5 Aboriginal and Torres Strait Islander disadvantage

The recommendations in this chapter relate to: the harmful use of alcohol and other drugs (63-71); schooling (72); housing and infrastructure (73-76); and self-determination and local government (77-

Key themes from recommendations (16 recommendations)

the Connected Communities Strategy.

- Research into the harmful use of alcohol and other drugs should incorporate the perspectives of Aboriginal and Torres Strait Islander people and consider all factors that contributing to the problems faced by communities.
- The Commonwealth should take into account social and cultural factors in policies relating to housing, infrastructure and town planning for Aboriginal and Torres Strait Islander communities.
- Truancy rates from school for Aboriginal and Torres Strait Islander children need to be reduced, given the importance of education to reducing disadvantage. Policies to do so should be based on a primary principle of support and implemented in consultation with Aboriginal and Torres Strait Islander people.
- Ongoing initiatives should recognise Aboriginal and Torres Strait Islander people's right to self-determination.

Legend



infrastructure, housing, and town planning.

Complete

Mostly Complete Partially Complete

Not Implemented

Commonwealth | Key actions: The Commonwealth Government has supported ongoing research into alcohol and drug issues facing Aboriginal and Torres Strait Islander communities through initiatives including the NDS and NHMRC. The Commonwealth has made progress to identify Aboriginal and Torres Strait Islander people in administrative data sets. The National Partnership Agreement (NPA) on Remote Indigenous Housing and the National Indigenous Infrastructure guide seek to incorporate the views of Aboriginal and Torres Strait Islander people in the provision of

Remaining gaps: There remains formal barriers to Aboriginal and Torres Strait Islander communities to accessing local government infrastructure grants. Commonwealth-led policies to reduce truancy do not all align with the primary principle of support recommended by RCIADIC.

New South Wales | Key actions: The Government has introduced measures to improve the reporting and linkages of datasets relating to Aboriginal people. Policies have been introduced to provide a holistic approach to responding to alcohol and drug misuse. School attendance has been promoted through

Remaining gaps: The New South Wales Government has partially addressed each recommendation in this chapter, however greater attention should be paid to the provision of road funding and consultation with local Aboriginal communities in the development phase of road projects.

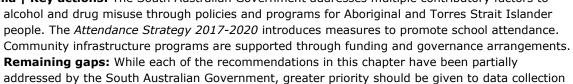
Victoria | Key actions: The Victorian Government has maintained a commitment to designing, monitoring, and evaluating Aboriginal and Torres Strait Islander issues and programs in partnerships with communities. The Koori Alcohol Action Plan 2010-20 and the Koori Education Workforce respectively address alcohol misuse and school attendance. Funding for community infrastructure programs has also been administered.

Remaining gaps: The Victorian Government does not appear to have conducted research into the specific nature and causes of alcohol dependence and misuse in Aboriginal and Torres Strait Islander communities. Further attention should be to understanding this area, and subsequently establishing renewed prevention, intervention and treatment approaches.

Queensland | Key actions: The Queensland Government has recorded the Aboriginal and Torres Strait Islander status of patients in all hospital data collections. Queensland continues to practice a partnership-based approach in cooperation with communities to review Alcohol Management Plans and to develop strategies to combat the causes of alcohol misuse and harm. A range of policies have been introduced to address school attendance and support of community infrastructure programs. Remaining gaps: The Queensland Government has mostly implemented each of the

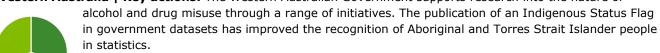
recommendations contained in this chapter. However, continued work is needed on the identification of Aboriginal and Torres Strait Islander people in administrative datasets, and the integration of infrastructure, housing and essential services.

South Australia | Key actions: The South Australian Government addresses multiple contributory factors to



related to the misuse of alcohol among Aboriginal and Torres Strait Islander people. Additionally, research should be commissioned into the specific nature and causes of alcohol dependence and misuse in Aboriginal and Torres Strait Islander communities.

Western Australia | Key actions: The Western Australian Government supports research into the nature of



Remaining gaps: The Western Australian Government has at least partially implemented each of the recommendations contained in this section. More support is required for the provision of infrastructural and technological innovation in service provision. A greater focus is also required on

addressing student care and to address the cultural factors behind school attendance.

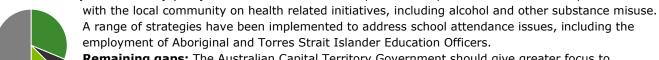
Tasmania | Key actions: The Tasmanian Government attempted to address the collection and reporting of data relating to Aboriginal and Torres Strait Islander people through participation in the Data Quality Improvement Subcommittee. This work continues through the implementation of the Cultural Respect Framework for health services. Access to education is supported by Aboriginal Education Services in the Department of Education and TasTAFE. The Tasmanian Government's Reset agenda commits to addressing disadvantage through continuing to deliver initiatives under the Closing the Gap framework.

Remaining gaps: The Tasmanian Government needs to provide greater consideration to specific nature and causes of alcohol dependence and misuse in Aboriginal and Torres Strait Islander communities.

Northern Territory | Key actions: The Northern Territory Government has implemented a number of policies to address and monitor alcohol misuse among Aboriginal and Torres Strait Islander people, including the 2017 Riley Review into alcohol policies and legislation. The Northern Territory contributes to schemes to support community projects, and to ensure Aboriginal and Torres Strait Islander participation in housing design processes.

Remaining gaps: The Northern Territory Government has partially addressed each recommendation in this chapter, however greater attention should be paid to the provision of road funding. Greater action is also required in response to promoting school attendance, and in understanding the nature of alcohol dependence.

Australian Capital Territory | Key actions: The Australian Capital Territory Government continually consults



Remaining gaps: The Australian Capital Territory Government should give greater focus to conducting research into matters relating to the misuse of alcohol among Aboriginal and Torres Strait Islander people. This should include a focus on the nature and cause of alcohol dependence.

5.1 The harmful use of alcohol and other drugs (63-71)

Recommendation 63

That having regard to the desirability of Aboriginal people deciding for themselves what courses of action should be pursued to advance their well-being, ATSIC consider, in the light of the implementation of the National Aboriginal Health Strategy, the establishment of a National Task Force to focus on:

- a. The examination of the social and health problems which Aboriginal people experience as a consequence of alcohol use;
- b. The assessment of the needs in this area and the means to fulfil these needs; and
- c. The representation of Aboriginal Health Services and other medical resources in such a project.

Background information

Recommendation 63 recognises the disparity in health outcomes between Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander people, especially in regards to the social and health problems associated with alcohol use.

Responsibility

This Recommendation is solely the responsibility of the Commonwealth Government.

Key actions taken and status of implementation

A Taskforce on Substance Abuse was established in 1992 as an advisory body to ATSIC. The purpose of the Taskforce was to examine the social and health issues facing Aboriginal and Torres Strait Islander people as a result of substance abuse, and to assess and meet needs in this area. While ATSIC was disbanded in 2005, the Commonwealth has continued to provide national guidelines and funding for drug and alcohol treatment and rehabilitation through COAG.

The NDS, a cooperative venture between Commonwealth, State and Territory governments, and the non-government sector, aims to improve health, social and economic outcomes for Australians by preventing drug misuse. The Commonwealth provides funding through the Strategy for education and research into substance abuse among Aboriginal and Torres Strait Islander communities. The Strategy also established a national database on alcohol and other drug projects undertaken by or for Aboriginal and Torres Strait Islander communities.

DSS implemented the Cashless Debit Card trial with the aim of addressing the social and health issues experienced by Aboriginal and Torres Strait Islander people because of alcohol abuse and gambling. The trial was for 12 months and aimed to reduce the levels of harm associated alcohol use by limiting trial participants' access to cash and by preventing the purchase of alcohol or gambling products. Participation in the trial was mandatory for all working age recipients of income support payments in the selected trial sites.



The Commonwealth has implemented Recommendation 63 by continuing to provide a national approach and funding to address alcohol abuse.

Additional commentary

The Commonwealth's DSS notes that results from the Cashless Debit Card trial indicate that many of the intended outcomes are on the way to being achieved.

Recommendation 64

That Aboriginal people be involved at every level in the development, implementation and interpretation of research into the patterns, causes and consequences of Aboriginal alcohol use and in the application of the results of that research.

Background information

In order to gain a culturally relevant understanding of issues facing Aboriginal and Torres Strait Islander communities, it is critical that Aboriginal and Torres Strait Islander members are included in the research process.

Responsibility

The Commonwealth, and all State and Territory governments are responsible for this recommendation.

Key actions taken and status of implementation

The 1993-94 Annual Report noted that the **Commonwealth** took steps to promote Aboriginal and Torres Strait Islander representation on the Council for Aboriginal Health, alongside existing opportunities for inclusion on ATSIC's Board of Commissioners, Regional Councils, and State Tripartite Forums.

Commonwealth bodies, including the NHMRC, have developed broad guidelines which emphasise the involvement of Aboriginal and Torres Strait Islander people at all stages of research that relates to Aboriginal and Torres Strait Islander health. For example, NHMRC's *Guidelines on Ethical Matters in Aboriginal and Torres Strait Islander Health Research*. In 2010, the NHMRC launched Road Map II: A Strategic Framework for Improving the Health of Aboriginal and Torres Strait Islander People through Research which seeks to improve Aboriginal and Torres Strait Islander participation in research, and to conduct further research into evaluation, intervention and priority-driven areas of Aboriginal and Torres Strait Islander health.



The Commonwealth has implemented Recommendation 64 by promoting the inclusion of Aboriginal and Torres Strait Islander people in health research.

Aboriginal and Torres Strait Islander individuals are required to be involved in health research in **all States and Territories**, as outlined in Recommendation 48 above. In addition, the following actions that relate specifically to impact of alcohol have been taken.



All States and Territories have implemented Recommendation 64 through the introduction of a range of initiatives to support the Commonwealth.

Additional commentary

In **New South Wales**, a range of formal Aboriginal advisory structures, Aboriginal networks and experts are used by NSW Health in the development, implementation and evaluation of Aboriginal drug and alcohol related programs. Where a research project in the NSW Health system focuses on, or separately collects data relating to Aboriginal people as a group, separate approval must be sought from the Aboriginal Health and Medical Research Council Ethics Committee. Aboriginal community involvement in, and control over, research is a major criterion for approval.

The **Victorian** Government notes an ongoing commitment to self-determination as the guiding principle in Aboriginal Affairs, and continued cooperation with Aboriginal communities to approach issues of importance. Recently, Aboriginal members have been included in the governance of a research-mapping project that contributes to an evidence-based design to inform the design of the Aboriginal alcohol and other drug, and mental health positions funded through the 2017-18 State Budget.

The **Queensland** Government is currently working with the 19 discrete Aboriginal and Torres Strait Islander communities with alcohol restrictions in place to review their Alcohol Management Plans (AMPs).

The Review is being informed by community input and engagement and has resulted in research and analysis on key issues identified by communities. A general review on the effectiveness of AMPs was also undertaken and James Cook University partnered with a number of communities to review their AMPs. In partnership with Aboriginal and Torres Strait Islander communities, the results from this research and application of these results, will inform the future approach to alcohol management.

In **Tasmania**, the Department of Health and Human Services is implementing the Cultural Respect Framework for Aboriginal and Torres Strait Islander Health 2016-2026, and in so doing, has consulted with a number of Aboriginal and Torres Strait Islander community health service providers. Aboriginal and Torres Strait Islander interests in social and health service provision around alcohol are pursued through the Tasmanian Aboriginal Health Reference Group, the Tasmanian Aboriginal Health Partnership Forum and internally, through the Department of Health and Human Services (DHHS) Aboriginal Health and Wellbeing Working Group.

Recommendation 65

That if Aboriginal people identify it as a priority (and ATSIC is well placed to make such a judgement) the Ministerial Council on Drug Strategy, as the body which manages the NCADA, act to develop and implement, in conjunction with Aboriginal people and organisations, an ongoing program of data collection and research to fill the many gaps which exist in knowledge about Aboriginal alcohol and other drug use and the consequences of such use. Particular areas of need are:

- a. Information about alcohol consumption among urban Aboriginal groups;
- b. Information about alcohol consumption among Aboriginal youth;
- c. Longitudinal data in all areas;
- d. An emphasis on good quality data utilising standard methodology and definitions; and
- e. Evaluation research which assists in developing improved Aboriginal prevention, intervention and treatment initiatives in the alcohol and other drugs field.

Background information

The National Campaign Against Drug Abuse (NCADA) was a conjoint effort between the Commonwealth, and the States and Territories to reduce or prevent alcohol and substance abuse. It has since been succeeded by the National Drug Strategy (NDS).

Responsibility

The Commonwealth, and all State and Territory governments are responsible for this recommendation

Key actions taken and status of implementation

At the **Commonwealth** level, the NCADA (1985-2010) and the NDS (2010-current) aim to build safe and healthy communities by minimising alcohol, tobacco and other drug-related health, social and economic harm among individuals, families and communities.

The National Indigenous Drug and Alcohol Committee (NIDAC, 2004-2014) was established to address Aboriginal and Torres Strait Islander alcohol and substance abuse problems.

The Commonwealth has also supported several research bodies and Action Plans to address Aboriginal and Torres Strait Islander alcohol and substance abuse, through the Australian National Council on Drugs (ANCD).

The ABS has conducted research into Aboriginal and Torres Strait Islander alcohol and substance abuse, through the NATSISS and the NATSIHS. These surveys collect alcohol and drug use statistics in alternate 3 year cycles. However, the ABS notes that longitudinal data are not available from these collections.

In 2016, the AIHW published the results of the Australian Burden of Disease Study which included estimates of the burden of alcohol and substance use among Aboriginal and Torres Strait Islander people. The AIHW also conducts a National Drug Strategy Household Survey (NDSHS) which collects information on alcohol and tobacco consumption, and illicit drug use among Aboriginal and Torres Strait Islander people. The NDSHS covers the period from 1998 to present, and is conducted every three years. The AIHW and the Australian Institute of Family Studies released the Closing the Gap Clearinghouse Resource Sheet No. 3 *Reducing alcohol and other drug related harm* in 2010, which reviewed the extent to which strategies and interventions to reduce harmful alcohol and drug usage among Aboriginal and Torres Strait Islander people have been successful. Other AIHW data collections

include the Alcohol and Other Drugs Treatment Services Minimum Data Set (AODTS) and the annual National Opioid Pharmacotherapy Statistics (NOPSAD) collection. The AODTS and NOPSAD collect information on Aboriginal and Torres Strait Islander patients receiving drug and alcohol treatment including those patients who receiving opioid substitution therapies.

The Department of Health (DOH) has responsibility for a number of drug and alcohol forums, including the Ministerial Drug and Alcohol Forum and the National Drug Standing Committee. They are also the lead agency in the Commonwealth's response to the National Ice Taskforce Report, which includes further funding to improve the quality of data and research on ice and other illicit drugs.

PM&C is also providing over \$40 million in funding over the four years from 2017 to strengthen the evaluation of Aboriginal and Torres Strait Islander programs, including evaluation relating to substance misuse.

The Commonwealth has mostly implemented Recommendation 65 by undertaking research and data collection on alcohol and substance abuse issues facing Aboriginal and Torres Strait Islander people. However, longitudinal data are not currently provided for all areas.

The **New South Wales** Government identified this as a Commonwealth responsibility in its 1995-96 Implementation Report. Since then, NSW Health contributes Aboriginal-related health service data to the AIHW as part of their data collections.

The New South Wales Government has mostly implemented Recommendation 65. While this has been identified as a Commonwealth responsibility, the New South Wales Government has cooperated with the provision of data for the AODTS and the NOPSAD collections.

In **Victoria**, a reporting mechanism for substance abuse instances for Koori individuals was developed as a response to this recommendation. Today, the Koori Alcohol Action Plan specifically requires the evaluation of programs aimed at reducing rates of substance abuse.

The Victorian Government has introduced a range of initiatives to implement Recommendation 65. These include the Koori Alcohol Action Plan, and the establishment of a reporting mechanism in response to Aboriginal and Torres Strait Islander substance abuse.

Queensland Health observed in the State's 1996-97 Implementation Report that it had an ongoing program of data collection and research on Aboriginal and Torres Strait Islander alcohol, tobacco and other drug issues.

The Queensland Government has introduced a range of initiatives to implement Recommendation 65. This has included an ongoing program of data collection and research on Aboriginal and Torres Strait Islander alcohol, tobacco, and other drug issues in conjunction with the Commonwealth.

The **South Australian** Government identified this as a Commonwealth responsibility in its 1994 Implementation Report. The South Australian Government provides ongoing support to the Commonwealth in its implementation of this recommendation. Under the NDS, the Commonwealth funds the National Centre for Education and Training on Addiction in South Australia.

The South Australian Government has partially implemented Recommendation 65. While this has been identified as a Commonwealth responsibility, the South Australian Government has cooperated with the Commonwealth through initiatives such as the National Centre for Education and Training on Addiction.

In **Western Australia**, the Government's 1994 Implementation Report stated that no direct collection of data was made about alcohol consumption among Aboriginal and Torres Strait Islander people. However, the WA Aboriginal Health and Wellbeing Framework published in 2015 sought to evaluate alcohol as part of a number of determinants of health, providing some nationally-collected statistics on the high risk consumption of alcohol. The WA Government currently provides internal and external stakeholders with data on Aboriginal drug and alcohol consumption, including usage, hospitalisations, deaths and treatment. Western Australia also supports external research through initiatives including

the Australian Secondary Students' Alcohol and Drug Survey, the Young Adult Drug and Alcohol Survey, and the Mental Health Attitudes Survey. The WA Mental Health Commission provides researcher requests for de-identified treatment-episode data accessed via the Data Linkage Unit.

The Western Australian Government has mostly implemented Recommendation 65 through a range of initiatives. For a more complete implementation, greater steps towards parts (c) and (d) of the recommendation is required.

The **Tasmanian** 1995 Implementation Report observed that there were no NCADA centres in the State, and stated that this recommendation was accordingly not relevant to the State.



The Tasmanian Government has partially implemented Recommendation 65 through supporting Commonwealth initiatives. However, no specific actions taken could be located.

The **Northern Territory** identified in its 1994-95 Implementation Report the Living With Alcohol program and several Menzies School of Health Research programs, which were specifically focused on collecting data about substance abuse among Aboriginal groups. The implementation of this recommendation remains a focus of the Menzies School, which in 2015 undertook research work on developing a place-based framework for assessing alcohol harms in remote communities. The 2017 *Alcohol Policy and Legislation Review Report* ('Riley Review') also contained a number of recommendations about continuing to refine and improve data collection and research in this area.

The Northern Territory Government has mostly introduced a range of initiatives to implement Recommendation 65. These include the Living with Alcohol program, various Menzies School of Health Research programs, and the conduct of the Riley Review.

The **Australian Capital Territory's** 1997 Implementation Report observed that the Alcohol and Drug Service of ACT Health collects data across all areas on treatment episodes, which could be used for research if sought by the Aboriginal and Torres Strait Islander community of the ACT. ACT Health retains a commitment to continual improvement of data relating to alcohol and other drug treatment and usage among Aboriginal and Torres Strait Islander populations. This commitment involves a proactive approach to working with service providers and Aboriginal and Torres Strait Islander people to inform the development of programs and policies to address identified areas of need. The ACT Aboriginal and Torres Strait Islander Health Coordination Group functions to advise, monitor and support the coordinated implementation of Directorate-wide strategies and initiatives in relation to the health of Aboriginal and Torres Strait Islander people.

The Australian Capital Territory Government has partially addressed Recommendation 65 through the collection of data on treatment episodes, however for complete implementation further actions is required against parts (c), (d) and (e) of the recommendation.

Additional commentary

The Commonwealth's AIHW notes that further action is required to improve the NDSHS, including: increasing rural and remote area stratification, increasing sample size and representativeness, and ensuring methods of data collection are culturally appropriate.

Recommendation 66

That if Aboriginal people identify it as a priority, organisations which support research into Aboriginal issues, including the NCADA and the Australian Institute of Aboriginal and Torres Strait Islander Studies, encourage more comprehensive and diverse research into the extent, causes and consequences of alcohol use among Aboriginal people. In particular, that appropriate steps be taken to ensure that the NCADA national research and training centres at the University of New South Wales, Curtin University and the Flinders University of South Australia establish mechanisms to encourage new graduates, researchers from other fields and Aboriginal people to conduct research in this area and identify research priorities and methods to implement them.

Background information

The NCADA has been replaced by the NDS (see Recommendation 65). AIATSIS is a research, collection and publishing organisation that promotes knowledge of Aboriginal and Torres Strait

Islander cultures, traditions, languages and stories. Recommendation 66 recognises the importance of research centres and partnerships in identifying alcohol-related issues facing Aboriginal and Torres Strait Islander people.

Responsibility

This recommendation is solely the responsibility of the Commonwealth Government.

Key actions taken and status of implementation

The **Commonwealth** provided funding for the National Centre for Research into the Prevention of Drug Abuse at Curtin University, and the National Drug and Alcohol Research Centre at the University of New South Wales (1993-94 Annual Report). The research conducted was aimed at reducing alcohol consumption among Aboriginal and Torres Strait Islander people, and reducing excessive drinking and associated health problems.

A national database of projects on alcohol and other drugs involving Aboriginal and Torres Strait Islander people was developed though the NDS (see Recommendation 63). The establishment of this database provided Aboriginal and Torres Strait Islander researchers with training and skill development opportunities through the data collection and compilation involved.

Recommendations 63 and 65 detail the alcohol-related research that has been funded by the Commonwealth.

The Commonwealth has implemented Recommendation 66 by funding alcohol-related research regarding Aboriginal and Torres Strait Islander people and developing a national initiatives database.

Recommendation 67

That the National Drug Abuse Data System of the NCADA institute a regular research program to establish baseline data and monitor changes over time in relation to the health, social and economic consequences of alcohol use among Aboriginal people.

Background information

It is important to monitor progress, in order to understand the scale of the problem and the impact of policy interventions.

Responsibility

This recommendation is solely the responsibility of the Commonwealth Government.

Key actions taken and status of implementation

As part of the **Commonwealth** NCADA's National Drug Abuse Data System, surveys were conducted by the National Drug and Alcohol Statistics Unit in 1994, 1996, and 1998. These surveys provided information around drug usage patterns, behaviour and attitudes among Aboriginal and Torres Strait Islander people. The National Drug Abuse Data System was discontinued and its functions were transferred to the ABS.

The ABS has contributed to the implementation of Recommendation 67 through the following surveys:

- NATSISS: beginning in 2002 and conducted every six years, NATSISS collects information on family and culture, health, education, employment, income, financial stress, housing, and law and justice.
- NATSIHS: beginning in 2004-05 and conducted every six years, NATSIHS collects information about health-related actions, risk factors, health status and socioeconomic circumstances relevant to Aboriginal and Torres Strait Islander people.

While the NCADA has been discontinued, the Commonwealth has implemented Recommendation 67 by continuing the collection and publication of Aboriginal and Torres Strait Islander health surveys through the ABS.

Recommendation 68

That responsible authorities accurately identify Aboriginal people in administrative data sets such as those covering mortality, morbidity and other social indicators, where such action will provide basic information which will assist Aboriginal organisations to achieve their research and service development goals. While it is acknowledged that primary responsibility for the management of such data sets lies with the States and Territories, Commonwealth agencies such as ATSIC, the AIH and the AIC should be involved in this exercise in a co-ordinating role.

Background information

Baseline data are important in health administration and in monitoring progress to achieve more optimal health outcomes for Aboriginal and Torres Strait Islander communities.

Responsibility

The Commonwealth, and all State and Territory governments are responsible for this recommendation.

Key actions taken and status of implementation

The **Commonwealth** Government's 1993-94 Annual Report noted that the AIHW established the National Health Information Agreement to improve the collection, quality and dissemination of health statistics – particularly as they concern the identification of Aboriginal and Torres Strait Islander people. The Agreement is a combined effort between the Commonwealth, and the States and Territories to arrive at national data standards. Implementation is ongoing through the National Indigenous Data Improvement Support Centre, with the most recent version of the Agreement updated in 2013.

The AIHW has undertaken a number of pieces of work aimed at assessing and improving the quality of identification of Aboriginal and Torres Strait Islander people in key administrative data sets.

- In 2012, the AIHW undertook the Enhanced Mortality Database project aimed at improving the quality and completeness of mortality and life expectancy estimates for Aboriginal and Torres Strait Islander populations.
- The AIHW has also undertaken a series of data quality audits for hospital admitted patient care data. These audits aimed to assess the quality of identification information by comparing it with data collected in a face-to-face interview. The audits have demonstrated improvements in data quality over time, with all jurisdictions assessed as having adequate identification of Aboriginal and Torres Strait Islander people in hospital records from 2010-11.
- In 2010, the AIHW released the National best practice guidelines for collecting Indigenous status in health data sets.
- The AIHW also undertakes regular assessment of the quality of identification of Aboriginal and Torres Strait Islander people within its own data holdings, including the National Cancer Registry, the National Child Protection Collection, and the Disability Services National Minimum Data Set.
- The AIWH collects data on Aboriginal and Torres Strait Islander status in the Alcohol and other drugs treatment services National Minimum Dataset and the National Opioid Pharmacotherapy Statistics Annual Data Collection.

The ABS has also made progress with the identification of Aboriginal and Torres Strait Islander people in data collections. While nationally accurate benchmarks have not yet been established, the ABS has moved towards nationally consistent and comprehensive coverage.

DOH, through the development of the Voluntary Indigenous Identifier, has also contributed to progress in the identification of Aboriginal and Torres Strait Islander people in administrative data, including mortality, morbidity, and other indicators.

The Commonwealth has mostly implemented Recommendation 68 through the progress made to identify Aboriginal and Torres Strait Islander people in data sets. Identification and improvement in quality is ongoing, and as yet, not all data sets identify Aboriginal and Torres Strait Islander people in a manner that is nationally consistent and accurate.

The **New South Wales** Government has made efforts to improve the reporting and linkage of datasets relating to Aboriginal people. A 2012 report sought to link data across a number of health and administrative databases, noting opportunities to capture Aboriginal status that might not have been identified in every data collection. In addition, NSW Health has a publicly available interactive tool for data analysis across a range of key health themes and performance indicators for Aboriginal and non-Aboriginal patients. The Department of Family and Community Services (FACS) provides breakdowns of data by Aboriginality in its publicly available 'FACS Statistics'. Breakdowns are provided where the data are available and does not breach privacy and confidentiality provisions. The FACS Aboriginal Outcomes Strategy also has a range of Aboriginal key performance indicators, which aim to improve outcomes across the child protection system.

In 2017, CSNSW conducted a Data Verification Project to validate information on inmates who had advised that they were of Aboriginal descent; 2,554 inmates were interviewed with 77 inmates confirming they did not identify as being of Aboriginal descent.



The New South Wales Government has implemented Recommendation 68 through efforts to improve the reporting and linkage of datasets relating to Aboriginal people.

The **Victorian** Government noted in its 1994 Implementation Report that reviews and changes of policy within the Koori Health Unit and Victorian hospitals. A report on *The History of Indigenous Identification in Victorian Health Datasets, 1980-2011*¹³ observed many initiatives and policies to improve reporting of Aboriginal and Torres Strait Islander status. Initiatives were also implemented to improve data collection of Aboriginal and Torres Strait Islander status in BreastScreen Victoria¹⁴ and in maternity services at the Royal Women's Hospital. ¹⁵ The Victorian Government has also noted in AJA 3 a commitment to supporting community organisations to design, monitor and evaluate Aboriginal and Torres Strait Islander programs and to conduct research into issues that are significant for Aboriginal and Torres Strait Islander communities.

The Victorian Government has mostly implemented Recommendation 68 through several initiatives targeted towards improving the reporting of Aboriginal and Torres Strait Islander health status.

Queensland Health, since the RCIADIC, has recorded the Aboriginal and Torres Strait Islander status of patients in all hospital data collections, as well as in birth and death registrations. Data on community level indicators included in the new Performance Assessment Framework will be disaggregated by Aboriginal and Torres Strait Islander status.

The Queensland Government has mostly implemented Recommendation 68, and records the Aboriginal and Torres Strait Islander status of patients in all hospital data collections, as well as in birth and death registrations.

The **South Australian** Government stated in its 1994 Implementation Report that the State Statistical Priorities Committee would coordinate a response to this recommendation among agencies. South Australia Health has established regular quality checks to improve and monitor the quality of Aboriginal and Torres Strait Islander identification in datasets. The South Australian Government notes that a culture of continuous improvement supports the regular review of quality checks, as well as a consideration of education and training requirements. The South Australian Government also ensures Departmental adherence to ABS standards for identification of Aboriginal and Torres Strait Islander people within administrative data sets.



The South Australian Government has mostly implemented Recommendation 68 through the introduction of regular quality checks to improve and monitor the quality of Aboriginal and

¹³ Bree Heffernan, Dulce Iskandar and Jane Freemantle (2012)

 ¹⁴ Karen Adams, Anne Kavanagh and Jill Guthrie (2008) 'Are you Aboriginal and/or Torres Strait Islander?': improving data collection at BreastScreen Victoria. Australian and New Zealand Journal of Public Health 28(2) 124.
 ¹⁵ Kate Freeman (no date), Improving identification of Aboriginal and/or Torres Strait Islander babies in mainstream maternity services (Vic). Online: https://www.monash.edu/data/assets/pdf file/0006/139704/kate-freeman.pdf

Torres Strait Islander identification in datasets, and the adoption of ABS classification standards for administrative datasets.

In **Western Australia**, the Department of Health undertook the Telethon Kids Institute's Developmental Pathways Project on a collaborative basis with the ABS and the Telethon Institute for Child Health Research which "aimed to explore and develop different methods for deriving Indigenous status from multiple data sources." As a result of this project, an Indigenous Status Flag which uses multiple datasets to flag individuals across WA government administrative data collections as Aboriginal and Torres Strait Islander. Further, the project facilitates the provision of State Government administrative datasets across a spectrum of wellbeing indicators, including mortality, morbidity and other social indicators such as health, education, justice and child protection data. These data are used to inform policy and prevention strategies to improve outcomes for Aboriginal and Torres Strait Islander people.

Western Australian agencies also provide data drawn from administrative datasets to the Commonwealth, as part of a long-standing arrangement to facilitate Federal coordination of various analyses and reporting. This contributes towards Commonwealth Government projects, policies, and publications.

The Western Australian Government has mostly implemented Recommendation 68 through initiatives such as the Telethon Kids Institute's Developmental Pathways Project and ongoing cooperation with the Commonwealth.

Tasmania faced issues with some data collection around Aboriginal and Torres Strait Islander status: the Commonwealth Health Performance Framework 2014 observed that Aboriginal and Torres Strait Islander-flagged data in the National Perinatal Data Collection from Tasmania included those who did not state their status. However, the Aboriginal Health Unit has encouraged the development of strategies to improve data collection. Hospital admissions more broadly identify Aboriginal people. Since 2007, the Tasmanian Government has actively sought to improve the quality of administrative data sets. Between 2009 and 2013, the Tasmanian Government worked in partnership with the Commonwealth in implementing the Overarching Bilateral Indigenous Plan on the Data Quality Improvement Subcommittee. The implementation of the Cultural Respect Framework throughout the DHHS will continue this work, with a focus on using the Indigenous identifier throughout the Tasmanian Health Service and allied services.

The Tasmanian Government has partially implemented Recommendation 68 through the introduction of initiatives to improve the identification of Aboriginal and Torres Strait Islander identification in datasets in conjunction with the Commonwealth. However, the Commonwealth Health Performance Framework 2014 observed that Tasmania faces ongoing issues in regards to the implementation of this recommendation.

The **Northern Territory** conducted an audit of the recording of demographic items, including Aboriginal and Torres Strait Islander status, in 1997 at all five public hospitals in the Northern Territory. The Northern Territory Department of Health has undertaken validation of demographic data collection three times in the past 20 years.

The Northern Territory Government has mostly implemented Recommendation 68. Actions have included the conduct of an audit of demographic items, including Aboriginal and Torres Strait Islander status, and continued demographic data collection.

The **Australian Capital Territory** conducted a project on Aboriginal and Torres Strait Islander health awareness in 2007, working with General Practitioners (GPs) to improve rates of Aboriginal and Torres Strait Islander status collection. The ACT's Community Services Directorate has developed a common dataset to ensure consistent data standards across directorate services; it includes nationally consistent standards for Aboriginal and Torres Strait Islander identification. The Community Services

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¹⁶ Christensen D, Davis G, Draper G, Mitrou F, McKeown S, Lawrence D, McAullay D, Pearson G, Rikkers W, Zubrick S R. *Evidence for the use of an algorithm in resolving inconsistent and missing Indigenous status in administrative data collections*. Australian Journal of Social Issues. Vol.49. No 4. 2014 pp 423-443.

Directorate also reports Aboriginal and Torres Strait Islander disaggregated data to the AIHW and Productivity Commission for inclusion in national reports. ACT Health uses data on self-reported Aboriginal and Torres Strait Islander status for all patients to inform internal reporting and external reporting to Commonwealth agencies. The ACT Government notes that all information is reported to all agencies in accordance with the nationally agreed-upon definition for national health information purposes.



The Australian Capital Territory Government has implemented Recommendation 68.

Additional commentary

The ABS aims to enhance the statistical information from administrative data sources. As part of this aim, the ABS seeks opportunities to include the Standard Indigenous Question into the administrative process to provide for self-identification.

The Enhanced Mortality Database project methodology is now being used to establish an ongoing AIHW Enhanced Indigenous Mortality Data Collection, to support producing enhanced Indigenous mortality and life expectancy estimates on an ongoing basis.

The ABS has independently assessed the reliability of Northern Territory Aboriginal and Torres Strait Islander identification in health surveys, and assessed the under-identification of Aboriginal and Torres Strait Islander people in the Northern Territory to be the lowest of all jurisdictions.

Recommendation 69

That with the aim of assisting Aboriginal organisations to develop effective programs aimed at minimising the harm arising from alcohol and other drug use, priority be given by research funding bodies to research investigating the causal relationships between alcohol and other drugs, including their availability, and consequences on community well-being and criminal activity.

Background information

Research into Aboriginal and Torres Strait Islander alcohol and substance use is needed to identify the underlying issues and thereby better address Aboriginal and Torres Strait Islander problems.

Responsibility

This recommendation is solely the responsibility of the Commonwealth Government.

Key actions taken and status of implementation

The **Commonwealth** Government has provided funding for research into priority areas of Aboriginal and Torres Strait Islander health through the NDS. Further, PM&C commented that Commonwealth alcohol policy is developed in line with harm minimisation principles, as outlined in the NDS.

The NHMRC has also established the Road Map II: A Strategic Framework for Improving the Health of Aboriginal and Torres Strait Islander People through Research to improve Aboriginal and Torres Strait Islander participation in research.

Under the IAS, PM&C funds over 80 alcohol and other drug treatment services. Many of these services have integrated models of care, which recognise the relationship between alcohol misuse, mental and physical health, and the social and cultural determinants of health.



The Commonwealth has implemented Recommendation 69 by providing ongoing funding for research projects into Aboriginal and Torres Strait Islander alcohol and substance use.

Recommendation 70

That organisations developing policies and programs addressing Aboriginal alcohol issues:

a. Recognise the inadequacy of single factor explanations (such as the disease model of problematic alcohol use) of the causes of alcohol dependence and misuse among individuals; and

b. Take into account the fact that multiple explanations are necessary to explain the causes of alcohol misuse and related problems at the community level. It is therefore inappropriate to focus too strongly on any one explanation to the exclusion of others.

Background information

Alcohol and drug abuse often results from a combination of factors, and an integrated approach to the identification and management of these health issues is required. The RCIADIC Report emphasised community-based initiatives which empower Aboriginal and Torres Strait Islander people to make informed decisions about the use of alcohol and other drugs.

Responsibility

The Commonwealth, and all State and Territory governments are responsible for this recommendation.

Key actions taken and status of implementation

The **Commonwealth** Government's 1992-93 Annual Report noted that ATSIC recognises a host of factors that lead to alcohol and other drug abuse and related problems. In 1995-96, the NHMRC established the Emotional and Social Well Being (Mental Health) Working Party which focused on the interrelationship between emotional and social wellbeing and alcohol and drug usage.

Broadly, the Commonwealth has adopted an increasingly integrated approach to the management of Aboriginal and Torres Strait Islander alcohol and drug related problems. The Commonwealth has contributed to ongoing research through the NDS and the NHMRC. As set out in Recommendation 69, PM&C provides funded for alcohol and other drug treatment services which address a range of causal factors.

The Commonwealth has implemented Recommendation 70. The Commonwealth has incorporated an understanding of the underlying complex aetiology of alcohol and substance misuse into its national policies and programs.

The **New South Wales** Government notes that it recognises the complex interrelationships between dispossession, interruption of culture and intergenerational trauma that impacts on the health and wellbeing of Aboriginal people, including its contribution to substance misuse. The New South Wales Government developed a number of alternative strategies in order to provide a holistic approach to responding to alcohol misuse. Alcohol and Other Drug programs in the state are focused on developing coping skills. Programs targeted at the implementation of this recommendation include:

- the NSW Drug Package which invests an additional \$75 million over four years to tackle drug
 misuse in NSW communities by supporting more young people and families into treatment.
 Aboriginal people are a priority for new drug and alcohol treatment, rehabilitation, pregnancy
 services and aftercare programs.
- delivery of evidence-based programs and services including: EQUIPS in adult correctional
 facilities; and Dthina Yuwali in juvenile correctional and community settings. These programs and
 services aim to address the relationship between substance abuse and offending.
- Bolwarra Transitional Centre provides support for Aboriginal female offenders with alcohol and other drug addiction issues in the transition back to community living.
- Through Their Futures Matters (the NSW Government's strategy to improve life outcomes for vulnerable children and families), tailored support packages for vulnerable children and their parents which access and build on universal services to provide a child- or family-centred focus. One area of focus is health and mental health.

The New South Wales Government has implemented Recommendation 70 through the development and implementation of strategies targeted at providing a holistic response to alcohol misuse and the development of coping skills.

The **Victorian** Government noted in its 1994 Implementation Report that it developed programs addressing Aboriginal alcohol misuse at a local level with communities. This is also incorporated into

the *Koori Alcohol Action Plan 2010-20,* which utilises a cross-agency approach to the treatment of alcohol misuse within Aboriginal communities.

The Victorian Government has implemented Recommendation 70 through the development and implementation of strategies targeted at addressing Aboriginal and Torres Strait Islander drug and alcohol issues.

The **Queensland** Government has implemented holistic health service models to address community specific social and emotional wellbeing factors associated with alcohol dependence. Queensland Health developed a state-wide network of Aboriginal and Torres Strait Islander reference groups to provide information, advice and insight on Aboriginal and Torres Strait Islander alcohol, tobacco and other drug issues. Currently, the Queensland Government is working in partnership with communities to review AMPs and develop practical, collaborative actions to address the causes and symptoms of alcohol misuse and harm.

The Queensland Government has implemented holistic health service models to address community specific social and emotional wellbeing factors associated with alcohol dependence in line with Recommendation 70. Additionally, Aboriginal and Torres Strait Islander reference groups are consulted on alcohol, tobacco and other drug issues.

The **South Australian** Government stated in its 1994 Implementation Report that the philosophy of this recommendation was incorporated into the practice of Drug and Alcohol Services South Australia, and that government agencies more broadly had recognised the inadequacy of single-factor explanations of alcohol abuse. Presently, the South Australian Government addresses multiple contributory factors to alcohol and drug misuse through policies and programs for Aboriginal and Torres Strait Islander people who face alcohol problems. These include:

- harm reduction measures: Sobering Up Units, Mobile Assistance Patrols, the Public Intoxication Act 1984 (SA), and regional alcohol action plans;
- supply reduction measures: regional alcohol action plans; and
- demand reduction measures: community development programs, welfare cards, treatment services, and population based social marketing.

The South Australian Government has implemented Recommendation 70 through amendments to Drug and Alcohol Services South Australia practice, and the implementation of harm reduction measures, as well as demand-side and supply-side policy responses.

In **Western Australia**, the funded programs for alcohol and drug issues recognise the importance of lifestyle issues and community factors in responding to the health needs of Aboriginal communities. The Strong Spirit Strong Mind Aboriginal Programs provide nationally recognised training programs to support the development of a skilled Aboriginal and Torres Strait Islander workforce, and focus on alcohol and other drug problems in addition to social and emotional wellbeing harms. These training programs also provide awareness training for non-Aboriginal and Torres Strait Islander workers. The Western Australian Government notes the commitment of the Mental Health Commission to planning, developing and implementing culturally secure policy frameworks and service models in consultation with Aboriginal and Torres Strait Islander stakeholders across Western Australia.

The Western Australian Government has implemented Recommendation 70, recognising the importance of lifestyle issues and community factors in responding to the health needs of Aboriginal and Torres Strait Islander communities.

Tasmania did not specifically respond to this recommendation in its 1995 Implementation Report, but referred to a number of broader initiatives taken towards alcohol and drug misuse. It was unclear as to whether these initiatives incorporated the policy recommendations of this recommendation.

Despite adopting broader initiatives to address alcohol and drug-related issues, it does not appear that the Tasmanian Government has implemented the intent of Recommendation 70.

The **Northern Territory** Health Service stated in its 1994-95 Implementation report that these principles were incorporated into the Alcohol and Other Drugs program. Culture, social determinants, early childhood programs and strengthening communities were also included as key focuses of the 2017 Riley Review into alcohol policies and legislation.



The Northern Territory Government has implemented Recommendation 70 through the Alcohol and Other Drugs Program and the 2017 Riley Review.

The **Australian Capital Territory** noted in its 1997 Implementation Report that ACT Health consulted with Aboriginal and Torres Strait Islander communities and the Aboriginal Health Service in developing its programs, and was developing programs in line with these principles at the time.

The Australian Capital Territory Government has implemented Recommendation 70 through the ongoing consultation with Aboriginal and Torres Strait Islander communities and the function of the Aboriginal Health Service in program development.

Recommendation 71

That research funding bodies consider commissioning or otherwise sponsoring research investigating Aboriginal conceptualisation of the nature and causes of alcohol dependence and misuse and the prevention, intervention and treatment approaches which stem from these.

Background information

The RCIADIC Report noted that research into the patterns, causes and consequences of Aboriginal and Torres Strait Islander alcohol use should be conducted and Aboriginal and Torres Strait Islander people's perspectives into alcohol-related issues should be incorporated.

Responsibility

The Commonwealth, and all State and Territory governments are responsible for this recommendation.

Key actions taken and status of implementation

The **Commonwealth** has contributed to funding for the NDS and for the NHMRC to undertake research. The National Centre for Research into the Prevention of Drug Abuse created an Aboriginal Research Program to identify factors which can prevent alcohol and other drug-related harm among Aboriginal and Torres Strait Islander communities, develop culturally appropriate means for measuring the extent and consequences of drug abuse, and to disseminate information and provide advice. Currently, research is conducted through the NHMRC which identifies research on the health of Aboriginal and Torres Strait Islander people as a priority area.

The Commonwealth has implemented Recommendation 71. The Commonwealth has funded research into the nature and causes of alcohol dependence in Aboriginal and Torres Strait communities.

Research conducted by the Australian Indigenous Alcohol and Other Drugs Knowledge Centre found that research had taken place into alcohol misuse by Aboriginal and Torres Strait Islander individuals in every State and Territory, including the relationship between alcohol dependence, treatment and culture. The below provide an indication of some of the research undertaken in each State.

In **New South Wales**, the University of Wollongong has published research on incorporating culture into treatment for Aboriginal men in alcohol and drug rehabilitation programs. ¹⁷ The Stay Strong and Healthy Alcohol in Pregnancy project is one example which builds on formative researched conducted in 2011 with Aboriginal women and their families. The research explores attitudes and beliefs around drinking, drug use and pregnancy; and seeks to identify the best ways to deliver information, education and support to Aboriginal women and their families.

¹⁷ Stacey L Berry (2013) Culture in treatment for Aboriginal Australian men in New South Wales residential drug and alcohol rehabilitation services. Online: http://ro.uow.edu.au/theses/3758/

The New South Wales Government has implemented Recommendation 71 through support of ongoing research into incorporating culture into treatment for Aboriginal alcohol and drug rehabilitation programs. This research has been incorporated into program design.

The **Victorian** Government funds research into alcohol and other drug issues. The review did not reveal the extent to which this research specifically related to the Aboriginal and Torres Strait Islander conceptualisation of these issues. The Victorian Government also noted in AJA 3 that research had been conducted into the risk factors of alcohol and drug misuse by young people.

The Victorian Government has partially implemented Recommendation 71 through the provision of funding for research into alcohol and other drug issues, including into the risk factors of alcohol misuse. However, it is unclear to what extent research has been conducted into the prevention, intervention and treatment approaches for Aboriginal and Torres Strait Islander people.

The **Queensland** Government 1996-97 Implementation Report stated that Queensland Health conducted this research by its participation in the National Drug Strategy Committee. The Queensland Alcohol and Drug Research and Education Centre, jointly funded by the University of Queensland and Queensland Health, developed the Indigenous Risk Impact Screen and Brief Intervention. This tool was designed to screen and treat alcohol Aboriginal and Torres Strait Islander individuals in the Queensland context. The Queensland Government notes that prevention, intervention and treatment approaches, including tools for screening and brief intervention, continue to be informed by contemporary research and evidence.

The Queensland Government has implemented Recommendation 71 through participation in the National Drug Strategy Committee, and the ongoing work of the Queensland Alcohol and Drug Research and Education Centre which focuses on prevention, intervention and treatment approaches.

In **South Australia**, the Aboriginal Drug & Alcohol Council (SA) was formed in direct response to the RCIADIC, and aims "to ensure the development of effective programs to reduce harm related to substance misuse in Aboriginal communities." It receives funding from the South Australian Government.

The South Australian Government has partially implemented Recommendation 71 through the establishment of the Aboriginal Drug and Alcohol Council. However, it is unclear to what extent research has been undertaken into the prevention, intervention and treatment approaches.

In **Western Australia**, the Aboriginal Health Council of Western Australia has researched the involvement of alcohol in broader health outcomes for Aboriginal individuals. ¹⁸ For example, research projects conducted in line with the principles contained in this recommendation include the Australian Secondary Students' Alcohol and Drug Survey, the Young Adult Drug and Alcohol Survey, and the Mental Health Attitudes Survey. The Western Australian Mental Health Commission also provides de-identified treatment-episode data to researchers via the Data Linkage Unit.

The Western Australian Government has mostly implemented Recommendation 71, however further specific research is required to be conducted into the prevention, intervention and treatment approaches.

In **Tasmania**, this recommendation was listed as "supported, but not implemented" in the Government's 1995 Implementation Report. It is unclear whether any funded research has taken place in Tasmania specifically aimed at Aboriginal and Torres Strait Islander people.

The Tasmanian Government does not appear to have taken actions to implement Recommendation 71 beyond those identified through the Australian Indigenous Alcohol and Other Drugs Knowledge Centre.

¹⁸ Aboriginal Health Council of Western Australia (2014) *Submission response – inquiry into the harmful use of alcohol in Aboriginal and Torres Strait Islander communities*.

In the **Northern Territory**, the Menzies School of Health Research has a specific research focus on alcohol misuse in the context of Aboriginal and Torres Strait Islander health, and has made a number of publication contributions to the field.

The Northern Territory Government has partially implemented Recommendation 71 through the work of the Menzies School. However, it is unclear to what extent research has been conducted into the prevention, intervention and treatment approaches for Aboriginal and Torres Strait Islander people.

In the **Australian Capital Territory**, the Alcohol Tobacco and Other Drug Association (ACT) has a large number of publications looking at the policy interventions relevant to reducing alcohol misuse. In 2017, the ACT Government opened the Ngunnawal Bush Healing Farm to address root cause issues that lead to substance abuse and treatment relapses, with services that will revolve around reconnecting Aboriginal and Torres Strait Islander people to land and culture. The Farm provides Aboriginal and Torres Strait Islander people with access to support from the traditional custodians, community leaders/elders, respected role models as well as cultural healers.



The Australian Capital Territory Government has partially implemented Recommendation 71; it does not appear that research programs specific to the ACT have been implemented.

5.2 Schooling (72)

Recommendation 72

That in responding to truancy the primary principle to be followed by government agencies be to provide support, in collaboration with appropriate Aboriginal individuals and organisations, to the juvenile and to those responsible for the care of the juvenile; such support to include addressing the cultural and social factors identified by the juvenile and by those responsible for the care of the juvenile as being relevant to the truancy.

Background information

Improved school engagement is seen as an important contribution to reducing areas of Aboriginal and Torres Strait Islander disadvantage, including in literacy and numeracy levels and economic participation.

Responsibility

The Commonwealth, and all State and Territory governments are responsible for this recommendation.

Key actions taken and status of implementation

In implementing policy and programmes to respond to truancy, the **Commonwealth** Government takes a holistic approach to supporting Indigenous communities to get kids to school through the IAS. The two specific measures the Commonwealth has introduced to address truancy are:

- The School Enrolment and Attendance Measure in the Northern Territory, which requires children to attend school otherwise income support payments may cease.
- The Remote School Attendance Strategy launched in January 2014 assists parents and carers to get children to school in remote communities through consultation with the families and practical support. PM&C noted that this Strategy employs local Aboriginal and Torres Strait Islander attendance and truancy officers to support children, and their families, to attend school. This initiative operates in 78 schools and is currently funded until the end of 2018.

The Commonwealth has implemented several policies which seek to reduce truancy. Recommendation 72 is mostly complete as additional steps could be undertaken by the Commonwealth as the focus on income management does not seem to align with the primary principle being support.

In **New South Wales**, the *Education Act 1990* (NSW) Part 5 permits conferences between students and parents or carers to help address the factors underlying truancy. The Department of Education

also employs a number of Aboriginal individuals in liaison-style roles to help improve engagement, attendance and broader issues of broader student welfare. The Connected Communities Strategy has been introduced to address the educational and social aspirations of Aboriginal children and all young people in 15 schools in 11 of the most complex and vulnerable communities in the State. Schools work closely with their Local Reference Group and Aboriginal students' parents to improve student attendance at school and to ensure learning and teaching content is culturally responsive to improve attendance. In addition, the NSW Government provides funding to the Clontarf Foundation and Girls Academy program to help prevent disengagement from education by Aboriginal children and young people.

In implementing Recommendation 72, the New South Wales Government has provided support for Local Reference Groups and Aboriginal individuals employed in liaison-style roles. Programs including the Connected Communities Strategy have also supported implementation.

In **Victoria**, School Attendance Officers follow up on ongoing attendance issues. Schools are required to develop policies to support and maintain student attendance, and are supported in this with resources from the Victorian Government. The Koori Education Workforce helps to assist schools with building relationships in Koori families and communities. The Victorian Government included as a strategic priority in AJA 3 the reconnection of at-risk Aboriginal and Torres Strait Islander youth with school.

In implementing Recommendation 72, the Victorian Government has provided support for School Attendance Officers and the Koori Education Workforce, and mandated that schools establish policies to encourage school attendance among Aboriginal and Torres Strait Islander people.

In **Queensland**, the Attendance Turnaround Team supports schools and communities to improve school attendance levels. Aboriginal and Torres Strait Islander cultural perspectives inform the program. The Queensland Department of Education and Training implements a youth engagement plan to strengthen engagement from early childhood through to post-school. State schools, including those in remote areas, use a range of strategies for maintaining and improving student attendance in consultation with parents and interested community members. Key strategies which implement this recommendation include:

- the State-wide Every Day Counts initiative, which aims to improve student attendance at schools through a shared commitment by students, parents, caregivers, schools and the community.
- the Australian Government Remote School Attendance Strategy (RSAS) being delivered in 12 Queensland state schools to lift school attendance levels in remote communities by developing the capacity of parents, carers and interested community members to work with schools and families; and
- the Cherbourg attendance pilot, which aims to improve school attendance rates of students in rural and remote schools. Four schools (Cherbourg State school, Murgon State school, Moffatdale State school) are involved in the pilot, which involves working with a local community body to reengage students, support parents and mitigate the risk of prosecution.

In implementing Recommendation 72, the Queensland Government has introduced a number of strategies to promote attendance including the Attendance Turnaround Team, the Every Day Counts initiative, the Remote School Attendance Strategy, and the Cherbourg attendance pilot.

In **South Australia**, one initiative run to improve Aboriginal and Torres Strait Islander student attendance is the "Enter for Success" program, which permits Aboriginal and Torres Strait Islander students to attend a school other than their local zoned school. The Department of Education Development's *Aboriginal Strategy 2013-2016* also outlined a number of key strategies to improve attendance, particularly through cultural and community engagement of families and students. The Department of Education's *Attendance Strategy 2017-2020* includes priority populations and applies across the intervention continuum. The strategy focuses on promoting the importance of education from a young age; engaging children, young people and their families; and addressing barriers to attendance, learning and wellbeing.

In implementing Recommendation 72, the South Australian Government has provided support through a number of programs including Enter for Success and initiatives under the Aboriginal Strategy 2013-16 and the Attendance Strategy 2017-20.

In **Western Australia**, the Department of Education encourages a holistic approach to improving attendance at a school level. Part of this response is to encourage the recruitment of local Aboriginal and Torres Strait Islander people as teachers to build inclusive school cultures. ¹⁹ A number of other legislative powers, including cases before an attendance panel under the *School Education Act 1999* (WA), assist in dealing with truancy problems. The Western Australian Government notes that the Student Attendance policy for Western Australian public schools has been revised to emphasise positive attendance strategies. Additionally, the Department of Education offers Student Attendance Toolkit resources, specialist support from the School Psychology Service, and Badged Attendance Officers.

The Western Australian Government has partially implemented Recommendation 72 through a number of positive attendance strategies. However, these strategies do not appear to include involving those with responsibility for the care of students, and the extent that they address cultural factors is unclear.

In **Tasmania**, compulsory conciliation conferences involving the school, parents and student help to allow all participants to understand reasons for absenteeism and resolve school attendance issues without issuing penalties. The Department of Education employs Aboriginal Education Workers to facilitate discussions between parents, students and teachers and improve outcomes such as attendance.

In implementing Recommendation 72, the Tasmanian Government has provided support through the employment of Aboriginal Education Workers and the introduction of compulsory conciliation conferences between school, parents and students.

In the **Northern Territory**, the Commonwealth School Enrolment and Attendance Measure requires children to attend school otherwise income support payments may cease. If a child does not regularly attend school, a compulsory conference assists parents and students with developing a plan to regularly attend school before the issue of infringement notices. Remote school attendance officers also help to ensure that students attend school.

The Northern Territory Government has partially implemented Recommendation 72 through the provision of support to Remote School Attendance Officers. The use of punitive measures such as the Commonwealth School Enrolment and Attendance Measure is not in the spirit of this recommendation.

In the **Australian Capital Territory**, Aboriginal and Torres Strait Islander Education Officers help to provide more equitable education outcomes for Aboriginal and Torres Strait Islander students, including by improving attendance through acting as a liaison between families, communities and schools. The ACT's Education Directorate has recently adopted a strengths-based approach to Aboriginal and Torres Strait Islander Education, which focuses on building school environments to support Aboriginal and Torres Strait Islander students, and to welcome their families and communities. This approach is centred on four dimensions, including: (a) engagement with families and community; (b) teaching and cultural integrity; (c) leadership, celebration and environment; and (d) high expectations and successful transitions. In 2017, school leaders from across the ACT public system attended Cultural Integrity Training where they engaged with the task of creating a strengthened organisational culture.



The Australian Capital Territory Government has mostly implemented Recommendation 72 through the Education Directorate's programs, and involvement of parents and community.

¹⁹ G. Partington, J. Gray & M. Byrne (no date) *School attendance and Aboriginal students.* Online: http://www.det.wa.edu.au/aboriginaleducation/detcms/cms-service/download/asset/?asset_id=15815446.

However, it is not clear to what extent these programs address cultural factors behind a lack of school attendance.

5.3 Housing and infrastructure (73-76)

Recommendation 73

That the provision of housing and infrastructure to Aboriginal people in remote and discrete communities, including the design and location of houses, take account of their cultural perceptions of the use of living space, and that budgetary allocations include provision for appropriate architectural and town planning advice to, and consultation with, the serviced community.

Background information

The RCIADIC Report recognised the importance of culturally appropriate housing provision to the wellbeing of Aboriginal and Torres Strait Islander communities and recommends governments practice cultural sensitivity and inclusion of Aboriginal and Torres Strait Islander communities in architectural and town planning decisions.

Responsibility

The Commonwealth, and all State and Territory governments are responsible for this recommendation.

Key actions taken and status of implementation

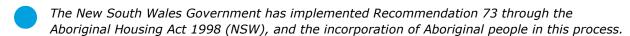
Bilateral agreements between the **Commonwealth**, and State and Territory governments were made to channel the Aboriginal Rental Housing Program through ATSIC, which ran during the mid- to late-1990s.

The National Partnership Agreement on Remote Indigenous Housing (NPARIH) was targeted at addressing the issues of poor housing conditions, severe housing shortages, homelessness and overcrowding in remote Aboriginal and Torres Strait Islander communities. The NPARIH was replaced by the National Partnership on Remote Housing (NPRH) from 1 July 2016. It has a greater emphasis on improved housing sustainability and provides more business and employment opportunities for Aboriginal and Torres Strait Islander people

The National Partnership Agreement on Remote Service Delivery (NPARSD) implemented a new model for service delivery to Aboriginal and Torres Strait Islander people living in remote communities.

The Commonwealth has implemented Recommendation 73 through the National Partnership Agreements to improve housing and infrastructure in communities, with progress in practising cultural sensitivity and inclusivity for Aboriginal and Torres Strait Islander town planning needs.

The **New South Wales** *Aboriginal Housing Act 1998* (NSW) explicitly aims to provide access to appropriate and quality housing that takes into account social and cultural requirements of Aboriginal people. The remainder of the Act sets out the framework through which Aboriginal public housing is offered. The Aboriginal Housing Office is currently designing new social housing which takes into account cultural and environmental considerations and includes innovation in design, purpose and construction in order to achieve better outcomes, including those in remote and discrete communities. Corrective Services NSW has an ongoing partnership with Aboriginal Housing Office to manufacture modular buildings for use in Aboriginal remote communities, providing community housing and employment opportunities for Aboriginal offenders.



In **Victoria**, \$500 million of social housing assets were transferred to Aboriginal Housing Victoria, with the aim of improving the cultural appropriateness of housing.

The Victorian Government has implemented Recommendation 73 through the provision of funding towards ensuring the cultural appropriateness of housing.

In **Queensland**, the *Housing Act 2003* (Qld) explicitly aims to provide access to appropriate and quality housing that takes into account social and cultural requirements of Aboriginal and Torres Strait Islander people. The remainder of the Act sets out the framework through which public housing is offered. The Queensland Government notes that the choice of housing types in remote communities is in response to the housing needs of community residents and is influenced by factors including cultural preferences of the community, regional housing styles, local conditions, availability of skilled trades and availability of building materials and equipment. The Queensland Government is currently developing the new *Indigenous Housing Action Plan* in collaboration with Aboriginal and Torres Strait Islander people.

The Queensland Government has implemented Recommendation 73 through the Housing Act 2003 (Qld) and consultation of Aboriginal and Torres Strait Islander councils in developing the new Indigenous Housing Action Plan.

The **South Australian** Government's 1994 Implementation Report observed that the Housing Trust and Aboriginal Housing Board consulted with Aboriginal communities in providing social housing for Aboriginal individuals. The South Australian Government noted that Housing SA works across government to establish coordinated planning considerations. Formal consultation on location of houses and infrastructure is conducted as core business prior to each capital works program, with commencement based on the consent of the Aboriginal community governance body. Consultation includes location of individual housing lots within the community, and has included establishment of family allocated subdivisions where appropriate.

More recently, at the beginning of the NPARIH capital works program, Housing SA engaged an architect to work closely with remote communities to develop housing designs driven by cultural preferences. Housing SA has built houses on known preferences of local communities, incorporating fire pits, outdoor-sheltered living spaces, and breezeways. Houses delivered to communities under the NPARIH program are subject to Post Occupancy Evaluations to ensure housing design is improved in future delivery of housing programs and remains culturally appropriate. These evaluations document and recommend design features for improvement, and which are not working well for tenants. Issues identified by the evaluation report were also reviewed at Housing South Australia's Housing Technical Standards Forum to address issues needing deeper investigation.

The South Australian Government has implemented Recommendation 73. South Australia has demonstrated continuous improvement in the supply of culturally appropriate housing design and implementation of culturally appropriate housing location in remote Aboriginal and Torres Strait Islander communities.

In **Western Australia**, the Aboriginal Housing Policy Manual explicitly aims to ensure that public housing is delivered in a manner sensitive to cultural protocols. Compliance with the National Indigenous Housing Guidelines on design is supplemented with housing management arrangements, which involve negotiation prior to the construction of housing in remote Aboriginal communities. A protocol requiring continuous consultation with community members, councils, elders and traditional owners, serves to ascertain the wishes of Aboriginal and Torres Strait Islander inhabitants. This guides decisions on location and design, including the use of living spaces.

Recommendation 73 has been implemented by the Western Australian Government through a number of measures to ensure appropriate consultation is undertaken with Aboriginal and Torres Strait Islander people.

In **Tasmania**, the Government's 1995 Implementation Report observed that the Aboriginal Rental Housing Program was jointly administered by the Government and three Regional Aboriginal Housing Allocation Committees. The Report stated that these bodies aimed to ensure public housing programs were delivered in a culturally appropriate manner. The design of houses constructed under the National Partnership Agreement on Remote Indigenous Housing occurred in collaboration with the specific and unique design requirements for those communities as well as incorporating a range of environmental and energy efficiency features. Service delivery has also included consultation with the Cape Barren Aboriginal Association Inc. and the Flinders Island Aboriginal Associations Inc. to determine the extent of the detailed scopes of works.

The Tasmanian Government has implemented Recommendation 73 through the Aboriginal Rental Housing Program, the National Partnership Agreement on Remote Indigenous Housing, and ongoing processes of consultation on housing design with local Aboriginal and Torres Strait Islander communities.

The **Northern Territory** Government committed to spend \$1.1 billion over 10 years from 2017 on remote Aboriginal and Torres Strait Islander housing, including the construction of new housing, repairs and maintenance, the provision of employee housing, and the implementation of room to breathe programs to increase living spaces in existing homes. Under this program, Aboriginal and Torres Strait Islander people have input into the design of their homes to ensure they are culturally appropriate. This forms part of the Northern Territory's Aboriginal Community Planning Framework and applies to 50 remote Aboriginal and Torres Strait Islander communities in the Northern Territory. This replaces the Strategic Indigenous Housing and Infrastructure Programs, which faced delays and expanding costs.

The Northern Territory Government has implemented Recommendation 73 through the provision of funding towards remote Aboriginal and Torres Strait Islander housing. It is not clear whether all Aboriginal and Torres Strait Islander communities are regularly consulted.

In the **Australian Capital Territory**, housing assistance for Aboriginal and Torres Strait Islander individuals was reviewed in 1996 by ACT Housing. Currently, Housing ACT and other mainstream housing services generally respond in a culturally appropriate way to the needs of Aboriginal and Torres Strait Islander people. For example, in 2016 five two-bedroom units were constructed in Kambah to meet the needs of older Aboriginal and Torres Strait Islander people. The units were designed in close consultation with the ACT Aboriginal and Torres Strait Islander Elected Body.



The Australian Capital Territory has implemented Recommendation 73 through a review conducted in 1997, and the provision of culturally appropriate housing.

Recommendation 74

That the work of the Centre for Appropriate Technology in Alice Springs in the design of items specifically for infrastructural and technological innovations appropriate to remote communities, and that of similar research units, be appropriately encouraged and supported.

Background information

The Centre for Appropriate Technology (CAT) improves the lifestyle of those living in remote areas by providing appropriate technical solutions to specific problems raised by Aboriginal and Torres Strait Islander communities. Its programs concentrate on information dissemination, practical problemsolving and skills training in relation to essential services, shelter technologies, transport, and communications.

Responsibility

The Commonwealth, and all State and Territory governments are responsible for this recommendation.

Key actions taken and status of implementation

The **Commonwealth** has provided funding for Centre for Appropriate Technology (CAT) since RCIADIC. In 2016, CAT initiatives included the installation of HotSpots in Central Australia, a standalone solar power system for the Oriners Ranger Base, and the BEEBox innovation which assists regional households conserve energy. PM&C noted that CAT has been funded to design and construct the Koongarra Homeland. Construction is due for completion by the end of 2017.

The National Indigenous Infrastructure Guide also promotes awareness of the relevant issues relating to the provision of regional and remote infrastructure for Aboriginal and Torres Strait Islander communities.



The Commonwealth has implemented Recommendation 74 as it has provided ongoing CAT funding.

The **New South Wales** Aboriginal Community Water and Sewerage Program has developed a co-ordinated strategy for the investigation and delivery of water and sewerage infrastructure needs in Aboriginal communities. This goes towards implementing infrastructure appropriate to remote communities. The Aboriginal Community Lands and Infrastructure Program 2017 is being rolled-out to improve planning outcomes for Aboriginal communities. The Program aims to educate Aboriginal people about the planning system and empower them with the tools and information they need to gain a greater economic benefit from their land. The Aboriginal Housing Office is also undertaking energy saving initiatives, including through the installation energy monitoring devices and solar panels, in Western Sydney social housing.

The New South Wales Government has implemented Recommendation 74 through the function of the Aboriginal Community Water and Sewerage Working Group and the Aboriginal Housing Office, and programs including the Aboriginal Community Lands and Infrastructure program 2017.

In **Victoria**, a \$15 million Aboriginal Infrastructure Fund was announced in the 2017 budget, which is to be used for projects nominated by Aboriginal and Torres Strait Islander communities and organisations.

The Victorian Government has implemented Recommendation 74 through the provision of funding towards projects nominated by Aboriginal and Torres Strait Islander communities and organisations.

In **Queensland**, the Indigenous Environmental Health Infrastructure Program seeks to improve the health of Aboriginal and Torres Strait Islander communities through the provision of improved environmental health infrastructure.



The Queensland Government has implemented Recommendation 74 through the provision of funding through the Indigenous Environmental Health Infrastructure Program.

In **South Australia**, houses on homelands are provided with hot water services from the CAT. In 2008, Aboriginal and Torres Strait Islander community structure plans were developed for certain Anangu Pitjantjatjara Yankunytjatjara (APY) and Aboriginal Lands Trust communities. These provided the framework for land-use planning and development considerations in South Australia's Aboriginal and Torres Strait Islander communities, and provide each community and land-holding authority with a guide to future growth and development.

The South Australia Government has partially implemented Recommendation 74 through the establishment of Aboriginal and Torres Strait Islander community structure plans to assist with infrastructure planning and development. It is not clear to what extent funding is provided to support local infrastructure and technological innovation needs.

In **Western Australia**, the State Government announced in December 2016 funding for power and water upgrades at 10 remote Aboriginal communities. The Western Australia Government notes that despite the Centre having limited presence in Western Australia, a range of infrastructural and technological innovations in remote communities have been devised through the delivery of infrastructure projects in those communities over the past 25 years.

The Western Australia Government has partially implemented Recommendation 74. Despite offering infrastructural and technological innovations, there does not appear to be formal steps taken to address the requirements of this recommendation.

In **Tasmania's** 1995 Implementation Report, the Government indicated that it would seek the advice of CAT, if Aboriginal and Torres Strait Islander representatives advised Housing Services that they wish to design and construct their own dwellings. We have not been able to identify further activity relevant to this recommendation in Tasmania.

The Tasmanian Government has not implemented Recommendation 74, it does not appear that CAT has been contacted or additional actions have been taken to address the recommendation.

The Northern Territory Government continues to operate and support the CAT.



The Northern Territory Government has implemented Recommendation 74 through the ongoing work of the CAT.

In the **Australian Capital Territory**, there are no remote communities, so this recommendation is not directly relevant.



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Recommendation 75

That Aboriginal communities be given equitable access to ongoing expenditure by the Commonwealth, State and Territory, and local authorities on roads. In addition, where new roads or changes to existing roads are proposed, it is recommended that no development should take place until the impact on Aboriginal land and the possible impact on Aboriginal communities that public access may have are established in consultation with those communities likely to be affected by the development proposal.

Background information

Recommendation 75 sought to provide greater consideration and accessibility of funding to Aboriginal and Torres Strait Islander communities, which fall outside the scope of formal local government authorities. It also aims to uphold the values of Aboriginal and Torres Strait Islander communities in relation to land and the natural environment throughout development processes.

Responsibility

The Commonwealth, and all State and Territory governments are responsible for this recommendation.

Key actions taken and status of implementation

The **Commonwealth** Government has addressed this recommendation through the Aboriginal Peoples and Torres Strait Islander Principle which, adopted by the Commonwealth Grant Commission, seeks to promote greater equity in funding allocations.

The existing legislative framework provides some protection for Aboriginal and Torres Strait Islander heritage sites. The *Aboriginal Land Rights (Northern Territory) Act 1976 prohibits* the construction of a road on Aboriginal and Torres Strait Islander land unless consent from the Land Council is granted. Additionally, the *Environmental Protection and Biodiversity Conservation Act 1999* provides for the involvement of Aboriginal and Torres Strait Islander people in the planning process for Kakadu, Uluru and Jervis Bay Territory.

The Department of Infrastructure and Regional Development noted that the Commonwealth has a range of infrastructure funding programs – from its major investment program, which funds nationally significant infrastructure, to programs which fund local governments. The local government programs, such as Roads to Recovery and Financial Assistance Grants are provided to all councils, including Aboriginal and Torres Strait Islander councils to assist with maintenance of local roads.

The Commonwealth has implemented Recommendation 75 as progress has been made towards recognising Aboriginal and Torres Strait Islander people's needs, and incorporating them in development planning and road funding.

In **New South Wales**, the Aboriginal Road Safety Action Plan 2014-2017 explicitly identified improving community road infrastructure as a priority. In 2009, 66 Aboriginal communities were assessed for their road safety infrastructure, leading to repair works in response. The Aboriginal Road Safety Infrastructure Program (2014-2019) is currently being rolled out as an integral part of the Safer Roads Program. It aims to deliver safety improvement works, such as improved signs and installation of shared paths, based on the needs of, and consultation with, Aboriginal communities.



The New South Wales Government has partially implemented Recommendation 75 through the Aboriginal Road Safety Action plan. However, it does not appear that Aboriginal communities

must be consulted or that the provision of funding occurs in the same way as for non-Aboriginal people.

In its 1994 Implementation Report, the **Victorian** Government noted that its road funding contained a component giving priority to roads which service Aboriginal and Torres Strait Islander communities. VicRoads has had policies relating to the consideration of Aboriginal and Torres Strait Islander heritage as an integral part of managing and improving the road network since 1996, thus helping to uphold Aboriginal and Torres Strait Islander values and legislation regarding cultural heritage and native title. These policies pursue objectives relating to respect and recognition, employment and capacity building, and supporting Aboriginal and Torres Strait Islander communities through road safety, registration and licensing initiatives.

The *Native Title Act 1993* (Vic) requires notification and negotiation with traditional owner groups when road projects are undertaken on land where native title might exist. The *Aboriginal Heritage Act 2006* (Vic) provides traditional owner corporations with power to approve cultural heritage management plans and otherwise take action to protect cultural heritage that might be disturbed by road activities. Additionally, the *Traditional Owner Settlement Act 2010* (Vic) provides for agreements requiring notification and negotiation rights to be afforded to traditional owner corporations relating to major new road-building projects. Community benefits are required to be paid to compensate for any impact and can include non-monetary benefits such as employment and business opportunities.

The Victorian Government has mostly implemented Recommendation 75 through the introduction of a designated component of road funding allocated for Aboriginal and Torres Strait Islander communities. However, there is no evidence that this funding is still sequestered.

In **Queensland**, the Transport Infrastructure Development Scheme provides funding to improve road infrastructure in rural and remote communities. All 16 Aboriginal and Torres Strait Islander local governments are constituted and funded on the same basis as non-Aboriginal and Torres Strait Islander local governments under the *Local Government Act 1993* (Qld). Additional support is made for Aboriginal and Torres Strait Islander Councils through the Queensland Government's Financial Aid Funding program.

The Queensland Government has implemented Recommendation 75 through the Transport Infrastructure Development Scheme and the provision of funding to Aboriginal and Torres Strait Islander Councils under the Local Government Act 1993 (Qld).

In **South Australia**, \$106.25 million funding has been provided to upgrade 210 kilometres of road between the Stuart Highway and Pukatja (Ernabella) in the APY Lands, and surrounding roads. Additionally, approximately 21 kilometres of community access roads in Pukatja, Umuwa, Kaltjiti, Mimili and Iwantja form part of the project. APY consultation protocols form part of the requirements for development approval and establish minimum process requirements for consultation with Anangu and their advocate regarding the built environment on the APY lands.

The South Australian Government has mostly implemented Recommendation 75 through the provision of funds for APY lands, the local Aboriginal and Torres Strait Islander community is consulted on any development proposal. However, it is not specified that Aboriginal and Torres Strait Islander funding be allocated in the same way as that of non-Aboriginal and Torres Strait Islander communities.

In **Western Australia** in 1991-92, the Main Roads division introduced two strategies for improving access roads to remote Aboriginal and Torres Strait Islander communities. A range of road capital projects which seek to improve access to remote and regional Aboriginal and Torres Strait Islander communities have been jointly funded with the Commonwealth Government and assessed in line with the *Aboriginal Heritage Act 1972* and the *Native Title Act 1993* prior to work commencing. The Indigenous Roads Committee advises the Western Australian Local Government Grants Commission in respect to allocations for access roads servicing remote Aboriginal communities.



The Western Australian Government has mostly implemented Recommendation 75, however it is unclear the extent to which funding is provided on an ongoing basis.

In **Tasmania**'s 1995 Implementation Report, the Department of Transport observed that federal local road funds were not provided through state government. Currently, the Tasmanian Department of State Growth delivers resources to Cape Barren Island Aboriginal Association to deliver ongoing routine road and aerodrome maintenance via a grant deed which is managed under a Road Asset Management Plan.

The Tasmanian Government has partially implemented Recommendation 75 through the administration of funds by the Department of State Growth. However, it does not seem that processes exist for community consultation on the impacts of new development proposals.

In the **Northern Territory**, a review of local road funding, with specific reference to Aboriginal Roads, took place in 1994-95, and specifically recommended funding for upgrading strategic roads on Aboriginal and Torres Strait Islander land. Currently, the Commonwealth provides funding to the Northern Territory, which the NT Grants Commission distributes to local government councils.

Local Government Councillors in areas covering Aboriginal and Torres Strait Islander communities are usually Aboriginal and Torres Strait Islander people. The allocation of this grant to councils takes into consideration the length and formation of the roads managed by each council, however it remains at the individual council's discretion to decide how much funding will be spent and on which roads. Funding is provided for roads through essential services and municipal funding to service providers, which includes maintaining dumps, slashing, waste disposal, and roads within the homelands boundaries.

The Department of Transport's 2014-2018 Strategic Plan specifically outlined an action of developing a policy for land tenure requirements for transport assets on Aboriginal and Torres Strait Islander land, including roads. The Northern Territory Government comments that the level of consultation in relation to new or existing roads would be decided on a case-by-case basis, depending on the location of the road and impact on the community.

The Northern Territory Government has partially implemented Recommendation 75. While some funding is provided to the councils, the government is yet to implement a policy to address the second part of this recommendation.

The **Australian Capital Territory** does not have any rural or remote communities, or local government authorities.



The Australian Capital Territory does not have any rural or remote communities, or local government authorities.

Recommendation 76

That the integrated analysis of infrastructure, housing, essential services and health as illustrated by the Nganampa Health Council's Uwankara Palyanyku Kanyintjaku (UPK) Report be considered as a model worthy of study and adaption for the development of community planning processes in other States and areas.

Background information

The UPK report, initiated in the early 1980s at the request of Pitjantjatjara elders, emphasised the relationship between housing conditions and health outcomes. The UPK program is involved in the development, implementation, and monitoring of regional and community public health and highlighting the relationship between good living conditions and health outcomes.

Responsibility

The Commonwealth, and all State and Territory governments are responsible for this recommendation.

Key actions taken and status of implementation

In the **Commonwealth** Government's 1993-94 Annual Report, ATSIC fully supported the UPK findings and adopted a policy of incorporating UPK initiatives into projects which receive ATSIC funding.

The National Indigenous Housing Guide provides guidance on the design, construction and maintenance of housing for remote communities. The Guide provides advice on safety, health and housing, healthy communities, and managing houses for safety and health. The Guide was developed and included in the NPARIH Strategy and is updated as needed. PM&C noted that States and Territories have complied with the principles and guidance set out in this Guide.

The Commonwealth has implemented Recommendation 76 through national strategies geared towards improving housing to support health outcomes for Aboriginal and Torres Strait Islander people.

In **New South Wales**, the Housing for Health initiative, established in 1999, provides repairs and maintenance to Aboriginal community housing with a focus on improving safety and health standards. The Aboriginal Housing Office established under the *Aboriginal Housing Act 1998* (NSW) works to ensure Aboriginal people have access to affordable, quality housing. The AHO manages and coordinates an annual capital works program, along with developing and implementing financial and resourcing strategies. It has a strong commitment to the principles of self-determination and self-management, and seeks to promote employment opportunities for Aboriginal people. The NSW Government continues to support the Housing for Health initiative with \$2.4 million allocated to the program in 2017-2018.



The New South Wales Government has incorporated the principles of Recommendation 76 into the Housing for Health initiative.

Victoria Health began development in 2016 of the Aboriginal Health and Wellbeing Strategic Framework, which sought to take a comprehensive approach to develop a platform for coordinated responses to health issues with Aboriginal Victorians. The Government intended the Framework to be completed by September 2016; consultations appeared to be ongoing in November 2016.



The Victorian Government has incorporated the principles of Recommendation 76 into its coordinated approach to providing care for Aboriginal and Torres Strait Islander health issues.

The **Queensland** Government reported in its 1996-97 Implementation Report that the UPK methodology was incorporated into a number of community infrastructure plans between 1987 and 1996. Currently, regular housing property condition assessments are undertaken by Department of Housing and Public Works in remote Indigenous communities. Property condition information forms the basis of the targeted maintenance and refurbishment program to ensure health and safety and to provide an appropriate level of amenity. In 2016, on-site asset condition assessments were completed for the water, wastewater and solid waste assets of all 16 Indigenous Councils by suitably qualified engineering consultants and staff from the Department of Infrastructure, Local Government and Planning, in collaboration with council officers. A \$120 million program of works is being delivered based on the outcomes of the asset condition reviews and in conjunction with councils.

The Queensland Government has mostly implemented Recommendation 76. The Queensland Government has incorporated the UPK methodology into a number of community infrastructure plans, and continues to conduct on-site asset condition assessments. However, it does not appear that a consolidated health and community housing program has been developed.

In **South Australia**'s 1994 Implementation Report, the State Government observed that the principles of the UPK report were incorporated into the tendering process for the Health and Community Housing program. The South Australian Government currently provides \$2.7 million per annum in grants to support municipal services in Aboriginal and Torres Strait Islander communities, including for an audit of services and infrastructure in these communities.

The South Australian Government has incorporated the principles of Recommendation 76 into the tendering process for the Health and Community Housing program, as well as the ongoing provision of grant funding to support municipal services in Aboriginal and Torres Strait Islander communities. However, the South Australian Government has not implemented a community planning process in line with the UPK.

In **Western Australia**, the State Planning Policy 3.2 on Aboriginal Settlements was amended in response to this recommendation, aiming to improve co-ordination between services and infrastructure for Aboriginal and Torres Strait Islander people. The key output is community layout plans that integrate community wishes, geographic limitations and public health principles.

While the Western Australian Government has partially implemented Recommendation 76 through community layout plans, it does not appear that explicit consideration has been given to the UPK report.

In **Tasmania**, the Aboriginal Housing Service helps to provide secure affordable rental housing to Aboriginal and Torres Strait Islander people earning a low income. The Tasmanian Government commented that an integrated model of service delivery is provided by Aboriginal and Torres Strait Islander organisations on Cape Barren Island and Flinders Island. Rent setting is managed by the respective of Aboriginal and Torres Strait Islander organisations for those communities.



The Tasmanian Government has not incorporated the intent of Recommendation 76 into the establishment of an integrated model of service delivery.

In the **Northern Territory**, the Nganampa Health Council responsible for the UPK Report runs numerous initiatives relating to health in Aboriginal and Torres Strait Islander communities. The environmental and public health aspects of this report have been incorporated into the Northern Territory's housing and infrastructure provision. The Northern Territory has also implemented the *Indigenous Community Engineering Guidelines* which focus on the provision of essential services to communities to provide effective health hardware within housing.

The Northern Territory Government has implemented Recommendation 76. Nganampa Health Council responsible for the UPK Report runs numerous initiatives relating to health in Aboriginal and Torres Strait Islander communities.

In the **Australian Capital Territory**'s 1997 Implementation Report, ACT Housing observed that the UPK report was drawn upon for the review of housing assistance for Aboriginal and Torres Strait Islander individuals, and in the broader ACT Housing Strategy.

The Australian Capital Territory Government has implemented Recommendation 76, incorporating the UPK report into the provision of housing assistance for Aboriginal and Torres Strait Islander people.

5.4 Self-determination and local government (77-78)

Recommendation 77

That the distinction between communities with or without formal local government authority status should be abolished for purposes of access to Commonwealth roads funding. The Minister for Aboriginal Affairs and the Federal Minister for Local Government should establish a review of Commonwealth Local Road Funds and specific purpose funding with, amongst others, one specific term of reference being to find feasible solutions to the problem of inequity for Aboriginal people in the provision and maintenance area of roads.

Background information

Recommendation 77 promotes the link between self-determination, local government and road infrastructure funding. It is prompted by the inequalities that existed between Aboriginal and Torres Strait Islander communities – which did not have local government status authority – and those local government authorities that did.

Responsibility

This recommendation is solely the responsibility of the Commonwealth Government.

Key actions taken and status of implementation

The **Commonwealth** Government provides untied funding for local roads under the Financial Assistance Grant Programme. PM&C advised that under the *Local Government (Financial Assistance) Act 1995* (the Act), for a body to receive this funding it must be a Local Government Body. To be eligible to receive funding, an Aboriginal and Torres Strait Islander local governing body must either be established through local government legislation, or declared a Local Government Body for the purposes of the Act by the Commonwealth Minister acting on advice from the state minister. The declaration process may go some way to towards addressing the intent of the recommendation.

PM&C also noted that the Commonwealth provided one-off up-front payments in 2014 and 2015 in exchange for the States and Northern Territory accepting responsibility for the delivery of municipal services, including local road maintenance. The Commonwealth is continuing efforts to implement these arrangements and to ensure that States and the Northern Territory direct funding and services for the benefit of remote Aboriginal and Torres Strait Islander communities.

The abolition of 'local government status authority', for the purposes of access to Commonwealth roads funding, has not been implemented.

Recommendation 77 has been partially implemented. The Commonwealth has not directly implemented the requirements of the Recommendation but actions have been taken that partly meet the intent of the recommendation.

Recommendation 78

That with respect to the provision of grants the Queensland State Government should ensure that Aboriginal and Islander Community Councils are considered against the average standards used for mainstream local government councils. Aboriginal Community Councils should have access to the Capital Works Subsidy Scheme available to mainstream local Government Authorities. The operation of the Aerodrome Local Ownership Scheme should be extended to Aboriginal Community Councils.

Background information

Queensland's community council system, aimed at empowering local Aboriginal communities, gave Aboriginal Community Councils fewer powers than they would have if they were ordinarily-constituted local governments. In particular, they were unable to access particular State Government grants for councils.

Responsibility

This recommendation is solely the responsibility of the Queensland Government.

Key actions taken and status of implementation

In **Queensland** at the time of the RCIADIC, Aboriginal and Torres Strait Islander community councils were separately constituted to ordinary local government areas under the *Aboriginal and Torres Strait Islander Communities (Justice, Land and Other Matters) Act 1984* (Qld). However, according to the Queensland 1996-97 Implementation Report, specific and general-purpose funding programs available to other local governments are made available to these councils.

Since 2008, all 16 Aboriginal and Torres Strait Islander local governments have been incorporated under the Local Government Act 1993 or Local Government Act 2009 and are constituted on the same basis as non-Aboriginal and Torres Strait Islander local governments. In addition to the Queensland Government's Financial Aid Funding program, which is provided specifically to Indigenous Councils, Indigenous Councils have access to all local government funding programs on the same basis as all Queensland local governments.

The Queensland Government has implemented Recommendation 78 and under the Local Government Act 1993 (Qld) funding of Aboriginal and Torres Strait Islander Councils occurs on the same basis as that of non-Aboriginal and Torres Strait Islander local governments. It is unclear whether the specific schemes referred to in Recommendation 78 are still in existence.