

26 October 2012

SUBMISSION TO PARLIAMENTARY INQUIRY INTO THE CONTRIBUTION OF SPORT TO INDIGENOUS WELLBEING AND MENTORING

Background

The Queensland Aboriginal and Islander Health Council (QAIHC) is the state peak body representing community controlled health services across Queensland, and the Queensland affiliate for the National Aboriginal Community Controlled Health Organisation (NACCHO). Across Queensland there are presently 26 Aboriginal and Islander Community Controlled Health Services (AICCHS), along with several other community controlled substance misuse service providers.

The first community controlled service, Brisbane Aboriginal and Torres Strait Islander Community Health Service, commenced operations in Queensland in 1973, although was providing services to the local community prior to becoming a legal entity focussing on preventative health measures through family, child health and hygiene programs. At the same time, the first all Aboriginal football team, Brisbane Natives Rugby League Football Club, commenced playing in local competitions with the support of Brisbane ATSICHS, as this was seen at the time as a means of encouraging active participation in sport and recreation activities. This partnership between the two entities remains today, with Brisbane ATSICHS the major sponsor of the Brisbane Natives Club, that not only competes in Rugby League competitions, but also participates in Junior and Senior Netball competitions, along with other family support activities throughout the year.

This example of partnerships between local AICCHS and sporting teams has existed in our communities since the commencement of operations, and has grown stronger over time through a developed understanding of the overall benefits that regular participation in sport and recreation activities has on the well-being of our communities.

Context

Queensland has the second largest population of Aboriginal and Torres Strait Islander people in the country with around 160,000, and current health data indicates that approximately 50% of the population are smokers, 40% suffer from heart conditions, 40% have been diagnosed with type 2 diabetes, 30% are obese or overweight and many others have limited access to quality food and nutrition.

Data collected through the QAIHC Close the Gap Collaborative program indicates that community controlled services provide regular care to around 70,000 Aboriginal and Torres Strait Islander people in Queensland, supporting analysis of primary health care needs for all clients. Of those significant health priorities identified through this work, QAIHC members have demonstrated their willingness to tackle these key issues as evidence by -

- Smoking screening is at 87%
- 84% of hypertensive patients had their BP levels recorded in the last 6 months

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- 79% of hypertensive patients were prescribed best practice medication
- 72% of diabetics had HbA1c levels recorded
- 41% completed Health checks (adults 15-54 years)

Additionally, QAIHC and its members have a long history of developing and implementing successful initiatives to support healthy lifestyle improvements for its clients through the following programs -

- Hero Rewards - social marketing for health checks
- Good Quick Tukka - nutrition program
- Building Supportive Environments workshops
- Workplace Indigenous Physical Activity program
- Time to Quit - smoking cessation program
- Deadly Choices - Institute for Urban Indigenous Health
- Smoke Free Places - Wuchopperren Health Service, Cairns

In more recent time QAIHC have established a partnership with the Arthur Beetson Foundation, to support the organisation and running of the Qld Murri Rugby League Carnivals. In 2011 the Queensland Aboriginal & Islander Health Council (QAIHC) worked with the QMC to utilize its inaugural Carnival to promote healthy lifestyles within Indigenous communities and encourage Aboriginal and Torres Strait Islander peoples to access their local Aboriginal and Islander Community Controlled Health Service (AICCHS). In 2011, ALL players and Officials competing in the QMC were required to complete a 'Health Check' at their local CCHS. This resulted in the completion of over 1200 'Health Checks' throughout Queensland. For players competing in the Under 15 Competition, it was also compulsory that they maintain 90% attendance at school.

The 2011 Carnival was also promoted as an 'alcohol and drug free event' and provided an opportunity to integrate and showcase the work of the various Regional Tobacco & Healthy Lifestyle Teams funded by DoHA and operating across Queensland. The 2011 Carnival saw the Institute for Urban Indigenous Health (IUIH) launch its '*Deadly Choices*' Campaign. QAIHC also utilized the Carnival to continue to promote its 'Hero Rewards Campaign' which encourages Indigenous peoples to access their local CCHSs and complete a 'Health Check'. Not only did the Carnival result in a significant increase in access/utilization of CCHSs and, where appropriate, mainstream general practices (GPs), it also identified a number of individuals with previously undiagnosed and serious health conditions which presented major risks had they competed in the Carnival without accessing treatment. A number of individuals were NOT cleared to compete in the Carnival based on the results of their 'Health Check'.

Additionally, QAIHC have also partnered with the Lloyd McDermott Rugby Development Foundation to support similar events through organised Rugby Union competitions, supporting participation at U/16, U/18, Senior Men's and Women's levels. These events utilise the same principles of compulsory health checks for all participants, along with regular participation and attendance at school in order to be eligible for participation. Ella Sevens Events in 2012 were held in Cairns and Brisbane, with around 12 competing Men's teams

ABN 97 111 116 762

and 6 Women's teams, along with the National Indigenous U/16 Tournament held on the Gold Coast with 6 competing teams and participants from all states and territories of around 200 young men.

All events carry similar messages for participants, officials and spectators to promote active participation in sport and recreation in a drug and alcohol free environment, whilst also ensuring that participants come to events fit and healthy ready for competition. Competitions supported by QAIHC are also endorsed by the state sports governing bodies for the relevant activity, such as Queensland Rugby League and Queensland Rugby Union. As this is seen as an important factor for all competitions, due to previous unfortunate deaths that occurred at events as a result of limited preparation and adherence to standards for competitors, and compulsory health checks as part of the process.

Evidence to support Events

At the 2012 Qld Murri Rugby League Carnival held in Ipswich over the September/October long weekend, there were 47 teams competing across U/15's, Men's and Women's competitions, which equates to around 1000 competitors over the 4-day carnival. The carnival registration process commenced from July 2012, where all team and officials were advised of requirements for player eligibility, including compulsory health checks and school attendance for U/15 participants. During this period from July to September 2012, AICCHS collected data through Medicare to determine overall impacts on health services provided, and found the following -

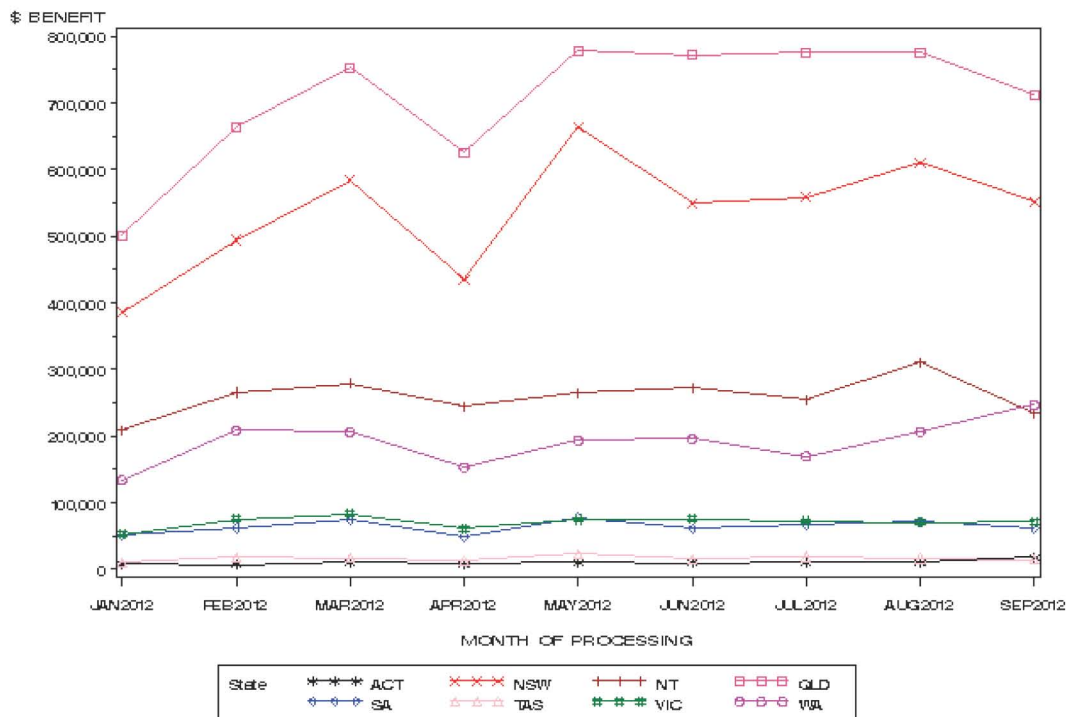
Item	State								Total
715	NSW	VIC	QLD	SA	WA	TAS	ACT	NT	
	Services	Services	Services	Services	Services	Services	Services	Services	Services
Total	8,422	1,051	11,086	973	3,049	245	180	3,917	28,923

Item 715 represents health checks for Aboriginal and Torres Strait Islander people completed during quarter 3, 2012 of the annual reporting period from July to September, which clearly shows the volume of health checks conducted due to numbers of people undertaking compulsory health checks as part of eligibility requirements for competing in activities such as Qld Murri Carnival and Lloyd McDermott events. Using sport to encourage more Aboriginal and Torres Strait Islander people to undertake health checks promotes greater responsibility in managing health conditions and supports greater awareness of issues impacting on health of communities to determine relevant strategies. When compared to performance against rest of the country, it also provides a clear indication of benefits in linking health outcomes and benefits with major sporting events for the Aboriginal and Torres Strait Islander community. An example of this comparison can be drawn between the Qld Murri Carnival and the NSW Koori Knockout that is held over the same weekend, although has more teams competing in the event but does not have compulsory health checks as part of eligibility criteria for teams, which can be seen in health check data in the above table.

Additionally, the following table demonstrates the amount of Medicare revenue created by

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AICCHS during the same period, which is in turn utilised by services to enhance practices and develop new programs for delivery in support of identified community needs.



This table clearly provides an analysis of overall benefits not only to health outcomes for communities, but further to commitment from AICCHS to continue enhancing services for the benefit of community, through new program delivery, health program incentives, and new job creation. Across Queensland from May to September 2012, there has been additional investment of around \$800,000 per month due to health checks being completed for further investment into local programs supporting better outcomes.

Social Benefits

As evidenced in the aforementioned table, combining the overall health outcome improvements with organised sports programs and competitions, will continue to support overall social benefits for Aboriginal and Torres Strait Islander people in Queensland. The greatest demonstration of this benefit will be seen in local communities where teams are coming together prior to events and undertaking health checks in their local AICCHS, with a view providing ongoing support for teams, officials and spectators pre and post events. Health checks not only provide persons undertaking them with a solid understanding of their overall health and well-being, but also provide a revenue stream for local organisations to not only support ongoing participation in sport locally and regionally, but also seeks to enhance local economies through supporting new programs and initiatives and local jobs to implement them.

Additionally, participation in active sport and recreation programs by communities all across

ABN 97 111 116 762

Queensland, seeks to strengthen and build overall social and emotional well-being of participants as representatives of their local communities competing against other communities from across the state. This process instils a sense of community pride amongst teams competing to become the competition winners of each event, not only for personal gain, but also a recognition for their home communities and the spectators that have travelled with them to compete. This benefit builds upon the initial outcome of encouraging greater responsibility for physical health outcomes, but further encourages promotion of social and emotional health outcomes through structured sports programs and events.

Future Recommendations

Based upon the experiences learnt over the past couple of years by QAIHC in partnership with organisations such as, Arthur Beetson Foundation and Lloyd McDermott Rugby Development Foundation, there is a clear role and responsibility for State and National Sporting Authorities to support major events that promote benefits of health and well-being for Aboriginal and Torres Strait Islander people across the country. This is not meant to say that State and National Sporting authorities need to take ultimate control of these events, as there are existing organisations with the necessary skills and capacity to do so, but consideration needs to be given to partnership arrangements supporting community outcomes.

There now exists a number of State and National sporting events for Aboriginal and Torres Strait Islander people, varying partnerships with their affiliate bodies and minimal requirements for eligibility to participate. Through establishing a National set of principles and standards for participation in sport and recreation activities across all sports, would provide solid benchmark for all State and National sporting bodies to adopt and seek to implement for adherence through all competitions and events. These standards would not only seek to drive increased participation in sports activities for Aboriginal and Torres Strait Islander people, but also provide an opportunity impact upon overall social and well-being benefits for communities, through participation in sports.

The following lists represents recommended learnings from past experiences to support sporting events, with a view to enhancing upon these for future improvements -

1. All Major Aboriginal and Torres Strait Islander sporting events should be required to seek endorsement from relevant State, Territory or National authority
2. All participants competing in authorised sporting events across all levels, should also be required to adhere to certain standards and expectations for safe play and participation
3. Government consider the development of a National set of principles and standards for participation in sport and recreation activities across all sports for Aboriginal and Torres Strait Islander people, with a view to including community social and well-being benefits as part of these standards
4. State, Territory and National sporting authorities commence process to outlaw sport and recreation events that do not adhere to these standards, including banning of participants and officials from other events meeting standards.

Active participation in sport and recreation programs has been existent in many of our communities for a long period of time, and will continue to be the life-blood of many communities in the future. This Parliamentary inquiry provides us with a unique opportunity to enhance upon these current learnings and seek to utilise existing benefits of current and future events to further consider well-being effects on communities in future. Involving organisations such as QAIHC, Arthur Beetson Foundation, Lloyd McDermott Rugby Development Foundation and other relevant bodies can provide a valuable insight into how to make this alignment for whole of community benefit for long-term outcomes.

Selwyn Button, CEO, QAIHC

Attachment A - Case Study from QMC 2011

Case Study from QMC 2011

The QMC was held on the Gold Coast in October 2011. Leading up to the event all Team Managers were required to register their teams with the carnival organisers, who then provided final teams lists to QAIHC office. QAIHC staff then made contact with each relevant Team Manager to provide them with details about where they could attend with their teams and undergo a Health Assessment for all players and officials. This resulted in health checks being undertaken from August to October 2011 across all AICCHS in Qld with players and officials from all competing teams.

Due to the short timeframes leading up to the event, many teams were unable to attend their local AICCHS prior to the carnival, so Kalwun Health Service, which is the Gold Coast QAIHC member, placed their mobile medical van on the grounds of the event and completed health assessments for those who had not done so prior to the event. Team Managers were responsible for providing lists of players and officials who had completed their health checks, with evidence also provided from all Qld AICCHS to carnival organisers, and consequently those who hadn't undertaken a health check were required to complete one before the competition commenced.

Additionally, other local providers including Brisbane ATSICHS and Kambu Health Service (Ipswich), also completed health checks for those players and officials traveling to the Gold Coast for the carnival, who were unable to complete them in their local communities. In areas where AICCHS we not accessible, QAIHC negotiated with relevant partners including, Qld Health and private practices, to complete health checks for competing teams. This occurred in areas like Torres Strait and Bundaberg where QAIHC has good relationships with local providers.

The mobile van was also used by spectators and others who attended the event with hundreds of people accessing care throughout the carnival period. On the Friday of the event, the Kalwun Mobile Service was responsible for conducting health checks for around 120 Aboriginal and Torres Strait Islander people either competing or attending the event. This not only resulted in many people getting a better understanding of their ongoing health needs, but also identified several health issues for many persons who had intended on playing in the carnival, but due to health concerns identified were advised by clinicians not to compete.