



VicHealth

LETTER

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KOORI HEALTH

Community Leadership Projects

Partnerships in Research

Health through Sport

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FROM THE CEO

In 2002 the health status of indigenous people in Australia is still worse than the rest of the population. The estimated life expectancy for Aboriginal and Torres Strait Islander people (56 years for men, 63 years for women) is 19 to 20 years lower than for other Australians. Death rates for indigenous people are higher than for other Australians for almost all causes of death.

This is not new information but it's still very real. Koori communities however, can and are leading the way to improve the health status of individuals, families and communities. Support to develop Koori leaders for the future, to focus on programs that keep young people in education, that provide opportunities to play sport or pursue creative activities; such involvement can keep young people engaged, connected and purposeful and nurture skills - both personal and social - that set people towards positive mental and physical health.

Koori communities, with the support of VicHealth and its partners, have embarked on an innovative series of programs designed to improve the health status of Indigenous Victorians. The Victorian Community Leadership Projects, Leadership for the Future Network and the Koori Imaging Projects are community driven and target young indigenous people specifically to build both capacity and a healthy model for the future. Over 60 percent of Victoria's Indigenous population is aged 24 years or under. Sporting clubs and organisations such as Rumbalara football and netball club in Shepparton and Victorian Aboriginal Youth Sport and Recreation (VAYSAR) are creating not only opportunities for young people to play sport but also a supportive community and environment in which to access services relating to youth leadership and development, men's health, women's health, diet and nutrition, substance misuse, cultural awareness, fitness and performance.

These examples are just a small part of an overall effort by Koori community leaders with the support of Federal, State and local jurisdictions to turn around the health status of their people.

We are delighted we can show some of these initiatives, highlight issues that impact on Koori health and wellbeing, and make a small contribution to the discussion of an important health issue in this state and country.

Dr Rob Moodie
Chief Executive Officer

Initiatives to Improve Koori Health

VicHealth is committed, under its Strategic Plan 1999–2002, to leading the way in supporting innovative approaches to promoting health, making a demonstrable contribution to population health, encouraging a shared responsibility for health across the community and investing in population groups most in need. The Koori community is one of four key groups targeted for support under the Plan.

Koori health status is a major issue

Health measurements show the Indigenous population's health is worse than the non-Indigenous population. A snapshot reveals the picture to be poor: Australian Social Trends 2002 reports that the life expectancy of Aboriginal and Torres Strait Islander peoples remains about 20 years lower than that of the total population. This is associated with much higher rates of death from cardiovascular disease (such as heart attack and stroke), external causes (such as accidents, poisonings and violence) and cancer.¹ In Victoria Koori men and women have a life expectancy 8 to 18 years lower than the state average;² however, establishing good trend data about Victoria's Indigenous community remains a major problem. In fact, a critical deficiency in Aboriginal health policy and strategy has been the poor quality of existing health information systems and research and evaluation practices.³

Substance misuse, particularly of alcohol and tobacco, is a major problem. The prevalence of tobacco use among Indigenous Australians is estimated to be above 50%,⁴ compared to Australia's overall smoking rate which is now at 19.5%.⁵ Infant and pre-natal mortality rates in Victoria were 11.7% higher amongst the Indigenous population when compared to non-Indigenous people.⁶ However, there have been reductions for perinatal mortality in Western Australia (23.3 to 17.2 per 1000 births between 1986 and 1995) and the Northern Territory (48.9 to 26.4 per 1000 births between 1986 and 1995).²

Social, historical and economic factors and lack of access to culturally appropriate health care have played a significant part in the poorer health status of Indigenous people. Indigenous Australians are disadvantaged compared with other Australians in education, income and housing; it is likely that these disadvantages contribute to nutritional disadvantage as well.² Efforts to improve these social and economic factors, which evidence shows influence health, must be a focus for Indigenous individuals and communities, as well as all levels of government.

Collaboration

However, the news is not all bad. Over the past 15 years significant efforts have been undertaken by Indigenous communities and Australian governments to build the capacity to improve Indigenous health care. From implementation of the National Aboriginal Health Strategy in 1994 to the current Aboriginal Health Framework Agreements, there has been an increasing focus on developing the foundation for collaborative efforts to improve health outcomes. Collaboration can improve health service delivery to Koori people. In Victoria, Primary Care Partnerships, the Koori Health Reform Strategy and the Koori Services Improvement Strategy have all underpinned efforts to improve health service delivery to Koori people. The challenge for government and other organisations is to continue to develop effective collaborations and partnerships with Aboriginal and Torres Strait Islander community structures.

Involvement across sectors

These collaborative efforts can involve Federal and state governments, health agencies (including VicHealth), researchers and organisations in sport, the arts, education and business, as they can all play a role in improving the health of the general community and Indigenous people. Koori communities have taken the lead with community controlled health organisations but partnerships with mainstream organisations remain essential.

The successful implementation of strategies to improve health outcomes requires processes and mechanisms that lead towards effective community controlled health services. Community control is one of the foundations upon which to build infrastructure, resources and mechanisms to improve health, but not a means itself to improve health. Many, but not all, Indigenous people prefer services which are provided through organisations that are under Indigenous control and which will take into account their cultural preferences.¹² For example, one collaborative approach made under the Victorian Koori Maternity Services Strategy to address the issue of Indigenous childbirth has shown positive results. More Koori women are accessing antenatal services and are doing so much earlier in their pregnancy. Access to antenatal care is one critical factor in improving health in infancy and early childhood so more involvement by Koori women does improve health (see page 21).



Focus on youth

Alongside this framework a key fact stands out: the Indigenous population is younger than the non-Indigenous population—about 60% are aged 24 and younger.¹³ This youthful profile presents both a challenge and an opportunity.

The Koori Communities Taskforce, consisting of key Koori leaders and auspiced under VicHealth's Mental Health Promotion Plan, developed five community leadership programs to improve the emotional and spiritual wellbeing of communities and individuals within those communities. Young people are developing leadership skills, planning community activities and receiving mentoring from senior community members. This program aims to create long-term positive health outcomes for both individuals within the programs and the wider community (see page 11). A Koori Imaging Project, still in its infancy, reinforces positive images of individuals, families and communities within the Koori community. Directed mainly at young people, this innovative program aims to provide long-term health benefits for the Koori community by highlighting positive behaviours and role models.

The Koori community's Network for the Future was developed in response to the identified need for long-term planning across Koori peak bodies.

Aboriginal Affairs (AAV) senior policy officer for planning and development in Victoria, Karen Milward, says this aligns with AAV's focus on young people through programs across art, sport and education. 'We're getting young people specifically to focus on where they want to go and what they want to do,' said Milward.

Research

The VicHealth Koori Health Research and Community Development Unit, established in 1999, works with Koori communities and community organisations in defining research priorities and in developing collaborative projects. The Department of Rural Health at The University of Melbourne also has the Koori Health Partnership Committee discussing and implementing action on health issues in the areas of employment, education, research, information technology and access to health care.¹⁴

Aboriginal Health Frameworks

Aboriginal Health Frameworks form the blueprint for indigenous health policy in the country; they were developed with consultation across OATSIH, ATSC, NACCHO, state and federal governments and respective state and regional bodies. Four key aims for the framework have been established:

- Increasing resources directed towards improving indigenous health;
- A commitment to focus on regional planning;
- A commitment to improved data collection;
- Improving opportunities for access to mainstream and community health services.

Explanation

Indigenous/Aboriginal – refers to Aboriginal and Torres Strait Islander people.

Koori – generic term for Indigenous people from lands of South East Australia.

A discussion paper developed by the VicHealth Koori Health and Community Development Unit entitled Aboriginal Primary Health Care in Victoria: Issues for Policy and Regional Planning provides a detailed summary of national Aboriginal and Torres Strait Islander health policy. It is available at:

<http://www.cshs.unimelb.edu.au/Koori/html/publications.htm#dps>.

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Breathing Space

Paul Briggs underlines the importance of developing leadership with a vision for the future to ensure cultural safety and wellbeing.

There have been a number of debates and forums that have considered the notion of capacity building to address drug issues, school retention and the ravages of high unemployment. They really do beg the question - can we influence and determine our future? Do we have the necessary resources and resource base from which to visualise a safe economic, social, spiritual and political future.

The notion of building capacity suggests we are moving towards a safer, more vibrant future. I'm suggesting that the vision of that future has not been achieved and notions of capacity building have to move beyond the capacity to merely address crisis.

It has to encompass the characteristics of social and economic investment.

Since 1788 we have been experiencing change and adaptation in gigantic proportions. Cultural shifts across social, economic and spiritual spheres have placed us in a very precarious position; in 2002 we no longer enjoy a lifestyle, either present or potentially in the future, that we can say we are in control of.

This lack of control, along with our turbulent history and dispossession, underpins, our poor health—both physical and emotional. In a very real way it influences our level of connectedness with white people and white institutions.

Within this paradigm, disempowerment is overpowering. There is no economic or political strength or constitutional foundation from which to drive change; we are placed at the mercy of mainstream society to allow change to happen in a context that they can understand—within structures and by methods and processes that Indigenous Australia are

reluctantly accepting and engaging in.

By the nature of our relationship with White Australia we are constantly in a defensive, reactionary position operating across different value systems—Aboriginal and non-Aboriginal—and in conflict about the appropriate time to apply our values. Our leaders must focus on crisis intervention—how do we keep our Indigenous people out of jail, what do we do about our shorter life expectancy, how do we participate in the private economy, and the education system? With all these pressing issues around, Aboriginal people never get the opportunity to address and plan for a future defined by us. There is no breathing space.

This is exacerbated by the fact that we, Koori people, have a limited vision of a culturally and spiritually safe future. We don't have the resources or the appropriate infrastructure to develop and drive a collective vision about the future. Aboriginal people don't have places to collectively come together or visible ways to express ourselves and to enable non-Aboriginal people to hear that expression. There are, of course, acceptable styles of expression—such as displaying skill at sport or talent in the arts—but our cultural values, the way we think and feel, our belief systems, are not given the same status nor an opportunity to be demonstrated in ways and at times we choose. This ability to express our identity and culture is isolated and limited yet it is vital to the health and wellbeing of Aboriginal people.

We are pushing into a model of socioeconomic development that needs a spiritual and cultural commitment; the vision has not been realised or agreed to by Aboriginal people and their spokespeople.



We realise that the establishment of Aboriginal organisations and the notion of community control cannot, in itself, carry change. Isolated, it's not meeting the need and is not underpinned by a real commitment from all levels of government or Aboriginal people. There is no belief that the current framework will deliver a path to reform in the socioeconomic, emotional and spiritual wellbeing of Indigenous people.

The framework of community controlled organisations evolved in 1970 as Indigenous people suggested a structure that mainstream bureaucracies would, at least, work with. However, the model was not an Indigenous vision of the future that put our cultural and spiritual safety as its priority. Rather, an alternative bureaucracy was established. It put up a smokescreen of control and change but has not provided the answer.

Developing leaders and a model for the future ourselves gives me hope that the future can be much more culturally

alert, vibrant, healthy and safe for Aboriginal people in particular and, in general, for all cultures who coinhabit the traditional lands of Aboriginal nations than it has been in the recent past.

I am not convinced that we have come to terms with or embraced the paradigm shift needed to give strength, leadership and direction to the future of our people. It is with a reluctant shuffle and with resistance that we find ourselves clothed in both the attire and presence of non-Aboriginal cultural characteristics and pressure. This is damaging to both our physical and mental wellbeing.

We need to develop leaders and a leadership for the future to positively impact on Indigenous people's health. The Community Leadership and Network for the Future projects are a healthy start.

Paul Briggs is the President of the Rumbalara Football and Netball Club and a Koori leader in the Goulburn Valley region of Victoria.

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FACTS

Life expectancy for Victorian Indigenous males is 56.1 years; 20.5 years lower than for non-Indigenous Victorian males.

Victorian Koori Community Leadership Projects

Leadership in Koori communities is not just about the work of prominent members, it is about all members having a diversity of roles and responsibilities and having opportunities to develop skills and a vision to work toward a stronger, healthier future.

Koori communities were identified as one of five groups to be targeted under VicHealth's Mental Health Promotion Plan 1999–2002.

Consultation revealed that a long-term vision for the future of communities was required. Koori individuals, families and communities need to develop a framework that allows them to improve skills and plan for an economically and socially sustainable future. As Karen Milward from Aboriginal Affairs Victoria said, 'It's about getting young people back to their culture, back to basics, and getting them to focus on where they want to go and what they want to do'.

A focus on community leadership is central to the process of ensuring the ongoing survival and growth of Koori communities and positive long-term health outcomes.

Indigenous models of leadership are complex, based on unique cultural frameworks and holistic approaches. They draw on the wisdom and experience of older people and integrate the spiritual with the political. The Victorian Koori Community Leadership Projects are essentially about building the individual and collective capacities of community members and engaging young members of Koori communities to take control of their future.

The five community based projects provide leadership training for young Kooris, mentoring by senior community members and support and resources to develop leadership skills through the planning and implementation of community activities. The projects will strengthen and enhance family structures and broaden community leadership by developing the skills of the young community members.

Community Dreaming Project:

Winda Mara Aboriginal Cooperative, Heywood

The Winda Mara Aboriginal community in south-west Victoria has developed, in partnership with the area's mainstream community, a leadership program that can impact positively on the health of all young people involved.



Sixty young people are developing skills allowing them to take advantage of opportunities that come when school is completed. Parents had identified that many young people were hesitant to move out of the local area to take up further education or employment opportunities, despite Heywood having a good school retention rate.

The project's three groups include Koori and non-Koori Year 11 students at Portland and Heywood secondary colleges and a group of unemployed young people. The group has developed about 15 smaller community based projects after a period of community consultation. Young people have learnt life skills—teamwork, leadership and communication (TLC)—which have built their self-esteem, confidence and pride.

Project coordinator, Wendy Rotumah, says the projects are diverse and involve interaction with all age groups across the community. 'They develop projects around something they care about, which gives them both ownership and a sense of achievement.'

For further information, contact Wendy Rotumah on (03) 5527 2051.



'Three Tribes' Koori Community Leadership Project: Victorian Aboriginal Youth, Sport and Recreation Cooperative (VAYSAR)

The Three Tribes leadership project conducted by VAYSAR targets young people in three metropolitan Koori communities in the north-west, south-east and north-east of Melbourne.

Indigenous and non-Indigenous sportspeople work alongside young community leaders to encourage them to explore their own project ideas, maintain their focus on leadership and to show how they can become better leaders in their communities. The project operates in partnership with Athlete Development Australia and secondary colleges in the targeted areas.

Collingwood footballer Rupert Betheras is involved in the project acting as mentor for the young people involved. Although keen to make the point that he only plays a background role, Betheras says he hopes to share his experiences and steer the young people in the right direction when they are developing the project they choose. 'It's about seeing the project through, we'll learn that it's important to work through difficulties,' said Betheras.

According to VAYSAR director, Gavin Brown, it's the skills young people are picking up through development of the projects that will prove invaluable and create sustainable and positive health outcomes.

For further information, contact Gavin Brown on (03) 9482 4444.

"It's about seeing the project through, we'll learn that it's important to work through difficulties."

Youth Leadership Program in the Northern Metropolitan Region: Victorian Aboriginal Community Services Association Ltd (VACSAL)

The community initiated program at VACSAL is developed and conducted in partnership with RMIT University. It is designed for Kooris living in the metropolitan region who are active in Aboriginal affairs through employment or voluntary participation in Koori community organisations, government departments or corporations.

The community leadership development program's curriculum, designed by the participants, involves intensive workshops in community locations across Victoria. At the opening of the first workshop in Echuca in April, community Elder Melva Johnson told the participants that it was time for them to 'step up', encouraging them to take on the responsibilities of leadership in the community. The theme of 'Step Up' remains with the group and is a driving focus of the project.

The learning is interactive and involves information dissemination, simulations, role-plays and discussion groups. Issues covered include Indigenous leadership in Australia, stress management, working with the media, Indigenous enterprise development, working with government, cross-cultural awareness, networking,

A Snapshot of Three Tribes

Each group has high profile leaders such as Carlton footballers Darren Hulme and Trent Hotton, and athletes Kyle Vander Kuyp, as well as community leaders such as Pat Farrant, Marcus Nash and Lyn Thorpe to assist the young people.

It is an innovative program focusing on giving young people a sense of control, empowering young people to find solutions to problems, connecting young people to their community and instilling traditional knowledge into young leaders to reinforce their identity and leadership skills.

Project Focus

- Nominate leadership facilitators—three profile leaders and three community leaders.
- Train leadership facilitators in accredited leadership course.

- Nominate young community leaders aged 14-24 – Participating communities will nominate 12–15 young community leaders to participate in community leadership course.
- Train young community leaders - leadership facilitators in conjunction with VAYSAR and ADA conduct a two day community leadership course.
- Select Community Projects - from those already identified in the areas of education, sports, arts, culture and health.
- Bring young community leaders together - young community leaders from each region come together for a one-day meeting.
- Ongoing support and assistance - leadership facilitators and ADA/VAYSAR return as required for six months to provide ongoing support and assistance to young community leaders.

FACTS

Infant and prenatal mortality rates in Victoria are 11.7% higher than the Victorian non-Indigenous population.

financial management, mediation, conflict resolution, representation, communication and diplomacy. Completion of the course will result in participants receiving credit toward the Diploma in Community Development at RMIT University.

For further information, contact Helen Kennedy on (03) 9416 4266.

Koori Leaders for the Future: Ballarat and District Aboriginal Cooperative (BADAC)

The young people's leadership project is being undertaken in collaboration with the School of Social Sciences at Ballarat University.

BADAC has developed a broad range of programs to support the growth and development of skills and opportunities among young Kooris in the local region, including music production and performance, film making, acting and cultural development, community work and sports. The project combines leadership training in a chosen area of interest and participation of the young people. On completion of the course the young people will receive formal credit toward the Diploma of Community Work at Ballarat University.

For further information, contact Paul Clarke at paulclarke966@hotmail.com.

Leadership Project for Young People:

Rumbalara Football Netball Club (RFNC)

The RFNC is a central vehicle for the promotion of the emotional and spiritual wellbeing of Koori young people and their families in Shepparton and District. The leadership project is based at the club and targets young women and young men, coordinating with and supporting the self-esteem, community strengthening and healthy lifestyles programs at the club.

For further information, contact Joyce Doyle on (03) 5831 3124.

Multi-Site Evaluation of the Koori Community Leadership Projects: Centre for Australian Indigenous Studies, Monash University (CAIS)

The Community Leadership Projects are being supported by an Indigenous team of staff at CAIS who are also undertaking the multi-site evaluation. The evaluation is identifying shared themes and models of best practice in Indigenous leadership and provide information to other community organisations and leadership initiatives.

The projects meet regularly to share information and to support and resource each other. A forum on Indigenous leadership in Victoria is planned for later in the year.



Young Lawyer, Young Leader

Paula King is a young Koori woman and family law solicitor in Melbourne. King grew up in Bendigo, Victoria. By year 10, having witnessed first-hand other family members' dealings with police, King decided she wanted to become a lawyer. It wasn't going to be easy. Her family was supportive but her marks weren't enough to go straight into law. She would have to begin an Arts degree and find her way into the Law faculty. Eventually she succeeded.

'To get through I think you have to have a very supportive family and a good support network. It was also really helpful to have the Indigenous Education Unit at Melbourne University offering support and tutoring services. They really helped me get through it,' said King.

King spent some time working for the Aboriginal Legal Service but is now working in Family Law at a private practice in the city. She says it's important right now for her general health and wellbeing to have some balance in her life and a bit of a break from the community work.

It was tough getting this far but King says there were lots of people willing to offer her support which helped her maintain a focus and a strong sense of wellbeing. 'It's too difficult to do on your own. Some people might be able to do it but I found it quite isolating coming from a country town down to Melbourne. It was very important for me to have a place to go like the Indigenous Education Unit where I could meet and talk to other indigenous students facing similar problems.'

Partnerships in Aboriginal Health Research

A research unit at The University of Melbourne believes building credible partnerships between Koori communities, health services and research academics is critical to effective research in Aboriginal health. The VicHealth Koori Health Research and Community Development Unit is focused on developing research and community development programs that facilitate improved health care for Kooris and that lead to better health outcomes for Koori communities.

Unit Director, Associate Professor Ian Anderson, said one of the significant achievements since the unit opened in 1999 has been the opportunity to work collaboratively with Koori communities and community organisations in defining research priorities and developing collaborative projects.

'The most obvious reason for taking a partnership approach in developing university research and academic work is to promote Koori self-determination and develop the capacity of local communities to find appropriate solutions to their challenges and realise their own vision,' Professor Anderson said.

An advisory committee with a majority Aboriginal membership oversees the development of the unit's activities. This partnership approach ensures the research will relate to the issues that are priorities for Koori communities.



'From the beginning we hoped that the unit would be able to link its role in research and teaching with community development processes,' said Professor Anderson.

If a true partnership is to be developed between the unit and Koori communities, the unit has to support the growing skills and knowledge within communities—so that Koori people participate on an equal basis.

'In the past, poor communication and working relationships between research academics and Aboriginal communities undermined the possibility of quality research outcomes, created antagonism in research communities and lessened the likelihood that research findings would influence the delivery of health services and development of Aboriginal health policy.

'The aim of our research is to help prevent governments and health organisations from repeating mistakes of the past and to build on past success.'

The unit, in conjunction with its key partners, is focusing on five main areas:

- **historical research**—researching the history of Koori health and Koori health care, including the history of health policy and health research relating to Koori people;
- **researching research**—researching the way health research and the evaluation of health programs has been conducted in order to develop better methods, ethics and protocols for Koori health research and evaluation;
- **Koori health and wellbeing**—researching Koori people's understanding of health and wellbeing and their perceptions of health care and service delivery;
- **economic issues**—research covering the problems Koori people face in accessing health services; and
- **health service research**—specific evaluations of Koori primary health care and related health promotion programs.

The unit was developed in partnership with the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) and is funded by VicHealth, the Office of Aboriginal and Torres Strait Islander Health (OATSIH) and The University of Melbourne through the Centre for the Study of Health and Society.

For further information, contact the VicHealth Koori Health Research and Community Development Unit on (03) 8344 0813 or visit www.cshs.unimelb.edu.au/Koori/index.htm.

FACTS

The leading causes of death in both the Indigenous and non-Indigenous populations are diseases of the circulatory system, cancer and external causes. Together these account for 60% of all identified Indigenous deaths, affecting Indigenous people at younger ages than in the total Australian population.



Greater Understanding through Research

Since late 2001, 17 research projects have either being completed or are being undertaken by the VicHealth Koori Health Research and Community Development Unit. They are:

- DHS accreditation of hospitals to treat Koori people
- Government, profession and public responses to Indigenous health in Australia: a brief history
- A qualitative study of koori men and health, wellbeing and health care
- Collaborative participatory research in Koori health
- Process evaluation of the northern and north-east Valley Divisions of General Practice
- Koori health: colonisation to the present—a demographic and socio-medical history of Aboriginal people in Victoria 1800-2000: colonisation and epidemiological transitions
- Community based interventions to reduce the risk of diabetes and cardiovascular disease in Indigenous Australians
- Promoting ethical research with Indigenous communities
- Ethics and Koori health research
- The development of the NHMRC Guidelines in Aboriginal and Torres Strait Islander health research: an oral history review of guidelines
- Koori health and health services in Melbourne: oral histories
- Process and outcome evaluation of the development of the Victorian Aboriginal Health Service (VAHS) injecting drug use program and an analysis of the policy implications
- Indigenous health economics workshop
- An analysis of the socio-political context and discourse of Aboriginal health research 1967—present
- A qualitative investigation of the factors influencing learning on Aboriginal health for undergraduate medical students: an evaluation
- Rethinking compliance
- A review of the policy and research literature relating to Indigenous health economics.

Ian Anderson - In Profile



Associate Professor Ian Anderson heads up the VicHealth Koori Health Research and Community Development Unit.

Recently Anderson was presented with the Victorian Young Tall Poppy Award for his contribution to research.

He has an extraordinary record of achievement in all of the key dimensions of improving the health of Aboriginal and Torres Strait Islander people, as a clinician, as an Aboriginal person and advocate, as a policy maker and as a scholar.

Focussing on broadly encompassing and practical research Anderson is a key contributor to the debate around Indigenous health issues.

His contributions include the development and implementation of the National Indigenous Sexual Health Strategy; research partnerships between the National Health and Medical Research Council and the National Office for Aboriginal and Torres Strait Islander Health and the development for evidence based approaches to primary health care policy.

Anderson has also been involved in leading debate and the rethinking of issues, within the Aboriginal community, among policy-makers and among researchers. Head of The University of Melbourne's School of Population Health, Professor Terry Nolan, is a great admirer of Anderson's. 'The scope of his contribution is remarkable simply for its breadth. Ian continues to be sought out from across governments and bureaucracies to contribute to key reviews, debates and policy development exercises as a result,' said Nolan.

Diabetes is a disease of particular importance in the Indigenous population. In 1998-99 about 75% of Aboriginal and Torres Strait Islander people who received hospital treatment for the disease had Type 2 diabetes.

F A C T S

Health through Sport: From All Angles

Vaysar

Vaysar is the Victorian Aboriginal Youth Sport and Recreation co-operative. It is a community based organisation that supports and encourages Koori participation in sport at all levels. VAYSAR's state director, Gavin Brown, explains that sport has always played a role in traditional Koori society. 'It was used to develop people skills. It was an important social learning tool.'

This tradition is acknowledged and highlighted by VAYSAR and adapted to its current context. 'People might not realise this but it is very much a cultural thing. Sport is where a lot of people adopt their learning processes,' said Brown. 'By offering an opportunity to participate in a sporting culture, whether it's as an individual or as a team, we're starting to address not only the providing of chances through sport but addressing other issues relating to social behaviour and improved health outcomes. Sport does contribute to developing life skills.'

VAYSAR runs an annual sports calendar program centred on activities such as football, netball, basketball, swimming and tenpin bowling. Its annual football and netball carnival attracts up to 5000 people each year, making it the biggest annual event in the Koori community. It also manages a community leadership project, Three Tribes, which is supported by VicHealth, and sports development and role model programs funded by ATSIC. VAYSAR is the auspice body for the Koori Network for the Future - established under the VicHealth Mental Health Promotion Plan.

Brown believes the health impact is enormous: 'It's so important that we encourage participation from a cultural and sporting point of view. It's important for individuals, families and communities to come together in a healthy and active environment.'

For further information, contact VAYSAR on (03) 9482 4444.

Rumbalara Healthy Lifestyles Program

The positive impact of Shepparton's Rumbalara Football and Netball Club goes further than just

promoting and nurturing sportsmanship, competition and fitness.

The club has, since 1997, extended its activities beyond the sports field by developing and implementing an holistic approach to health within its community.

The Healthy Lifestyles Program, a health promotion program targeted at players, members and families of those involved in the club, is based on eight strategies—youth, leadership and development, men's health, women's health, diet and nutrition, substance misuse, cultural awareness and fitness performance. The club has built the multi-faceted program to promote cultural strength, Koori health and reconciliation.

The success of the program has been highlighted in the *Rumbalara: Evaluation of Healthy Lifestyles* report.

Major points made in the report

- Outcomes from the Healthy Lifestyles Program cannot be separated from the sporting activities of the club. Combined, these have resulted in major increases in self-esteem, self-confidence and positive identities among members, especially young players.
- The club provides a vehicle for participation in non-Indigenous communities which is not characterised by welfare or disadvantage.
- In terms of physical health, members of the club are fitter, which, for some, has led to changes in other health behaviors.
- Youth development, where young people have been mentored, supported and provided with role models that have influenced their life choices, has been most successful.
- The club plays a leading role in community capacity building, including training staff and building the skills of those involved in the Healthy Lifestyles Program and contributing to the local Koori workforce.

Club founder and President, Paul Briggs, said the evaluation was not just an official report documenting the program but was a good tool to assist mainstream organisations gain a greater understanding of Koori communities and Koori health.

'It's important for us to acknowledge more formally the work that's happening and the role the club is playing in these types of initiatives—the report does that. If we didn't review we wouldn't be able to benchmark or see our progress. It's vital to the life and future of the club.'

To receive a copy of the report, contact Neville Atkinson at Rumbalara on (03) 5831 3124.



FACTS

There are a number of health risk factors associated with diabetes, including obesity, poor nutrition, lack of physical activity and as yet unspecified genetic factors. The higher levels of obesity in the Indigenous population may be a contributing factor to elevated levels of Type 2 diabetes.



Kyle Vander Kuyp

Kyle Vander Kuyp, nine times Australian champion over the 110 hurdles, finalist at the 1996 Atlanta Olympics and semi-finalist in Sydney 2000, emphasises the value of sport in his life.

What do you love about sport?

I've always had fun. I've made lots of friends. I like the individual approach to sport—at end of the day I've got control of what happens. If it's a good run or bad run it's up to me. I do work in a team with my coach and my family and friends but when I get on the track it's up to me—I've got the control and that's what I like about it.

Why do you keep fit and healthy?

There are a number of reasons. I've watched how I've changed from a shy, skinny kid when I was a teenager to someone who is more confident and mentally and physically stronger. I have learnt a lot about myself through fitness and sport.

Why do you think health and fitness is important for Koori people?

It's healthy to be participating in something. The interaction with other people is important. Being in contact with other kids when I was in Little Athletics helped me break out of that shyness. And it's the fun of it. Apart from elite side of sport, fun is a big factor.

What are your top three tips to staying fit and healthy?

- Choose some form of regular exercise.
- Stick to a low fat healthy diet with plenty of fruit and vegetables.
- Make sure whatever you're doing you're having fun. Don't feel like you're being forced to do something—do it for yourself.

What, or who, is your inspiration and why?

I'm inspired by my mum. She has been a big supporter of my career and my family. What they have given up to give me a sporting career has been unreal. And out there I have a biological family I have never met. All that helps me be the best person on and off the track. And there are definitely a lot of kids who don't have the opportunity to achieve, so that's what motivates me—being a role model. I needed Aboriginal role models when I was a kid. I had my own identity crisis and now I've done the full circle and I'm the role model. I realise they just need to see people ahead of them so they can say, 'if they can do it then so can I'. People like Lionel Rose and Evonne Goolagong taught me how to be proud and to use being Aboriginal as an advantage and not a disadvantage. Being a role model is a nice responsibility.

Traditional Indigenous Games

Traditional Indigenous games have a long history within Australia's Aboriginal and Torres Strait Islander communities. But their benefits don't just lie in the past. They are part of the present and future promotion of health within Victoria.

The Traditional Indigenous Games Program, run mainly in partnership with Victorian schools, provides both Indigenous and non-Indigenous participants with the opportunity to actively engage in a selection of sporting and recreational activities directly drawn from Australia's cultural heritage.

The program, which won the 2001 VicHealth 'Health Promotion through Community Participation Award', has involved more than 3000 participants at 25 school based clinics and other community events in Gippsland and south-west Victoria. The culmination of the program is an interschool competition and cultural day which attracts more than 500 children to each carnival.

Former Sport and Recreation Victoria project officer Gary Wingrove set up a program that both encouraged participation and, through training of key staff, enabled the games to be integrated into the mainstream physical education curriculum.

'To this end, professional development days were held to skill teachers, student leaders and other community members in all aspects of the games, providing a sustainable independent framework for participation into the future. The fact that the games are currently still played within a range of regional and rural remote schools is testament to the success of this objective,' said Wingrove.

Games

Buroinjin — was played with a ball made up of kangaroo skin and stuffed with grass.

Gorri — disc rolling game where a piece of rounded bark is rolled by one player for the other boys to aim at.

Battendi — spear/javelin throwing competitions for distance and accuracy were held. Target was often a tree stump.

For more information about the program, contact Michael Mance on (03) 5561 1689.

Creative Ways to Improve Health

Circus Tarrangos is an Indigenous youth circus delivering training in circus skills and arts to Indigenous youth. The program has made an art form out of making the impossible possible and, in so doing, is providing significant health benefits for its participants. So far 43 young people aged between 6 and 15 have gone through the program which performed publicly for the first time in December 2001.

Circus Tarrangos' coordinator, Naretha Williams, said the program affirms Indigenous people's control over their own bodies and destinies and builds self-esteem and self-confidence through the learning of circus skills and techniques. 'Participants enjoy working physically in an artistic environment,' says Williams. Acquiring both physical fitness and confidence creates a lifelong skill and increases the chances of participants maintaining a connection to both the arts and physical activity—areas beneficial to their health.

Williams sees the benefits first-hand. 'Circus Tarrangos is valuable to Koori health and the Koori community. Indigenous health requires a holistic approach, and Circus Tarrangos is valuable to health and community in this way. Circus Tarrangos offers a positive physical outlet for expression that can assist in dealing with a whole range of issues. It encourages cooperation, creativity, determination and courage.'

The benefits don't end at the program door, though. According to Williams, the ripple effect occurs. 'There is no doubt that the entire community benefits from successful youth services. Indigenous communities are close, interrelated and interdependent.'

The circus is a partnership between Circus Oz, Northlands Secondary College and Melbourne Aboriginal Youth Sports and Recreation (MAYSAR) and is run as a part of MAYSAR's youth programs.

The two-hour classes are led by professional and competent circus artists. The format includes an initial warm-up followed by basic tumbling, jumps, dive rolls, trapeze, unicycle riding, hula hoops, juggling, stilt walking and tightwire. Movement is another part of the class, developing performance technique and general rhythm and movement skills. Training is held at the Northlands Secondary College multipurpose hall on Mondays at 6pm.

For further information, contact Naretha Williams on 0417 697 663.



Photo courtesy of the Ballarat Courier

Makin' Pitchas is a collection of four short films made by 12 young Koori people from the Ballarat and District Aboriginal Cooperative. The stories deal with the issues of alcohol, substance misuse, family violence, racial vilification in local sport, an unknown family history, youth suicide, teenage pregnancy, and employment from the young Kooris' perspective. The project was highly commended in the 2001 VicHealth Awards for Excellence in Health Promotion. It was also shortlisted for the 2002 ATOM (Australian Teachers of Media) Award and won the gold medal at the THEMHS (Australian and New Zealand Mental Health Awards). Participants were involved in every component of the production, receiving guidance from local Koori filmmaker and artist Richard Frankland.

This is a project that promotes health in many ways. The local Koori youth engaged in the project were able to positively explore many of the mental health issues that affect their lives whilst building their own confidence, self-esteem and skills as they made the film. Project coordinator Verity Higgins says the young people involved have been thrilled with the positive response the film has received and been exposed to future possibilities that they didn't know existed. 'It's given them a lot of confidence,' says Higgins. The film is also a resource that has raised awareness of the specific mental health problems facing young Indigenous Australians and provided the opportunity for communities to openly discuss some of the issues raised.

Makin' Pitchas—Four Short Films

'Believe in Yourself'

'A World of Colour'

'Goodnight Irene'

'Veranda Dreaming'

Further Information contact, Verity Higgins on (03) 5331 5344.

Australian Indigenous Health Promotion Network

In February 1995, representatives from the Australian Centre for Health Promotion met with Aboriginal and Torres Strait Islander health workers who had an interest and/or experience in health promotion.

A wide range of issues were discussed at that meeting and the Australian Indigenous Health Promotion Network was established. An 'Agenda for Action' which was developed formed the basis for the work that has been carried out by this group.

The Network's role is to:

- identify education and training needs of Aboriginal and Torres Strait Islander health promotion officers;
- work with universities and colleges to develop and implement relevant professional preparation and continuing education courses in Aboriginal and Torres Strait Islander health promotion;
- enable Aboriginal and Torres Strait Islander people who are engaged in health promotion to communicate regularly about their work;
- contribute to national debate and decision-making about infrastructure support and funding required for Aboriginal and Torres Strait Islander health promotion; and
- act as an advisory body on issues, education and work practices that improve the health status of Indigenous people.

Some of the Network's achievements to date

- Aboriginal health workers have participated in the National Health Promotion Conferences
- A new course in Indigenous health promotion has been developed
- Partnerships with mainstream health promotion have formed
- Advertising opportunities for workforce development have been identified

Membership

Any Aboriginal or Torres Strait Islander person who works to promote the health of their communities can apply to become a member of the Network. Membership badges will be issued and financial members will receive minutes of all Network meetings.

Non-Indigenous health workers with an interest in promoting the health of Aboriginal people and Torres Strait Islander people can apply to be associate members.

For further information, contact: Shane Hearn, School of Public Health, University of Sydney on (02) 9351 6499 or email: shaneh@health.usyd.edu.au

Diabetes Support

One approach to treating diabetes in Aboriginal communities is being well received by patients at the Victorian Aboriginal Health Service (VAHS) in Melbourne. While the diabetes patients receive treatment and care from the service's medical team, they are also caring for themselves and each other. A support club meets fortnightly at the service providing an opportunity for patients to share their experiences and advice in a comfortable environment.

VAHS health worker Joanne Hood said the service provides a good opportunity to detect diabetes early and to introduce people to the club for support. 'It's an opportunity for the diabetes patients to develop a support network and share information with each other.'

Health workers screen patients before they see a doctor or specialist at the service, which builds trust and confidence between the workers and patients and provides improved continuity of care. Joanne said this aspect of the service is vital because of limited access to doctors and specialists. 'It allows us to monitor their diabetes without them having to see a doctor every time they require treatment.'

Diabetes remains one of the major health problems for Aboriginal communities and is being addressed through various programs and strategies aimed at prevention and promotion.

For example, a Diabetes Day is held each year at the service. This offers a medical team for the day, including health workers, doctors, a dentist, a podiatrist, an optometrist, a dietician and other allied health professionals. The service also receives support from Dr Steve Morris, an endocrinologist at St Vincent's Hospital, and has allied health professionals working from the service weekly.

For further information about the VAHS diabetes service and the support club, contact the VAHS health workers on (03) 9419 3000.

Sending a Healthy Message

Communicating health messages to different population groups—defined perhaps by age, culture or gender requires communicators to consider a variety of approaches to convey their message. First and foremost, those communicating need to work with specific populations in order to develop appropriate and successful communications methods.

Vicki Briggs is the Aboriginal Project Coordinator at QUIT Victoria responsible for communicating messages about tobacco to Koori communities throughout the state. Briggs says those wishing to communicate messages specifically to Koori communities, and to create positive long-term relationships and sustainable results in the process, need to commit themselves to work in partnership with communities. ‘Sometimes it takes years to develop good relationships with these communities,’ says Briggs.



Briggs says the first thing to understand is that Koori communities are diverse. Each community is different as are the people within them. It is also important to initiate contact with a philosophy of community control. ‘This means respecting each other’s points of view, understanding that communities know what’s required for their community,’ said Briggs. It is important during the process to focus on building capacity within the communities: helping individuals and communities to develop skills to create projects and run them on their own eventually. This commitment to sustainable models is critical.

The main message is to respect a community’s knowledge of their needs and adapt according to the dialogue between parties to come up with an appropriate and sustainable model.

Healthy Messages in Practice

Quit - adapting all the time

With 57 percent of Koori people smokers, Briggs explains that engaging with the community about quitting is often difficult because people feel personally confronted: the person she’s approached within a community might themselves be a smoker. ‘I have to be extremely sensitive when approaching communities and understand it can be a personal as well as a community issue,’ explains Briggs. QUIT has allowed Koori health workers to engage in training to communicate the message even though they might be smokers themselves. Sometimes it encourages them to QUIT, but more importantly it builds capacity within communities to take the message forward.

A method for developing a resource

- Community approaches QUIT or is approached.
- QUIT representative talks about Tobacco Control perspective.
- Community decides:
 - what is required - (resources, promotion);
 - Format resources or promotion would take.
- Content developed together in partnership (appropriate content, capacity building).
- Focus groups run to test resource’s effectiveness.
- Work together to produce the resource and have a dissemination process in place.

FACTS

Prevalence of Tobacco use among indigenous Australians is estimated at above 50 percent.

Getting off to a Healthy Start

More Koori women are receiving culturally appropriate and improved medical care during pregnancy, birth and the immediate postnatal period through the Koori Maternity Services Program, funded by the Department of Human Services and operating in eight Koori communities across Victoria. Many other communities around Victoria not under the program have varying levels of maternity care provided for Koori women by their Community Controlled Health Service.

Several successful pilot maternity programs in Aboriginal community controlled health services established the foundations for the Koori Maternity Services Program. These programs were designed to address the concern that Koori women were not accessing pregnancy care in mainstream health services. This was due to a range of cultural factors relating to current health care and historical mistrust caused by institutional removal of children.

The goal of the Koori Maternity Services Program is to align the birthing experiences and birth outcomes of Indigenous women with those experienced by non-Indigenous women in Australia. VACCHO's Leanne Coyle says the program is an important contributor to Koori women's and children's health and wellbeing. 'In comparison to non-Koori women, Koori women have a higher incidence of low birthweight and premature babies, higher fertility rates and a higher proportion of mothers under 20 years of age¹. It has been well documented that having culturally appropriate maternity services is one way of improving women's access to antenatal care,' said Coyle.

Extensive consultation with Koori community members identified gaps, strengths and weaknesses in existing services and led to development of the Koori Maternity Strategy.

This Strategy aims to:

- increase the resources of existing services to better facilitate the improvement of birthing experiences for Koori women;
- resource services that do not receive funding specifically for delivering maternity services;
- strengthen and enhance the relationships between mainstream health providers and Aboriginal health services; and
- raise the profile of Koori-specific maternity services to increase awareness of the importance of such services and the benefits to Koori communities.

The success of the Koori Maternity Services Program was celebrated when Health Minister John Thwaites launched the Koori Maternity Services in Victoria Statewide Evaluation 2001 report at VACCHO in April 2002.

In relation to Koori women in Victoria the evaluation revealed:

- more women are accessing antenatal care;
- women are accessing antenatal care earlier in their pregnancy;
- good working relationships with mainstream organisations have been established;
- women are visiting the doctor more regularly;
- social networks for young women and their families have been improved;
- services have been made flexible;
- women are more familiar with the hospital before they give birth; and
- continuity of care has been improved.



Case Study: Mildura Koori Maternity Service

The Mildura Koori Maternity Service operates in an area that has one of the highest birth rates in the state and one of the highest rates of births to young women.

Facts: August 2000—August 2001

- 44 births in last 12 months
- 135 women accessing the service (women's health / pregnancy reasons)
- 32% of these women are 19 years and under
- 62 women accessing for antenatal care (42%)
- 26% of antenatal women are 19 years and under
- Antenatal checks approx. 14 times (if first check is 6 weeks)
- The standard and frequency of antenatal care has improved as many Koori women were previously accessing no antenatal care. Women particularly feel comfortable accessing care from their own community-controlled facility. Furthermore, the flexibility of the service means that women who had difficulty attending appointments, due to lack of transport or other small children, can now be seen at home.

References

1. NHMRC Report on Maternal Deaths in Australia, 1991—93 NHMRC, Canberra, 1989.

Publications/Resources



Leading the Way to Creating Healthier Communities

A new resource—Leading the Way: Councils Creating Healthier Communities—launched by VicHealth in partnership with the Municipal Association of Victoria and the Department of Human Services is now available through VicHealth. The resource recognises the leading role played by councils in creating environments in which the people within their communities can prosper and enjoy maximum health and wellbeing. The resource is designed to enable local leaders to develop policy and strategic priorities to address the social and economic issues of health and wellbeing in an integrated way across all the planning processes of council.

Evaluating Community Arts and Community Wellbeing

Arts Victoria, VicHealth, Darebin City Council and the City of Whittlesea have launched Evaluating Community Arts and Community Well Being, a guide to assist the community arts sector evaluate its work.

The guide, complete with worksheets and tools, is available at www.vichealth.vic.gov.au. This includes the full text version and an Express Guide—a short, ready-to-use version.

Arts for Health Calendar

The calendar details a range of free and low cost arts events from July to December 2002 that are part of the Major Partnerships Scheme. Copies of the calendar can be obtained from VicHealth by ringing (03) 9667 1333.

The 10 arts organisations in the Major Partnerships Scheme are Footscray Community Arts Centre, Geelong Performing Arts Centre, HotHouse Theatre, Immigration Museum, Koorie Heritage Trust, Melbourne Festival, Mildura Wentworth Arts Festival, Playbox Theatre, Regional Arts Victoria and the Victorian Arts Centre.

Through these two-year partnerships, VicHealth, in partnership with the Heart Foundation, promotes the SmokeFree message, creates healthy environments and facilitates increased access to arts activities.



VicHealth Website

If you register your name and details at the VicHealth website—www.vichealth.vic.gov.au—you will receive fortnightly updates via email of all new additions to the site.

The VicHealth website will also have a new section highlighting all upcoming seminars and posting proceedings from past seminars by September 2002.

Library

Amongst the latest additions to the VicHealth Library collection are the following:

- Australian Institute of Health and Welfare (AIHW) 2002, *Australia's Health 2002 : the eighth biennial health report of the AIHW*, Canberra
- Australian Sports Commission 2002, *Participation in exercise, recreation and sport*, The Commission, Canberra
- Bauman, Adrian, Bellew, Bill, Vita, Phillip et al 2002, *Getting Australia active: towards better practise for the promotion of physical activity*, National Public Health Partnership, Melbourne
- Dibley, Ged, Gordon, Michael 2002, *Leading the way : councils creating healthier communities: part 1 and 2*, VicHealth, Melbourne
- Evans, Robert 2002, *Interpreting and addressing inequalities in health: from Black to Acheson to Blair to -?: 7th annual OHE lecture*, Office of Health Economics, London UK
- Hamer, Lucy, Easton, Nick 2002, *Planning across the LSP: case studies of integrating community strategies and health improvement*, Health Development Agency, London UK
- Herrell, James, Straw, Roger ed.s 2002, *Conducting multiple site evaluations in real-world settings: new directions for evaluation no 94*. American Evaluation Association, San Francisco
- Leggatt, Margaret 2002, *Working together: a short practical guide for consumers, family carers and mental health professionals to work together in collaboration and partnership*, Southern Mental Health Association Inc., Cheltenham
- McDermott, Liane, Russell, Anne, Dobson, Annette 2002, *Cigarette smoking among women in Australia*, Commonwealth Department of Health and Ageing, Canberra
- National Health and Medical Research Council (NHMRC) 2001, *Australian alcohol guidelines: health risks and benefits*, NHMRC, Canberra
- New Zealand. Sport, Fitness & Leisure Ministerial Taskforce, Hillary Commission

for Sport, Fitness and Leisure 2001, Getting set for an active nation: report, Wellington New Zealand

- Rigby, Ken 2002, A meta-evaluation of methods and approaches to reducing bullying in pre-schools and early primary school in Australia, Attorney-General's Department, Canberra
- Swann, Catherine, Morgan, Anthony ed.s 2002, Social capital for health: insights from qualitative research, Health Development Agency, London UK
- Waller, Seta, Naidoo, Bhash, Thom, Betsy 2002, Prevention and reduction of alcohol misuse: evidence briefing, Health Development Agency, London UK
- World Health Organisation (WHO) 2002, National cancer control programs : policies and managerial guidelines : executive summary, WHO, Geneva

Social Policy websites

Policy Library

(<http://www.policylibrary.com>) aims to contribute to public understanding of social, economic and political questions through research, dissemination and publication. It is a social, economic and foreign policy resource and provides a large database of full text research papers, updated daily with the latest research, events, and jobs.

With over fifty member centres and institutes, [Australian Policy Online](http://www.apo.org.au) (<http://www.apo.org.au>) provides access to much of the latest Australian social, economic, cultural and political research available online, as well as links to social policy networks in the UK and US. It is maintained by the Institute for Social Research at Swinburne University of Technology.

The VicHealth Library provides an information service to health promotion professionals and others working in partnership with VicHealth. The collection is available as a reference resource for tertiary students. The Library is open from 10 a.m. to 4 p.m. Monday, Wednesday and Thursday. Find out if we can help you by telephoning 9667 1331. Or email efry@vichealth.vic.gov.au

Websites

The Koori Community Leadership Projects are community based projects which provide leadership training for young Kooris, mentoring by senior community members and support and resources to develop leadership skills through the planning and implementation of community activities. The projects will strengthen and enhance family structure and broader community leadership by the development of skills of the young community members.

<http://eelibrary.arts.monash.edu.au/mhp/default.htm>

Many Backgrounds, All Victorians

The Racial and Religious Tolerance Act, effective from 1 January 2002, makes racial and religious vilification unlawful. It provides an inexpensive and accessible avenue of redress for all Victorians who feel they have been victims of vilifying behaviour based on their racial or religious background through the complaints process of the Equal Opportunity Commission Victoria. As well as providing rights for victims of racial vilification, the legislation places responsibility on the residents of Victoria not to engage in behaviour that promotes hatred or contempt.

The Victorian Office of Multicultural Affairs has developed a range of resource materials to assist Victorians in understanding their rights and responsibilities under the Act.

Kits can be obtained by calling (03) 9651 1270 or by downloading materials from the website: www.voma.gov.au.

Working with Older Women

CASA House (the Centre against Sexual Assault) has developed a resource called Working with Older Women: Resources and Standards for Responding to Current or Past Violence.

Copies cost \$50 plus postage and handling and are available from CASA House, 270 Cardigan Street, Carlton, Victoria, 3053, or phone (03) 9347 3066.

New Projects

Common Fate Endorsed launched at Rumbalara in Shepparton

The Premier of Victoria, Steve Bracks, launched the Common Fate Endorsed project in July - aimed at improving employment among Shepparton's Indigenous community.

Common Fate Endorsed works with employer groups, councils and major service providers to generate jobs for Indigenous Australians. The City of Greater Shepparton has volunteered to be the first local government to back the program

Common Fate Endorsed brings together the Indigenous community and local businesses to embark on joint projects that will improve employment prospects and leadership skills of the community.

The project - Common Fate Endorsed - is a partnership between the local Indigenous community, the Victorian Government, the City of Greater Shepparton, the local business community, and Common Fate Limited.

Three Tribes Community Leadership Program

The launch of Three Tribes community leadership program run by VAYSAR and Athlete Development Australia took place on Tuesday 16 July. It was launched at Parliament House by none other than champion athlete, Cathy Freeman.



VicHealth Invests in Sport

VicHealth announced a \$25 million three-year sport investment in April 2002 to encourage more Victorians to participate in sport and physical activity. This investment is in response to increasing obesity and diseases related to physical inactivity.

The Hon. John Thwaites, Minister for Health in Victoria, The Hon. Justin Madden, Minister for Sport and Recreation and Minister for Commonwealth Games, together with Lachlan Dreher, Australian Hockey Olympic medallist, Daniel Trenton, Taekwondo Olympic medallist, and Susie Meaney, Melbourne Phoenix netballer, backed the investment and challenged Victorians to take on the World Health Organization's message to 'move for health'.

VicHealth's focus is on building healthy communities and encouraging all Victorians to be more active. It is setting up programs to improve people's health with the support of sporting organisations throughout the State.

Dr Rob Moodie, CEO of VicHealth, referred to data which show a steady decline in adult participation in sport and physical activity in Victoria. For example, adult participation declined from 58.2% in 1998-99 to 54.7% in 1999-2000.

These trends forced VicHealth to rethink its investment priorities in sport. Past investment has focused on reaching the community as spectators rather than encouraging people to participate in sport.

Out of School Hours launch

VicHealth and the Australian Sports Commission launched the Out Of School Hours Sport program in August at Doncaster Primary School.

The program targets primary school-aged children to provide them with opportunities to participate in quality sporting experiences out of school hours.

The program, which is being funded \$400,000 in the first year, will provide a fun and active supervised after school care option for their children.

The Out of School Hours Sports program is an important part of the



Commonwealth Government's sports policy, Backing Australia's Sporting Ability-A More Active Australia. The policy aims to create awareness of the benefits of sport and to boost the number of people participating in sport at a grass-roots level throughout Australia. The program is also a key part of VicHealth's Promoting Health through Sport Program, a three-year sport investment to encourage more Victorians to participate in sport and physical activity in response to increasing obesity and diseases related to inactivity.

Regional Tour

Throughout September 2002 the Victorian Health Promotion Foundation (VicHealth) held a series of regional launches of the Health Through Sport and Active Recreation Program.

VicHealth also held a series of regional forums showcasing the range of funding opportunities available to community groups across the state in sport and active recreation, the arts, research and community development for the purpose of promoting health. VicHealth's funding opportunities remain competitive, with roughly one in three successful applications. It is therefore important for community groups to have an opportunity to find out about the guidelines and criteria for funding.

VicHealth held range of launches and forums in the following locations across Victoria:

- 16 September – Geelong
- 18 September – Moe
- 19 September – Sale
- 23 September – Ballarat
- 24 September – Horsham

- 25 September – Bendigo
- 25 September – Mildura
- 26 September – Shepparton
- 27 September – Wangaratta

Positive Reaction to Smoke-Free Dining

On the anniversary of Victorian smoke-free dining, new research shows that the majority (89%) of Victorians support laws banning smoking in dining areas.

The latest survey, conducted in April 2002, shows public approval for smoking bans in dining areas has risen by 11% in the last 12 months.

Encouragingly, support for these changes has increased most significantly amongst smokers.

Tall Poppy Awards

Victorian public health research received strong commendation with the announcement in June of the Australian Institute of Political Science's Tall Poppy Awards.

Award winners include:

Dr Pascale Allotey, Key Centre for Women's Health in Society, University of Melbourne. Pascale recently was awarded a VicHealth Public Health Research Fellowship.

Associate Professor Ian Anderson, Director of the VicHealth Koori Health Research and Community Development Unit at the University of Melbourne
 Dr Anne Kavanagh, VicHealth Senior Research Fellow at the Australian Research Centre in Sex, Health and Society

Dr Margaret Kelaher, a Senior Lecturer at the Key Centre for Women's Health in Society and Centre for Health Program Evaluation at the University of Melbourne.

Funding/Grant Rounds – Open for Applications

Communities Together Scheme

Applications to the Communities Together Scheme are accepted two times per year.

Grants of up to \$10,000 per year are available to organisations to conduct community festivals and celebrations which build and strengthen community(s) to promote health and wellbeing. Consideration will be given to funding festivals and celebrations for up to \$20,000 for two years.

Closing dates for applications are:

- 27 September 2002
- 28 March 2003
- 29 August 2003
- 29 March 2004

Applications should be forwarded by 5.00 pm on the closing date to:

*Communities Together Scheme
VicHealth, PO Box 154, Carlton South 3053*

If you have any queries after reading the guidelines please call VicHealth on (03) 9667 1333

Community Arts Participation Scheme

Applications to the Community Arts Participation Scheme are accepted twice per year.

Grants of up to \$30,000 per year are available to organisations to conduct community arts projects. Consideration will be given to projects that extend over two years for funding of up to \$60,000.

Closing dates are 28 March and 18 October.

Applications should be forwarded by 5.00 pm on the closing dates to:
*Community Arts Participation Scheme
VicHealth, PO Box 154, Carlton South 3053*

If you have any queries after reading the guidelines please call VicHealth on (03) 9667 1333.



Walking School Bus Program

Local Government Councils and Shires are invited to apply for funding of phase 2 of the Walking School Bus Program.

Proposals to be lodged by Friday October 11 2002.

Five copies of the proposal must reach VicHealth by 5.00pm Friday October 11, 2002 and must be addressed to:

*Ms Kellie Ann Jolly,
Group Leader
Education, Local
Government and Health
VicHealth, PO Box 154, Carlton South 3053*

Interested parties wishing to obtain further information about VicHealth and the Walking School Bus Program are invited to access our website at www.vichealth.vic.gov.au



Outdoor Sport Shade Grants Program

Applications are now open for the Outdoor Sport Shade Grants Program. Grants of up to \$2500 are available for purchase of portable shade structures for use during outdoor community sporting activities.

Deadline for submissions is Friday November 15, 2002.

Guidelines and application forms can be obtained from VicHealth by phoning (03) 9667 1333.

2002 VicHealth Awards

Nominations for the 2002 Annual VicHealth Awards are now open.

The VicHealth Awards recognise and thank our partners who provide valuable support to health promotion in this State. Awards are presented at the VicHealth Annual General Meeting in December.

Nomination forms are available on the VicHealth website, www.vichealth.vic.gov.au
Nominations close 11 October 2002.

For information, contact Sharon Osman, Event & Production Coordinator on (03) 9667 1333 or email sosman@vichealth.vic.gov.au

Seminars

From Process to Context and Back Again—Program Evaluation in Complex Social Environments

Tuesday 27 August 2002, VicHealth Seminar Room, 4.00pm–5.30pm

Speakers: Dr Lyndal Bond, VicHealth/Department of Human Services Fellow, Centre for Adolescent Health and Dr Therese Riley, Research Fellow at the Centre for the Study of Mothers' and Children's Health, La Trobe University.

VECCI/VicHealth Partnership with Healthy Industry Program

Seminars on workplace health:

Wednesday 4 September

Occupational stress—practical strategies for identifying causes and consequences

Wednesday 2 October

Workplace design/ECCO efficiency and environment

Wednesday 13 November

Occupational health and safety in the workplace

Wednesday 4 December

Work performance Counselling

Full details can be found on the VECCI website at: www.vecci.org.au.

Disclaimer: Views and opinions expressed in the VicHealth Letter do not necessarily reflect those of VicHealth.

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