



WRANA

**WOMEN'S RIGHTS ACTION
NETWORK AUSTRALIA**

“(Our Rights, Our Voices)”

**The Northern Territory
Community Report on
Women's Human-Rights
in Australia**

December 2004



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Executive Summary

The Women's Rights Action Network Australia (WRANA) has facilitated the *Women's Report Card Project* documenting the experiences of women in relation to human rights and gender equality across Australia. Key areas affecting women were identified and consultations around those issues were conducted in each state and territory. The Northern Territory report is presented according to the seven key areas under which the national report has been compiled: Violence Against Women; Law and Justice; Leadership and Political Participation; Housing and Utilities; Health; Education and Economic Security and Employment. These are all human rights protected in the United Nations' *Convention on the Elimination of all forms of Discrimination Against Women* (CEDAW), to which the Australian Government has voluntarily committed. CEDAW requires that governments implement actions to stop discrimination against women. Based on the consultations, the *Women's Report Card Project* will produce a Shadow Report to go to the United Nations at the time that the Australian Government's Fourth and Fifth Periodic Report on the implementation of CEDAW is considered.

This report is the findings of the Northern Territory-based consultations of the *Women's Report Card Project*.

Overview

According to the 2001 census:

- 27% of Northern Territory women are Aboriginal and a further 20% are born overseas
- The Northern Territory generally has a younger population - 24% of women are aged under 15, and only 5% over 65
- The average age of women in the Northern Territory is 27 years. One-third of non-Aboriginal women are under 20 years, and almost half (46%) of Aboriginal women are in this age group
- Approximately 23% of women speak a language other than English at home
- There fertility rates in the Northern Territory are relatively high, especially among young women
- There is a low life expectancy for Aboriginal women of 62 years, compared to 83 years for non-Aboriginal women

Women in consultations said that issues affecting women are treated as marginal and there is inadequate consultation with unrealistic response timelines. When women experience discrimination they tend to 'self blame' rather than understand the structural nature of the discrimination. Women continue to experience disadvantage because:

- Policy issues are not being addressed adequately on all levels
- Women's issues are not currently valued, or have no profile in the Northern Territory
- There is no dialogue/critical debate about issues important to women

The consultation also found that there are many aware and committed workers both within bureaucracy and the community sector.



All of the Northern Territory is remote. Many organisations across the Northern Territory experience difficulties with the recruitment and retention of appropriately skilled staff. Due to remoteness there are huge problems with service delivery across the board. The lack of resources is a common theme.

Safety and security issues are important to women across all regions and across all groups in the Northern Territory.

Indigenous women

Indigenous women face numerous barriers to accessing justice and having basic human rights met, notwithstanding the strength in women's voice and activism. These barriers are inherent in systems and processes within society. In most remote Indigenous communities there is a lack of access to basic services. This is compounded by:

- Increasing levels of domestic violence in Indigenous communities. Indigenous women who are victims of domestic violence often fear payback from the community if they try to leave or initiate legal action against the perpetrator
- If Indigenous women do leave an abusive relationship they often find it difficult to get help because of cultural and language barriers
- Indigenous women face discrimination in public housing, being required to provide references where non-Indigenous women are not
- Health services are often culturally inappropriate, making it difficult for Indigenous women to maintain their and their children's health
- The abolition of the Aboriginal and Torres Strait Islander Commission (ATSIC) and the creation of a national Indigenous council is of concern to many Indigenous women who fear their voices will not be heard
- Community Development Employment Projects, which account for more than half of Indigenous employment, provide no leave entitlements or access to unfair dismissal laws and other conditions that are available to other workers

Women from a non-English speaking background (NESB)

Mainstream community services, which are often Christian Church-based, are not culturally appropriate and are therefore under-utilised. Until there is some equity in the system and women from NESB are asked to provide their input into the development, delivery and evaluation of programs and services, mainstream services will continue to be inadequate. Many women experience difficulties due to their lack of understanding of service systems and under-utilisation of interpreters.

"In my opinion, policy and program managers still are not sure how to deal with 'our' women, and therefore we are still treated as marginal, our issues to be dealt with if and when there is money left over." - comment from participant in Northern Territory consultations.

More understanding is needed in the general community about the reality of Islam.



Methodology

A forum was held in Darwin in July 2004 and was attended by non-government and government women's services and individual women. Participants were provided with an overview of UN Human Rights, CEDAW and the *Women's Report Card Project*. Issues of priority were identified at this forum and participants wanted more time to go back to their organisations and communities with the information.

A later forum was planned, however there were difficulties with identifying a time that suited everyone.

A project worker, Kaz Phillips, with Top End and Central Australian community work experience, was employed for 24 hours to contact participants and other relevant community members to elicit feed back. This was obtained by telephone and email.

This report is made up of the contributions from women at the forum, research and consultation by Kaz and some additional contributions by Kate Halliday.

Violence Against Women

The rate of violence, including sexual assault, in the Northern Territory is the highest among all Australian states and territories.

Our Situation

High rates of violence

Violence against women was by far the biggest issue raised by all women consulted and one that intersects with all of the other priority areas. It is regarded as a fundamental issue in urban, rural and remote communities. In 2001, the Northern Territory recorded a rate of 1486 reported assaults per 100,000 people and 133 reported sexual assaults per 100,000 people¹, the highest reported rates of violence in Australia. The homicide rate of women in the Northern Territory is 6.5 per 100,000 of population², while the national average for women is 1.4 per 100,000 of population.

Research undertaken by the Office of Crime Prevention suggests that the prosecution of assaults committed by men on women form a reasonable proportion of cases prosecuted in Northern Territory courts, particularly in the Magistrate's Court. In 2001, Police records show that 1007 cases of male on female assault were reported to Police, with 751 cases of male on female assault lodged with the Magistrate's Court³. Police data for 2001 also indicates that the category of male assaults on females are a significant majority of all assaults reported to Police⁴.



Domestic violence

According to the Northern Territory Government's *Domestic Violence Strategy Data Collection Project*⁵, Indigenous people form the highest proportion of victims of domestic and family violence (76% in 1999-2000) and the most common relationship in which violence occurs is that of partner. The rate of Indigenous victims reporting violence has steadily increased since 1996. The data also confirms that women are usually the victim/survivor of domestic violence while men are perpetrators of this violence⁶.

Our Voices

Support for victims of violence

The level of trauma and shame for women who are victims of violence, especially for Indigenous women, results in a form of paralysis that impacts on women's capacity to function. Women reported that the focus of most programs for victims of violence is on emergency support, accommodation and legal intervention. There is little program development in relation to longer-term support for women and children victim/survivors. There are few domestic violence-specific children's counselling services or programs. There is also little program development in relation to community education and training and given the extent, pervasiveness and consequences of violence against women, the resource allocation is totally inadequate. The pervasiveness of violence affects women's capacity to begin and sustain changed life circumstances.

Sexual violence

Sexual violence is not clearly on the violence against women agenda. There is a lack of training of service providers and therefore a lack of confidence in assessing and responding to sexual violence issues.

Lack of resources

There is a lack of resources for crisis transitional and longer-term housing for women who have experienced violence. There is also a lack of outreach support services, including general casework and court support workers, especially for the Family Court. There is a desperate lack of professionally trained workers, including in remote communities:

- There is only one full-time domestic violence outreach support position in Darwin and Alice Springs, and one part-time position in some regional areas
- Dedicated domestic violence counselling is provided by one full-time position in Darwin, Alice Springs, Tennant Creek, Nhulunbuy and Jabiru and a part-time position in Katherine

Remote issues

“How can I make myself and my children safe?”

Many communities have no access to adequate police services and/or safe houses. The distance and cost of transport exacerbates the overall lack of access to services, as there



is commonly only air transport available. Indigenous women may fear payback if they take legal action or leave a relationship. Women also have concerns about isolating children from their family if they leave a community because of violence.

“What to do when I get to safety?”

Women at the consultation reported that women who are forced to leave their community because of violence face a high likelihood of systemic cultural insensitivity at the least, and overt discrimination at the worst. Reasons for this reported by women included:

- There is ingrained cynicism about people's motivation when requesting assistance
- Lack of understanding and respect for Indigenous culture
- Fear of family members coming to town
- Concerns regarding - *“Who speaks my language?”*
- Availability of interpreters - *“Are interpreters even available in my language?”*
- Need for support to gain urban life skills: *“How do I get them?”* Women who leave a remote community to escape violence face enormous challenges in adapting to life in urban centres without family and community support

Case Study: Mary

Mary is an Indigenous woman from a remote community with more than one thousand residents several hundred kilometres from Darwin. Historically, the residents of this community are from two different language groups, are nomadic and are ‘wrong skin’, that is, unable to interact under traditional cultural law.

Mary lives in Darwin and is currently living ‘in the long grass’ (homeless). She has several children who live back in the remote community with extended family members. She sees the children around once a year depending on when a family member is coming to town from her bush community. Mary feels she has no options about where she can reside other than the long grass due to:

- A traditional pay back situation in her remote community. If she returns it is highly likely she will be assaulted by the other tribal group
- Since she hasn't returned and has missed many cultural events such as funerals she feels there is a likelihood of punishment from her own family group
- When she first arrived in Darwin several years ago she was housed in a Territory Housing (public housing) property. A family member broke into the house and damaged the property. Mary didn't call police due to mandatory sentencing for property crime at that time as she did not want to be responsible for a family member going to prison. Mary was evicted from the property and cannot reapply for public/government housing until she has paid back the damage debt of more than \$3,500
- She is eligible for crisis accommodation on a night by night basis but cannot stay there all the time



Living in the long grass, Mary is subjected to harassment from other people living the same lifestyle, for her government benefits. She has spent nine separate nights in hospital due to physical assault by others in the long grass in the last year. Mary is also regularly sexually assaulted by men in the long grass, usually after they have been drinking. Mary is highly dependent on alcohol as a means of coping with her lifestyle, which also excludes her from accessing crisis accommodation. One women's crisis accommodation service allows her access to shower and eat a meal on a regular basis.

Mary is one of the many women living the 'long grass' lifestyle who have fallen through the gaps of both traditional and contemporary community interventions.

Our Challenges

Women at the consultation said they faced numerous challenges:

"No political will to actually fundamentally address violence against women.... Lots of hyperbole....in practice, they want it to go away and do not spend anywhere near the dollars required." - woman at Northern Territory consultation

"Much government policy framed around the notion that 'community capacity building' will fix things and does not take into account the actual social make-up of the communities, the kinship system and gender politics that determines responses to such issues as personal violence". - participant at the Northern Territory consultation

While violence against women has a reasonably high policy profile there still remains a huge lack of resources. Government policies on domestic and family violence and sexual assault are not linked.

Our Successes

- Policy development is occurring, for example the *Domestic Violence and Aboriginal Family Violence Strategies* are being evaluated through the Northern Territory Government's Domestic and Aboriginal Family Violence Advisory Council
- Remote models for service delivery for women, while seriously under-funded, are very effective. These services include the Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women's Council Aboriginal Corporation (NPY) Domestic Violence Service and the Family Violence Prevention Legal Units

Our Solutions

The Federal Government has recently announced the expansion of the Family Violence Prevention Legal Units (FVPLU), including funding to these units to provide some dedicated sexual assault services in rural and remote locations for Indigenous women and children. It is hoped that these additional units will provide increased services in the Northern Territory.



Law and Justice

*“More women die from family violence than any figure of aboriginal deaths in custody”
(Suave, M. Indigenous Law Bulletin, 1996, Vol11)*

Our Voices

Domestic violence and the law

There is a general perception that the court system views men’s behaviour as ‘cultural’ and therefore legitimate, particularly in regard to instances of violence against women. There is inadequate funding for Domestic Violence Legal Services.

Remote issues

- High rates of domestic/family violence
- Lack of services for both victims and perpetrators
- Many communities have no safe house or police presence
- Reliance on police who have limited presence in many communities
- Lack of relevant support, education services and programs
- The cost of legal representation high, and navigating the system without legal representation is difficult

Family law issues

Family law processes are seen as problematic.

Our Challenges

Women in the Northern Territory face a number of challenges, including:

- There is often forced mediation in family law cases where violence is an issue, which is problematic, as there is often a lack of mediation skills.
- Issues and barriers to access for women living in remote areas

Our Successes

- Favourable comments within the consultations about the culturally appropriate work practices of Northern Territory Community Legal Services
- Family Violence Legal Prevention Units, which were initially ATSIC funded and now funded by the Commonwealth Attorney-General’s Department. There are three units in the Northern Territory based in Darwin, Katherine and Alice Springs. All of the units conduct outreach work to remote communities
- The Top End Women’s Legal Service based in Darwin employs local women in the communities they visit as Community Legal Workers
- Within government there is a pro-active and ongoing program of law reform which indicates gender equity awareness – for example in the area of sexual violence against girls under the age of 16 years
- There has been law reform to improve protection in the legal process and the



development of a community court framework that takes into account the needs of women and children

Our Solutions

- Increase cultural diversity training for those working with women such as police and court staff
- Governments to get real about legal services for Indigenous women, including increasing family violence legal service funding
- Increase resources for the FVLPU programs in order to expand the number of communities covered and to increase the amount of time located in communities
- Safe houses to be supported where appropriate
- Domestic violence counsellors and support groups in every community
- Remote Perpetrator Intervention Programs
- More police, more female officers and more presence generally
- 'Prevention' policy analysis required, as this is seen as not being taken seriously

Leadership and Political Participation

"Are women going to have a voice at the table?"

Our Voices

Remote issues

Issue of Indigenous governance were raised at the Northern Territory consultations. The directly-elected Aboriginal and Torres Strait Islander Commission (ATSIC) will be abolished in June 2005, to be replaced with a government-appointed national Indigenous council. Women at the consultation were concerned about representation under the new council, and particularly whether the voices of women would be heard at the table.

Our Challenges

There is a lack of voice for women living in the Northern Territory. Particular issues raised by women include:

- There are no current women's leadership forums
- The Women's Advisory Council has been replaced with Women's Forums, facilitated by the Office of Women's Policy, that are held in communities when Community Cabinet meetings are scheduled. However it is unclear how issues that are raised are followed up or who is responsible for follow up. There is no independent structure in place

Our Solutions

- The creation of a women's peak body outside of government. Those consulted noted that a review of peak bodies is currently being undertaken for the Northern Territory Government.



Case Study: Rebecca and her children

Rebecca and her three children came to Dawn House Women's Refuge from a small Indigenous community several hours' flying time from Darwin in a small plane. She was referred to the service by the community health centre nurse who explained that Rebecca had to get away from the community to be safe, had nowhere to stay in Darwin, and no money to pay for accommodation or food. The clinic organised transport by plane.

Dawn House sent a taxi to meet Rebecca at the airport and bring her back to the shelter for an assessment of her needs. It emerged that Rebecca had a history of domestic and family violence. She had been hospitalised on several occasions with broken bones and head injuries inflicted mostly by her partner. After a recent assault she came to the belief that he would kill her, as he had threatened to do many times.

Although Rebecca did not drink alcohol, her community was not 'dry' and many people did drink, including her partner. Although her mother was emotionally supportive, her mother had been threatened and was intimidated by Rebecca's partner and other members of his family.

During the assessment Rebecca spoke quietly, and was reluctant to speak of personal matters that she perceived to be shameful. English was her second language, and she had spent little time in bigger towns and was completely unaware of other support services. She was bruised and sore from the recent assault, and had only one change of clothes.

Her children ranged in age from 18 months to 6 years. The oldest boy was noisy and unable to sit quietly for any length of time. Rebecca thought she might be pregnant and wished to see a doctor about this. Her partner had accused her of having an affair, saying that he was not the baby's father, and this had been his excuse for assaulting her.

The Indigenous-specific women's shelter was unsuitable, as a member of her partner's family was known to be staying there. There was no room at Dawn House to accommodate Rebecca and her children, so emergency relief funds were used to pay for accommodation in an Aboriginal Hostel until her payments could be regularised through Centrelink, and/or room became available at the shelter. Rebecca was uncomfortable with this arrangement, as she did not know who else might be staying at the hostel, and whether they would be friendly toward her, or take the side of her partner.

An ongoing concern for Rebecca was that her partner would come to town to 'get' her. He had extended family who would apply pressure, threaten, or her greatest fear, take her children.



Rebecca was reluctant to get a restraining order as she believed this would enrage her partner and his family and make matters worse for her.

Rebecca required medical support; crisis accommodation; culturally appropriate therapeutic intervention for her 6-year-old child; support with Centrelink; clothing for herself and her children; identification so she could access Centrelink payments; legal advice about family law; support with enrolling her oldest child in school; and long-term accommodation.

Dawn House were able to assist with a medical appointment, crisis accommodation although this was difficult to secure, support with Centrelink, agency referral for clothing, transport, identification, a legal appointment and school enrolment.

However there is no suitable therapeutic intervention available for her oldest child; the prospect for long-term, safe, affordable accommodation is bleak, as a priority public housing application will take several months to process, and may not be successful, leaving Rebecca to the uncertainties of the private rental market. Rebecca will require ongoing outreach support that Dawn House will be unable to provide due to limited resources and funding.

Housing and Utilities

Our Voices

Women at the consultation identified:

- There is a lack of access to housing throughout the Northern Territory
- In the private rental market there are high levels of overt discrimination against Indigenous women and sole parents
- There is no existing tenancy advocacy service

Our Challenges

There have been changes to the (Northern) Territory Housing Domestic Violence Policy, which mean:

- 3 month probationary leases are only offered now if likelihood of 'successful tenancy'
- In the appeals process, the first tier of appeal is internal to the Department of Housing, and therefore provides no option for advocacy or offering extra information
- There is overt and direct discrimination against Indigenous women, whose eligibility for public housing requires rental references, which are not insisted upon for non-Indigenous women



Health

Our Situation

In 2002 a consultation by the Office of Women's Policy found that key issues in women's health in the Northern Territory were:

- Reproductive health
- Ageing population and health
- Violence against women
- Being overweight
- Mental and psychological health issues, including stress, depression and exhaustion
- Osteoporosis
- Alcohol, cigarette and/or drug addictions

Our Voices

Indigenous women and women from CALD backgrounds

Women at the consultation reported that Indigenous women and women from Culturally and Linguistically Diverse Backgrounds (CALD) face particular barriers when accessing health services, these include:

- No choice, especially of health professional
- Culturally inappropriate services
- Cultural assumptions made by health professionals
- Inadequate cultural diversity training for health care professionals in the Northern Territory
- Language barriers and limited availability of interpreters/translators
- High levels of institutional racism

Systemic barriers

Systemic barriers for all women accessing health care include:

- Distance and isolation
- Lack of co-ordination between services
- Limited women-specific services, such as services for women with disability, young women and lesbians
- Problems recruiting female health care providers
- Limited community sector women's health services/programs. Most are government programs
- Lack of access to choice of health care provider
- Costs involved either for services themselves, travel to services, or for accommodation in an urban centre while accessing services and lack of support for women with children
- Lack of continuity of care because of high staff turnover



- Medical model context restricting creative endeavour
- Lack of anonymity, particularly in small communities

Domestic violence is also identified as an important health issue for women. There is a need to engage all service providers, consider the need for safe houses and engage with men, particularly in the form of violence prevention programs.

Maternity

Women at the consultation raised numerous issues regarding pregnancy and access to maternity services for women in the Northern Territory, including:

- Remote community women have to go to a town such as Darwin to give birth, and unless women are very young, women are not accompanied by family members.
- Limited or no accommodation options in town while accessing services. For example, in Tennant Creek there are no hostels. Indigenous women are told to stay with 'family'
- High instances of low birth weights
- In 2004 at the time of birth, Indigenous mothers were six times more likely to be under the age of 20 years than non-Indigenous mothers⁷

Caring for people with disabilities

Women at the consultations also raised concerns that the responsibility for caring for the increasing number of people with disabilities in remote communities - including people with Acquired Brain Injury, that is often the result of violence in the community - is falling on women.

Our Challenges

- Disbanded National Women's Health Program
- There is no Northern Territory Women's Health Strategy. There is no one currently driving Women's Policy
- Maternity services are different between hospitals as there is no common policy
- In Central Australia:
 - ◊ The Northern Territory Registration Board legislation of April 2004, *Restricted Area of Practice*, leaves over 10 remote communities without any expertise to care for pregnant women
 - ◊ At least 10 communities have no permanent District Medical Officer or midwives employed
 - ◊ Considerable variability with antenatal protocols
 - ◊ Poor remote access to breast screening
 - ◊ Disjointed Maternal Child Health Services, including limited continuity of care in some places
- The Northern Territory funding base is inadequate for the level of need. There is



better Commonwealth funding comparatively, but this is still not enough. The size of the population and high unemployment means that not enough tax is being generated as a funding base.

Our Successes

- *Strong Women, Strong Babies, Strong Culture* Program
- Waltja, a non-government Indigenous organisation in Central Australia
- *Preventable Chronic Disease Strategy* reducing disease in areas such as renal health

Our Solutions

- The development of a Northern Territory Women's Health Policy
- Maternity team models be developed in hospitals
- Develop an integrated policy for maternal and child health
- The development and implementation of a remote Midwifery Care Model
- Women's Health Strategy Unit of the Department of Health and Community Services to develop a 'Monitoring Gender Equity' Project
- Office of Women's Policy to develop a Forward Plan
- Consumer participation in health service development and provision
- School-based health education
- Available and affordable fresh food, especially in remote areas

Education

"Women in education in the Northern Territory suffer particular stress as a result of professional isolation, domestic and community violence."

Our Voices

Young women

Young women in the Northern Territory face more barriers to employment and training after compulsory schooling than women in other areas of Australia. Many young Indigenous women do not have access to a secondary school in their local community, and are unable to attend boarding school. Vocational Education Training (VET) options are limited or only result in a pre-vocational certificate.

Women employed in education

Although more women are employed as teachers and assistants in schools and child care than men, women make up the majority of the lower-paid, part-time and casual positions. 79% of the teachers in the Northern Territory are women, yet only 29% of women occupy the executive positions above Level 8.



Early childhood and childcare services

Access to pre-school is unavailable in many locations, and there are long waiting lists in urban areas for childcare places. Funding to expand early childhood services has not been available and this impacts on many women's choice to return to the workforce. The cost of childcare for sole parents also affects their capacity to remain in education.

Discrimination

Women consulted in the Northern Territory said that there was ongoing discrimination against young Muslim women at university who are being treated as 'invisible' by academic staff. Further, the number of Indigenous educators is only rising slowly in the Indigenous Education System within the public sector.

Our Challenges

The Northern Territory's early childhood education policy is very poor, and needs to be further developed to ensure that all children have equal access to education, especially in remote areas.

Economic Security and Employment

"...for many women, employment is not just about economic security. Employment can open other essential opportunities and benefits for women."

Our Voices

Casualisation

Casualisation of the workforce and the subsequent job insecurity and lack of rights is an important issue in the Northern Territory. Workers who hold casual employment do not get paid annual or sick leave. When casually-employed mothers need to take leave to care for their children or other family members, they do so by incurring a loss in their pay and sometimes at the risk of losing their employment. Although casual workers have the right to refuse a shift, women are often fearful they will lose their job if they do.

Casually-employed mothers also face difficulties when they have sick children who are booked into childcare. This means that mothers have to stay home to look after sick children. When mothers take time off work they not only lose their pay but they then also need to pay for the childcare even though their child is sick at home. This double financial penalty forces mothers to send their sick child to childcare and attend work.

Lack of family friendly workplaces

The lack of family friendly workplaces, including flexible working hours, child care services, breast feeding rooms, work from home arrangements, paid maternity and paternity leave is a major issue.



Discrimination

The Human Rights and Equal Opportunity Commission (HREOC) have reported alarmingly high levels of pregnancy discrimination in recent years. In the 2002-2003 financial year the highest number of HREOC discrimination complaints fell into the category of pregnancy discrimination. According to the Northern Territory Anti-Discrimination Commission's 2003-2004 Annual Report, complaints relating to employment were highest under sex discrimination; with complaints relating to parenthood and pregnancy status also received⁸.

Workplace bullying

There is currently no specific legislation that makes workplace bullying unlawful in the Northern Territory. There is a general duty on employers to ensure that a workplace is healthy and safe but the legislation does not identify, define or provide specific details of workplace bullying. The Northern Territory Working Women's Centre 2003-2004 statistics show that the number one issue women contacted them for assistance with was workplace bullying. This is an alarming trend, especially given there is no specific legislation to deal with the matter.

Community Development Employment Projects (CDEP)

Unemployment is as high as 85% among women in many remote communities, where Community Development Employment Projects (CDEP) are unavailable. CDEP places are made available on a gender preference basis in many cases, under the guise of 'cultural practice'. CDEP participants are particularly vulnerable to unsafe and unsatisfactory working conditions. CDEP participants do not have rights to unfair dismissal proceedings, or the entitlements many employees take for granted such as paid annual leave, paid sick leave, carer's leave and bereavement leave. CDEP participants often perform duties of high responsibility and in unsafe working conditions, such as women who run community patrols at night. More than half of Indigenous employment in the Northern Territory is through CDEP⁹.

Women from non-English speaking backgrounds

Many women from non-English speaking backgrounds (NESB) work outside award conditions in casual positions. There is an increasing trend for young Muslim women to take off their hijab as a consequence of employment discrimination. This type of discrimination existed prior to the emergence of the 'terrorism' issues. Women removing their hijab to avoid workplace issues often feel 'embarrassed', like a bad Muslim and can be accused of being a bad Muslim by others within the community.

NESB women often have limited knowledge of, or confidence in, exercising their rights in relation to employment discrimination issues as they find the system too cumbersome. Due to a two-year waiting period for migrants to access Centrelink entitlements, many women are afraid to pursue their rights in case they lose their job. There are few bi/multi-lingual workers employed in the systems to offer support and advocacy.



Safety concerns for remote women workers

Many women work in one-teacher or small schools in remote areas. Over 70 of the schools in the Northern Territory are one- or two-teacher schools. Homeland Centre teachers are even further isolated by lack of access to telephones, power and other essential services in many cases.

The level and frequency of domestic violence is higher than the national average in all Northern Territory regions. Where education workers are unable to access police, women's shelters or legal advice, they are at a higher risk of violence. As many Indigenous women are in these locations without services, they are also more likely to be affected by violence. Safety at work and at home is therefore a priority issue.

Our Challenges

- Whilst there have been attempts to create an environment where employers introduce family friendly policies, the uptake of these policies has been very low. Employers and employees need advice, assistance and some incentive to change out-of-date workplace structures that are based on a male breadwinner family model, to more adequately meet current community demands
- Current legislation does not adequately support women workers to be able to return to work on a part-time basis after pregnancy
- Other limitations include inadequate childcare; lack of paid maternity or paternity leave; lack of anti-bullying legislation [the *Work Health Act* (Northern Territory) is the most appropriate legislation to include anti-bullying law]; unfair dismissal laws that exclude casual employees that have been employed for a period of less than 12 months; and the use of individual workplace agreements such as Australian Workplace Agreements
- The workers compensation system disadvantages women workers with psychological injuries as opposed to physical injuries [see the *Work Health Act* (Northern Territory)]

Our Successes

Those companies which have introduced family friendly policies report increased staff retention, increased workplace morale and reduced sick leave.

Our Solutions

- Employers must consider the family needs of working women and introduce family friendly workplace policies
- Women's right to return to work on a part-time basis after pregnancy must be enshrined in legislation
- Women must have a right to paid maternity leave and men to paid paternity leave
- *Work Health Act* (Northern Territory) must be reformed so that workplace bullying is clearly unlawful and the definition of 'injury' is changed
- Changes are needed to the *Workplace Relations Act* so that casual employees have the right to unfair dismissal proceedings



- The abolition of Australian Workplace Agreements
- Review of CDEP, particularly the situation for women in remote communities who are involved in CDEP program development; a review of the adequacy of training; and Industrial/workplace rights

Endnotes

1. Australian Bureau of Statistics, *Recorded Crime*, 2001, 4510.0.
2. Australian Institute of Criminology, *National Homicide Monitoring Project*
3. The Department of Justice annual report for 2001-2002 shows that 14,226 criminal cases were lodged at lower Courts
4. In 2001, PROMIS data indicates that 1007 cases of male on female assault were reported while 683 other cases of aggravated assault were reported.
5. See: http://www.dcm.nt.gov.au/dcm/social_policy/pdf/DV_Strategy.pdf
6. In 1999-2000, 92% of victims were female while 90% of offenders were male. This is consistent with the data from earlier years.
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