up only one day a month ...

Ms S LAKE: I know, and that ...

**Ms De ALDI:** ... but we have increased her hours, fortunately - we managed to argue for that - and we are trying to establish those links with the communities and town. It is still early days, but she is generally booked out for the week she comes up anyway. That is one avenue ...

**Ms S LAKE:** That is where we come back to from service provision from out of town. Everything is - dentists - from out of town.

Ms De ALDI: From out of town, yes.

Ms KNIGHT: Which means we are limited to a maximum of three days a week in a community.

**Ms De ALDI:** Yes, and you are spending a lot of money flying them and flying them out, and putting them up.

**Ms S LAKE:** Then, if you are a parent and you have that, you go: 'Oh my God, there is something seriously wrong with my eight-year-old child' ...

Ms KNIGHT: Yet, it does not happen while the child is at school.

**Ms S LAKE:** You have to wait for a month. What is that going to do? These young children are in that position; they do not know how to say what is going on, they do not understand why they feel that black and dark.

Ms De ALDI: They cannot, yes. I like the social and emotional wellbeing approach because ...

**Ms KNIGHT:** It is holistic.

Ms S LAKE: And that is what we are looking at.

Ms De ALDI: It is not about mental illness, as such, it is about social and emotional wellbeing. It is about the society and the community.

**Madam CHAIR:** That is the whole point of MindMatters and KidsMatter. Those programs are to work with kids to look at protective behaviour, to look at what is a good touch, what is a bad touch and, I suppose, building the resilience of our children so when they are touched or when something is happening, rather than feeling they do not know why 'uncle is touching me like that - well he is just being a good uncle', he is not being a good uncle, he is being a bad uncle and he should not be touching. That is why I was asking about the school. How much work are we doing with the schools here?

**Ms KNIGHT:** The schools have been struggling to find school counsellors. Not only do they struggle to find school counsellors, but there is also a struggle to find a fit with the community with them, a commitment to stay, and housing. Unless they are really are into the pub scene or sport scene in season, the community needs to look at other wellness aspects: recreational activities that help us with our wellbeing are not here and the ones providing that, whether it is your own families like you mob do, are exhausted. There is the exhaustion of - the strong people are exhausted and we need to support them and the community very much so. Has anyone stepped out of air-conditioning in the middle of the day? There is a reason people stay in their houses in the middle of the day. There is a reason we come out at 9 pm and 10 pm to do our socialising and our activities which has to do with our climate. At 9 pm here there nothing to do

Ms PURICK: Except what you do in homes or on the street.

**Ms KNIGHT:** If you want to socialise, the housing situation is such that socialising either overwhelms the family or the housing is too small for groups to gather. There is no room to play, there is no room to socialise so you are out on the streets. You are looked at as if that is wrong - offensive behaviour to sit in a park and talk. We have so much social stigma within our daily activities that if the services worked smartly, we could utilise that more. If the youth have nowhere to go, they hang around. I went down to the pool on Saturday and was there for nearly four-and-a half-hours. There were two adults. Every child there was having a ball, but there was no adult supervision.

Ms S LAKE: Other than the life guards.

**Ms KNIGHT:** Other than one life guard. Why? It is hot to come out, there is no transport, they have other little kids at home they are looking after, they are doing other family stuff that is just as important so the kids that are capable of going out on their own, do. There is not the infrastructure to support families to support themselves.

**Ms S LAKE:** On the flip side of that, if all of these kids are congregating at the pool, that is where we are trying to catch them to make that a good, safe place for them to be.

**Ms KNIGHT:** One life guard is not safe with 60 kids.

Ms S LAKE: The ratio is actually 1 to 100; we have been arguing that.

Madam CHAIR: I might get Carlos and Geoffrey.

**Mr SHANNON:** We had a meeting yesterday with our people at Julalikari and we have written down some points: for preventative measures to be put in place to lessen the impact on existing reactive mechanisms; counselling skills for YDU, the youth development unit; all Julalikari staff to be able to recognise the symptoms of suicide; a helpline with someone on the other end that can help during all hours - politicians should try calling the existing lines and see who is going to answer the help line - a large well-subscribed community drop-in centre with facilities for kids to rest and sleep peacefully if necessary; access to headspace, save a mate, and peer education; wallet-sized cards and A4 flyers with relevant helpline phone numbers on it should be redistributed in the community; the cards and flyers should also have information on how to detect symptoms of suicide, himself, and others. These cards were previously available but have not been seen for some time. We tried to get some samples of the old cards and flyers.

Some time ago when I was involved in mental health we tried to set up a security link to help people and to work together, help one another and help each other to do some of this stuff. As with the cards, now we cannot - that is finished; it has disappeared somewhere back in time. There is a need for youth services to go on into the night rather than just be available during the day. Another thing, many of these forums finish in a report and are not acted upon. We would like to see some action in this area instead of a lot of talk. There is a need for culturally responsive, professional help for potential suicide victims and families.

Youth are coming not by the same tools to help this people that are losing young fellas and young girls, but mostly young fellas. We need the woman's side and input in professional help, cultural one. Talking about a men's refuge needed in Tennant Creek, here. The women have got a women's refuge, us blokes got nothing. Where do we go to even have a break from our families, from stress at home, overcrowding at home, drunks coming in at night, dogs? Sometimes people come in and we have no tucker because a lot of visitors come in during football season, eat our food, and our fridge is empty – where do we go? And we stress out, too. We become depressed.

Ms PURICK: Geoffrey, have you head of the Men's Shed program in Darwin?

Mr SHANNON: Yes, I have heard of it.

Ms PURICK: There might be just one in Palmerston, but you know about it?

Ms KNIGHT: We have been trying to get that information out.

**Ms S LAKE:** That was actually declined by Anyinginyi Health, the membership was declined because the Men's Shed wanted to manage it and oversee it, and Anyinginyi said, no, the men's centre needs to be run locally by local people, so they did not want anyone else having ownership.

**Mr SHANNON:** I was going to start it up when we got more funding. We have got no other help; no one to help plan it and get it going and being involved in it. How we going to set it up us local people here?

**Ms KNIGHT:** The gentlemen that fly in/fly out from the mines would be most interested in being part of the Men's Shed too, because fly in/fly out is a very disconnected, but, yes, we would like to become more connected and we would like to have some information and help with the Men's Shed.

**Mr SHANNON:** Right. Recurrent funding for successful programs rather than a period of success and then dropping the program and seeing all these suicide rates rise again. Right? Good programs like *Strong Families* should get priority for ongoing funds. Statistically robust youth surveys should be planned and conducted with rewards for participation to gain a valid sample of youth perspectives. Not only on youth suicide, but many other aspects of youth issues in the Barkly. A survey was at least scoped recently and we need to find out more for us. Alcohol and drug issues have never been properly addressed, and no example set by adults in the community.

(inaudible) people when they get into the grog themselves - how can they be good examples for our kids? Some of them are buying grog for our little ones now - 13, 17 16-year olds - they come out after night patrol has finished. They are on the streets now, the little ones. They are getting into the grog.

There is a great need for men's crisis centre in Tennant Creek, like the one for women, where whole families can come and join in the counselling process. You know, we need that sort of stuff.

Madam CHAIR: Can we get a copy of that, Geoffrey?

Mr SHANNON: Yes.

**Madam CHAIR:** That is actually quite good - a comprehensive list. It would be good if we could get a copy of that.

Mr SHANNON: The three of us and some of our staff sat down together and we brainstormed this stuff out.

Madam CHAIR: That is quite comprehensive.

**Mr SHANNON:** I have got some more stuff here, more preventative measure: accessible safe place for kids into the night, along the headspace model, where they can sleep and have a break from stress and talk to counsellors. Provide a place of trust, first trust at first contact where they can talk about their problems in privacy. This would need funding and people with skills from all youth service providers. Resurrect the

health card flyer for community distribution with free call numbers for mobiles as well as landlines. More staff training for all of us in suicide symptom recognition and treatment pathways, where to get professional culturally responsive help. That is it, I can pass this on.

Ms ROSAS: I only brought five copies, sorry.

Ms PURICK: That is okay. We will get a copy.

Madam CHAIR: No, that's good. We've got that copy and we will record that. Any questions from members?

**Ms WALKER:** I am interested to know as a complete outsider but coming from a similar-sized community up in Nhulunbuy with a number of homeland communities around, do you meet as a group? Do the service providers sort of ...

**Ms De ALDI:** There are many meetings. There are lots of different meeting for various different things, but I do not know that there is one meeting that looks at social or emotional mental health issues of all service providers on a regular basis - just those issues.

**Ms KNIGHT:** And it is not for want of trying. MHACA has tried to contact you guys, Anyinginyi council of elders and respected persons ,organisations such as Julalikari, but there is also an exhaustion of talkfests.

**Ms De ALDI:** The other aspect is that to be able to do that, you need a lot of energy and time to be able to network and put the effort into engaging with all those different organisations; organising, motivating, and propelling it and most of us are exhausted and busy with our core service delivery. There can be gaps, you can lapse, or you go on holidays, and there is no-one to pick it up. There needs to be one specific coordinator.

Madam CHAIR: So, someone needs to be the champion.

**Ms De ALDI:** Yes. Well, you need someone who is going to – yes, otherwise you have everyone doing their separate things, because I know that money goes to ...

Madam CHAIR: I actually have to let Carlos speak up.

**Ms De ALDI:** ... there is money going to the Royal Flying Doctor Service and GPs network for mental health issues. Trying to get a meeting with those two services to try to look at how can we coordinate, how can we not double up on service delivery and ensure that we are all working together, but not doubling up on services, it is almost impossible. When we did, the people I had the meeting with left because they were not sure the funding would come through, so they left, they were not going to wait around.

Ms S LAKE: Can I also say that Red Cross were funded through FaHCSIA for ...

Madam CHAIR: Yes.

Mr STYLES: I need to chop in at some stage. I've got stuff from 20 minutes ago that I need to ...

Madam CHAIR: No, Peter, just ...

**Ms PURICK:** Get Carlos. Get Carlos first, he's been waiting.

Ms S LAKE: ... to analyse the risk ...

Ms PURICK: Come on Carlos.

**Mr BOTON:** I arrived in Tennant Creek eight months ago, so I am pretty new here. I arrived here to provide counselling services and I found out that most of the counselling services I was going to provide were for Indigenous people. During this eight months, I have been sitting there with people and a closed door and trying my best in terms of counselling services. There are mandated clients and voluntary clients, mostly mandated clients.

I have a background from men and family relationship programs around Australia and my work background has been concentrating mainly on anger management and self-esteem. What I found out here from my 32 years of experience; Tennant Creek is a shock. It is a shock. The level of self-esteem of young men in Tennant Creek is below my comprehension. I come from a Third World country, I have seen this before, and I am capable of identifying this. Unless these young people in this area are supported, they will suicide; this is guaranteed.

I hear from young men in the counselling room saying to me 'The police target young Aboriginal men. We have no way out. We will be caught'. 'And that is a fact – do you take this as a fact?' 'It does not matter what I do, I will be caught, and I will go to lock in. I will stay locked in for a while'. You can recognise the kids who have been in the lock up for a while. You will look on the streets and you can see them; you can separate. We created this culture of it is cool to be in gaol, which is not, and it needs to be removed so we can stop this cycle, because after these kids get out of gaol, their next step is suicide ideation. We have been liaising with MHACA for awhile, and we know this is fact. There is a path in drugs or alcohol, going to gaol, no support after that and, then, you come with these numbers. All right ...

Ms S LAKE: A no-brainer.

**Mr BOTON:** That is what we know. We have consultation around town; we sit as a group; we try our best. Where is the action group? When I arrived here I had contact with Men's Shed for a long time. I said: 'Where is the men's shed?' 'We do not have one'. I said: 'What?' So, there is nothing. As far as I know, I am the only male counsellor in town ...

Ms KNIGHT: Gineesh Joseph.

**Mr BOLTON:** Gineesh. Yes, Gineesh at the hospital - social worker at the hospital, and Clarence. Right? And women's counsellor – Gineesh ...

**Ms De ALDI:** It is not enough.

**Mr BOTON:** Sorry, it is not enough.

Ms PURICK: So how many male counsellors? Two?

**Ms De ALDI:** Two, but I have an Aboriginal mental health worker. We are busy enough with people who have mental illness issues, let alone social and stuff.

Ms KNIGHT: With crisis management ...

**Mr BOTON:** We are overloading because there are not enough services. When you talked about the school counsellor, when I look at the job description, I said to them; 'If you want me to work in a place like this, where you have to take care of primary schools, secondary schools, and you just do not do the training - everything else you have to do yourself'. Sorry, you need two counsellors, not one. This is why the schools did not get a counsellor there. You scare the hell of any counsellor when you look at the job description. It is really scary; it is overloading!

So, I see an abandonment of young people in Tennant Creek because of the lack of activities, lack of motivation, and lack of role modelling. I believe a Men's Shed in Tennant Creek will create a role model. It is absolutely necessary. I am not abandoning the girls - please do not get me wrong. Usually, I agree with Geoffrey, where you put the blokes on the streets, on the way to drugs, on the way to gaol, on the way to counselling, on the way to suicide. I see this.

**Mr SHANNON:** Can I just say a little bit? I am involved with the Council of Elders, too, here in Tennant Creek. We do prison visits. A lot of our fellows are in gaol in Alice Springs or in Darwin, Berrimah and we have a few over here in that boot camp - a lot of young ones from 35 down to teenagers; some of them in Don Dale. Most of the fellows in gaol are mostly like me (speaking in language). They been in there because of a lot of trouble with the system - no job, no training, involved in alcohol, drugs, violence, a lot of stuff. There is an imbalance. They are making a new gaol in Berrimah I was told at the last meeting - for mostly our Mpurrani men. When are we going to get them fellows out of there and make something different to put them back with family, put them back with wife and kids, and next generation?

Men's Shed you are talking about is good, but there is something we need to do as well for those young fellows: reintegration program back into community. They get trained up inside there: 'I got a ticket so now

I can get a job'. 'Before you get a job, we got to check out if you have a police record' And they look. 'You got a police record, we cannot give you a job'. So, there is this kind of stuff there too that brings more stress, more depression, more of the 'I will go back to drink, I will go back to drugs. I will go back to gaol; I have no job, I am better off in gaol. Too much pressure and family pressure in the community; I will take the easy way out, I will go back to gaol. I will put myself back in'. All this is there ...

A witness: Or commit suicide.

Mr SHANNON: Yes, also suicide.

**Mr STYLES:** I want to go back to a couple of things in relation to early intervention. You were saying, Larissa, in relation to we need to train young people. What do you have in primary schools, and right at the beginning of school where we are actually training people about options? What I see a lot is young people do not understand where they can go and get this information. They do not understand about the signs to look for, or about supporting one another. Are you aware of any education that starts off when kids hit school?

**Ms KNIGHT:** Yes, there is. There are strong efforts within the schools but when they are only getting 30% engagement and attendance at school, where do you go from there?

**Mr STYLES:** Can we look at that 30% because if you do not give that 30% something you have zero. Let us look at getting 30% trained, at least out in the community. If those kids are in the community and are seeing signs of people going off in the direction - like all of us, if someone does not teach you what to look for you miss it. You totally walk past it and miss the signs of where people are heading. If we look at schools at the moment, I know 70% are not engaged - we can come up with another strategy for that - in relation to schools, and I speak from experience - I spent 20 years as a community police officer in schools with young people training them to watch for this sort of stuff, to be able to say no, and empower young people, especially young girls, that they do not have to put up with bad uncles and things like that, where they can go and what they can do. It is the training of these young people that we will need to look at. Are you aware of anything that is going on? Do you see a need for that?

**Ms KNIGHT:** I am aware. I can ask an education officer to come in and speak – who are involved with the curriculum and stuff in schools. They are around today, they might be interested. The schools are working very hard. There are many really good engagement programs. There are breakfast programs, there are the social and emotional wellbeing, the sports and the Clontarf programs. The ones that go through and stick with it are – there is quite a bit of success but there is no pathway after school. I can get someone from Education to speak on that if you like.

Mr STYLES: No I am actually asking questions. I know some of the answers to these questions but I ...

**Ms S LAKE:** We have a school-based constable, only one, a male. He works between schools normally putting out bushfires, kids fighting and bullying.

**Mr STYLES:** That is true. I spent nearly 20 years as a school-based police officer and I taught young people. What I am not seeing now is the type of training we used to do in schools to empower kids right from transition about not putting up with bullying, sexual abuse, psychological abuse, all that sort of stuff which leads to suicide.

**Ms KNIGHT:** 20 years ago many teachers put in much time after hours, often in their own time. They lived in the communities 24/7. In remote communities you see it more and more, even in this community there are many that come for the week and do something else at the weekend. There is more living going on by teachers outside of school and there is not the resourcing, for various reasons, to put in the after school hours. It is picked up, to some extent, by other service providers. The continuity is not there. There has been much work with Families as First Teachers - efforts rolled out through this area and trying to get families first, support and kindergarten management.

There is a huge waiting list for childcare in the town. There is no training for our Families as First Teachers available unless you already have some pretty strong government selection criteria which does not match our demographics. You have to have an Ochre card for obvious reasons, but there are many people who would be really good working with children who are refused because they have a police record that will automatically put them out - harm children. Again, the pathways for people willing to reform, have learnt from their mistakes and have grown into good strong types of people - are being put out from many government jobs because there is not the forgiveness of the sins.

It is seen as a rite of passage by many our young fellows to go to gaol, but once they have done that they wreck their lives for government employment. What other employment is there in this town apart from government employment?

**Ms PURICK:** They have probably wrecked it with lots of employment, you would probably have wrecked it with the mining industry, having a record.

**Ms KNIGHT:** So, we have to look a lot more flexibly and, I suppose, something else another group has looked is our employment like criteria and utilising skills and growing our own capacity in the town, and valuing the capacity and knowledge and skills of our Indigenous mobs, the skills of their way of thinking not the white sort of framework and expectations.

**Ms ROSAS:** I was just going to say something about schools - how we can target the school children that go to primary school or high school. In primary school we have two, but one thing missing in that high school is Aboriginal teachers. There is nothing for them to learn cultural side, they all learning one side; they all learning white. They go into school and learn all the western side. What about our cultural side? What about our (inaudible) teachers who use to do it in the past? They got to learn our language, they got to learn our culture; there is nothing there for them to learn. All they doing is learning how to read and write in English. English is not their first language; their first language is the language they speak in the communities. They do not even speak those languages in their own communities because they have nothing but English all the time. They talk English, they talk broken English and that, they do not speak Warumungu It is very hard for our kids, you know.

How are our kids going to learn both ways?

**Madam CHAIR:** We will take that back to the department, Heather, to Gary Barnes. I agree in terms of the two-way learning, but at the same time the school should not be seen as the only place where culture and language is taught, you know, it is back home, our families - we have got to build that family thing. I do not believe it all should be put on the school as being as the only place where language and culture should be reinforced, because we say that our kids need a job and our kids need to get out there and work and earn and feel good about themselves, but the only way they are going to do that is by us giving them a good education.

**Ms ROSAS:** Yes, but it is both ways too. Because when school breaks when we have a ceremony we get our kids out there to teach them, but when they finish school they do not go home, they are on the street. They go straight back into the street, they do not go home; we have to chase those kids from the street to take them back home.

**Mr SHANNON:** The people that buy them inaudible one on one you cannot inaudible and you know I am talking about under-age drinking; there are people that buy them grog. I do not know how we going to catch these people, but we need to do something about those ones for taking them away.

**Madam CHAIR:** That is against the law. If you know people who are trading in this or buying grog for young people, that should be reported because that is against the law.

Ms ROSAS: I report it too, but nothing happens.

**Madam CHAIR:** Well, that is what we need to know. If nothing happens, if you have reported it and nothing happens, well, that is an issue, too.

**Mr STYLES:** Madam Chair, this is where it goes back to the importance of school-based police officers. When I was in a high school I knew who was supplying it to them, because kids talk, and you build a relationship with kids and they will come and tell you what is going on and you can ring the station and say you had better go and watch this person, and they end up getting locked up. You can reduce the problem by having an intelligence network, but you have to have a relationship with these young kids. They have to go to someone who they believe will and can help them, and have the authority to help.

It is very difficult in this world and in this environment for a lot of people. There are many really good people out there who can help young people, but sometimes my information from the young people is that they do not quite believe they can really do anything; so sometimes they just see it as a waste of time. What they are looking for is the people who have the power to do something in their best interests, which is why I believe we need to go back to really empowering school-based police officers, appropriately picked, a

handpicked school-based police officers, not just anyone, you have got to pick the right people to go in there and fix it.

**Madam CHAIR:** There are two issues, and you are right on one aspect, Peter, but I think Heather's right; we need to also look at Aboriginal teacher assistants and Aboriginal teachers, who used to be in the school system, and I know they were in the system down here - what has happened to them? Maybe we need to ask the question, what has happened to that ...

Mr STYLES: Yes, I ...

**Madam CHAIR:** ... the role of school-based constables and stuff, because I think Aboriginal teachers play an important role.

Lynne is the Parliamentary Secretary to the Minister for Education so maybe that is something she can ...

**Ms WALKER:** Yes, I was going to ask – I am not that familiar with Tennant Creek School. I believe Erica Prosser is the principal. Does your school have the 9 to 3, 3 to 9 program? Does that ring a bell with anyone?

So, 9 to 3, 3 to 9 program has been rolled out in some of our remote schools in the Territory. It is working very successfully on Elcho Island at Shepherdson College. We have all this investment in infrastructure, these fantastic places, and then we lock them up at 3 pm and kids have nowhere else to go. So what happens with the 3 to 9 program is that school remains open, there are additional classes, there are language and culture classes. At Shepherdson College, there are language and culture classes for the non-Indigenous members of the community, teaching kids to drive, music programs, childcare. It is whatever the capacity of the town and the will of the town is to have offered in their school.

So, if that is something that is not happening ...

Ms KNIGHT: I think it has been talked about. I have heard it talked about in education circles.

Ms WALKER: (Inaudible) it could be a resourcing thing as well. You have to double your staff ...

Ms KNIGHT: It's a resource.

**Ms WALKER:** ... because staff have to be prepared to work shifts and share their skills around, but it takes a (inaudible) ...

**Ms KNIGHT:** I believe there are a couple of community schools out in communities that are doing it or trying it.

## Mr SHANNON: Where?

**Ms KNIGHT:** I think Yuendumu was trying it. You might hear more about that down south. I think the APY lands were trying it as well.

Ms ROSAS: They have two people working at the primary school, but they have nothing at high school.

**Ms WALKER:** All I am saying is it is a program that allows disengaged youth or perhaps young ones who have gone off and had a baby but want to come back to school, it just gives them more opportunities and it makes the school very much a centre of the community, a place that is welcoming to everyone, not just children, but families as well.

**Ms KNIGHT:** And I think it needs to be welcoming to everyone. We have just had another beautiful, big hall built at the high school. It would be nice to see community resourcing of that.

Madam CHAIR: But those things can happen.

**Ms KNIGHT:** The youth need role models as much as anything and I think we have to be much more flexible in our employment of our staffing to actually give our adults – well, being able to be role models, to acknowledge the adult skills, to encourage them to be role models, to give them value in their lives as well, so they see the need for the children to grow up in this value. There are so many men here that are strong

men, that would be really valued and be able to work in the community, except they do not fit selection criteria of bloody jobs.

Mr STYLES: Yes, I just want to go back - the local ovals, have they got lights?

Ms S LAKE: Yes.

Ms KNIGHT: The football oval does.

**Mr STYLES:** Is there a regular night football competition? Not just at 5 pm, I am talking about 7 pm or something, like into the night.

Mr SHANNON: No.

Mr STYLES: Is there midnight basketball here?

Mr SHANNON: No.

Ms KNIGHT: There is a form of midnight basketball ...

**Ms S LAKE:** Anyinginyi, with the Barkly Shire, we have just supported - through the binge drinking program - we tried to develop a Friday night program and with BAFL and you will find that you might have the same person on 100 different committees because you know you always have the same people running things, but hopefully we can get that up and running. Hopefully that gets approved. That is targeting our youth. In that is midnight basketball, so we will be working with Anyinginyi Health, like our shire, even though we do not get funded, we are going to try to do something to try and get that money. We have late night activities on Friday nights, on Saturday nights. BAFL, during the football season, the last game is always in lights and then any other little activities, we try to have cricket, touch football ...

A witness interjecting.

**Ms S LAKE:** Yes, when they can. The shire is more than happy if there is any programs that want to happen over at Purkiss Reserve under the lights there is no drama at all.

Mr STYLES: Do you have speedway here? Do a lot of young blokes go to speedway?

**Ms FILES:** No, because it is a fair way out. With the speedway, there is going to be a change in the set up next year. My partner will be on the committee. There is going to be a push to try to involve more youth; bring back the young bikes - the quad bikes, the two-wheelers - and try to engage more of the youth side as well. Like many of the organisations over the last two or three years, speedway has really dwindled down with a lot of people leaving or not having enough time to do it.

Madam CHAIR: Can we get this young lady to introduce herself and where she is from, for the purposes of recording?

**Ms FILES:** Sorry. My name is Karina Files. I am actually with the Chamber of Commerce but I am here representing the Barkly Youth Service Providers Network.

**Ms De ALDI:** That would be something that you could link up, maybe, with some vocational training too- like mechanics working on engines and things.

Mr STYLES: Have you heard of Club 16?

Ms De ALDI: No.

**Mr STYLES:** It is perfect for the stuff that you are talking about, Carlos and what Geoffrey is on about for these young blokes. The school-based police ran it in schools. They just used Holden Toranas, Geminis and things like that, where they actually got teams of blokes to work on the cars and they all raced one another as a team - so you are building team capacity, motor mechanics, and a whole range of things. It is something I would strongly recommend, given what I have heard here this morning ...

Madam CHAIR: What is it called, Pete?

**Mr STYLES:** Club 16. We ran it in Darwin – it was just magnificent. We had all these unengaged kids, especially young blokes, just eating out of your hands because they wanted to be there because they all got to drive the car. They were all taught, they all had to follow the criteria and all the checks and balances and ticks. It is a really good program. Down here, I reckon it would be perfect.

Ms KNIGHT: Did we hear that Club 16 was backed by the police?

Mr STYLES: Oh yes, we backed it because the school-based police officers were coordinating with schools.

Ms KNIGHT: Our capacity here in the police force is stretched, to say the least ...

Mr STYLES: Again, this is ...

**Ms KNIGHT:** Again, with crisis management, we do not have a lot of time and resourcing to do the strength building. And it is not because people do not want it. If there is a resource in there, then it would happen

**Mr STYLES:** Can I suggest you might find some of the businesses in town will probably support you. Everyone has to live here, everybody wants a better town, and everybody wants to help resolve the issues. If you can get local businesses on board - and next time I am here I am happy to go and talk to them and sell it to them as an idea. I will not bore you with all the benefits here because we are on a time constraint.

**Madam CHAIR:** Maybe some of the stuff that is happening in Darwin, Pete - maybe you could pass it down?

Ms KNIGHT: Could you send me the information ...

Mr STYLES: Absolutely. When we finish here, I will have a chat with you.

Madam CHAIR: This young lady here for the table comments. I might just get Valda, who has been waiting to say something.

**Ms SHANNON:** I just want to talk about the role that I am in working in Suicide Story area, suicide prevention in Indigenous mainly remote communities. With me, I have a degree of teaching and I work with old people. All my life I have always pulled knowledge from our cultural knowledge base to put into practice when working with our people. We started that at Batchelor many years ago - Batchelor College as it was called back in the 1980s. It was about both ways - big ideas of Aboriginalising our schools. All of these things were thought through and we still talk about it today. Nobody really looked into that area about getting more of our local Indigenous teachers in the schools.

When I first heard about suicide prevention work it did not sit right with me. For 25 years, I kept my distance: it is all whitefella business, nothing to do with our people. For that long, people like me even sitting back and holding back, when we should have been stepping in. Now, I have been involved with Suicide Story and suicide prevention training for two years, and I am really loving the job. It is exciting, it is challenging to develop this resource for Suicide Story with our people - a lot of people from Tennant Creek contributed to that resource material. It is our mob from the Barkly. Even I am there, the only Indigenous trainer for Suicide Story and I am only part-time and I think, come on! I am part-time working in this position and, as I mentioned before, two people come on contract. We put much local knowledge and input into that resource. All our voices are Indigenous except the illustrations or the paintings that depict our way of lifestyle in remote communities were done by a non-Indigenous person - that is the only thing. We draw on that strength and knowledge from our culture when we do the training. We talk about our strategies, not other strategies, that come from our cultural ways, from our community situation and cultural safety.

I have been doing much work since I came to work in MHACA and Suicide Story. There is much cultural input and pride – my best to bring the Indigenous people from Central Australia, Alice Springs and the Tennant Creek region. We have set up our advisory group made up of our Indigenous mob who have got to look through this material because we are training our trainers to deliver the training. At the moment I am the only one and two on contract.

We are looking at that and have set up two advisory groups. One in the advisory group, we have John from Frontier in Tennant Creek because he has to have regular contact with people on stations - our mob and non-Indigenous and Indigenous. He saw that advisory group to talk about where to with this

resource - train the trainer and a national training program. I have been busy typing up a cultural code of conduct to help our people, our staff, non-Indigenous staff, to work in a respectable way in sorry business, understand general business - sorry care business in general and with inter-agency response. That is the way we see the youth suicide submission Larissa put in. She used our Tennant Creek one word-for-word in that submission and I am really proud of that, especially with the agencies that have been at the table to talk about it. We should be proud we have developed some things that people can use to help both sides.

I would like to see more people come to the table in Tennant. It has been a struggle to get our mob to the table. Let us talk about what is happening in mental health, mental health activities, the training that is going out there, the training that could be provided here and what we can do to support the inter-agency response to suicides. We had poor attendance at the last one.

#### Ms KNIGHT: We had four people turn up.

**Ms SHANNON:** That worries me as an Indigenous person that has come into this area. I worry about the men. I think we need to support the men to come along. They have much trouble coming to the table or even talking about it. You have to listen to them and how they want to set it up for themselves. My personal observation is it is a hard issue for many organisations in Tennant Creek and across the region, across Barkly.

Every time we talk about suicide prevention or mental health wellbeing they brush me off and put me to one side. I am finding it really difficult. I thought I would share this with everybody today and would like to thank the life promotion team of the Mental Health Association of Central Australia for allowing the delivery of information and working with the Indigenous community in both ways - taking in our culture; involving our own people. They have done a really good job and that is why I like this job - we work it two ways. We are getting them to make it meaningful and make sense out of what we are trying to work with here because suicide, as everybody knows, is a very difficult topic, a very difficult issue. That is where I am coming from and, as an Indigenous person based in Tennant Creek and spending much time working with people in Alice Springs and across the regions, we go to meetings.

Last week the Central Land Council set up a meeting and asked us to talk about Suicide Story. They presented MindMatters, the Anangu mob from South Australia, and the Anangu people do not want any non-Indigenous person to deliver MindMatters for kids, it had to be all Anangu people. They got all the information and put it in their framework, their way, and it is working well for those people. I was really impressed with the presentation last week. MindMatters is for the young ones at school, so we have to think about things like that, be very creative, but at the same time, let us stick at it. But the problem I am having, or the issue, I think, is we are not coming to the table. I was sending out e-mails, I have been on the phone reminding people in two days' time we have got this meeting. It is very exhausting.

So, my personal view of this is, some of the things, there has been a local person in this community, that is the Indigenous trainers, like I say, we have got to be going into the face of train the trainer, training other Indigenous and the non-Indigenous people to deliver the suicide story train. How are we going to get the good ones out that are already employed on contract?

That is very difficult. We only have two at the moment, and I think: 'Gee, these organisations, they should have their mental health wellbeing sections or unit or program or something in every organisation', and then I figure that they should come to our reference group. How do we get representatives from each of those organisations committed to attending our reference group? I find in these last couple of years we are really struggling with this in Tennant.

Then I look at the Night Patrol. I have been working for Night Patrol for 17 years in this community. Can there be a way of some of you mob, whilst on night patrol, keep an eye out for the people at risk - let us be more creative - so you can give their names to someone for follow-up or something the next day. I know you are already doing it, but no particular person is assigned to that type of work. Yes, to go around and talk to them.

We see a lot of depressed people out there, and this Crisis Line, I talked to them when I went down to Melbourne to get my national award for the work I am doing. There was me and another lady from Yirrkala, and I went for the Suicide Story one and I met a really top bloke, and they were talking about this Crisis Line and I said: 'Yes, we can set it up in Central Australia.' 'What about language?' 'We already have the Aboriginal Interpreter Service in place.' Why can we not think of something like that, using us? I am interpreter, Heather's an interpreter, brothers an interpreter. We are registered interpreters.

I get calls from Royal Darwin Hospital to interpret for someone, helping the doctor to interpret to one of our mob over there. If that can be done for medical and other reasons, even in a court, why not for this Crisis Line? It is just something I thought I would put out there today.

Madam CHAIR: It is not hard to achieve. Sorry, Karina.

**Ms FILES:** No, that's all right. Valda, when you say having difficulties engaging other organisations in town to get on board with the Suicide Story, have you attended the Barkly youth service providers meetings?

Ms SHANNON: Not yet.

Ms KNIGHT: I do.

Ms SHANNON: She does, Larissa.

Ms KNIGHT: On behalf of MHACA.

Ms FILES: On behalf – and that's to do with the Suicide Story?

Ms KNIGHT: That is to do with the Suicide Story; that is to do with youth engagement in mental health.

Yes, I have seen you there a couple of times.

**Ms SHANNON:** Karina, that is to do with hours I work. I only work four hours a day.

Ms FILES: Yes.

Ms SHANNON: Usually afternoons, so I miss out on a lot of stuff.

**Ms FILES:** But can we extend an invitation on behalf of the Barkly youth service providers to come and do a presentation on what the Suicide Story does, what you are trying to achieve with linking in other organisations, because we have over 20 organisations that are dedicated to the youth that attend, with over 60 people on our mailing list.

**Ms KNIGHT:** I offered to do that six months ago.

Ms FILES: And nothing happened?

**Ms KNIGHT:** Nothing has happened.

Ms FILES: Well, next Thursday is ...

Ms S LAKE: With youth service providers?

Ms FILES: Yes.

Ms S LAKE: There are no outcomes.

**Ms FILES:** Yes, there is. There are a lot of outcomes

**Ms KNIGHT:** Having said that, the youth service providers have been working their butts off to provide their headspace here in town. There has been a lot of lobbying. There are a lot of dedicated people that would put in time and money. MHACA supports it, Mental Health supports it, and there are a lot of organisations that would support having headspace here, but because Tennant Creek is not looked at as a growth town, we are not getting acknowledgement.

Ms FILES: No, we are getting acknowledgement, and we have made leaps and bounds ...

Ms KNIGHT: Made huge ...

Ms FILES: ... with the headspace, but also what the Barkly youth service providers has enabled us to do, as you would know by coming to the meetings, is creating that link between all the youth service

providers in town. In the last 12 months it has progressed even further than what it had before, and there are discussions about how that can progress again, and how we can make it better again to service the youth of this community and the wider Barkly. I will put it on the table, I would like a presentation from MHACA next week on the youth Suicide Story at 11 pm at Nipiyinyu and that gives you an opportunity to engage the separate organisations from Tennant Creek that deal with the youth and get that message across.

Mr SHANNON: I won't be here I will be in Darwin.

**Ms ROSAS:** You know about the meetings that you have for youth? Night patrol is not involved, because night patrol do not get letters from people like ....

Ms FILES: We have sent numerous ...

Ms ROSAS: He is just saying because night patrol works from 5 to 1.30.

Madam CHAIR: Does the invite go to Julalikari? It is up to Julalikari to make sure that night patrol ...

Ms ROSAS: I think I just found out about that last year.

**Ms FILES:** There has been numerous invitations sent to different organisations. Julalikari get sent invitations to come along ...

Ms ROSAS: There is someone that goes from there but they should have also invited me ...

**Ms FILES:** It is up to an organisation to pass it along to the appropriate person to attend these meetings, which I do not think is happening in the case of Julalikari or the Shire, so it needs to get filtered through from the management to the correct area that looks after that ...

**Mr BOTON:** This is one of the most consistent emails I receive in the eight months that I have been in Tennant Creek, which was the Barkly service provider network.

**Madam CHAIR:** One of the issues we have found as we have travelled through all the regions and through our discussions with different people is - and we are going to Alice Springs and we are meeting with a number of providers in Alice Springs as well tomorrow. In some of the regions, there is a whole lot of money in resources going into regions for specific programs, particularly in relation to youth, and one of the things we are keen to do through this inquiry, and what we need to look at is what is all that money and resources doing. Is it getting the outcome? You do not have to be a rocket scientist to know what the answer is to that, but what is happening with that resource?

**Ms S LAKE:** It is because everybody is working as individuals, and staff turnover interferes with connections that are made, and again it is a lack of a cohesive organising centre.

**Madam CHAIR:** I will play devil's advocate here because I am the Chair of the inquiry, but one of the things we have to have a look at and parliament will have to debate about is: how can government policy change its policy if the people delivering the service and on-the-ground are not going to change their policy. There has to be some fundamental shifts and we have to have some hard discussion, we have to be honest about this discussion, and we have got to look at a way forward. At the end of the day, it is easier to blame government or organisations and not look at what we are doing as individuals in this process and moving forward. We all have to do it together and look at where those gaps are, what is happening, and how do we move forward.

**Ms S LAKE:** Sorry, I have had a couple of meetings with Pat Braham from Julalikari, and around youth services, there is a lot of duplication of services. There are many services from outside of – Julalikari is our biggest Aboriginal Corporation; it has a youth development unit, it has the youth diversion unit in it. Then, you have somebody who leaves that service and goes to another service and all of a sudden, those services are attracting the funding that YDU used to get. So what happens with that? Those types of services should not be going somewhere else, so people bidding, going for the same sort of funding and, of course, this person already has the experience so that is happening over there. So, you have two things that are happening, well duplications.

In Tennant Creek, we need to look at what our biggest Aboriginal Corporations are, what our core businesses are, youth development unit lies with Julalikari, Youth Sports and Recreation lies with the Barkly Shire, although there is absolutely been nothing set up there ...

Mr SHANNON: And Anyinginyi.

Ms S LAKE: That is right. Anyinginyi have ...

Madam CHAIR: They also are funded quite substantially in emotional and social wellbeing.

**Ms KNIGHT:** Anyinginyi? Yes, they have their Stronger Families unit.

Ms SHANNON: Yes, Stronger Families.

Ms De ALDI: Do they have any staff there at the moment?

Ms S LAKE: They have no counsellors; they have advertised for counsellors.

Ms De ALDI: Exactly, this is what happens.

Madam CHAIR: So, it fall back on to the government ...

**Ms De ALDI:** You get staff, we connect up with them and it works really well. Then, bang, they go and we are lost again.

Ms KNIGHT: That is where I said we need to be building up our own young people's capacity.

**Ms De ALDI:** Which is, yes, training of our own local people. But, the problem with the training is - and I have just a case in point. My Aboriginal mental health worker would be interested in doing some further mental health training. He has to go out of the state to do that. They have to go far away to do that, when most people do not want to leave their communities.

**Ms S LAKE:** As my daughter when she went to university - leaving Tennant Creek to go to Flinders was overwhelming, hey?

Ms K LAKE: It was really overwhelming.

Ms De ALDI: We need to train here.

Ms S LAKE: They have the Aboriginal support units

**Madam CHAIR:** Well, they do. There are some changes happening now with - what is the medical school in Darwin? ...

Mr STYLES: Flinders.

**Madam CHAIR:** Yes, Flinders. They are starting to do it. However, psychology and psychiatry is still interstate. My daughter had to go away for five years and do her degree in psychology before she could come back. That is the investment we have to be prepared to do with our young people. What I found with my own daughter's experience is nobody is willing to provide a scholarship for those young people to go and to train, and get that skill and to come back with that degree and work. She is the only Aboriginal psychologist in the Top End ...

Ms PURICK: Top End again.

Madam CHAIR: The Top End mental health that covers a lot of that.

**Ms De ALDI:** There is an Aboriginal mental health course - I think it is with some university in New South Wales; they do it through Broken Hill. It really is an excellent course from what I have seen of it. I do not quite know why Charles Darwin University has not set up something like that - of all places, the Northern Territory.

**Madam CHAIR:** There are discussions with Kon Vatskalis, as the minister, to look at that whole Aboriginal mental health workers or psychologist ...

Ms De ALDI: That would be great.

Madam CHAIR: ... and that further training that needs to happen with that.

Mr BOTON: I understand that if you aim high, but what if we aim ...

## [Editor's note: Break in sound for 47 seconds.]

... you could use it as a stride ...

Madam CHAIR: Use it as a stepping stone.

#### [Editor's note: Break in sound for 21 seconds.]

**Madam CHAIR:** That is true, but there is a lot of ex-Aboriginal Health Workers out there who want to come back into the system. They already have that prior learning and knowledge as Aboriginal Health Workers and could come back as Certificate IV. I believe what the system needs to look at - and this touches on what Valda and others talked about - is your traditional healers are not recognised in those frameworks. We get it in the Top End - it is no different in the Top End than it is in the Centre - where you have Aboriginal people who are skilled traditional healers, but the system does not recognise them. What do you pay them? How do you engage them in that? Aboriginal people in communities sometimes would rather see a traditional healer than go to a non-Aboriginal surgeon...

Ms ROSAS: Yes, that's no trouble...

Mr STYLES: Marion, can we get a briefing from a traditional Aboriginal healer?

Mr BOTON: (inaudible) lines for some additional healers, so its very long and the opportunity

#### Banter

**Ms KNIGHT:** I think it goes back to what I said; we should look far more at skills base rather than our whitefella selection criteria and utilise our community skills smartly, acknowledge our community skills, and acknowledge that perhaps it is not full-time employment that people want, but acknowledge that there are many people - some fantastic things have come out of Tennant Creek that have been built up from the community. The community has identified has a need and is willing to put its time, effort, cultural knowledge and cultural safety into it.

Suicide Story is one. Suicide Story is intervention suicide training. The example of our night patrol, which has now gone interstate, was grown first in Tennant Creek by community leaders and community passion.

Ms De ALDI: You have to pay people too.

Ms KNIGHT: Absolutely.

**Ms De ALDI:** And government organisations, or whoever is doing the paying, wants to know they got bang for their dollar and usually want some certificate or something before they pay somebody. How do you get around that?

Mr STYLES: Can I just say ...

**Ms KNIGHT:** We put on trainees, we have traineeships and we grow our own. We look at working alongside people not looking at having formal schooling progression to formal ...

Ms De ALDI: Ideally, yes.

**Ms KNIGHT:** I don't know; whatever. If you talk to your parents and grandparents, 50 years ago the formal schooling was not there, the apprenticeship system was. You learnt alongside someone. It has to

be based in and ratified through the formalised integrity to ensure it is correct training, but this town has proven we can grow our own and we should look at growing our own as well.

**Mr STYLES:** There are several questions I would like to pose to people. Yesterday afternoon I met with many people around town and these are the issues confronting us that relate to what leads to suicide, which is what we are here to talk about.

The first issue everyone spoke about was housing. So, number one in Tennant Creek is the housing issue and overcrowding - all the stuff Geoffrey was talking about. The second issue is youth. Would everyone agree the two biggest issues are housing and youth?

Ms S LAKE: Yes.

Ms De ALDI: Yes.

**Mr STYLES:** The next question I would like to pose goes on what Geoffrey was saying in his submission. It was a very good submission, Geoffrey, I liked everything you said.

In relation to family stress and the stuff these people find themselves in, what I am hearing from a number of sources in town is the number of domestic violence incidents has increased. The reporting has increased but the level of violence has decreased. The education seems to be working where people are now reporting it before it gets out of hand, before the stress levels go through the roof and people explode. Are you finding that? That is what I heard from a number of different organisations yesterday - people are not having the living daylights kicked out of them. Police are arriving earlier and intervening earlier to identify that. I am hearing from other organisations this leads to distress where people just - the whole family falls apart and then you find them hanging from a tree. Is that your experience, Geoffrey?

Mr SHANNON: Yes.

Mr STYLES: With the levels of stress? With the men's stuff you were talking about?

Mr SHANNON: Yes, I was drinker. I gave it away in 1992, but the stress levels are there and it can explode any time.

(Speaking in language)

Mr SHANNON: It is not only the violent ones who drink.

**Ms ROSAS:** Yes, it is overcrowding, unemployment. We have no traineeships. Even the Northern Territory government used to have Indigenous traineeships for people; there are none left. We have one in Tennant Creek offered this year at the Tennant Creek Hospital, and then nothing.

**Madam CHAIR:** With the housing issues, there were a lot of houses refurbished in the camps, in the living areas, so that did not add to any new houses, that just refurbished the existing houses. So let me ask this question following on from what Peter raised about the housing issue: did the intervention add to the numbers, did you see movement from those communities into Tennant Creek? Has it increased or decreased, or has it stayed the same?

**Mr SHANNON:** Well, Epenarra they had trouble there, and they came into town. There were no houses there for them, so those people that came in, nearly 200 people, they overloaded the existing houses in Tennant Creek.

Madam CHAIR: And they cannot go back, can they?

Mr SHANNON: No.

Ms S LAKE: Like Elliott, if there are problems anywhere, this is the hub.

Madam CHAIR: Everyone moves to Tennant.

**Ms S LAKE:** ... Town living area's do not have the infrastructure to cope.

**Ms PURICK:** Why can they not go back to Epenarra?

**Ms De ALDI:** Because it was involved; cultural process and they were told to leave and not to come back, and it will not happen.

Ms S LAKE: Bit like Yuendumu, ay?

Ms De ALDI: A bit like that, yes.

Ms S LAKE: But this is the hub of the problem.

Ms De ALDI: And there are lots of reasons for people leaving communities and coming to town.

Ms LAKE: In the floods, the floods came ...

Ms De ALDI: And then they stayed.

Ms LAKE: ... seven children and everyone from Lake Nash ;;;

Ms De ALDI: We have no resources.

Mr BOTON: Being involved with the emergency relief ...

Madam CHAIR: So there is no temporary accommodation at all?

Ms De ALDI: That is the thing that is the problem, temporary accommodation.

Mr BOTON: No temporary accommodation, no transport.

Madam CHAIR: To take people back to ...

Mr SHANNON: Yes, back to country when they finish.

**Ms PURICK:** A bus service would be nice.

**Mr BOTON:** The bus gets here at two in the morning, and I arrive in Tennant Creek on this bus and I have to walk by myself at night to ...

Ms De ALDI: That is Greyhound.

Madam CHAIR: What time did it get in?

Mr BOTON: Two o' clock in the morning.

Madam CHAIR: 2am. And no taxis?

Mr BOTON: No taxis.

Ms KNIGHT: Many people miss medical appointments because they cannot get to the bus stop.

Ms PURICK: Does the bush bus go to the communities?

**Ms FILES:** Yes, the bush bus does go to the communities, they have even increased their services, too. I think it is more local transport, particularly after hours.

Ms KNIGHT: If you have to go for a medical from here to Alice Springs, you have to catch the bus.

**M GUNNER:** I remember catching Greyhound a lot when I was in Tennant. Nothing has changed. I was lucky enough they would pick me up from the bus stop, so I was ...

**Mr BOTON:** We have told some organisations to make a submission to Greyhound to improve the service and we have had no answer whatsoever.

**Ms De ALDI:** And it is also not a safe depot; there is nowhere you can sit inside.

**Mr SHANNON:** They should go back to the old schedules they had, they used to come at 8 o'clock they would arrive here, in the evening.

Madam CHAIR: It has not changed has it?

**Ms S LAKE:** But even having the availability of a bus service pick-up we have pregnant women that have to go to Alice, because we have no deliveries here...

Mr SHANNON: Amputees too.

Ms S LAKE: Everything!

Mr SHANNON: Come from surgery, coming back on the bus.

Ms S LAKE: Disabled people, we have our cancer patients, and that forms a part of depression.

**Mr BOTON:** I believe this is pressure cooker, you know what I mean, we are talking about issues of suicide and you see all the issues around coming in and this is creating pressure and more pressure in the community and this will explode. This thing will get out of hand.

**Mr GUNNER:** One thing I am interested in, because a lot of issues have been explored today in depth, just in conversation, but one thing that has been touched on but not really talked about is the relationship with police.

We heard some evidence in Darwin which saw police as a risk factor in suicide and we spoke with the Commissioner about what training police have, and they have mental health/first aid training as part of their induction program when they become a police officer and they are probably the only Territory-wide agency that is 24/7, so I am interested in what your relationship is with the police and how you see it working around town, and what their role is.

**Ms KNIGHT:** Training has been offered to the police on suicide and prevention assist, mental health, first aid, and counselling, and time and time again feedback from them is they would love to do it but they are stretched and cannot be released from duties.

Mr GUNNER: But they receive training when they first ...

Ms KNIGHT: Yes, and they would still like to continue to receive training ...

**Mr GUNNER:** The skill set they already have and factor in 24/7 – you are not having any sort of - we would like to identify most people early at school. Obviously, there is a truancy problem in town and the other area where we are most likely to have an intervention occur is amongst family and friends. Often, if you are suicidal, you are distancing yourself from family and friends so tragically often the first trained person who can is a policeman, so I am wondering - do you see much referral from police or the night patrol into services - you do?

## GROUP: Yes.

**Ms De ALDI:** Yes I do, they bring people into their department at Tennant Creek hospital, tend to keep them in overnight because we do not have an after-hours service and we usually see them in the morning. They do not take any chances. If anybody is remotely suicidal, they will bring them in.

Ms S LAKE: And they are very good with the response too ...

**Ms De ALDI:** Yes they are, they are excellent with response, very supportive. It occurred to me that it would be a useful thing if you had a local Indigenous person trained in basic mental health service delivery who was attached to the police, who could go out with them after-hours and provide that extra support.

Mr GUNNER: Like I said, four-level training, that sort of thing.

**Ms De ALDI:** If you have an Indigenous person with somebody who is distressed, it is much better than having – the doctors are brilliant at Tennant Creek hospital, they do a bloody good job - but if you have an Indigenous person there and a local, it would be more effective in engaging...

Mr GUNNER: And have them trained up essentially?

Ms De ALDI: Yes, that would be great.

**Madam CHAIR:** That is a good idea but how does it pose – it is such a small community and everyone is related to everyone. I pose this to Heather, Valda, Geoffrey, or David: how does that create problems if they are your family member and the police have to – they are taken to hospital.

**Ms De ALDI:** I think that is a negotiating thing, because with my Aboriginal mental health worker, he might know people in town and he just lets me know, so then it is something that either I or my other coworker will be involved in, with him in the background giving us historical support. It can be a negotiating thing, if it involves a family member, that person can say, this is my family, my close family, it might be difficult - then the police maybe come to the fall. That will always be a problem no matter what service you have Indigenous people in. Because there are those stresses, but you cannot let that stop us from getting local people involved in service delivery; there should be ways around that. We need to support our Indigenous workers a hell of a lot more because it is stressful working in your own community because you do get caught up in all the stuff.

Mr SHANNON: That is right.

Ms KNIGHT: I think it goes to say you cannot just have one worker, you need more than one worker.

Ms De ALDI: Of course you do.

**Ms KNIGHT:** Because of family, you cannot just say one Aboriginal worker is enough, you need different family representatives, you need more than the one.

**Mr SHANNON:** You know that problem inside that close family member that might be wrong way. You got to get somebody else who is a different family member. ------12:03:39 if it was my cousin that was suicidal or my brother, I would be right one to talk to that person.

Ms SHANNON: Kinship works better.

**Ms De ALDI:** And that would be something the police would learn from you, by working with you; I learn just by picking up, just by being around long enough to pick up things, but it would be ...

**Ms SHANNON:** I took that boy, when I when over to that boy. With our training, we do talk about cultural stuff, we talk about payback, and a lot of people are in fear of talking about suicide prevention or even helping someone at risk because of that avoidance. When we talk about that avoidance, a lot of participants have said it is just a matter of life and death, we just got to go in there and forget about that rule, our cultural law that says you are not allowed to go and even touch that person, somebody away you look, you just got to put that aside. I experience that on night patrol years ago when the old people that was worked with, there is an old man getting bashed; I was not allowed to go near him or even protect him, but I did, because there was this young fella bashing him, and I just went and protected him, I put myself in there. The next day I discussed it with the old people, the old people said: 'No, you did the right thing'. So you got to think about that you know, if it is a matter of life and death, you have got to get in there and do the job.

**Mr STYLES:** Valda, you just raised a very interesting point. I know in whitefeller stuff, our law evolves - as things do not work, we change the laws, which is why we have a parliament. We allow it to evolve. What I am hearing you saying is that some of your traditional laws are evolving into, perhaps, what you see is a little more common sense, where you should not stand by and let that old man just get bashed. You have to say: 'Hey, hang on, that is not right. It is wrong'.

**Ms SHANNON:** Yes, you have to step in there. I was in that situation, even at Mt Theo. We had the same discussion with people at Mt Theo. We went and delivered training there – same thing.

**Mr STYLES:** I joined the police force 30 years ago in the Territory and black fellows never talked about suicide, that was just: 'Oh, no, no one talks about it'.

**Ms SHANNON:** It is still today like that - very much.

**Mr STYLES:** I understand your struggle - 30 years later it has not changed a great deal. But, at least we have some good people out there who are actually now opening up and evolving. We are seeing all cultures evolve all over the world - and you are evolving ...

Ms De ALDI: Yes, and it is happening.

Mr STYLES: ... and I wish you the best of luck.

Ms De ALDI: Yes, it is happening.

**Mr BOTON:** Nobody is reinventing the wheel. Perhaps we are taking a program in the past involving multicultural communities, called Mentoring in the Community, where most of the services like mental health, the police and so on, were providing linkage into the community for these multicultural communities living in Australia, so they can have people who are the connections - and they are not police officers, they are not mental health workers; they are just mentors in the community who do the linking between people at risk and the services that are provided.

This was done in Queensland and it was very successful, especially with new migrants working there. Perhaps a system like this in mental health, where all the providers of services can train or get information to these people who are mentors in the community, and allow everybody else to know what is available, what to look for in a circumstance of an emergency.

Madam CHAIR: Michael, do you have a question?

**Mr GUNNER:** I was just going to go to organised sports. We touched on it a bit earlier. We have evidence in Darwin from Professor Tatz ...

Ms PURICK: Yes, Tatz.

**Mr GUNNER:** ... that probably the No 1 ameliorator of potential suicide is, essentially, organised sport. Often, it is one season only, so there is an off-season. Often, it is male only, not necessarily female. But, organised sports really has to come from the community. Government can support it along the way, but it has to be community driven.

Madam CHAIR: Community driven.

**Mr GUNNER:** What can happen during the off-season and what can happen that involves – they are not necessarily expecting easy answers to that, but ...

**Ms De ALDI:** I was talking to a woman in the ED department a couple of days ago and she related that there was a time when there was a softball team here and she loved playing sport. It made her feel good about herself. There is no sport - she does not play sport anymore; she goes and gets drunk and sniffs petrol. A couple of times I have come across that.

**Ms FILES:** It is a shame that a representative from Anyinginyi Sport and Rec could not be here today, because Adam Drake, who is the new Area Manager - or Unit Manager or whatever they are calling it - actually has some amazing programs he is working on in conjunction with the shire for the midnight – I do not think it is going to be called midnight basketball, but the Friday night games and things like that ...

A witness: The Friday night games, yes.

**Ms FILES:** ... which is going to link in mental health, physical health, sexual health components before they can ...

Ms De ALDI: So, how come I do not know about that?

**Ms S LAKE:** It is with the Stronger Families unit, probably.

Ms De ALDI: But you have no counsellors in Stronger Families.

Ms S LAKE: Well, I am not here to answer any questions about that ...

Ms De ALDI: But there are the ones who do it.

Madam CHAIR: This is what ...

Ms FILES: This is what is emerging and it is still in the pipeline, still applying for grants.

Madam CHAIR: The application is in.

Ms FILES: Yes.

**Ms De ALDI:** Karina, that brings up another thing. I would like our service to be involved in that because part of our job is to be involved in some form of education and support for services or educating. Would we be able to go to your provider's group meeting?

Ms FILES: Anyone is welcome; the more the merrier. Next Thursday, 11 o'clock at Nyinkka Nyunyu.

Ms De ALDI: Because I will see people in the ED department ...

Ms FILES: Yes.

**Ms De ALDI:** ... and then I think: 'Well, what do they do for sport here? I know they do not have basketball'. And you are telling me that they have stuff that is happening.

Ms FILES: Yes, Adam is a regular.

**Ms S LAKE:** Sorry, can I just interject? In our region, in Indigenous sports and rec funding dollars, we only get job package positions which are 0.5 positions. The Barkly Shire, for our whole region, gets 10 positions. So if I make them full-time positions, that is five full-time positions in our seven communities, 16 homelands and everywhere else in between. We received no support for our sports and recreation coordinator so I am utilising my operational funding, the scraps you get for admin, for our regional coordinator. We have no positions for Tennant Creek. Anyinginyi was successful in obtaining three of those Indigenous sports and rec job package positions - .5 positions, that is it.

You have active remote communities where we get six units for out on community, they are .5 positions. These are minimal paying positions. If we are going to look at the high risk periods of weekend work, night work, they are not entitled to attract any penalties for the Saturday or Sundays nights. Anyinginyi is scraping the bottom of the barrel utilising its Medicare money to keep their sports and recreation program active. That is why they are trying to work in with the shire and anybody else who can start doing things on Friday and Saturday nights and get the kids in.

Ms FILES: And much of that is people volunteering.

Ms De ALDI: It is. The majority of it is going to be volunteering.

Ms FILES: Adam will be doing it.

**Mr GUNNER:** I was going to ask about volunteering. When I was in Tennant at primary school we had access all year around. That was a volunteer base not youth re funding or anything like that. It was parents getting together on a Saturday morning.

**Ms FILES:** Which is why it is no longer here.

**Ms S LAKE:** That still happens with mixed netball and that type of stuff. Those things happen, but when we are looking at the community as a whole, when we are looking at what other areas of the Northern Territory are getting, Tennant is fully ripped off; we get no support from anywhere. The sports and rec officer - we use to have two sports and rec NT government officers here. Gone! Serviced from Alice Springs. How? We get one random visit. That is not a reflection on the staff because their region would be this whole Barkly region. They used to do leadership in primary schools with the kids. They used to teach kids coaching, how to play their bat and you would see the development in the kids and the leadership developing. There is nothing in youth services. There are no sports and rec officers, there is nothing.

**Ms FILES:** With the lack paid positions over so many different areas, the volunteers in this community are exhausted. As Sharon said earlier, you will see the same face on X, Y and Z committees and people

burn out. People do not have the energy to be volunteering to run twilight basketball when they are sitting on 20 other committees volunteering to help out because they do not have a paid position.

They are doing it out of love of the community. However, even that love drains eventually and you burn out when you are working full-time. I often joke that you could have a full-time job sitting on committees - there are that many. Everything is volunteer driven.

**Ms WALKER:** Karina, that is not unique to Tennant families. In the Territory and around Australia we are seeing a high number of people willing to volunteer. Someone mentioned a softball competition - I have lived in Nhulunbuy for 20 years and when I arrived there was a very strong softball competition, a very strong basketball competition and both collapsed because the same group of people who were running it week in and week out walked away from it.

Last year in our community a group of women who remembered the good old softball days set up a twilight carnival for an afternoon and evening. They got 16 teams. People were re-energised and we had people coming from Yirrkala and Gunbalanya. This season they ran a trial short season and it worked. I do not know how you do it - it is about reigniting that interest and letting people who have already done their bit put it onto the younger ones and the newer ones in the community to pick it up.

**Madam CHAIR:** You have some fantastic softball players in the community. I have played with them, and you have one of the best pitchers who should have been in the Australian side. Probably one of the fastest pitchers ever who never made the Australian representative side lives in this town. Tennant Creek could be put on the map.

Ms De ALDI: It is the same with baseball.

**Ms S LAKE:** I mean, if we had a position for her, we just had the Ampilatwatja Sports Carnival which had thousands and we introduced softball and basketball; if we had positions of sports and rec officers with someone like that person in that position, what could they bring to the table, what could they bring to development out there? Building leadership, building self-esteem, some of those girls could be picked to represent the Northern Territory, and then get exposure out there. It is all about development and development comes through sports and recreation.

**Madam CHAIR:** That is where I get frustrated. Clontarf is a fantastic thing for our young men, but there is nothing there for young women. I know that our young men are vulnerable, and do not take this the wrong way, please, you men, I know our men are vulnerable, but so are our women. And I get really cranky all the time, don't I?

Mr STYLES: No, you do not, Madam Chair.

Madam CHAIR: Because our young women do not get ...

**Ms ROSAS:** We have microphones running from 5 pm to 1 am in the morning, we see so many kids up at 10 o'clock because the bottle shops close at 8 o'clock or 9 o'clock, and everyone else (inaudible) has to be taken home. But after ten there are kids just like rabbits coming out of the holes at night and they just run amok on the street, they break-in and they make noises and that; so, we sat around and thought about it, just the workers, what can we do for these kids?

One of David's ideas was let us have a disco for the kids from 16 under. So one night we did the disco to just try it and that was our first. We had 77 plus kids in one night - kids were coming out from everywhere – but we cannot hold that for kids every Friday night because we have work to do, but the night that school breaks up, the next one will be on 16 December. But the disappointment for us is we wrote letters to other agencies to attend, to come and support us on this ...

Madam CHAIR: And they have not. Have you tried to talk to the police? Because I know that ...

**Ms ROSAS:** We had police came in there and then they left, because we still have patrollers on patrol. There were only four of us still there, plus our boss ...

Mr SHANNON: The others were not working?

Ms ROSAS: Yes, the others were not working, but we still had our thing, but that was only one-off that we did; we wanted to see how many kids came. There was one person who was under 18, but she was

intoxicated when she came there. We did not see it, but one of the night patrollers had seen her and she grabbed her and took her outside and told her to leave; and she left.

I cannot believe how well it went even though we did not have any support from anyone, and now we are going to try it again. We are going to write another letter and ask them to come to this next one on 16 December.

Mr STYLES: Get your school-based police officer to do it under the guise of a blue light disco.

Ms FILES: We have tried.

Mr STYLES: School-based police officers should.

Ms FILES: No, they will not come out from Alice with all the equipment.

Ms LAKE: The 3on3 VIBE, and the kids loved it.

**Mr STYLES:** Can I just jump in there, Karina. In Darwin the guy who runs the Blue Light disco up there, he goes right out to communities far and wide, down to Katherine and out to Ngukurr, all over the place.

Ms S LAKE: The Barkly youth service providers have tried to.

Mr STYLES: Well, we might be able to, through Madam Chair.

**Madam CHAIR:** We might just check up on that, because I know that I have had police officers who have run the Blue Light disco in Darwin, they have gone out to a lot; I know they have gone up to Maningrida and other places, so we might just check up on that.

Ms S LAKE: Because Epenarra is due to have one shortly.

**Mr STYLES:** Sharon, can I just reinforce that, they actually are. I was at their national conference two weeks ago, I was the keynote speaker, and the report they gave was they had been all over the place - they are still out there; they are still doing it right across Australia and New Zealand. That was at the Asia Pacific Conference in Darwin. So, they are out there, they are all over the place, and I was talking to Ward Tucker who runs it up there ...

Ms ROSAS: Except for Tennant Creek.

Ms De ALDI: Yes, except for us.

Mr STYLES: There you go, except for Tennant Creek.

**Ms PURICK:** Well, we can take that up.

**Madam CHAIR:** We will find out about that. Before we go any further, I am conscious of the time and I want us to break for 10 minutes. There are sandwiches and stuff at the back because we have just over an hour and I want us to get our collective thoughts zeroed in and a little more strategic during the next hour and a bit that we have.

Also, that you are all happy for the transcript – young Lauren's been flat out typing behind. Whenever we do these hearings, take evidence, and when people are participating in the discussions, a transcript is done, so you have been recorded. We make those transcripts available to you to have a look at and to go through in terms of accuracy and that we are not misquoting people or whatever, but those transcripts will be made public and I want to make sure that you are all happy that they are going to be made public.

There are some sandwiches at the back of the room. Do you mind if we all come back at half past, just so we can do the next hour and get this finished. If we can just get something to eat and then come back.

The committee suspended.

The committee convened.

**Madam CHAIR:** Thank you, given how much time we have left, what I thought we would do - and it has been a really good discussion, the last couple of hours - but we really need to hone in. We have certainly picked up a number of useful things and Geoffrey, that submission that was put in, there is certainly some good recommendations and a way forward for us to look at.

Immediate things we can advocate and maybe find out about is the Men's Shed and some things like that and we can feed back to individual members that raised that.

What I thought we would do for this – and Heather has kindly – one of the things we have tried to encourage and we all know just how painful suicides can be and it does not matter whether it is a young person or an older person. The issue of suicide affects all of us and it goes across all races, whether it's Indigenous or non-Indigenous and I do not think we feel any different. I can say as an Indigenous person, as I sit next to my colleague who is a non-Indigenous person, and I do not think that my hurt is greater than Michael's. I think we all hurt and it is something we all have to move forward with.

We have tried to encourage families and others to try – because we do need to talk about it and we do need to get people to be part of that solution. Heather, we have a couple of families in Darwin who are going to come forward and talk to the committee about their personal experiences because we can talk to governments, we can talk to organisations, but we need people to talk about and tell their experience about being on the receiving end of those systems as well, so we can pull together some of that. We have some families in Darwin coming forward and they will talk to us and, as I understand, you would like to share with us your experience.

So, I will hand over to Heather and then we can go forward with any questions.

**Ms ROSAS:** First of all, I work at Julalikari at Night Patrol. I have been there for almost 20 years and I have seen a lot of suicide, you know, come and a lot of family come and go with aching hearts from seeing their family member go through.

The first time I experienced that is when me and Valda was doing patrol and we was in a Night Patrol vehicle when there was an ice-cream van in one of the communities, but nobody noticed nothing. All they were there just for getting ice-creams and that, and when we was about to drive off, Valda noticed there was two foot out of the van and I saw them sticking out and she said: 'Mum, mum, stop, stop.' I said: 'What for?' She said: 'Look like there's a man underneath the van' and then she got out and told a man he was about to drive off - to stop.

When I look back at that, that was my nephew. We saved him once, but we didn't save him the second time, and I regret that. I blame myself for not going forward. It's been sort of hurting me and then early this year, I had problems with two of my nephews, my 11 year old granddaughter, and my younger sister who tried to do suicide in my front yard. With my other nephew, he just went on and on. I rang the police, the police asked me to take him to hospital. I took him to hospital, he came back and he tried to do it again. He has been threatening to do it, he has been climbing the roof and things.

I went everywhere trying to get help. I went to BRADAAG, I went to police station, I went to Anyinginyi, I went to the hospital to try to talk. I just could not get nowhere. Then, I went back to Julalikari to talk to my boss over and over. Then, I asked if she could organise someone to come and cut the trees in my house, which they did. Then I went back. It is very hard for me because I have a mother who will be 82 this year, and she is on dialysis. I have a niece who is 24 and on dialysis. I have a sick family in my house that I am supposed to look after, and I have a family member who is always talking about suicide - a suicidal family member who is always wanting to suicide.

My granddaughter she tried to suicide, but her auntie found her, flogged her, and held her down. She rang me and said: 'Ring the police'. I rang the police, the police got there before me and they tried to talk to her. She just went into the back yard and walked - just sat in that grass and would not move; and just sat there. The police tried to talk to her. I tried to talk to her, the policeman said: 'No, leave it with us, leave it with us'. I just left her, but I was in tears because I am not getting anywhere near close to her to talk to her; the police keep telling me to stand back. They tried everything, she would not open up to them.

What happened was when the police officer said, 'Can you try?', I said: 'I tried to tell you that I wanted to go and talk to her but you would not let me'. So, I ended up going there to her and then I said to her: 'Come here, darling, come and talk to me please'. She got up and wept, put her arms around me, and we walked out. We went to the police station in a police car. I said to her: 'You see these policeman? They

tried to help you but you got to talk to them'. But, at the same time, I was in tears. It is hurting me - an 11-year-old girl. Her father did suicide and she thinks that is the way to go when she goes through a lot of things - two years, like something happening at school. I do not know but I will soon find out.

But, then, I took her to the hospital and I sat down with her and talked to her with the nurses. She would not open up to the nurse. Then I sat down with her and spoke to her. I sat there for hours and hours just talking to her and, finally, she started talking to that nurse. She spoke to that nurse and, then, she said she was going to get mental health nurse to come and talk to her. The next day, I took her back in and there were two people who walked up there to talk to her. I was still hurting even though her grandmother came up and spoke to her. I said to her just stand back and let them talk to her, so we stood outside and waited and waited for them. They spoke to her. She opened up.

Thank you for going and talking to her then. She went back to my niece, who is sick, and I explained to her: 'When you do this to mum - that is a young mum, her mum's sister. I said: 'When you do this to mum, was mum on dialysis? She has one foot in the grave; you can kill her if her blood pressure goes up because the potassium goes up, you cannot stop her, she can have heart attack'. I explained to her all that and she went back and said sorry to her.

A week later she came back and said to her: 'Mum, can you put me in the hostel please'. Put her in the hostel. Now, she is in the hostel, which is good.

But her brother, my niece's brother, my nephew, just went on and on and I could not get help for him. There is no way anyone could help me for him. So I said; "If you want to kill yourself, kill yourself"

Talking about suicide and preventing suicide, what can you do to a person like me who needs help? No counselling. I could not go through counselling because there was no one there to counsel me, and it is not - I put up with this every week night and day. I work full-time at Julalikari with night patrol and I also work part-time with the hospital. I cut down my hours to work in the morning with Julalikari until 12, then from 12 to 2 at the hospital, and then I go back to Julalikari at three to catch up the hours I am supposed to work at night but they call me out in the morning as well to do it. With a full-time job plus a part time job - family member in the house - to put up with someone who is suicidal, threatening suicide, with no help, no counselling. I see many people sit around talking about suicide, but for me with my aching heart I have no one. There is no one there to do counselling. That is how I feel.

When people start talking about suicide I look back to this. It is hurting me and I am not getting anywhere. That is my story; I put up with all of this. I reported my sister and ended up putting her in hospital. The doctor had to deal with her, what else can I do? Next time I will not stay here. I will call her or any of my family members who think about suicide – that suicide line. I may not save the next person.

Yesterday a man ran in front of a truck because of domestic violence. That brought it back to me, thinking about my family and what is going to happen to my family. I try to put all this together and it is hurting me because I am not getting any - we have no counsellors here - going through all this. We cannot get anyone in to BRADAAG voluntarily; they have to walk in and commit themselves, get someone to put them in, or go through court to put them into BRADAAG. There is no other counselling service.

That is my story, it is hurting me. Even my 11-year-old granddaughter tried to do it. She was on the roof with a rope and that is not - you talk about teenagers, this one is just getting into the teenage years and it is very hard. My seven-year-old grandson, seven today, every time he gets a flogging for doing something wrong - we smack him: 'I go kill myself, I go kill myself'. Where does he get that from? It is not from me because I do not say those things. Now I have many family members lining up to do these things. To my nephew I say: 'Just go kill yourself; I do not care, I have had enough'. Family members do not say that to someone you really love - tell that person: 'Go kill yourself', but I did. I had no help.

This is my story. You mob think about it. You can prevent all this, but what about a loving person who wants to do something for a person she really loves and support for that person that is going through it with me. Someone like me who is going through - never had counselling.

**Ms PURICK:** Like caring for the carer.

#### Ms ROSAS: Yes.

**Madam CHAIR:** Heather, I think you and all members of the committee thank you. When you were telling us about your 11-year-old granddaughter, sometimes you cannot comprehend. We had Dr Rob Parker, who is a psychiatrist, I think he is the Head of Psychiatry in the Department of Health, we had him

last week. One of the areas I am interested in exploring, because have suffered it myself, is post-traumatic stress. I believe there are so many of our people who suffer from post-traumatic stress, and we do not see it until something hits us, and then the flashback comes. I never ever recognised it, and that is something that I have wanted to pursue amongst our people for a long time, because I believe we have layers upon layers of grief and trauma that we have never dealt with.

Ms De ALDI: It's a huge problem, yes.

**Madam CHAIR:** Yes, I believe across society, and people do not deal with it. I have never been able to deal with mine until I got some serious counselling and support, like you and many other carers, like Kezia was saying.

Ms PURICK: Care for the carers.

Madam CHAIR: Yes, you are the carer; you are caring for people.

**Ms ROSAS:** I know I have all these things still come to me, but I know where Valda and Larissa's office is; it is just around the corner from my office, so sometimes I just go there. I have always called Valda over the phone and she says: 'Mum, come around', and I go around there and sometimes I just talk to her in language, just tell her that I'm proud of her and then after a while I talk in English so she can understand; I don't want to put her out, I bring her in as well.

But it is very hard for me, Marion, I tell you. Maybe not for me, but just think of the others who are out there and going through the same thing.

**Ms De ALDI:** That is the issue; there are no services specifically for this sort of situation. It should not be pathologised, it is a human response to an incredible amount of stress and grief and loss, and it does not need to be pathologised – it is a community issue, it is a social issue and it is something that needs to have a place where you feel safe to talk about it, and share your sadness. A tablet will not help that; it is a talking thing and that is where we rely a great deal on social and emotional wellbeing. We have nowhere to refer people who have those issues.

Ms KNIGHT: We have discussed though, women'.

Ms De ALDI: Yes, and if ...

**Ms KNIGHT:** ... it is a long way.

**Ms De ALDI:** Yes, and the problem with it is that – say with relationship counselling, there is a non-Indigenous relationship counselling service based in Alice Springs, but they only do it by phone. They might get up here if they can - if they can - but they're not sure when they can get up here. Relationships are a huge issue, but there is no service.

Ms FILES: There's no counselling service at all.

**Ms De ALDI:** I would love to be able to, but there are three of us, and we cannot take all of that on – it is just impossible - yet there are other services in town that have sort of quasi ...

**Ms KNIGHT:** But even those services in town are feeling exhausted and overwhelmed to the limits, at absolute stretching point of their capacity. It is like a balloon that can only stretch so far, and it has been a really hard 18 months in this town for many people. There has been a lot of traumas, a lot of anxieties, a lot of stresses that are layered on top of generational stresses, and there is nowhere to go – there is absolutely nowhere to go. People from communities come here looking for help.

I was just saying to one of the gentlemen here, we are the equivalent of from London to Paris away from the nearest help. In fact, Paris and London are closer than Ti Tree - you get as far as Ti Tree if you go from London to Paris, and that is one hell of a distance in international distances; to think of trying to build capacity, and we aren't the major centre for this whole region. How would it be if everything from London covers that circle? You cannot do it no matter how many resources; you still have to help build strength in the community. This community is incredibly strong; it has some incredible powers and wonderful people. Imagine yourself trying to support three, four generations with histories of trauma and still being able to stand and talk about it. That shows you immense strength but you can only do that for so long without needing some extra capacity and some help. And we really need to start looking at the grass roots and supporting every person in the town as a unit to build strength and capacity. It is not from want of trying, it is not from the passion, it is not from the want and the enthusiasm of people in town, it is just the sheer overwhelming amount of that has been delivered.

Ms FILES: Terribly sorry, I am going to have to run.

Ms KNIGHT: Catch you next week.

Madam CHAIR: I forgot to ask Billy what organisation he is with.

Mr WALKER: BRADAAG

**Ms WALKER:** Billy, could you tell us a little about that organisation.

Madam CHAIR: I was just going to ask that,

Mr WALKER: BRADAAG is a -----1:01:32

Ms WALKER: How long has BRADAAG been working?

Mr WALKER: It has been there for a long time. I have only been there for a few weeks.

Ms WALKER: So admission there, did I hear correctly that it would be on a voluntary basis?

Mr WALKER: Yes and its only if your 18.

Ms De ALDI: Yes, it is for adults.

**Madam CHAIR:** And that is a major issue if you have young people who have serious addictions, there is no where to go.

**Mr WALKER:** We have educational sessions there but when you are dealing with someone who is, even someone at 18, you are still enjoying drinking, going out and socialising; telling them about the effects of alcohol and what it does, it is alright it. BRADAAG works for the more mature people.

Madam CHAIR: No petrol sniffing?

Mr WALKER: No, most stay out of it.

Madam CHAIR: Is petrol sniffing an issue in this community?

Ms De ALDI: Comes and goes.

Ms ROSAS: We might have one or two from the outside.

Ms De ALDI: Yes, but it is stopped

Mr WALKER: Still goes on.

**Mr BOTON:** I started yesterday and I will begin with petrol sniffing in town and ------1:03:09 program and that was yesterday.

Madam CHAIR: You had a meeting yesterday?

**Mr BOTON:** Yes I started ------1:03:18 yesterday. I am not going to venture and give you information on that since I am halfway through the guidelines of the program.

**Madam CHAIR:** It seems like the community deals with it quite well; that is the beauty of a small closed community that when it comes in people usually know which kid is sniffing and you can jump on them straight away.

**Mr BOTON:** Tomorrow, I jump on a troopie, and see around - will visit two communities where it has been noticed that something has been going on there and we are going to check it out. Apparently, there is

some break-ins here and there but as the news ------1:04:00we will see what happens and we will get an assessment, a proper assessment.

Madam CHAIR: Has anyone else got anything further you want to add?

**Mr BOTON:** The Suicide Prevention Group could be formed under an interagency basis, especially if one of the organisations in town can assume the coordination of debt. I know most of the services require an external coordination and a person of contact who can be.

**Ms De ALDI:** I am a bit hesitant to focus solely on suicide. I know that is the end result of all of these issues that we are talking about. If you focus just on suicide as such, what happens is, people tend to shy away from it, and it is highlighting it in a big way. I know we need to do that, but we have people and kids who know that is a way to get attention immediately; I am going to kill myself, I am going to kill myself, it is a learnt thing.

Madam CHAIR: And that is when you will get the clusters.

**Ms De ALDI:** Yes. I would love to have some sort of group that is dealing with social and emotional wellbeing. I like that term; it is safe, it is acceptable to most people, and it includes a whole pile of things.

**Ms KNIGHT:** MHACA is happy to keep that and to use our reference group as to forming a function with that group. We need community engagement, we need you to come along. I am happy to call a meeting next week. Please, you all know my e-mail – it is not for ------1:05:45. Please come back and let us organise it and have a really good, heated discussion about what we can do and what our expectations are to do.

I suppose, in a demographic of 3000 people, if it was based in the middle of the city, there would be a multidisciplinary hospital-based unit, probably, that would deal with the problems of that particular demographic group. It would also have the capacity of things like psychologists on tap; it would have occupational therapists; it would link in with youth departments; it would also be able to grab its pool of funding and use it smartly. We have tried, on several occasions, to have a peak group that can attract peak group funding, but we are tending to work as little individual units because that is how we are funded.

Youth - again, is it from 12 to 25-year-old age group; is it from 10 to 18? Your definitions and your terms, for whomever your funding body is, are quite often limiting who we can or cannot help. Yet, we all want to actually want to work as a town unit. There is this huge ...

**Madam CHAIR:** But, if you are going to look at social and emotional wellbeing across Tennant Creek, do not get caught up on the terms of reference as such. In looking at this issue, separate from my role as the chair of this committee, I am also the Parliamentary Secretary for 2030 which looks at government planning across the Northern Territory. I am willing to come and sit down with the organisations, do a session where we can look at and brainstorm this a bit more. That is planning for infrastructure and for growth in communities. All right? So, I am willing to do that. I can write to many of the providers we have here, and look at a date on which I will come back down and we can start looking at some of this.

**Ms KNIGHT:** There are two other peak bodies that it would be really interesting to get involved. I think you have all heard me say this: alcohol management planning group, our youth providers networks, and our mental welfare social and emotional wellbeing group need to meet – that is three - at the forum in town to talk through - but not just a talkfest; we want to see some action, some results and a town game plan. It is no use talking; there has been talking for years. We are not going to engage our community unless we can come up with, at the end of a forum, some concrete funding and social outcomes relating to that ...

Madam CHAIR: To bring forward. That is right.

**Ms KNIGHT:** So, if that is what you would like to come and assist us with, I am sure we can work together very early in the new year to have that organised and funded.

Madam CHAIR: In the New Year, or you want to do it before Christmas?

Ms KNIGHT: If you want to do it before Christmas, we could try.

Mr BOTON: No.

Ms PURICK: No.

**Ms De ALDI:** Carlos is saying no.

Mr BOTON: Do not offer; we will grab it.

Ms De ALDI: I am real tired.

**Ms KNIGHT:** People at the moment are exhausted. there is the need to build the capacity and hope before Christmas. If we can work ...

Madam CHAIR: That means we can all have a rest at Christmas.

We can have a rest at Christmas then.

**Madam CHAIR:** Well, I do not know about you mob but, for me as a local member, let me tell you, for someone who is a local member of a bush electorate that is usually the worst time - Christmas. All right? Because for bush people it is when the biggest stress comes on families in the bush. The phone calls I get from women, even from some men - families. Families find Christmas and New Year really hard to get through. It is usually the worst time.

Ms PURICK: And urban areas, because Christmas is always ...

**Ms KNIGHT:** There are expectations of how good it should be and it does not always happen that way. If anyone is free, I propose we look at setting a date for the second week in December – the week ending the ninth.

**Madam CHAIR:** No, leave it until the New Year. I will touch base with you, Larissa. I will get your details, and others, and we will pick some dates. However, if you keep putting it off there will always be excuses and people find something else to be busy with.

Even if you start off small, write down some outcomes and then you can move forward. That is how it should be done. Start off with a small group, put down some things you can get your teeth into, that is how we move forward.

Mr SHANNON: Can we ask Red Cross Australia to be involved in this too, please?

**Madam CHAIR:** That is if they are here. Geoffrey, start off with the group you have first and then expand and build on that. If you try writing to everyone it becomes bigger than Ben Hur.

Mr SHANNON: Yes.

**Madam CHAIR:** You are better starting off with a small group of committed people who want to do something and then build on that and move forward.

**Ms KNIGHT:** We have been invited to visit the youth peak group. Would anyone like to get together next Tuesday in my office before that meeting on Thursday to discuss what we would like to take to the table? Let us make it 10 am in my office and see what we can work together for. You are all welcome.

Mr BOTON: 10 am which day, Larissa?

**Ms KNIGHT:** 10 am on Tuesday.

**Madam CHAIR:** Thanks very much, all of you. We will make transcripts available to people. The Secretariat has contact details for everybody. Thank you for making the time to talk to us and engage with us.

I will talk to you about coming back and a separate thing.

Thank you.

The committee concluded.