

# From strategy to reality

How to recruit and retain local people in the remote community workforce?.

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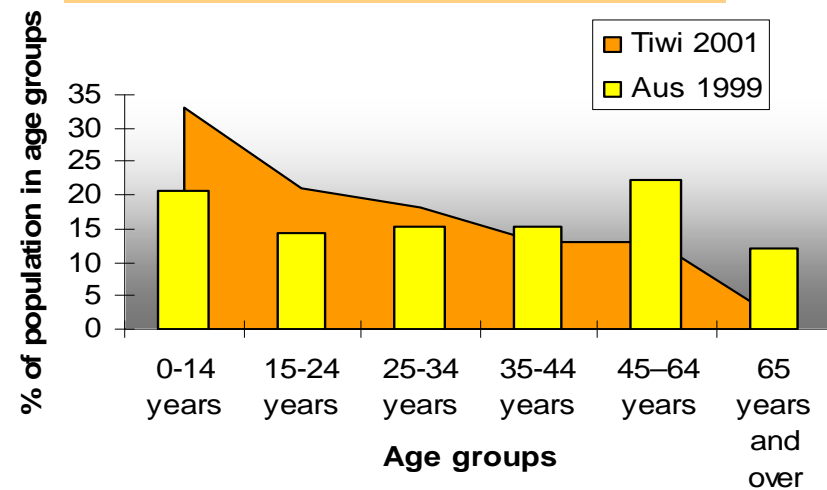
# Health?

## Why interest in employment and community capacity

Compare Tiwi 2001 & Australia 1901



Compare Tiwi 2001 & Australia 1999



**The past has not worked**

# Social determinants of health



**Poverty**

**Poor housing**

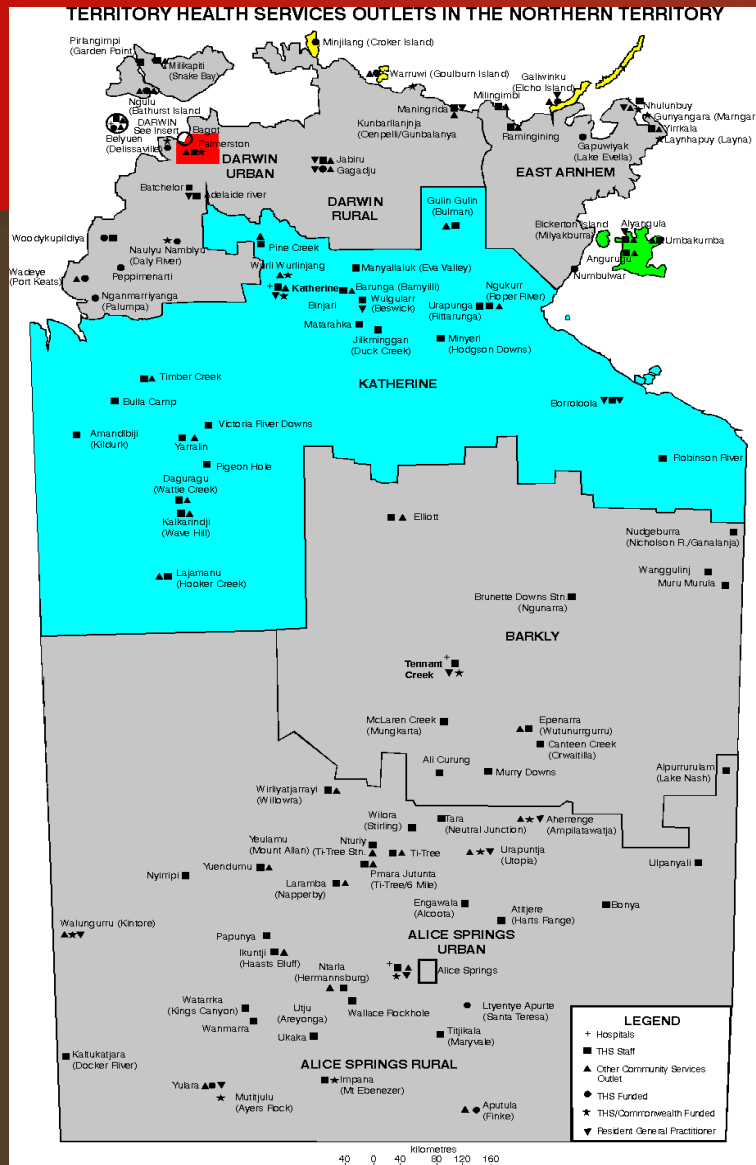
**Unemployment**

**Substance abuse**

**Poor nutrition**

**Domestic hygiene**

# Ownership of "pharmacies"



- NT Pharmacy Act does not state who should be able to own a pharmacy
- A new Bill might
- There is the potential for 23 pharmacy approvals to be granted to each of the emerging health zones.

## The start of something different at Tiwi health clinics

# The business of a pharmacy

- Move pharmacy into electronic age with computer technology
- Develop system to suit need
- Train local people



# Objectives of Mirrijini

- to market the pharmacy practice model
- to establish a business that will provide employment opportunities for Tiwi people
- Encourage other communities to establish their own pharmacy business

**NB**

Funded by the Tiwi Land Council through the Aboriginal Benefit Account administered by ATSIIC

# Some principles established

## First

- **Only put in place systems that are able to be understood, operated and maintained local people.**

## Second

- **Have faith in the fact that there are local people able to be identified and trained to undertake the necessary tasks**

## Third

- **Give responsibility to local people and trust them to be able to do the job.**

## Some observations to pass on

### **1) Look at the job**

- It must be doing something which is understood, needed and going to benefit the community at large.
- It will be an activity that the community itself has initiated as a result of an examination of social needs and priorities.
- It will provide for social needs that will help to improve the health of the population
- Social determinant indicators such as poverty, housing, nutrition, substance abuse, education and violence will not be solved by more doctors and new buildings for health clinics.

## Some observations to pass on

### **2) Identify the skills**

- Develop systems with an eye for skills needed to operate and maintain them
- Conduct a skills audit to identify the people to be able to match with tasks
- Train local people for the tasks at hand.
- This should provide the capacity within the community to continue the management of the activity.
- Communities have not been exposed to the opportunity which exists to provide a stimulating environment for a motivated workforce.

Some observations to pass on

### 3) A reason for education

- Why does the Indigenous child need an education?  
The reason should be to have the skills to work – but without work where is the motivation to learn?
- Children should want to be educated so they can do the work that will build a better and healthier community
- Personal goals may then follow the community infrastructure program
- It is not possible to provide hope when there is none around
- Poor education is the sign of a lack of incentive to be educated as anything else

# The future for Mirrijini

...an Aboriginal "industry" project that will benefit communities in a number of ways.

- 1) Empower Aboriginal people to become involved in shaping the future direction of their community through establishing a successful Aboriginal Company,
- 2) Offer hope and direction to young Aboriginal people through providing employment and training opportunities, and
- 3) Ultimately improve the health of Aboriginal people through improving the quality use of medicines in remote communities.

# The past may not have worked



**Lets  
make  
sure the  
future  
does...it's  
in our  
hands**

# Thank you for your attention and interest

Working for the quality use of medicines in remote Aboriginal communities

**MIRRIJINI** PTY LTD  
*Working for the quality use of medicines*

MIRRIJINI is TIWI for medicine

The Tiwi people of Bathurst and Melville Islands in the Northern Territory of Australia have their own pharmacy.

Their pharmacy is different - it's been built for their needs.

Mirrijini will market this model of practice to other communities and to share the wealth.

Come and look with us at the difference.  
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