

## North Australian Aboriginal Justice Agency

Freecall 1800 898 251 ABN 63 118 017 842 Email mail@naaja.org.au

## Closing speech - Top End FASD forum

31<sup>st</sup> May 2018, John Rawnsley

Delegates, we have heard over the last two days the impacts of FASD to individuals, families and communities. We have heard that it is an issue for all Territorians, and particularly for our most vulnerable and high risk. We have heard about how the prevalence of FASD adversely effects so many of our services including health, education and justice. We have heard about trauma and the need for healing and for the right connections.

These are hard things to talk about, because we know how perverse the alcohol culture is in the NT. We know the damage, its reach and strength. The cruelty of FASD is that it is just one of the many harms of alcohol misuse.

It is *most cruel* because it's impact is long term and lifelong.

We know it is only in recent years where we have understood plainly and clearly that a person who is pregnant, or thinks they may be pregnant, should not drink alcohol. We used to think that the boundary between baby and mother is resilient enough to withstand harm. We heard these things being said. This old thinking is wrong, but from a public promotions perspective we have only recently been told.

We also know there is hope. There are incredible stories of resilience and of change driven by the leadership from the ground up. We know how we can do more as individuals to educate and help each other.

Our greatest opportunity is to prevent FASD for the future – to ensure those in our circle whether they are friends or family or people or ourselves do not drink alcohol if a person is pregnant or think they might be pregnant.

Our women who are pregnant or think they might be pregnant can take control of their situation. Our men also have to step up and support our sisters and nieces and partners where necessary. But even these things are hard, because life and relationships are complicated. Vulnerable and high risk women are in tough places. Only they know how hard it is to turn things around.

To genuinely prevent FASD, it starts with what has been talked about in this room: people coming together to discuss this most important issue. We have recognised and understood this issue, and we have sought to unpack it and understand our context. And whilst we will do what we can, we also know the scale of this issue is so big it will require a concerted, larger response and that which governments can only do, on behalf of the people.

Our greatest opportunity is now.

And so we present a CALL TO ACTION, for all of us to do what we can to influence our own networks and also policy makers and government. I know many of you are already doing this, and this forum is about bringing us together, and making a collective call for the community to drive change. We collectively make this call for action.

Over the last two days we have heard from exceptional speakers and during the breakout sessions from all of us.

- In our welcome to country, we heard from Jeanneen about the Larrakia voices that stay with us.
- From the Honourable Natasha Fyles, we heard the government's commitment to alcohol reform and the courageous and up-front statements about the need to change the culture of alcohol.
- From Patto we heard of the important role community-controlled health services play and the nature of trauma specific to our place.
- From Cecilia we heard about the challenging work of a whole-of-government response and also the commitment and dedication to this get right.
- From Dr Mantho we heard about the specialist response and how this issue
  has been known for some time, and how people coming together to effect
  change is possible.

- From Prof Elliot we were privileged to hear an expert understanding of this complicated issue. It is hard to get the language right. We also need to build evidence-based approaches.
- From our friends and colleagues at Anyinginyi Health Service, Danila Dilba and Wurli Wurli, we heard about the incredible resilience and work at the front line and from a community perspective. LT, Sonia, Andrea, Phil, Kathleen and Maria are role models and leaders. We heard yesterday from the breakout session about how people in communities often do not receive recognition for the interventions in very trying circumstances. We commend your work. We also commend your place amongst families and communities, as a worker of an Aboriginal community-controlled organisation I know vicarious trauma affects us all, but particularly so for our Aboriginal staff. We commend your resilience as inspiration. So, audience, can I ask you give a round of applause to these people.
- We heard from Sarah and Danielle the powerful narrative of trauma-informed approaches. This is where true healing takes place.
- From Colleen we heard the important work of the Children's Commissioner.
   One memorable moment was the decades of working with Police and the common response of how a person who offends 'should know better'. They don't if their behaviour is affected by FASD.
- From Dr James we heard about the inspirational work of PATCHES.
- This morning we thank Heather for showing us the FASD hub, an important resource. The video of our men's role was particularly powerful, and we hope it can be used by people here today.
- We heard from Robyn about another valuable resource, NOFASD.
- My boss, Cilla Atkins, provided a justice perspective.
- We heard from Lauren and happy birthday again for today about practical tips and resources for engaging people around this sensitive subject.

We thank all our speakers and everyone's contribution in the breakout sessions.

We also thank our wonderful emcees and coordinators of this event. There are too many to thank, but especially we recognise the work of Theresa Roe, Brionee Noonan, and Heather Da'Antoine. We recognise Tania Davidson from the

Department of Health for assisting with funding and coordination from government. Can you please give a round of applause for their excellent work.

In closing, this most important issue brings a level of despair and a sense of disempowerment and hurt. These are sad stories. What we also have in this room is hope. We have smart, dedicated, passionate people from community and from the professions and services who care about the ones we love, and want to do more. We *can* do more.

And as we leave here today we ask that especially you take care of yourself. Self-care is important. Take care of yourself and others.

Thank you.