Research

Intervention? What does that mean for us?: Perspectives of Remote Indigenous Child Care Workers

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Abstract
This paper reports on findings of a participatory action research project that sought the views of Indigenous children’s services workers regarding the recent Australian Government Intervention into remote Indigenous communities across the Northern Territory (NT) of Australia. Early childhood staff at the Batchelor Institute of Indigenous Tertiary Education (BIITE) and children’s services students from 15 different communities worked collaboratively to reflect on what they knew about the Intervention, how it affected their work with children and what it has meant more broadly for families in their communities. Few published accounts are available from the perspectives of Indigenous early childhood staff and parents in remote Indigenous communities. While not claiming to be representative, findings from this project can make an important contribution to the ongoing debates surrounding on this topic, from both positive and negative perspectives.
Introduction

On 21 June 2007, the former Australian Government announced the Northern Territory Emergency Response (NTER) an initiative meant to protect Aboriginal children from abuse and to build the better basis for their future. The NTER, commonly referred to as ‘The Intervention’, stemmed from attention given to recommendations of the Little Children are Sacred report from the Northern Territory Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse (Wild & Anderson, 2007). The report recommended that ‘Aboriginal child sexual abuse in the Northern Territory be designated as an issue of urgent national significance by both the Australian and Northern Territory governments...’ (p.7). The Intervention was introduced during the lead up to the Federal government elections on the 21st June 2007 and received bipartisan parliamentary support. With the change of federal government at the election, most NTER measures were endorsed in full and the Intervention continued. On the 6th June 2008, the new government announced a comprehensive and independent review to investigate what aspects of the original Intervention plan were working and on the 13th October 2008 made recommendations for change (Commonwealth of Australia, 2008). This research took place before the review and results were provided to the review board.

The participative action research project involved twenty-five children’s service workers representing fifteen communities across the Northern Territory. Data collection commenced in October 2007, four months after the Intervention began, and again at the twelve month point. Over two action research cycles, participants identified issues relevant to their communities and made specific recommendations for ameliorating perceived negative impacts of the Intervention. They also developed a power point presentation that summarised their views and which was delivered at a number of public forums including conferences in the NT and nationally, as one way to support children’s service workers to better understand the Intervention.

Three questions underpinned this research:

- What do you know about the Intervention?
- How is the Intervention affecting your service?
- How is the Intervention affecting your community?

The research aimed to support remote Indigenous children’s service workers and, through them, their communities, to better understand the meaning of the Intervention during a time of confusion and anxiety. It provided an opportunity to voice their opinions, beliefs and understandings to audiences beyond their communities, including policy makers.

Background to the project

The Intervention

In response to the Little Children are Sacred report (Wild & Anderson, 2007) the Federal Liberal Government mandated five Bills for ‘a comprehensive, compulsory Intervention in 73 Northern Territory Aboriginal communities’ to overcome child abuse in some Aboriginal communities (Brennan, 2007). Virtually all aspects of remote community life were affected. The Bills abolished the Community Development Employment Program (CDEP) through which most Aboriginal people in remote communities...
have been employed in recent years and as were most of the participants in this project. The Bills provided for the mandatory quarantining of 50% of welfare recipients payments making them available only for food and essentials. If recipients' children did not attend school, 100% of their welfare payments could be quarantined. Australian Federal Police were deployed as ‘special constables’ to the Northern Territory Police Force increasing a police presence significantly in many communities, often where none existed prior to the Intervention. They removed the visitor permit system governing access to Aboriginal land previously administered through Aboriginal Land Councils thus enabling open access to communities by a range of individuals. They took control of prescribed townships designated as part of the emergency response through five-year leases. It was portrayed by commentator Frank Brenan as ‘law making at Canberra’s worst’ (Brennan, 2007, p.1). In addition to the above measures, the Intervention required alcohol bans (although most communities were already ‘dry’), the banning of pornography and the mandatory medical examination of all remote community Aboriginal children under 16 to check for child abuse. Brennan (2007) also notes that the very first recommendation of the Little Children are Sacred Report, the report used by government to justify the ‘emergency’ nature of the ‘Intervention’, was ‘the critical importance of governments committing to genuine consultation with Aboriginal people in designing initiatives for Aboriginal communities’ (p.1). This genuine consultation did not occur.

Widespread criticism resulted from many of these measures (see Altman, 2007; Ring & Wenitong, 2007; Trudgen, 2008).

Aboriginal communities, where people had lived in relative isolation, were suddenly overrun with non-indigenous government intervention workers including a strong army presence deployed to support these Intervention workers. The changes were rolled out rapidly with minimal consultation with indigenous people, creating significant anxiety, confusion and fear.

Bachelor Institute of Indigenous Tertiary Education (BIITE)
BIITE is Australia’s only national Indigenous tertiary education provider and has served Aboriginal and Torres Strait Islander peoples from every Australian state and territory for more than thirty years. The central task of the Institute is to provide tertiary education and training that engages students in the development of appropriate responses to issues of cultural survival, maintenance, renewal and transformation within national and international, social, political and economic contexts.

There are over 100 Indigenous children’s services workers studying at BIITE. At the beginning of the Intervention, a cohort of indigenous child care students came to a workshop at the Institute. Some students were experiencing the Intervention first hand and found it impossible to study. Their lecturer understood that they needed to talk about the Intervention and express their anxieties, including the fear that their children would be taken away through the Intervention. Even where the Intervention was in full swing, many students stated that no one had yet talked to them directly about what the Intervention meant or how it would impact ultimately on their work and communities.
Lecturers decided to support students through a participative action research project. Outside of communities, few people were aware of how Indigenous people felt about the Intervention. Most media sources did not report this perspective. This research aimed to address this situation by documenting and disseminating remote community participants’ views and making them available to the general public, government agencies and the Batchelor community. The research also aimed to provide support to the students during a difficult time of change and upheaval through engaging them in discussions about their concerns and assisting them to find answers to their questions. Ethical clearance to conduct the project was sought and granted through the Institute Research Ethics Committee.

**Methodology**

A participative action research approach was adopted for a number of reasons. It supports research participants to engage in reflection and action regarding issues in which they have a vested interest. It has the potential to empower and bring direct benefits to research participants. It is emancipatory in that it leads not only to new practical knowledge, but also to increased capacity to create knowledge with the process being as important as the product (Reason & Bradbury, 2001). According to the Secretariat National Aboriginal and Islander Child Care (SNAICC) (2004), Indigenous communities often prefer action research methodologies because of the degree of control available over research directions and outcomes. Effective action research methods rely on the development of close and trusting relationships between research participants and researchers.

Five characteristics of Participatory Action Research (PAR) are identified in the Animating Democracy Initiative (no date, excerpted from Yankelovich, 1999). The characteristics ensure that the research is:

- **Owned and controlled by the community.** As researchers we can offer one of many perspectives which community members consider as they document and interpret what is happening to them.
- **Defined by a need for action.** Participants initiate a project to address an issue or act on a possibility, and the action is guided by that goal.
- **Useful and meaningful.** The research creates knowledge that is useful and meaningful and validates local knowledge. It recognizes that participants are capable of analysing the situation and developing solutions to the challenges they face.
- **Reflexive about the creation of meaning.** The research process provides ample opportunities for participants to share, reflect, analyse and review their perspectives as well as those of their communities.
- **Flexible and iterative.** The shape and focus of the research changes as participants focus and refocus their understandings of what is really happening.

In line with the above characteristics, this project supports children’s service workers to identify issues surrounding the Intervention, provides an opportunity for participants to voice their concerns, seek
information, and identify answers resulting in appropriate action.

Research team
Five early childhood lecturers and Remote & Regional Children's Services Support Unit (RRACSSU) staff conducted the research in collaboration with participants. Staff are familiar with the issues impacting in communities through their training and support visits to communities and have developed strong trusting relationships with participants and Indigenous communities.

The project relies on shared values and principles for undertaking research with indigenous people as outlined in the recently released National Statement on Ethical Conduct in Human Research. These include; ‘respect for human beings, research merit and integrity, justice, and beneficence’ (NHMRC Guidelines, 2007, p. 11, Section 1).

Participants
The original plan to conduct research in communities proved to be impractical. Communities were in a state of confusion and, therefore, reluctant to give permission for the research at a time when the scope and intentions of the Intervention were unknown. The data collection strategy was revised. Child care workers were invited to participate in the research while undertaking training and professional development workshops at BIITE.

Participants self-selected into the project through a call for expression of interest. A total of twenty-five participants from fifteen communities chose to be involved. All participants were aware that their participation was voluntary and not a requirement of their professional development or training activity.

The majority of participants' views were tape recorded. Participants uncomfortable with the use of tape recorders had their views recorded through notes written by BIITE staff or wrote their own notes. Notes were read back to participants to ensure they accurately reflected their views. Some participants did not understand English sufficiently to participate in the main group. Interpreters from amongst the group were identified and worked with small groups of same language speakers to ensure that all participants could provide their views.

Data Collection and Analysis
The diagram below represents the research process and action research cycles that occurred.

Two cycles of data collection occurred through discussions and reflections about participants’ perceptions of the Intervention. The first cycle (October-November 2007) took place at three separate workshops and the second cycle (July 2008) at one workshop. Questions to prompt discussion were open-ended to
enable personal reflections and experiences to be shared. The questions were;

What do you know about the Intervention?

How has it affected your service?

How has it affected your community?

Participants discussed questions with a partner or in small groups with BIITE tutors and lecturers assisting participants with low literacy.

Between workshops, tape recordings were transcribed and notes reviewed. Responses were collated. A summary chart recording the number of similar and different responses and a list of verbatim responses was developed to be used in the second cycle.

During the second cycle of research, over a three day workshop, participants able to attend reviewed the data summary. A similar process of discussion and reflection followed. Participants were placed in small groups to collaboratively analyse the data for recurring themes with the support of one BIITE researcher for each group. They reduced the data to those statements that best reflected themes and recorded these using the words of participants. Participants then developed a PowerPoint presentation to reflect their findings and as a reporting mechanism. On the final day of the workshop they presented their findings to an audience of thirty BIITE faculty members and students who offered their reactions and insights based on their own experiences of the Intervention. This feedback helped participants to clarify and refine their ideas and was added to the PowerPoint.

During the data analysis workshop participants also discussed two additional questions:

What more would you like to know about the Intervention?

What more can be done to help you to understand the Intervention?

Issues that were raised were discussed and suggestions for addressing these were identified. Some suggestions included feedback to community councils, reporting findings to a national early childhood conference and to the committee charged with reviewing the Intervention.

Participants unable to attend the analysis workshop were faxed a copy of the summary. A BIITE researcher telephoned them to record their comments. Some participants and BIITE researchers decided to present findings at two early childhood conferences as a way to disseminate findings more broadly. Presentations occurred and feedback was sought from audience members on both occasions. The first presentation entitled *The Intervention: What that means for remote Indigenous Children’s Service Workers in the NT* was presented at the 20th NT Children’s Services Conference, Sustaining Childhood, October 6-8, 2008. Another, entitled *The Northern Territory ‘Intervention’: struggling to imagine and practice citizenship rights for children and adults in remote Indigenous communities*, occurred at an international conference in Melbourne (CEIEC 2008 International Conference: Honoring the Child, Honoring Equity 8: Young Citizen(s), New Citizenship(s), Melbourne, November 13-15, 2008).
Audience members’ feedback again assisted participants to refine findings. Analysis of all the data culminated in findings that could be used to construct a range of recommendations and information resources for communities.

**Findings**
Findings have been organized according to the guiding questions.

**Question 1: What did child care workers know about the Intervention?**
Almost half of the participants did not complete Question 1 at the first workshop. All completed it at the workshop in July. The majority claimed that the Intervention was, and continues to be, about stopping child abuse and for helping communities improve child health through health checks. Negative consequences of the Intervention were high on the response list. Comments included the following which were chosen as best representing these views. “CDEP has (or will) change because of the Intervention”; “…land permits will be removed”; and “…people’s money will be quarantined (holding back money) when they’re on benefits”. The issue of quarantining money was supported by more participants (7) in the second workshop. Three expressed concern for pensioners who had to suffer the consequences of quarantining along with everyone else. “Pensioners feel targeted [when they don’t have responsibilities for children] by quarantining” The removal of land permits as an outcome of the Intervention had less support in the second workshop. Equally there were positive responses stating that the Intervention would improve school attendance; fix problems with people who take drugs, alcohol and/or use pornography; and “fix up or get [provide] better houses in communities”. Fewer participants thought the Intervention was for repairing houses in the second workshop. One person claimed that the Intervention was an “unwelcome entry of one country in the affairs of another”. In the final workshop, three people stated it was still unwelcome as compared to three who held opposing views.

CDEP and the loss of work was a prime consideration at both workshops: “There are 16 workers working now, but with the new system some of us will lose our jobs.” “CDEP program finished suddenly. We knew it would happen, but not so quickly.” “There were changes in processes even when it was happening.”

In July, another childcare worker explained the uncertainty surrounding the inception of new NT governance arrangements that collapsed local community councils to create what is known locally as ‘super shires’. “With the new system, some people lost jobs at one community but it might be because of the new Shire arrangements that started on July 1, 2008. They had to wait for a new child care provider (management) to take over before a new contract for employment was organized.”

Financial constraints continued to cause; “Money worries – moving off CDEP, having to support large number of children on less money, changes in how to get paid.”

At the second workshop, one participant claimed that the closing down of CDEP meant that the childcare centre also closed. She continued: “Then a new way to pay staff was put in place. Some of the
original child care workers didn’t come back to work and they were qualified staff. They had finished Cert III and Cert IV in Children’s Services.”

Generally, the treatment of children was thought to have been misunderstood by the government and that while unfair treatment might be prevalent in some communities, it was not the case in all. They come to check about our children and some of the parents were talking about their own children, (that) there is no child abuse here, to the army. The government feels only indigenous kids need to be examined, get abused, lack education, and (have) health problems. The government are not listening to the voices of people against abuse, but I feel they have the wrong idea of thought (to) deal with these issues; which are very worrying.

Government says that the money is spent on other things and not on children, some parents do this, but not all parents. Even pensioners (such as my Grandfather) whose children have grown up and left home, are still getting their payments quarantined. The purpose of the quarantining was for families to buy food, clothing etc for their children. People were not looked at as individuals, instead everyone was put in the same bucket. The government has assumed all people living in remote communities can’t manage their money.

Concerns over the powerlessness of the army or police to stop community violence and abuse were highlighted by some and continued to be a concern twelve months later:

If the army and police are present at community then why is fighting and violence and abuse still happening? Why are the children still hungry and not clean and healthy? Why is the food mark-up in community shops so high? Why is there not within budget food for families to buy?

If the Army are present why are the people still fighting throughout the night without any intervening?

The dearth of information surrounding the Intervention was an enduring theme: Childcare workers were unified in their complaint that family members, local traditional owners and local community members had insufficient information and needed have a better understanding of the Intervention, what it meant to children services and how it directly affected them. Government people came to (our) childcare to visit, they only talked to white people. Government put in action and outcomes, but not giving the communities information on how to go through the processes.

At the time of the first workshop, fear and confusion left many communities feeling threatened. A major hindrance to change was the lack of communication, education and negotiation directly with Indigenous people.

People were unhappy and scared because they don’t know what to expect. Intimidation and stand over won’t work!
The way they send in forces (for example, Army and police) is making the ladies, children and families very scared and confused. People from the government and other agencies are able to come into (my community) and pressure the people in the community to follow (the) Intervention. My understanding is that our aboriginal communities are feeling very threatened, feeling that their culture and traditions are under threat and that their land and environment may be taken away. The Intervention happened too quickly.

However, in July, twelve participants claimed that much of the fear had dissipated – they no longer lived with the fear of having their children taken away and communities were not “living in fear”.

Land rights were also felt to be under threat and communities were left to ponder the outcome:

- Land leases for 99 years are being signed? Why?
- The government wants to take our land to destroy our site.
- I don't understand why they stopped the permit systems and getting land for 99 year leases.

One childcare worker expressed concern over the possibility of land being seized: “If you get caught for alcohol / drug running, your land will be seized (traditional land).”

**Question 2: How is the Intervention affecting your service?**

Childcare workers expressed a high level of stress as a result of people asking questions, payment changes, new rules, feeling angry about problems being ignored for so long and from worrying about some families.

The most positive outcome from the Intervention in response to this question was the increased numbers attending services for children:

- More kids are coming to Childcare and Preschool and Transition (first year of schooling in the NT for 5-year-olds).
- We are busy now, before 6 or 7 (children), now 11 - this is good.
- I've been watching TV and been listening to all the indigenous people in each community and they have said good things are happening like kids going to school.
- It makes me feel happy because the kids are too bored at home and now they all go to school.

Others had noticed a decline in the prevalence of drug and alcohol abuse in the community and that some houses had been “fixed”. Five participants stated that culturally, the problem was complex: “Family violence and child abuse occurs outside the (child care) service, but sometimes it can be very difficult for an indigenous person to speak up or report on any matters (of) concern because it might cause problems towards other families.”

Specifically, in relation to children’s services it was reported that while there was “new” money for services and new ways to pay staff, the new conditions meant longer hours, inappropriate work conditions, increased workload and continuing lack of facilities such as water and toilets. Parents and staff were often seen as more emotional and perturbed than they were prior to the Intervention.
and this was thought to have a negative influence of the behavior of the children in care.

Children [are] more unsettled and misbehave because parents are worried at home and interruptions to the daily and weekly programs due to Intervention team visits. Staff are unsettled because the children are unsettled. Staff worry about job security and about being watched by business manager.

Question 3: How does the Intervention affect your community?
Eleven participants were concerned that they did not have any form of official identification papers. Eleven also expressed the concern and apprehension of their communities.
Confusion, rumors and frightened people.
People frightened because removal of CDEP.
Community worried, lack of trust, fear the children will be taken away.
People need interpreters to understand.
More surveillance of people because they need IDs to buy a drink...

Others were extremely uneasy about the lack of attention being given to the health of community members and the few changes in ensuring reasonably priced food availability and healthy selection.
Others expressed distress over the lack of information for children and staff regarding their rights when it came to reporting abuse. Interpreters continue to be requested in order to make information comprehensible to communities.

Things had not necessarily changed for the better. The problems identified included:

- **Lack of action** -- Unrest, fighting, 'rough people' moving back into the community making the 'dry' community 'wet'
- **Lack of money** -- gambling. “The Intervention hasn’t stopped this”. Insufficient money for food. Issues around the filling in of timesheets and CDEP are still unresolved.
- **Lack of adequate housing with fencing** -- “Housing still inadequate and it’s too expensive to live at outstations.”
- **Lack of child care service** -- Additional stress had been put on childcare services now that attendance had increased. Services are forced to accommodate sick children of working parents.
- **Inappropriate resources at childcare facilities** -- “All playgrounds in the community are run down and dangerous, even at the school and nothing’s done about it.”
- **Lack of consultation** – “Disempowerment, lack of protocols, only ‘pretend’ job options.”
- **Poor road conditions** -- “The roads are killers. People still die on them all the time. In our community it’s 200 km of terror.”
- **Inadequate transportation**, -- “In Darwin, you have services like buses and you don’t have to pay a fortune to go 50 km. A regular bus service between
communities and outstations would help people.”

Others mentioned that some people were leaving the community to avoid the Intervention. This number increased from three to five at the second workshop. Other reasons were cited for their leaving – lack of jobs, increased workload, fewer opportunities for men as women were more likely to get jobs. Only one participant stated that there had been no changes in her workplace.

In terms of the community, there were positive responses in relationship to increased numbers of school attendees, the removal of permits, less alcohol, and more people working.

**Summary**

Childcare workers and their communities understood more about the Intervention after 12 months than they did at the 4 month mark; however, months later, they still felt anxiety and were seeking answers for some of their questions. In the early stages of the Intervention there was overwhelming fear that children were to be removed from communities; land permits were to be removed and that CDEP would leave them without an income. These fears seem to have abated over the year and all participants knew of community members who are happy with many of the outcomes.

Overall, participants agreed that children’s attendance at school and childcare had increased and they also believed that child health had improved. Despite reports of the army’s involvement in health checks, this was not necessarily a common occurrence in all communities. The unfair treatment of Indigenous children compared to non Indigenous was raised by some, “Non indigenous children are abused too.” Even though child abuse may appear to have ceased, childcare workers stressed concern that community members are reluctant to come forward or that child sexual abuse was not and never had been the major problem in their community.

Prior to the Intervention, Indigenous people were not necessarily familiar with the word pornography. There was a general consensus that the Intervention aimed to prevent abuse of children and combat alcohol and drug related problems. There was a consistent call for more education, training and support in the areas of drug and alcohol abuse, gambling and financial management. The employment of more police and a special task force to crack down on drug and alcohol abuse was seen as an effective strategy.

**Recommendations**

- Improve the quality of child care facilities and professional development and training for childcare workers
- Provide financial management courses
  “Assistance and education needed as payments that have changed from CDEP, Centrelink, and Local Council to new Shire Council. From weekly payment to fortnightly payment, need to change budget to survive 14 day intervals instead of 7 days. Aged pensioners feel targeted by quarantining when they don’t have responsibility for children.”
- Prevent family violence & child abuse
  Need for education, information and support about how to report
abuse in remote community contexts and the rights of service providers and children.

- Plan and consult with Aboriginal people
  “No proper consultation. They should have been visiting the communities staying there for weeks, getting to know the people, asking their views on what they need and want.”
- Provide information to clarify misunderstandings.
  “People still worried about CDEP being taken away. People want interpreters to understand the changes.”
- Improve housing and transport
  “Regular bus services between outstations and communities so people can move out of larger communities.”
- Improve the roads
- Support families to help their children
  “…through providing breakfast programs in every school, more child care services for more children needing care and more and bigger houses, with fences.”
- Look for alternative options that provide infrastructure for sustainability and employment
  “Wrong focus for the Intervention. Better to focus on training support, setting up the proper infrastructure; for example, develop women’s sewing, cooking, youth printmaking and music and doing more about health.”

At the time of this research the Intervention was still in its early stages in some communities having been rolled out over a year, particularly in Top End communities. It is clear that the twenty-five childcare workers involved have mixed views on its success. However, despite the need for many modifications and changes to the implementation process, positive outcomes were evident and include:

- More children are going to school and childcare everyday.
- Removal of permits allowed the “Intervention mob to come in and sack the white people who were not doing their job”.
- More people coming to work and less grog coming in.

References


National Health and Medical Research Council (NHMRC), Australian Research Council (ARC) & Australian Vice-Chancellors’ Committee (AVCC) 2007. National Statement on Ethical Conduct in Human Research, Australian Government, Online at


1 CDEP was introduced in 1977 ‘as an alternative to the widespread payment of unemployment benefits in remote Aboriginal communities in sparsely settled northern and central Australia’ (Sanders, 2001, p.1) and enabled unemployed people to received payment roughly equivalent to unemployment benefits for undertaking work deemed useful to the community.