Government of **Western Australia**
Department of **Health**

Review of the National Agreement on Closing the Gap 2026

Submission by

Western Australia Department of Health, Immunisation Program

October 2026

Acknowledgement of Country and People

Western Australia Health acknowledges the Aboriginal people of the many traditional lands and language groups of Australia. It acknowledges the wisdom of Aboriginal Elders both past and present and pays respect to Aboriginal communities of today.

Using the term Aboriginal

Within Western Australia, the term Aboriginal is used in preference to Aboriginal and Torres Strait Islander, in recognition that Aboriginal people are the original inhabitants of Western Australia. Aboriginal and Torres Strait Islander may be referred to in the national context and Indigenous and/or First Nations may be referred to in the international context. No disrespect is intended to our Torres Strait Islander colleagues and community.

About this submission

This submission has been prepared by the Western Australia (WA) Department of Health, Immunisation Program in response to the Productivity Commission's *Review of the National Agreement on Closing the Gap* (the National Agreement).

The submission focuses on the role of immunisation as a practical and evidence-based preventive health intervention that contributes to improved health outcomes for Aboriginal peoples. It draws on the Immunisation Program's experience working in partnership with Aboriginal people and communities, the Aboriginal Health Council of WA (AHCWA), Aboriginal Community Controlled Health Organisations (ACCHOs), Aboriginal health services, Aboriginal health professionals, public health services and other immunisation stakeholders across WA.

This submission highlights opportunities to strengthen the Closing the Gap Priority Reforms through:

- shared decision-making and Aboriginal leadership
- culturally safe service delivery
- investment in the community-controlled sector
- Aboriginal workforce development
- improved access to immunisation services
- better access to data and information
- increased investment in preventative health

The submission aligns with the priorities outlined in the:

- *Western Australian Immunisation Strategy 2024-2028*
- *National Immunisation Strategy for Australia 2025-2030*

Both strategies identify Aboriginal peoples as priority populations and emphasise equity, partnership, culturally responsive approaches and improved access to immunisation.

Prevention remains underrepresented within Closing the Gap discussions despite its potential to reduce avoidable illness, hospitalisations and long-term health expenditure. Greater investment in preventative health initiatives, including immunisation, would contribute to improved outcomes across multiple Closing the Gap targets.

The WA Department of Health Immunisation Program (the Program) acknowledges that lasting improvements in health outcomes are achieved when Aboriginal people and communities are empowered to lead, influence and shape the policies, programs and services that affect them. This submission provides recommendations aimed at supporting this approach and contributing to the goals of the *National Agreement on Closing the Gap.*

Executive Summary

Immunisation is one of the most successful and cost-effective public health interventions available. It plays a critical role in protecting individuals and communities from vaccine-preventable diseases and contributes to Closing the Gap by reducing illness, avoidable hospitalisations and health inequities experienced by Aboriginal peoples.

Immunisation contributes directly to *Closing the Gap Outcome 1: Aboriginal and Torres Strait Islander people enjoy long and healthy lives*, while also supporting broader family, community and wellbeing outcomes across the life course.

The Program supports the National Agreement and recognises that improved health outcomes are best achieved through genuine partnerships with Aboriginal people and communities, ACCHOs, AHCWA, Aboriginal health services, Aboriginal health professionals, public health services and other immunisation stakeholders.

The *Western Australian Immunisation Strategy 2024-2028* identifies Aboriginal people as a priority population and focuses on:

- improving access and equity
- strengthening community confidence in immunisation
- building workforce capability
- enhancing immunisation systems
- strengthening collaboration and partnerships.

Similarly, the *National Immunisation Strategy for Australia 2025-2030* promotes equitable access to immunisation through strengthened partnerships, culturally responsive approaches, workforce development, improved data use and sustainable governance arrangements.

The Immunisation Program has observed the benefits of shared decision-making through partnerships with:

- ACCHOs
- AHCWA
- Aboriginal health professionals
- WA Aboriginal Advisory Group (WAAAG)
- Aboriginal Immunisation Network Steering Committee (AINSC).

These partnerships have supported:

- co-design of culturally safe immunisation resources
- development of the WA Aboriginal Immunisation Schedule
- development of the *Yarning About Immunisations* resources
- community-informed Human papillomavirus (HPV) communication materials
- enhanced community engagement
- increased culturally relevant health messaging
- improved responses to COVID-19 and diphtheria outbreaks
- more accessible and locally responsive immunisation services.

These initiatives have increased opportunities for Aboriginal people to access recommended vaccines, receive information from trusted sources and influence the design and delivery of services affecting their communities.

Continued investment in Aboriginal-led solutions, the community-controlled sector, culturally safe services and preventative health initiatives such as immunisation will help reduce health inequities and support achievement of the National Agreement.

Immunisation should be recognised as a practical example of how prevention, partnership and community-led action can improve outcomes for Aboriginal peoples.

The following recommendations are directed to all parties responsible for implementing the National Agreement on Closing the Gap, including Australian, State and Territory Governments, ACCHOs, health services, and other health system partners. Collectively, these stakeholders have a responsibility to strengthen Aboriginal-led approaches, improve access to culturally safe immunisation services, and support equitable health outcomes for Aboriginal peoples.

Key Recommendations

1. **Invest in Aboriginal-led immunisation approaches**
   Increase long-term investment in ACCHOs and Aboriginal health services to deliver immunisation services, outreach programs, health promotion and community-led vaccination initiatives, recognising the critical role of trusted Aboriginal health professionals, community leaders and culturally safe care in supporting vaccine confidence and uptake.

2. **Strengthen shared decision-making**
   Embed Aboriginal leadership and participation in the planning, implementation and evaluation of immunisation policies, programs and resources to ensure initiatives reflect community priorities and support self-determination.

3. **Improve equitable access to immunisation**
   Address geographic, workforce and service access barriers that contribute to lower vaccination coverage in some Aboriginal communities, particularly in regional and remote areas.

4. **Expand and support the Aboriginal health workforce**
   Invest in the recruitment, retention and professional development of Aboriginal health workers, practitioners and other Aboriginal health professionals who play a key role in immunisation service delivery and community engagement.

5. **Strengthen culturally safe immunisation services**
   Support ongoing cultural capability development across the health workforce and ensure immunisation resources, communications and services are co-designed with Aboriginal people and organisations. Build on lessons learned from the COVID-19 pandemic and recent diphtheria responses, which demonstrate the importance of Aboriginal-led engagement, trusted local partnerships, culturally safe communication and flexible service delivery approaches.

6. **Improve data access and use**
   Strengthen access to timely and meaningful immunisation data to support local decision-making, identify coverage gaps and enable communities, ACCHOs and health services to monitor progress and target action where it is most needed.

7. **Recognise immunisation as a Closing the Gap priority**
   Recognise immunisation as a key preventative health intervention that contributes directly to *Closing the Gap Outcome 2: Aboriginal and Torres Strait Islander children are born healthy and strong* and supports broader health and wellbeing outcomes across the life course. Immunisation reduces the burden of vaccine-preventable disease, prevents avoidable hospitalisations and helps address health inequities experienced by Aboriginal peoples.

   Governments should explicitly recognise the contribution of immunisation to achieving Closing the Gap outcomes and strengthen efforts to improve vaccination coverage, particularly among Aboriginal children. This includes supporting progress towards and beyond the national childhood immunisation coverage target of 95%, through sustained investment, culturally safe service delivery, and partnerships with Aboriginal Community Controlled Health Organisations and communities.

8. **Support sustainable prevention funding**
   Increase investment in prevention and early intervention initiatives, including immunisation, acknowledging that preventing illness delivers significant health, social and economic benefits for individuals, families and communities.

Direct Responses to Key Productivity Commission Questions

1. **Building successful partnerships**
   The Program has found that strong partnerships between government, Aboriginal people and communities, ACCHOs, AHCWA, Aboriginal health services and Aboriginal health professionals are critical to improving immunisation outcomes. Consistent with Priority Reform One, forums such as the AINSC, WAAAG, WA Immunisation Advisory Committee (WAIAC) and WA Immunisation Stakeholder Meetings support collaboration, shared decision-making and culturally responsive approaches to immunisation.

   While progress has been made, opportunities remain to strengthen genuine power-sharing, particularly in relation to funding, policy and program decisions. Greater Aboriginal leadership in governance, increased investment in the community-controlled sector, improved access to data and stronger accountability mechanisms would further support self-determination. The Immunisation Program's experience demonstrates that sustained partnerships and genuine shared decision-making are essential to improving Aboriginal health outcomes and achieving the objectives of the National Agreement.

2. **Prioritising funding and supporting service transition**
   The Program recognises ACCHOs, Aboriginal health services, Aboriginal health professionals and community partners play a critical role in delivering culturally safe and trusted immunisation services. Long-term, flexible funding arrangements developed in partnership with Aboriginal organisations are most effective in supporting workforce development, service continuity and community-led solutions.

   Investment in ACCHOs and Aboriginal health services has strengthened outreach, health promotion and catch-up vaccination activities tailored to local community needs, demonstrating the value of Aboriginal-led service delivery. Continued investment in the community-controlled sector, supported by sustainable funding and strengthened transition pathways, will support greater Aboriginal-led delivery of preventive health services and contribute to Closing the Gap outcomes.

3. **Cultural safety and responsiveness**
   The Program has observed that improving cultural safety requires ongoing partnership with Aboriginal people, organisations and communities to ensure services are designed and delivered in ways that are respectful, responsive and free from racism.

Actions that have supported improved cultural safety within immunisation include co-designing resources with Aboriginal stakeholders, strengthening identification processes for Aboriginal clients, and supporting culturally safe conversations about immunisation. For example, human papilloma virus (HPV) resources developed through collaboration between the Boorloo (Perth) Public Health Unit, AHCWA and Aboriginal community members were informed by community focus groups to ensure the messaging was culturally appropriate and meaningful. These approaches have helped improve access to services and support informed decision-making about immunisation.

Meaningful improvements are achieved when Aboriginal people are involved in defining what culturally safe care looks like and are empowered to influence service design, delivery and evaluation. The COVID-19 vaccination program demonstrated the value of community-informed approaches, with Aboriginal-led advice, partnerships with ACCHOs, AHCWA, Aboriginal health services, Aboriginal health professionals and tailored local engagement supporting vaccination uptake in many communities. Similarly, the development of culturally appropriate immunisation resources and guidance through partnerships with Aboriginal stakeholders has helped ensure immunisation information is relevant, trusted and responsive to community needs.

The Immunisation Program's experience shows that culturally safe services build trust, strengthen engagement and improve health outcomes. Continued investment in Aboriginal-led decision-making, cultural capability development and co-design will be essential to transforming government services and achieving Closing the Gap outcomes.

4. Delivering in partnership and increasing transparency

The Program has found that immunisation services are most effective when designed and delivered in partnership with Aboriginal people and communities, ACCHOs, AHCWA, Aboriginal health services, Aboriginal health professionals, public health services and other immunisation stakeholders. Forums such as the AINSC, WAAAG, WAIAC and broader stakeholder partnerships have strengthened the development and delivery of immunisation programs, resources and communication strategies.

Trust is strengthened through early engagement, co-design and ongoing partnerships that demonstrate how community feedback influences decisions and outcomes. Greater transparency could be achieved through clearer reporting on funding allocation, program outcomes and decision-making processes, supported by improved access to local data and regular feedback to communities. The Immunisation Program's experience demonstrates that genuine partnership, transparency and accountability are essential to improving service delivery and achieving Closing the Gap outcomes.

5. Building capability to deliver the Agreement

The Program has found that delivering the National Agreement requires a workforce that is skilled in culturally safe practice, partnership approaches and shared decision-making. Governments can strengthen capability through ongoing cultural learning, meaningful engagement with Aboriginal people and communities, and opportunities for staff to work in partnership with ACCHOs, Aboriginal health services and Aboriginal health professionals.

Joint planning, co-design and shared delivery of programs support mutual learning, build trust and strengthen relationships between government and the community-controlled sector. The Immunisation Program's experience demonstrates that investing in workforce capability, Aboriginal leadership and strong partnerships is essential to delivering culturally responsive services and improving health outcomes for Aboriginal people.

6. Community authority

The Program has found that locally led approaches are essential to improving immunisation outcomes and ensuring services respond to community priorities. Governments can strengthen community authority by partnering with Aboriginal people and communities, ACCHOs, AHCWA, Aboriginal health services and Aboriginal health professionals to support community-led planning, delivery and evaluation, while improving access to local data and flexible funding arrangements.

Shared accountability between communities, governments and service providers is critical to ensuring local priorities inform decision-making and outcomes. The Immunisation Program's experience demonstrates that community-led solutions, supported by strong partnerships and transparent accountability, are essential to achieving sustainable improvements in Aboriginal health outcomes and Closing the Gap.

7. System enablers and barriers

The Program has identified strong partnerships with Aboriginal people and communities, ACCHOs, AHCWA, Aboriginal health services, Aboriginal health professionals and public health services, alongside culturally safe service delivery and community-led engagement, as key enablers of improved health outcomes.

Key barriers include workforce shortages in regional and remote areas, inequitable access to health services, short-term funding arrangements, challenges in identifying Aboriginal clients, and the ongoing impacts of misinformation and mistrust. Greater impact could be achieved through sustained investment in the community-controlled sector, strengthening the Aboriginal health workforce, improving access to culturally safe preventive health services, and enhancing access to timely data to support local decision-making. The Immunisation Program's experience demonstrates that long-term investment in prevention, partnership and Aboriginal-led solutions is essential to

reducing health inequities and improving outcomes for Aboriginal people and communities.

Conclusion

The Program supports the intent and objectives of the National Agreement and recognises that sustainable improvements in health outcomes are achieved through Aboriginal leadership, shared decision-making and community-led action. Immunisation is a key preventive health intervention that contributes to Closing the Gap by reducing vaccine-preventable disease, avoidable hospitalisations and health inequities experienced by Aboriginal peoples.

Continued investment in Aboriginal-led solutions, the community-controlled sector, equitable access to immunisation services, and the application of lessons learned from COVID-19 and recent diphtheria responses will be essential. These responses demonstrated the value of locally based immunisers and Aboriginal health workers, rapid deployment of outreach clinics to remote communities, strong partnerships with ACCHOs, culturally responsive communication, and timely access to resources and funding to increase vaccination coverage during outbreaks.

References

1. WA Immunisation Strategy 2024-2028
2. National Immunisation Strategy 2025-2030

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