

## 2007 NSW Health Awards Entry

<b>Entry Title (50 characters or less)</b>
Toomelah Boggabilla Strategy
<b>Abstract (120 Words)</b>
Hunter New England Health is a partner in a whole of government strategy that has been working with the communities of Toomelah and Boggabilla on a range of issues and concerns, most significantly regarding Aboriginal child sexual assault. This is an excellent example of a regional partnership for health, with all participants, including agencies and community members, identifying the great improvements in relationships and cooperative activities.
<b>Aim (30 Words)</b>
To develop an effective, long-lasting partnership between the Aboriginal communities of Toomelah and Boggabilla and government agencies in NSW and Queensland to build community capacity and improve the health and wellbeing of these communities.
<b>Nature of the Problem (100 words)</b>
<p>Toomelah and Boggabilla are isolated Aboriginal communities with an array of socio-economic problems including poverty, very high unemployment, poor housing, very limited infrastructure, and high incidence of domestic violence, alcoholism, diabetes and child sexual abuse.</p> <p>In early 2005 the Toomelah community elders approached government agencies seeking agreement to work with the community to address a range of issues of concern. They nominated as priorities: (1) health, (2) child sexual abuse (3) policing.</p> <p>The issues are complex and require coordinated and sustained response from wide a range of government agencies in order to make a difference.</p>
<b>Extent of the problem (150 words)</b>
<p>The significant problems faced by these communities have existed for many years, and previous government agency intervention has been ineffective, as shown by:</p> <ul style="list-style-type: none"> <li>• 1988 Toomelah Report by Justice Einfeld for the Human Rights and Equal Opportunity Commission highlighted poor living conditions and identified that shifting responsibilities between State and Federal government had prevented Toomelah receiving adequate services.</li> <li>• 1991 Community Profile, written in collaboration with community members described Toomelah's history and service deficits</li> <li>• 2001 Boggabilla/Toomelah Community Link Report by Jill French for the NSW Premier's Department examined the issues of service delivery and recommended the establishment of a Government Information and Access Centre</li> <li>• 2002 Toomelah Community Consultation Report by the Indigenous Health Division of the School of Population Health, University of Queensland. Outlined community opinions on the most significant current issues facing Toomelah.</li> <li>• In 2005 the community elders indicated that all or almost all the children in Toomelah have been sexually abused and that "enough is enough", i.e. they are ready to work collaboratively with Government to put an end to this ongoing abuse.</li> </ul> <p>A review of the records of recent reports to the DoCS Helpline and JIRT, shows that the current system is not operating effectively in these communities, so the group has developed flexible and culturally appropriate approaches to investigation, support and intervention.</p>

### **Strategic importance (100 words)**

The NSW Government has committed, under Two Ways Together, to a whole of government approach to working with Aboriginal communities. The State Plan and State Health Plan both identify the importance of addressing Aboriginal disadvantage, and of taking a whole of government approach. In particular, this project strongly demonstrates NSW Health Strategic Direction 4 – Build regional and other partnerships for health.

Hunter New England Health has nominated in its strategic plan the following objectives:

- Reduced gap in health and wellbeing between Aboriginal and non-Aboriginal people
- Engaging our partners in improving the health of our communities

### **Planning and implementing solutions (300 words)**

Commencing in mid 2005, senior HNE Health officers, including the Chief Executive and Director Population Health, Planning and Performance, have had several meetings with elders of the communities, to hear their concerns and discuss approaches to tackling the issues. We created two additional positions: a Family and Child Counsellor and a Community Development Worker. These staff add to the registered nurses, Aboriginal health workers, part time GPs and other visiting health professionals who also service the communities. Both new positions have been in place for more than 12 months.

HNE Health has also taken a lead role with the New England/North West Regional Coordination Management Group (RCMG), which has nominated Toomelah/Boggabilla as a key strategy.

The first priority issue under the strategy was child protection. A reference group was established and the following data was analysed:

- Review of recent JIRT cases (Police)
- Examination of some 500 Child Protection Reports for Boggabilla and Toomelah over the past three years (DOCS)
- Review of NSW and Queensland Health data on child suicide attempts, sexually transmitted diseases and other potential indicators of abuse

The group conducted a root cause analysis of the case of a particular child who had been reported to the system on multiple occasions. The findings of this RCA suggested the need for a number of changes in how the three key agencies (Health, DoCS and Police) operate together, and how systems can support a more effective response to at risk children and families.

DoCS continues to coordinate immediate response following disclosure of abuse, and work closely with Police and Health, along with other agencies such as Education and Housing, and also with NGOs to ensure appropriate investigation, care and support is provided to victims and families in the short and longer term.

Another health issue raised by community related to water quality in Toomelah. HNE Health facilitated a working group involving many agencies to prepare for and run a Water Quality day with the community, including agreement to a wide range of specific actions, from having tanks repaired and pumps replaced, to introducing a water treatment system and educating the community about how to manage their water system in the longer term.

The communities were particularly dissatisfied with agency responses during times of emergency. HNE Health led the development of a Social Emergency Management Framework for Remote Aboriginal Communities, and protocols for response, based on existing JIRT protocols, to instances of child sexual abuse as a first specific example of how the framework can operate.

### **Outcomes and Evaluation (200 words)**

The Toomelah Boggabilla Strategy is a long-term program of activity between government agencies and the local community to address deep-seated problems and help the community build capacity to function effectively. While completion is still years away, there are already many indicators of the effectiveness of the strategy.

Partnerships between the agencies are far stronger, with regular collaboration on a wide range of issues and higher level of trust.

The community remains engaged with the agencies and is working closely with us on the various initiatives. Roger Knox, advocate for the Toomelah Boggabilla Aboriginal communities at a recent government agency and communities meeting stated "it feels like government are now listening to us". Other feedback confirms this view by the community that they now have a more open relationship with government and are able to discuss their issues and concerns.

The model has also been recognised within government for the strength of the whole of government approach. The Toomelah/Boggabilla Strategy has been used as a model for locational responses under the Government Response to the Aboriginal Child Sexual Assault Taskforce Report.

In further recognition of the good work being done, representatives of the agencies involved in the strategy were asked to lead the recent JIRT Review on behalf of the central offices of DoCS, Health and Police.

### **Sustaining change (100 words)**

As noted above, positive impacts are being noted in terms of community confidence to work with government. Many of the other objectives of the strategy, such as improved health, wellbeing, and community capacity, require a long lead time to show the benefits.

In late 2006, a community engagement day was held, with a large attendance of both government agencies and community members from Toomelah and Boggabilla. HNE Health was actively involved throughout the day. Outcomes included agreement on a model for community governance and ongoing engagement between the community and government.

The RCMG continues to focus on moving forward. Next strategies include employment opportunities for young Aboriginal people from these towns, other community building work, and ensuring the agreed community engagement structures are developed and become sustainable.

### **Future Scope (100 words)**

As noted above, the approach for Toomelah Boggabilla has become the flagship for locational activities under the Aboriginal Child Sexual Assault response.

The approach can be used in any isolated Aboriginal community. It requires strong and enduring commitment from the most senior levels of all government agencies, regular discussions with community representatives and visible action on the ground.

Within the Hunter New England Health region, a similar approach has now been adopted for the Purfleet/Taree community, which has also identified as a community with significant social problems including child sexual abuse.