Purpose of the consultations

These consultations provide an opportunity for the Implementation Plan Advisory Group (IPAG) to meet with a broad range of stakeholders to discuss the development of the next iteration of the *Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023* (the Implementation Plan) due to be released in 2018.

The consultations look to identify priorities and develop actions that could be included in the 2018 Implementation Plan as well as provide feedback on progress against the current Implementation Plan deliverables and goals. There will be consultations in each state and territory throughout March and April 2017.

IPAG also welcomes contributions through online written submissions where this is preferred – details on how to make a submission online, and an electronic version of the Implementation Plan, can be found on the Department of Health’s website:


Section 1: Progress on the Implementation Plan

The Implementation Plan: First stage 2013 - 2018

The Implementation Plan was launched by the Australian Government in 2015 as the blueprint for accelerating progress on closing the gap in health outcomes between Aboriginal and Torres Strait Islander people and non-Aboriginal and Torres Strait Islander people. The Implementation Plan builds on work undertaken with the National Health Leadership Forum (NHLF) and Aboriginal and Torres Strait Islander communities to develop the *National Aboriginal and Torres Strait Islander Health Plan 2013-2023* (the Health Plan).

The development of the Health Plan included nation-wide open community consultations, including a youth specific consultation. It included an online submissions process and involved 770 representatives from Aboriginal and Torres Strait Islander communities, peak bodies and state and territory governments. The Implementation Plan built on the priorities identified in the Health Plan and was reviewed by 17 NHLF-recommended experts.

The Health Plan and the Implementation Plan share a vision that the health system is free of racism and inequality, where all Aboriginal and Torres Strait Islander people have access to health services that are effective, high quality, appropriate and affordable.

The Implementation Plan introduces actions at a Commonwealth level to improve health outcomes and access to health care services for Aboriginal and Torres Strait Islander people. Strategies to address racism and improve the cultural competency of the health sector are a key focus area. The Implementation Plan adopts a systems and life-course approach to identifying and responding to local needs and outlines strategies, actions and deliverables over seven domains: health systems effectiveness; maternal health and parenting; childhood health and development; adolescent and youth health; healthy adults; healthy ageing; and social and cultural determinants of health.

It has a strong focus on prevention, as well as on improving the patient journey of Aboriginal and Torres Strait Islander people through the health system. It also focuses on supporting local and regional responses to identified needs. The Implementation Plan will drive the focus for further collaboration across government and the Australian health system to improve health outcomes for current and future generations of Aboriginal and Torres Strait Islander people.
The first stage of the Implementation Plan has a focus on strengthening the Australian Government’s role in:

- making sure the health system can respond positively and effectively to the needs of Aboriginal and Torres Strait Islander people;
- supporting people to make healthy choices; and
- providing culturally safe, high quality prevention and treatment services.

The current Implementation Plan was always intended as a first step to drive the focus for collaboration and address the challenges to make the health system more comprehensive, culturally safe and effective. The Australian Government is committed to building on the partnerships that underpinned the development of the Implementation Plan and strengthening efforts to improve progress against the goals.

**The Implementation Plan Advisory Group**

IPAG was established in September 2016 to provide a forum for governments to work in partnership with Aboriginal and Torres Strait Islander health leaders to review, assess and guide action under the Implementation Plan. The IPAG members include representatives from the NHLF, the National Aboriginal Community Controlled Health Organisation, the Commonwealth Departments of Health and of the Prime Minister and Cabinet, the National Aboriginal and Torres Strait Islander Health Standing Committee (NATSIHSC) of the Australian Health Ministers Advisory Council (AHMAC) and the Australian Institute of Health and Welfare. Indigenous experts on early childhood health, comprehensive primary care and acute care are also represented. Further details on IPAG members and their work to date can be found on the Department of Health’s website: [http://www.health.gov.au/internet/main/publishing.nsf/Content/indigenous-ipag](http://www.health.gov.au/internet/main/publishing.nsf/Content/indigenous-ipag)

**Measuring progress against the Implementation Plan**

**Implementation Plan goals**

The Implementation Plan includes 20 goals that focus on improving the health of pregnant women, reducing smoking, tackling diabetes, providing more health checks and achieving better immunisation rates. Progress against these goals will be reported through the Health Performance Framework (with the next version due to be released in May 2017) and incorporated into Department of Health Annual Report as well as the Prime Minister’s annual Closing the Gap report.

IPAG is working with the Department of Health and the Australian Institute of Health and Welfare in recognition that some of the current goals may be reviewed for the 2018 Implementation Plan to reflect improvements in data availability or revised projections of progress over time.

**Implementation Plan deliverables**

There are 106 deliverables included in the current Implementation Plan, reflecting progress that is expected to be achieved by 2018 as well as planned for 2023. Against the 2018 Implementation Plan deliverables, key achievements to date have included the release of the AHMAC endorsed Australian National Diabetes Strategy and the AHMAC Cultural Respect Framework, improved access to antenatal and post natal care through the expansion of the Better Start to Life initiative and the roll out of regional grants under the Tackling Indigenous Smoking program. IPAG will consider progress against the 2018 deliverables as well as the planned 2023 deliverables in reviewing the Implementation Plan.
Key questions for consultation participants to inform the next iteration of the Implementation Plan

- Which parts of the current Implementation Plan are most important to help improve health outcomes for Aboriginal and Torres Strait Islander people and meet the Closing the Gap targets?
- Does the life-cycle structure of the current Implementation Plan reflect the key issues needed to achieve health equality?
- What are the overlaps between Commonwealth and jurisdiction-level initiatives, and how can these be best resolved?
- What are the gaps in the current Implementation Plan?
- Which of the current 2013 planned deliverables need to be revisited to reflect changed priorities, revised targets or new evidence?
- Which issues need more or different data indicators to measure success or improvement?

The second stage of the Implementation Plan will start in 2018 and will reflect increased involvement of the Commonwealth, state and territory governments, as well as the Aboriginal community controlled health sector, the non-government sector and the private sector. The Implementation Plan will also be updated to include new evidence, opportunities and priorities, such as aligning health services for Aboriginal and Torres Strait Islander people with Primary Health Network services, the National Disability Insurance Scheme, Health Care Homes and activities under the 5th National Mental Health Plan.

Social and cultural determinants of health

Over one-third of the health gap between Aboriginal and Torres Strait Islander people and non-Indigenous people is associated with the social and cultural determinants of health. Along with risk factors such as obesity, alcohol and other drugs, and tobacco, they contribute around 57 per cent of the gap in health outcomes. By addressing the underlying causes of poor health, health outcomes for Aboriginal and Torres Strait Islander people can be improved.

IPAG also recognises that in order to cement gains and ensure progress on closing the gap, the social determinants of health must be addressed and cultural determinants must be supported and strengthened.

Social determinants

Social determinants of health are about where and how people are born, grow, live, work and age, and these factors have a big impact on each person’s lifelong health and wellbeing: the WHO has described social determinants as “the root causes of health and disease”. Worldwide, differences in health outcomes are strongly linked to differences in social status, income, ethnicity, gender, disability or sexual orientation. Social determinants of health are illustrated below and include access to education, transport, quality housing, employment opportunities and freedom from discrimination. It is recognised that the impact of colonisation, dispossession, institutional racism
and poverty also need to be considered when addressing social determinants of health for Aboriginal and Torres Strait Islander peoples.

Cultural determinants

Cultural determinants of health are those ‘protective’ factors which support improved health outcomes: for Aboriginal people, their connection to family and community, land and sea, culture and identity is integral to health. The cultural determinants of health have been described as originating from, and promoting, a strength-based perspective, and that stronger connections to culture and country build stronger individual and collective identities, a sense of self-esteem, resilience, and improved outcomes across the other determinants of health including education, economic stability and community safety.

Cultural determinants include, but are not limited to:

- self-determination
- freedom from discrimination
• individual and collective rights
• importance and value of Aboriginal culture
• protection from removal/relocation
• connection to, custodianship and utilisation of country and traditional lands
• reclamation, revitalisation, preservation and promotion of language and cultural practices
• protection and promotion of traditional knowledge and Aboriginal intellectual property
• understanding of lore, law and traditional roles and responsibilities.

The consultation process for developing the current Implementation Plan identified the following strategies for the social and cultural determinants that could assist in developing the 2018 Implementation Plan:

• Extended family arrangements in Aboriginal and Torres Strait Islander communities are acknowledged through broadened access to childcare services, early learning programs and other services.
• Aboriginal and Torres Strait Islander parents and carers are able to access culturally appropriate and evidence-based parenting services and education and training opportunities.
• Aboriginal and Torres Strait Islander youth are proud of their culture and identity.
• Aboriginal and Torres Strait Islander adults achieve education, training and employment outcomes, including through the Community Development Program, which aims to re-engage unemployed adults and provide a clear pathway to real jobs.
• Aboriginal and Torres Strait Islander adults contribute to the development of strategies and services that promote healthy behaviours, family cohesion and emotional wellbeing.
• Local elders and community members champion culturally appropriate health and wellbeing choices.

Developing a whole-of-government approach to addressing social and cultural determinants of health

Taking a social and cultural determinants approach recognises that there are many drivers of ill health that lie outside the direct responsibility of the health sector and which therefore require a collaborative, inter-sectoral approach.

The development of the 2018 Implementation Plan is an opportunity to identify whole-of-government approaches and intersectoral activity to form a blueprint for action.

The Government has recently established a cross-portfolio working group, based in the Department of Health and including officers from Indigenous Affairs in Prime Minister and Cabinet, Education and Training, Employment and the Social Services portfolios. This group will work intensively for the next six months to drive the development of a whole-of-Government plan to address the social and cultural determinants of health. The IPAG consultations will inform this work.
Outline of proposed 2017 consultation process

The consultations will take place throughout March and April 2017, and include a national peak body forum to be held in Canberra, as well as stakeholder forums in every state and territory. The face to face consultations will be complemented by an open written submissions process and an online forum to support regional and remote participation.

Following the consultations, a draft of the next iteration of the Implementation Plan will be developed in partnership with IPAG. IPAG will meet regularly throughout 2017 and IPAG members will incorporate the key messages, feedback and proposals from the consultations into the updated Implementation Plan.

Prior to its release in 2018, endorsement of the next iteration of the Implementation Plan will be sought from the Commonwealth Minister for Health and the following representative committees:

- the Implementation Plan Advisory Group;
- the National Aboriginal and Torres Strait Islander Health Standing Committee;
- the Community Care and Population Health Principal Committee;
- the Australian Health Ministers’ Advisory Council; and
- The Council of Australian Governments.

Any questions or queries about the consultations or the Implementation Plan can be directed to: Health.Plan.Taskforce@health.gov.au.