

3. The National Aboriginal Health Strategy (NAHS)

In December 1987, Commonwealth and State/Territory Ministers for Health and Aboriginal Affairs agreed to establish a Working Party to develop a national strategy on Aboriginal health.

The Working Party was chaired by Ms Naomi Mayers, from the National Aboriginal Community Controlled Health Organisation (NACCHO) and consisted of key stakeholders in Aboriginal health including community representatives and officials from Commonwealth and State/Territory Health Departments.

In its report to Ministers in March 1989, the Working Party described the state of Aboriginal health as the worst of any identifiable group in Australia. It set out a conceptual framework and a broad strategy for improving health status.

The key concept underlying the report was Aboriginal people's holistic view of health involving not just individual physical well being but the social, emotional, and cultural well being of the whole community.

Aboriginal community control and participation in health services was strongly advocated as a means of promoting community responsibility and understanding, and ensuring that the provision of primary health care was socially and culturally appropriate.

The Working Party also commented on the importance of environmental health facilities, for example safe and adequate water supply, improved numbers and design of houses, shelter, dust control and other factors which are vital to sustain improvements in Aboriginal health and well being.

The recommendations in the Working Party report were aimed at Commonwealth and State/Territory governments, and community organisations in three broad areas:

(a) Improving health services:

- minimum standards and increased and more secure funding for Commonwealth funded Aboriginal health services, and the transfer of State/Territory provided services to community control; and
- improved availability of State and Territory administered secondary and specialist health services, including steps to make them more culturally acceptable with community involvement in design and negotiations.

(b) Improving essential services and community infrastructure:

- joint assessments of essential services and infrastructure needs in Aboriginal communities, outstations and settlements, to ensure that Aboriginal people have standards of essential services and living acceptable to them; and
- adequate funding for appropriate and adequate sewerage and water supply systems to remote Aboriginal communities as identified in the joint assessments of essential services and infrastructure needs.

(c) Improving education, training and employment in Aboriginal health:

- training and education of community personnel in aspects of hygiene, sewerage disposal and water supplies, and maintenance and repair work;
- development of adequate training resources for Aboriginal Health Workers, uniform standards of accreditation, secure employment and opportunities for professional development for these workers;
- training and education of other service providers such as teachers, police and corrective services staff who were seen to have a major impact on Aboriginal health;
- compulsory study of Aboriginal culture, history and health issues in formal course work for undergraduate and postgraduate medical, nursing and paramedical courses; and
- introduction of culturally appropriate postgraduate and continuing education programs for health professionals.

The Working Party also made detailed recommendations regarding health services in the Torres Strait Islands, women's health, alcohol and other substance abuse, and research, monitoring and evaluation.

In order to implement the overall strategy, the Working Party recommended important structural arrangements, specifically:

- a Council of Aboriginal Health, as a standing Committee to both the Australian Health Ministers' Conference and the Australian Aboriginal Affairs Council, consisting of community representatives and officials;
- tripartite forums similar to the Council of Aboriginal Health in each State and Territory; and
- an Office of Aboriginal Health within the Commonwealth Aboriginal Affairs portfolio.

The Working Party proposed that the Council of Aboriginal Health review progress towards the implementation of the NAHS, and recommend any necessary changes to the Strategy, paying specific attention to intersectoral collaboration. The Working Party proposed that the Council oversight the development of a national database of Aboriginal health statistics.

The Working Party also recognised the need for a National Aboriginal Community Controlled Health Organisation, that it be funded, and that it be formally involved in the structural arrangements for implementing the Strategy.