IN THE NORTHERN TERRITORY



Darwin – Aboriginal Medical Services Alliance NT

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05 February 2018

Darwin Convention Centre, Darwin

Speaker: John Paterson and Margaret Cotter

John Paterson: Good morning, Madame Chair. My name is John Paterson, Paterson, P-A-T-

E-R-S-O-N. I'm the Chief Executive for the Aboriginal Medical Services

Alliance Northern Territory.

Hon. Justice Pepper: Thank you.

Margaret Cotter: I'm Margaret Cotter, also from AMSANT.

Hon. Justice Pepper: Thank you. If you can remember to keep your voices up, so that A, they're

recorded and B, more importantly, we can hear you. Thank you. Yes, when

you're ready.

John Paterson: Thank you, Chairman. Firstly, I'd like to acknowledge the Larrakia Traditional

Owners, past and present, whose land we are meeting today. I'd like to thank the Taskforce for this opportunity to present on behalf of AMSANT to this important Inquiry. AMSANT is the peak body for aboriginal community-controlled health services in the Northern Territory. Our services provide over 60% of all primary healthcare services, provided to aboriginal people in the Northern Territory and we continue to expand. For example, with members who represent emerging or growing community-controlled services in West Arnhem Maningrida. Each community-controlled health services is controlled by a board, elected by members of the local

community, which provides overall governance and strategic leadership.

Plus, AMSANT can speak with authority as the voice of aboriginal leadership in the Northern Territory on aboriginal health and wellbeing. The AMSANT board discussed fracking at its November meeting of last year. Given the number of competing priorities during 2017, it was the first opportunity for the board to properly consider the issue. The board took the position that fracking poses a real health risk to our communities. Many local boards had already discussed the issue and had agreed that they were opposed to fracking. The report produced by the panel is comprehensive, but a striking feature of the report is that it includes many uncertainties, even in the area most closely studied by the Panel, the Beetaloo Basin, the Panel was not able to say whether fracking is safe.

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They recommended detailed environmental risk assessments. However, given how little is known about key issues such as water ecology, environmental biodiversity and public health risk, and the uncertain impact of climate change on this critical area, AMSANT does not believe the time-limited environmental impact statement can provide sufficient reassurance that fracking is safe, not now or for future generations to come. Most importantly for AMSANT, in position of fracking against the wishes of the majority of aboriginal community members will cause deep divisions and impact on the social and emotional wellbeing of community members.

A threat to the health of our country in a lot of ways is a threat to our people's health. These cannot be separated. The report has highlighted the precautionary principle which says that a risk must be minimised. If the exact risk is unknown, but its impact is likely to be severe. We believe given the evidence, that the precautionary principle should guide us to continue a ban on fracking. If the decision is that fracking should go ahead which we strongly oppose, then the Traditional Owners of Aboriginal Land should only be asked to make a decision after a full environmental impact assessment has been undertaken.

Information must be provided to traditional owners by a totally independent third party, which should not be either government or gas companies, but a respected non-commercial scientific body. I'd now like to turn to some of the key issues. First one, risk to public health. As outlined in our submission, which we'll table this morning, there is a substantial evidence from peer-reviewed papers in the United States and Europe that fracking poses a risk to public health across key areas of water and air pollution. The panel agreed that there were well-founded concerns about the safety of fracking in the United States but also found that this was largely because the fracking industry had been poorly regulated and allowed to occur very close to where people live and work.

The panel asserted that much improved regulation and world best practices in mining safety would be able to make fracking safe in the Northern Territory. With a sparse population means that it is easy to ensure fracking does not occur close to where people live and work. However, we are not reassured by the assertion that mining regulation can be quickly brought up to world best practice standards and that mining can be kept away from human settlements.

Communities are rightly skeptical about the capacity of the government to regulate mining given the repeating environmental issues caused by the mining in the Northern Territory. An example is the McArthur River Mine where the catastrophic failure of the mining company to adhere to environmental standards has not stopped the mining company from being given approval to expand. This is also despite the objections of the communities and the Northern Land Council. Furthermore, gas companies are likely to want to frack close to settled areas where there are already roads and infrastructure in order to reduce costs.

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The remote Northern Territory is populated as we, the aboriginal people, have always lived here and always will. Increased employment for aboriginal people could improve population health given that secure, reasonably paid employment is linked to better health outcomes. However, the number of jobs created is uncertain and debated. The experience of Queensland and other communities is that there is a short-term boom which puts a strain on community resources and that many jobs go to the outsiders. The record of the mining industry employing aboriginal people in the Northern Territory is mixed at best. A few short-term jobs would not outweigh the risks of proceeding.

The next topic, risks to social and emotional wellbeing. As social and emotional wellbeing is connected to the health of mother earth, we are responsible for custodianship of our country and feel this responsibility very deeply. A threat to the wellbeing of country is a threat to people's wellbeing. Western scientific understanding has now caught up with indigenous understanding of the connection between mind and body, with diseases such as diabetes and stroke, which are very common in our communities, being linked to the high levels of stress and depression.

The life expectancy of aboriginal in the Northern Territory is the lowest in the nation with the widest gap. Tragically, the life expectancy of aboriginal women in the Northern Territory may now be dropping due to the ever growing burden of chronic disease. We cannot afford to introduce another threat to the wellbeing of our people. The panel has partly recognised the importance of country to the wellbeing of aboriginal people but has dismissed the evidence about the impact on mental health of fracking. We believe that the peer-reviewed literature is concerning, as is the experience of many of those living close to fracking in Queensland.

Most importantly, the concerns of multiple aboriginal communities across the Northern Territory for the health of their country must not be dismissed by the panel. Next issue, water. Water is essential to life. We have reviewed the chapter on water and believe that it is full of uncertainties about the impact of fracking on complex systems of aquifers which are poorly understood, and key risks such as contamination.

AMSANT recognises the limitations of our technical expertise. However, we also believe that it is unreasonable to assume that western science can quickly remedy all of the major knowledge gaps and environmental impact process which will have to be conducted reasonably quickly. It is also unrealistic to assume that there will be a high standard of regulation which is monitored closely and that mining companies would always adhere to world's best practice. History tells us in the Northern Territory and elsewhere that failures in both regulation and mining practice are more than likely to occur.

In summary, our assessment is that the draught final report is comprehensive but we believe its conclusions are flawed. The report documents many uncertainties in areas where critical knowledge is lacking. It also documents widespread community opposition to fracking in both

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aboriginal and non-aboriginal communities. As outlined in our submission, imposing fracking against the wishes of large sections of the aboriginal community is likely to worsen health and wellbeing through increased community discord and heightened levels of depression and anxiety with subsequent effects on physical health and wellbeing.

Aboriginal health is connected to the health of the land and water. So threatening the physical environmental directly affects aboriginal people, aboriginal wellbeing, sorry. Aboriginal people already suffer unacceptable rates of mental health issues and chronic disease against this, the benefits in terms of employments are likely to be limited in short-term. In conclusion, AMSANT considers fracking to be an unacceptable risk to the health and wellbeing of aboriginal people in the Northern Territory with the risks clearly outweighing the benefits. Thank you.

Hon. Justice Pepper: Thank you very much. There may be some questions from the panel. My

first question though is in your submission, which I think you said you would provide to us, that has references to the peer-reviewed articles that you

referred to I hope.

Margaret Cotter: Yes.

Hon. Justice Pepper: Excellent. Wonderful. Thank you. Thank you. Well if you just give it to one of

the people sitting over there, that will be then put up as a submission. Thank

you. Yes, any questions? Thank you very much both for coming and

presenting today. Thank you very much for the written submissions. We'll

be very keen to chase up those articles. Thank you.

John Paterson: Thank you, chairman.

Hon. Justice Pepper: Thank you.

John Paterson: Thank you.