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**SOUTH AUSTRALIAN SUBMISSION**  
**March 2009**

**HOUSE OF REPRESENTATIVES STANDING COMMITTEE ON ABORIGINAL  
AND TORRES STRAIT ISLANDER AFFAIRS INQUIRY INTO REMOTE  
COMMUNITY STORES IN ABORIGINAL AND TORRES STRAIT ISLANDER  
COMMUNITIES**

**1. Introduction**

South Australia (SA) welcomes the inquiry into community stores in remote Aboriginal and Torres Strait Islander communities. The terms of reference to this inquiry raise very important equity issues, as stores play a critical role in whether Aboriginal and Torres Strait Islander people in remote communities have a chance of achieving good health and other outcomes.

In South Australia, there are various situations in which stores servicing remote Aboriginal communities exist. For example there are:

- stores in remote Aboriginal communities (i.e. Yalata, Oak Valley and in the APY Lands in the north west of the state);
- community managed stores in towns with significant Aboriginal populations (i.e. Oodnadatta);
- privately owned stores in remote towns with significant Aboriginal populations (e.g. Coober Pedy and Marree); and
- areas where Aboriginal people live but there are no local stores and residents rely on transport to another town that does have a store (e.g. Nepabunna, Raukkan).

To support achievement of optimal health, SA considers that all stores in remote Aboriginal communities need to carry a good range of nutritious, good quality, affordable and acceptable foods.<sup>1</sup> (some examples of programs in SA to support the supply of and demand for healthy food in remote Aboriginal communities are provided at Attachment 1). However, this in itself will not solve all nutrition-related health problems. While a good food supply is essential, it is not sufficient to ensure that people eat well. Many other factors affect people's food consumption and all these factors need to be addressed in a coordinated way within a broader social context. The model developed by the NSW Centre for Public Health Nutrition is useful in considering food supply, food access and food security (Attachment 2).<sup>2</sup>

The scope of issues associated with food security, on both the supply and demand side, fall within the responsibility of a range of government portfolios such as health, housing, welfare, transport and business and also within various levels of government. This underlines the importance of coordinated, multi-sector strategies and interventions to effectively address food insecurity and malnutrition. There needs to be operational linkages between food security and nutrition interventions and efforts at poverty reduction and promotion of social and economic development.

An example, which illustrates this cross-sector responsibility, is the evidence that shows that the adequacy of a person's housing infrastructure can impact on their food and nutrition purchases and choices. Statistics show that an alarmingly low proportion (six percent) of the

<sup>1</sup> Good nutrition is beneficial to a person's health in many ways and is essential for the following: the healthy growth and development of infants, babies, children and adolescents; the maintenance of good health for adults and elderly people; the prevention and management of risk factors for chronic disease, such as impaired glucose tolerance, hypertension and hyperlipidaemia; the prevention and management of chronic diseases such as cardiovascular disease, type 2 diabetes, renal disease and osteoporosis; and good oral health. SA recognises the high burden of illness, disease and premature death experienced by Aboriginal people and that improving their nutritional status is a key factor in improving their health and reducing the seventeen year life expectancy gap in health status between Aboriginal and non-Aboriginal people.

<sup>2</sup> Rychetnik, Webb, Story & Katz (2002) *Food Security Options Paper*, NSW Centre for Public Health Nutrition.

4343 houses surveyed between 1999 and 2006 in remote communities (13 percent in SA) met criteria to store, prepare and cook food.<sup>3</sup> In addition, the Nganampa Health Council has reported that in December 2007, a survey of 621 houses in the APY Lands showed that only seven percent met the criteria to store, prepare and cook food. For these reasons, many Aboriginal people in remote areas use stores as takeaway food shops, seeking food that is ready to eat or can be easily heated in a microwave oven provided in the shop.

Most stores in remote Aboriginal communities in SA are community managed, incorporated as a separate body or run as an activity through the community council entity.

Community stores are usually managed by a store committee whose membership is drawn from the community. While these committees have responsibility for managing the stores, a lack of technical expertise and conflicting demands can lead to inappropriate decisions that run counter to the best interests of the business. For example:

- non-Aboriginal managers who have the expertise that can be lacking in the committees often run the stores and this can lead to a lack of real accountability by the manager to the committee and a lack of transparency as to how the store is operated;
- inappropriate pricing of stock and poor decisions regarding the type of stock ordered;
- pressure to employ inappropriate people in the store;
- pressure for the stores committee to redistribute store profits rather than reinvesting them in store infrastructure or lower food prices.

Access to credit can be an issue for people in remote communities. In these areas 'book up' is offered by some stores and other traders for the purchase of goods and services: consumers are able to buy the goods now and pay later. Traders offering book up often hold the person's bank debit card and also their pin number as security to guarantee repayment, alternatively the consumer may agree to a Centrepay transfer or other arrangements.

Although book up can be the only or most convenient way to buy goods on credit or get cash advances for people in remote communities there is a range of problems associated with it including high fees, lack of transparency, no accountability, lack of flexibility and fraud<sup>4</sup>.

While the practice of a trader holding a customer's key card and PIN number is not illegal it does constitute a breach of the merchant agreement between the bank (as issuer and owner of the card) and the merchant (trader).

To date, it does not appear that any of the banks have taken issue with any traders engaging in this practice even when it has been brought to their attention.

A similar issue exists with some traders who provide Centrepay facilities. In these cases they provide goods, which are to be paid for by means of Centrepay deductions. Unfortunately they also retain the client/customer's personal identification that allows the trader to repeat the transaction at a future time without necessarily obtaining the approval or consent of the consumer. Other practices with Centrepay involve charging a fee for use of the facility when it is meant to be fee free for customers; using it as a pseudo cash advance facility and charging higher prices.

There is evidence that a significant proportion of Anangu from the APY Lands 'book-up' at 'private' stores (even booking up car purchases). This means that large debts are accrued, based on items that are not deemed 'essential', such as food. This is exacerbated where Anangu utilise Centrepay without disclosing the existence of private book up arrangements. In usual circumstances Centrepay will limit the value of deductions made from a customer's benefits to ensure that they retain some disposable income to meet ongoing daily living requirements. If the existence of other book up arrangements is not disclosed and the amounts deducted by the trader to satisfy those book up obligations is excessive then often

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<sup>3</sup> Torzillo PJ, Pholeros P, Rainow S et al. The state of health hardware in Aboriginal communities in rural and remote Australia. *Aust NZ J Public Health* 2008;32(1);7-11. The hardware assessed included: including storage space for food, preparation bench space, functioning stove and sink.

<sup>4</sup> Australian Securities and Investment Commission 2005 Dealing with Book Up: A Guide p4

Anangu are left with little or no money on the next payday. This problem can then be compounded by bank fees that are charged for making enquiries on account balances. These fees can also lead to accounts moving into overdraft, because of the low or non-existent balance caused by Centrepay and/or book up deductions. If accounts move into overdraft then additional fees are incurred and the account goes further into debit. This does not allow for any manner of money management to be undertaken, and can leave people in a cycle of consistent and growing debit to stores and banks. There are a number of adverse impacts created by these practices - many of which have a direct impact on the ongoing viability of community stores. For example, in South Australia there are a number of privately-owned stores in Mintabie that offer both book up facilities, where both key cards and PIN numbers are retained, as well as Centrepay facilities.

There is evidence that Anangu utilising these facilities at Mintabie come from all communities on the APY Lands and as far west as Docker River and Oak Valley and Ceduna in the south.

The practice of book up, where both key card and PIN number are retained by the trader, restricts affected consumers to making all future purchases from that particular trader as they have no other means of accessing their income. The effect of this is that consumers are no longer able to make purchases from their own local community stores.

In the case of the Mintabie stores these practices have had the most dramatic impact on the nearest community stores of Indulkana, Mimili and Kaltjiti. The reduced turnover has significantly impacted on the viability of the Indulkana community store in particular.

Consumers who live in more distant locations are also compelled to travel to Mintabie to access their funds. This results in extremely inefficient expenditure on fuel, with many having to travel several hundred kilometres over poor roads and often in fuel-inefficient vehicles. The alternative is to use the Money fax system which is a type of secondary financial system where a customer can make purchases from a local community store only if approval is 'faxed' through from the trader who holds the key card and PIN number.

The fax system is common across the APY lands but lacks transparency and good record keeping. As well as this, it often results in significant fees being incurred on consumers - again reducing the amount of disposable income that can be spent on food or other essentials.

It is worth noting that the Anangu Pitjantjatjara Yankunytjatjara Executive, Nganampa Health and the NPY Women's Council have all sought to end the practice of book up where both the key card and PIN number are held due to the problems that it causes.

In South Australia the Mai Wiru Stores Policy sets standards on how participating stores should operate in the Anangu Pitjantjatjara Yankunytjatjara Lands including how they operate consumer accounts<sup>5</sup>.

Notwithstanding this policy, the stores on the APY Lands operating under the Mai Wiru Stores Policy do not offer credit or book up. Arguably this contributes to the high number of people from the APY Lands, and adjacent areas, who use private stores in the region to obtain goods. Unfortunately, there is considerable anecdotal and other evidence to suggest that the practices of at least some traders could not be considered 'good practice' and in some cases could even be considered 'unconscionable conduct'.

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<sup>5</sup> The policy requires that where a store provides customers with some form of in-store credit (e.g. purchase on account through a book-up/book-down system), it must maintain, and provide customer access to, details of their credit history and amounts owing. Stores offering in-store credit must: • provide itemised receipts at time of purchase and when any payments are made; • keep an account book which is available for inspection by the customer, an advocate acting on behalf of the customer and a relevant law enforcement or regulatory authority (e.g. police officer or consumer affairs official); • not allow third parties to access customer's accounts (e.g. to obtain cash advances or to purchase goods or services) unless authorised by the customer; • ensure that terms and conditions relating to in-store credit will be clearly displayed and explained to customers before starting a credit account.

Whilst there may be some problems inherent in providing credit at community stores, a complete ban on credit can create significant difficulties for people living on minimal incomes. Controlling book up can provide consumers with a service whilst limiting the size of debts and reducing the store's exposure to recoverable debts. Book up can be controlled by: limiting book up or credit to certain groups for example elderly pensioners on their off pension weeks; limiting the amount of credit such as \$20-\$50 per fortnight with debts to be cleared each pay and no further book up permitted until the debt is paid; limiting book up to essential food, hygiene and cleaning items<sup>6</sup>.

Controlling book up within community owned stores is potentially easier than controlling it in privately run stores. The Australian Investment and Securities Commission has produced a guide<sup>7</sup> dealing with book up, which provides guidelines that should be followed in respect to managing book up, for example maintaining appropriate records. However, enforcement of these standards is extremely difficult in remote areas where consumers are often unaware of their rights and where visits from regulatory authorities are infrequent.

The high use of stores outside of communities not only has a negative impact on the financial standing of individuals and families who may have to pay unreasonably high prices for goods and access to credit, but also on the viability of community stores which do not get this custom.

In South Australia, Families SA, Department of Families and Communities has developed a simple but effective strategy, "Casual Credit" (named by local residents). In this scheme everyone, regardless of income or their sources of income, e.g. Centrelink, CDEP, wages or salary is encouraged to pay money to the store every week, generally around \$50. People then build up their own credit at the store, which can be accessed on off pay weeks. The store sets its own rules around casual credit, in that only food can be accessed from the store (no alcohol or cigarettes) and no credit is given in money. Since this scheme has been in place, the Coober Pedy Families SA District Centre rarely gets a request for food assistance from the residents of Oodnadatta.

## **2. Response to Terms of Reference**

### **2a. Food supply, quality and cost**

The South Australian Office of Consumer and Business Affairs (OCBA) has conducted a number of price surveys at stores on the APY lands and other privately owned stores at Mintabie which adjoins the APY Lands and the Nganampa Health Council regularly collects data as part of the Mai Wiru initiative.

An initial survey conducted in eight community stores on the APY Lands in 2005 found that only 35% of prices marked on various products accurately reflected the prices charged at the checkout, with almost all being to the detriment of the consumers (i.e. the scanned or charged price was higher than the advertised price). This figure was considerably worse if the Pipalyatjara store was excluded as the accuracy rating would have been just 26%: this store was run by an experienced retail manager.

After the survey OCBA provided some professional development training for store managers and Mai Wiru continued a recruitment program for experienced store managers. As a result, follow up surveys conducted in 2007 showed significantly improved accuracy in matching advertised prices with those actually charged. Accuracy ratings improved to approx 80% with only minor variations in those inaccuracies. Variations also were divided roughly equally between being in favour of consumers and against them.

The 2007 price monitoring showed that, on average, prices in the APY Lands and at Mintabie were some 42.25% higher than for the same items at Woolworths in Adelaide. A market basket survey undertaken in October 2008 as part of the Mai Wiru Stores Policy initiative indicated that in October 2008 the cost of food for a family of six for two weeks cost \$469.41

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<sup>6</sup> Ibid p50

<sup>7</sup> Australian Securities and Investment Commission 2005 Dealing with Book Up: A Guide

in a major supermarket in Alice Springs; the same basket cost between \$592.19 and \$740.81 on the APY Lands.

The sale of products beyond their 'best before' and 'use-by' or 'expiry' date is also an issue for both health regulators and consumer watchdogs.

Two initiatives that have taken place to assist in the affordability of food across stores in the APY Lands include a reduced rate for electricity in community stores and the introduction of "group freight bookings" for all the stores to reduce freight costs. However, neither of these initiatives has assisted in reducing the cost of food in the stores to a level comparable to the cost in capital cities.

Recent analysis of freight arrangements to remote SA communities by the SA Department of Transport and Energy Infrastructure identified the challenges small communities face in effectively establishing, managing and monitoring effective freight arrangements. One suggestion is that a centralised freight authority be considered to assist SA's remote communities and that this would need to be done against a backdrop of broader road and other infrastructure requirements. Further analysis would be required and this may also need to look at integrating freight to non-Aboriginal communities depending on the spatial relationships and transport routes.

SA considers that the store is an essential service in a remote community and the cost of healthy food in remote communities should be similar to that in metropolitan areas. There is a need for research to identify the best way to deliver this, be it through subsidies for healthy foods, freight, staff salaries, utilities or some other mechanism. These kinds of issues are currently being examined by the National Preventative Health Taskforce.

## **2b. The effectiveness of the Outback Stores model, and other private, public and community store models**

South Australia considers the Outback Stores model has some key positive features:

- it is a strong business model, with standardised systems, managed by people with significant retail experience;
- a core component of the model is the promotion of good nutrition, with two nutritionists currently employed by the company. The Outback Stores Nutrition Policy has been strengthened in the Northern Territory (NT) by a Memorandum of Understanding (MoU) between Outback Stores and the NT's Department of Health and Families. Under the MoU, nutritionists from both organisations collaborate on promoting supply and demand for healthy food in communities where the store is managed by Outback Stores;
- the model focuses on employment of Aboriginal people;
- the model focuses on community engagement and wellbeing;
- the model involves comprehensive training of store managers (including a health and nutrition component) and replacement of managers when they are on leave;
- "point of purchase" systems implemented in all Outback Stores include scanning equipment and a "grocery manager" program. This allows collection of food sales data to evaluate improvements in sales of desirable foods such as vegetables, fruit, lean meat, wholegrain cereals and reduced fat milk; and reduction in sales of less desirable items such as sugary soft drinks and confectionery; and
- the model focuses on tobacco control, which SA Health commends given the high rates of smoking in Aboriginal communities and its negative effect on health.

In SA, the Nganampa Health Council, in conjunction with the NPY Women's Council, has led the development of a stores policy (the Mai Wiru Stores Policy) in the APY Lands and with

Australian Government funding has supported policy implementation. This has included establishment of a "Stores Policy Support Unit" within Nganampa Health, which employs a retail manager and nutritionist.

The Stores Policy covers issues of nutrition, consumer rights, payment methods, employment, health standards, store management and issues associated with transporting goods to remote areas.

While the principles behind Mai Wiru are sound, over the four years of the program, the project has had limited success in reducing food cost, for example the Amata community agreed to remove coca-cola from the community store – a product that had been very popular. There has been an improvement in the range of healthy food and reduction in some of the least healthy foods stocked in stores. Food quality is monitored with remedial action taken as required. There has been some information suggesting higher sales of some healthier food products. SA Health has supported an initiative to further assess the change in the nature of food sold with results expected later in 2009. It is not possible to accurately determine changes in food consumption. It should also be noted that the general increase in food costs partly due to the drought may have offset any reductions gained through the Mai Wiru initiatives.

Challenges to implementing the policy include inadequate staffing in the Stores Policy Support Unit, the large geographic area to be covered by the Policy, high turnover of store managers, lack of relief store managers, lack of housing for store managers, lack of funding for store infrastructure (such as "combi-ovens" for takeaway food and display cabinets for fresh produce) and the need to engage Aboriginal communities one by one. In addition, commitment to Mai Wiru by communities is voluntary and has not been adhered to consistently.

Other remote SA communities do not have a similar policy or a systematic approach to implementation.

Other remote community stores models of note:

- the Arnhem Land Progress Association (ALPA), an Aboriginal-owned benevolent organisation which provides benefits to its members from the successful operation of community retail stores;
- the "Department of Aboriginal and Torres Strait Islander Policy" (DATSIP) model, a partnership between Queensland Health and DATSIP which manages six retail stores serving Aboriginal communities in Queensland.

SA considers that making a profit should not be the focus of stores in remote Aboriginal communities unless all fundamental needs are addressed, including: food provision at prices comparable to state capitals or regional centres; adequate storage and display equipment; freight; promotion of healthy food; staff training; and monitoring of sales.

Fundamentally, stores in remote Aboriginal communities should be viewed differently to shops in metropolitan/suburban commercial shopping centres, but rather in a similar way to school canteens, which have a primary role of ensuring that children have access to healthy food. SA through SA Health has invested in supporting improvements to the food supply in remote Aboriginal communities, as well as increasing demand for healthy food.

It is difficult to accurately measure the success of the various range of store models in SA, as comprehensive data is not currently available on all relevant issues including:

- the range and cost of food available in SA stores;
- store sales data;<sup>8</sup>
- employment of Aboriginal people in stores;

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<sup>8</sup> Nganampa Health collects some store sales data, but this is hampered by lack of electronic scanning equipment, so for example there is inadequate data on fruit and vegetable sales and the tools developed by RIST to monitor sales can not easily be used.

- food consumption of South Australian Aboriginal people (including breastfeeding rates); and
- biomedical data on both children and adults, for example iron, Vitamin A, folate and serum carotene status, levels of anaemia, children's growth (i.e. weight for height in children).

In summary it appears that there is no one model that can be applied successfully to all community owned stores and that a range of options is needed to address the peculiarities of each community store.

The fundamental question that needs to be asked each time is what is the imperative for the community store to exist. In many cases, including almost all of those in the APY Lands in SA, the community itself would almost certainly not exist if the community store was not present as a source of food supply, storage and means of preparation. Without a store the residents would undoubtedly have to move to an area where food was more readily available.

The size of many communities does however mean that the community store is not a viable entity in a normal commercial sense. To achieve profitability or sustainability for these stores would require them to either charge manifestly excessive prices, or they would need to be heavily subsidised to ensure that healthy foods were affordable.

These stores could be run either privately or by the communities using either in-house or contract labour. The most significant disadvantage of private ownership is the need for profit and the return on capital that would be repatriated outside of the community rather than reinvested within the community. The multiplier effect of that leakage from the local economies can be quite significant.

Under an outback stores model profits are channelled back into the local community but it is yet to be seen whether the stores can survive in the long term without financial support from the federal government

## **2c. The impact of these factors on the health and economic outcomes of communities**

### ***Health Outcomes***

There is much data available detailing the poor health of Aboriginal people.<sup>9</sup> There is also some data available about the underlying poor food intake that is a key factor in poor health.

For example, data from the "2004-05 National Aboriginal and Torres Strait Islander Health Survey", which is the largest health survey of Indigenous Australians conducted by the Australian Bureau of Statistics (ABS), revealed that 20 percent of people in remote areas reported no daily fruit intake compared with around 12 percent in non-remote areas. It reported a greater disparity for vegetables, where 15 percent of people in remote areas reported no usual daily intake compared with only two percent in non-remote areas.<sup>10</sup>

Other relevant data shows that Indigenous adults in remote areas have higher levels of food insecurity and poorer food intake than Indigenous people living in non-remote areas.<sup>11</sup> The data showed that those living in remote areas:

- were significantly more likely than those in non-remote areas to report that they had run out of food in the previous 12 months (35 percent compared with 18 percent);
- reported higher rates of salt consumption than those living in non-remote areas; and
- were more likely to drink whole or full cream milk than those in non-remote areas.

<sup>9</sup> See for example. AIHW, ABS. The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008

<sup>10</sup> AIHW, ABS, The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008, page 146.

<sup>11</sup> 4722.0.55.006 - Overweight and Obesity - Aboriginal and Torres Strait Islander people: A snapshot, 2004-05 <http://www.abs.gov.au/ausstats/abs@.nsf/mf/4722.0.55.006?OpenDocument#>

In recent years, a number of reports have highlighted the importance of addressing community food supply as a critical aspect of improving the health of Aboriginal and Torres Strait Islander people. These reports make recommendations with respect to community stores and food supply in remote areas that may be of interest to the House of Representatives Standing Committee on Aboriginal and Torres Strait Islander Affairs as part of this Inquiry. Details regarding reports that may be relevant can be found at Attachments 3 – 6.

### ***Economic Outcomes***

It is indisputable that Indigenous consumers in remote parts of Australia are in a vulnerable and seriously disadvantaged position.

A state-wide survey of food variety and costs in 1999<sup>12</sup> showed, consistent with more recently collected data in other states<sup>13</sup>, that the cost of food, for valid reasons (including freight charges and the buying power of shops), increased with remoteness. This means that those on low incomes (often social security incomes) have food costs that represent a higher proportion of their income than the same food basket for people in non-remote areas.

In South Australia's remote communities (as in other remote communities across the nation) inadequate infrastructure and small community size seriously hinders competition. There is generally only one store per town, which means that the operator is virtually able to set his/her own prices and there is a lack of competition from other suppliers.

Where there is more than one supplier there can be practices related to the use of book up and Centrepay practices that can have significant negative impacts on those using the services.

With low levels of financial literacy a major problem as well, many Indigenous consumers in remote areas do not understand the bank fees being imposed on each transaction they make. One immediate, relatively easy remedy for this problem could be to offer fee free accounts to people in remote areas (fee free accounts are currently available in Australia for students).

Although non-Aboriginal people manage a significant proportion of remote stores, ideally they do provide an employment opportunity for community members and the associated training that can equip people with transferable knowledge and skills.

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<sup>12</sup> <http://www.publications.health.sa.gov.au/cgi/viewcontent.cgi?article=1001&context=food> (Note: Remote Aboriginal communities were not surveyed.)

<sup>13</sup> See for example Queensland Health's submission to the ACCC 2008 Inquiry into Grocery Prices <http://www.accc.gov.au/content/index.phtml/itemId/810417>



**Current SA initiatives that promote the supply of and demand for healthy food in remote South Australian Aboriginal communities.**

### **Healthy Ways**

*Healthy Ways* is an SA initiative funded by *Australian Better Health Initiative* funding. It aims to improve the nutritional status of Aboriginal women of childbearing age, and Aboriginal babies and young children. Under this initiative, "Aboriginal Healthy Ways Promotion Officers" and dietitians work together and consult with the Aboriginal community to develop and implement programs that meet the community needs. Among other things, the initiative assists community stores to provide and promote healthy food and improve the types of food provided in stores, schools, pre-schools and other settings. It also runs community programs, for example those to promote breastfeeding; education around transition from breastfeeding to solids; and cooking classes. Staff working for the *Healthy Ways* initiative liaise with staff working for community agencies and service providers.

### **Workforce development for Aboriginal Health Workers**

SA is committed to workforce development for Aboriginal Health Workers across SA (capacity building) and focuses on supporting the provision of training in good nutrition, physical activity, promotion of healthy weight and prevention of chronic diseases.

### **Support for Mai Wiru Stores Policy (APY Lands)**

SA has provided funding to support the implementation and evaluation of Nganampa Health Council's Mai Wiru Stores Policy, complementing Australian Government funding for this purpose.

### **Remote Indigenous Stores and Takeaway Project (RIST)**

SA, along with Queensland, New South Wales, Northern Territory, Western Australia and the Australian Government, supported the RIST project, which among other outcomes, has produced a set of national resources to monitor remote store turnover and support the availability and promotion of a healthy food supply in remote stores. Of note, the RIST project included liaison with the *Outback Stores* initiative that resulted in Outback Stores Pty Ltd employing a nutritionist. Both the *Outback Stores* initiative and the Federal Government's Northern Territory Intervention policy have taken into consideration work undertaken as part of the RIST project.

### **Australian Indigenous Health/InfoNet website**

SA, along with other jurisdictions, supported the establishment of the nutrition component of the national Australian Indigenous Health/InfoNet website. This is a valuable location of information and resources to support nutrition improvement in Aboriginal communities. The Health/InfoNet website can be visited at the following address: <http://www.healthinonet.ecu.edu.au/>

### **Freight logistics**

The SA Department of Transport and Energy Infrastructure works with remote Aboriginal communities to review their current freight systems and identify programs that may assist them in improving the efficiency of freight services and reduce costs.

**School breakfast programs support**

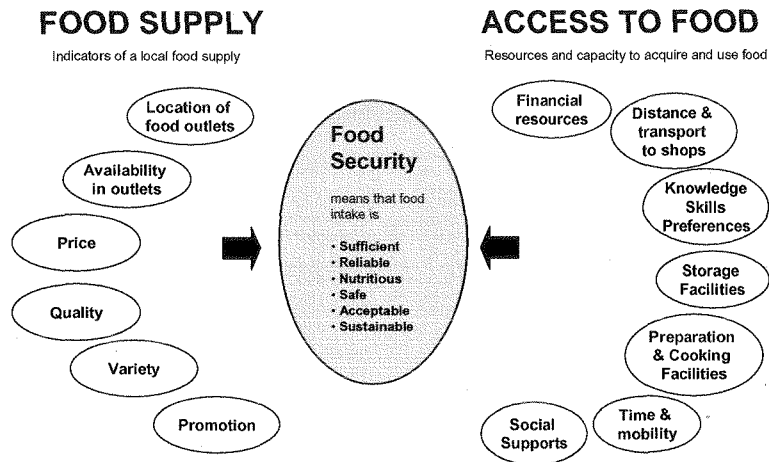
SA Health provides advice and support for school breakfast programs across SA, including those that exist in remote Aboriginal communities: survey to establish the number, location and nature of school breakfast programs in SA is being undertaken.

**Environmental health services**

Environmental health services are provided to communities in the unincorporated areas of SA. This includes inspections of community stores in these areas at least twice a year for compliance with SA's *Food Act 2001*. Where breaches are detected, remedial action is required.

Figure 1

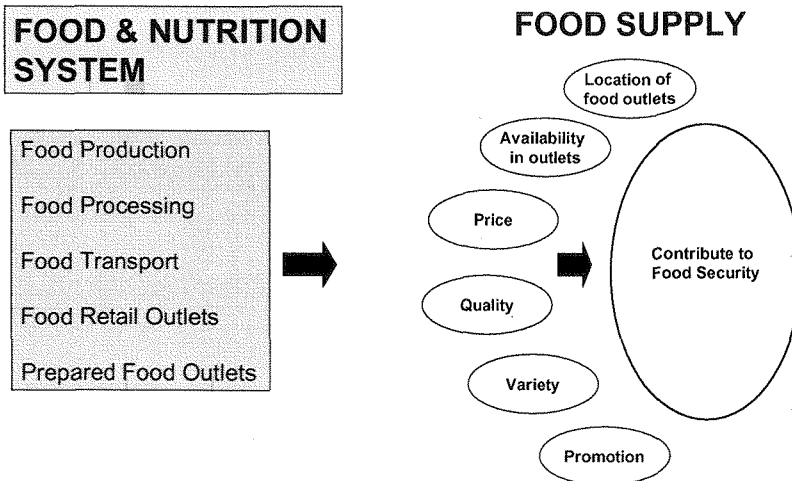
Determinants of Food Security



Rychetnik, Webb, Story & Katz (2002) *Food Security Options Paper*, NSW Centre for Public Health Nutrition. (Adapted from a model by McComb, Webb & Marks, 2000)

Points of intervention to improve food supply

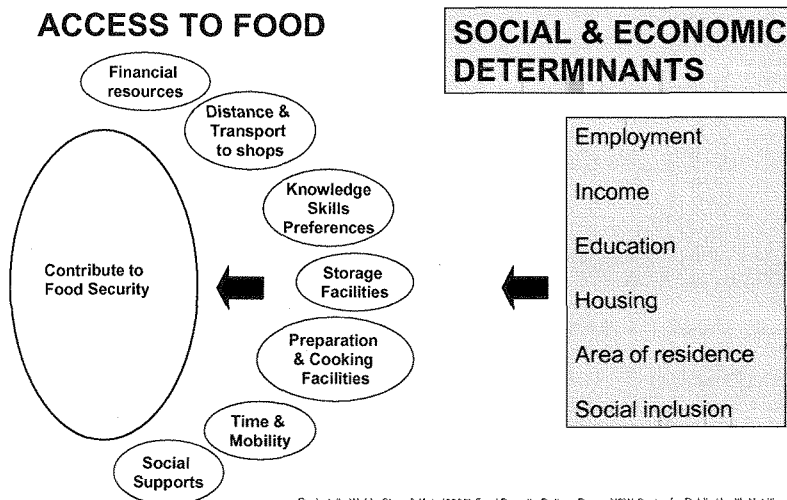
Figure 2



Rychetnik, Webb, Story & Katz (2002) *Food Security Options Paper*, NSW Centre for Public Health Nutrition.

Figure 3

Points of intervention to improve access to food



Rychetnik, Webb, Story & Katz (2002) *Food Security Options Paper*, NSW Centre for Public Health Nutrition.

### ATTACHMENT 3

The following is a list of reports/resources that may be of interest to the House of Representatives Standing Committee on Aboriginal and Torres Strait Islander Affairs as part of this Inquiry:

- 1) Outcomes of the National Obesity Taskforce - Aboriginal and Torres Strait Islander Workshop, held in Adelaide, 10 and 11 September 2003 (summary of outcomes listed at Attachment 4).
- 2) Remote Indigenous Stores and Takeaways Project – Final Report, June 2008 (the recommendations of this report are listed at Attachment 5).
- 3) National Nutrition Networks Conference, Alice Springs, March 2008 (recommendations of the conference can be found at Attachment 6 and at the following website:  
<http://www.ruralhealth.org.au/conferences/nnnc2008/NNNCrecommendations.pdf> ).
- 4) National Indigenous Health Equality Targets. Outcomes from the National Indigenous Health Equality Summit, Canberra, March 18-20, 2008 (outcomes of this summit can be found at the following website:  
[http://www.hreoc.gov.au/social\\_justice/health/targets/index.html](http://www.hreoc.gov.au/social_justice/health/targets/index.html) ).

Health Status Targets outlined in this document include: *More than 90% of Aboriginal and Torres Strait Islander families can access a standard healthy food basket (or supply) for a cost of less than 25% of their available income.*

- 5) National Rural Health Conference, 2007 (priority recommendations of this conference can be found at the following website:  
[http://9thnrhc.ruralhealth.org.au/recommendations/docs/PRIORITY\\_RECOMMENDATIONS.pdf](http://9thnrhc.ruralhealth.org.au/recommendations/docs/PRIORITY_RECOMMENDATIONS.pdf) )
- 6) Australian Securities and Investments Commission (2005) Dealing with Book Up: A Guide  
<http://www.fido.gov.au/bookup>

<b>National Obesity Taskforce - Aboriginal and Torres Strait Islander Workshop, Adelaide, 10 and 11 September 2003</b>
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Note: recommendations were made in a five action areas, but only those relating to the "Socio-economic status and food supply" action area are listed below.

Principles to underpin recommended actions:

- Access to healthy, good quality, affordable food, and safe drinking water is a basic human right
- Stores are essential services as well as enterprises

## RECOMMENDED ACTIONS

### 1. Governance

- Educate and increase awareness of regulations and practices (eg fair trading, Food Act, registrar of Aboriginal corporations, state/territory registrars meet Australian Securities and Investments Commission (ASIC) requirements);
- Apply and enforce regulations across the board with no exemptions for remote stores;
- Retail management and training for store managers/owners, and Develop and implement governance training for store owners and committees;
- Ensure community access to regulated financial services, such as face-to-face banking (eg rural transaction centres);
- Implement compliance and monitoring practices;
- Collect current information on policy and good practice and disseminate to stakeholders.

### 2. Supply chain

- Develop and implement national standards for: transport, store infrastructure, training, health and nutrition policies, and cold chain management etc;
- Undertake feasibility study on subsidies (eg freight, food, health hardware, infrastructure) for remote locations;
- Develop and implement urban area strategies e.g. urban planning regarding shops, home deliveries and transport;
- Undertake feasibility study on leveraging economies of scale.

### 3. Healthy food availability

- Identify and make available core healthy foods including take-aways in Aboriginal and Torres Strait Islander stores / shops;
- Develop strategies to promote healthy foods in Aboriginal and Torres Strait Islander stores / shops.

### 4. Economic issues

- Engage agencies such as the Australian Competition and Consumer Commission (ACCC) to provide advice on food supply and pricing issues

**Remote Indigenous Stores and Takeaways Project:  
Recommendations from Final Report  
June 2008**

The following are recommendations for the ongoing improvement of the supply and demand for healthy foods in remote Indigenous communities:

**Healthy food supply strategies**

- Explore options for providing grants for store and takeaway infrastructure (particularly for communities with small populations) to assist them to monitor and provide healthy food, including a minimum weekly supply of perishables, particularly fresh fruit and vegetables, all year round. For example-
  - combi-ovens instead of deep fryers for takeaways
  - customized fruit and vegetable storage and display fridges
  - point of sale scanning systems.
- Undertake research, including an economic analysis, to identify effective strategies for applying subsidies to achieve equity in the cost and availability of basic healthy foods. This may include subsidizing transport and/or subsidizing fresh fruit and vegetables, but for smaller stores could include subsidizing the cost of wages for store managers and other overheads.
- Work collaboratively with the food industry to modify existing products to improve their nutritional profile and to develop more nutritious options for takeaways.

**Healthy food demand strategies**

- Encourage more investment in developing a local level nutrition workforce who will work on the promotion of healthy food within communities. The RIST pilot highlighted the critical role that nutritionists play in supporting food supply projects in remote settings and strengthens the case that whole of community approaches offer the strongest opportunities for change.
- Encourage more investment in the promotion of healthy food through social marketing designed to reach and influence Aboriginal and Torres Strait Islander people in urban, rural and remote settings to provide a broader context and support for local level work.
- Fund research to investigate the most effective strategies to influence people's purchasing behaviour in favour of healthy foods in remote Indigenous communities.

**Nutrition expertise as a key element in promoting supply and demand based strategies for healthy food in remote settings**

- Provide resources to sustain and build the nutrition workforce within store management and organization such as Outback Stores.

- Include nutrition and health experts in the implementation of the mandatory store licensing program for remote NT communities with consideration of broadening this program to other states of Australia.
- Develop a set of competencies in nutrition in retail settings (both retail stores and takeaways) and include nutrition as a core unit for remote retail training.
- Encourage government and non-government organizations to prioritise the role of nutrition practitioners in working with remote stores. This can include developing and implementing nutrition policies and strategies, including use of the RIST resources, in order to improve access to healthy foods in remote Indigenous communities.

### **Monitoring**

- Ensure that remote areas are included in any future national food pricing inquiries with a plan for ongoing food price monitoring (using a national Market Basket Survey).
- Investigate opportunities for ongoing funding for further development of the RIST monitoring tool and provision of technical support for its users.
- Ensure that Outback Stores, through reporting mechanisms to the Australian Government, continues to prioritise and is held accountable to nutrition indicators, as well as Indigenous employment and economic goals and targets.
- Research the unintended outcomes of improving the food supply such as the impact it has on the increased purchase of unhealthy foods.

### **Evaluation**

- Fund an evaluation on the impact and outcomes of implementing the RIST resources 12 months after implementation.

### **RIST report**

- Ensure that there is a facility for, and a commitment from, Outback Stores to contribute baseline and post intervention data to the currently limited pool of evidence which exists around food supply and demand in remote Indigenous communities.

**Recommendations from the National Nutrition Networks Conference,  
Alice Springs, March 2008**

**Priority Recommendations – March 2008**

- 1. Progress the NATSINSAP, in line with current government policy (and 'Close the Gap') led by the federal government, in partnership with State governments and Community Controlled Organisations, recognising needs of Aboriginal and Torres Strait Islander urban, rural and remote communities.**
  - Establish a national nutrition function with responsibility for the evaluation and revision of NATSINSAP, development of new goals and targets, securing funding for the next phase and leading implementation with accountability to the relevant government departments and AHMAC.
- 2. Pregnant women, breastfeeding mothers, babies and children have access to enough available and affordable nutritious food.**
  - Implement the provision of nutritious food to supplement at risk Aboriginal and Torres Strait Islander mothers, babies and children according to local need through existing programs (e.g. Maternal and Child Health and new nurse led home visiting programs)
  - National breakfast/lunch initiatives are funded based on local need and community involvement and participation. e.g. women's centres, childcare, preschools, schools.
  - Creation and ongoing support of dedicated Aboriginal and Torres Strait Islander nutrition positions prioritising early life, linked with pre-existing and new programs such as nurse home-visiting programs.
- 3. Strengthen the nutrition workforce working with Aboriginal and Torres Strait Islander populations.**
  - Increased funding for dedicated permanent Aboriginal and Torres Strait Islander nutrition positions across the workforce spectrum (Health workers specialising in nutrition, Community Nutritionists, Public Health Nutritionists and Clinical Dietitians) to achieve a target: 100 nutrition positions per 100,000 Aboriginal and Torres Strait Islander population by 10 years in urban, rural and remote settings.
  - Establish career pathways, and increase retention rates for Aboriginal and Torres Strait Islander staff in the nutrition workforce; providing support through 'two way' mentoring programs and formal accredited training. Advocate for implementation of the cultural respect framework to ensure Indigenous health workers are valued for local nutrition knowledge around cultural processes and valuing traditional knowledge.



- Increased and sustained financial support for Aboriginal and Torres Strait Islander men and women to undertake undergraduate and tertiary nutrition training through access to current funding schemes, advocacy for new schemes (VET sector and secondary school based training) and provision of work place-based nutrition-specific government cadetship programs. Also, offer nutrition-specific tertiary level scholarships through new initiatives and existing scholarship schemes, e.g. NHMRC Postgraduate scholarships.
  - Nutrition units be included as core units in the community care stream of the National Aboriginal and Torres Strait Islander Health Worker training package.
- 4. Address the underlying food security issues facing Aboriginal and Torres Strait Islander people in urban, rural and remote Australia.**
- Research, including an economic analysis is conducted to identify effective strategies of applying subsidies to achieve equity in the costs and availability of basic foods including fresh fruit and vegetables for Aboriginal and Torres Strait Islander people
  - Subsidies for infrastructure and transport (particularly for communities with small populations) and food household infrastructure (including appropriate food storage, preparation and cooking facilities)
  - Food security issues impacting on Aboriginal and Torres Strait Islander people living in urban, rural and remote locations are researched, reported and food security indicators developed for routine monitoring and reporting nationally
  - Recognise and promote the value of traditional food systems and the role they play in food security for Aboriginal and Torres Strait Islander people
  - Ensure that Nutrition and health expertise and community consultation is sought in key aspects of store licensing for remote communities
- 5. National monitoring and surveillance for Aboriginal & Torres Strait Islander health, ensuring that all information is fed back to the community.**
- Establish sustainable coordinated ongoing national monitoring and surveillance indicators, systems and targets for Aboriginal and Torres Strait Islander health, including healthy birth weight, healthy child growth, breastfeeding initiation and duration, nutritional status and oral health indicators linked to existing national targets and state KPI's
  - Urban, rural and remote areas are included in a national food pricing enquiry with a plan for ongoing food price monitoring e.g. National market basket surveys
- 6. Communicating and disseminating good nutrition practice**
- Funding to ensure that programs at all levels (local, statewide, national) are well evaluated, findings communicated and shared, and ongoing funding is secured for such programs

- Collaboration across all sectors of Aboriginal and Torres Strait Islander health and child development to address holistic approaches that recognise good nutrition as a necessary component of Aboriginal and Torres Strait Islander health improvement
- Secure funding for the communication and dissemination of good nutrition practice through current Aboriginal and Torres Strait Islander communication systems as well as other networking systems – i.e. journals, newsletters, indigenous Health/*InfoNet* etc.

Explore and secure funding options to ensure continuation of a biennial National Nutrition Networks Conference that enables networking and support for Aboriginal and Torres Strait Islander people and others working in food and nutrition programs and related areas, and to ensure the conference is accessible to all.