Hidden Racism and Systemic Racism: Is it contributing to the decreased health and well-being of Aboriginal Homeless Persons in the inner city of Cairns?

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The presence of chronic rough sleeping Aboriginal persons in the Cairns inner city has been an ongoing issue for decades. Differing approaches have been taken to address this issue, including the 'hard approach' (zero tolerance) and the 'soft approach' (self-determination). However neither of these approaches has succeeded and have only served to perpetuate and escalate the problem. The complexity of the issue of long-term rough sleepers is further exacerbated by hidden racism and systemic racism which is underpinned by issues such as culture and the polemic divides that separate the service approaches to addressing this issue. Ultimately, the health and well-being of Aboriginal rough sleepers in Cairns is worsening and their quality of life is declining due to this unseen and incalculable racism. Of critical importance to their decreasing health and well-being is how their basic human needs are not being met due to the underlying racism that

confounds it. This paper seeks to identify the issues of hidden racism and systemic racism among the Cairns inner city Aboriginal rough sleepers and explanations of hidden and systemic racism are offered and how this contributes to the decline in their health and well-being.

Introduction

Aboriginal peoples' primary homelessness and public space drinkers are two separate issues and an ongoing concern to the crime prevention network in the inner city of Cairns in Far North Queensland. Public space drinkers are not necessary homeless, but frequent the inner city parks and public spaces and utilise these areas for social gatherings and the public consumption of alcohol, which is prohibited under Cairns Regional Council model laws. However, these issues are further compounded when temporary, illegal squatter camps are set up around the city by the Aboriginal homeless peoples and these camps increase in size and in numbers when a 'zero-tolerance' approach is taken by the police to rough sleepers and public space drinkers in the inner city (Coolican, Apr 2013). Because Cairns is an international tourist destination, perceptions of civil order and personal safety are at the forefront of businesses in the inner city. Concerns over rough sleepers frequenting the inner city hit the headlines in Cairns again in May of this year with business trader's calling for a 'zero-tolerance' approach to anti-social behaviours of the Aboriginal homeless peoples and public space drinkers (The Cairns Post, Feb 15, 2013)

Aboriginal and Torres Strait Islander peoples' homelessness has been on ongoing issue, not only in Cairns, but in many urban, regional and remote areas of Australia. Aboriginal and Torres Strait Islander peoples' account for 9.2% of the total Queensland population, with 3.6% residing in Cairns. Indicators denote that on any given night, 1,300 people are sleeping rough in Cairns, which is approximately 113 people per 10,000 of the population (Office of Economic and Statistical Research 2012). The 2011 Census has indicated that this is double the homeless rates of Brisbane and the Gold Coast signifying that "Cairns has one of the highest rates of homelessness of Queensland cities and an over representation of homeless Aboriginal and Torres Strait Islander people" (Community Services Committee Cairns 2012, p. 8)

This paper came about because of the author's continued frustration at watching the same cohort of homeless Aboriginal people's cycle between the Central Business District (CBD) and fringe squatter camps, despite the continual efforts of government and non-government services to break this cycle. There are significant gaps in the policies and systems that surround homelessness in Australia that are not being addressed by current research and we are hoping that by bringing these issues to the forefront, together we may be able to begin addressing some of these concerns through policy changes and rethinking the systems and structures that surround Aboriginal people's homelessness in Australia. The current systems, frameworks and policies are a self-perpetuating cycle of ineffectiveness that has been repeated over and over for decades and we believe that it is time for change. The specific focus of this paper is the chronic rough sleeping Aboriginal population in Cairns, Far North Queensland in regards to their standard of living, their personal safety and security, and their attainment of adequate standards of physical and mental health.

Definitions

Racism

For the purposes of the paper, 'racism' is defined as the determination of actions, attitudes or policies by beliefs about racial characteristics. 'Institutional' or 'Systemic racism' involves the unintended consequences of a system of racial inequality (Abercrombie, Hill and Turner 1994, p. 342). 'New racism' is defined as the

> "… processes of racialisation work through narratives of 'our way of life' that are designed to specifically exclude particular Others from a particular space. The argument of 'genuine fears' and the protection of the nation's 'way of life' are used to justify the processes of racism" (Al-Natour 2010, p. 4)

However, in terms of health and health outcomes, the Sociology of Mental Health in combination with Critical Race Theory (Brown 2003), proposed a more nuanced version of 'racism'. The discipline of Sociology involves looking at indirect relationships between institutions and individuals and to propose how these institutions impact on an individual's health and well-being. Critical Race Theory proposes that racial stratification is central to the operational use of the term 'race' and how it is constructed and manipulated by social and political forces (Brown 2003). Therefore, what we are proposing is a Sociological Health approach to the health and well being of Aboriginal people's homelessness under a Critical Race Theory lens, in order to discern aspects of hidden and systemic racism within the policies, models and frameworks of approaches to Aboriginal rough sleepers/street drinkers/camp dwellers. This paper will address the issue of long-term or chronic homelessness or people who are commonly called rough sleepers, as well as public space drinkers and illegal camp dwellers.

Homelessness

The most commonly accepted definition of homelessness was proposed by Chamberlain and Mackenzie (1992) who offered three types of homelessness.

> "*Primary homelessness* refers to people without conventional accommodation … *Secondary homelessness* covers people staying in various forms of temporary accommodation … [and] … *Tertiary homelessness* refers to people who live in boarding houses on a longer-term basis, operationally defined as 13 weeks or more. People in boarding houses are homeless because their accommodation falls below widely accepted community standards" (Chamberlain 2012, emphasis added).

This paper focuses on primary homelessness as well as public space drinkers and transient camp dwellers. One of the most critical elements of dealing with Aboriginal peoples' homelessness is argued to be the inclusion and consideration of culture.

Culture

Culture has been defined as individual and socially constructed beliefs, values and norms based on the subjective experiences of signs, symbols, rituals and behaviours (Chao & Moon 2005, p. 11). This definition stresses the importance of the individual, the inclusion of the social world, the subjective experience of the individual and the active construction of perceptions of signs, symbols and rituals that produce culturally defined behaviours. The importance of the external influence of culture in the construction of subjective experiences and overt behaviours is paramount in understanding social phenomena (Hayes-Jonkers 2009), as 'culture' is a clandestine concept that is thrown around with little regard of its actual meaning and social influence.

Cultural Competence

'Cultural Competence' is a further terminology that has been bandied around over many decades with little regard for its factual outcomes. That is, how does one show that a person or person's is 'culturally competent'? Cultural competency has been defined as

> "... the integration and transformation of knowledge about individuals and groups of people into specific standards, policies, practices, and attitudes used in appropriate cultural settings to increase the quality of services, thereby producing better outcomes" (Centre for Cultural Competence Australia, 2012)

The defining features of this statement are 'policies', 'practices' and 'attitudes'. An Australian study (Johnstone and Kanitsaki, 2008) proposed that negative population attitudes were strongly influenced by 'skin colour' and language differences and it was further argued that negative attitudes to Aboriginal Australians was exceptionally difficult to change (Pedersen *et al*., 2005). Given that racially negative attitudes are currently more covert than overt (Pedersen *et al*., 2005), it could be argued that policies and practices around cultural competence are therefore influences by these underlying attitudes.). Notwithstanding this factor, the current climate to reduce homelessness is overwhelmingly housing (Johnson *et al*., 2011)

Housing First Model of Homelessness

The propensity of researchers and policy makers to focus on housing or shelter to define homelessness has been criticised as being remarkable short-sighted, given that the notion of 'home' should encompass the "... physical, mental, emotional, social and spiritual ..." aspects of the subjective experience of 'home' (City of Sydney website 2012). It has further been argued that "[T]the provision of a stable place of tenure may not necessarily be an architectural solution" (Kolka 2008, p. 38) and Egginton (2008, p. 4) echoed this sentiment, claiming that the problem of homelessness "... cannot be fixed by just providing services ... and housing". Amore, Baker and Howden-Chapman (2011) concluded that the 'domains of home' should include the

"...physical (physical adequacy), legal (exclusive possession, security of occupation, and legal title), and social (privacy and ability to enjoy social relations) consistent with a rights-based approach" (p. 25).

Nevertheless, housing is only one solution to a complex problem and this need for housing is tenuously based on the human rights of those who are homeless.

Aboriginal Homelessness and Human Rights

The *Universal Declaration of Human Rights* (2012) and the *United Nations Declaration on the Rights of Indigenous Peoples* (2008) proposed that homelessness is not just about housing. They decreed that a person who is homeless may be facing violations of the right to an adequate standard of living; the right to education; the right to liberty and security of the person; the right to privacy; the right to social security; the right to freedom; the right to life, physical and mental integrity without discrimination; to the enjoyment of the highest attainable standard of physical and mental health ... and many more. We propose that this violation of basic human needs is impacting in a negative and progressively detrimental way on the health and well-being of the Cairns Aboriginal homeless population.

Aboriginal Homelessness and Health

Physical and mental health concerns of the long term Aboriginal rough sleepers in Cairns specifically include the following. Suffers of schizophrenia and bipolar disorders, nihilistic perceptions of life, learned helplessness with fatalist thinking, acquired brain injuries, chronic and severe alcoholism, diabetes, heart conditions, wounds that will not heal, and unattended open wounds and broken bones. These are further perpetuated by individuals' refusing to access formal medical help for acute conditions and their hesitation about attending the Cairns Base Hospital or what the Cairns Aboriginal homeless peoples' call the 'deadfella place'. The place where people go to die.

The Zero-Tolerance or 'Hard' Approach

Zero-tolerance or the 'hard' approach to rough sleepers was subsequently implemented in Cairns in July of this year, due to the ongoing calls by business owners in the CBD. This approach has resulted in the successful removal of Aboriginal rough sleepers from the inner city ... again. However, as has occurred many times before, this has resulted in rough sleepers being displaced to make-shift camps on the fringes of the city. There have been anecdotal reports of high levels of physical and sexual violence, substance and alcohol abuse and extortion in the camps with unsanitary living conditions creating an unhealthy and unsafe living environment. Police are enforcers of the law and as such are obligated to do their duty. Nonetheless, the police in Cairns support the Return to Country[1] program and are proactive in returning people to their communities and/or delivering them to homeless services for assistance and support. This is what is called the 'soft' approach. This

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[1] This is a program developed through partnerships with Centrelink and a local flight company to return people home to their communities for a minimal cost.

approach diverts the rough sleepers away from the justice system. The 'soft' approach does appear to deliver a more humanistic response to Aboriginal peoples' homelessness.

Figure 1

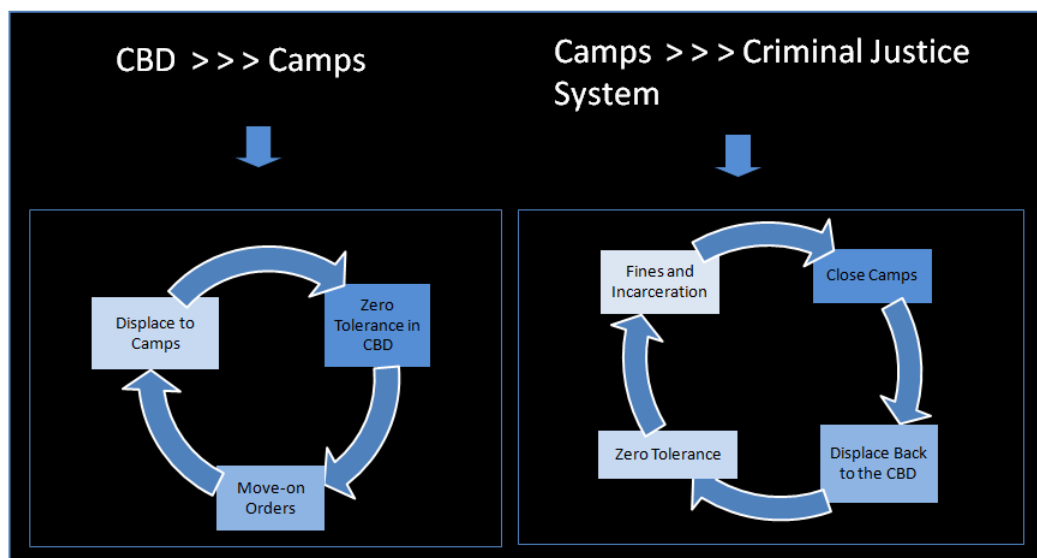**The effect of 'zero tolerance' to homelessness in Cairns**

Figure 1 demonstrates what has occurred in Cairns in the past under the 'zero-tolerance' approach to rough sleepers and the homeless, and it will inevitably happen again. The 'hard' approach displaces the rough sleepers out of the inner city and into make-shift, unauthorised squatter camps. This subsequently creates issues for residents living in those areas; complaints are made to Council and the camps are eventually closed down. The rough sleepers are then forced back into the inner city and into the arms of the police and the Criminal Justice System. This is the reality of the effects of the 'hard' approach as it does not deal with the underlying issues of Aboriginal homeless peoples.

Cairns has a large contingent of agencies who provide services to homeless people in the inner city and in squatter camps, and who address the needs of individual rough sleepers, assist with physical and mental health issues, financial concerns and assisting them to acquire accommodation. Cairns also has both a Diversionary centre and Crisis Accommodation centres which are perpetually at maximum capacity. However, Cairns also has a significant shortage of suitable detoxification and rehabilitation facilities for alcohol and substance misusers.

'Hidden Racism' of Aboriginal Peoples' Homelessness: What Lies Beneath

Service providers working with rough sleepers would never consider themselves to be racist. In fact, they would be offended at the suggestion. However, this very desire to be politically correct and culturally appropriate can lead to the reinforcing of negative stereotypes and 'otherising' of Aboriginal peoples (Johnson & Kanitsaki 2009). The 'cultural competence' model is utilised in most states in Australia and this model was an important development in recognising that culture dictates a person's understanding of their experiences and that it is necessary to work with people in a way

that recognises their cultural underpinnings (Centre for Cultural Competence Australia 2012). The danger of this model is that respect for the 'culturally appropriate' can morph into mistaking disadvantage for 'Aboriginal culture'. The desire to respect culture may lead to an idealised view of an unchanged, nomadic, outdoor tradition to which it is possible or that Aboriginal peoples desire to return to, and conflates this with the lifestyle of the rough sleeper/squatter camp dwellers. We see this in the tacit acceptance of squatter camps around Cairns in which Aboriginal peoples live without sanitation; clean, running water; rubbish disposal mechanisms; cooking facilities and live in squalid, inhuman conditions. Nevertheless, we would argue that mistaking homelessness for culturally appropriate lifestyle choices 'blames the victim' and relieves us of the responsibility for our failure to 'close the gap'.

Critical Race Theory proponents suggest that this normalising dysfunction of the 'other' acts to maintain the status quo; reinforcing the 'white' position of privilege (Abrams & Moio 2009). By accepting rough sleeping as 'culturally appropriate', we are not only neglecting to address the causes of homelessness, we are reinforcing racist stereotypes that this kind of 'lifestyle' is not only acceptable from Aboriginal people, but is to be expected. Hidden racism generates a feedback loop where lower outcomes reinforce lower expectations which correspondingly reinforce these lower outcomes. To produce better outcomes, it is imperative not to lower expectations of people in poor circumstances, but to hold them to higher standards; to challenge racist assumptions about the competence and worthiness of Aboriginal peoples. Abrams and Moio (2009, p. 257) proposed that the 'cultural competence' model is basically unsuccessful and that its "... tendency to equalize oppressions under a "multicultural umbrella" ... [and] unintentionally promotes a colour-blind mentality that conceals the significance of institutionalized racism", to which we now turn.

Systemic Racism within Aboriginal Peoples' Homelessness: What Lies Within

The *Aboriginal Self-Determination Policy*, introduced by the Whitlam Government in 1972, has dominated Aboriginal peoples' service provision for decades. It began as a push for community empowerment, Aboriginal control of Aboriginal peoples' lives, and recognition of the validity of 'cultural difference'. This policy defined 'self-determination' as "... the ability of Aboriginal *communities* to identify their own needs, and the making of decisions that affect their lives" (Gray, Stearne, Wilson & Doyle 2010, p. 32, our emphasis).

A split in the ideology emerged over whether life on the dole could ever be an indication of legitimate choice; a determination to remain culturally separate over the benefits of mainstream participation. This contention has morphed even further from the 'rights' of a *community,* to a focus on the 'responsibility' of the individual. It has become the idea that Aboriginal rough sleepers living in camps and on the streets are 'self-determining' or that they 'choose', and have a 'right' to choose, substance abuse, violence and inhumane living conditions. This 'self-determination' policy may cause confusion between outcomes which are forced upon people by a racially structured society and outcomes which people reap from their choices as autonomous individuals (Smith 1991). True 'self-determination' cannot exist when Aboriginal peoples are systemically excluded from meaningful

participation in education, the workforce and the economy, and therefore from the power to be actually 'self-determining'.

The models of service delivery in the homelessness sector reinforce this neglect of structural causes for high numbers of homeless Aboriginal peoples in Cairns (Hunter 2008). Output based funding models force agencies to focus on changing individuals, not systems, and competition and compartmentalisation of service delivery curtails holistic vision and reinforces a Western Medical Model, where homelessness and substance abuse are the symptoms of a 'sick' person, and the individual rough sleepers are the problem to be solved, not the structural factors of overcrowding or inter-generational impacts of colonisation and dispossession. Hunter (2008) stated by medicalising complex social problems and thereby rationalizing 'solutions' that are simple, but ultimately destined to failure, can only impede rather than support social change. The medicalised approach leads to victim blaming and criminalisation of the structurally marginalised. When we tell ourselves 'It is not about race; it is about drinking in the street', we ignore the effects of racial stratification and treat the symptoms of race-based disadvantage as criminal behaviour. When structural causal factors are hidden, Aboriginality itself becomes the cause. The focus is always on Aboriginal peoples' homelessness, as though the challenge was a problem of Aboriginality, not a lack of affordable housing plus structurally created disadvantage.

Hidden Racism: How can it be otherwise?

Hidden racism is a much less obvious form of racism than the outward manifestation of discrimination based on racial prejudice. Hidden racism expresses itself through subjective evaluations resulting in patterns of negative assessments and assumptions aimed at the demonic 'others' (Pederson *et al*., 2005b). The acceptance of Aboriginal peoples' urban camp dwelling, with its poor health outcomes, substance addiction and violence, has become an article of faith for many. This opinion appears to be underpinned by a belief that camp dwellers and other homeless Aboriginal peoples are demonstrating 'culturally appropriate' behaviour systems, and that existing on the margins of mainstream society is culturally normalised behaviour. Is this a racist response? We would argue that it is.

Through a perpetuation of the 'myth of culture', the policy response to these individuals in regard to their need for services and access to health, rehabilitation or social care differs from the response to others from non-Indigenous backgrounds and heritage. If someone chooses a lifestyle, then the implication is that they do not want help or assistance, and the consequences of those choices are theirs to bear. Rather than actively seeking them out or actively engaging with them, the general policy response is to wait for these individuals to ask for assistance. This is the fundamental framework of individual self-determination. Consigning destructive and self-harming behaviour to the 'cultural' bin allows service providers and policy developers to both blame the victim and to avoid developing appropriate policies for terms of engagement and intervention.

We are also so constrained by our understanding and acceptance of 'culture' that we fail to see and deal with genuine (*basic)* human needs. The notion of Aboriginal peoples' right to 'self-determination' implies

> "... *the freedom for indigenous peoples to live well*, to live according to their own values and beliefs, and to be respected by their non-indigenous neighbours... [and] ... achieving the freedom to live well and humanly" (Daes 2000, p. 58, their emphasis).

Under this definition, this would imply that rough sleepers in the inner city of Cairns should have access to secure housing, clean water, sanitation, power, education, employment, privacy, social networks and health services. However, this is far from the case as is evidenced by the persistent declining health of the chronic inner city rough sleepers and the abominable conditions in which they live in the fringe camps.

Where does this construction of culture come from that seemingly paralyses us from seeing our policies as intrinsically racist? It is almost as if our fear of appearing racist actually superimposes racist behaviours upon us. We are ensnared in a system where service providers are very aware of the history of Aboriginal Australians post colonisation, and who are obligated to prove their own credentials as non-racist, inclusive and educated practitioners. However, it is these same practitioners who espouse theories and frameworks of 'cultural competence'. Herein lays the difficulty. Developing 'cultural competence' should result in the ability to understand, communicate with, and effectively interact with people across differing cultures (Centre for Cultural Competence Australia, 2012). Being 'culturally competent' refers to the ability to interrelate successfully with people of different cultures; it does not mean supporting disorder, addiction, psychosis and despair in the name of 'culture'. In the vast majority of cases, people who are habitual homeless/street drinkers have lost the vestiges of self-worth and self-enablement. Promoting camp life as a 'lifestyle choice' or as 'culturally appropriate' is not a manifestation of cultural competence; it is a pusillanimous acceptance of an ineffective system that is preventing the acknowledgment of human suffering and is preventing an examination of the structural barriers to improving Aboriginal peoples' homeless outcomes.

Systemic Racism: How can it be otherwise?

Systemic racism is distinguished from racial prejudices by the existence of systemic policies and practices which place non-white groups at a disadvantage in relation to institution or systems of the dominant white elites (Hunter 2008). Macpherson (1999) argued that systemic racism is "... the collective failure of an organisation to provide an appropriate and professional service to people because of their colour, culture or ethnic origin". However, we would argue that systemic or institutional racism is grounded more in apathy than in intent. A self-determinism framework uses aspects of a health education model to support itself in dealing with street drinkers, rough sleepers and/or camp dwellers. It is widely promulgated that once knowledgeable about health, hygiene, and service parameters, these people need only exercise 'self-determination' to avail themselves of the opportunity to engage with the preferred or required service provider.

Within this model, little or nothing is made of the need to affect changes to the environment, to policy, and to the inequality of opportunity. Without wider political change, choices made at an individual level are difficult to see through to a productive or successful outcome. In other words, the rigidity of the framework used to service homeless client needs, which is overlaid with systemic racist approaches, is failing to deliver adequate outcomes and this is evidenced through the health inequalities of the Cairns Aboriginal peoples' homeless population.

A health education message may promote the point that more than X units of alcohol are harmful and that one should aim to keep one's consumption below this level for health reasons, but without policy or environment changes, someone with an alcohol addiction may find this difficult to put into practice. Any kind of addiction is a hard task master, and without supportive changes to their environment, a top-down approach to service delivery allows little to be actually achieved in relation to client outcomes. A methodology that overcomes the self-determinist top-down approach, may bridge the gap. Actively seeking out clients, making services available to them immediately or taking them to a service is a ground based bottom-up approach, where each client is individualised rather than institutionalised or compartmentalised and may be one of the policy changes needed to support better outcomes for Aboriginal rough sleepers and camp dwellers. Future research around Aboriginal homelessness requires 'out of the box' thinking and more inventive ways of approaching this ongoing issues as current approaches are not resolving or even contributing to resolving this issue.

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