



**AMSANT Submission, addressing focus areas:**

- 1) Homelessness**
- 2) Aboriginal and Torres Strait Islander Housing**
- 3) Climate Change**

**Aboriginal Medical Services Alliance NT (AMSANT)**

The Aboriginal Medical Services Alliance Northern Territory (AMSANT) is the peak body for Aboriginal Community Controlled Health Services (ACCHSs) in the Northern Territory (NT). AMSANT's Members are the largest provider of comprehensive primary health care to Aboriginal people in the NT and represents 12 full member organisations (ACCHSs) and 13 associate members across the Territory. AMSANT's vision is that Aboriginal people live meaningful and productive lives on their own terms, enriched by culture and wellbeing. AMSANT's aims to grow a strong Aboriginal community controlled primary health care sector by supporting Members to deliver culturally safe, high quality comprehensive primary health care that supports action on the social determinants of health, and representing AMSANT Members' views and aspirations through advocacy, policy, planning and research.

AMSANT's foundations are built on self-determination, ensuring that people who are going to use health services can determine the nature of those services, and then participate in the planning, implementation, and evaluation of those services.

**Aboriginal Community Controlled Health Services (ACCHS) in the Northern Territory**

ACCHS are owned and governed by the Aboriginal communities they serve. ACCHS exist because Aboriginal people have exercised their *voice* and *choice* through establishing their own health services on their own terms. The ACCHS sector is the larger of the two providers of Aboriginal Primary Health Care in the Northern Territory and provides around two-thirds of Aboriginal client contacts. The Northern Territory has an established and agreed commitment to transfer all Government run PHC services and clinics to Aboriginal community control over time.

ACCHSs deliver a range of services as part of a broader model of Comprehensive Primary Health Care (CPHC), aligned with the Alma Ata Declaration on primary health care which asserted that health care is a human right and should be based on community participation and the principle of equity. ACCHSs have been built on a holistic definition of health since their beginning where:

“Aboriginal health” means not just the physical well-being of an individual but refers to the social, emotional and cultural well-being of the whole community in which each individual is able to achieve their full potential as a human being thereby bringing about the total well-being of their community. It is a whole of life view and includes the cyclical concept of life-death-life.’ ([NACCHO](#))

## **RESPONSE TO DEVELOPING A NATIONAL HOUSING AND HOMELESSNESS PLAN ISSUE PAPER**

Decades of poor daily living conditions and a chronic shortage of homes in Northern Territory's remote Aboriginal communities has perpetuated the impacts of colonisation and entrenched poverty and disadvantage across generations.

The United Nations has long recognised the human right to adequate housing, which includes functioning hardware and infrastructure, as a human right to an adequate standard of living<sup>1</sup>. In fact, Australia was one of the nations who founded the United Nations and was also one of the chief drafters of the Universal Declaration of Human Rights, dating back to 1948<sup>2</sup>.

In 2023, there is a need to acknowledge that the present housing system as implemented in the Northern Territory to provide maintenance and repair services to Aboriginal housing tenants and build new homes leaves much room for significant improvement and transparency.

As well as the obvious health conditions directly and indirectly caused by inadequate housing and overcrowding, it is important to consider impacts on social and emotional wellbeing, child development and education, and family violence.

The fact that more than 73 Aboriginal communities have taken a class court action against the Northern Territory Government for their sub-standard living conditions, as well as the stories shared by Traditional Owners and people working in the Aboriginal community-controlled sector at the most recent housing forum is further evidence of the need for systemic reform.

An Aboriginal and Government-led systemic reform is needed and one that allows for transparency and an honest acknowledgement of the present-day reality for many Aboriginal and Torres Strait Islander families in the Northern Territory.

### **Homelessness and health**

Among the many issues arising from homelessness is the negative chronic health outcomes often faced by people who are disconnected from society and have no stable or appropriate form of housing or shelter. People experiencing homelessness face a higher risk of chronic infectious diseases due to the lack of access to basic hygiene facilities such as clean water and soap, as well as being in close contact with other people cohabiting in crowded and unsanitary environments<sup>3</sup>.

The relationship between poor housing and negative health impacts for Aboriginal and Torres Strait Islander householders is well established<sup>4</sup>. For Aboriginal and Torres Strait Islander people, chronic ear

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<sup>1</sup> Article 25 of the 1948 Universal Declaration of Human Rights and in article 11.1 of the 1966 International Covenant on Economic, Social and Cultural Rights. Retrieved from [The human right to adequate housing | OHCHR](#)

<sup>2</sup> [Australia and the Universal Declaration of Human Rights | Australian Human Rights Commission](#)

<sup>3</sup> <https://www.nhcollective.org.au/impact-of-homelessness-on-health/>

<sup>4</sup> Greal, Liam, Su, Jiunn-Yih, and Thomas, David. 2023. Healthy Homes Monitoring and Evaluation Project: Final Report. Darwin: Menzies School of Health Research.

infections (e.g. otitis media), eye infections (e.g. trachoma), skin conditions (e.g. crusted scabies), gastroenteritis and respiratory infections (overcrowding has been identified as a risk factor for pneumococcal disease) are all potential outcomes from overcrowded environments. Such infections can 'ultimately result in chronic sequelae, such as stunting, blindness, hearing loss, rheumatic heart disease and renal failure'<sup>5</sup>. In remote areas, overcrowded households (more than two children aged <5 years) are associated with a 2.4-fold increased risk of the youngest child having otitis media with evidence suggesting that these high rates of infection could be prevented if overcrowding in Aboriginal communities was improved<sup>6</sup>.

Without a safe and secure place to rest, people are additionally at higher risk of developing chronic conditions such as heart disease, diabetes, and hypertension. Additionally, homelessness and overcrowding can exacerbate family violence and can cause significant stress and trauma, leading to anxiety, depression, and post-traumatic stress disorder (PTSD). On top of this, people also experience high levels of stigma and discrimination, which can further exacerbate their mental health problems. People who are disconnected from society are also at higher risk of developing substance abuse disorders<sup>7</sup>.

### **Overcrowding and homelessness**

There has been general acknowledgement by the ABS and also reported by the AIHW that homelessness includes living in severely overcrowded conditions. The NT has the highest rate of homeless people of any jurisdiction (more than 12 times the national average) 90% of whom are Aboriginal or Torres Strait Islander. In addition, 80% of homelessness in the NT is attributable to severe overcrowding; nationally, 60% of Aboriginal people who are homeless live in severely overcrowded conditions, making overcrowding one of the biggest issues affecting Aboriginal and Torres Strait Islander People.

As highlighted by the National Aboriginal Community Controlled Health Organisation (NACCHO) in 2020, however, the actual rate of homelessness may be higher than recorded levels due to overcrowding not being reported to landlords (due to the risk of eviction or rent being increased if there are excess people living in the house) and not everyone taking part in the census. Living temporarily in the home of a friend or family member for cultural, community or country responsibilities, temporary employment or to access services is commonly not perceived as comprising a period of homelessness. In addition, exact homelessness figures are difficult to measure because some Aboriginal and Torres Strait Islander people, regardless of how and where they are sleeping, do not perceive themselves as being homeless provided they are on Country<sup>8</sup>.

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<sup>5</sup> Grealy, Liam, Su, Jiunn-Yih, and Thomas, David. 2023. Healthy Homes Monitoring and Evaluation Project: Final Report. Darwin: Menzies School of Health Research.

<sup>6</sup> [https://www1.racgp.org.au/newsgp/racgp/overcrowding-a-key-determinant-of-poor-health-outc#:~:text=Chronic%20ear%20infections%20\(eg%20otitis,are%20all%20potential%20outcomes%20from](https://www1.racgp.org.au/newsgp/racgp/overcrowding-a-key-determinant-of-poor-health-outc#:~:text=Chronic%20ear%20infections%20(eg%20otitis,are%20all%20potential%20outcomes%20from)

<sup>7</sup> <https://www.nhcollective.org.au/impact-of-homelessness-on-health/>

<sup>8</sup> National Aboriginal Community Controlled Health Organisation (2020), Reducing the incidence & impact of homelessness on Aboriginal and Torres Strait Islander people - A response to the House of Representatives' inquiry into homelessness in Australia inquiry into homelessness in Australia: SUBMISSION.

One of the main factors of homelessness in the NT is an undersupply of housing. The 2017 Remote Housing Review recommended that 5,500 new homes are required to reduce overcrowding in remote Indigenous communities nationally to acceptable levels by 2028, half of these in NT. This requires a substantial increase in funding for new builds. Whilst it is important to build new housing for Aboriginal and Torres Strait Islander people, AMSANT believes that the building of inappropriate housing remains a significant area requiring reform, with governments needing to recognise that speed does not equal quality and appropriate housing. This recognition requires commitment to long-term investment and designing, with communities, housing appropriate to meet their needs and ways of life.

This also requires a substantial increase in funding for housing extensions, and repairs and maintenance. The 2017 review also emphasised long-term investment as the first priority to protect previous and new investments. Not only does funding need to increase dramatically, it needs to be of longer duration and more secure.

The ABS also defines homelessness to include "when a person does not have suitable accommodation alternatives if their current living arrangement is in a dwelling that is inadequate or inappropriate, including accommodation that is unsafe, unsuitable or overcrowded<sup>9</sup>." In their analysis of common childhood illness in remote NT communities in 2004-05, Bailie et al. (2011) found that ongoing crowding undermined the potential for improved health outcomes in communities where new houses had been built. Shahmir et al. (2018) performed a narrative literature review to find that a lack of maintenance in Aboriginal and Torres Strait Islander community housing was associated with gastrointestinal infections, crowding was associated with skin-related diseases and viral conditions, and inadequate food preparation and storage areas was associated with diarrhea.

Aboriginal and Torres Strait Islander Social Justice Commissioner, June Oscar AO, said her 2020 Wiyi Yani U Thangani (Women's Voices) Report revealed that poor quality and overcrowded housing has a profound impact on the safety of women and children, and on all other aspects of women's lives. "Women were living with large families in houses with broken doors and windows, holes in the walls and no air conditioning," she said. "There were many reports of raw sewage and exposed wiring, along with many other hazards... It is not hard to understand that these conditions fuel and compound a range of other issues, such as poor physical and mental health issues<sup>10</sup>."

Inadequate and deteriorating housing conditions have remained an ongoing issue for decades, including significant health and safety concerns and experiences including insecure housing, lack of running water and lack of safe drinking water, water leaks in ceilings that are left unrepaired with mold and mildew growing. This housing reality remains an uncomfortable truth today for many remote and urban housing tenants. Fulfilling a right to health means that communities across Australia (whether Indigenous or non-Indigenous) should enjoy a similarly healthy standard of drinking water and have their sewerage and garbage removed. It also means that they should be able to enjoy, from a health perspective, the same standard of housing that is in good repair with functioning sanitation and is not overcrowded.<sup>11</sup>

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<sup>9</sup> <https://www.aihw.gov.au/reports/australias-welfare/homelessness-and-homelessness-services>

<sup>10</sup> <https://homelessnessaustralia.org.au/first-nations-women-worst-affected-by-the-housing-crisis/>

<sup>11</sup> <https://humanrights.gov.au/our-work/aboriginal-and-torres-strait-islander-social-justice/publications/native-title-report-2008> - chapter 5

## **Housing maintenance and repairs: need for a collaborative approach for a more responsive system**

In addition to the need to build new housing, ensuring regular and ongoing preventative maintenance and repairs on existing housing is equally important. Of particular importance is ensuring that maintenance and repairs are *responsive to need*. A recent evaluation by Menzies<sup>12</sup> clearly showed that the Northern Territory Government has not been providing these services adequately.

AMSANT member feedback over the last decades to the present day, including from APONT members at housing forums, highlights that Aboriginal tenants, children included, continue to endure substandard living conditions, with repairs and maintenance often unacceptably too slow or ignored, with too many levels of government administration and often no local control or say.

For example, high-profile court cases<sup>13</sup> where Aboriginal communities took the Northern Territory Government to court for inhumane and substandard housing have highlighted the lack of government record-keeping and a lack of regular inspection regime with remote Aboriginal public housing. This is also highlighted by the sudden death of an 11-year-old boy in 2020 who was electrocuted in Gunbalanya, West Arnhem, <sup>14</sup>15 where the Darwin Coroner's Court found systemic failures by government agencies to keep records or documentation that show any inspections, repairs or maintenance, including the finding that "there were also no systems for the inspection and maintenance of cables and connections to homes in remote communities. It is likely that an inspection and maintenance regime would have prevented [child's name's] death."<sup>16</sup>

There remain ongoing concerns that the Department of Territory Families, Housing and Communities (THFC) and the Department of Infrastructure, Planning and Logistics (DIPL) lack a coordinated approach to addressing housing issues for Aboriginal and Torres Strait Islander people in the NT. With housing responsibilities split between these two departments, it is concerning that a Housing Coordinating Committee has still not been set up as agreed, particularly since residents are dealing with an unresponsive system and, as a result, continue living with housing conditions that are inadequate, non-functional, and pose a serious risk to their health and well-being.

A recent Menzies report<sup>17</sup> identified problems with implementing the Healthy Homes element (focusing on repairs and maintenance, rather than new builds and extra rooms) of *Our Communities. Our Future. Our Homes* program, including inadequate implementation of preventive rather than responsive repairs

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<sup>12</sup> Grealy, Liam, Su, Jiunn-Yih, and Thomas, David. 2023. Healthy Homes Monitoring and Evaluation Project: Final Report. Darwin: Menzies School of Health Research.

<sup>13</sup> The Ltyentye Apurte/Santa Teresa community court case highlighted often lengthy delays in getting repairs including in one home where broken sewerage had to be addressed on a daily basis.

<sup>14</sup> ABC News, Coroner finds 11-year-old boy's electrocution in Gunbalanya could have been prevented by NT power authority. Retrieved from <https://www.abc.net.au/news/2021-11-24/nt-gunbalanya-electric-shock-inquest-coroner-hands-down-findings/100647238>

<sup>15</sup> Darwin Coroner's Court Inquest into the death of Rory [2021] NTLC 033. Retrieved from [https://justice.nt.gov.au/data/assets/pdf\\_file/0003/1071777/D01662020-Wauchope-Diridi.doc.pdf](https://justice.nt.gov.au/data/assets/pdf_file/0003/1071777/D01662020-Wauchope-Diridi.doc.pdf)

<sup>16</sup> Ibid ABC News Story

<sup>17</sup> Grealy, Liam, Su, Jiunn-Yih, and Thomas, David. 2023. Healthy Homes Monitoring and Evaluation Project: Final Report. Darwin: Menzies School of Health Research.

and maintenance; challenges and poor communication due to the split of activities between TFHC and DIPL following Machinery of Government changes in 2020; inadequate data monitoring systems, very short contracts.

This needs to be addressed. The NSW housing for health model in NSW is a good example of a system where the regular scheduling of tradespeople has been put in place.

The focus on repairs and maintenance reflects the approach of NGO Health Habitat, which grew out of the Uwankara Palyanku Kanyintjaku (UPK) Report<sup>18</sup> by Nganampa in the late 1980s and focuses on cyclical preventive survey and fix of health hardware to enable nine 'healthy living practices'. This has been implemented in Aboriginal communities in NSW for more than 20 years by NSW Health and has been demonstrated to be associated with 40% fewer hospital admissions for environmental health related conditions. In addition, their work has consistently found that disrepair of homes is due to a lack of routine repairs and maintenance (74%) and poor construction (17%), with only 7% due to vandalism (contrary to popular belief).

Pathways for reporting faults need to cater for people with English as a second, third or fourth language, and who often have limited written literacy<sup>19</sup> and we support calls that all houses should have regular inspections by local people with existing cultural and linguistic skills, who are trained in maintenance and processes to initiate works. In addition, there needs to be a review of maintenance standards that empowers tenants in these culturally and linguistically unique communities.

### **Funding and governance**

It is positive that Aboriginal Housing NT (AHNT) has now been established, that the NT Government is now prioritising Aboriginal housing organisations and Aboriginal businesses in terms of funding (e.g., repair and maintenance contracts under their Healthy Homes program.), and that AHNT and Land Councils are now involved in governance and monitoring of NT housing programs through their membership of the Joint Steering Committee (JSC). As previously noted, however, there is a clear need for a more adequate data monitoring system that ensures accountability. In addition, legislated minimum standards for maintenance would ensure vital infrastructure – electricity, windows, doors and plumbing – is safe and functional. Maintenance performance would need to be reported to government<sup>20</sup>.

There is also a need to consider the different policies and funding arrangements for the different types of housing used by Aboriginal and Torres Strait Islander people in the NT across the 73 remote

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<sup>18</sup> A team of local Anangu used the term to 'stop people getting sick' or in the local language 'Uwankara Palyanku Kanyintjaku'. For reasons of brevity this became known as the UPK report. Between 1987 and 1990 UPK became regarded nationally as a yardstick for environmental intervention in Indigenous communities. For example, the Royal Commission into Aboriginal Deaths in Custody made specific reference to the importance of the UPK model and recommendation that it be widely implemented ([https://www.aph.gov.au/~/\\_media/wopapub/senate/committee/indigenousaffairs\\_ctte/submissions/sub44\\_attach\\_1\\_pdf.ashx](https://www.aph.gov.au/~/_media/wopapub/senate/committee/indigenousaffairs_ctte/submissions/sub44_attach_1_pdf.ashx)).

<sup>19</sup> Quilty, S., Jupurrurla, N.F., Bailie, R.S., Gruen, R.L. (2022) Climate, housing, energy and Indigenous health: a call to action, first published: 16 June 2022, <https://doi.org/10.5694/mja2.51610>

<sup>20</sup> Ibid

Aboriginal communities, in the nearly 600 outstations, in town camps, and in private and public housing in towns. People choose or are forced to move between all these housing situations.

It is AMSANT's understanding that the Agreement between the Commonwealth and NT Governments (National Partnership with remote housing), which aims to improve housing and to reduce overcrowding to the 73 communities, remote communities and the 17 Alice Springs town camp expired in 2023, with work now happening with the Joint Steering Committee (JSC) and Land Councils across the NT. We also understand that there is currently a 12-month interim arrangement (\$111.7m) in place and, while this is welcome, we believe this is a very small amount for what is needed and there is a clear need for a long-term investment.

### **Homelands**

Unfortunately, there has been massive underinvestment in homelands (frequently referred to as outstations), which are so important to maintaining connections to country that have been strongly associated with improved health and wellbeing. In October 2022, the Commonwealth Government announced \$100 million in funding to be spent by June 2024 on urgent housing and infrastructure works in NT Homelands, managed by TFHC through the Homelands Housing and Infrastructure Program (HHIP)<sup>21</sup>. There is strong hope across the sector that this initial funding will lead to further long-term investment in homelands from both the Commonwealth and NT Governments.

### **Climate change**

Fifteen years ago, the 2008 Native Title Report highlighted the fact that “achieving the right to health in Indigenous communities will be made harder as a result of climate change.”<sup>22</sup> In this Report, the United Nations Deputy High Commissioner for Human Rights was quoted in saying that:

*[G]lobal warming and extreme weather conditions may have calamitous consequences for the human rights of millions of people. They can be among the leading causes or contributing factors that trigger hunger, malnutrition, lack of access to water and adequate housing, exposure to disease, loss of livelihoods and permanent displacement.*<sup>23</sup>

Research by Quilty et al<sup>24</sup> shows how higher temperatures in remote Indigenous communities in the Northern Territory will drive inequities in housing, energy and health.

Climate change has been an increasing issue and is now an urgent consideration in any housing discussions in the NT. We are already seeing problems due to water insecurity and heat stress, in part, due to energy insecurity. Climate change will exacerbate heat stress due to higher temperatures and due to evaporative air conditioners no longer being sufficient in the NT. A recent paper highlighted that,

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<sup>21</sup> <https://tfhc.nt.gov.au/housing-and-homelessness/homelands#:~:text=Homelands%20housing%20and%20infrastructure%20program,repairs%20and%20upgrades%20in%20homelands.>

<sup>22</sup> <https://humanrights.gov.au/our-work/aboriginal-and-torres-strait-islander-social-justice/publications/native-title-report-2008> - chapter 5

<sup>23</sup> Ibid

<sup>24</sup> Quilty, S., Jupurrurla, N.F., Bailie, R.S., Gruen, R.L. (2022) Climate, housing, energy and Indigenous health: a call to action, first published: 16 June 2022, <https://doi.org/10.5694/mja2.51610>

“despite decades of major government expenditure, there has been no significant improvement in the endemic problems, which include homelessness, overcrowding, substandard dwellings, and unemployment”<sup>25</sup>. There is an urgent need for a new model of safe, secure, appropriate, and affordable housing for Aboriginal and Torres Strait Islander people if we are to address the housing crisis in remote Australian Indigenous communities - this is the most fundamental foundation for Closing the Gap.

### **Vulnerability to heat stress, displacement of communities**

As already highlighted, chronic diseases such as heart disease and kidney disease, which make people more vulnerable to heat stress, occur in Aboriginal people at some of the highest rates in the world.<sup>26 27</sup> High temperatures in the NT (and high humidity in the Top End) already place people at risk of heat stress. For Aboriginal people in the NT, providing climate resilient and adequate housing will reduce complications of heat. It will also reduce overcrowding and related burden of disease like Group A Streptococcal infection (and its major complications including rheumatic heart disease), chronic ear infections and hearing loss, tuberculosis, and crusted scabies.

Connection to country is fundamental to Aboriginal Health and wellbeing. Aboriginal people in the NT will be disproportionately affected by climate change given that extreme weather events and rising coastal waters will result in displacement of communities, where Indigenous people from island and coastal communities and those communities dependent on inland river systems will be forced to relocate to larger islands, mainland Indigenous communities or urban centres. The resultant dispossession and loss of access to traditional lands, waters, and natural resources, as well as a loss of ancestral, spiritual, totemic and language connections to lands and associated areas will have a significant impact on Aboriginal health and wellbeing. In addition, the disconnect from their land and culture resulting from the impacts of climate change - where they will no longer being able to care for country and maintain culture and traditional responsibilities to land and water management - will result in further environmental degradation and adverse impacts on biodiversity and overall health and wellbeing of Aboriginal and Torres Strait Islander people.<sup>28</sup> With these impacts, the Land Councils should be seen as key players in improving Aboriginal resilience to climate change, with ranger and other ecological programs being critical.

Given that Aboriginal and Torres Strait Islander populations are more vulnerable to climate change impacts, they should be prioritised for action and representatives from these communities should be included in the forefront of developing a response. Homelessness was tackled urgently in 2020 with the

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<sup>25</sup> Rodd, K.; Romero, J.; Hunter, V.; Martyn, S.V. Aboriginal Community Co-Design and Co-Build—Far More than a House. *Sustainability* 2022, 14, 5294. <https://doi.org/10.3390/su14095294>

<sup>26</sup> Hare M, Barzi F, Boyle J, Guthridge S, Dyck E, Singh G, Falkahammar H, Webster V, Shaw J, Maple Brown L (2020). Diabetes during pregnancy and birthweight trends among Aboriginal and non-Aboriginal people in the Northern Territory of Australia over 30 years. *The Lancet Regional Health - Western Pacific*. eCollection 2020 Aug.

<sup>27</sup> Hare M, Zhao Y, Guthridge S, Burgess P, Barr E, Ellis E, Butler D, Rosser A, Falhammer H, Maple Brown L (2022). Prevalence and incidence of diabetes among Aboriginal people in remote communities of the Northern Territory, Australia: a retrospective, longitudinal data-linkage study. *BMJ Open*. 2022 May 15;12(5)

<sup>28</sup> <https://humanrights.gov.au/our-work/aboriginal-and-torres-strait-islander-social-justice/publications/native-title-report-2008> - chapter 5



threat of COVID-19 looming - a similar urgent response is required now given growing risks of heatwaves, bush fires and other extreme weather events.

The development of climate-resilient shelters or refuges in communities for use by homeless or transient people should be prioritised as these are the people who will not have alternative shelter from extreme weather events.

### **Climate preparedness in new builds, refurbishments and retrofit programs**

Research conducted by the Australian Housing and Urban Research Institute (AHURI) in 2019 found that regional and remote Aboriginal housing is unable to withstand climate change and will be unsuitable for future living. Under existing models, remote Aboriginal housing is expensive to construct, expensive to run and maintain, climatically inappropriate, is quick to deteriorate and fails to provide comfortable and healthy indoor environments. Despite the fact that this situation will worsen with climate change, their research found that “climate change is not yet a feature of Indigenous housing and infrastructure agreements, with inadequate funding and attention paid to climate preparedness in new builds, refurbishments and retrofit programs”<sup>29</sup>. In addition, their research found that “in a context where the Australian Government appears to have stepped away from regional and remote Indigenous housing provision, and state and territory governments have not yet developed comprehensive and well-funded strategies for stepping in, extending the lifespan of existing housing through planned repair and maintenance of existing stock is essential”<sup>30</sup>. In addition, with substandard housing serviced by inconsistent repairs and maintenance that were not built with global warming in sight, their additional data and analysis indicate that even well-maintained housing will not be adequate for climate change.

It is extremely challenging for residents of remote NT communities to reduce their risk of heat stress. This is not only because not all NT public housing comes with air conditioning. Currently, remote Aboriginal residents in the NT buy expensive electricity through prepaid power cards and have high rates of energy disconnection - if cards are not topped up, the power is disconnected. According to Quilty et al., remote NT communities have amongst the world’s most energy insecure dwellings because of this pre-payment purchase (not because the power is unreliable). Moreover, most households are disconnected more than ten times a year; hot weather increases disconnection rates<sup>31</sup>.

‘Quick wins’ should include installation of solar power for new and existing remote households to reduce power insecurity and emissions as well as indirect emissions related to health presentations (e.g. because of the impacts of energy insecurity on health). Jabiru - a small remote town in the NT - has achieved at least 50 % renewable power supply through a solar system and batteries supplemented by a diesel generator. This model could be expanded and made more ambitious – noting that diesel

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<sup>29</sup> Lea, T., Greal, L., Moskos, M., Brambilla, A., King, S., Habibis, D., Benedict, R., Phibbs, P., Sun, C. and Torzillo, P. (2021) Sustainable Indigenous housing in regional and remote Australia, AHURI Final Report No. 368, Australian Housing and Urban Research Institute Limited, Melbourne. Available from the AHURI website at [ahuri.edu.au/research/final-reports/368](http://ahuri.edu.au/research/final-reports/368)

<sup>30</sup> Ibid

<sup>31</sup> Quilty, S., Jupurrurla, N.F., Bailie, R.S., Gruen, R.L. (2022) Climate, housing, energy and Indigenous health: a call to action, first published: 16 June 2022, <https://doi.org/10.5694/mja2.51610>

generators are polluting and, therefore, use should be limited as a supplemental or backup power source.

In the meantime, the current pre-pay 'power card' system should be reformed. Power should be discounted for Aboriginal people in remote communities who are on low incomes, as the current system is extremely inequitable and is likely to be causing premature deaths due to heat stress.

### **Co-design in housing design and builds**

Community members are seldom, if ever, involved in the design, construction, or maintenance of their homes, with the results being that houses built are culturally inappropriate, the residents have little sense of ownership or connection to their homes, and opportunities for vocational training in communities (construction and maintenance) are lost<sup>32</sup>. A pilot program run in the remote Kimberley between 2017–2020 facilitated the co-design and co-build of a culturally and climatically appropriate home with community members. The production of this house led to improvements in mental health, schooling outcomes, reduced youth incarceration, and other spheres of community development, including enterprise and community governance. In addition, whilst the project noted that 'co-design and co-build projects are slower and more complex than the conventional model of external contracting... the outcomes can be far superior across broad areas of social and emotional wellbeing, house quality and comfort, energy consumption, long-term maintenance, community physical and mental health, pride, and ownership<sup>33</sup>.'

This example, as well as the many issues with existing housing provided in remote Aboriginal communities which are old and poorly constructed, points to the urgent need to provide adequate numbers, quality, climate-resilient and culturally appropriate housing, that are co-designed and co-built with Aboriginal and Torres Strait Islander communities.

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<sup>32</sup> Rodd, K.; Romero, J.; Hunter, V.; Martyn, S.V. Aboriginal Community Co-Design and Co-Build—Far More than a House. *Sustainability* 2022, 14, 5294. <https://doi.org/10.3390/su14095294>

<sup>33</sup> Ibid