

18th Implementation Plan Advisory Group Meeting

7 October 2021

COMMUNIQUE

Summary

The eighteenth Implementation Plan Advisory Group (IPAG) meeting was held by videoconference on 7 October 2021. The meeting was co-chaired by Ms Donna Murray, Chair of the National Health Leadership Forum (NHLF), and Mr Gavin Matthews, First Assistant Secretary of the Indigenous Health Division (IHD) of the Australian Government Department of Health.

The meeting focused on the development of an accountability framework and governance arrangements to support the refreshed National Aboriginal and Torres Strait Islander Health Plan (Health Plan). Dr Raglan Maddox presented recent data and evidence on tobacco use based on research being led by the Aboriginal and Torres Strait Islander Health Group at the Australian National University.

National Aboriginal and Torres Strait Islander Health Plan and National Agreement on Closing the Gap

Mr Matthews thanked IPAG members and acknowledged the Health Plan Working Group for their considerable contribution to the development of the refreshed National Aboriginal and Torres Strait Islander Health Plan and advised that it is now being progressed through health ministers for final approval. He noted that pending ministerial approval the Health Plan will be released later this year.

Mr Matthews noted that the Commonwealth Closing the Gap Implementation Plan was released on 5 August 2021. He further noted that specific funding was announced to support the Closing the Gap Implementation Plan, including:

- **\$254 million** to improve the infrastructure of Aboriginal and Torres Strait Islander community-controlled health services under the Commonwealth's Closing the Gap Implementation Plan.
- **\$45 million** for action to improve healthy birthweights.
- **\$82 million** for the Connected Beginnings Program, which includes approximately \$30 million for Aboriginal and Torres Strait Islander health services.

Mr Matthews advised that the Department is continuing to progress the development of a health sector strengthening plan in partnership with the Aboriginal and Torres Strait Islander health sector. The plan will be finalised later this year.

National Aboriginal and Torres Strait Islander Health Plan – Accountability Framework

Mr Matthews noted that an accountability framework for the Health Plan will be developed within 12 months of the Health Plan's release. IPAG members engaged in a discussion about the development of the accountability framework including what level of detail should be reported, linkages with accountability mechanisms in other key policies, and the need to avoid increasing the reporting burden on Aboriginal and Torres Strait Islander health services. It should also ensure appropriate accountability for governments. They also noted that strong relationships between the Commonwealth and state/territory governments are necessary.

The Secretariat agreed to develop an issues paper to seek further views from members to assist in progressing the development of the accountability framework.

Aboriginal and Torres Strait Islander Health Sector – Governance Arrangements

Mr Matthews noted that new governance arrangements for the Health Plan will be determined within 6 months of the Health Plan's release. He further noted these arrangements may also include jurisdictions in partnership with Aboriginal and Torres Strait Islander leadership and governments.

Members engaged in initial discussions about the governance arrangements and agreed to provide further comments and feedback to the Secretariat out-of-session.

The Mayi Kuwayu Study – Tobacco use

Dr Raglan Maddox of the Research School of Population Health, Australian National University, provided a re-cap of the Mayi Kuwayu Study findings and evidence generated through the Tackling Indigenous Smoking evaluation and his program of research.

The Mayi Kuwayu Study

Dr Maddox advised the Mayi Kuwayu Tackling Indigenous Smoking (TIS) research paper is expected to be published before mid-November 2021. The Study highlighted that smoking is the leading contributor to the burden of disease and mortality for Aboriginal and Torres Strait Islander peoples, with an estimated 37 per cent of all Aboriginal and Torres Strait

Islander deaths attributed to smoking. It also found encouraging anti-smoking attitudes and behaviours in areas serviced by the TIS program.

Aboriginal and Torres Strait Islander tobacco program evidence

While smoking rates have declined among Aboriginal and Torres Strait Islander people over the last 15 years, the prevalence of smoking in remote and very remote locations has remained largely static but with some shifts toward anti-smoking behaviours.

There was discussion regarding tobacco-related morbidity and mortality. Dr Maddox outlined an expected steady decline in tobacco-related cardiovascular mortality, with tobacco-related respiratory disease and cancer mortality remaining high but peaking within the next decade. While the benefits of reduced tobacco use and quit smoking programs will be seen in the short term, greater benefits would be seen over the long term due to the lag time between tobacco use and tobacco-related morbidity and mortality.

Members also engaged in a discussion about social and cultural determinants, particularly discrimination and racism, and the impacts of stressors on health outcomes and smoking uptake by Aboriginal and Torres Strait Islander people. Dr Maddox noted that culture has a positive impact on health behaviours but that more study in this area is required.

For further information, please contact the IPAG.Secretariat@health.gov.au