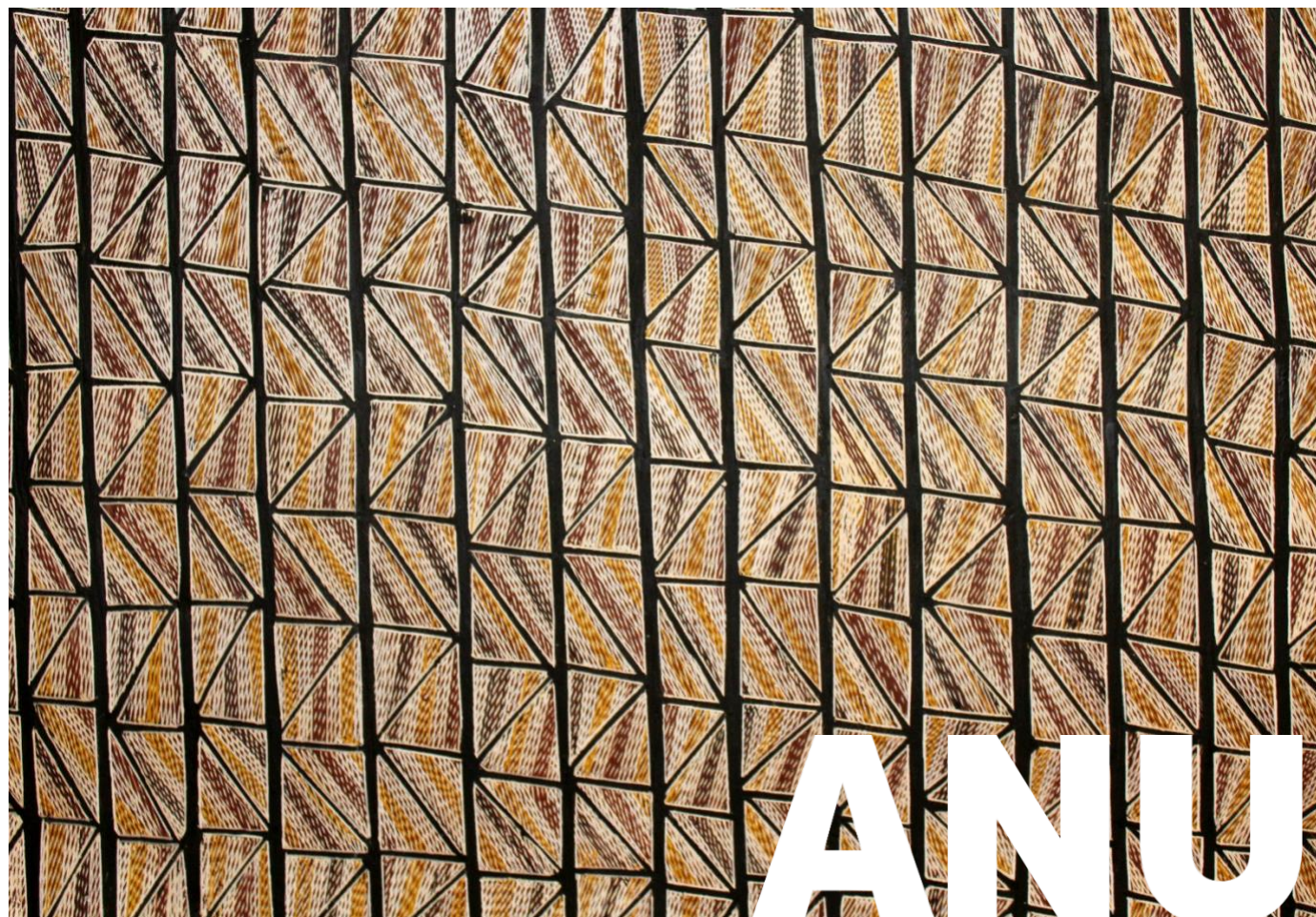




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INDIGENOUS AUSTRALIANS AND THE COVID-19 CRISIS: PERSPECTIVES ON PUBLIC POLICY

EDITED BY F. MARKHAM, D. SMITH AND F. MORPHY

Centre for
Aboriginal Economic
Policy Research
ANU College of
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Sciences

CAEPR TOPICAL ISSUE 1/2020

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Professor Tony Dreise
Director, CAEPR
Research School of Social Sciences
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The Australian National University April 2020

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DOI 10.25911/5e8702ec1fba2

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Suggested citation:
Markham, F., Smith, D. & Morphy, F. (2020). Indigenous Australians and the COVID-19 crisis: perspectives on public policy, *Topical Issue no. 1/2020*, Centre for Aboriginal Economic Policy Research, Australian National University, Canberra.
<https://doi.org/10.25911/5e8702ec1fba2>

Indigenous Australians and the COVID-19 crisis: Perspectives on public policy

Edited by F. Markham, D. Smith and F. Morphy

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Abstract

This Topical Issue is a compilation of eight short papers that have been written during the rapid escalation of the Australian response to the COVID-19 pandemic.

First Nations people are being, and will continue to be, affected by this crisis in ways that differ from the effects on other Australians. The pandemic risks exacerbating deep-seated health, social and economic inequities in Australian society, especially the long-standing inequalities between First Nations people and other Australians. The pandemic has also made plain the shortcomings of the relationships between Indigenous people and Australian governments, revealing a governance gap that is difficult to ignore. But despite these inimical conditions, the disruption of the COVID-19 crisis is opening up new opportunities for public policy change. And many First Nation organisations and communities are leading the way. Unprecedented new government expenditure creates space for policy innovation, as the boundaries of what is possible become blurred. The pandemic is a time of stark risks, but it is also a time when informed policy bravery could create new foundations for a better future.

Contributions to this Topical Issue focus on employment impacts, social security reforms, Indigenous governance, violence against women, the Indigenous health workforce, school closures, energy security in remote communities, and a proposal for an Indigenous reconstruction agency.

Keywords: Indigenous Australians, COVID-19 pandemic, Indigenous public policy, Indigenous communities and organisations, socioeconomic status, employment, health, education, domestic violence, energy security, governance.

Acknowledgments

The editors are very grateful to the authors for their rapid response to the call for contributions. It is a privilege to be able to draw on such a wealth of interdisciplinary knowledge, experience and expertise. We also thank those both within and without CAEPR who contributed so expeditiously to the peer-review process—a true team effort.

Acronyms

ABC	Australian Broadcasting Corporation
ABS	Australian Bureau of Statistics
ACARA	Australian Curriculum, Assessment and Reporting Authority
ANU	The Australian National University
AMSANT	Aboriginal Medical Services Alliance, Northern Territory
ANZSCO	Australia and New Zealand Standard Classification of Occupations
APONT	Aboriginal Peak Organisations of the Northern Territory
ATSIC	Aboriginal and Torres Strait Islander Commission
CAEPR	Centre for Aboriginal Economic Policy Research
CDEP	Community Development Employment Projects
CDP	Community Development Program
CEO	Chief executive officer
COVID-19	Disease caused by the coronavirus SARS CoV-2. Used here as a cover term for both the disease and virus.
DPC	Department of the Premier and Cabinet
IT	Information technology
MBS	Medical Benefits Schedule
NACCHO	National Community Controlled Health Organisations
NAPLAN	National Assessment Program – Literacy and Numeracy
NATSIHS	National Aboriginal and Torres Strait Islander Health Survey
NATSISS	National Aboriginal and Torres Strait Islander Social Survey
NGO	Non-government organisation
NIAA	National Indigenous Australians Agency
NITV	National Indigenous Television

NT	Northern Territory
NTG	Northern Territory Government
WA	Western Australia
WHO	World Health Organization

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Introduction

Tony Dreise • Professor Tony Dreise is Professor of Indigenous Policy Research and Director of CAEPR.

This Topical Issue paper has been written as the Australian response to the COVID-19 pandemic escalates rapidly. Each week brings momentous changes to our way of life – changes we are told may last for months or even years. As I write now in early April 2020, around 4,500 people in Australia have been diagnosed with COVID-19, and hundreds of thousands have lost their jobs. Undoubtedly, the situation will have changed further still by the time many read this Topical Issue paper.

Indigenous Australians are being and will continue to be affected by this crisis in ways that differ from other Australians. The impact of COVID-19 on our First Nations people will not only highlight our existing poor health and economic status which places our communities at particular risk, but is already demonstrating the remarkable strengths and abilities of our people and organisations in the early months of the pandemic response.

CAEPR has drawn together this set of papers by experienced researchers to identify a range of public policy issues arising from the COVID-19 crisis that have a particular bearing on First Nations Australians. This Topical Issue is a compilation of 8 submissions from our CAEPR colleagues. Each was tasked with the challenge of responding rapidly and briefly to one element of the vast social and economic impact of the pandemic, and the policy response by governments to date. Each author considers the current crisis from their vantage point of long experience working on the ground and in Indigenous affairs public policy.

At the same time, I believe that this Topical Issue is more than just the sum of its parts. Taken together, the papers confirm that the stakes for First Nations people could not be higher. The pandemic risks exacerbating deep-seated health, social and economic inequities in Australian society, especially the long-standing inequalities between First Nations people and other Australians. The pandemic has also made plain the shortcomings of federalism, and the nation-to-nation relationships between Indigenous people and Australian governments, revealing a governance gap that is difficult to ignore.

But despite these inimical conditions, the disruption of the COVID-19 crisis is opening up new opportunities for public policy change. And many First Nation organisations and communities are leading the way. Unprecedented new government expenditure creates space for policy innovation, as the boundaries of ‘the possible’ dissolve. As the long-denied increase to income support for the unemployed attests, old articles of faith can be quickly discarded in times of crisis.

While the pandemic is a time of stark risks, it is also a time when informed policy bravery could create new foundations for a better future. We hope that the papers in this collection contribute constructively to that end.

The COVID-19 crisis, recession and Indigenous jobs

Yonatan Dinku • Dr Yonatan Dinku is a Research Fellow at CAEPR.

Introduction

Facing the COVID-19 pandemic, Australian governments at national, state and territory levels have introduced drastic lockdown measures along with heightened border controls to limit the spread of the virus. At the time of writing, Australia had closed its borders to non-residents and had introduced measures limiting gatherings of non-household members to no more than two people. Though implemented with the worthy intention of saving lives, the medical emergency is causing an economic recession as many businesses are shutting down or significantly reducing their production capacity. For example, cafes and restaurants have been required to limit their activities to takeaway and delivery services only. Many are consequently becoming insolvent. Hundreds of thousands of Australians have already been made unemployed, and millions more could lose their jobs if the pandemic continues to spread and if more stringent social distancing measures are put in place. On the other hand, there has been a surging labour demand in some industries such as healthcare services, online retail and associated logistics, supermarkets and call centres. For example, Coles has announced the employment of more than 10,000 workers in less than a week, and has pledged to hire thousands more in the coming weeks. But such demand may have been induced by panic buying and hoarding, and could be short-lived. At best, the increased demand represents a shift from other parts of the economy rather than indicating increased aggregate demand.

Implications for Indigenous employment

Usually, in periods of economic downturn, casual and low-skilled workers are at the front line of retrenchment (Heyes, 2014; Hunter, 2009; Pollmann-Schult, 2005). Indigenous workers will fare worse than other Australians during and following the COVID-19 crisis given that their jobs are more concentrated in casual and low-skilled jobs.¹ For example, about 55% of the Indigenous workforce is employed in jobs that require a qualification of Certificate III or below, compared with 42 per cent of the non-Indigenous workforce (see Figure 1). Indigenous people are also half as likely as other Australians to work as managers and professionals – groups who are highly likely to be able to work remotely and thereby keep their jobs (see Table 1). In 2014, about 35% of the Indigenous workforce was in jobs with no paid leave entitlements (the ABS's definition of casual employment), compared with 25% of the non-Indigenous workforce (ABS, 2014; 2016).

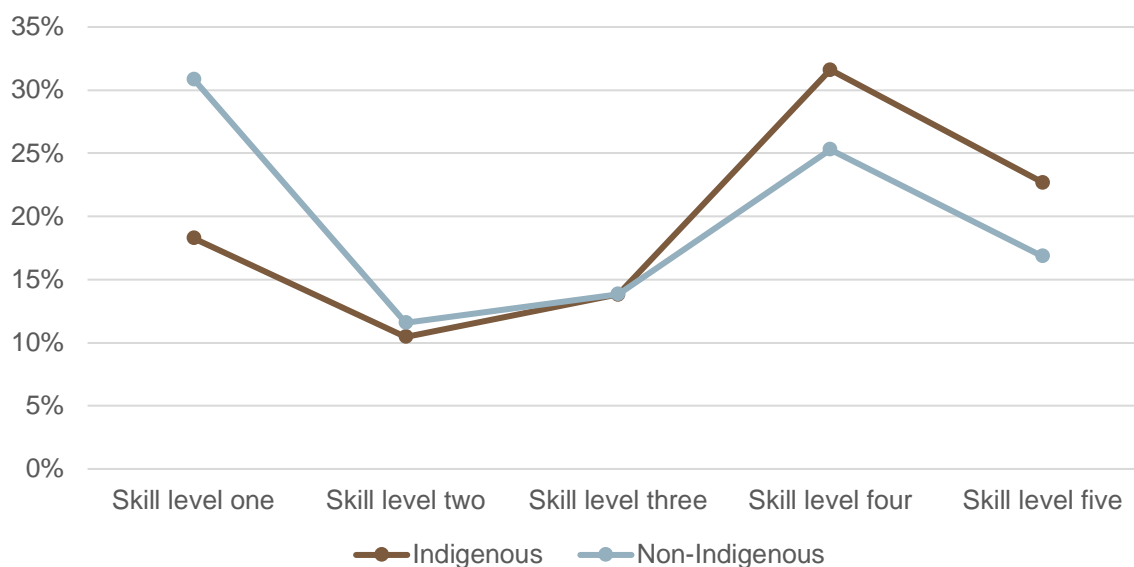
Indigenous workers in very remote Australia are likely to be the hardest hit by the crisis as they have the highest prevalence of casual jobs (see Figure 2). A lack of jobs is a key barrier to employment in those areas (ABS, 2016c). Prolonged business inactivity could decimate already scarce labour market opportunities across the country.

¹ I recognise that the phrase 'low-skilled workers' is contested, as many individuals categorised as such have important skills and perform key functions in the economy. Nevertheless, in this paper I adopt the term 'low skilled' on the basis of the Australian and New Zealand Standard Classification of Occupations, 2013, Version 1.3 (ABS, 2019c) as this is the terminology used in available Australian statistical data.

Table 1. Workforce distribution by broad occupation and Indigenous status, 2016

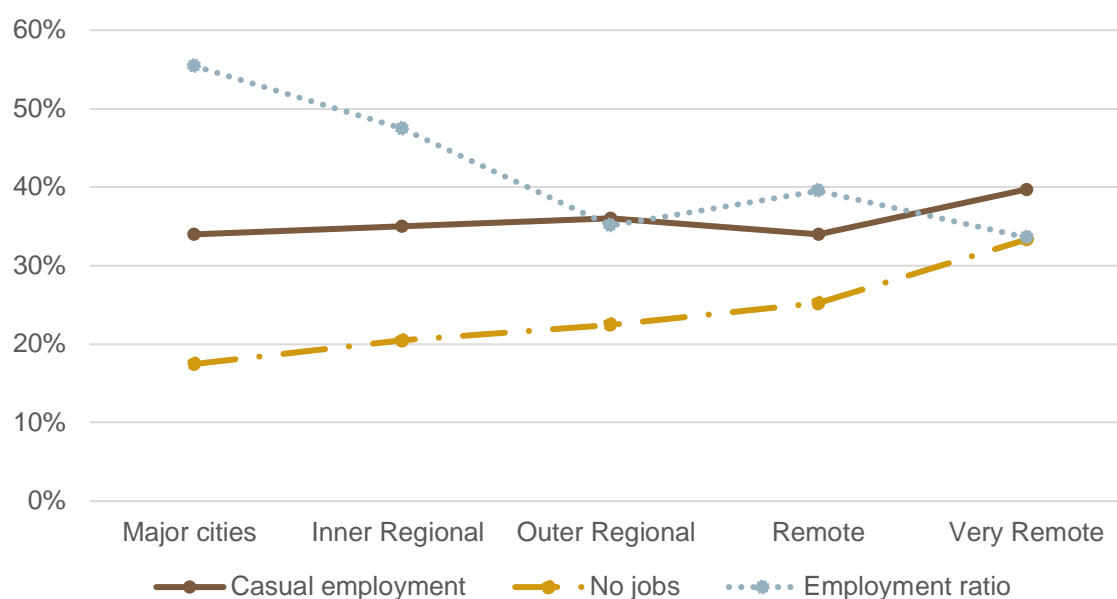
	Indigenous %	Non-Indigenous %
Managers	7.3	13.2
Professionals	14.0	22.7
Technicians and Trades Workers	13.9	14.1
Community and Personal Service Workers	17.1	10.9
Clerical and Administrative Workers	13.5	13.7
Sales Workers	9.2	9.5
Machinery Operators and Drivers	9.3	6.4
Labourers	15.6	9.3

Source: 2016 Census TableBuilder (ABS, 2019a).

Figure 1. Workforce distribution by occupational skill level, classified according to ANZSCO, 2016

Note: In the Australia and New Zealand Standard Classification of Occupations (ANZSCO), Skill level 1 refers to the highest skill level and Skill level five represents the lowest skill level. For instance, a person must be employed in an occupation requiring a bachelor degree or higher qualification (or at least five years of relevant experience) to be classified in Skill level 1.

Source: 2016 Census TableBuilder (ABS, 2019a).

Figure 2. Indigenous employment, casualisation and job scarcity

Note: 'Casual employment' refers to the percentage of employed Indigenous people who have no paid leave entitlements. 'No jobs' refers to the percentage of unemployed Indigenous people who reported that lack of jobs is a main difficulty in finding work. 'Employment ratio' refers to the Indigenous employment-to-population ratio, or the percentage of the Indigenous population aged 15 years or more who work at least one hour per week in paid employment.

Sources: The 2014/15 NATSISS and the 2018/19 NATSIHS (ABS, 2016, 2019b).

The rapid spread of the virus has prompted governments to introduce more stringent social distancing measures. The longer the pandemic continues and the more drastic the medical emergencies become, the deeper the coming recession is likely to be. Extended periods of economic inactivity will cause further unemployment crises. To date, the Commonwealth government has already pledged to spend a total of \$320 billion to fight the virus, to shield businesses from bankruptcy, to keep the economy running and protect the livelihoods of Australians.

However, Indigenous unemployment is likely to remain high for quite some time, even if social distancing measures prove to be effective in containing the virus and the economy bounces back. Experiences in the United States and Spain show that not all jobs that have been lost to recession can be reclaimed at the time of recovery. This is because automation flourishes in the wake of an economic downturn. As businesses use technological transformation as a mechanism to revive profitability, some jobs may disappear forever (Anghel et al., 2014; Kopytov et al., 2018). Even before the crisis ends, some Australian firms may resort to replacing human labour with robots if they are unable to hire people due to stringent social distancing measures. In either case, low-skill and routine jobs, which provide livelihoods to a significant share of the Indigenous workforce, are likely to be those which are automated out of existence.

Furthermore, existing data also show that Indigenous unemployment is a long-term phenomenon even under favourable macroeconomic conditions. Findings in the 2014-15 National Aboriginal and Torres Strait Islander Social Survey (NATSISS) (ABS, 2016) and the 2014 General Social Survey (ABS, 2014) show that Indigenous people are 2.3 times more likely than other Australians to be continuously unemployed for two years. Intercensal data between 2011 and 2016 show that unemployed Indigenous people are only 0.65 times as likely as their non-Indigenous counterparts to transition into employment. Indeed, unemployed Indigenous people are 1.6 times as likely to experience another spell of unemployment and 1.6 times as likely to stop looking for jobs and leave the labour force five years later (ABS, 2019a). Gray and Hunter (2005) find similar results for a

narrower window of time. If history is any guide, it seems likely that retrenched Indigenous workers may struggle to re-enter paid employment once the immediate COVID-19 crisis is over. Despite being at the frontline of job losses, Indigenous people will be the last to return to employment during the eventual economic recovery.

Conclusion

COVID-19 has precipitated a nationwide economic crisis that is impacting upon the lives of millions of Australians. Indigenous workers are among those bearing the brunt of the crisis because of their concentration in casual and low-skill jobs. Among other measures, the Commonwealth Government has introduced a 'JobKeeper' wage-subsidy scheme worth \$130 billion to keep employees connected to their work. Hunter (2009) notes that wage subsidies are more effective than other labour market programs in connecting Indigenous people with jobs. While this measure is to be commended, up to 10% of Indigenous people in casual employment will be ineligible for the 'JobKeeper' scheme as it applies only to those who have been employed continuously for the last 12 months. For the scheme to benefit the most precariously placed people in the job market, it should be accessible to all casual workers.

Most importantly, there is a growing body of evidence that employment prospects are dire for Indigenous people with low levels of education (Hunter & Gray, 2001; Kalb et al., 2014; Stephens, 2010). Low-skilled people face heightened labour market competition if the economy falls into recession. In the medium term, as the economy returns to growth, attention will need to be given to a policy response for low-skilled unemployed Indigenous workers. Over the longer term, sustained employment outcomes can be best achieved through investments in education and upskilling.

COVID-19 and the Indigenous income crisis: Looking back and looking forward

Francis Markham • Dr Francis Markham is a Research Fellow at CAEPR.

The COVID-19 crisis has transformed the social security landscape in Australia in ways that were unimaginable just weeks ago. Anticipating an extra one million unemployed or underemployed people applying for social security (House of Representatives, 2020, p. 41), on March 23, 2020 the Government effectively doubled the rate of the Jobseeker Payment (formerly the Newstart Allowance). While the maximum 'base' Jobseeker Payment for a single childless person remains \$565.70 per fortnight, to this a further \$550 per fortnight unconditional 'Coronavirus Supplement' has been added. This additional \$550 per fortnight is currently time limited, applying for six months from 27 April. Crucially, both new and existing recipients of the Jobseeker Payment (as well as recipients of Parenting Payment, Youth Allowance, Abstudy, Austudy and assorted other payments) will receive the temporarily raised rate.

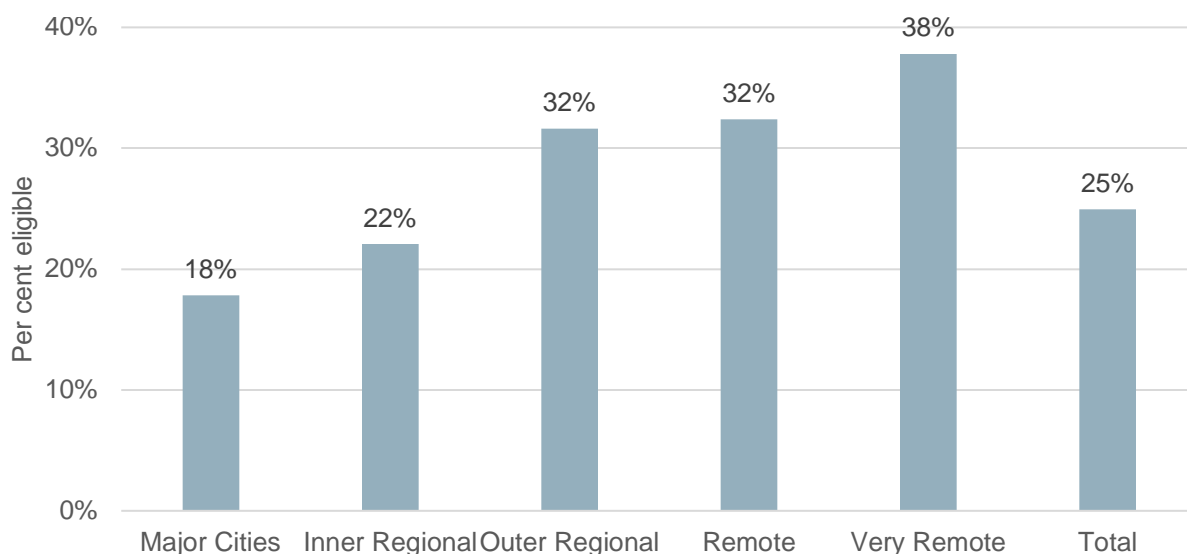
This additional income will be received by a considerable number of Indigenous people. According to administrative data from the Department of Social Services, 147,000 Indigenous people and 1,170,000 non-Indigenous people received these payments before the outbreak and thus would be eligible for the additional \$550 per fortnight (Department of Social Services, 2020). In percentage terms, approximately 27% of the Indigenous population aged 16 years or older were receiving payments that make them eligible for the Coronavirus Supplement before the virus outbreak.² The percentage of Indigenous adults who will actually receive the payment will in fact be much greater, as the 27% estimate does not include those who have or will become unemployed or underemployed as a result of the economic crisis. The significance of this income boost for the Indigenous population—albeit coming in the most challenging of circumstances—can hardly be understated.

This income boost will be felt most strongly in the poorest parts of country. For example, in very remote areas, where over 50% of Indigenous people live below the poverty line (Markham & Biddle, 2018), around 38% of Indigenous adults are likely to already be eligible for the Coronavirus Supplement (see Figure 3). Preliminary estimates suggest that this new income will increase the total income flowing to Indigenous individuals in very remote areas by 26%. Because it will be targeted at some of the neediest households within Indigenous communities across Australia, the additional payment will clearly have very significant positive effects on Indigenous poverty at a time of economic crisis. The Government is to be commended for implementing this poverty alleviation measure, which would be transformational if sustained beyond the six month cut-off.

In this very brief article, I want to do two things. First, looking back, I place the temporary changes to social security in the context of an economic system that has been failing Indigenous people for many years. I argue that the social security system has been manifestly inadequate, either at providing an economic safety net or in assisting Indigenous people find paid employment. Second, looking forward, I argue that the COVID-19 crisis provides an opportunity to reorient and redesign the social security system towards one that supports Indigenous lives and worlds rather than locking in decades of material deprivation.

² This assumes an Indigenous population aged 16 years or older of 549,358 persons in 2019, as per the ABS (2019d) projections (Series B). Those aged 16 years are included as this is the minimum age of eligibility for a social security payment.

Figure 3. Estimated percentage of Indigenous people aged 15 years or older receiving payments in 2018–2019 that would now make them eligible for Coronavirus supplement, by remoteness



Source: Author's calculations from the 2018–2019 NATSIHS.

Looking back: Indigenous incomes, from 1994 to 2018–19

Writing during the early 1990s recession, Altman and Sanders (1991) noted that the Australian welfare state – which had only fully included Indigenous citizens from the 1980s – was in retreat. In a context of recession, economic restructuring and a trend towards reduced state assistance, they concluded that it would be difficult ‘...to see how the economic situation of Aboriginal people can be improved and their welfare dependence lessened in the immediate future’ (p. 17).

After almost three decades of economic growth, it is worthwhile revisiting that prognostication. Despite the long national economic boom, what emerges is a tale of Indigenous economic stagnation and continued reliance on the welfare state, at least according to some indicators. Whereas in 1994, government payments were the main source of income for 55% of all Indigenous persons in Australia, by 2018–19 this figure had hardly budged, falling slightly to 51%.

Indigenous incomes have grown somewhat in urban and regional areas, but stagnated in remote Australia. Nationally, the median gross equivalised income for Indigenous households grew from \$436 per week in 1994 (after adjusting for inflation) to \$533 per week by 2018–19. But this national growth masks stagnation in remote areas. Here, real median gross equivalised household income was \$419 per week in 1994 and has increased little over the next 25 years, reaching \$427 per week in 2018–19.

However, these end points (chosen on the basis of available survey data), mask a story of two decades of slow but consistent Indigenous income growth from 1994 to 2014–2015, followed by a sharp decline in Indigenous incomes between 2014–15 and 2018–19. Over these last four years, median real gross equivalised household income fell sharply from \$585 per week to \$533 per week, a decrease of 9%.

The explanation for this precipitous decline is likely to be multicausal, partly a consequence of shifts in demands from the private labour market, and partly driven by policy. In remote Australia, the story is most clear. Remote Australia has effectively been in recession since mid-2015. While no Australian official statistics estimate gross regional product, employment statistics provide a reasonable indicator of regional economic health. Since March

2015 when employment in six remote regions peaked at 336,000 persons, overall (i.e. Indigenous and non-Indigenous) employment has fallen by 15% to 284,000 persons in January 2020.³ The remote Indigenous employment-to-population ratio has fallen slightly over this period, and real median weekly personal income of Indigenous people in work has fallen substantially (from \$856 in 2014–15 to \$750 in 2018–19). Government policy has also driven remote income declines. In particular, the final abolition of remote Community Development Employment Projects (CDEP) in 2013 and its eventual replacement with Community Development Program (CDP) in 2015 has reduced the income of former CDEP workers who moved into CDP significantly (resulting in an average decline of \$88 per week).⁴

Put simply, Indigenous Australia has already experienced a sharp economic contraction since 2014–2015. Remote areas have been particularly hard hit, while the explanation for the non-remote Indigenous income decline is less clear and needs to be unpacked in future research. The Altman and Sanders (1991) forecast has largely been borne out.

This context is important for understanding the current crisis. Clearly governments have failed over three decades to substantially improve Indigenous economic fortunes, especially for poorer Indigenous households. Efforts to increase incomes by ‘nudging’ Indigenous people to enter the labour market through increasingly onerous mutual obligation have failed. Nor has the market provided Indigenous economic prosperity. If Indigenous economic circumstances are to improve, a fundamental rethink of policy is unavoidable.

Looking forward: An agenda for reform

Immediate crisis measures are called for to limit the economic fallout of the COVID-19 pandemic for Indigenous economies. Many small but economically and socially important Indigenous enterprises are likely to flounder and will need urgent, and perhaps locally and culturally flexible forms of, support. Damage to the Indigenous economies may take decades to repair if organisations are allowed to fail during this time.

Beyond the immediate crisis, the COVID-19 outbreak appears likely to leave a wake of economic destruction. It also provides an opportunity to rethink social security policy, not only for the short term but for the longer term as well. The introduction of the Coronavirus Supplement promises to provide the largest increase to Indigenous incomes in three decades, albeit only for a period of six months. However, Indigenous job losses are also likely to be substantial and potentially sustained in a slowly recovering economy. It is incumbent on policymakers therefore to consider what response is possible to both ameliorate the worst effects of the crisis and lay the foundation for growing Indigenous incomes over the next three decades.

While this brief paper provides little opportunity to develop a detailed policy program, I argue that two complementary approaches need to be considered. The first is a recognition that government re-engagement in the Indigenous labour market is necessary if Indigenous employment levels are to be increased. The CDP experience of incentivising Indigenous labour market participants to seek out employment outside of their own communities has failed to provide adequate incomes (or jobs) for Indigenous people. While a long-term focus on education is important, any genuine attempt to increase Indigenous employment must also engage with the challenge of creating remunerated activities that Indigenous people are ready and able to undertake, in the

³ Labour force statistics are not available disaggregated according to the ABS Remoteness Structure. Consequently, we proxy remote Australia using six remote regions in the ABS SA4 classification: ‘Far West and Orana (NSW)’, ‘Queensland – Outback’, ‘South Australia – Outback’, ‘Western Australia - Outback (North)’, ‘Western Australia - Outback (South)’, and ‘Northern Territory – Outback’.

⁴ Comparing the real median weekly personal gross income of CDEP workers in remote areas in the 2008 NATSISS with those of CDP participants in the 2018–19 NATSIHS.

places where they live. A decentralised approach that allows local or regional Indigenous groups to determine the content of such work has proven to have many benefits in the past, and not just in remote areas (Jordan, 2016). However, CDEP's effectiveness was ultimately undermined by its notional link to social security system (Sanders, 1997), leaving it vulnerable to being disparaged as 'welfare' (Gordon, 2011), and by the limits it placed on participants' incomes. Direct employment models such as that proposed by APONT (2017), coupled with the funding of Indigenous sector and public sector jobs, might overcome such difficulties.

The second and most urgent task is to normalise the emergency changes to the social security system introduced these last weeks. There is an urgent need for an income safety net for those unable to find long-term or secure employment that does not relegate social security recipients to deep structural poverty. This normalisation process would primarily involve three elements: (1) the removal of the time limit on the Coronavirus Supplement; (2) the unification of the Jobseeker Payment with other payments which now receive a lower level of income (particularly the Disability Support Pension and the Age Pension); and (3) the removal of conditionality from this new unified payment (while leaving some form of income test in place to restrain government expenditure within reasonable bounds). This social security reform would provide those unable to work with the ability to pursue other productive and valuable activities, including care work and culture work, without casting them into deep poverty.

Without such a transformational policy agenda, the economic situation of Indigenous people is likely to languish for decades to come. Indeed, in times of recession, Indigenous people are among those who suffer the most (see Hunter, 2009). The current crisis provides an opportunity for social security and employment policy to be recast around an agenda that could provide meaningful change for Indigenous people and accordingly, for the nation as a whole.

Governing the pandemic: Implications for Indigenous self-determination and self-governance

Diane Smith • Dr Diane Smith is a Fellow at CAEPR.

Introduction

Much has been written about the threat that COVID-19 poses to the health of Indigenous people living in remote communities. Indigenous leaders have been quick to point out the dangers. As Pat Turner, the CEO of the National Community Controlled Health Organisations (NACCHO) said in an interview with the ABC, 'if this virus gets into Aboriginal communities, it will be absolute devastation, absolute devastation without a doubt' (ABC, 2020a).

Many Indigenous professionals began highlighting on social media and interviews why such fears were very real. President of the Australian Indigenous Doctors Association, Dr Kristopher Rallah-Baker, told NITV News he was 'particularly worried about people living in Indigenous communities who were most vulnerable to the virus' (NACCHO, 2020). He noted that nationally, around 50% of adult First Nations people live with one of the major chronic diseases such as cardiovascular disease, kidney disease or cancer; and almost one-quarter have two or more of these chronic conditions. Because one in eight Indigenous households is overcrowded, significant further challenges arise for isolating suspected cases.

'The stakes could not be higher' said Mr John Paterson, CEO of the NT's Aboriginal Medical Services Alliance, Northern Territory in a media release on 18 March 2020 (AMSANT, 2020a). 'The risk factors for COVID-19 are greater than the H1N1 virus in 2009, which resulted in death rates among the Aboriginal and Torres Strait Islander population six times higher than the non-Indigenous community and the need for ICU [intensive care unit] admissions 8.5 times higher'. Patterson pointed to the 'narrow window of opportunity to prevent the spread of the virus into our communities', challenging governments to urgently provide 'a clear, consistent and appropriate response that will best support individuals and communities and contribute to the efforts of government and community organisations to deal with this crisis'.

The government response

In these early days of the spread of the COVID-19 virus in Australia, it is clear that governments have not been able to step up to the challenge of providing Indigenous Australian communities and organisations with 'a clear, consistent and appropriate response' – let alone bipartisan coordination of urgently needed policy and program support. Rather, federalism has failed Indigenous Australians. Responses have been subject to erratic separate pathways taken by state jurisdictions. Any hope of coordinated program implementation has defaulted into the siloed departmental architecture of old-time Indigenous Affairs.

State government responses seem to have been prompter than federal agencies in the Indigenous arena, with a rush to enact legal protocols and directives. For example, on March 20, 2020, the Western Australian State Government released the first of its binding 'Remote Aboriginal Communities Directions' for people living in remote Aboriginal communities (DPC, 2020a). The WA State of Emergency declaration provides special powers for the WA Police Commissioner and the Chief Health Officer, powers to restrict access in *and out* of remote Aboriginal communities. In effect a community resident *must* remain within the boundaries of their community. All state governments are closing their jurisdictional borders to travel. After several large Indigenous communities across Australia took measures into their own hands to limit incoming visitors, on March 26, 2020,

the National Cabinet provided in-principle agreement to the Commonwealth Minister for Health taking action under the *Biosecurity Act 2015* to restrict travel into remote Indigenous communities to prevent the spread of Covid-19 (Hunt & Wyatt, 2020). The previous day, on March 25, the Australian Government announced an allocation of \$57.8 million to 110 communities under a new 'Remote Community Preparedness and Retrieval Package' primary focusing on health assessment and care initiatives (Hunt, 2020).

In the context of rapid daily changes to the spread and expanding consequences of the pandemic, the Australian Government's National Indigenous Australians Agency (NIAA) website has begun to provide updates on travel restrictions to remote communities, but remains oddly bereft of Indigenous-specific information about how to physically manage the virus. Instead it continues to rely on instructions that have been developed for the wider Australian public, which are inappropriate for the social, cultural and economic contexts of Indigenous communities (whether they be remote, rural or urban) (Department of Health, 2020). For example, in communities with overcrowding, dilapidated housing infrastructure and poor internet connection it continues to recommend that people 'keep visitors to a minimum', 'avoid public gatherings and at risk groups', 'regularly disinfect surfaces that are touched a lot, such as tables, kitchen benches and doorknobs', 'increase ventilation in the home by opening windows or adjust air conditioning', and 'buy more goods and services online if you can for pick-up, pre-order or delivery'.

In the context of a looming crisis anticipated by many Indigenous leaders in their own communities, and an actively graduated response by governments for the general public, the Australian Government has been slow by comparison in its policy response on Indigenous matters. By contrast, Indigenous organisations, communities and their leaders have stepped up in an impressive way.

The Indigenous response

Indigenous organisations and leaders across communities and regions have been quick to independently propose and implement solutions; not only for their own local residents, but as being applicable more widely. Many have acted to close their communities down to access – by tourists, government officers and non-essential service delivery. They have been joined and supported by several of the peak representative and statutory agencies such as the NACCHO, the regional land councils, Indigenous Business Australia, The Indigenous Land and Sea Corporation, Supply Nation, and others.

Several Indigenous communities made decisions to limit access and travel. For example, on 24 March 2020, Mapoon Aboriginal Shire Council on western Cape York quickly advertised and implemented a ban on travel in and out of community to all but health and critical infrastructure workers (ABC, 2020b). Mapoon's decision to impose a lockdown was praised by the Cape York Health Council as 'decisive' and 'well ahead of the rest of the country, effectively 'cutting through all the bureaucracy' being based on strong evidence and local capacity to restrict travel (Mark Wenitong, quoted in ABC, 2020b). The Mapoon Shire's chief executive, Naseem Chetty, said it was a locally made decision based on advice from its Local Disaster Management Group and independent of any government directive. Local police and Aboriginal rangers monitored a checkpoint 10 kilometres outside of Mapoon to enforce the travel restrictions.

Indigenous leaders quickly called upon state governments to declare entire states and regions as 'special controlled areas' and to take 'extreme social isolation measures' requiring nonessential visitors to stay away (AMSANT, 2020b). In the context of slow initial responses from governments, some representative Indigenous organisations took action themselves. This included action by the Northern Land Council, the Anangu Pitjantjara Yankunytjatjara Lands and the Torres Strait Islands and Papua New Guinea border cross-regions to stop issuing new permits for visitors. At the direction of the Tiwi Land Council, its CEO also declared the closure of all remaining land and seas within the Tiwi Aboriginal Land Trust in response to the virus threat. Initiatives by

Tangentyere Council and Larrakia Nation in Alice Springs and Darwin focused on implementing a 'Return to Country' program that covers the cost of Aboriginal people stranded in towns to return to their home communities.

Health peak bodies and local medical centres proposed a raft of solutions based on local experience, such as: (a) the creation of remote retrieval teams made up of a nurse and a young Aboriginal community worker to evacuate high-risk people with COVID-19 and suspected cases; (b) options for ramping up health services in the case of an outbreak, with identified isolation and quarantine facilities in remote and regional centres, as well as hostel facilities in major centres for the temporary relocation of high-risk people; (c) proposals for mobile clinics to test patients in their homes; and (d) measures to ensure food security in remote communities and protect people from scammers.

Across the country, the government information gap out to communities is being filled by Indigenous organisations launching information campaigns translating health information into Indigenous languages (through videos, posters, artwork, Facebook and other social media) to inform people about hygiene and testing for COVID-19. Peak organisations (arts, land, housing, health) have become important conduits for sending out regular information updates to their member bodies.

With state and territory governments pursuing often separate courses, and in the clear absence of any coordinated cross-jurisdictional federal capacity, the Aboriginal Community-Controlled Health services sector has mobilised and is leading an advisory group to develop a management plan specific to Indigenous populations. In response to considerable Indigenous advocacy, the Australian Government has offered (Hunt, 2020) 45 flexible grants to help 110 remote communities across Australia protect themselves against COVID-19. The grants are available as part of a government's \$57.8 million Remote Community Preparedness and Retrieval package.

Finally, in response to calls for action by regional Indigenous representative bodies, some state governments have advertised their partnering with the Australian Government to implement new restrictions for access to designated regions 'to protect the health and wellbeing of residents'. With the effect that from 26 March 2020, access will be restricted into the following regions as a whole: the Kimberley (comprising all four local government areas); the WA Shire of Ngaanyatjarraku; and parts of the Shire of East Pilbara that encompass the communities of Jigalong, Martu homeland communities and Kiwirrkurra (DPC, 2020b).

Indigenous self-determination and self-governance has been both a loser and winner in all this. The 'loser', because national and state governments are often resorting to poorly coordinated unilateral interventions, where decision making and control is firmly retained in government hands. 'Winners', because many communities have simply stopped waiting for governments to act, and started making their own decisions and acting upon them. They have begun getting on with the practical work of self-determined governance in order to protect their people and communities.

The self-governance gap

At times of dire crisis such as this, the complete absence of any national policy platform from the Australian Government for self-determination becomes particularly telling; as does the absence of a national Indigenous representative body. The COVID-19 response is haunted by the ghost of the Aboriginal and Torres Strait Islander Commission (ATSIC).

The Howard Federal Government's legislation to remove ATSIC in 2004 was swiftly passed, without consultation with Indigenous peoples. The then Prime Minister John Howard referred to it as a 'failed experiment

of self-determination' (Howard & Vanstone 2004); a view also pushed by the ALP at the time. While ATSIC was not without its problems, it was not in fact a failed experiment, but rather a victim of governmental and bureaucratic politics. The considerable strength of ATSIC lay in its broad legislative mandate which included the formulation, implementation and monitoring of programs, developing policy proposals, advising and cooperating with other Indigenous organisations, industry and NGOs, advising the Minister, protecting cultural heritage, and collecting data and publishing research.

ATSIC was the first national representative body to give Indigenous Australians both advisory and decision-making capacity, providing it with a legitimate influential governance role in determining the direction and priorities of Australian Government policy and program implementation. ATSIC accumulated and deployed considerable expertise, practical capacity in its regional councils, and extensive information networks. In particular, the Commission carried out an important function – it gave information out to communities, heard about what was going on in communities, and connected people with services and support.

There is now a massive information and communications gap existing across Indigenous Affairs because ATSIC and its Regional Councils are gone. But more to the point, this is not simply an information gap. There is an Indigenous self-governance gap at the national level. This is leading to significant challenges for Indigenous Australian communities which the pandemic is currently bringing to the forefront. AMSANT's recent call on government to provide a 'clear, consistent and appropriate response' to the COVID-19 crisis, is precisely what ATSIC would have provided Indigenous Australians several weeks ago (AMSANT, 2020a). There has not been any close replacement of ATSIC; the exception being the more recent National Congress of Australia's First Peoples which, in many respects, was set up to fail with substantial funding cuts and then restrictions imposed on it by the Australian government (Allam, 2019). In the COVID-19 context, regional organisations, local communities and peak bodies have tried valiantly to step into the breach.

Evidence suggests that what is needed is a national Indigenous institution, properly and recurrently funded, representing the diversity of Indigenous political and cultural structures, and having a stable statutory or legislated basis for promoting the exercise of Indigenous self-determination across Australia. Such a national structure would better support the work of communities and peak organisations, and provide Indigenous Australians with 'a clear, consistent and appropriate response' not only in times of crisis, but for the reconstruction and recovery that will be needed in the future by all Indigenous communities.

The COVID-19 pandemic shows us in stark terms that solutions and communications appropriate to 'mainstream' Australia, and mandated from the urban 'centre' are likely to fail Indigenous people. It also shows us that Indigenous people, their organisations and polities are capable of reacting quickly, effectively and appropriately to such a crisis. Yet these are the very same communities and organisations who have borne the brunt of repeated funding cuts by governments in recent years, and been subjected to a rollercoaster of short-termism in government policy-making and program implementation. This is not just a lesson for the present, but should be remembered into the future. Governments must increase funding and decision-making authority for these organisations to support their ongoing contribution at the front line of the pandemic. Furthermore, that needs to be translated into a reinvigorated policy framework for Indigenous community and peak organisations that includes sustained recurrent funding over the longer term; not as a time-specific experiment. Arrangements for the establishment of a future national representative Indigenous body should recognise the foundation stone of capacity and resilience that exists within Indigenous polities, communities and their organisations, and ensure they are given a real voice in future national decision-making and recovery initiatives.

Isolated from COVID-19, endangered by domestic violence: The heightened risk of violence against women in the Northern Territory

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Introduction

In response to the COVID-19 crisis, the Northern Territory Government's current position is that Aboriginal people are safest on-country in their remote communities. There have been social media campaigns urging Aboriginal people to return to community and offering them assistance to do so. The Australian Government has also repeatedly and decisively advised people to remain in their homes and avoid social interaction. These measures, they tell us, are to protect the most vulnerable among us, including Aboriginal people. However, where in the conversation is the awareness about how these measures will affect women experiencing domestic violence?⁵ Women will disproportionately bear the impacts of the COVID-19 pandemic, including an escalation in violence, and Aboriginal women in the Northern Territory are at heightened risk.

Domestic violence is likely to increase

Domestic violence is likely to increase during the COVID-19 crisis. Globally, times of stress see an increase in violence against women—this includes armed conflict, natural disasters, and even sporting events (Brimicombe & Cafe, 2012; WHO, 2017). The most recent bushfire crisis in Australia, for example, saw an increase in referrals to domestic violence support services, and studies found a similar increase in domestic violence both during and after the 2009 Black Saturday fires (Parkinson & Zara, 2013; Gleeson, 2020). It has also been reported that domestic violence reports in China have tripled since the beginning of the COVID-19 crisis (Baird, 2020).

The increase during periods of stress is theorised as being a result of increased tension within relationships, as well as the introduction of other risk factors for violence such as trauma, financial hardship, alcohol and substance abuse (Parkinson & Zara, 2013; Gleeson, 2020). However, the government's measures to respond to COVID-19 carry additional consequences for women.

The COVID-19 pandemic will disproportionately affect women, particularly those in heterosexual relationships, who already undertake the majority of unpaid caregiving and household tasks (Workplace Gender Equality Agency, n.d.). With the closure of schools and many workplaces, and increased time in the home, the burden of this additional unpaid work will fall to women. This has two effects: the performance of gendered norms and increased stress and tensions within the household. The link between inequitable gender roles and violence has been very well established (WHO & London School of Hygiene and Tropical Medicine, 2010; Bott et al., 2005). One domestic violence primary prevention project has found that gender roles in Aboriginal communities in the Northern Territory follow a similar inequitable binary to mainstream Australia (Brown, 2019a; Tangentyere Family Violence Prevention Program, 2020). Therefore, the COVID-19 restrictions will disproportionately affect both Indigenous and non-Indigenous women as it will increase the performance of gendered norms through

⁵ Also referred to as intimate partner violence or family violence, which are all forms of gender-based violence against women.

additional unpaid work and caregiving, as well as increase stress and tension within relationships – risk factors for violence against women (WHO, 2012).

The second restriction, and most alarming for women, is the requirement for isolation. Governments' advice to stay at home, means that women will be increasingly socially isolated. These are ripe conditions for coercive control – depriving women from accessing their support networks and putting them in the position where they are alone with their abusers for prolonged periods. There have already been reports of men using COVID-19 as justification for isolating their female partners, depriving them of healthcare, and barring them from support services (Baird, 2020). Whilst these reports presently primarily come from overseas, some Aboriginal organisations in the Northern Territory have expressed concern that this will also become apparent for Aboriginal women in communities. The rhetoric and discourse in government and the media that shames people for leaving their homes could also present additional barriers for women seeking help. Particularly since women often use regular everyday outside activities as a strategy and safe means to report violence. This option may no longer be available to them.

Indigenous women in remote communities are at greater risk

All women are at greater risk of experiencing violence in times of crisis, however Indigenous women in remote communities are at heightened risk. Indigenous women are already disproportionately affected by violence and are overrepresented as domestic, family, and sexual violence victims (Manjoo, 2012; Our Watch, 2018; NTG, 2018). Aboriginal women sent back to country may also have limited access to support networks and services. There is considerable concern among some Aboriginal organisations that women being sent back to community will be increasingly socially isolated by their partners.

Support networks are crucial to help women experiencing violence. Women often have their own ways of creating safety for themselves and their children, for example, they may have friends and family who provide intervention during violent incidents. In such cases, removing a woman from town to community may sever these networks. Many Indigenous women return to their male partner's community and family, rather than their own, which also disconnects them. This, in addition to self-isolation and social distancing policies, means women will be stuck inside and hidden – this is a worst-case scenario for women experiencing violence.

The ability to communicate and report are vital to monitor risk and prevent the reoccurrence of violence. However, remote Indigenous communities in the Northern Territory have little access to support and emergency services; and many communities have no phone coverage, no police, and/or no women's shelter. Domestic, family, and sexual violence services are usually based in regional towns – these services will be unable to monitor women experiencing violence (or men using violence) on country. Of the specialist services that were operating in communities, most have been grounded in response to social distancing measures and travel restrictions.

The Northern Territory Government has also closed the most widely used forms of transport in and out of communities and has banned all non-essential travel. This means remote communities will be even more cut off. The roads into and borders around communities are being patrolled by police, which could lower the police's ability to respond to domestic violence. The healthcare system will also likely become increasingly stretched, also possibly reducing its capacity to respond. With the reduced capacity of these frontline services to respond and make referrals, one Central Australian women's service is concerned that it will be extremely difficult to identify, access, and support women experiencing violence in remote communities – particularly those women who have not been previously identified as being at risk.

How can we respond?

At the community level, consciousness-raising about domestic violence and the risks to women during periods of isolation is vital. Awareness amongst agencies and services is critical to ensure people at risk of experiencing or perpetrating violence can be identified and safety plans put in place. Frontline services, especially non-specialist domestic violence agencies, such as police and healthcare professionals, must be aware that women are at heightened risk during this time so they can identify at-risk women and refer them to specialist services. This can be achieved through messaging and education programs, several of which are already in operation in the Northern Territory. These programs could be adapted to create awareness about the additional risk of violence against women during this time.

Such awareness should also be created among the general public, including within Indigenous communities, through messaging via a range of formats, including radio and social media. Violence against women thrives in silence and where it is hidden – messaging creates awareness and visibility. Messaging also contributes to creating a community culture which will not condone violence against women, which is necessary to prevent violence (Our Watch, 2018). Women's services in the Northern Territory have suggested messaging that highlights everyone's responsibility to keep women and children safe during this time. Such messaging will also help reduce stigma and support help-seeking behaviours. Several programs in the Northern Territory have previously undertaken anti-family violence consciousness-raising projects – their expertise could be drawn upon to develop culturally informed messaging aimed at creating awareness in Aboriginal communities.

At the individual level, safety planning with women is crucial. In the current climate, there is no time to complete full risk assessments. However, safety planning can be adapted for Aboriginal women, and services currently working with at-risk women can develop more detailed plans with their clients. For example, an Aboriginal organisation in Alice Springs is developing straightforward safety plans for Aboriginal women being sent back to community. This basic safety plan reminds women to have safety measures in place, and is put in the pack amongst other details such as health checklists, so their male partner is less likely to find it and the woman is not put at further risk. One women's service in Alice Springs reports that they have also completed safety plans with many at-risk Aboriginal women being returned to country and have included safety measures such as giving women a phone.

Many of the measures typically included in safety plans are not viable in the current circumstances, as they require time to put in place, such as installing deadlocks. They also may not fit the remote community context, for example, some have advocated for the introduction of fast-tracked interpersonal violence orders, but these are difficult to enforce in remote communities and are often ineffective. However, safety measures can be adapted from the literature to help women be safer during the COVID-19 crisis (Brown, 2019b; Dawn House Women's Shelter, 2020; Women's Health West, 2019). Basic safety planning could include:

- Ensure women have access to a phone.
- Ensure there is credit on the phone and pre-loaded and saved safety contact details.
- Advise women to find a safe place to keep the phone where no one else can find it.
- Teach harm minimisation strategies, for example: if a fight happens, do not fight in the kitchen or anywhere else weapons can be accessed. If this is unavoidable, put something between you and the other person, such as a table.
- Advise women to find a safe person in the community – this can be a friend, family member, or worker. Discuss how they can be contacted in an emergency.

- Ask women to designate a personal safe place on the community and come up with a plan about how they can get to that place in an emergency.
- Encourage women to build networks: talk and communicate with others, identify trusted people who can help. Be open with them about what is happening.
- Share information with other services so risks are known, and women can be supported on country.
- Advocate for reliable and available phone network coverage to keep women safer.

Conclusion

There are two levels of response where action and greater support are needed to acknowledge and alleviate the heightened risk to women during this time: namely, the individual and the community levels. Action should include support for consciousness-raising at a community level, and safety planning at an individual level. However, the most vital thing to ensuring women's safety is communication: between women experiencing violence and support services; between men who have used violence and support services; and between service providers and non-specialist agencies who can take a joint case-management approach. Importantly, the communication also needs to occur at the community and national level: domestic violence must be a part of the discourse and it must be seriously considered and publicly discussed by governments as they continue to roll out measures in response to COVID-19. On average more than one woman a week is murdered in Australia – we cannot protect women from COVID-19 only to kill them by ignoring the problem of domestic violence.

COVID-19 and the Aboriginal and Torres Strait Islander health workforce

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During pandemics Aboriginal and Torres Strait Islander people in the health workforce play a vital role in addressing the significant risks to Indigenous communities. They ameliorate risks, reduce impacts and improve health outcomes by providing culturally relevant information and culturally safe forms of care. The numbers of Indigenous health professionals are increasing, but too slowly. Important lessons will emerge in addressing the impacts of COVID-19 for supporting and growing this crucial workforce into the future.

Past insights

Aboriginal and Torres Strait Islander people facing a range of significant health burdens also carry serious vulnerabilities to infectious diseases. Valuable lessons on how to address risks have been drawn from the impact of the 2009 Influenza A H1N1 (swine flu) outbreak on Indigenous communities – the first pandemic declared by the World Health Organization (WHO) in this century (Massey et al., 2009b). Indigenous communities in Australia, as in New Zealand and Canada, were particularly affected, overrepresented in severe cases requiring hospitalisation and among fatal cases (Van Kerkhove et al., 2011). In Northern Australia, Indigenous people were hospitalised at a much higher rate than other parts of Australia (Flint et al. 2010).

Researchers have since identified to explain this are the effects of delayed or reduced access to healthcare, cultural differences in healthcare-seeking behaviour and in approaches to health as key factors to explain this impact (Van Kerkhove et al., 2011: 9). One study involving 19 separate Indigenous communities concluded that: ‘the process of engagement and ongoing respectful negotiations with communities is critical to developing culturally appropriate pandemic mitigation and management strategies’ (Massey et al., 2009a). Equally, local, culturally relevant factors were identified as crucial to reducing risks.

A decade on the legacy of the swine flu pandemic has shaped the way that communities and governments respond. Where previous plans did not refer to Indigenous populations, the Commonwealth’s current (2020) *Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)* includes *Management and Operational Plans for Aboriginal and Torres Strait Islander Populations* (Crooks et al., 2018; Miller & Durrheim, 2010).

This current plan was created by the Aboriginal and Torres Strait Islander Advisory Group on COVID-19, a body co-chaired by the Department of Health and the National Aboriginal Community Controlled Health Organisation (NAACHO). It places significant emphasis on appropriate forms of communication and engagement (Crooks in Sylvester & Beasley 2020) and maintains principles of shared decision making, community control, cultural safety and a commitment to utilising culturally inclusive data and evidence (Commonwealth of Australia, 2020).

Indigenous health workforce

Factors identified in the research as crucial to responding adequately to the threats of pandemics in Indigenous communities – developing respectful partnerships, providing culturally safe forms of care and culturally relevant information at the local level – are features of the unique capacity of the Aboriginal and Torres Strait Islander health workforce.

Clear and growing research evidence supports a general conclusion that Indigenous health staff play an instrumental role in delivering better health outcomes for Indigenous patients. This is most clearly evident in the ability of Indigenous health professionals to partner with non-Indigenous counterparts to create culturally safe treatment environments and culturally safe forms of care, both of which are strongly linked to improved communication, coordination and patient support throughout care, with fewer patients abandoning treatment early and better continuity of care (see e.g. Bourke et al., in press).

Currently the 'health care and social assistance' industry is the largest employer of Aboriginal and Torres Strait Islander people. This industry classification spans diverse settings including hospitals, GP clinics, community-controlled services and front-line workers. In the 2016 Census, almost one quarter of employed Aboriginal and Torres Strait Islander women (23.9%) reported working in this sector, along with a smaller but still substantial number of men (6.8%) (Venn & Biddle, 2018).

Despite ongoing commitment, across states, territories and federally, to growing the Indigenous contribution to the health workforce, leadership support is uneven and fails to present universally clear messaging that highlights the improved patient outcomes that an Indigenous health workforce is able to deliver (Bourke et al., in press).

Gains have been made over recent decades in increasing the numbers of Indigenous doctors, nurses, dentists and allied health professions. But challenges remain. Aboriginal and Torres Strait Islander people made up just over 1% of all nursing employees in 2016 but represented less than 1% of all employees across all other health professions (Bond et al., 2019). The numbers of Indigenous health workers and health practitioners are growing, but at a slower pace than overall Indigenous population growth. The cohort is also ageing and fewer people are entering the workforce (Wright et al 2019).

Growing the Indigenous health workforce has proven challenging. The existing focus on pipeline models of growth, emphasising education and training, gives insufficient attention to the key issue of retention linked to workplace experiences in the health system (Bond et al., 2019).

One recent survey identified the workplace itself as a major barrier to growing the Indigenous workforce. '[W]ork environment, heavy workloads, poorly documented/understood roles and responsibilities, low salary and a perception of salary disparity and work/life boundaries issues" all impact retention. '[S]upportive and culturally safe workplaces' were found to be vital to future Indigenous workforce growth (Lai et al., 2018). Increasing the Indigenous health workforce to meet health needs requires deeper understanding of workplace stresses and strains, as well as adequate modelling to anticipate where increases are needed based on community health needs as much as employment equity principles.

In the current pandemic the challenge will be to ensure government investment supports Indigenous health staff remaining in employment where they are most needed.

The current pandemic

In the context of COVID-19 the value of having a strongly supported Indigenous health workforce is clear. The increased workplace stress for the health workforce during a time of pandemic risks the exacerbation of existing tensions that impede workforce retention. At a time when efforts to grow this workforce are needed most urgently, there is more thinking to be done to ensure Aboriginal and Torres Strait Islander health professionals can continue to provide the best care for individuals and communities. One immediate risk is to the small staff numbers in remote communities: 'if staff become infected, entire communities may be without health services' (Finlay, 2020).

Two further potential risks arising from the COVID-19 response are beginning to be aired by those working in the sector. The Commonwealth's *COVID-19 Operational Plan for Aboriginal and Torres Strait Islander Populations* (Commonwealth of Australia 2020) includes a stated focus on engagement with local Aboriginal Health Practitioners, Aboriginal Health Workers, and Aboriginal and Torres Strait Islander public health workforce and a directive that this workforce be provided access to online training offered by the Commonwealth.

A critical emerging issue involves the capacity of IT infrastructure to enable this workforce to access online training in some locales. An escalated phase of the *Operational Plan* puts emphasis on the use of telehealth delivery of services by external health providers, putting further pressure on IT infrastructure capability particularly in remote areas.

There are also concerns about whether the current funding model based on Medical Benefits Schedule (MBS), is sufficiently flexible to allow Aboriginal Community Controlled Health services and general practice to increase staff numbers, pay their wages and equip them with the necessary supplies in line with community need. A lump sum payment model may be worth considering.

Finally, while the current pandemic focuses attention on urgent and immediate health demands, a critical part of the current COVID-19 response will involve evaluation. Included in the *Operational Plan* is a final phase for assessing health impacts of the pandemic, as well as assessing the operational constraints faced by community controlled and front-line services. Research attention to the specific workplace experiences of this latest pandemic among Aboriginal and Torres Strait Islander health professionals will provide essential insights to ensure the future participation and growth of this vital sector.

The CoVID-19 conundrum in remote Indigenous Australia: Schools

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I write this amid a cacophony of information overload, as ever more confusing messages from our political leadership struggle to deal with the COVID-19 health emergency. Prominent in the confusion is the messaging around school closures. Federalism is writ large in this discourse as the states, who have a constitutional responsibility for education, are moving unilaterally to protect their populations through (quasi) school closures.⁶ Unions are deeply concerned for teaching staff safety and parents, understandably, are worried about their children. The Australian Prime Minister, however, is insisting schools stay open, ostensibly for the benefit of 'essential workers' but then says: 'Now if you ask me who is an essential worker? Someone who has a job. Everyone who has a job in this economy is an essential worker' (ABC, 2020c).

So everyone with a job should send their kids to school? And only those employed in a job are doing work that is essential? In a context where we are being asked to stay home, practise social distancing and avoid gatherings of more than 2 people, the paradoxes are astounding. As any teacher knows, the very nature of a classroom and its sometimes wholly unhygienic inhabitants is the perfect Petri dish of viral reproduction.

Regardless of the politics, schools are moving to provide online classrooms and teaching to protect educational communities. My children's school, in a wealthy inner-city area, has moved to online packs, scheduled Zoom classrooms and virtual chat rooms for parents and staff. This will be a challenge, but the home-school nexus is already an integral part of the pedagogic fabric. However, geography is destiny in Australian education. In low socioeconomic areas of cities and in many regional and remote schools, parents and teachers already struggle to provide students with the IT knowledge, computer equipment and internet speeds needed to participate on an equal footing with their more fortunate peers. These inequities in Australia's education system are most pronounced for remote Indigenous students, both in terms of outcomes and resourcing (Neil, 2017). For example, Table 2 provides standardised outcomes for NAPLAN reading scores at year 3 by remoteness. In very remote areas of the nation only 48.4% of Indigenous students meet minimum benchmarks, with the figure dropping to 27.2 % in the Northern Territory. Such geographic discrepancies in education outcomes for Indigenous students are reproduced across all subject areas, across all states and territories but are most pronounced in the Northern Territory. Covid-19 is exacerbating this fault line and has presented remote educators and Indigenous communities with a difficult dilemma.

There is a palpable fear that COVID-19 will devastate Aboriginal populations in remote communities in Northern Australia. For example, there are over 45,500 Aboriginal people in the 'Outback' of the Northern Territory alone, and a quarter of these are children under 14 years of age (ABS, 2020).⁷ This population is highly vulnerable as a result of systemic and long-term neglect. Sadly, overcrowding, high rates of chronic disease, comorbidity, poor water security, high rates of unemployment, substance abuse and mental health issues are well established realities of the socioeconomic condition in remote communities. Add to this low levels of English literacy, mass returns to country from cities like Darwin – heightening community stressors and increasing overcrowding – a highly mobile population and communal cultural mores (social distancing will not work in these places – full stop) and you do not have to be an epidemiologist to be concerned about the impact COVID-19 might have. These communities are not cut off from the world or safe havens from the virus. As I write this, hundreds of fly-in fly-out workers are landing in communities with mining operations and the Kimberley in Western Australia has

⁶ In the NT, for example, schools are going to holidays early before moving to online provision (Uibo, 2020).

⁷ 'Outback NT' is classified as statistical area level 4 by the Australian Bureau of Statistics (ABS, 2020).

just had two confirmed cases.⁸ So, while the Minister for Indigenous affairs, the Hon. Ken Wyatt, and the Minister for Health, the Hon. Greg Hunt, are taking advice from an appointed Indigenous leadership about community lock-downs, there is a risk that the horse, as they say, may have already bolted (Hunt & Wyatt, 2020).

Table 2. Achievement of Year 3 students in reading, by Indigenous status, by remoteness, state and territory, 2019.

State/ Territory	Remoteness	Mean scale score	Below national minimum standard %		At national minimum standard %		Above national minimum standard %				At or above national minimum standard %
			Exempt	Band 1	Band 2	Band 3	Band 4	Band 5	Band 6 and above		
NT	Outer Regional	336.2	5.8	19.8	24.1	20.1	16.9	9.2	4.0	74.4	
NT	Remote	271.3	7.0	43.7	19.0	12.0	10.0	5.9	2.3	49.3	
NT	Very Remote	211.5	0.7	72.0	17.0	6.0	2.7	1.1	0.5	27.2	
Aust	Major Cities	377.9	2.8	7.5	19.3	21.1	21.6	17.0	10.6	89.6	
Aust	Inner Regional	372.6	3.0	8.0	20.7	22.2	20.8	16.3	9.0	89.0	
Aust	Outer Regional	355.9	2.9	11.7	24.0	23.4	19.9	12.2	6.0	85.5	
Aust	Remote	315.1	3.2	25.9	29.1	18.7	11.8	7.6	3.7	70.9	
Aust	Very Remote	261.5	1.6	49.9	27.0	12.0	5.8	2.5	1.2	48.4	

Source: Reproduced from Australian Curriculum, Assessment and Reporting Authority (2019, p. 4)

So what does this have to do with school closures? Well, in discussions I have held with educational leaders in remote communities over the last couple of days there is a feeling that they are between a rock and hard place. If they close the schools, thousands of students will be at a loose end in communities already dealing with a raft of social issues. Many children in communities are cared for by Elders, who are most vulnerable, and social practices mean children have far greater autonomy in their day-to-day lives than in other parts of the country. They probably will not stay home. Added to this, many children and families depend upon school nutrition programs just to meet basic food needs, and home is not always the safest place for some students.

Unlike my kids, for most remote students online learning is simply not an option, despite this being the approach advocated by the Northern Territory Government (Uibo, 2020). First, few homes have Internet services. Families generally do not have laptops or iPads ready to use and the schools simply do not have the resources to provide them. The school–community relationship is not one that has a digital footprint. It is built on face-to-face relationships. Educators are worried that they cannot facilitate the resources and capabilities for families to provide home schooling. Similarly, given that much of the learning is in English, which many family members might experience as a fourth or fifth language, the capacity for parents and guardians to help deliver home schooling is also questionable (Disbray, 2017).

On the flip side, educational leaders are concerned about their staff's safety and wellbeing as well as dealing with classrooms filled with children returning from all over the country. They are also finding themselves as mediators in a context where rumours, misunderstandings and misinformation abound. Educators are angry that

⁸ At the time of writing mining operations are just moving to take precautions to protect communities. See for example Rio Tinto's Gove Operations Community Notice March 25 (Rio Tinto, 2020)

they face this situation and are blaming the deep inequities remote students currently face and a succession of failed policy and budget cuts to remote education by both NT and Australian Governments. Teachers cite disinvestment in local secondary education in favour of boarding school models, a long-term ideological opposition to proper resourcing of bilingual education, and a failure to support local models of self-determined education as drivers of inequity.

In the short term, there are no easy solutions. However, the prevarication and lack of clarity from the political leadership has been less than inspirational. Communities in the North need the power to make local decisions. Despite the clearly difficult contexts they face in this emergency, remote communities have demonstrable local governance, deep stores of knowledge and know what is best for themselves. The decision to close schools or not needs to be made at the chalkface. In the longer term, the COVID-19 health emergency has made it clear that reinvestment in local solutions, place-based pedagogy and an equitable share of the educational budget is a must. Australia's First Nations' people depend upon it.

Energy security on remote Aboriginal communities during the COVID-19 crisis

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The current serious threat facing Indigenous communities has led many organisations in northern Australia to take the precaution of sending vulnerable community members back to remote homelands in an effort to physically isolate residents from COVID-19. After many years in which the focus of investment and government policy has moved toward larger communities and towns, the physical and organisational infrastructure supporting many smaller remote communities will likely be tried in new ways, as myriad and cross-cutting issues add complexity and cost to the challenge of remaining healthy on remote communities.

Remote communities are likely to be tested disproportionately during the current crisis (Whiting & Handley, 2020). In many communities, structural factors such as inadequate and poor-quality housing, fixed high energy use appliances (McKenzie, 2013), overcrowded and under-serviced households, and high levels of residential mobility will present immediate challenges to residents, communities, service providers and policy makers over the coming months.

Remote outstations

One issue of importance that is already apparent is accessing reliable and affordable energy services during this time. Energy services are often considered both ubiquitous and unobtrusive in 'developed' regions with access to the national or regional electricity grid (Bouzarovski et al., 2018). However, many remote communities are distant from transmission infrastructure and rely on diesel generators or standalone renewable energy systems to provide essential services. These key pieces of community infrastructure are generally maintained by Indigenous community councils, resource agencies, local government shires or by communities themselves. Supporting organisations play a vital role in service provision and many are likely to be stretched thin as vulnerabilities compound, making greater levels of support during this time imperative. In this context renewable energy (such as solar photovoltaics), requiring few inputs, can effectively remove risk in communities and do much to build the independence and capacity that Aboriginal people and communities have consistently called for and worked toward.

Energy is intrinsically linked to health outcomes (White & Sintov, 2020) through its relationship with living conditions in the household. Without reliable access to affordable energy, essential energy needs are quickly jeopardised: no water is pumped; food and medicines spoil in the heat through lack of refrigeration; and temperatures can reach life-threatening levels without adequate access to cooling (Longden, 2018). Maintaining reliable access to energy services for essential energy needs is particularly important in the context of impending income shocks to Aboriginal individuals and organisations in coming months (Altman & Markham, 2020), which may impact on the ability to meet energy (and other) bills and influence decisions about energy expenditure. This is an area that should be of concern to governments in the immediate context of the potential spread of COVID-19 into remote communities, as well as to policy makers for the longer term.

Communities and town reserves

For too long, expensive and environmentally damaging diesel has been the core economic input for many larger remote communities. Energy payment systems (such as prepayment) have been developed to better enable state-owned energy providers to recover the high recurring liquid fuel (and distribution) costs from community

residents, many of whom are amongst the most income poor in Australia. Electricity in remote regions is amongst some of the most expensive to generate, due to high underlying fuel costs (AECOM, 2014), although community service obligations, as well as myriad incentives and rebates, are used to bring down the cost of electricity at the level of the consumer.

Prepayment methods can bring benefits to residents – they reduce the costs associated with disconnecting and reconnecting energy services to the home and make energy use conspicuous in ways that can help residents to manage bills (Middlemiss & Gillard, 2015). Whilst prepayment is often favoured over other forms of billing in larger Aboriginal communities, it is thought to increase the frequency of disconnection of energy services (McKenzie, 2013) with all the consequences that entails for the day-to-day capabilities that energy enables in the household. Prepayment is problematic for many Indigenous households where incomes may be low, erratic and distributed amongst a large number of household residents. Adaptive behaviours such as making frequent trips to community stores to purchase credit for energy services will likely be discouraged during the current crisis. This will present serious challenges for residents and providers alike in the maintenance of non-negotiable energy needs (such as refrigeration).

Reducing energy disconnection

In the current COVID-19 crisis Aboriginal residents will be necessarily house- or outstation-bound. Energy providers should be focussed on greatly decreasing the incidence of disconnection of energy services to Aboriginal households through any mechanisms available to them. This could include fuel support, reduction in tariffs, bill relief, or directly suspending disconnections whilst maintaining community energy security. Direct options that ensure continued access to household energy services should be favoured over more bureaucratic interventions such as rebates, the benefits of which will likely take some time to reach residents in remote and regional settlements. We have seen Australian governments make similar policy statements in relation to a moratorium on rental evictions for the Australian public.

Moreover, the current crisis should force us to think deeply about the need for resilient and well-resourced remote communities supported by robust, reliable, affordable and culturally appropriate essential services. It is long past time for action to better prepare remote communities for issues related to energy, water and food security. Undoubtedly the current crisis will add momentum to calls for an overhaul of the way remote communities are viewed by government. In this context, renewable energy (such as solar photovoltaics) can be a risk remover for remote communities – working to secure energy and water services for residents with little need for recurrent inputs, whilst providing potentially life-saving and wellbeing-enabling physical infrastructure.

Post-crisis reconstruction: The case for an Indigenous-specific policy response

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The social and economic impact of the COVID-19 pandemic will be significant (McKibbin & Fernando, 2020), and will continue to reverberate over an extended period. In this brief article, I do not seek to assess or quantify the adverse consequences of the pandemic. Instead I suggest that policymakers have a duty to consider a range of scenarios for the immediate future, including scenarios where the health consequences and economic costs are deep and long lasting (Henry 2020). The following proposal is premised on two simple propositions: first, while we may hope for the best, prudent public policymaking should plan for the worst. Second, in the current crisis, Indigenous citizens and communities are particularly vulnerable and have unique needs and aspirations.

Given the certain and significant, but presently unquantifiable, social, economic, health and cultural costs of the crisis, the Australian Government should initiate action immediately to begin the process of planning for post-crisis reconstruction amongst First Nations citizens. By 'reconstruction', I mean addressing the primary needs of those citizens and communities particularly where mainstream services and programs are not able to meet their needs. Reconstruction should focus on strengthening the social determinants of health and building economic resilience – policy issues on which governments and policymakers have failed to deliver for First Nations citizens over the past four decades.

To deliver an effective and proactive reconstruction program, there will be a need for the rapid establishment of a new organisation focussed solely on this task, and allocated the human and financial resources to make a difference. While its priorities would be a matter for its Board, obvious areas of attention would include oversighting a ramp-up in investment for remote and community housing, the strengthening of health infrastructure including human resources capabilities servicing First Nations communities, and greater investment in innovative education and early childhood services for First Nations families across the nation.

Precedents

There are international and Australian precedents for establishing *at an early stage* a forward-looking institutional mechanism to plan for and support the complex and uncertain challenges of a post-crisis world. In early 1932, as the Great Depression took hold, the Hoover Administration in the United States established the Reconstruction Finance Corporation to provide relief to banks and railroads and its remit was broadened the following year by the Roosevelt Administration. It operated through to the end of World War II. Writing recently in *The New Yorker*, Cassidy (2020) identified four keys to the RFC's success: independence, leverage, leadership and equity.

In Australia, in 1943 at the height of the World War II, Prime Minister John Curtin established the Department of Post War Reconstruction with visionary public servant Dr H. C. Coombs as its Director-General. The Department operated through to 1949, and was central to post-war economic policymaking in the lead up to the economic boom of the 1950s (Rowse 2002, pp. 161–165).

The lessons are that crises have short and medium term costs, but they also create opportunities that, to be grasped, require an early commitment to shaping the post-crisis future.

Why focus just on First Nations?

There is, of course, an argument that the Australian Government should adopt a national approach and establish a mainstream post-crisis institutional mechanism. Whether or not it does so is not irrelevant to this proposal. If it did do so, there would nevertheless be a strong case for establishing within, or alongside, the mainstream institution a separate Indigenous-oriented mechanism. The reason is that First Nations citizens are not only particularly vulnerable to the crisis, exacerbated by the ongoing impact of exclusionary institutions (Westbury & Dillon 2019), but they will have unique needs and aspirations for post-crisis reconstruction. In the absence of a national mainstream post-crisis policy approach, the pre-existing circumstances of First Nations citizens, and the likelihood that the impact of the crisis will fall more heavily, more deeply, and for longer on First Nations citizens, suggests that an Indigenous-specific policy initiative is justified.

Design options for a post crisis institutional response

Clearly, at this point in time, the nation has a blank sheet of paper in terms of design options. As with any design process, particular choices inevitably preclude alternatives, and overall there will always be tradeoffs as well as unintended consequences. Perfect institutions are a chimera. The following points reflect my own perspectives and experience in institutional design in the Indigenous policy space.

In terms of substance, I would suggest that what is required is an agency or corporation established initially by administrative fiat, but ultimately by statute, with executive powers and capabilities (i.e. able to take meaningful decisions). It would require:

- a majority Indigenous Board appointed for their expertise, but also some representatives of the Executive and possibly the Parliament;
- a membership that is demonstrably bipartisan or apolitical;
- access to financial resources comparable to the level of need to be targeted (my provisional estimate would be \$20 billion over 10 years);
- powers designed to facilitate accessing private sector sources of cofinance where circumstances allow (e.g. housing finance);
- an explicit remit to work with, and provide funding to, existing entities in the public sector at both Commonwealth, state and territory levels, as well as to existing Indigenous organisations;
- statutorily guaranteed independence from the government of the day;
- robust accountability to Parliament;
- strong transparency obligations;
- a finite five-year plus five-year term (i.e. a legislated sunset after 10 years);
- a remit that ensures its focus is primarily on addressing tangible needs and consequences arising from the crisis, whether they be social determinants of health and wellbeing, economic opportunities, or cultural and environmental opportunities; and

- an overarching objective to counter pre-existing exclusion and deliver greater inclusion to First Nations citizens.

There should also be a separate Advisory Board comprised of a majority of Indigenous experts with a remit to:

- report to the Parliament annually on the performance of the agency/corporation in addressing its legislated objectives;
- review the operation of the agency with a view to suggesting potential design changes to improve performance after two years; and
- suggest (but not appoint) potential board members as required.

Of course, these design parameters (or some variant thereof) should be the subject of consultation and negotiation with relevant Indigenous interests (e.g. the Coalition of Aboriginal and Torres Strait Islander Peak Organisations). Nevertheless, there is also a pressing need for speed if such an institutional reform is to have the best chance of success. Ultimately, it is the elected government who must take responsibility for whether effective post-crisis planning via an institutional reform is put in place or not.

The cost of not focussing early on post-crisis reconstruction

The assumption that once the COVID-19 virus is under control, normality will seamlessly return, is unlikely to be correct. It was not the experience following the collapse of the global economy in 1929, nor was it the experience immediately following World War II. Today's crisis may not be on the same scale as these previous social and economic disasters, but for many First Nations citizens, the impacts will be comparable. Many First Nations communities lack the health and economic resilience that would ensure a return to pre-crisis normality, not least because pre-crisis normality for them was deeply compromised. Indeed, from their perspective, a state of crisis has been ongoing since 1788.

If the nation is serious about addressing Indigenous disadvantage and encouraging Indigenous aspiration and contribution, it will need to *immediately* set in place a strategy to minimise the likelihood that Indigenous exclusion, in all its forms, is exacerbated as the crisis recedes. Such an exacerbation would not only harm First Nations citizens, but would impose longer-term health, education, social security and justice sector costs on taxpayers, and deny the nation the potential benefits of an inclusive society.

Finally, there is no guarantee that the next crisis will not emerge within the coming decade. A failure to act now will leave the nation's most disadvantaged citizens even more vulnerable to future pandemics and economic shocks, which will be a lose/lose outcome for both mainstream interests and First Nations.

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