Aboriginal and Torres Strait Islander Partnership and Engagement Framework

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# Introduction

We thank our Aboriginal and Torres Strait Islander partners for their continued leadership in driving improved health and wellbeing outcomes for Aboriginal and Torres Strait Islander people.

Aboriginal and Torres Strait Islander people have been advocating for a decision-making role in policies, programs, and services for a long time. All governments have committed to partnership and shared decision-making under the [National Agreement on Closing the Gap](https://www.closingthegap.gov.au/national-agreement/national-agreement-closing-the-gap) (National Agreement). This is in recognition that Aboriginal and Torres Strait Islander peoples know what is best for their people and communities, and that the unique strengths of Aboriginal and Torres Strait Islander knowledges and cultures are key to driving real change. Despite this, more work needs to be done for governments and departments to truly change the way in which they work, as the Productivity Commission found in the Closing the Gap review.

A special thanks goes out to the Aboriginal and Torres Strait Islander health sector for their invaluable contributions to the development of the Partnership and Engagement Framework (framework). This partnership approach has ensured the framework is relevant and meets not only the needs of the Department of Health and Aged Care (department) but more importantly, the needs of Aboriginal and Torres Strait Islander stakeholders.

## Purpose

The purpose of this framework is to guide and empower department staff at all levels to build and strengthen culturally safe, responsive, and genuine partnerships with Aboriginal and Torres Strait Islander stakeholders.

The framework aims to succinctly outline actionable steps that staff can take to effectively plan, engage, and partner with the Aboriginal and Torres Strait Islander stakeholders to achieve genuine partnership, and ensure that programs and services best suit the needs of Aboriginal and Torres Strait Islander peoples.

It also recognises the significant contributions and knowledges of Aboriginal and Torres Strait Islander staff within the department.

## The National Agreement on Closing the Gap

In July 2020, all Australian governments signed the National Agreement on Closing the Gap. The signing marked a historic moment of shared commitment and accountability to close the gap in socio-economic life outcomes between Aboriginal and Torres Strait Islander peoples and other Australians. The National Agreement reflects the voices and aspirations of Aboriginal and Torres Strait Islander peoples as expressed through extensive community engagements and consultations over two years.

The National Agreement highlights four priority reforms that change the way governments work to accelerate improvements in the lives of Aboriginal and Torres Strait Islander people. These priority reforms are essential preconditions for success against the outcome area targets. Under Priority Reform One (Formal Partnerships and Shared Decision Making) governments commit to building and strengthening structures that empower Aboriginal and Torres Strait Islander people to share decision-making authority to accelerate progress against closing the gap by implementing all Priority Reforms and strategies.

The purpose of partnership is to:

* drive Aboriginal and Torres Strait Islander community-led outcomes,
* enable Aboriginal and Torres Strait Islander representatives, communities, and organisations to negotiate and implement agreements with governments,
* support additional community-led development initiatives, and
* bring together all government parties and Aboriginal and Torres Strait Islander stakeholders to the collective task of Closing the Gap.

A formal partnership is an arrangement between governments and Aboriginal and Torres Strait Islander people that clearly articulates roles and responsibilities, scope, and the intended purpose of a partnership. These are known as the Strong Partnership Elements. Clauses 32 and 33 of the National Agreement outline the Strong Partnership Elements defining Partnership and what adequate funding supports for Aboriginal and Torres Strait Islander parties under the National agreement are:

* Strong partnerships – between Aboriginal and Torres Strait Islander representatives and up to three levels of government, and others (where agreed).
* Formal agreements – signed by all parties, structured well, accessible for the public and protected by law (where needed).
* Shared decision-making

Adequate Funding – to support Aboriginal and Torres Strait Islander parties to be partners with governments.

A full definition can be found in the [definitions table](#_Definitions_of_key) below.

## Partnership in the department

Work is under way across the department to embed the Closing the Gap Priority Reforms, including Priority Reform One (Formal Partnerships and Shared Decision Making). However, we need to do more to share decision-making and partner with Aboriginal and Torres Strait Islander people to successfully achieve our Closing the Gap commitments. It is critical that the entire department works with the Aboriginal and Torres Strait Islander health sector. The largest gains to close the gap in health outcomes will come from outside the First Nations Health Division.

Partnership goes beyond policy commitment, it is about recognising and embedding self-determination, decision making and leadership throughout all stages of the policy lifecycle. It is a recognition of the inherent diversity and strengths of Aboriginal and Torres Strait Islander cultures, including their holistic ways of knowing, being and doing. Evidence suggests that policies, programs, and services grounded in Aboriginal and Torres Strait Islander leadership, governance and cultures lead to positive sustainable outcomes.

If we are to close the gap in health outcomes, Aboriginal and Torres Strait Islander health communities, health experts and their organisations must be actively enabled to play a principal role in the design and delivery of policies, programs and services impacting the health and wellbeing of Aboriginal and Torres Strait Islander people, alongside growth in Aboriginal and Torres Strait Islander staffing across all levels, roles and functions within the department.

## Definitions of key concepts

To ensure that we consistently hold ourselves to the same standard, and to promote a shared understanding of how we want to establish and strengthen partnerships, this framework has been developed using the following definitions:

|  |  |
| --- | --- |
| Genuine Partnership | Genuine partnership is used to distinguish the new approach to partnership from previous approaches, which often did little to bridge mistrust and fell short of embedding shared decision-making and co-design approaches.  Genuine partnerships are a more respectful and collaborative approach and focus on an equitable relationship. They recognise the inequities that exist and the historical impacts, power imbalances and contexts of the relationship with leadership of Aboriginal and Torres Strait Islander peoples. |
| Formal Partnership  (Partnership) | Formal Partnerships are agreed arrangements as defined by Clause 32 in the National Agreement.  Formal Partnerships are agreed arrangements (policy and place-based) between governments and Aboriginal and Torres Strait Islander people that set out in a transparent way who makes decisions, how decisions are made, and what those decisions are about. |
| Informal Partnership  (Engagement) | Informal partnerships, or engagements, are any interactions with Aboriginal and Torres Strait Islander organisations or communities where there is no formal agreement in place.  Informal partnerships are used to build connections and can progress into a formal partnership. |
| Shared decision-making | As defined in the National Agreement[[1]](#footnote-2), Shared decision-making is:   * by consensus, where the voices of Aboriginal and Torres Strait Islander parties hold as much weight as the governments. * transparent, where matters for decision are in terms that are easily understood by all parties and where there is enough information and time to understand the implications of the decision. * where Aboriginal and Torres Strait Islander representatives can speak without fear of reprisals or repercussions * where a wide variety of groups of Aboriginal and Torres Strait Islander people, including women, young people, elders, and Aboriginal and Torres Strait Islander people with a disability can have their voice heard. * where self-determination is supported, and Aboriginal and Torres Strait Islander lived experience is understood and respected. * where relevant funding for programs and services align with jointly agreed community priorities, noting governments retain responsibility for funding decisions where partnership parties have access to the same data and information, in an easily accessible format, on which any decisions are made. |
| Self-determination | As defined by the National Aboriginal and Torres Strait Islander Health Plan. Self-determination is the right of all people to ‘freely determine their political status and freely pursue their economic, social and cultural development.’[[2]](#endnote-2) |
| **Cultural Safety** | As defined in the National Aboriginal and Torres Strait Islander Health Plan[[3]](#footnote-3), Cultural safety is determined by Aboriginal and Torres Strait Islander individuals, families, and communities.  Culturally safe engagement is the ongoing critical reflection of your own knowledge, skills, attitudes, engagement behaviours and power differentials in engaging in a safe, accessible, and responsive partnerships free of racism.  To ensure culturally safe and respectful engagement, Departmental staff must:  Acknowledge colonisation, systemic racism, and the range of factors – social, cultural, behavioural, and economic – which impact individual and community health.  Acknowledge and address individual racism, their own biases, assumptions, stereotypes, and prejudices and engage in a way that is free of bias and racism.  Recognise the importance of self-determined decision-making, partnership and collaboration in healthcare which is driven by the individual, family, and community.  Foster a safe working environment through leadership to support the rights and dignity of Aboriginal and Torres Strait Islander people and colleagues. |
| **Culturally Responsive** | Cultural responsiveness recognises and values culture through listening and learning from Aboriginal and Torres Strait Islander Peoples. It means being open to new ideas that may conflict with the ideas, beliefs and values of your own culture, and being able to see these differences as equal. For example, in many cultures spiritual beliefs are an important part of overall wellbeing.  It means being respectful of everyone’s backgrounds, beliefs, values, customs, knowledge, lifestyle and social behaviours. It helps you provide culturally appropriate care and support, so people are empowered to manage their own health.  Cultural responsiveness is important for all social and cultural groups, including:   * Aboriginal and Torres Strait Islander peoples * people from culturally and linguistically diverse backgrounds * refugees or displaced migrants * people at all life stages, including end of life. * people with different abilities, including intellectual and cognitive disabilities. * LGBTIQ people, people from priority populations and sub-cultures, such as the deaf and vision-impaired community.   Cultural responsiveness involves continuous learning, self-exploration and reflection. It draws on a number of concepts, including cultural awareness, cultural sensitivity, cultural safety and cultural competence[[4]](#footnote-4) |

# Foundations of Partnership

## When to engage

Our goal when developing partnerships should always be to enable genuine partnership and self-determination. However, not all interactions will require a formal partnership. Informal partnerships include a wide range of engagements and co-design activities that may take place between governments and the Aboriginal and Torres Strait Islander health sector.

Whether formal or informal, there must be ongoing partnership, engagement, and communication across all stages. Aboriginal and Torres Strait Islander stakeholders are often engaged late, hindering the department’s ability to partner with them effectively. Where possible, engage early and engage often.

One way of determining the required level of partnership could be to consider the level of impact a policy or program will have on Aboriginal and Torres Strait Islander peoples, communities and/or organisations (see table below). It is also important to recognise the time and expertise being sought by the department and the burden this can place on stakeholders. Consideration should be given to remuneration, where appropriate. Aboriginal and Torres Strait Islander stakeholders may not wish to engage with all initiatives, particularly those that have little impact. In such instances, or where the impact would be considered minor, Aboriginal and Torres Strait Islander stakeholders should still be invited to engage and provided an opportunity to determine their level of involvement.

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| Inform | Consult | Involve | Collaborate | Partner | Empower |
| --- | --- | --- | --- | --- | --- |
| **Degree that initiative will affect Aboriginal and Torres Strait Islander peoples** | | | | | |
| **Nil / Minor** | | **Moderate** | | **Significant** | |
| Interests are not affected, or interests are limited or not affected in any special way. | | Interests exist or are affected but wider interests may take priority. | | Interests are one or more of the following:   * Significantly affected. * Overwhelming and compelling. | |

## How to engage

### Partnership Principles

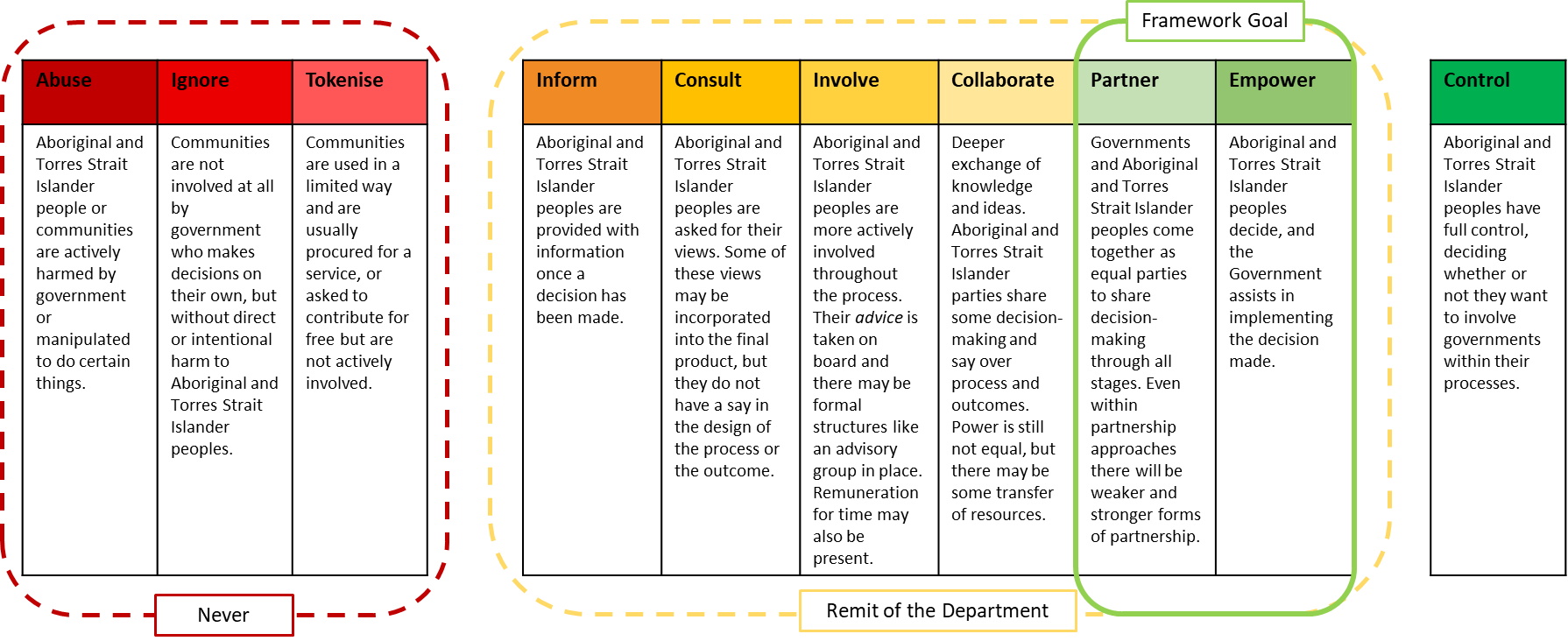
The following table summarises what we heard from our consultation with the sector. These principles are what the department must strive to adhere to if we want to nurture genuine partnerships and strengthen our relationships with the Aboriginal and Torres Strait Islander health sector.

| OPEN | RESPONSIVE | TRANSPARENT |
| --- | --- | --- |
| * We share our priorities and strategies with our Aboriginal and Torres Strait Islander stakeholders. * We are committed to listening to and acting on the views of Aboriginal and Torres Strait Islander people about their needs, priorities, and aspirations. * We agree an approach to co-design with Aboriginal and Torres Strait Islander people, agreeing on shared values and language e.g. what ‘trust’ and ‘collaboration’ means to each partner. * We share research, knowledge and data to build a shared understanding of the matter at hand. | * We understand that community, cultural and other protocols inform our business from the outset. * We recognise and value each partnership as unique. * We actively listen and monitor progress, to adapt and improve our approach. * We engage in a format that is accessible and which shares power. * We train and support staff in culturally safe and responsive engagement. | * We jointly determine with partners and clearly set the scope, objectives, limitations, timeframes and levels of participation sought of our Aboriginal and Torres Strait Islander partners. * We clearly communicate how feedback will or will not be used. * We are open with any risks and how they are mitigated. * We have a shared understanding of respective governance arrangements, authority, roles, and responsibility. |
| **ACCOUNTABLE** | **INFORMED** | **COLLABORATIVE** |
| * We take responsibility for our commitments and ways of working. * We communicate when decisions are made and how stakeholders contributed to it. * We have mechanisms in place to receive and action feedback, to demonstrate accountability to our partners and the National Agreement * We train and support staff to respond to concerns. * We share in the risks as well as the benefits with our partners. | * We engage with a diverse range of perspectives to inform policy and program development. * We underpin decision-making with the effective and ethical use of data, research and insights informed by lived experience, history, and context, and protecting Indigenous Cultural and Intellectual Property (ICIP). * We build the department’s evidence base by embedding Aboriginal and Torres Strait Islander knowledge and lived experience into our work. | * We ensure Aboriginal and Torres Strait Islander people have a genuine opportunity to influence outcomes. * We determine priorities in partnership with Aboriginal and Torres Strait Islander people. * We engage in a manner that fosters mutual respect and trust, with a focus on regular, relationship-focussed communication. * We invest in the capability of the Aboriginal and Torres Strait Islander sector. * We work with other governments and portfolio areas to support holistic health and wellbeing outcomes. |

#### Spectrum of Engagement

This Spectrum of Engagement (Spectrum) demonstrates the range of approaches that can be taken when working with Aboriginal and Torres Strait Islander peoples, communities, and organisations. Power shifts towards Aboriginal and Torres Strait Islander peoples as you move along the Spectrum from left to right. The spectrum also shifts from modes of engagement that we must reject, towards a state of partnership that the department aims to achieve.

Full Aboriginal and Torres Strait Islander control may often result at the finalisation of an engagement and should be an end-stage factored into partnership agreements. Many agencies are currently working in the “inform”, “consult” or “involve” stages of the Spectrum and need to continue working to build partnership capability. Even within the department, there are currently different approaches to engagement.



# Partnership in action

To assist staff to build partnership skills capability, the framework includes three key stages:

* Stage 1 – Building internal partnership capability.
* Stage 2 - Building trust, strengthening relationships.
* Stage 3 - Establishing a partnership.

Generally, the completion of each stage is required before moving on to the next. However, at times stages 1 and 2 may need to commence in parallel as the foundation for stage 3. This represents the continuous journey the department and our staff are on to improve our partnership and engagement approaches with our Aboriginal and Torres Strait Islander stakeholders. It acknowledges that behaviours which damage trust and relationships can also be regressive and require effort to heal and rebuild partnerships.

### Stage 1 – Building internal partnership capability

We have heard from Aboriginal and Torres Strait Islander stakeholders that our approach to partnership often remains tokenistic, with limited power-sharing to decide or lead initiatives. Improving the department’s approach to partnership will require both strengthened approaches to partnership by staff, and by embedding formal partnership actions and accountability mechanisms within the department’s processes.

#### 1.1 – Building staff capability

Building our staffs’ partnership capability first requires an understanding of why partnerships with Aboriginal and Torres Strait Islander stakeholders are so important. We must build our level of cultural safety to ensure that our people are able to develop Aboriginal and Torres Strait Islander relationships.

Staff at all levels across the department must build their knowledge and understanding of partnership policy and practice. A key first step is learning about key partnership policies and commitments. While there are departmental resources to support staff, line areas are also encouraged to develop their own resources and reference material for how Aboriginal and Torres Strait Islander partnerships will operate in their working environment.

##### Strengthening cultural safety

All staff, particularly leaders and teams who regularly engage with Aboriginal and Torres Strait Islander stakeholders, have a responsibility to undertake ongoing cultural safety and anti-racism training. Staff must understand that approaches operate on a spectrum where cultural ‘awareness’ is insufficient. We must actively practice anti-racist behaviour to engage in culturally safe and responsive partnerships.

Staff should critically reflect on their own culture, conscious and unconscious biases, stereotypes, and assumptions and on systemic racism and dominant culture structures which reinforce inequity. The [Spectrum of Engagement](#_Spectrum_of_Engagement) above is a very useful tool for this practice. Staff need to understand the way these have impacted on historical exclusion for Aboriginal and Torres Strait Islander decision-making, and how they continue to impact behaviours and practices. Understanding why Aboriginal and Torres Strait Islander stakeholders may mistrust, and therefore be hesitant to enter into, partnerships with government is a key component.

Staff must also understand that culturally safe engagements are the goal. No one can become fully competent in a culture that is not their own, and therefore cannot determine how cultural safety is practiced. Developing these capabilities is not a substitute for the authority of Aboriginal and Torres Strait Islander stakeholders who determine and define what cultural safety is. Staff should undertake the department’s Aboriginal and Torres Strait Islander [cultural training offerings](#_The_Department’s_cultural) to help strengthen culture.

Spectrum of Cultural Safety

| Cultural Destructiveness | Cultural Incapacity | Cultural Blindness | Cultural Awareness | Cultural Pre-competence | Cultural Competence | Cultural Proficiency | Cultural Safety and Responsiveness |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Holding beliefs or engaging in policies and practices that perpetuate and reinforce historical notions and racial and cultural discrimination. | Sufficient knowledge, insight and skills have been developed to operate in less culturally destructive ways but continue to reinforce culturally biased policies and practices and covertly foster notions of superiority through paternalism. | Actively seeking to be nonbiased in policy and practice but in doing so implicitly or explicitly encourage assimilation by failing to adequately recognise and address the needs of different cultures. | Cultural difference is acknowledged but does not consider political or socio-economic influences on cultural difference, nor does it require reflection on personal cultural perspectives. | Recognising the need for culturally competent policies, procedures, and professional development, yet this recognition does not extend beyond tokenism or discussions on strategies. | Knowledge, reflexivity, and skills developed that are necessary to be genuinely accepting and respectful of cultural differences, and actively implementing policies and procedures that support these characteristics and commitment. | Inclusive policies and procedures are in place, with a fully integrated workforce being proactive in seeking to refine their approach and practice through research, cross-cultural engagement and ongoing professional development. This enables parties to act upon a set of values and guiding principles that support cultural competence and cultural proficiency in every aspect of personal, professional, and organisational functioning. | Acknowledging barriers that arise from inherent power imbalances and taking action to create equity. Rejects a focus on learning cultural customs of different groups to focus on decolonising systems and implementing reflexive practice, including reflecting personal biases and their impact on interactions, and ensuring stakeholders determine whether an interaction is culturally safe. |
| Acknowledges cultural difference but causes harm | | Does not recognise cultural difference | Recognises cultural difference but no action taken to prevent harm | | Recognises cultural difference and takes action, but is focuses on knowing the “other” | | Recognises cultural difference and takes action, focused on knowing and responding to the “self” and the system |

##### Having the right people in the right roles

There must be a strong focus on having the right people to drive the department’s approach to Aboriginal and Torres Strait Islander partnership. This means embedding partnership and cultural safety skills in recruitment and increasing the department’s recruitment, retention and development of Aboriginal and Torres Strait Islander staff, particularly at leadership levels and in roles that require engagement.

Our Aboriginal and Torres Strait Islander staff hold key cultural and professional knowledge that enable better connections with Aboriginal and Torres Strait Islander stakeholders and culturally safe and responsive engagement practices. Recruiting with these considerations in mind will help shift the department’s approach to engagement and embed partnership practice as business-as-usual. Staff should also consider how they will strive to consistently develop their partnership and cultural safety skills, and embed this in their Performance Development Scheme (PDS) Agreement.

#### 1.2 – Building stronger departmental commitment to partnership

The strengths of Aboriginal and Torres Strait Islander cultures, leadership and knowledge are important for all areas of the department, not only the First Nations Health Division. The whole department has a responsibility to implement genuine partnership and shared decision-making across both Aboriginal and Torres Strait Islander-specific and mainstream policy and program areas.

This supports upholding the human rights of Aboriginal and Torres Strait Islander people, to access care where and how they choose.

All line areas must utilise this framework to build their engagement skills and build relationships with Aboriginal and Torres Strait Islander stakeholders. Leaders must be accountable for demonstrating their commitment by driving change within their areas.

Line areas must ensure Aboriginal and Torres Strait Islander voices are captured in departmental governance processes and committee arrangements. Aboriginal and Torres Strait Islander voices and leadership must be able to influence mainstream operations.

### Stage 2 – Building trust and strengthening relationships

Building genuine partnerships takes time. Staff should focus on what we can do to facilitate engagements, build trust and connections, and improve stakeholders’ experiences. Given this, it is important to consider the following before approaching Aboriginal and Torres Strait Islander stakeholders:

* Where does the planned action/initiative register in terms of the [impact on Aboriginal and Torres Strait Islander communities](#_When_and_how)?
* What is the departments motivation for seeking out an Aboriginal and Torres Strait Islander partnership?
* Does the partnership align with key policies? These include:
* [National Agreement on Closing the Gap](https://www.closingthegap.gov.au/national-agreement)
* [The National Aboriginal and Torres Strait Islander Health Plan 2021-2031](https://www.health.gov.au/topics/aboriginal-and-torres-strait-islander-health/how-we-support-health/health-plan?language=en)
* [The National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031](https://www.health.gov.au/resources/publications/national-aboriginal-and-torres-strait-islander-health-workforce-strategic-framework-and-implementation-plan-2021-2031?language=en)

Once a clear and mutually beneficial requirement for a formal partnership has been established, the next step is to identify relevant Aboriginal and Torres Strait Islander stakeholders, while being open to others who may have relevant skills, knowledges, and experiences.

#### 2.1 – Invest in relationships

##### Learn about partner organisations

Staff should develop an understanding of Aboriginal and Torres Strait Islander organisations’ ways of knowing, being, and doing. This is closely aligned with the approaches outlined under Stage 1 of this framework. However, here the focus should be on specific stakeholders, both individuals and collective groups, and their roles within the health context and landscape of the potential partnership initiative. Key considerations for staff and teams are:

* The area(s) of the health sector that stakeholders represent (e.g., community-controlled primary health care, workforce, allied health, mental health, research etc.) and their intersections with other policy areas.
* How organisations are governed and function (e.g., National Peak or member-based organisation).
* Where stakeholders are located and how they engage with, and represent, their community.
* The types of initiatives and priorities that stakeholders have identified as being important to them (E.g. their vision, purpose and strategic plan)

This information is not arbitrary. Building an understanding of stakeholders will help staff navigate Stage 3 of this framework, and help to ensure that partnerships are flexible, place-based, responsive, and tailored to the needs and priorities of Aboriginal and Torres Strait Islander stakeholders.

There are some considerations that need to be made after identifying potential stakeholders. Teams should ask the following questions:

* Would there be appetite from Aboriginal and Torres Strait Islander stakeholders to engage in this formal partnership?
* Will a formal partnership demonstrate reciprocity for the stakeholder and result in a beneficial outcome for Aboriginal and Torres Strait Islander people and communities?
* Are there existing partnerships in the department that could be used and/or existing demands on the stakeholder that we need to be mindful of?
* Will the partnership require the department to engage collectively and individually with organisations operating in the space?
* Has the department already engaged with stakeholders on a similar issue that you could leverage?
* Is there the opportunity for stakeholders to self-identify/self-nominate to participate and self-determine how to participate?
* Can identified stakeholders extend or defer the opportunity to others?
* Do potential stakeholders require additional resources to ensure they can be genuine and equal partners?

##### Building in time and resources

Aboriginal and Torres Strait Islander stakeholders are frequently asked to satisfy the department’s strict deadlines. To minimise the impact, sufficient time is required for engagements, particularly if the relationship is new. Investing in developing and maintaining relationship will assist when you have limited or no control over timeframes. Setting the scope, objectives, limitations, timeframes, and levels of participation required of our Aboriginal and Torres Strait Islander partners must be done jointly and at the very beginning of engagement processes to ensure that timelines and activities are responsive and realistic for all parties, across all stages and deliverables.

Aboriginal and Torres Strait Islander stakeholders should not be expected to take on substantial additional work in addition to their day-to-day business to support a partnership. For partnerships where there is expected to be considerable work, supports and resources should be put in place to enable Aboriginal and Torres Strait Islander stakeholders to fully engage with the department. This means both direct funding for partnerships and funding for activities that enable stakeholders to do the work, and to strengthen organisational capacity.

#### 2.2 – Improve stakeholder experiences

Stakeholders’ experiences are an indication of the department’s approach to genuine partnership and shared decision-making.

While many Aboriginal and Torres Strait Islander stakeholders have previously worked in government, the department itself is very large and difficult to navigate. Staff should consider how they can facilitate streamlined navigation for stakeholders. Having a main and ongoing partnership contact within a team is a useful approach. This contact can also play a key role in facilitating navigation across different areas of the department.

While we still have a long way to go, the department is further along our partnership journey than some other Commonwealth departments. This means we have a role to play in driving and influencing broader change. Staff and teams need to consider connections across other agencies and jurisdictions that partnership initiatives may require, and help to develop these networks with, and for, stakeholders.

##### Address engagement duplication and fatigue for Aboriginal and Torres Strait Islander partners

Our Aboriginal and Torres Strait Islander partners experience a high burden of engagement requests from the department. The department heard from stakeholders through our consultations these requests often go to the same few stakeholders, and often they seek information that has been provided previously to another area. Internal information sharing processes within the department need to be improved, adopting a more collaborative approach by sharing reusable information that has been gleaned from previous engagements.

The department needs to broaden the scope of our engagements to reduce duplication and fatigue for key Aboriginal and Torres Strait Islander people and organisations. Developing partnerships at all levels, not just executive leadership level, will both reduce engagement burden on senior staff/CEOs and build staff partnership capability.

To reduce duplication, we need to address our internal siloes and ensure a more coordinated approach to engagement. It is important to leverage existing and prior engagements. The department is developing a partnerships map to assist. Where possible and appropriate, the department should streamline engagements through high-level First Nations-led policy groups, such as the Aboriginal and Torres Strait Islander Health Governance Group (under development). This will help develop relationships with Aboriginal and Torres Strait Islander organisations and encourage greater face-to-face and placed-based engagements, particularly in communities.

#### 2.3 – Improve the department’s approach to communication

Improving our approach to communication requires us to reframe our understanding of engaging in Aboriginal and Torres Strait Islander contexts.

##### Go early, go often

Open, honest, and ongoing communication across all partnership stages is vital for genuine partnership and shared decision making. A key element of this is ensuring partners have timely access to the information they need to fulfill their role in the partnership. Where this involves sensitive information, areas should consider whether arrangements can be established to ensure the information can be used while maintaining appropriate protections, for example by using confidentiality agreements.

To embed Aboriginal and Torres Strait Islander strengths and leadership, engagement must occur at the early planning stages. Communication must be open and transparent across all stages of development, implementation, monitoring and evaluation with shared and equitable access to information and data to inform decision-making.

##### Be genuine

Previously governments have dictated the how, what and when for engagement with Aboriginal and Torres Strait Islander stakeholders. Likewise, the department have previously filtered information based on perceptions of what would be acceptable to governments. Genuine partnership means that Aboriginal and Torres Strait Islander stakeholders have equal opportunity to determine the level and style of engagement, in line with their priorities.

##### Active listening

Communication in an Aboriginal and Torres Strait Islander partnership context is about government talking less, listening more and understanding the complexity of silence, including that silence does not always mean acceptance. This means creating a safe and respectful working environment where Aboriginal and Torres Strait Islander stakeholders can communicate freely and in their own time. It also means valuing Aboriginal and Torres Strait Islander cultural knowledge and focusing on listening to understand, and learning from, Aboriginal and Torres Strait Islander partners.

##### Demonstrate that you have listened and understood

The department must follow up with our Aboriginal and Torres Strait Islander stakeholders after engagements have occurred, including both progress/process and outcomes. Closing this loop is a necessary step to ensure that Aboriginal and Torres Strait Islander stakeholders can see how their priorities and decisions are translated into policies and practice.

##### Be clear

The department must improve not only how and when we engage with Aboriginal and Torres Strait Islander stakeholders, but also the purpose. Throughout our consultations we were consistently told that departmental staff themselves did not have a clear picture of they wanted, and time was often wasted to clarifying a request.

This may mean ensuring that Aboriginal and Torres Strait Islander stakeholders have greater flexibility to work independently, or that activities are primarily undertake by the department with advice provided by partners. It may also mean creating more opportunities for both formal and informal meetings on a regular and ongoing basis. Stakeholders may prefer diverse modes of communication (e.g. On Country, in-person, workshops etc.).

##### Be open and proactive

We must be open and honest with our stakeholders throughout the entire process. This is particularly important when complications arise. During complications, the department should be proactive, reaching out to our partners and increasing communication.

Our partners must feel they are safe to raise concerns, free from repercussions and, more than that, where they trust that the department will be responsive. The department must build staff and organisational capacity provide culturally safe engagement where we learn from complications, see it as a positive and commit to and implement best-practice in future scenarios, rather than simply providing the opportunity for stakeholders to “get their frustrations off their chest.”

### Stage 3 – Entering a Partnership

After understanding the foundational principles of partnership and engagement, and before commencing any work, it is time to take practical action to begin a partnership. This section of the framework will guide you through the process, including culturally safe and responsive approaches through all steps.

#### 3.1 – Connect with stakeholders

The first step is to reach out to Aboriginal and Torres Strait Islander stakeholders to outline the proposed action/initiative, the purpose of partnership and the potential beneficial outcomes. In this first approach, make sure it is clear that partnership arrangements will be co-designed. Aboriginal and Torres Strait Islander stakeholders should not be expected to come to the table on the department’s terms.

Previous good relationships are a strong method to build initial trust and rapport with Aboriginal and Torres Strait Islander stakeholders. If this is a new stakeholder for your area reach out to departmental colleagues who have an established relationship, to make an introduction. Where there are no existing relationships with the department, ensure that your first approach is very clear on the purpose and intent of the communication and initial discussions. There should be acceptance of a reciprocal relationship where the department does not just want to take from the Aboriginal and Torres Strait Islander stakeholders but where there are opportunities to support them achieve their goals and vision.

If Aboriginal and Torres Strait Islander stakeholders agree to further discussions, they should be provided, where possible, the opportunity to determine the method of engagements. If possible, meetings should include equal representation between Aboriginal and Torres Strait Islander stakeholders and government people, including across levels of leadership i.e. Where an organisational CEO is attending meetings then there should be equal commitment for senior executive staff (decision makers) to attend and be actively engaged.

The length and agenda of the initial meeting should be flexible to facilitate open discussion and sharing of power. Department staff should create a safe space for invited stakeholders to raise any questions and concerns without judgement where their knowledges, experiences, skills, input and feedback is valued and respected. Allowing reasonable time following the meeting for stakeholders to discuss issues and topics without the presence of department staff may also be an option.

##### Cultural protocols

Staff must demonstrate respect for Aboriginal and Torres Strait Islander cultural protocols. As Aboriginal and Torres Strait Islander cultures are rich and diverse, the best way to do this is to respectfully ask stakeholders if they have any protocols they wish to follow. Department staff should:

* Begin all meetings with an Acknowledgement of Country and where appropriate organise a Welcome to Country for significant events.
* Recognise the importance of introductions in Aboriginal and Torres Strait Islander cultures. Staff should share who they are and where they are from.
* Use language that respects the integrity and beliefs of Aboriginal and Torres Strait Islander peoples. This includes using culturally safe and responsive terms. Please see the departments [Aboriginal and Torres Strait Islander style guide](https://healthgov.sharepoint.com/:w:/r/sites/support-comms/_layouts/15/Doc.aspx?sourcedoc=%7Be3737750-e8fe-4454-adf8-a8d729040ec3%7D&action=default&mobileredirect=true) for full guidance. Included below is the guidance on what to use when referring to people:
* Use:
* Aboriginal and Torres Strait Islander people (use this as a first choice in most cases. Refers to a collective of individual people from different Aboriginal and Torres Strait Islander Nations across Australia)
* Aboriginal and Torres Strait Islander Peoples (refers to the collective of Aboriginal and Torres Strait Islander Nations across Australia, however individual nation groups are preferred when on Country and recognising Country)
* First Nations Peoples
* First Nations people
* Nation, where known and referring to an individual e.g. Larrakia Elder
* Non-Indigenous Australians
* Avoid:
* Indigenous people
* Indigenous Australians
* First Nations Australians
* First Peoples
* Do not use (these terms are offensive):
* Aborigine, Aborigines
* Islander, Islanders
* Acronyms like ‘ATSI’ or ‘TSI’
* Aboriginal and Torres Strait Islander background
* Aboriginal and Torres Strait Islander heritage
* Aboriginal and Torres Strait Islander descent
* They/Them to refer to Aboriginal and Torres Strait Islander Peoples (noting that First Nations individuals may use they/them or other gender neutral pronouns)
* Or any other derogatory name or term
* Recognise different communication styles (including your own).
* Recognise, respect, and reflect on different points of view.
* Acknowledge the context and work with the assets and strengths using [Strength-based language](https://www.stylemanual.gov.au/accessible-and-inclusive-content/inclusive-language/aboriginal-and-torres-strait-islander-peoples#strengthsbased_language_respects_continuous_cultures_and_connections) rather than focusing solely on ‘problems' which perpetuate a deficit narrative (discourse) of Aboriginal and Torres Strait Islander people.
* Avoid using government jargon and acronyms.

#### 3.2 – Develop and implement

It is especially important that the department does not predetermine what a partnership will look like. Instead, listen and learn from Aboriginal and Torres Strait Islander stakeholders as the experts in what is required. All partnerships should develop, agree on, and document a clear set of expectations that are mutually beneficial and accepted. Examples include:

* Formal partnership agreement.
* Memorandum of Understanding (MoU).
* Terms of Reference (ToR).

In developing a partnership, ensure you are consistently upholding the Framework Partnership Principles. To ensure the ongoing success of partnerships, teams should implement genuine partnership and shared decision-making through all stages of the initiative and commit to continuous improvement. This means reviewing, monitoring, and evaluating throughout the partnership. This is particularly important for long-lived partnerships where delaying a review or evaluation could mean partners miss out on significant opportunities to improve the partnership.

Other considerations for success include:

* Ensuring there is frequent, open, and ongoing communication. This includes communicating any changes in circumstances (i.e. setbacks, delays, and changes to scope) and closing the feedback loop in all activities.
* Ensuring there is equal access to data and information.
* Be mindful that Aboriginal and Torres Strait Islander organisations and stakeholders do not have unlimited resources and consideration needs to be taken on the amount of time, load of work, responsibilities and the expectations on the stakeholder. Stakeholders often have a number of different department areas contact them at the same time. This is a result of silos within the department and creates difficulties for stakeholders to engage across the diverse areas.

##### Cease or handover partnership

The time will come when a formal partnership is no longer required. The finalisation of a partnership must be agreed to by all parties and it is preferable to handover the ongoing ownership of the initiative to the Aboriginal and Torres Strait Islander partners, wherever possible.

As part of the cessation process, a review of the partnership should be undertaken in a culturally safe way as determined by the stakeholder or partner, to reflect on the experiences of partners to implement improvements and changes to future opportunities as an active demonstration of our commitment to continuous quality improvement (CQI).

The end of a formal partnership does not mean an end to a relationship, instead, partners will move into an informal partnership with the intent of supporting the Aboriginal and Torres Strait Islander stakeholders in achieving their goals.

## Framework Governance and Accountability

This framework supports the department to deliver on our commitment to partnership by providing practical guidance however the National Agreement holds the department accountable. Under clauses 36 and 37 of the National Agreement, each government is required to report on partnerships annually, through both the Partnership Stocktake coordinated by the National Indigenous Australians Agency (NIAA) and our departmental annual report. This demonstrates our accountability to Aboriginal and Torres Strait Islander partners and stakeholders where stakeholders agree that there is a genuine partnership.

The department has built in additional internal accountability mechanisms through the Closing the Gap Framework for Action, with progress tracking aligned to the Steering Committee reporting processes.

The department is also accountable for the partnership experiences of our Aboriginal and Torres Strait Islander stakeholders. These experiences are the fundamental indicator of whether the department is successfully implementing genuine partnership and shared decision-making. The development and maintenance of strong equitable working relationships needs to be recognised and measured as a tangible outcome.

Each formal partnership agreement should consider in co-design how the department’s performance is measured, reviewed, monitored and evaluated, including through stakeholders’ experiences. This includes outlining how data and information will be captured, shared and stored to ensure informed decision-making for all parties, including cultural intellectual property (that can only be owned and be determined by the Aboriginal and Torres Strait Islander individual or group) and how complaints and disputes will be handled.

### Governance

Implementation, governance, and accountability for this framework will be the responsibility of the department led by the Secretary and implemented through the department’s Closing the Gap Steering Committee.

### Internal accountability

Progress to implement the framework will be monitored through the indicators in the department’s Closing the Gap Framework for Action:

* Proportion of policies and programs that were developed in partnership with Aboriginal and Torres Strait Islander peoples.
* Increase in the number of partnerships that align with the Stronger Partnership Elements.

Progress against the Framework for Action is tracked through the department’s project management system, ALTUS, and reported in the department’s annual report.

ALTUS Reports provided to every Steering Committee meeting.
Executive Committee ALTUS reports provided to EC quarterly.
Secretaries Board Every 6 months 
DoHAC Annual Report: Annual report made by CTG Steering committee
Commonwealth CTG Annual Report: Includes Priority reforms and socio-economic targets

### External accountability

Implementation of the framework will be included as part of the Commonwealth Closing the Gap reporting. This includes the biannual report to the Commonwealth Secretaries Board on the implementation of the Priority Reforms, and through Commonwealth Closing the Gap Implementation Plans and Annual Reports tabled in Parliament each year to outline progress against the National Agreement.

The department is also accountable for the partnership experiences of our Aboriginal and Torres Strait Islander stakeholders. These experiences are the fundamental indicator of whether the department is successfully implementing genuine partnership and shared decision-making.

## Further partnership resources for staff

### Key partnership policies

Key external policies for staff to familiarise themselves with include:

* [National Agreement on Closing the Gap](https://www.closingthegap.gov.au/national-agreement)
* [The National Aboriginal and Torres Strait Islander Health Plan 2021-2031](https://www.health.gov.au/topics/aboriginal-and-torres-strait-islander-health/how-we-support-health/health-plan?language=en)
* [The National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031](https://www.health.gov.au/resources/publications/national-aboriginal-and-torres-strait-islander-health-workforce-strategic-framework-and-implementation-plan-2021-2031?language=en)

Key internal policies for staff to familiarise themselves with include:

* The Steering Committee’s [Framework for Action](https://healthgov.sharepoint.com/:p:/r/sites/about-committees/_layouts/15/Doc.aspx?sourcedoc=%7B9a1e5e84-194e-48c0-86a9-1bc50cdea248%7D&action=edit&mobileredirect=true)
* The Department’s [Reconciliation Action Plan](https://www.health.gov.au/resources/publications/reconciliation-action-plan)
* The Department’s Cultural Learning Strategy (under development)
* The Department’s Aboriginal and Torres Strait Islander Recruitment and Retention Strategy (under development)

### Department’s cultural training

The Department has several online and face-to-face Aboriginal and Torres Strait Islander cultural training offerings. These are facilitated by Aboriginal and Torres Strait organisations and include:

* [Building Cultural Capability Foundations](https://doh.plateau.com/learning/user/common/viewItemDetails.do?componentTypeID=Classroom&componentID=251002&revisionDate=1646878140000&catalogCurrencyCode=AUD&returnLink=%2Flearning%2Fuser%2Fcatalogsearch%2FcatalogSearchDispatchAction.do%3FsearchType%3DfilteredSearch%26keywords%3D&backto=%2Flearning%2Fuser%2Fcatalogsearch%2FcatalogSearchDispatchAction.do%3FsearchType%3DfilteredSearch%26keywords%3D" \l "/D7858C20A5F7A9F51700A038A3D15E4F)
* Culturally Safe Workplaces
* [Engaging with Community](https://doh.plateau.com/learning/user/common/viewItemDetails.do?componentTypeID=Classroom&componentID=251005&revisionDate=1637827500000&catalogCurrencyCode=AUD&returnLink=%2Flearning%2Fuser%2Fcatalogsearch%2FcatalogSearchDispatchAction.do%3FsearchType%3DfilteredSearch%26keywords%3D&backto=%2Flearning%2Fuser%2Fcatalogsearch%2FcatalogSearchDispatchAction.do%3FsearchType%3DfilteredSearch%26keywords%3D" \l "/BA510E86E55E8ECA1700E0385C93C99E)
* [Ngunnawal Language Workshops](https://doh.plateau.com/learning/user/common/viewItemDetails.do?componentTypeID=Classroom&componentID=244001&revisionDate=1623369600000&catalogCurrencyCode=AUD&returnLink=%2Flearning%2Fuser%2Fcatalogsearch%2FcatalogSearchDispatchAction.do%3FsearchType%3DfilteredSearch%26keywords%3D&backto=%2Flearning%2Fuser%2Fcatalogsearch%2FcatalogSearchDispatchAction.do%3FsearchType%3DfilteredSearch%26keywords%3D" \l "/1CCB1167058BC5821700E438C0B77993)
* [Kaurna Language Workshops](https://doh.plateau.com/learning/user/common/viewItemDetails.do?componentTypeID=Classroom&componentID=261007&revisionDate=1656391440000&catalogCurrencyCode=AUD&returnLink=%2Flearning%2Fuser%2Fcatalogsearch%2FcatalogSearchDispatchAction.do%3FsearchType%3DfilteredSearch%26keywords%3D&backto=%2Flearning%2Fuser%2Fcatalogsearch%2FcatalogSearchDispatchAction.do%3FsearchType%3DfilteredSearch%26keywords%3D" \l "/3A672F9032F9BC1918003038E8372CA8)
* [SBS Inclusion Program: Aboriginal and Torres Strait Islander course](https://doh.plateau.com/learning/user/common/viewItemDetails.do?componentTypeID=Online%20Learning%20Module&componentID=89010&revisionDate=1600280520000&catalogCurrencyCode=AUD&returnLink=%2Flearning%2Fuser%2Fcatalogsearch%2FcatalogSearchDispatchAction.do%3FsearchType%3DfilteredSearch%26keywords%3D&backto=%2Flearning%2Fuser%2Fcatalogsearch%2FcatalogSearchDispatchAction.do%3FsearchType%3DfilteredSearch%26keywords%3D#/B910625FAC582AABE10000000A6EB081)

### Aboriginal and Torres Strait Islander literature

There is a wealth of literature available. We have highlighted a few key references for the APS and health context.

* [Engaging First Peoples: A Review of Government Engagement Methods for Developing Health Policy Lowitja Institute](https://www.lowitja.org.au/resource/engaging-first-peoples-review/)
* [Resources — Coalition of Peaks](https://www.coalitionofpeaks.org.au/resources)
* <https://www.nhlf.org.au/resources/>

### Key departmental contacts

|  |  |
| --- | --- |
| Closing the Gap Steering Committee Secretariat | Closing the Gap and Priority Reforms Section |
| [CTGSteeringComm@health.gov.au](mailto:CTGSteeringComm@health.gov.au) | [CTGandPriorityReforms@health.gov.au](mailto:CTGandPriorityReforms@health.gov.au) |

# Appendix A – Developing the framework

In 2023, Aboriginal and Torres Strait Islander-led organisation Everywhen co-designed and facilitated an internal engagement process to understand the gaps and barriers preventing department staff from undertaking genuine partnership and shared decision-making.

Using this information, Everywhen engaged with Aboriginal and Torres Strait Islander health sector leaders for advice and strategies to address those barriers; to equip staff with the information and tools to develop partnerships with the Aboriginal and Torres Strait Islander health sector.

First Nations Health Division has been working with Aboriginal and Torres Strait Islander leaders to ensure this framework reflects the priorities of Aboriginal and Torres Strait Islander peoples. Where possible, definitions and supporting information has been taken from materials drafted by Aboriginal and Torres Strait Islander health sector organisations.

Health.gov.au

All information in this publication is correct as at April 2025.

1. *National Aboriginal and Torres Strait Islander Health Plan.* Department of Health and Aged Care. (2021, December 15). <https://www.health.gov.au/resources/publications/national-aboriginal-and-torres-strait-islander-health-plan-2021-2031> [↑](#footnote-ref-2)
2. [↑](#endnote-ref-2)
3. *National Aboriginal and Torres Strait Islander Health Plan*. Department of Health and Aged Care. (2021, December 15). <https://www.health.gov.au/resources/publications/national-aboriginal-and-torres-strait-islander-health-plan-2021-2031> [↑](#footnote-ref-3)
4. 2 *National Aboriginal and Torres Strait Islander Health Plan*. Department of Health and Aged Care. (2021, December 15). https://www.health.gov.au/resources/publications/national-aboriginal-and-torres-strait-islander-health-plan-2021-2031

   *Culturally responsive practice*. Agency for Clinical Innovation (2022). https://aci.health.nsw.gov.au/projects/consumer-enablement/how-to-support-enablement/culturally-responsive-practice [↑](#footnote-ref-4)