

# 15th Implementation Plan Advisory Group Meeting

## 7 December 2020

### COMMUNIQUE

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The fifteenth Implementation Plan Advisory Group (IPAG) meeting was held by videoconference on 7 December 2020. The meeting was co-chaired by Dr Janine Mohamed, Deputy Chair of the National Health Leadership Forum (NHLF), and Mr Gavin Matthews, First Assistant Secretary of the Indigenous Health Division within Australian Government Department of Health (DoH).

The meeting strongly focused on the development of the refreshed National Aboriginal and Torres Strait Islander Health Plan (Health Plan). Updates were also provided from the DoH on the COVID-19 response for Aboriginal and Torres Strait Islander populations and the development of the *National and Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031*; and from the National Indigenous Australians Agency (NIAA) on the next steps for the [National Agreement on Closing the Gap](#).

IPAG members also heard presentations from Dr Janine Mohamed, in her capacity as Chief Executive Officer of the Lowitja Institute, on the draft report: *Culture is key: Towards cultural determinants-driven health policy*; and from Associate Professor Ray Lovett and Ms Makayla-May Brinckley, from the Australian National University (ANU), on the Mayi Kuwayu study.

## Coronavirus (COVID-19)

Dr Lucas de Toca, A/g First Assistant Secretary of the COVID-19 Primary Care Response team in DoH, provided an update on the COVID-19 situation. Dr de Toca noted that, of the 147 current COVID-19 cases nationally, the overall rate for Aboriginal and Torres Strait Islander peoples continues to be sixfold lower than the general population, representing approximately 0.5 per cent of total cases.

Members noted that the work of the Aboriginal and Torres Strait Islander Advisory Group on COVID-19 will continue to use the [Closing the Gap Priority Reform Areas](#) as the guiding principles for its [Management Plan for Aboriginal and Torres Strait Islander Populations for COVID-19](#). Members also noted the current focus on a potential COVID-19 vaccine, and that

Aboriginal and Torres Strait Islander peoples have been identified as a priority population for early roll out as part of a targeted strategy.

## **The Mayi Kuwayu study**

Associate Professor Lovett and Ms Brinckley, from the ANU, presented an update on the analysis and findings from the Mayi Kuwayu Study. The study aims to strengthen understandings of Aboriginal and Torres Strait Islander culture, health and wellbeing, and how culture interacts with health risk and protective factors. It uses a cultural wellbeing framework, with key cultural domains identified as: languages; Country and caring for Country; cultural expression; family, kinship and community; self-determination and leadership; and knowledge and beliefs. Members noted that these cultural domains have been incorporated within the draft framework for the National Aboriginal and Torres Strait Islander Health Plan.

Associate Professor Lovett noted that preliminary results demonstrate associations between cultural determinants and social determinants in relation to their influence on health outcomes. For example, preliminary results are demonstrating an association between knowing your tribe or mob and higher educational attainment, which is a determinant for better health. Furthermore, results are demonstrating an association between exposure to Aboriginal /Torres Strait Islander languages and higher educational attainment. This growing evidence base is demonstrating how cultural factors, such as language and connection to Country, can be linked to improved social determinants.

## **Culture is key: Towards cultural determinants-driven health policy draft report**

The Lowitja Institute provided an update on the key findings of its draft report, *Culture is Key: Towards cultural determinants-driven health policy*, which demonstrates the opportunity for structural and systematic change through embedding cultural determinants approaches across public policy. The findings note that a new model of policy development is required to enable recognition of Aboriginal and Torres Strait Islander leadership and cultures, address racism and structural (including historical) inequality and implement partnerships. Members noted that this will require leadership from across governments, including from areas outside of health and wellbeing policy portfolio areas.

Members discussed how Commonwealth agencies could implement the findings, recognising the momentum created through the National Agreement on Closing the Gap. Members noted that the report's findings will inform the Health Plan refresh, and may be useful in guiding action against the commitments in the National Agreement on Closing the Gap.

## The National Agreement on Closing the Gap

Ms Debbie Mitchell, Group Manager of the Social Policy and Programs Group in NIAA, presented an update on next steps for the implementation of the National Agreement on Closing the Gap. Members noted the work being undertaken on progressing the National Agreement, including the development of implementation plans by each party by mid-2021. Members also noted the recent decision by the [Joint Council](#) to develop an online public tracker of the commitments in the National Agreement, as well as its endorsement of indicators for each of the four Priority Reform Areas.

Members were informed that a sector strengthening workshop for health is currently scheduled for the end of January 2021. Members noted jurisdictional work underway, including in the Northern Territory, to inform the development of jurisdictional Implementation Plans. Members also noted the need for adequate investment, proper planning processes and embedded partnerships through structured agreements.

Members also noted the busy policy landscape and the need for strong alignment, including across jurisdictions, to enable combined and complementary effort and investment. This includes strong alignment between the refreshed Health Plan the Closing the Gap implementation plans across all jurisdictions.

## National Aboriginal and Torres Strait Islander Health Plan refresh

Members were invited to provide feedback on the latest working draft of the Health Plan. Members acknowledged that more contextual information should be included to bring the narrative further into the “here and now”, including documenting achievements. Members also acknowledged that further work is required to refine the narrative, and articulate outcomes in practical terms.

Members discussed the significance of highlighting the importance and vitality of Aboriginal Community Controlled Health Services (ACCHS), while also ensuring a significant accountability focus on mainstream health services to improve access and broader responsiveness across the health system, including Primary Health Networks. Members noted the role ACCHSs’ could play in working with mainstream health organisations to address institutional racism. Members further raised that more contextual information on aged care and disability is required, noting the associated royal commissions are yet to deliver their final reports.

The National Aboriginal Community Controlled Health Organisation (NACCHO) undertook to draft information related to ACCHS in the Health Plan, and to seek feedback from affiliates and members on the current working draft Health Plan, noting caveats. The

working draft of the Health Plan will also be circulated to the National Health Leadership Forum for early feedback.

## Updates

Members noted the 7 December 2020 release of the [\*Tracking progress against the Implementation Plan goals for the Aboriginal and Torres Strait Islander Health Plan 2013–2023\*](#) update and its findings, as presented by Dr Fadwa Al-Yaman from the Australian Institute of Health and Welfare (AIHW). Members noted that the Implementation Plan goals on track include immunisation rates for children aged 1 and 5 years of age (however, not for children aged 2 years of age); immunisation for influenza and pneumonia for Indigenous Australians aged over 50 years of age; and all goals relating to smoking and maternal health (except for the rate of women smoking during pregnancy). Members requested that the AIHW undertake further analysis of the goals at the regional level to better understand drivers and patterns, and to present these findings at the next meeting in 2021.

The DoH updated members on the development of the *National and Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031*, noting that a draft plan was published for national online consultation on 23 November 2020. An invitation to participate was sent to over 900 stakeholders and is open for consultation until 15 February 2021. Members noted that more consideration should be given to ensure that Aboriginal and Torres Strait Islander students enrolled to train as General Practitioners have the necessary tools and supports complete their studies.

The first IPAG meeting of 2021 in March will focus on progressing the refreshed Health Plan, which is due to be finalised by May 2021.

For further information, please contact the [IPAG.Secretariat@health.gov.au](mailto:IPAG.Secretariat@health.gov.au)