Policy-at-a-glance – Food Security for Aboriginal & Torres Strait Islander Peoples Policy

Key messages: The Public Health Association of Australia (PHAA), Dietitians Association of Australia (DAA) and Australian Red Cross recommend that Australian Governments –

1. Acknowledge the unacceptable food and diet-related health gap between Aboriginal and Torres Strait Islander and other Australians, the role of an adequate and secure diet in reducing this gap, and the urgent need for priority actions to ensure food security;

2. Take the primary role in developing targeted food and nutrition security policies and actions, and provide leadership to facilitate and coordinate action. A whole of government approach, and engagement with relevant agencies and partners is required;

3. Map and report on actions for food and nutrition security in Australia, with a focus on Aboriginal and Torres Strait Islander Peoples; and

4. Ensure all policy actions are developed with Aboriginal and Torres Strait Islander Peoples in a way that strengthens and supports their culture, health and capacity.

Summary: Food security is a fundamental human right. Food insecurity is a significant issue for Aboriginal and Torres Strait Islander people in remote, regional and urban parts of Australia. This has a long history commencing with colonisation of Australia and ongoing policy and economic influences. These influences continue and are exacerbated by income and employment, family obligations, inadequate housing, remote store practices and transport to name a few. This history and current circumstances mean that presently families go hungry, a high incidence of malnutrition persists alongside the disproportionate burden of chronic disease. This policy seeks to serve as an urgent call for sustained action and leadership from all levels of government and non-government organisations, working with Aboriginal and Torres Strait Islander peoples to achieve food and nutrition security.

Audience: Australian, State and Territory Governments and Agencies; Non-Government Health Agencies, policy makers and program managers. Media.

Responsibility: PHAA Food and Nutrition Special Interest Group (SIG); Dietitians Association of Australia and Australian Red Cross

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Food Security for Aboriginal and Torres Strait Islander Peoples Policy

This is a joint policy of the Dietitians Association of Australia (DAA), the Public Health Association of Australia (PHAA) and Australian Red Cross (ARC). The purpose of this policy is to provide evidence regarding food security for Aboriginal and Torres Strait Islander peoples in Australia to inform strategic priority actions for Government and other key stakeholders.

We affirm:
1. All Australians, regardless of ethnicity, income, and place of residence, have the right to access resources required to achieve an adequate standard of living for health and well-being, including access to an adequate, safe, nutritious, culturally-appropriate, affordable and environmentally sustainable food supply.
2. Poor nutrition is responsible for around 16% of the total burden of disease [1,2] and is implicated in more than 56% of all deaths in Australia[3], and likely to be much higher in Aboriginal and Torres Strait Islander communities. In 2004-05, 24% of Aboriginal and Torres Strait Islander people over 15 years reported running out of food in the last 12 months, compared to only 5% of non-Indigenous Australians [4].
3. Food security exists “when all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life”[5].
4. Food security is a fundamental human right. The Universal Declaration of Human Rights states “everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food”[6]. The right to adequate food is not a right to be fed but “a right of people to be given a fair opportunity to feed themselves”, now and in the future[7].
5. The 1996 World Health Organization’s declaration that “food security is built on three pillars:
   • Food availability: sufficient quantities of nutritious food available on a consistent basis
   • Food access: having sufficient resources to obtain appropriate foods for a nutritious diet (e.g. transport and financial resources
   • Food use: appropriate use based on knowledge of basic nutrition and care, as well as adequate water and sanitation”[8]
6. Further, that the conditions for food security include:
   • The physical availability of food in sufficient quantities and of sufficient quality produced in and imported into the country
   • Access of all people to food because they have the economic and other resources needed to acquire sufficient nutritious and safe food;
   • Reaching a level of nutritional well-being where all physiological needs are met, thanks to an adequate diet, availability of and access to clean water; and
   • Stable access to foods at all times, without the risk of running out of food as a result of unexpected external circumstances. [9]

Food security exists when:
   • people at all times have both physical and economic access to a diet quality for an active, healthy life;
   • the ways in which food is produced and distributed are respectful of the natural processes of the earth and thus sustainable;
   • both the consumption and production of food are governed by social values that are just and equitable as well as moral and ethical;
   • the ability to acquire food is ensured;
   • the food itself is nutritionally adequate and personally and culturally acceptable; and
   • the food is obtained in a manner that upholds human dignity[10].
We acknowledge that Aboriginal and Torres Strait Islander Australians:

7. Suffer significant health disparity compared to non-Indigenous Australians, particularly in diet-related preventable diseases, quality of life and life expectancy. It has been estimated that chronic diseases account for 80% of the mortality gap between Aboriginal and Torres Strait Islander people and non-Indigenous Australians aged 35 to 74 years[11].

8. Do not have an equal opportunity for health. Nor do they enjoy equal access to primary health care or health infrastructure (including safe drinking water, healthy food supply, effective sewerage systems, rubbish collection services and adequate housing). Without addressing these underlying causes of health inequality, disease-focussed programs are not likely to result in sustainable changes[12].

We commend and support:

9. The Close the Gap Campaign for health equity, along with Australia’s peak Aboriginal and Torres Strait Islander and non-Indigenous health bodies, Non-Government Organisations and Human Rights organisations who are working together to achieve health and life expectancy equality for Australian Aboriginal and Torres Strait Islander peoples, aiming to close the gap on Aboriginal and Torres Strait Islander health inequalities within a generation [13].

10. The commitment to the Close the Gap Statement of Intent for a comprehensive national plan for health and life expectancy equality by 2030, with particular focus on an adequate number of trained health professionals and ensuring supplies of fresh healthy food are available by 2018 [13].

11. The Perth Declaration on Food Security Principles from Commonwealth Heads of Government Meeting in 2011 and remind the Commonwealth of its commitment to use the Principles to improve domestic food security[14].

12. Council of Australian Governments (COAG) commitment to closing the life expectancy gap within a generation, and halving the mortality gap between Aboriginal and Torres Strait Islander and non-Indigenous children under 5-years of age.

13. The food security gains attributed to some Northern Territory National Emergency Response Act 2007 measures including the community stores licensing scheme with consultations identifying improved food quality and increased availability of fruit and vegetables and the impact of the school nutrition program on improving children’s diet [15, 16]. However, evidence regarding the effectiveness of broader intervention measures on sustained improvement to food security is not available.

14. The 2009 COAG National Strategy for Food Security in Remote Indigenous Communities schedule to the National Indigenous Reform Agreement[17]. The Strategy aims to improve food security of Aboriginal and Torres Strait Islander Australians living in remote communities through sustained coordinated action to improve the food supply and nutritious food consumption. Five key actions to improve food security include: (1) National standards for stores and take-aways, (2) A National Quality Improvement Scheme to implement the standards; (3) Incorporating stores under the CATSI Act; (4) a National Healthy Eating Action Plan; (5) a and National Workforce Action Plan[17].

15. Food security responses from a diverse range of government and non-government organisations that have emerged to address the complex issues presented with Aboriginal food insecurity. These responses vary from broad reaching food systems approaches through to micronutrient supplementation for anaemia prevention in children 6-24 months.

We note that:

16. A focus on improving nutrition has largely been omitted from the Close the Gap responses.

17. The Australian government have been working for many years, through policy, to reduce the disparity in food security, and, particularly to reduce the impact of food insecurity and poor health among Aboriginal and Torres Strait Islander peoples [18].

18. Between 2000 and 2010, the National Aboriginal and Torres Strait Islander Peoples in Australia Nutrition Strategy and Action Plan (NATSINSAP) [19] set out a framework for action across all levels of government, in partnership with industry, the non-government sector, and Aboriginal peoples. Building on existing efforts to improve access to nutritious and affordable food across urban, rural and remote communities, NATSINSAP focused on seven key areas:

1. Food supply in remote and rural communities
2. Food security and socioeconomic status
3. Family focused nutrition promotion, resourcing programs, disseminating and communicating ‘good practice’
4. Nutrition issues in urban areas
5. The environment and household infrastructure
6. Aboriginal and Torres Strait Islander nutrition workforce; and
7. National food and nutrition information systems.
17. There was significant progress in some of the priority areas of NATSINSAP despite limited funding. Workforce training and development, and communication, collaboration and dissemination of good practice programs and processes including the Remote Indigenous Stores Takeaway (RIST) project materials [20]. This work formed the basis for subsequent programs and interventions. There was no action in the areas of household food security, or nutrition issues in urban areas. We note that there is no ongoing funding or review of NATSINSAP [21].
18. The Northern Territory National Emergency Response Act 2007 (NTER) implemented a community stores licensing scheme to improve food supply through improved store governance [22].
19. Everybody’s Business, the 2008 House Standing Committee on Aboriginal and Torres Strait Islander Affairs report outlined 33 recommendations for the role and management of community stores and strategies to improve nutrition, transport, food supply and affordability, regulation, policy and interventions [23]. We also note that there has been a limited response to this report [21].
20. Community participation in building appropriate food security initiatives is essential. Programs that do not have a high level of community ownership and support, or operate in isolation and do not address broader structural issues such as poverty or lack of access to nutritious foods do not work [24].
21. The need to focus on maternal and child nutrition, remote, urban and regional food security was again highlighted at The Way Forward for Indigenous Health: A focus on Food and Nutrition conference held in Canberra on 22 April 2010, by the NATSINSAP Steering Committee and the Public Health Association [25].
22. Underlying food security issues facing people in urban, rural and remote areas was a focus for the 2008 National Nutrition Networks Conference which recommended subsidies for infrastructure and transport; and reinforced the need for community consultation and nutrition expertise to implement store licensing in remote communities; and the importance of promoting the value of traditional food systems. Research priorities identified were: monitor the cost, availability and access to nutritious foods and identify actions to achieve equity in access; identify food security issues and impacts on Indigenous peoples; and mapping and reporting of food security [26].
23. Numerous programs and interventions have been implemented to improve nutrition status among Aboriginal and Torres Strait Islander peoples, many with good results and important lessons [11, 27-29].

**Background: Aboriginal and Torres Strait Islander food insecurity**

24. Traditional foods not only contribute to physical health but play a significant role towards cultural, spiritual and emotional health. European arrival severely affected the retention of knowledge, and access to and use of traditional foods [30].
25. Aboriginal and Torres Strait Islander peoples culture is diverse across different states, and between urban, rural and remote areas [31]. This diversity influences Aboriginal and Torres Strait Islander people’s needs and responses to their environment, delivering health services and programs to improve food security or health.
26. Aboriginal and Torres Strait Islander people’s participation in the planning, implementation and evaluation of initiatives in communities is essential [19, 26, 28, 29, 32].
27. The Aboriginal and Torres Strait Islander population is a younger population [33] and as such, services and strategies should be culturally sensitive, geographically and age appropriate, with particular strategies to engage children and adolescents.
28. Food security issues experienced by Aboriginal and Torres Strait Islander peoples vary across the nation [19]. The National Aboriginal and Torres Strait Islander Health Survey showed that nearly 30% of Aboriginal adults worry at least occasionally about going without food, indicating extensive food insecurity, and even greater for people living in remote areas compared to non-remote areas [34].
Aboriginal and Torres Strait Islander people living in remote areas were more likely to report having run out of food (36%) compared to 20% of those living in non-remote areas [35, 36].

29. Food insecurity is higher among Aboriginal and Torres Strait Islander peoples, with prolonged hunger, anxiety about acquiring food and/or relying on food relief more common. Aboriginal and Torres strait Islander people are more likely to report food insecurity, 24% compared to the 5% among non-Indigenous Australians [35].

30. Aboriginal and Torres Strait Islander people over 55 years of age are more likely than non-Indigenous Australians to go without food because they could not afford more in the previous 12 months, 17% compared to 2% [36].

31. Communities living in remote areas may be without food for extended periods due to weather or road conditions. In 2008, the Northern Territory found that 55% of surveyed communities did not have access to any fresh food for extended periods. A third of households surveyed in the 2002 National Aboriginal and Torres Strait Islander Social Survey reported days without money to buy food in the previous two weeks [37].

32. Urban and regional dwelling Aboriginal and Torres Strait Islander families report food insecurity. According to the Victorian Population Health Survey [38], Aboriginal men and women were more than three times more likely to have experienced food insecurity in the previous 12 months compared with their non-Aboriginal counterparts (18% compared to 5%). However, this survey is likely to be an underestimate due to the small sample size and the sampling and survey methodology (CATI). In another community based survey in 2006 in Victoria, 51% of these parents or carers reported running out of food and not being able to buy more in the last 12 months, and about same proportion of families had sought financial advice [39].

33. Food insecurity contributes to the inequality of health status and life expectancy between Aboriginal and Torres Strait Islander and non-Indigenous people in Australia. The ABS estimates that Aboriginal & Torres Strait Islander males born in 2005-2007 could expect to live to 67.2 years, 11.5 years less than the 78.7 years expected for non-Indigenous males. The expectation of life at birth of 72.9 years for Aboriginal & Torres Strait Islander females in 2005-2007 was almost 10 years less than the expectation of 82.6 years for non-Indigenous females[31].There is an earlier onset of dental decay, gum disease and most chronic diseases including obesity, diabetes, high blood pressure and cardiovascular disease. Low birth weight and poor growth in early life are also of concern along with susceptibility to infections and renal disease[32].

34. Aboriginal and Torres Strait Islander Australians are nearly twice as likely to be obese as non-Indigenous Australians[40].

**We highlight the following food security determinants:**

35. Food accessibility (including socioeconomic capacity), food availability (high food costs [32, 41-44] and limited availability of nutritious foods [32, 41-44]) and food use (e.g. inadequate household infrastructure [45]) determines food security.

36. Employment status, education level, home ownership and housing costs play an important role in food security, especially for low-wage workers [41].

37. Aboriginal and Torres Strait Islander people are particularly vulnerable to food insecurity due to poverty [46], or low or inadequate incomes [31, 46] and welfare dependency. Aboriginal and Torres Strait Islander households are 2.5 times as likely to be in the lowest income bracket households as non-Indigenous households.

38. In 2008, approximately 49% of Aboriginal and Torres Strait Islander adults were in the lowest quintile of equivalised gross weekly household income compared with 20% of non-Indigenous Australians.

39. It is estimated that on average, welfare dependent families in urban areas would need to spend up to 40% of their disposable income on healthy food, compared to only 20% of that of an average income earner’s budget [47]. In remote communities in Western Australia, based on 2010 prices, families receiving welfare would need to spend about 50% of their disposable income - compared to 16% on average - to purchase a healthy diet [44].

40. Monitoring of lower income levels and higher food prices mean the proportion of income that is spent on food increases, so consuming a healthy diet is even more unattainable for people living in remote areas. Families in remote communities in Northern Australia are estimated to spend an average 38% of
their income on food and non-alcoholic beverages [48]. This compared to 29.8% for the lowest income Australian households and 13.6% for the average Australian household [49, 50].

41. Aboriginal and Torres Strait Islander peoples are disadvantaged across all socio-economic measures when compared to non-Indigenous Australians [12]. Almost half of all Aboriginal and Torres Strait Islander children were living in jobless families in 2006, three times that of non-Indigenous Australians [51].

42. Access to food stores and transport are important determinants of food security for people living in remote areas. Connectivity between food stores and residential areas significantly challenges food security for people living in urban and regional areas[50]. Transport to food outlets and quality of public transport are strongly and independently associated with food insecurity in urban Australia [52].

43. The variety, quality and cost of nutritious foods including fresh fruit and vegetables are generally much poorer in remote community stores compared to major cities [32, 42-44, 48].

44. Take-away and convenience foods are often readily available for people in remote Aboriginal and Torres Strait Islander communities, usually energy dense and nutrient poor foods, such as soft drinks, sweets and microwaveable or deep fried food [32, 42-44, 48, 53]. This is also for an issue for many Aboriginal people in socioeconomically disadvantaged urban areas and regional centres.[53]

45. Food costs have risen in recent years in Australia, triggering an Australian Competition and Consumer Commission (ACCC) inquiry into the competitiveness of retail prices for standard groceries in July 2008. The ACCC found that a range of domestic and international factors caused this pricing inflation, for example local supply disruptions (natural disasters such as drought and adverse weather conditions) increased fruit and vegetable pricing. Also, the resources boom has increased raw material production costs, for example petrol and fertiliser, however, these reflect international trends. Only 1/20th of the increase in cost was due to increases in gross margins by grocery players. The report recommended a Horticulture Code of Conduct, unit pricing and planning laws [55].

46. The price of healthy food is increasing disproportionately to all foods. For example, in Queensland, between 2000 to 2006, the price of a healthy food basket rose by 42.7% compared to the CPI for food of 32.5% [44] [56].

47. All food costs more in remote areas. Research consistently finds that healthy food baskets cost about 20-43% more in remote areas than in major cities [18, 23, 42, 43, 57, 58]. Mean income levels decline with remoteness, yet food costs rise dramatically compared to major cities.

48. Freight charges, store management practices, and the reduced economies of scale for purchasing and retailing in small remote communities contribute to high food costs in remote areas [32,44,53].

49. There have been numerous calls for strategies to achieve equity in the availability and costs of healthy foods, including by the National Nutrition Networks Conference [26], the Close the Gap National Indigenous Health Equality Summit [59], the National 2020 Summit [45] and the Enquiry into Remote Stores [23].

50. Poor environmental health infrastructure is a major barrier to food security. The elimination of overcrowding and the provision of appropriately designed, constructed and maintained houses are essential for the safe storage, preparation and consumption of food [60, 61]. In Aboriginal communities across Australia only 6% of houses have functioning nutritional hardware (storage space for food, preparation bench space, refrigeration, functioning stove and sink) [61]. Overall, only 6% of households reported not having working facilities for storing or preparing food, and 17% in the Northern Territory.

51. Nutrition education around shopping, food preparation and cooking, budgeting and choosing foods that promote health also impact on food security. However, whilst nutrition education is an effective strategy for improving diet, the effectiveness of such initiatives are dependent on healthy food being available and accessible [52].

52. Twice as many Aboriginal and Torres Strait Islander people than non-Aboriginal people report avoiding some food due to poor dental health, 34% compared to 17% [51].

53. The interplay of disadvantage around food availability, access and use for Aboriginal and Torres Strait Islander peoples residing in urban, rural and remote areas is complex and not yet well understood. It is essential that researchers and practitioners work closely with local community members to understand the issues to ensure appropriate and sustainable interventions.
What is needed to support a food security response?

An adequately resourced and appropriately trained workforce
54. Excellent cross-cultural competency and communication are essential to an effective workforce in this area. A well-supported, resourced and educated Aboriginal and Torres Strait Islander nutrition workforce is essential to attaining food security for Aboriginal and Torres Strait Islander peoples [19]. A trained nutrition workforce is needed to deliver effective interventions [50]. There is a lack of Aboriginal and Torres Strait Islander specific nutrition positions available at all levels [26].

55. Food and nutrition units have been integrated into core Aboriginal Health Worker primary health care training [62], however this training is not available Australia wide.

56. Core food and nutrition units (including a focus on food security) must be integrated into other specialist courses (e.g. environmental health, agriculture, store management, social work) at Health Worker, Bachelor and Post Graduate levels to ensure comprehensive and collaborative work is carried out across the traditional health silos.

57. There is very limited funding, support or opportunity for Aboriginal and Torres Strait Islander people to undertake tertiary level training in nutrition, essential for a sustainable profession with increasing nutrition expertise, e.g. qualified Nutritionists or Dietitians.

58. Existing core training of health professionals in nutrition often fails to include an appropriate Aboriginal and Torres Strait Islander curriculum framework, which leaves non-Indigenous graduates ill-prepared for working with Aboriginal and Torres Strait Islander people and communities [19].

59. The role definition of many health positions working with Aboriginal and Torres Strait Islander communities is often inadequate. Positions are often quarantined to solely work in individual health behaviour change programs, ignoring the fundamental work to address broader food environmental issues that impact on food security. Food security workforce needs to cross many traditional health silos, as well as relying on non-health roles (for example business management). Role definitions should be expanded to include the essential role of food security work.

Food security mapping, monitoring and surveillance
60. Countries are encouraged to map actions for food security. This includes mapping culturally significant food security indicators as well as outcomes [63-65].

61. Australia has an ad hoc and uncoordinated food and nutrition monitoring and surveillance program, and no system [66]. As well, the specific needs of Aboriginal and Torres Strait Islander peoples living in urban, rural and remote Australia have not been sufficiently included in national data collection to determine dietary outcomes and other indicators of food security. The Nexus Report outlines recommendations for an ongoing, regular, comprehensive and coordinated national food and nutrition monitoring system inclusive of indicators of food security [67].

62. The 2011 to 2013 Australian Health Survey is currently collecting information on Aboriginal and Torres Strait Islander peoples self-reported diet; physical activity and smoking; and measured indicators of chronic disease, such as obesity, blood pressure, blood sugar and cholesterol levels; as well as some indicators of nutrition status, such as iron and vitamin D levels [68]. Although this is welcomed, it should be considered the first benchmark for the regular ongoing monitoring and surveillance system.

63. The Coordinator-General for Remote Indigenous Services Act 2009 was established for the purposes of providing a Coordinator for Remote Indigenous Services who will monitor, assess, advise in relation to, and drive progress towards achieving the Closing the Gap targets in those specified locations [69]; Closing the Gap targets are the 6 targets agreed to in the National Indigenous Reform Agreement [69].

64. The Remote Indigenous Services Act 2009 requires a monitoring and assessment system [69] with bi-annual reports. The fifth biannual report in 2011 states that preventative health measures will be reported on in the sixth report [70].

We resolve to:

65. Provide continuing professional development opportunities for members of DAA, PHAA and Australian Red Cross that enhance the knowledge and skills of non-Indigenous public health practitioners, Dietitians and Nutritionists around the nutrition, cultural and related health needs of Aboriginal and
To address food security, all Australian Governments are encouraged to work in partnership with local communities to:

66. Work with governments, non-government organisations, industry and the community to address the issues of food insecurity.

67. Continue to build national, coordinated, strategic, cross sectoral approaches to address food security, with priority action for all Aboriginal and Torres Strait Islander people. As a priority, evaluate and continue implementing the COAG’s Food Security in Remote Indigenous Communities strategy [17].

68. Provide leadership to establish a long-term overseeing group (inclusive of Aboriginal and Torres Strait Islander representatives) to drive the development of partnerships and coordinate the implementation of interventions to improve food and nutrition security.

69. Urgently address issues contributing to the unacceptable level of food insecurity experienced by Aboriginal and Torres Strait Islander Australians living in remote Australia, through economic and policy interventions to improve the supply, affordability and availability of nutritious foods to achieve equity in the cost of healthy food. These include financial Instruments such as taxation and food subsidies.

70. Urgently address issues contributing to the unacceptable level of food insecurity experienced by Aboriginal and Torres Strait Islander Australians living in urban and regional Australia, through economic and policy interventions to improve affordability and availability of housing, public transport and nutritious food as well as improving socioeconomic status for Aboriginal and Torres Strait Islander people.

71. To address food security, Local Governments must facilitate local solutions to improving supply of and access to nutritious food in their Municipal Plans.

72. Urgently address issues contributing to the unacceptable level of food insecurity experienced by Aboriginal and Torres Strait Islander Australians living in remote Australia, to improve supply chain efficiencies and transport logistics to improve the quality, safety and availability of nutritious foods. This requires strategic partnerships with the food industry.

73. Urgently address issues contributing to the unacceptable level of food insecurity experienced by Aboriginal and Torres Strait Islander Australians living in remote Australia through a reconceptualisation of the role of stores in remote communities from a commercial profit making food transaction activity to an essential community service hub with appropriate funding and staffing.

74. Urgently address issues contributing to the unacceptable level of food insecurity experienced by Aboriginal and Torres Strait Islander Australians living in remote Australia, to improve gaps in social status (focussing on areas of employment, adequate income and welfare, supporting mechanisms such as voluntary income management).

75. Develop and resource intervention models that address child and maternal health and include a focus on nutrition and growth in this area. Specifically, investing in the first 1000 days, from conception to 24 months which can have a profound impact on children’s ability to grow and learn which has long term effects on society’s health and prosperity.

76. Establish an ongoing national food and nutrition monitoring system as recommended in the Nexus Report, [67] which addresses the needs of Aboriginal and Torres Strait Islander peoples and includes data on food security. Integrate findings into reports such as the bi-annual reports for the Remote Indigenous Services Act 2009 - requires a monitoring and assessment system [69].

77. Disseminate the 2011-13 Australian Health Survey findings through Aboriginal and Torres Strait Islander networks and work with communities and key stakeholders to address the findings. Ensure comparability of data between Aboriginal and Torres Strait Islander groups and non-Indigenous Australians.

78. Ensure actions resulting from the national food pricing inquiry are inclusive of the specific needs of Aboriginal and Torres Strait Islander people living in urban, rural and remote areas [26].

79. Collaborate with experts to improve the current housing policy and housing infrastructure inadequacies that contribute to food insecurity in Aboriginal and Torres Strait Islander homes.
80. Promote research into food security for Aboriginal and Torres Strait Islander people, including people living in major urban centres, by highlighting food security themes for conferences, professional development workshops and association publications in accordance with NHMRC [46,72].

81. Support initiatives (including cadetships) for the employment and training of Aboriginal and Torres Strait Islander people to strengthen the food and nutrition expertise, skills and knowledge of Aboriginal and Torres Strait Islander peoples [19, 26].

82. Implement the cultural respect framework to ensure Aboriginal and Torres Strait Islander health workers are valued for local nutrition knowledge around cultural processes and traditional knowledge [26].

83. Work and continue to build across and within sector strategic collaborations and partnerships to address food security - including health, education, housing, human services, employment and training, social services, child protection, all levels of government and between government, industry and non-government organisations - to address food security in urban, rural and remote locations.
Related PHAA policies
Aboriginal and Torres Strait Islander Health
Food and Health
Food and Nutrition Monitoring and Surveillance
Available on the PHAA website at: www.phaa.net.au

Related DAA policies/submissions
National Human Rights Consultation, June 2009.
Available at www.daa.asn.au > For Health Professionals > DAA Submissions > 2009 DAA Submissions

Related Red Cross policies/submissions
Strategy 2015
Food Policy
Diversity Policy
Gender Equity Policy
Advocacy Policy
Aboriginal and Torres Strait Islander Reconciliation Action Plan
Submissions to the National Food Plan Issues paper 2011 and White Paper 2012; Department of Agriculture Fisheries and Forestry
Submission to the House of Representative Standing Committee on Aboriginal and Torres Strait Islander Affairs Inquiry into Remote Stores 2009
Available at: www.redcross.org.au

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