

## **Introduction**

Report after report has drawn attention to the impact that environmental impoverishment has had upon the health of Aboriginal and Torres Strait Islander peoples. Contaminated drinking and washing water, poor sanitation, and unsafe housing, transport and work conditions stand out starkly as the factors associated with preventable suffering and death from infections in childhood and old age to injury and violence in the adult years.

Not only do Aboriginal and Torres Strait Islander peoples face the health hazards of a hostile physical environment, but inequity is manifest in their diminished access to health-promoting knowledge and to the mainstream medical and health-care services. There is endless anecdotal evidence that explains such lack of equitable access in terms of prejudice, discrimination, ignorance and other perverse behaviour against Aboriginal and Torres Strait Islander peoples by society in general and its agents working in health services in particular. It is true that anecdotes also exist which tell of the reverse qualities, but a huge gulf still separates the ideal from the actual in terms of the attitudes and behaviour of non-Aboriginal Australians to Aboriginal and Torres Strait Islander peoples in need of health care and a healthy environment in which to live.

The principal difficulty does not lie in assembling overwhelming evidence, legal or numerical, to 'prove' or 'quantify' the problem. Rather, the difficulty lies in the living environment, and the lack of political will to make the financial investment necessary to achieve environmental equity. It also lies in lack of maintenance of existing facilities and the confusing and dysfunctional array of political responses that stand between the problem and its solution. Simply tinkering and fiddling and setting up committees will resolve nothing.

It is true that available data is inadequate to accurately define what needs to be done, in what order of priority, with whom and by whom. If we wait until such perfect data is available, we will wait forever – at least beyond the point when any decent solution could be implemented.

Instead, it is clear that a bold and comprehensive national initiative with regard to the public health conditions in which Aboriginal and Torres Strait Islander peoples live is essential.

This major national initiative needs to step over the shambles of uncoordinated and trivial programs and undertake the necessary public infrastructure which, for example, can ensure the supply of water, sewerage, housing and roads to all Aboriginal communities by the year 2001.

It must be stressed that health care and infrastructure are basic facilities which non-indigenous Australians take for granted. The provision of infrastructure is the implementation of a 'right' and a precursor not only to the improvement of health but to the attainment of social justice.