
THE DRAFT NATIONAL ABORIGINAL AND TORRES STRAIT ISLANDER SAFETY PROMOTION STRATEGY

August 2004



This draft was prepared under the direction of the Aboriginal and Torres Strait Islander Injury Prevention Action Committee (ATSIIIPAC) and has been approved by the National Public Health Partnership (NPHP) for release for public consultation.

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GOALS

- To significantly reduce the burden of accidental and intentional injury among Aboriginal and Torres Strait Islander people
- To focus agencies and organisations from all sectors on the role they can play in promoting safety and preventing injury in Aboriginal and Torres Strait Islander people

BACKGROUND

Injury has been identified as a national priority area for the Public Health Partnership. Aboriginal and Torres Strait Islander representatives developed a national statement on Aboriginal Injury and Safety Promotion in 2000 at the National Injury Prevention Conference in Canberra. This document called for the development of a systematic approach to safety and injury prevention for Aboriginal people based on public health principles. The Australian Government Department of Health and Ageing is developing this approach but each state will need to develop complementary activities and policies.

In 2003 the Aboriginal and Torres Strait Islander Injury Prevention Advisory Committee (ATSIPAC) commissioned a project to examine current activity with respect to injury prevention in Aboriginal and Torres Strait Islander communities, together with a literature review of policy investments. The final report was a comprehensive examination of future possibilities for investment by all levels of government in partnership with the leaders of individual communities. These volumes are available at www.health.gov.au/pubhlth/publicat/document/metadata/inj_atsti.htm

This strategy is modelled on a strategy currently under trial in NSW. It describes the intended relationship between national and state health agencies, and other national and state based agencies. It is dependent on the development of a capacity at national and state level to oversee and coordinate action. Ideally this capacity should sit within health agencies, but it may find a home in another national or state agency. The success of the strategy will depend on a national group ensuring communication and monitoring. This capacity may well sit with SIPP.

The current uncertainty about government structures available for the delivery of critical services to Aboriginal and Torres Strait Islander communities and the intended “mainstreaming” of delivery of infrastructure services makes the task of being definitive about the relationships required, difficult. The actual relationships between national government agencies, state agencies and regional and local communities is difficult to briefly

describe, but suffice to say, communities, state government agencies (particularly health) and national government service providers should fully utilise the opportunities created by the existence of intersectoral consultation forums affecting service provision.

Key facts that underlie the decision to develop this strategy.

- Aboriginal and Torres Strait Islander injury rates in Australia (deaths, hospitalisation and emergency treatment) are at least three times and possibly six times those of non-Aboriginal and Torres Strait Islander people¹
- Violence and self-harm associated with social and cultural disruption are widespread among Aboriginal and Torres Strait Islander people
- Mainstream organisations often leave the provision of services to Aboriginal and Torres Strait Islander people to Aboriginal service providers instead of recognising Aboriginal and Torres Strait Islander services as supplementary and complementary, aimed at increasing capacity and options for services to disadvantaged groups.
- Mainstream injury prevention and safety promotion strategies do not necessarily deal with, or have clear relevance to, the priority issues for Aboriginal and Torres Strait Islander people
- Aboriginal and Torres Strait Islander communities and leaders are themselves increasingly concerned at the effects on health, social and societal wellbeing.

¹ Moller J, Dolinis J and R Cripps. Aboriginal and Torres Strait Islander Peoples Injury-Related Hospitalisations 1991/92, AIHW 1996

SCOPE

The strategy covers all aspects of safety promotion. It seeks to reduce harm, to increase community capacity to promote well being, and to provide opportunities for Aboriginal and Torres Strait Islander people to be proud of their achievements and to take greater control of initiatives aimed at enhancing community safety.

It deals with

- Accidental injury
- Intentional self harm
- Violence
- The need for safe environments and communities
- The need to feel safe

PRINCIPLES

Underlying the strategy are two basic principles

- The right to be safe
- The responsibility to promote and maintain the safety of others

Within these there are six operational principles that underpin all actions under the strategy. These have been identified in consultation with a wide range of Aboriginal and Torres Strait Islander people. They form the rationale for the major elements of the strategy

Build respect and responsibility

The work done under this strategy must seek to enhance the self-respect of Aboriginal and Torres Strait Islander people. This will be achieved by promoting leadership and control by Aboriginal and Torres Strait Islander people while focusing on the responsibility of the whole community and its agencies to be partners in increasing community safety. It must aim to produce success in changing environments, in producing shared responsibility for problems and shared celebration of successful programs and projects. Above all, this strategy is designed to be controlled and directed by individual communities. When risk environments and behaviours vary by individual communities, so too do the solutions. Community leaders know best the problems and the solutions and are also best placed to determine the partnerships required to develop solutions.

Informed setting of priorities for action

Priorities must be set on the basis of sound information and systematic analysis. Information about injury and safety needs to be gathered, interpreted and applied to setting local, regional and state priorities for action.

Priorities will be set strategically to deal with issues that will build commitment to safety promotion and contribute to the overall wellbeing of Aboriginal and Torres Strait Islander people. They will consider

- Frequency of occurrence
- Severity of impact (to individuals and to the community)
- Availability of opportunities and mechanisms to promote safety
- Contribution to the well being of the community

Many settings many different opportunities

Aboriginal and Torres Strait Islander culture is diverse. Aboriginal and Torres Strait Islander people live in a wide range of settings and experience a rich range of lifestyles. The work under this strategy will recognise this variation as a strength and seek to respond to the needs of local groups of Aboriginal and Torres Strait Islander people. It will seek to reflect, learn from and value this diversity.

Accredited program

Those who work in response to this strategy will receive formal recognition of their skills and knowledge. The strategy will include a formal education program for workers appropriately accredited at TAFE and University level. The units provided will be constructed to allow cross accreditation with a range of tertiary level courses. They will form part of a more broadly focussed degree and certificate curricula. Informal learning and experience will also be available.

Link with other health and health related strategies

Injury and safety issues are tightly linked to the social determinants of health and are affected by other health and health related strategies. A listing of relevant strategies and documentation developed at a national level relevant to this strategy can be found at

www.health.gov.au/oatsih/pubs/index.htm#A

Transfer knowledge and build capacity

The capacity of self-determining community entities to engage in safety promotion and injury prevention must be increased for any meaningful outcomes to result. In the early stages, and now in the absence of ATSIC, it will be vital to ensure that National and State peak bodies representative of Aboriginal and Torres Strait Islander communities are invited to explore how this should happen in their respective jurisdictions (In the health and safety promotion arena, there are only Affiliates of NACCHO in this category).

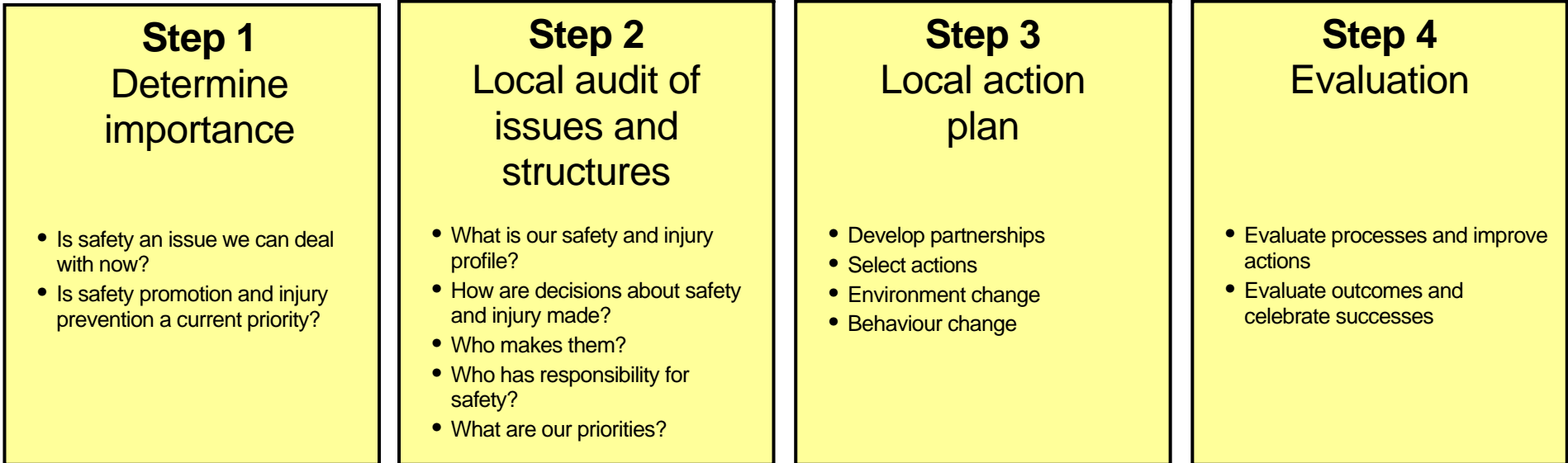
Interactive participatory learning will form a major building block of safety promotion. It is important to improve the knowledge and self-esteem of all participants. Communication of information will actively utilise traditional Aboriginal and Torres Strait Islander forms of learning and communication through conversation and art.

PART 1: THE LOCAL SAFETY STRATEGY

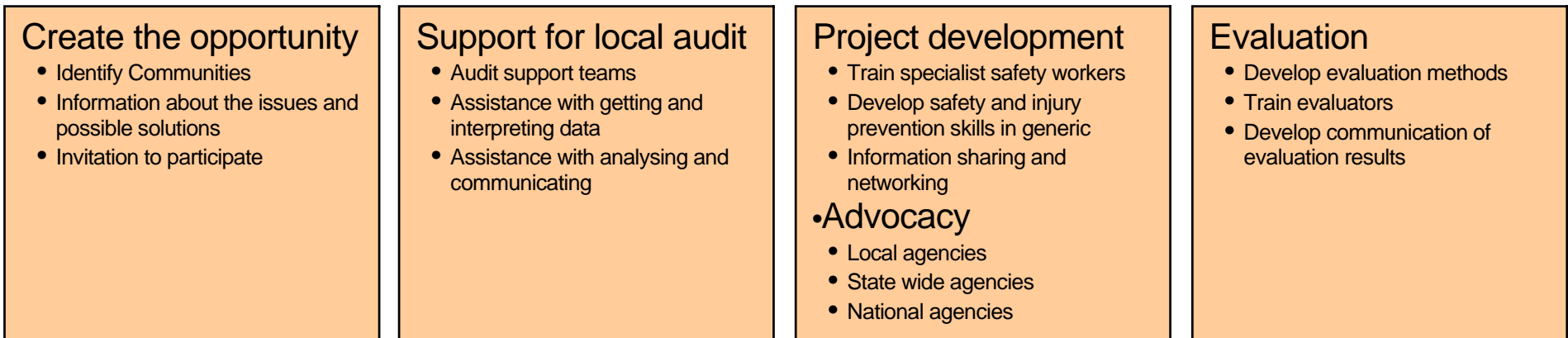
Part 1 outlines the major actions of national and state health departments or other appropriate agencies to promote the development of local safety and injury prevention initiatives.

Aboriginal Health Local Safety Promotion

Local Safety Group functions



State agency functions



Strategic Direction: Health partnerships to build local safety promotion

1.1. Provide an opportunity to participate

Information about the nature of injury and safety issues is not systematically available to decision-makers. In this climate the view of the problem is fragmented and it is difficult to identify effective change strategies

Clear information will be provided to all Aboriginal and Torres Strait Islander decision-makers about patterns of injury and safety concerns among Aboriginal and Torres Strait Islander people. They will be provided with an opportunity to respond to this information and to seek support for undertaking a detailed assessment of local issues.

Example to be inserted after public consultation process.

Suggestions welcomed.

1.2. Local profile

Where local Aboriginal and Torres Strait Islander decision makers view injury and safety issues as a current priority, a local profile of issues, needs and opportunities to make a difference will be undertaken in partnership with local leaders.

The profile will

- Use existing data sources to identify patterns of issues
- Obtain qualitative information about safety and injury concerns – both in relation to occurrence and response
- Identify the agencies responsible for risk management in the areas
- Identify opportunities for improving safety

Example to be inserted after public consultation process.

Suggestions welcomed.

1.3. Local action

Local partnerships will be developed to initiate or strengthen safety promotion and injury prevention strategies. Using the information from the profile local communities will be supported to

- Choose priorities for action
- Identify safety promotion and injury prevention strategies
- Create the imperative for action among agencies with a responsibility for safety issues
- Facilitate monitoring, documentation, reflection and analysis of experience

Resources and people are required to support local initiatives.

Shoalhaven An overall management committee works to build partnerships that influence the activities of both the project workers and all the agencies and services working towards a healthy and safer community.

The Committee is investigating the possibility of becoming a World Health Organization designated Aboriginal "Safe Community".

Mid North Coast A Project Management Committee was formed and membership was drawn from agencies in the area responsible for injury risk management. They included a broad range of government, non-government and Aboriginal community controlled organisations.

The Mid North Coast Project recommends the employment of Aboriginal Safety Assessment Officers across the area. These positions to be Aboriginal identified and recruitment drawn from the local communities. The communities will be encouraged to identify opportunities for improving safety through these officers.

1.4. Local program support

The skills and resources to support the work under this strategy need to be strengthened. Local programs could be supported by a team of trained workers who could assist in the provision of expertise and training in

- Community group formation
- Risk analysis
- Safety promotion and injury prevention initiative evaluation
- Negotiation with organisations and agencies
- Strategy development
- Strategy implementation
- Monitoring, documentation analysis and evaluation

Example

In order to develop strategies to assist Aboriginal communities in the reduction and prevention of injury it is essential to have the support of the Aboriginal communities identified to enable a thorough analysis of the current levels of risk and processes to ensure its rectification.

It is therefore imperative to recognise that no matter how many times injury prevention is identified in strategies, it is the Aboriginal communities that will have ultimate control over the success, scope and future of any such initiative. It is essential that Aboriginal communities, its members and key agencies are involved equally throughout the entire process to develop and maintain injury prevention partnerships.

The Mid North Coast negotiation process was conducted at

times, venues and locations deemed appropriate to the needs of the communities involved. Focus groups at venues selected according to accessibility and comfort of participants; semi-structured interviews with members of local Aboriginal community networks; and event narrative interviews with Aboriginal people who had recently sustained injuries; were all methods used in this process.

Negotiations were assisted by the Mid North Coast Aboriginal Health Partnership and the Mid North Coast Aboriginal Injury Working Party. The Working Party had formal mechanisms for reporting to key committees across the area. Membership of this group included a wide range of organisations and Aboriginal community representatives.

1.5. Education and training

There is a shortage of trained safety promotion practitioners. Very few tertiary courses provide in depth study in this field. Generic safety promotion and injury prevention training is supported as an adjunct to other courses that are currently available in such areas as public and environmental health and epidemiology, health promotion, ergonomics, occupational safety.

Two education and training areas have been identified

1.5.1. Aboriginal and Torres Strait Islander injury prevention and safety promotion practitioners

Aboriginal and Torres Strait Islander workers from a range of disciplines will be trained in all aspects of safety promotion and injury prevention. This will include

- Risk identification
- Problem analysis including use of injury data
- Assessment of the relevance and effectiveness of possible safety promotion and injury prevention initiatives
- Communication, public relations and community liaison
- Advocacy and agency liaison
- Community development and decision making
- Program evaluation

Opportunities for formal studies will be negotiated with relevant educational units. Studies in these areas should form units that will complement a range of existing courses in a number of fields and will be developed and accredited as elective units or stream options within these courses. Units should be accredited at tertiary certificate, diploma and degree level and be fully recognised as

contributing to vocational qualifications. Opportunities for linking these study areas with Job training programs will be actively pursued.

1.5.2. Non-Aboriginal and Torres Strait Islander agency and staff orientation

There is a need to improve the contribution of non-Aboriginal and Torres Strait Islander people to Aboriginal and Torres Strait Islander safety promotion and injury prevention. Barriers exist that lower the effective use of services. One of these is a lack of confidence in non-Aboriginal and Torres Strait Islander people when dealing with Aboriginal and Torres Strait Islander people. This disrupts service levels and reduces the availability of generic services to Aboriginal and Torres Strait Islander people.

The work done under the strategy will focus on effective partnerships between Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander people. There will also be an orientation process including workshops and mentor schemes that bring Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander people together with the aim of breaking down the misunderstandings and barriers that currently exist. These courses will be implemented in areas where Aboriginal and Torres Strait Islander decision-makers have identified safety promotion as a priority.

1.6. Information Sharing

Active communication and visiting between communities involved in safety promotion and injury prevention will be supported. It is important that each project should learn from others and that this learning should occur in ways that maximises transfer of useful information. Communication strategies will build on local culture and learning method endorsed by local communities. This process will be supported by:

- Actively engaging existing Aboriginal and Torres Strait Islander networks
- Actively promoting networking between interested groups
- Linking to safety promotion and injury prevention expertise nationally and internationally
- Maintaining a web site
- Conducting interactive meetings to share progress and solve problems.
- Developing skills in recording events and experiences in artistic, video, photographic, electronic and written form

1.7. Research and Evaluation

There is a need to build up the evidence base in the field of Aboriginal and Torres Strait Islander safety promotion and injury prevention.

It will be necessary to work with health and other sector data analysts to improve the accessibility and accuracy of data related to the safety and injury of Aboriginal and Torres Strait Islander people, while recognising local, state and national community-based information sharing and research ethical protocols.

Evaluation of project progress should be practical and simple, meeting the need for accountability and improved implementation. It should provide feedback to each local project.

In addition there is a need for evaluation research to be implemented in a strategic fashion to measure the population effectiveness of individual strategies and overall strategy. This will be achieved through partnership with universities and link to the training courses detailed above.

Evaluation will therefore include

- Formative evaluation driven by local people
- Outcome evaluations of local projects
- Research and evaluation activities in partnership with universities to build evidence of effectiveness and efficiency of interventions and countermeasures

Resources to be used for evaluation will be provided in line with the level of evaluation required and appropriate protocols. They will support

- Quantitative and qualitative research and evaluation
- The development and evaluation of communication strategies
- Improvement in the quality and relevance and availability of health and other sector data sets

1.8. Summary of strategies and outcomes:

| | Strategy | Outcome | Responsibility | Target date | Progress Indicator |
|---|---|--|---|-------------|---|
| 1.1. Provide an opportunity to participate | <ul style="list-style-type: none"> • Inform national , state and regional Health Services and Aboriginal community controlled health organisations of the nature of injury and safety issues among Aboriginal and Torres Strait Islander people and the potential for reducing the burden on Aboriginal and Torres Strait Islander people • Establish a statewide capacity to lead and support local development • Invite local communities and areas to be involved in the generation of a local injury profile | <p>Informed decision on injury as a priority</p> <p>A capacity for statewide and national contact and communication</p> <p>Recruitment of communities to undertake local profiling</p> | <p>Proposed National coordinating group – NACCHO & affiliates</p> <p>Prime responsibility is State Health or other appropriate agencies. Federal Health to coordinate national priorities</p> | | <ul style="list-style-type: none"> • State based capacity formed and operational |
| 1.2. Local profile | <ul style="list-style-type: none"> • Assist communities to create a local injury and safety profile by accessing data held by the AIHW or state health departments and other agencies and supplementing it with locally derived qualitative information • Develop local multi-sectoral Injury /safety interest groups in participating localities • Provide resources and skilled support for local injury profile development | <p>Informed commitment to safety as a priority in the context of local needs</p> | <p>State health or other appropriate agency</p> | | <ul style="list-style-type: none"> • Local profiles developed |
| 1.3. Local action | <ul style="list-style-type: none"> • Choose priorities for action • Identify safety promotion and injury prevention strategies • Create the imperative for action among agencies with a responsibility for safety issues • Facilitate monitoring, documentation, reflection and analysis of experience | <p>Increase the pool of skilled injury prevention workers accessible to Aboriginal and Torres Strait Islander people</p> <p>Local management and ownership of injury prevention</p> <p>High quality risk assessment and prevention plans</p> | <p>Local Safety Groups</p> | | <ul style="list-style-type: none"> • Local groups formed and functioning • Funding allocation to support local groups for 3 years |

| | Strategy | Outcome | Responsibility | Target date | Progress Indicator |
|-------------------------------------|---|--|--|-------------|---|
| 1.4. Local program support | <ul style="list-style-type: none"> Facilitate local safety promotion and injury prevention groups to set priorities Provide access to skilled injury prevention workers across Australia and Internationally to identify appropriate countermeasures and change strategies Provide resources to assist with the implementation of high priority injury prevention and safety strategies Provide advocacy support for local groups in approaching and negotiating action among local agencies Facilitate documentation and reflection | <p>Create a core structure for injury prevention strategies</p> <p>Effective selection of countermeasures</p> <p>Implementation of highly effective prevention strategies</p> <p>Wide commitment by local agencies for injury prevention management and safety promotion</p> | <p>State Aboriginal and Torres Strait Islander safety capacity</p> <p>State health coordinating group</p> <p>OATSIIH</p> | | <ul style="list-style-type: none"> Priorities identified and intervention strategies documented Active linkage with injury prevention leaders Implementation of selected Injury prevention and safety promotion programs Successful negotiations with local agencies and organisations Public documentation of successful practice |
| 1.5 Education and training | <ul style="list-style-type: none"> Aboriginal and Torres Strait Islander injury prevention and safety promotion practitioners Non-Aboriginal and Torres Strait Islander agency and staff orientation | <p>Create a pool of highly skilled Aboriginal and Torres Strait Islander Safety workers</p> <p>Effective partnerships in safety promotion between Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander people</p> | <p>State Aboriginal and Torres Strait Islander safety capacity</p> <p>Tertiary Education Institutions</p> | | <ul style="list-style-type: none"> Active training of Aboriginal and Torres Strait Islander people in safety promotion Increased harmony and active partnerships aimed at promoting safety |
| 1.6. Information Sharing | <ul style="list-style-type: none"> Active communication and visiting between communities involved in safety promotion Developing skills in recording events and experiences in artistic, video, photographic, electronic and written form | <p>Effective transfer of skills, knowledge and programs</p> | <p>State Aboriginal and Torres Strait Islander safety capacity</p> | | <ul style="list-style-type: none"> Widespread knowledge of effective projects and increased commitment to safety promotion |
| 1.7. Research and Evaluation | <ul style="list-style-type: none"> Formative evaluation driven by local people Outcome evaluations of local projects Research and evaluation activities in partnership with universities to build evidence of effectiveness and efficiency of interventions and countermeasures | <p>Improved quality and accessibility of safety data</p> <p>Improved evidence base for planning interventions</p> | <p>Local Safety Projects</p> <p>State Aboriginal and Torres Strait Islander safety capacity</p> <p>State health group</p> <p>Tertiary Education Institutions</p> | | <ul style="list-style-type: none"> Improved evidence base for Aboriginal and Torres Strait Islander Safety Promotion |

PART 2: THE HEALTH SECTOR'S COMMITMENT TO A WHOLE OF GOVERNMENT APPROACH

Part 2 identifies the importance that the health sector places on partnerships between sectors and organisations at a Federal or State level to create an environment that provides a strong foundation and supportive climate for locally based initiatives. It indicates the commitment by the Australian Government to a whole of government approach.

Strategic direction: Promote Aboriginal and Torres Strait Islander safety promotion and injury prevention at the national level

Aboriginal and Torres Strait Islander safety and injury prevention will be promoted in all relevant national initiatives including Housing, Health, CDEP, road safety and justice and welfare initiatives. This will be achieved with the assistance of NACCHO, who play a key role in consulting with all levels of government and Aboriginal and Torres Strait Islander communities. Affiliates of NACCHO and other appropriate agencies will also provide vital links to Aboriginal and Torres Strait Islander communities.

2.1. Service Delivery to Aboriginal and Torres Strait Islander Communities

The environments in which Aboriginal and Torres Strait Islander communities live have a strong impact on the health and safety of Aboriginal and Torres Strait Islander people. In particular, delivery of services, such as provision of food and drinking water, housing, sewerage and other infrastructure, waste management, and pest control, all contribute to the safety and injury risk profile of Aboriginal and Torres Strait Islander communities. Arrangements for delivery of services to Aboriginal and Torres Strait Islander communities vary significantly from one State and Territory to another. A range of different agencies including the Australian Government, State and Territory Governments, Local Governments and community based organisations may all be involved in various aspects of service delivery. Consultation and cooperation between these agencies is needed to improve environmental factors that affect the health and safety of Aboriginal and Torres Strait Islander people.

2.2. Other agencies and organisations

A wide range of organisations contribute to the level of risk and the effectiveness of safety promotion and injury prevention in the community. The health sector supports partnerships among key national and state organisations and businesses to improve safety promotion and risk management strategies across Australia. It is important that these partnerships be developed in consultation with NACCHO and other affiliated agencies. Key organisations and businesses include:

- Aboriginal Controlled Community Health organisations at National and State/Territory level
- Legal Aid services
- Aboriginal Lands Councils
- Energy distribution agencies
- Hotel and liquor trades associations
- Indigenous Media Organisations
- Non government health and welfare and employment organisations
- Organisations providing correctional services
- Private rental housing providers associations
- State Registered Clubs Associations
- Sporting clubs and associations
- Telstra
- Unions

2.3. Local government organisations

Local Government is an important player in the development of the built and recreational environment. The health sector supports partnerships with the Local Government Association and Department of Local Government and regional local government coordination bodies to develop

- standards of customer response to Aboriginal and Torres Strait Islander people and communities
- agreements on the roles and responsibilities of local government and Lands Councils for safety promotion and risk management
- standards for consultation with respect to changes in safety or risk engendered by new developments or changes in local government services

2.4. The role of State Health Departments

State Health Departments will encourage and support the development of state wide management groups to work on improving the effectiveness and efficiency of safety promotion and injury prevention within individual agencies and across sector boundaries. This is likely to be achieved as part of a whole of government process through partnership agreements at individual agency and multi sectoral level.

State Health Departments will not necessarily drive this process but will be active stakeholders. The strategy documented here outlines the health sector's commitment to a whole of government process. It acknowledges the role of other sectors and organisations and its commitment to partnerships at national, state and local level.

The partnerships should lead to agreements about the provision of safe environments and quality services to Aboriginal and Torres Strait Islander people by mainstream agencies and the role of supplementary programs for Aboriginal and Torres Strait Islander people that offset disadvantage or meet particular needs.

State Government organisations

- Aboriginal Housing Services
- Attorney General
- Housing Services
- Aboriginal Affairs Services
- Aged and Disability Services
- Community Services
- Corrections Services
- Education and Training Services
- Local Government Services
- Recreation and Sport Services
- School Education Services
- State Emergency Services
- Environment Protection Authority
- Juvenile Justice
- Fire Brigade and Bush Fire Brigade
- Police Services
- Premier's Department
- Roads and Traffic Authority
- Workcover Authority

2.5. National government organisations

1. Promote the issue of Aboriginal and Torres Strait Islander safety in all relevant national and state initiatives including Housing, Health, CDEP, Aboriginal and Torres Strait Islander health programs, road safety and justice and welfare initiatives
2. Assist with the development of tools and programs to identify risks and opportunities for improvement at local level and the evaluation of these
3. Build the capacity to creatively and effectively address Aboriginal and Torres Strait Islander safety issues through training, three to five year demonstration projects and networking of information
4. Provide resources for quantitative and qualitative evaluation of initiatives at all levels including communication strategies, capacity generation and retention, individual and systems based interventions

Australian Government organisations

- Attorney General's
- Australian Federal Police
- Australian Government Solicitor
- Australian Industrial Relations Commission
- Department of Communications, Information, Technology, and the Arts
- Department of Education, Science and Training
- Department of Employment and Workplace Relations
- Department of Family and Community Services
- Department of Health and Ageing
- Department of Immigration, Multicultural and Indigenous Affairs
- Department of Industrial Relations
- Department of Transport and Regional Services
- Department of Veteran's Affairs
- Department of Workplace Relations & Small Business
- Environment Australia
- Health Insurance Commission
- Land and Water Australia
- National Occupational Health and Safety Commission