



PROMOTING PARTNERSHIPS SERIES
INDIGENOUS HEALTH
WORKING WITH LOCAL GOVERNMENT
HOW ADVOCACY CAN ASSIST

Background

PHAIWA is committed to working with all levels of non-government and government, including local government and recognises the important contributions that local government can make to creating healthy local communities.

A survey of local governments in Western Australia was recently conducted to identify opportunities for working together, to assess if specific training is required and to generally assess expectations about a range of organisations including non-government agencies. The response rate of 53% represented a total of 75 local governments completing the survey.

What did we ask local governments about Indigenous health?

Respondents were asked to consider three categories of issues within their local government authority. These included:

- The most important public health issues (top 3);
- The most urgent public health issues (top 3); and
- The most resource intensive public health issues (top 3).

Collectively, local governments ranked Indigenous health as their sixth most important public health issue. When the data were aggregated to integrate all responses nominated in the top 3 most important public health issues, Indigenous health ranked tenth. This is demonstrated in Figure One.

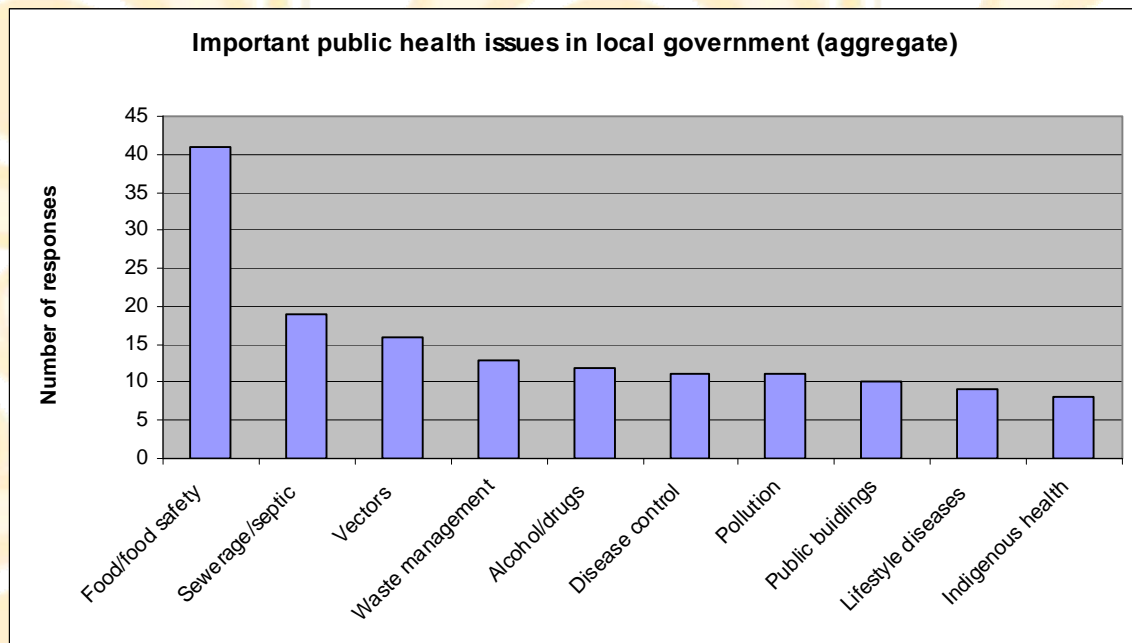


Figure One – Most important public health issues in local government (aggregate)

Local governments also ranked Indigenous health as priority issues within the individual top 3 important public health issue rankings, with 6% ranking it as their primary urgent priority and 5% ranking it as their third most urgent priority.

Contrasting results were found when analysing the most urgent public health issues in local government. 8% of local governments nominated Indigenous health as their most urgent issue with 1.3 % nominating it as their third most urgent issue. Indigenous health did not appear as a priority in the aggregated urgent priorities.

Local government was requested to nominate the most resource intensive activities undertaken in public health. Respondents were asked to rank the top three resource intensive activities. Indigenous health was nominated once as the most resource intensive activity (1.5%) and received a further two nominations (3%) as the third most intensive activity.

The survey assessed whether local government authorities dealt with PHAIWA priority issues and specifically asked respondents to rank their level of involvement in each issue on a scale of 1 (low involvement) to 10 (high level involvement). Indigenous health is one of PHAIWA's priority areas. Figure Two illustrates the responses.

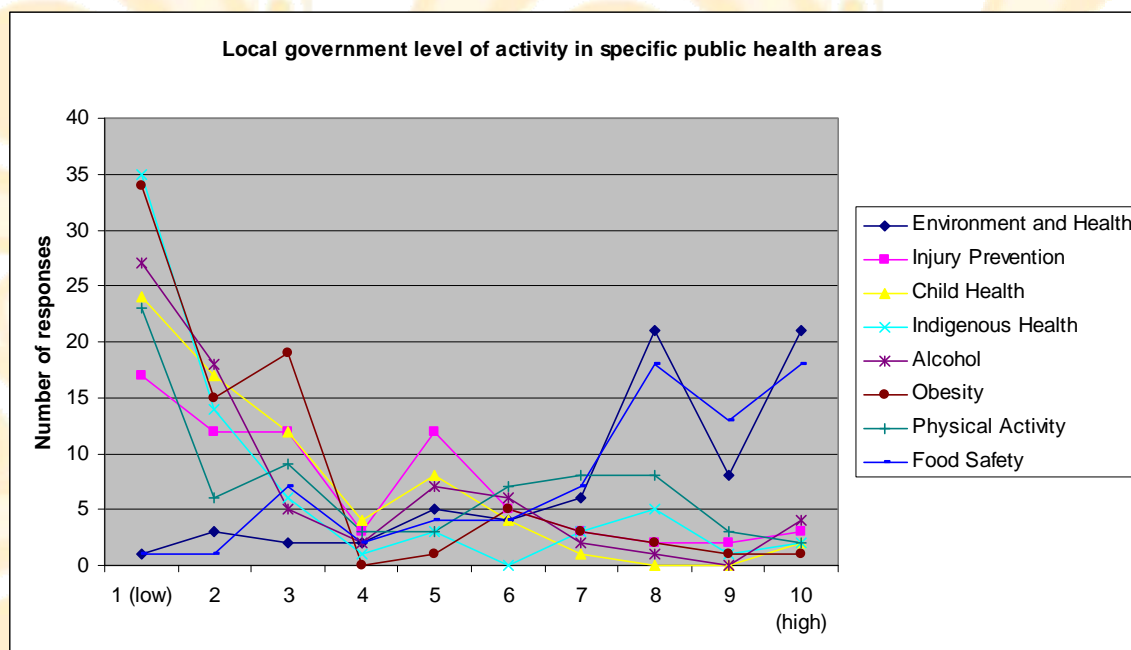


Figure Two - Local Government involvement in PHAIWA Priority Issues

Figure Two highlights there is little involvement in the areas of obesity, Indigenous health, alcohol and child health.

The survey found that 92% of respondents spent less than 30% of their time dealing with Indigenous health (see Figure 3). With almost one-third of Indigenous people living in metropolitan regions of Western Australia and an estimated 25% of Indigenous people living in remote or very remote areas (compared to 2% of non-indigenous Australians), Indigenous health should be an issue for all local governments.

The 17 year gap between Indigenous and non-indigenous populations' life expectancies signifies the poor state of Indigenous Australians. Respiratory, gastrointestinal, infectious and parasitic diseases are reported as being disproportionately higher among Indigenous Australians, especially the young. Many factors that place Indigenous Australians, especially those residing in rural and remote areas at a higher risk of poor health are related to environmental health determinants such as inadequate housing or harmful levels of community or personal hygiene. A survey of communities in Western Australia reported large problems with water supply and sanitation problems, overcrowding and substandard housing, waste-water disposal problems and the absence of rubbish disposal resulted in a high prevalence of vermin and pests and a lack of hygiene (ABS, 2006).

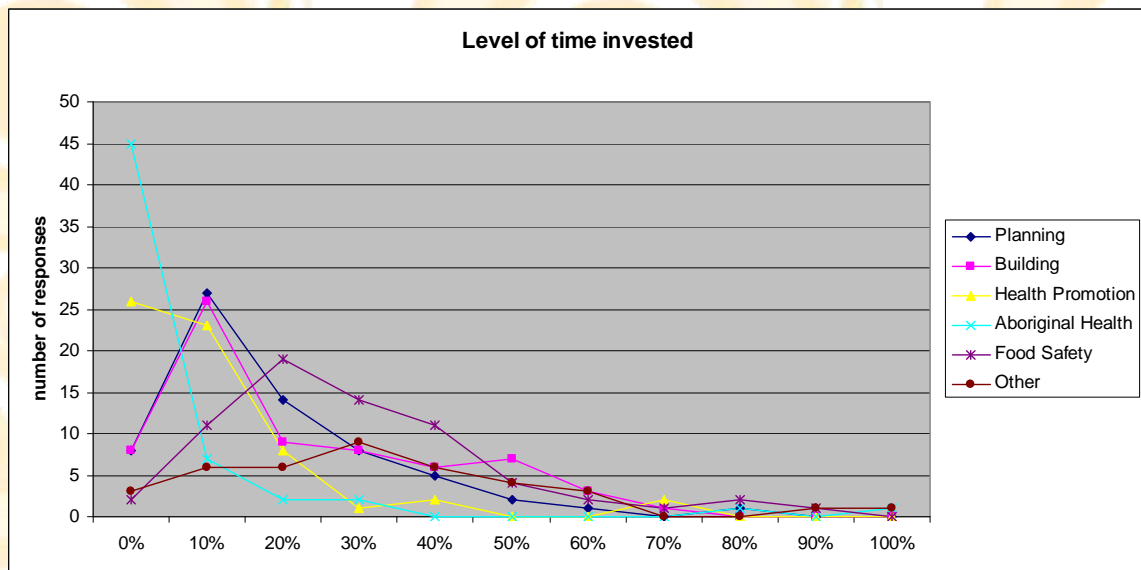


Figure Three – LG's active or performing duties in specific areas and estimates of the percentage of time

When looking further at this data, 76.3% of respondents advised they did not allocate any time on Indigenous health and a further 12% spent 10% or less of their time in Indigenous health. Few (5.4%) respondents invested over 40% of their time in Indigenous health. Figure Four illustrates that the majority of respondents (60%) allocated no time to Indigenous health.

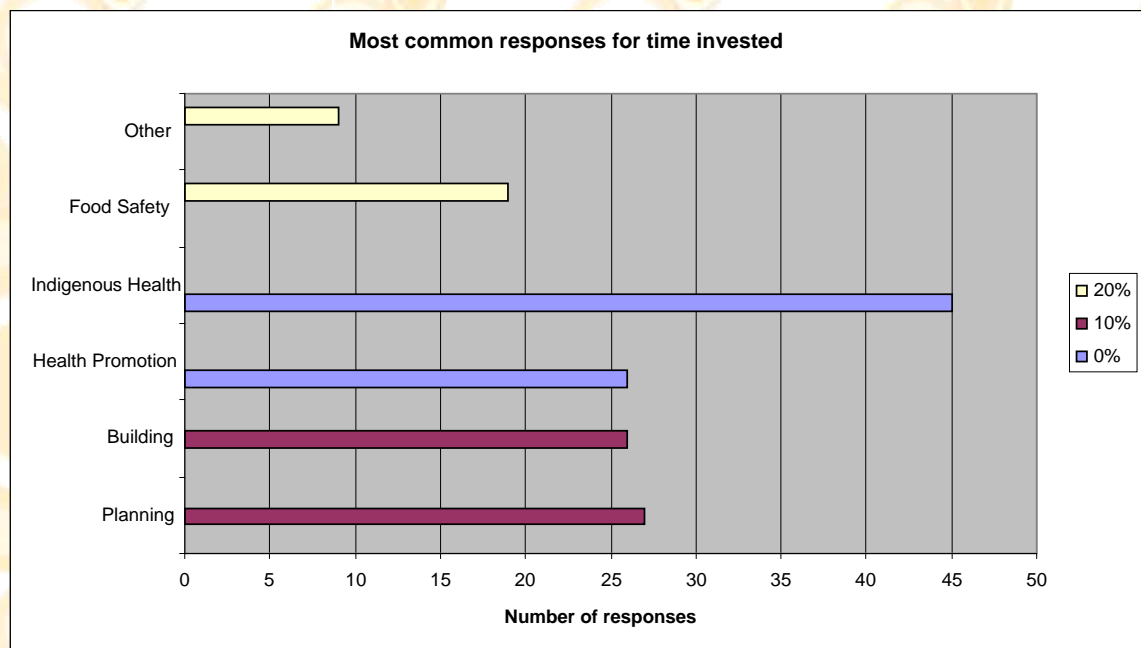


Figure Four – Percentage of time invested in priority areas (number of responses)

What else did the survey highlight?

Other interesting data from the survey relevant to Indigenous health included:

- Almost three-quarters of the respondents advised they spent less than 30% of their time planning.
- More than half (57%) of the respondents did not have an annual business plan and 1% were unsure if a plan existed.
- 56% of respondents advising they had difficulty recruiting Environmental Health Practitioners and 42% stating they had difficulty retaining these professionals.

How can advocacy address this lack of investment in Indigenous health issues?

Local governments have scarce resources and competing priorities. One method of promoting, ensuring and developing advocacy to support the development of healthy communities may be to encourage collaboration between local governments and Indigenous organisations with the intent of sharing resources, skills and in particular funds.

The following tips may provide some assistance to increase the opportunities for working with local governments on Indigenous health issues.

Be aware: Every local government is different. The diversity of our state means that the way local governments do business varies from region to region. Local governments are autonomous and although governed by the *Local Government Act 1995*, are primarily responsible for their own strategic direction. In terms of funding, local governments are primarily funded through the collection of property rates and the allocation of government grants, so resources are generally limited.

Be patient: Local governments are vital and multi-functional organisations within local communities. As such, they are responsible for a diverse range of issues, some of which are defined under statutory requirements. It may take some time to ensure that your issue is seen as a priority in local government. It is also important to understand that local government business units differ between councils, and it may take some time and a number of requests before you speak to the right Officer.

Be known: Local governments, both large and small, must be aware of Indigenous organisations and the services they offers, roles, geographic spread, areas of expertise and avenues for support. Strategies to disseminate this information to local governments include through WALGA, the peak body for local government in WA, through individual correspondence, through professional associations, through links with the Environmental Health Directorate and through publications.

References

Australian Bureau of Statistics (2006) National Aboriginal and Torres Strait Islander Health Survey 2004-05. Canberra: ABS.