



## **PRESS RELEASE- “Inteyerrkwe Statement”** **(Pronounced In-eke--wa )**

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*“We acknowledge and say sorry for the hurt, pain and suffering caused by Aboriginal males to our wives, to our children, to our mothers, to our grandmothers, to our granddaughters, to our aunts, to our nieces and to our sisters.*

*“We also acknowledge that we need the love and support of our Aboriginal women to help us move forward.”*

### **Speech John Liddle Male Health Manager**

I would like to commence by paying my respects to the Eastern Arrernte people and their ancestors on whose lands we meet.

And, on behalf of the Aboriginal men here today, I welcome all our visitors to the 2008 Central Australian Aboriginal Congress Male Health Summit.

I give recognition to the Aboriginal males who have come together over the last three days working together to demonstrate their commitment to making their communities better places.

I also thank all those Aboriginal and non-Aboriginal people, who have given their time to ensure that this Summit has been so successful.

My thanks also to Arrernte Workforce Solutions for organising all the site catering and logistics

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Aboriginal men from across central Australia have come to Ross River to express their support for their brothers in the Northern Territory, following the roll out of the Federal Intervention a year ago.

This includes Aboriginal men from Cape York in Queensland, Mt Isa, the central coast of New South Wales, Albany in Western Australia, and Adelaide in South Australia.

In total nearly 400 Aboriginal men have travelled to this place to discuss the health of themselves, their families and their communities.

I would also like to give recognition to Office of Aboriginal and Torres Strait Islander Health for funding the Summit.

There are many reasons why we held this Summit. I am conscious that we are not the first gathering of Aboriginal males to meet at Ross River to discuss male health - we may not be the last.

There has been over a decade of work by Aboriginal men to establish male health in the policy debates, but as I will outline later I feel we now need to move beyond the policy struggle to implementing the vision.

Nor can we, nor do we want to, ignore the "Little Children are Sacred" report's findings and recommendations.

Many of us contributed our feelings and ideas to the Inquiry co-chairs Pat Anderson and Rex Wild (and I thank Rex for coming and joining us at this Summit).

Here I remind you what Rex and Pat said: "Aboriginal men have been targeted as if they were the only perpetrators of child sexual abuse in communities."

They confirmed that: "This is inaccurate and has resulted in unfair shaming, and consequent further disempowerment, of Aboriginal men as a whole".

The Commonwealth Government's Northern Territory Emergency Response or the Intervention as it is known, has also loomed large in our lives.

While some provisions, most notably additional, long sought after financing in our communities, are welcome, other aspects of the package have had mixed impacts, sometimes creating more disempowerment, sometimes creating opportunities for social and emotional breathing space.

But I would like to say that this Summit is really an outcome of the discussions that have occurred with Aboriginal males who have attended

our Congress Male Health Service in Alice Springs over the last couple of years, particularly those who have attended and participated in our discussion and information sessions to move beyond the frustrations of being scapegoated and blamed for all the ills in our communities.

As one participant said to me, “Not all men are bastards!”

Congress agrees, and has seen many men come into our service, a unique service for Aboriginal males in Central Australia, and confront their own problems and those of their community.

We have seen what a difference a responsive community-controlled service can make in people taking control of their lives.

That is what this Summit has been about, Aboriginal males taking control, not being given it, not having it forced upon them, but willingly taking up the difficult challenges that confront us all.

Our struggles have aspects that are at times unique to us as Aboriginal people in this country but also sometimes have things in common with other males in the Australian society.

Patrick Dodson has been quoted that: “There has been a process of undermining the role and status of Aboriginal men within our society since the early days of Australia’s colonisation and continuing in recent commentary around the Northern Territory Intervention”.

When you add to this the rapid changes in the role of males within that colonising society and the consequent dislocation of non-Aboriginal males and their struggle to define new self-images, it is no wonder that Aboriginal males may struggle to make sense of the contemporary world.

And if those critical views of us as Aboriginal males are expressed with no effort to understand our cultural values, or the pressures caused by the colonial relationships and contemporary social transformations, then we become alienated from this society.

This alienation is at the core of the struggle for male health and wellbeing, as it acts to debase men, stripping away their dignity and the meaning in their lives. We therefore need to confront these social relationships that shape our health.

This does not excuse inappropriate behaviour, but I believe may help explain our silences about the behaviour of those we know to be doing wrong.

This Summit is about reversing these imposed images of the disempowered Aboriginal male.

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In doing so it draws upon the strengths of male culture as it still exists in our community and it draws upon the heritage of the many Aboriginal men and women who took control and established our community-controlled organisations over thirty years ago.

This change commences with the recognition that we are seeking our path as men, in two worlds, our Aboriginal culture and the broader Australian culture.

We know those men that we need to emulate and learn from in our culture; and we will work with our young males and male children to strengthen these cultural connections.

Our culture is a dynamic one that will meet challenges. As Summit participants we have pledged this to our communities.

We also know that to walk in the broader community as equals we must be organised and have a strong program and a willingness to pursue it. This is essential.

We can't ask others to do our work and we can't expect that our demands will be easily met. Many vital reforms flounder in their execution. Lets remember that it was nine years ago that the Learning Lessons report was written, seventeen years since the publication of the Royal Commission Into Aboriginal Deaths In Custody final report and we are close to the 20<sup>th</sup> anniversary of the National Aboriginal Health Strategy.

Our task is to ensure that what we seek is within our power to pursue and achieve.

That doesn't mean we don't seek additional commitments from governments, but that we can, as they say in government 'apply the blow torch' to get the outcomes we want.

Our first task is to ensure that Aboriginal male health is understood as our wellbeing.

In addition to notions of personal confidence and resilience, our wellbeing is intimately and inextricably placed in our cultural relationships with each other, our communities and our social interactions and status.

Therefore it is about the social relationships of our health.

The stories that we have shared in the last few days illustrate our state of health, and they can't be broken down into body parts.

Do this and you keep undoing us, and you break us down as well.

For Aboriginal males to work on their health issues they need safe places to explore their health. We need more Aboriginal male health services like Congress, that deal with all aspects of our health, that have a community development role, that deal with the social relationships of our health.

These centres must be staffed with males; both Aboriginal and non-Aboriginal who wish to work in this community development, or holistic primary health care framework.

We need to initiate actions and work with our women, to re-invigorate the health and wellbeing of our communities. There have been many proposals for concrete action on this at this Summit.

We have defined roles and talked about the necessary support needed that will allow more males to participate as fathers, uncles, brothers and sons in providing a safe and supportive environment for our children (and other members of our communities) to live happier, healthier and longer lives.

For us to achieve this we want all levels of government to empower our communities and to work in partnership with our traditional and cultural decision-making structures and processes.

Out of the hundreds of ideas that have been discussed and developed over the last three days at Ross River, some of the key recommendations that have come out of this forum are as follows:

**1. Establishment of community-based violence prevention programs, including programs specific to Aboriginal men.**

**2. Establishment of places of healing for Aboriginal men, including men's shelters/'sheds', short term 'drying out' places for men, and more resources for long-term rehabilitation of Aboriginal men with alcohol and other drug problems, preferably within their own community.**

**Also 'half-way' houses to either give 'time out' or time to move slowly back into work/family/training, preferably to be run by Aboriginal men.**

**3. Tax-free status for three years for identified communities for Aboriginal and non-Aboriginal professionals to attract much-needed doctors, health workers, teachers and police. Also incentives to employ Aboriginal people in similar positions.**

**4. Building the capacity of Aboriginal men in literacy and numeracy to access locally-based jobs, and better support for establishing local Aboriginal-controlled businesses to tap into the minerals boom, agriculture, aquaculture or whatever business activity is relevant to their traditional country. Also the linking of education and training to locally-based employment.**

**5. ‘Unfinished business’ – This Summit calls on the Federal Government and the Northern Territory Government to respond to its final report within three months (by the end of September, 2008).**

This is only a snapshot of the findings of many hours of discussion in the last days. The facilitators will enlarge upon these after morning tea,

(Pause)

And finally, and most importantly, the Aboriginal men attending this summit would like to take this opportunity to make a very important statement.

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*“We also acknowledge that we need the love and support of our Aboriginal women to help us move forward.”*

(Pause)

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All reports, images and recommendations will be available on  
line over the next few weeks @

[www.caac.org.au/malehealthinfo](http://www.caac.org.au/malehealthinfo)