

My Life, My Lead

Implementation Plan Advisory Group (IPAG)

Consultation Notes

Darwin – 20 April 2017

A range of face to face consultations, coupled with an online submission process, were established to hear from stakeholders and community on how to best address the social determinants and cultural determinants of Indigenous health.

The tenth face-to-face consultation was held in Darwin on 20 April 2017. Outcomes from the forum are below.

The session focussed on what can be done to address the social and cultural determinants of health. The following themes were raised, including some suggested case studies to look at what is working well on the ground in the Northern Territory.

Key Observations:

Racism

- Structural racism needs to be considered in policy development, policy makers are held to account in instances where policies indirectly promote racism, trauma or discrimination.
- Continuous positive messaging is needed, there are plenty of successes and we should focus on sharing these to empower the community and remove unfair and negative stereotypes. An example of where this works well includes showcasing stories on National Indigenous Television.

Lateral violence

- Social determinants and stress can be contributing factors to violence, which is damaging to individuals and community as it erodes a sense of self-worth and identity.
- Supporting young people in positive behaviours starts at a young age and should be continued in school environments. The younger generation, along with parents and the general population should be given clarity around what behaviours are acceptable. Accountability mechanisms should be provided to assist people in understanding where behaviours are considered unacceptable. It was suggested that bringing families into the school environment would be a useful tool.

Connection to family, community, country, language and culture

- Cultural festivals are not just an activity; they create community pride and achieve positive outcomes.
- Tiwi Islands – Skin Group Leaders – facilitate all stakeholder engagements in community, resulting in community driven solution brokering. Social and well-being officers working with community and cultural leaders to provide pathways to health services – this includes practical steps including flowcharts to assist people in understanding referral pathways.

- A number of cooking classes have been successful in engaging with the community, providing cultural experiences and providing access to professional services to address social and cultural determinants. Other outcomes from these programs include better understanding of nutrition and exercise, and the resulting health outcomes.
- A number of support groups have been successful in bringing together community and achieve many outcomes, these include: youth cultural camps, men's sheds, women's groups and local ambassadors who have achieved positive health outcomes.
- The National Cultural Respect Framework 2016-26 is a good step forward and could be extended through a national reporting framework that is supported by the states and territories.

Interaction with Government Systems and Services

- Government often looks at governance requirements from a westernised approach, meaning that local governance in Aboriginal and Torres Strait Islander community is discounted.
- Community controlled services work well as they provide a mechanism for Aboriginal and Torres Strait Islander Australians to manage the delivery of services. In addition to providing employment opportunities, it provides meaningful pathways for Aboriginal and Torres Strait Islander people to take on leadership, management and board positions.
- Further strategic policy linkages are needed, including taking an investment approach, for example, 'a health in all policies' approach to services and programs.
- There are examples in the NT of strong Aboriginal and Torres Strait Islander governance, which respects western governance requirements while embedding and privileging the place of culture.

Funding and Contracts

- Short term government contracts have an impact on the communities they are designed to help, as they don't provide enough time to develop relationships and for outcomes to be achieved and it is difficult to recruit and maintain a workforce when funding is uncertain.
- Provide an opportunity to let programs 'ground' and let well-intended mistakes happen, and learn from these experiences - there isn't always a need to completely change programs and/or projects.
- As an aspirational goal it would be good to see the community controlled sector grow to deliver additional services, including: community controlled education, housing and shops. This could be achieved through recognising existing strengths and by providing capacity building and supports, where required.

Health

- Hospitals are not always culturally safe, resulting in barriers to treatment. Birthing is an issue as family are disconnected for weeks at a time and often without support. Birthing on country provides a greater connection to country and provides cultural inclusion.
- Developing relationships and respect with individuals and communities is central to good engagement with health services, and there needs to be recognition of family

and community approaches to healthcare, while respecting individual privacy of patients.

- It is important to allow family members to travel with patients when travelling out of remote locations to receive medical treatment – this is a barrier to treatment.

Law and Justice

- People are released from prison with minimal supports to re-engage in the community, such as a fare to return home. There should be a stronger focus on providing support to assist people in re-engaging in the local community to avoid ongoing issues, including for example, a lack of reconnection to community.
- Cultural camps and other similar programs work well as a deterrent to antisocial behaviour that can lead to incarceration.

Employment

- Aboriginal and Torres Strait Islander health workers are so much more – their work includes taking a holistic approach and delivering services via a well-being model. Workers often find it hard to ‘switch-off’ and often provide support outside of working hours. In addition, often workplaces do not have a good understanding of cultural obligations and there often isn’t a lot of emotional or workplace support in navigating these complexities.
- There is a need to invest in culturally sensitive workplaces to provide safe services to community, and to provide a mechanism/safety net for people to ‘call out’ racist behaviours.
- The NT ‘Back on Track’ employment target has increased the number of Aboriginal and Torres Strait Islander people in the health workforce. Workforce strategies work and could be extended to Territory/ Commonwealth workforces to promote employment of local Aboriginal and Torres Strait Islander people.

Education

- Scholarship opportunities in the Northern Territory are lacking.
- The National Curriculum is an essential tool to increase the focus on Aboriginal and Torres Strait Islander culture and history pre-colonisation and should reflect the strengths of culture, connection to country and the importance of family. Delivery of the curriculum is important in addressing inconsistent national views, unconscious bias.
- Cultural competency and world-views should be extended to all university entrants and delivered on an ongoing basis. For health workers, provide a “one day on the ground cultural training experience” to understand the local context.