

# THE KAKADU CAMP

THE SECOND INDIGENOUS LEADERSHIP WORKSHOP





**The AMSANT Vision**



**Aboriginal community controlled  
health services  
in the Northern Territory  
will be independent  
and successful organisations,  
integrated into  
the NT health system, to provide  
high quality primary health care  
services that are responsive  
to the needs  
of the community.**



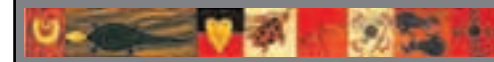
AMSANT respects Indigenous cultures and has attempted to ensure that no photos or words in this booklet are offensive to Aboriginal and Torres Strait Islander people.

# The AMSANT story so far ...

## The AMSANT Mission Statement

AMSANT is the peak body for Aboriginal community controlled health services in the NT and advocates for the provision of high quality primary health care services in accordance with the health needs in Aboriginal communities. Through its member organisations and the communities they represent, AMSANT seeks to build strong and viable capacity for the provision of effective health services.

*“Respect the land, respect each other and learn as much as you can from the people who are coming to speak with you.”*  
Jacob Nayinggul



The Aboriginal Medical Services Alliance (AMSANT) is a federation of 26 community controlled health services in the Northern Territory that works to achieve positive changes to the health outcomes of Aboriginal people.

Its principle functions are of corporate support – human resources, finance, media, legal etc – and the advocacy to, and lobbying of, governments, agencies and philanthropic groups to attract sufficient resources and funding to promote the growth of the health services.

AMSANT was formed in 1994 after an historic three-day meeting in Alice Springs that was attended by Aboriginal health services from across the NT. Its goal was clear – to advocate for the right of Aboriginal people in the NT to control their own health services because ‘community control’ has proved to be the most effective way to deliver comprehensive primary health care to Aboriginal communities.

This community control recognises and utilises Aboriginal people’s unique skills, cultural knowledge and linguistic diversity in delivering health care to our own people.

Since 1994, AMSANT’s advocacy and strong media profile, coupled with the intellectual rigour of our project and policy work, have gained the respect of health groups, clinicians and politicians around the nation.

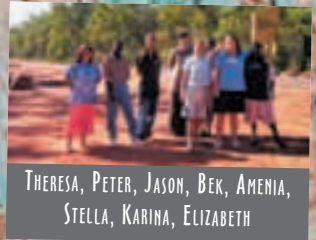
Indeed, as the peak body under the direction of our 26 members (each an Aboriginal community controlled health organisation) AMSANT has gained much influence and leads the way in the national debate on a wide variety of health issues.

AMSANT promotes and extends the principle of local community control over primary health care, pursuant to the findings of the National Aboriginal Health Strategy (1989), the Royal Commission into Aboriginal Deaths in Custody (1990) and the National Strategic Framework for Aboriginal and Torres Strait Islander Health (2003).

AMSANT continues to engage and cooperate with governments and the media to promote the rights of Aboriginal people to control and operate their own health services.



ANDREW, PATTO



THERESA, PETER, JASON, BEK, AMENIA, STELLA, KARINA, ELIZABETH



QUIET TIME AT WOMEN'S CAMP



AMENIA AND NATHAN



## Why did we hold our second Indigenous Leadership Workshop?

At many meetings in recent years, AMSANT member services have discussed the growing 'vacuum' in leadership, especially in relation to Aboriginal community controlled health services in the Northern Territory.

While the executive officers and Boards that control the services are currently guided by strong and innovative leaders, there is some concern that not all the young health workers 'coming through' are equipped with the necessary leadership skills and practical experience to take their places.

To reverse this trend the AMSANT Strategic Plan 2006-2009 has prioritised the "identification and support of emerging leaders within our health services".

To this end, AMSANT staff members were directed by member services to organise a second Leadership workshop to inspire and guide our young, emerging leaders. The first workshop was held in Alice Springs in October, 2006 and was praised by delegates as a great starting point for them to improve their leadership skills and consider their long-term career plans.

Oxfam Australia again kindly agreed to fund this workshop and they were instrumental in making it possible. The Office of Indigenous Policy Coordination (OIPC), the Fred Hollows Foundation and Imparja Television also contributed crucial funding and logistical support.

Kakadu National Park generously provided our camp-site, free of charge, and their East Alligator Rangers worked tirelessly to make our stay a comfortable and safe experience in the land of the crocodile.

The camp itself – tents, camouflage netting, cots, swags, tables, chairs, drinking water etc – was set up by the great men and women of NorForce from the Australian Army.

Special mention must be made of our caterers – the Ross family of Ross Catering Enterprises – who are much-loved veterans of the bush catering game and who provided terrific tucker and humour throughout the camp.

### Who were those people who first 'stood up' as young Leaders?

Planning for the second Leadership workshop – the Kakadu Leadership Camp – began in November 2006 and was immediately guided by a steering group of young people from AMSANT's member services.

Erin Lew Fatt of Danila Dilba Health Service took the lead and immediately involved Samone Sallik (Anyinginyi Health), Amenia Brunker (Miwatj Health), Karina Amess (Fred Hollows Foundation), Maida Stewart and Shaun Tatipata (Danila Dilba) in developing the program and logistics for the event.

The steering group held regular meetings and teleconferences with AMSANT staff to ensure the Kakadu Leadership Camp was held with maximum impact and minimum fuss.



ERIN



THE AMSANT TEAM



EDWARD



LISA



PETER



# Where was the Kakadu Leadership Camp held?



THE KAKADU CAMP

KARLEE, NATASHA, LOIISA, PAULA



NORFORCE

The first three days of the camp were held at the Merl campsite in Kakadu National Park, out in the bush and under the sun and stars, about 250km east of Darwin. The fourth day of the camp was held nearby in the town of Jabiru where we were hosted in deadly fashion by the good people at Kakadu Health Service and the Lakeview Park camp.

“These young people are the future of our health services and AMSANT is committed to supporting them along the way, in any way we can, so they can stand up as strong Aboriginal leaders and help guide the development of primary health care delivery in the Territory.”

Paula Arnol, AMSANT Chair

## Who were our special guests and facilitators?

AMSANT Executive Officer, John “Patto” Paterson, and AMSANT Chair, Paula Arnol (CEO of Danila Dilba Health Service) facilitated much of the leadership program and were ably supported by special guests:

- Jacob Nayinggul (Senior traditional owner of the Manilikarr clan)
- Gwenda Gless (Wurli Wurlinjang Health Service)
- David Lines, Eric Thomas and Brian Pedwell (Katherine West Health Board)
- Jacqui Katona (Political activist and community development consultant)
- Scott Stirling (CPR Media)
- David Scholz (General Manager, Kakadu Health Service)
- Nova Peris-Batman (Olympic hockey gold medallist)
- Bo de la Cruz (National touch-rugby player)

- Nathan Blacklock (Champion rugby league player)
- Andrew Wellings (Chief Ranger, East Alligator, Kakadu National Park)
- Lucas Paterson, Josh Taylor, Steve Johns & Freddy Baird (Rangers, Kakadu National Park)
- Major Morisio Cokanauto, LCPL Xander Whykes, LCPL John Tipiloura, Pte Andrew Potamini, Pte Thompson & Pte Lawson (Norforce, Australian Army)



JACOB NAYINGGUL, SENIOR TRADITIONAL OWNER OF THE MANILIKARR CLAN



NOVA, NATHAN, BO



## Who were our delegates?



THE KAKADU CAMP

### ANYINGINYI HEALTH ABORIGINAL CORPORATION (TENNANT CREEK)

Patricia Frank Duane Fraser Linda Turner

### CENTRAL AUSTRALIAN ABORIGINAL CONGRESS (ALICE SPRINGS)

Lisa Braedan Raelene McGuinness

### CENTRAL AUSTRALIAN REMOTE HEALTH DEVELOPMENT SERVICE (ALICE SPRINGS)

Alan Randall

### COOPERATIVE RESEARCH CENTRE FOR ABORIGINAL HEALTH (CRC)

Erin Lew Fatt (formerly of Danila Dilba)

### ILPURLA ABORIGINAL CORPORATION (WALLACE ROCK HOLE)

Leo Abbott Edward Rontji

### KAKADU HEALTH SERVICE

Louisa Bayne Natasha Nadji Karlee Rotumah

### KATHERINE WEST HEALTH BOARD

Lorraine Johns David Lines Brian Pedwell

Eric Thomas

### LAYNHAPUY HOMELANDS ASSOCIATION (GOVE)

Peter Mununggur

### LYENTYE APURTE HEALTH CENTRE (SANTA TERESA)

Jason King

### MIWATJ HEALTH SERVICE (NHULUNBUY)

Amenia Brunker

### MUTITJULU HEALTH SERVICE

Rita Okai

### NGALKANBUY HEALTH SERVICE (GALIWIN'KU)

Stella Minitjapuyrigu Elizabeth Rrapa

### OXFAM AUSTRALIA

Rebecca "Bek" Smith

### SUNRISE HEALTH SERVICE

Tara Harrower Glenda Robertson Glenda Trindle

Shane Wing

### THE FRED HOLLOWS FOUNDATION

Karina Amess

### WURLI WURLINJANG HEALTH SERVICE (KATHERINE)

Gwenda Gless

### WYN HEALTH SERVICE (YUENDUMU)

Alan Dickson

### AMSANT STAFF (DARWIN & ALICE SPRINGS)

Peter Bonner Graham Dowling

Des "The Cat" McKenzie Muki Muir

John "Patto" Paterson Theresa Roe



MORNING TEA



DUANE, AMENIA, KARINA



RITA



## Opening comments

In the shade of a great stand of trees at the Merl camp-site, "Patto" welcomed the delegates and advised them that the Kakadu camp was an opportunity for them to:

- \* Consider the role they play as either leaders or emerging leaders within their health services and, more broadly, in the Aboriginal health movement across Australia;

- \* Think about and discuss leadership issues that exist in their own communities;

- \* Learn and practise 'public address' techniques that would build their confidence and improve their effectiveness when talking to public groups;

- \* Work collaboratively with other delegates in the design and delivery of public addresses and presentations;

- \* Discuss and analyse the attributes of good leadership;

- \* Learn about and analyse the role AMSANT plays in the public health sector;

- \* Consider the evolution of Aboriginal

community controlled health services in the NT;

- \* Devise strategies to improve the operation of their own health services;

- \* Learn about the 'highs and lows' of a long career as an Aboriginal Health Worker;

- \* Discuss and analyse issues around 'cultural security' within Aboriginal health services;

- \* Consider the strategies required to lobby governments, corporations and funding bodies for policy changes, funding and capacity building for health services; and

- \* Discuss and design a personal 'Five-year career plan' to give delegates a sense of direction and attainment in their working lives.

*“ I gained great confidence at the Kakadu Camp and began to believe in my own abilities, especially in relation to public speaking. ”*

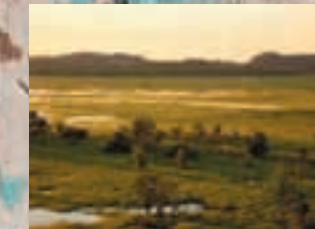


"Patto" insisted that all delegates should respect each others opinions, listen to all views respectfully and work together in harmony for mutual benefit. He encouraged everyone to "have some fun" at the Camp and try to develop new ways of thinking about their individual roles in their communities and health services.

### Traditional Welcome

Jacob Nayinggul, the senior traditional owner of the Manilikarr clan, warmly welcomed all delegates to his country and encouraged them to explore the land and enjoy the week's program of activities and events.

"This is our country, by law, but this is also your country to enjoy and to get to know while you are here," he said. "Respect the land, respect each other and learn as much as you can from the people who are coming to speak with you. Leadership is very important for Aboriginal people and you will be the ones to take over from us older leaders."



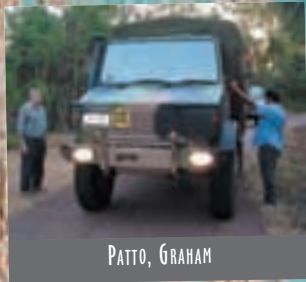
Theresa, Muki



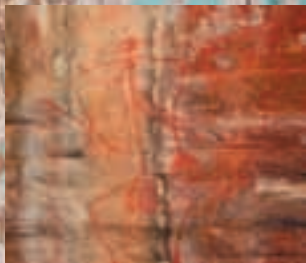
THE KAKADU CAMP

Jacob, Lucas

THE KAKADU CAMP



PATTO, GRAHAM



## Kakadu Park Rangers

Andrew Wellings, the Chief Ranger of East Alligator in Kakadu National Park, and his Park Rangers gave great assistance in setting up the camp and told the delegates how best to have a safe and comfortable stay in Kakadu. His best advice was not to swim in the East Alligator River in case of attack by *Crocodylus porosus*, the infamous saltwater crocodile.

The Rangers – Lucas Paterson, Josh Taylor, Steve Johns and Freddy Baird – set up camouflaged shade cloth for the meeting, collected fire-wood and carted mega-litres of drinking water for the AMSANT delegates. Their knowledge of Kakadu and its flora and fauna was shared generously and their sense of humour remained strong throughout the week.

## NorForce

The North West Mobile Force (NorForce) was established in 1981 to provide surveillance and reconnaissance throughout the NT and the Kimberley, an area of 1.8 million square kilometers.

NorForce is made up predominantly of Aboriginal soldiers who, during times of peace, detect drug smugglers, gun runners, illegal immigrants and foreign fishing boats poaching in Australian waters. They also helped AMSANT set up its leadership camp by providing tents, cots, swags, mosquito nets, awnings, shade-cloth, tables, chairs and lighting. It would have been a mighty uncomfortable week without their help and support!

Major Morisio Cokanauto said leadership was a critical element in any Army but was equally important in civilian life, especially if Aboriginal people were to tackle the inequities that constrain our development so much.

## Introductions

“Patto” invited delegates to introduce themselves and provide a brief outline of their history and work, and to talk about their expectations of the leadership camp. Many people said they were looking forward especially to the sessions on ‘public speaking’ and ‘advocacy’ as these were skills that would be important to their careers and leadership development.

*“I learnt that government policy is changing too fast and so many of our people in remote areas just don't know what's going on.”*

## Patto and Paula

“Patto” and AMSANT Chair, Paula Arrol, warmed up the morning session with a wide-ranging discussion about the evolution of community controlled health services and the role of AMSANT in the support of those services throughout the Territory.

“AMSANT is here to support you in your leadership journey and we will continue to organise leadership camps and workshops like this to better equip you for your career and the journey ahead,” Patto said.

“AMSANT staff members have been directed to assist and encourage you with your leadership aspirations, so contact them for any assistance you may need. Ultimately, you alone have the responsibility for your own career development and leadership goals but we're here as a resource when you need us.

“We acknowledge that the CEOs and managers of your health services are fully behind you in this leadership quest and we thank them for their cooperation.”

Paula spoke at length about the important role that leadership plays in our health services. She said she had visited many communities and had met many inspiring people, leaders in their own right, doing valuable grass-roots work to improve their communities, particularly in the area of health.

Paula insisted that Aboriginal people must continue to work collaboratively in the health sector if we are to develop sustainable solutions to the many issues that face us, individually and collectively.

“As emerging leaders in your communities you play an important role in this new, but challenging, era of change,” she said. “You leaders will be called upon, now and in the future, to inform governments on possible actions they can take to improve the future for Aboriginal people. Our collective priority must be to make communities healthier, safer and highly functional places for people to prosper.”

*“We've all learned a lot this week in Kakadu. We've learned a lot about ourselves, and our own potential, and we've got to know our colleagues much better. We've bonded together strongly and will continue to develop our new relationships well into the future. The AMSANT alliance is stronger than ever.”*

John Paterson, AMSANT EO.



DAVID AT KAKADU HEALTH



WOMEN'S CAMP



THE GROWING AGE OF LEADERSHIP



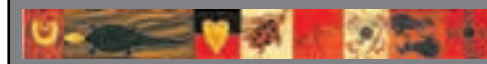
## What do I need to improve my health service?

To mix people up a bit the young leaders were randomly assigned to six groups to discuss and develop their ideas about improving their own health services. They talked up strong and lively and came up with some clear themes, many of which are shared throughout the Northern Territory by all AMSANT's member services:

- More lifestyle and health promotion programs
- Staff involvement in policy development
- Lobby for improved funding
- Empowering AHWs
- Better community consultation from government agencies
- More staff (AHWs, GPs, specialists and nurses)
- On-going leadership and training opportunities
- Engage and involve community elders
- Better support for young workers
- Update medical equipment
- Improved patient travel services
- More accredited training for AHWs
- Increased mental health services
- Up-skilling all staff

- Sharing success stories
- Two-way learning – traditional and western medicine
- Better housing for AHWs
- Improved wages and conditions
- Cultural awareness programs for new staff
- Mentoring programs for young staff
- Improved networking opportunities
- More training for, and support from, Board members
- Improved recruitment strategies
- More staff meetings

*“The Kakadu Camp has really sharpened my thinking about my future and I was very happy with the session where we all worked out a five-year career plan. That's exactly what I needed.”*



### A rock with a view

Ubirr Rock stands high over the floodplains of the East Alligator River, offering magnificent sunset views for those people who relish a short climb. The rock lies just five kilometers from the Merl camp so there were plenty of keen young leaders who wanted to check it out at the end of the day's work sessions.

At the base of the rock there are several natural shelters which house traditional 'art galleries' of red ochre and 'X-ray' style paintings, some up to 20,000 years old. These paintings depict creation beings of the traditional owners – mullet, goannas, turtles and barramundi – and caused great excitement among our group. Many were quite emotional at making a connection with their countrymen from thousands of years ago.



LOUISA, EDWARD, DUANE, ALAN D

LORRAINE, LOUISA

THE SECOND INDIGENOUS HEALTHY WORKSHOP

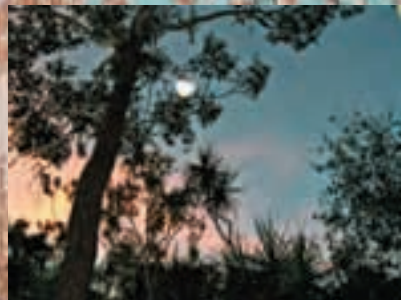




JOHN M, KARLEE, LOISA, ALAN D

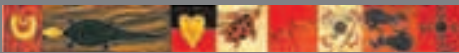


DEBATE TIME



“ I've had the privilege to work with AMSANT in their leadership program over the past year and have seen it develop from a one-day event into a well structured week-long program. I have seen positive stories and outcomes from young people from all over the NT, in urban and remote Indigenous communities. I am amazed how incredibly positive and motivated these young people are in carrying out the vital work they do in their health services.”

Rebecca 'Bek' Smith, Oxfam Australia



## Lessons from a long career as an Aboriginal Health Worker

Bright and early on Wednesday morning – day three of the Kakadu Camp – Gwenda Gless, a Level 5 AHW from Wurli Wurlijang Health Service in Katherine, gave a powerful and poignant address to the young leaders, detailing her long and eventful 20-year career in Aboriginal health.

Gwenda was particularly candid about the barriers that cause so many young Aboriginal Health Workers to leave their profession – heavy workloads, clinical pressures, family commitments and, tragically, too many funerals.

Despite many family tragedies and the pressures of her work, Gwenda progressed from being a cleaner at Anyinginyi Health in Tennant Creek to her current position as Clinic Coordinator at Wurli.

“How I survived, I will never know,” she told the meeting, “but having my family and my grannies around helped keep me sane and young at heart.

“Despite all the pressures, I do enjoy working in Aboriginal health because our clients are our people and not just government statistics and this is what motivates me to help improve the health of our people.”

For Gwenda, 'respect' is a key ingredient for succeeding in Aboriginal health: “New staff have got to respect the Aboriginal staff members because we have the skills, the knowledge and the experience that is so important. Good manners are important too.

“Most importantly, we all have to appreciate and respect our fellow workers and give them thanks and support whenever we can because this can be a hard and depressing job, especially if you don't have the full support of management.”



LINDA, GWENDA, ALAN R, GRAHAM K

## The path to cultural security

A joint presentation by senior Aboriginal Health Workers from Katherine West Health Board – David Lines, Brian Pedwell and Eric Thomas – brought focus and clarity to the sensitive issues of cultural awareness, cultural safety and cultural security.

The provision of Aboriginal primary health care is, necessarily, a partnership between indigenous and non-indigenous people in their individual capacities as health professionals, administrators and patients/clients. For the partnership to work successfully and sustainably and for all parties to have faith in the system which they work in, or are being treated in, strong levels of cultural understanding and respect must flow between all people.

The Katherine mob said that non-indigenous doctors and nurses often moved into communities to work, without any knowledge of local culture, family systems or language, making it very difficult for them to establish rapport or trust with their patients.

David, Brian and Eric identified three stages of understanding that would, ideally, provide

the right atmosphere and awareness for health services to provide culturally appropriate primary health care:

### (i) Cultural awareness

This is about individuals gaining an understanding that someone from another culture has a different view of the world and different ways of doing things and expressing themselves. When non-Aboriginal health professionals first go to a remote community they gain basic insights into the community's cultural way of life through orientation programs and Aboriginal mentors (AHWs, Board members and community people).

### (ii) Cultural safety

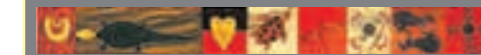
Cultural difference is respected and informal two-way learning takes place between Aboriginal and non-Aboriginal staff. In the community controlled health sector, Aboriginal people have the power to decide that the care they receive is culturally acceptable, thereby leading to a positive experience and continued self-presentation at the clinic.

### (iii) Cultural security

This relates to the systems, procedures and policies that organisations and groups should have in place to ensure the cultural safety of Aboriginal people from the time they first seek health care services.

Aboriginal people should be engaged to help develop appropriate policies through community consultation, regular visits by managers, and Board member approval and involvement in staff recruitment. This cultural security should also be reflected and reinforced in job descriptions, advertisements and performance reviews

*“ This is the first meeting that I've been to in a long time where I didn't have to take Panadol for a headache, maybe because we were out bush and we could relax more. ”*



BRIAN, DAVID ERIC



LEO



THE SECOND INDIAN PROTESTION

## Speaking up loud and strong

Public speaking is, to most people, the most frightening experience imaginable. More scary than a roomful of spiders; more daunting than a fistful of tax returns.

At AMSANT's first leadership workshop in Alice Springs in 2006, many delegates requested some basic training in public speaking because they realised it was an essential tool for anyone hoping to stand up as an Aboriginal leader.

With this in mind, AMSANT invited Scott Stirling of CPR Communications to the Kakadu Camp to talk to our delegates about speaking up in public, and to build their confidence in this most important of skills.

This session was an outstanding success and inspired many of our young people to get out of their seats and speak loud, strong and clear during practice sessions after Scott's presentation. Nervousness evaporated and confidence soared as the delegates shared their own life and career stories with a new enthusiasm before an audience of 50 people.

Scott broke down the 'preparation and delivery' of a public speech into the following sections:

**Analyse your audience.** Who are you speaking to? Is it formal or casual? Does your speech meet the audience's demands in terms of content and style?

**Objective.** Why are you making the speech? What do you hope to achieve? What action do you want from your audience?

**Research.** Make sure you understand your subject fully because you will lose all credibility if you don't. Use reliable sources in the library or on the internet or, better still, talk to people in the community, health agencies (like AMSANT) or government departments to get your information. Always verify your information from more than one source.

**Presentation structure.** Identify your subject. Decide what your conclusion will be. Identify your three main topics. Expand on these for the main body of your speech. Summarise the three topics to keep 'on message'. Think of a clever or funny opening to attract the audience's attention when you begin.

**Practise.** The more you practise the more confident you will be. If you don't practise your audience will know that you're not well prepared and will be less likely to believe you.

**Speech delivery.** Be prepared; be confident; be yourself.

Scott emphasised the need to 'be yourself' and to 'be relaxed' during the speech. He said don't try to be someone you aren't because the speech will sound 'gammon' or false if you do.

Other top tips that Scott gave us were: Take deep breaths before the speech to calm yourself down. Be relaxed in your stance and keep your shoulders back. 'Engage' with the audience from the start with a witty personal story and regular eye contact. Speak slowly. Consider involving the audience in your speech by asking them questions or allowing them to ask you.

“ I got a good sense of the power all us young Aboriginal people have when we plan together, and act together, to bring about positive change to our health services. ”



KARLEE, LOUISA



BEK, LOUISA



SCOTT



JOHN M

THE KAKADU CAMP



## Getting smart and getting results



DES

GLEND A



JACQUI

Jacqui Katona is a successful community campaigner and a member of the Djok clan, located within Kakadu National Park. Jacqui was at the forefront of the highly celebrated campaign against the Jabiluka uranium mine and was awarded the Goldman Environmental Prize in 1999.

AMSANT invited her to the Kakadu Camp to initiate and guide discussions around 'negotiating' and 'political campaigning', which are crucial leadership skills if Aboriginal people are to influence and shape public policy and corporate action.

Jacqui talked the leadership group through the need for a 'win-win' outcome to any negotiation so that no party feels robbed or that they have failed to protect their interests: "The most important aim of any negotiation is to know what outcome you need to achieve and to always have a bottom line that you can't, and won't, compromise on."

Jacqui said that your manner and presentation are very important in any negotiation: "It's important to be confident, courteous and respectful at all times, but never subservient, and always dress for the occasion. And never get angry because that will just block discussion and people will stop listening to you."

As with 'public speaking', Jacqui stressed the need for good preparation and research: "Know your business and have all the facts and figures you need; but also know their business as well and decide what's most important to them in the negotiation."

With regard to political campaigning and action, Jacqui gave the following advice:

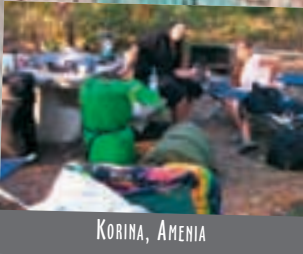
Identify the aim of the campaign. Identify who will be critical to the campaign's success. Build relationships and trust with potential partners. Make them believe in the campaign. Decide what action needs to be taken. Raise public awareness of the campaign's aims. Set out your timetable. Finalise your strategy. Make appointments and start negotiating. Build your networks. Lead by example. Get the 'fire in your belly'. Be passionate and committed to your ultimate aim.

After her presentation had fired everyone up, Jacqui and Des McKenzie (AMSANT staff) facilitated some fiery debates that enabled delegates to use their new public speaking and negotiating skills.

The debate topics were 'The NT is the perfect place for a nuclear waste dump!?' and 'The new Federal Government arrangements for Indigenous affairs are working very well!?' which got both the 'for' and 'against' teams speaking up with passion and purpose. It was clear from the quality of the debates that people had learnt a lot about public speaking, very quickly, from both Jacqui and Scott Stirling.



MUKI, LORRAINE, KARLEE, PATRICIA



KORINA, AMENIA



ELIZABETH



THE SECOND INDIGENOUS CAMP

# Kakadu Camp Summary

The success of the Kakadu Leadership Camp was ensured by the enthusiasm, energy and ideas of our young delegates, who clearly enjoyed the open-air camp setting in the majestic landscape of Kakadu.

Some of the delegates were very outspoken; others were a bit shy at first. But all joined in the discussions and presentations with growing confidence and awareness.

Everyone worked well together and opened their minds to a wide variety of sessions involving public speaking, advocacy, debating, political activism, the history of community controlled health services and the roles of AMSANT.

Patto, Paula, the AMSANT staff and Oxfam officer, Bek Smith, helped facilitate the sessions, many of which involved problem solving, group presentations and team building. At all times delegates were encouraged to work collaboratively and creatively in the development of their ideas and strategies, especially in relation to their own health services.

Much discussion centred on devising strategies for 'the way forward for Aboriginal community controlled health services' as there was an expectation that Canberra would increasingly try to marginalise and mainstream Aboriginal health services. (Just two weeks after the camp, Prime Minister Howard and Indigenous Affairs Minister Brough announced their radical 'intervention' into the Northern Territory in response to the Anderson/Wild inquiry into child sexual abuse.)



ALAN, JASON, GWENDA



PETER, ALAN D

KARINA, RAELENE, PATTO

THE COOKS THE ROSS FAMILY

SETTING UP CAMP



## Where to from here? ...



“The future of the Aboriginal community controlled health sector is in good hands. The quality and potential of the people within our health services is very encouraging and AMSANT will continue to support them and nurture their aspirations. This is a long-term project and a key priority for us.”

Paula Arnol, AMSANT Chair

The delegates gave strong feedback to Patto at the end of the Kakadu Camp and encouraged AMSANT to continue its leadership program and its commitment of support to emerging Aboriginal leaders in the health sector.

Generally, people appreciated having a full week to discuss and explore the issues of the day and to get to know their new colleagues and contacts in the comfortable surroundings of the bush camp.

Patto said AMSANT would nurture its growing partnerships with groups such as Oxfam, the Fred Hollows Foundation and the OIPC to ensure funding and support was available for the on-going AMSANT Indigenous Leadership Program.

Delegates volunteered to re-convene the AMSANT Leadership Group in August to plan for, and organise, the next leadership workshop in the near future.



“AMSANT is privileged to host the Indigenous Leadership program and assist in the development of so many fine young Aboriginal people within our health services. Our delegates are inspiring each other to grow and prosper in their professional, personal and family lives. We're proud of them all!”

John "Patto" Paterson, AMSANT Executive Officer



NATASHA



RAELENE



AMENIA, KATRINA



“ Everyone had a great attitude throughout the week and were willing to learn, and to share their stories and experience. I think we're all a bit stronger for the process and we've got a better sense of direction, as individuals and as health services. ”

“ The public speaking sessions were great and now I have some tools to refer to and use when next I have to get up and make a speech. Go AMSANT! ”

“ It was a great pleasure to be part of the Kakadu Camp and to meet so many like-minded people who are working so hard to improve Aboriginal health. ”

“ We all got a much better understanding of how AMSANT works to support and advocate for our health services, and how it helps to integrate primary health care across the Territory. ”

“ I really enjoyed interacting with new people and discussing current health issues with them. The main thing I got from the week was the idea that we should never give up fighting for what we believe is right. ”

“ Paula's session was very good and outlined to us the great support role that AMSANT plays for all Aboriginal health services in the NT. I've got a better idea now of how we can all work together to strengthen and expand community controlled health. ”



STELLA, ELIZABETH





## MEMBER SERVICES



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