CLOSE THE GAP

COMMUNITY VOICES:
The Pathway to Justice, Equality and Healing



CLOSE THE GAP CAMPAIGN – 2026 REPORT

Acknowledgement of Contributors

We acknowledge and thank the many Aboriginal and Torres Strait Islander people whose knowledge, expertise, and lived experience form the foundation of this report. This work reflects their ongoing dedication to advancing Aboriginal and Torres Strait Islander rights and uplifting communities.

We are deeply grateful to those who generously shared their stories and insights, and we recognise that the successes reflected in this report are grounded in the leadership of Aboriginal and Torres Strait Islander peoples.

Acknowledgement of Support

We are deeply grateful to our partners and supporters who make our work possible. Their commitment to advancing Aboriginal and Torres Strait Islander justice and equity helps us continue driving meaningful change in our communities.

This support has helped us share the stories, data, and progress outlined in this report. As always, the content and perspectives presented here are solely those of the Close the Gap Campaign.

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WARNING:

Aboriginal and Torres Strait Islander peoples should be aware that the Close the Gap report may contain images, names and voices of deceased people.

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Key Terms

Aboriginal and Torres Strait Islander peoples
Australia's First Peoples are distinct, self-identified groups with their own cultures, histories, languages, and connections to their lands, waters, and seas, and comprise Aboriginal and Torres Strait Islander peoples as members of these groups.

Close the Gap Campaign (CTG)
A national, Indigenous-led social justice campaign advocating for health and life outcome equality between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians.

Closing the Gap
A national policy framework and collective effort to reduce disparities in health, education, employment, housing, and justice outcomes for Aboriginal and Torres Strait Islander people.

Leadership
In the context of the reports, leadership refers to Aboriginal and Torres Strait Islander leaders and organisations that drive change, influence policy and reform, and shape solutions for their communities.

National Agreement on Closing the Gap
A formal agreement between Australian governments and the Coalition of Aboriginal and Torres Strait Islander Peak Organisations that establishes priority reforms and measurable socio-economic targets.

Priority Reform Areas
Four strategic areas under the National Agreement: shared decision-making, strengthening the community-controlled sector, transforming government systems, and improving access to data.

Reform
Actions and structural changes needed in government policy, systems, and institutions to achieve the goals of Closing the Gap. Reports often evaluate where reform is occurring and where further work is needed.

Wellbeing
A holistic concept encompassing physical, social, emotional, cultural, and economic health, including connection to community, culture, and Country.

Self-determination (Self-Determination as a Core Mechanism for Closing the Gap)
The right of peoples to self-determination is a foundational principle of international law, affirmed in the Charter of the United Nations and codified in Article 1 of both the International Covenant on Civil and Political Rights and the International Covenant on Economic, Social and Cultural Rights.[1] It is a collective right enabling peoples to determine their political status and direct their economic, social and cultural development. The United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) confirms that Indigenous peoples hold this right on an equal footing with all peoples (art 3) and defines its practical content as autonomy and self-government in matters of internal and local affairs (art 4).[2]

Within Australia, the effective realisation of self-determination requires institutionalised decision-making authority for Aboriginal and Torres Strait Islander peoples across priority policy domains, notwithstanding the Constitution's limited recognition of Indigenous governance. International law frames self-determination as a continuing process of participation, authority and institutional recognition, rather than symbolic consultation.[3]

This approach is embedded in the National Agreement on Closing the Gap, which commits all governments to shared decision-making, place-based partnerships and the systematic strengthening of Aboriginal community-controlled organisations as the primary mechanism for achieving sustainable outcomes.[4] Evidence consistently demonstrates that Indigenous-led governance in health, education, land management, child and family services, and justice delivers improved social, economic and cultural results.[5]

Self-determination is therefore not aspirational but operational: it is a necessary structural reform to close entrenched inequities and achieve long-term policy effectiveness.



Foreword

Closing the Gap was never intended to be a narrow set of targets, nor a technocratic exercise in program delivery. The Aboriginal leaders who designed the original Close the Gap policy intended that it would drive a fundamental shift in the relationship between governments and Aboriginal and Torres Strait Islander peoples — a shift grounded in rights, shared power, and self-determination. This report makes clear that while Australia has formally endorsed the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) and committed to the National Agreement on Closing the Gap, the structural transformation required to give those commitments real force has not yet occurred.

At its heart, UNDRIP affirms what First Peoples have always known: that justice, culture, participation, and freedom from discrimination are not optional aspirations, but inherent rights. The National Agreement's Priority Reform Areas were designed to translate these rights into practice — through genuine partnership, community-controlled solutions, institutional reform, and shared accountability. Together, they offered a pathway away from symbolic recognition toward systems that embed Indigenous authority and leadership at every level of government.

Yet, as this report powerfully demonstrates, governments have been slow to relinquish control and rebalance power. Public institutions continue to operate largely as they always have, with decision-making authority concentrated within bureaucracies rather than shared with communities. The consequence is familiar: promising commitments on paper, but limited change in lived experience. Too many socio-economic indicators remain stalled or worsening because the structures responsible for delivering equity have not been transformed.

What this report does so effectively is connect rights to outcomes. It shows how social, cultural, and institutional determinants shape health and well-being, and why legislative and public-sector reform are not peripheral to Closing the Gap — they are central to it. Importantly, it also highlights what works. The nine community-led case studies presented here demonstrate the strength, innovation, and effectiveness of Aboriginal and Torres Strait Islander leadership. Where communities design and control solutions, outcomes improve.

These initiatives are not exceptions; they are evidence of what becomes possible when self-determination is respected in practice.

But success cannot continue to rely on short-term funding, individual champions, or fragile policy windows. Without binding commitments, secure investment, and rights embedded in law, even the strongest community-led programs remain vulnerable. Closing the Gap will not be achieved through goodwill alone. It requires governments to reform the systems that continue to reproduce inequity, to share power meaningfully, and to be held accountable for delivering change.

The recommendations in this report provide a clear and credible roadmap for doing so. From enshrining UNDRIP in domestic law and transforming the Australian Public Service, to establishing independent Indigenous-led oversight, tackling racism, supporting healing, and securing long-term funding for community-controlled organisations, these reforms go to the core of what a rights-based, equitable public sector must look like.

Aboriginal and Torres Strait Islander peoples are already leading the work of reform, healing, and community wellbeing. The responsibility now rests squarely with governments to match that leadership with structural change. The time for passive commitments has passed. If Closing the Gap is to fulfil its promise, Indigenous rights must be embedded at the centre of Australia's legal, policy, and institutional frameworks.

This report is both a call to action and a statement of possibility. It shows that when rights are respected, when power is shared, and when communities lead, better outcomes follow. The task before us is not to invent new solutions, but to finally have the courage to implement what we already know works — and to do so in genuine partnership with First Peoples.

Only then can Closing the Gap become not another cycle of unmet targets, but a true national project of justice, equality, and healing.

Prof Dr Marcia Langton AO



Executive Summary

This report shows that while the National Agreement on Closing the Gap provides a pathway to implement the rights affirmed in the UNDRIP, those rights will not be realised without structural reform, shared authority, and enforceable accountability mechanisms. UNDRIP establishes global standards for self-determination, cultural integrity, participation, and freedom from discrimination. The National Agreement seeks to operationalise these rights through four Priority Reform Areas:

1. shared decision-making;
2. strengthening the community-controlled sector;
3. transforming government systems; and
4. improving access to data and information.

The priority reforms areas were intended to shift from symbolic recognition toward structural change that embeds Aboriginal and Torres Strait Islander rights into government systems, service delivery, and accountability frameworks. However, this report reiterates that progress has been limited by enduring power imbalances between governments and First Peoples. Public institutions continue to retain control over decision-making, funding, and accountability, undermining the intent of the National Agreement and constraining meaningful reform.

This report identifies public sector reform as a critical element and central to achieving meaningful progress in closing the gap. Embedding Aboriginal and Torres Strait Islander rights within governance, legislative, and policy frameworks is necessary to rebalance power, strengthen accountability, and enable governments to meet their commitments under the UNDRIP and the National Agreement. Without structural and legislative reform, inequity continues to be reproduced through systems that are not designed to share authority or support self-determination.

Centred on the interconnected themes of **justice, equality, and healing**, this report demonstrates how social, cultural, and institutional determinants shape health and wellbeing outcomes for Aboriginal and Torres Strait Islander peoples. Across nine case studies, the report shows that culturally grounded, self-determined approaches consistently deliver more effective, responsive, and sustainable outcomes. These initiatives illustrate what becomes possible when communities design and control solutions that reflect their priorities, knowledge, and lived experience.

The case studies also make clear that Aboriginal and Torres Strait Islander communities are already leading reform and delivering results. Governments have a responsibility to match this leadership by creating the legislative, policy, and funding conditions necessary to sustain and scale success. Short-term funding cycles, inconsistent policy implementation, and the absence of binding accountability leave even the strongest community-led initiatives vulnerable. Policy commitment alone is insufficient; rights must be protected in law to ensure they are upheld and enforced.

The report presents ten practical recommendations aimed at embedding Indigenous rights at the core of public policy, strengthening accountability across governments, and ensuring the National Agreement delivers tangible and equitable outcomes.

Passive commitments are no longer enough. **Bold, decisive action is required.** Governments must work in genuine partnership with First Peoples, embedding Aboriginal and Torres Strait Islander peoples' rights in Australia's laws and institutions, to achieve justice, equality, healing, and self-determination.

Recommendations

Grounded in evidence, lived experience, and community-led innovation, these recommendations outline urgent, systemic measures needed to achieve health equity and better life outcomes for Aboriginal and Torres Strait Islander peoples. Sustainable transformation requires bold reforms embedded across all levels of government, driven by enduring partnerships with Aboriginal and Torres Strait Islander leadership.

Despite decades of calls for change, many foundational shifts needed to realise rights through the National Agreement on Closing the Gap remain unmet. These recommendations address the structural and legislative foundations that perpetuate inequity, ensuring that Aboriginal and Torres Strait Islander rights are protected, actionable, and central to national frameworks. By implementing them, governments and institutions can honour their obligations under the UNDRIP, fostering a culturally safe, accountable, and rights-based public sector, aligned with the spirit and intent of the National Agreement on Closing the Gap.

We call on the Australian Government to implement, in full, the following recommendations:

Federal Government – International Legislative Responsibilities

1. Enshrine UNDRIP in Domestic Law

Australia must embed its international human rights obligations into domestic law through a national human-rights legislative framework, incorporating the UNDRIP to ensure the rights of Aboriginal and Torres Strait Islander peoples are recognised, protected and enforceable.

ACTIONS:

1.1. Implement the Australian Human Rights Commission's Free and Equal reform recommendations to enact a legislated national human-rights framework.

1.2. Adopt and fully implement the 2023 recommendations of the Joint Standing Committee on Aboriginal and Torres Strait Islander Affairs Inquiry into the Application of UNDRIP in Australia.

1.3. Incorporate UNDRIP principles into federal legislation to ensure they are binding and central to government–First Peoples relations.

1.4. Co-design a National Action Plan for UNDRIP Implementation with Aboriginal and Torres Strait Islander peoples, including timelines, clear accountability mechanisms, and measurable outcomes.

Federal Government – National Legislative Responsibilities

2. Amend the *Public Service Act 1999*

Amend the *Public Service Act 1999* to explicitly recognise the implementation of the National Agreement on Closing the Gap as a core statutory duty of the Australian Public Service (APS).

ACTIONS:

2.1. Embed obligations for APS agencies to uphold National Agreement principles and strengthen coordination and accountability across the four Priority Reform Areas, ensuring implementation is consistent, transparent, and co-led with the Coalition of Peaks.

2.2. Establish an independent, Aboriginal and Torres Strait Islander-led statutory accountability body to oversee government policies, programs, and service delivery impacting Aboriginal and Torres Strait Islander communities. The body should be empowered

to monitor systemic reform across mainstream institutions, require information from agencies, conduct independent reviews and audits, and publicly report on progress to ensure transparency, strengthen self-determination, and improve outcomes.

2.3. Require APS agencies to participate in and comply with the monitoring, reporting, and audit processes of the independent accountability body, including publicly reported audits.

2.4. Establish clear, outcome-based performance measures aligned with Priority Reform Areas and socio-economic targets.

2.5. Require ongoing cultural safety training across the APS.

2.6. Legislate formal partnership obligations between APS agencies and Aboriginal Community Controlled Organisations (ACCOs) in policy design, commissioning, and service delivery.

2.7. Invest in Aboriginal and Torres Strait Islander-led data development, including specific budget allocations to enable the establishment of Indigenous Data Governance (IDG) and Indigenous Data Sovereignty (IDS).

3. Adopt Public Service Standards for the UNDRIP and Anti-Racism Framework Implementation

The Australian Public Service Commission (APSC) should develop and enforce clear public service standards to embed the UNDRIP and the National Anti-Racism Framework across the Australian Public Service. These standards should set out practical requirements for integrating Indigenous rights and anti-racism principles into policy development, service delivery, organisational culture, and workforce capability and with parallel adoption by state and territory public sector/service commissions or equivalent central public sector authorities, ensuring nationally consistent progress on Closing the Gap.

- Co-design the standards and guidance in partnership with Aboriginal and Torres Strait Islander stakeholders and the Coalition of Peaks to ensure cultural authority and relevance.
- Mandate comprehensive, ongoing training for all APS staff on the UNDRIP principles, anti-racism, and cultural safety, with a focus on practical application in day-to-day work.
- Integrate adherence to these standards into APS performance frameworks, recruitment, promotion, and leadership development processes.
- Establish mechanisms for regular monitoring, public reporting, and independent review of progress in incorporating the UNDRIP and anti-racism standards within the APS, including opportunities for feedback from Aboriginal and Torres Strait Islander communities, to ensure accountability and effective application across government.

4. Establish an Independent, Indigenous-Led Oversight and an UNDRIP-Based National Reporting Framework

Implement in full the recommendations of the Productivity Commission's 2024 Closing the Gap Review, including the urgent establishment of independent monitoring mechanisms under the National Agreement. In partnership with the Coalition of Peaks, the Australian Government should establish Indigenous-led, independent accountability bodies to:

- Monitor progress against all Priority Reforms and socio-economic targets
- Evaluate the effectiveness of government actions and system transformation
- Report publicly and regularly on performance
- Provide impartial, expert scrutiny to drive behaviour change

- Assess the alignment of federal policies and programs with UNDRIP principles.

To support this oversight:

- Legislate an UNDRIP-based national reporting framework requiring all Commonwealth agencies to report progress on Priority Reforms and socio-economic targets to the independent mechanism.
- Ensure the reporting framework is human-rights-based, transparent, and measurable, enabling continuous improvement and public accountability.
- Link the framework to the APS statutory duties under the Public Service Act to reinforce internal compliance and accountability.

This combined approach ensures that government performance is consistently monitored, transparently reported, and held accountable to both Aboriginal and Torres Strait Islander peoples and broader human rights standards.

5. Legislate and Fund Implementation of the National Anti-Racism Framework

Provide sustained funding to the Australian Human Rights Commission to implement the National Anti-Racism Framework and embed its principles across all government policy, programs, and institutions, particularly those affecting Aboriginal and Torres Strait Islander peoples.

6. Implement Recommendations to Address Health Inequities and Racism

Implement in full the recommendations in the *"Health Inequities in Australia: A Scoping Review on the Impact of Racism on Indigenous and Other Negatively Racialised Communities' Health Outcomes and Healthcare Access".*

7. Legislate and Invest in the Establishment of an Independent National Truth-Telling and Treaty Body

Legislate a permanent, independent, nationally coordinated body to lead truth-telling and oversee treaty processes with First Peoples.

ACTIONS:

7.1. By 30 December 2026, legislate a national truth-telling commission co-designed with Aboriginal and Torres Strait Islander communities, mandated to document histories, investigate systemic injustices, and support healing.

7.2. Ensure processes are transparent, trauma-informed, culturally safe, and fully resourced.

7.3. Coordinate with state and territory treaty processes to ensure national coherence while respecting regional autonomy.

7.4. Commit adequate resourcing to the establishment and operation of an Independent Body.

8. Develop a National Strategy for Intergenerational Healing

Establish a National Strategy for Intergenerational Healing to address the "gap within the gap", the enduring impacts of intergenerational trauma, as foundational to achieving Closing the Gap outcomes. The Strategy should provide a unifying national framework for policy, investment, and service design that recognises the unique healing needs of Stolen Generations survivors while promoting trauma-informed approaches for all First Peoples.

ACTIONS:

8.1. Co-design the Strategy with Stolen Generations representatives, ACCOs, and First Peoples leaders to ensure it reflects lived experience, community priorities, and culturally safe practice.

8.2. Include dedicated actions and measurable targets specifically addressing the distinct and ongoing healing needs of Stolen Generations survivors and their descendants, in line with recommendations from the *Are You Waiting for Us to Die?* report.

8.3. Embed complementary, population-level healing approaches that promote trauma-informed, culturally grounded services across health, education, justice, and family systems for all First Peoples.

8.4. Align the Strategy with Closing the Gap implementation plans, ensuring that healing outcomes are explicitly recognised as foundational to improving life outcomes and are monitored through transparent accountability mechanisms.

Whole-of-Government Structural and Systemic Reforms

9. Establish a Governed Pooled Funding Framework

Create a cross-portfolio, pooled and flexible funding model across health, justice, education, child protection and related sectors, enabling community-led allocation to local priorities, supported by robust governance and shared accountability safeguards.

ACTIONS:

9.1. Co-design the pooled model with ACCOs, consolidating siloed funding streams into a single flexible fund with clearly defined roles and risk-sharing responsibilities.

9.2. Establish independent and transparent governance arrangements that include:

- First Peoples-led decision-making on agreed priorities;
- Public allocation criteria and reporting;
- Dispute resolution mechanisms;
- Explicit protections to prevent fiscal or reputational risk being transferred to ACCOs.

9.3. Embed the model within Treasury and Cabinet budget processes, including authority to vary allocations across portfolios, defined financial accountability and audit settings, and multi-year appropriations protected from short-term political cycles.

10. Secure Long-Term, Needs-Based Funding for ACCOs Within the Pooled Framework

Provide ACCOs with long-term (5–10 year), needs-based funding agreements delivered through the pooled model to enable holistic, self-determined service delivery without recreating sectoral silos at the community level.

ACTIONS:

10.1. Align ACCO funding agreements to the pooled cross-portfolio framework, ensuring flexibility across service domains rather than program-bound expenditure lines.

10.2. Apply transparent, population-informed allocation methodologies consistent with the legislated needs-based model.

10.3. Reduce compliance duplication and clarify shared accountability so cross-sector coordination risk is not borne solely by ACCOs.

Introduction

The Close the Gap Campaign is a national, community-driven movement that amplifies Aboriginal and Torres Strait Islander voices, leadership, and cultural strengths, challenging deficit-based narratives and highlighting resilience, self-determination, and innovation.

The 2026 Close the Gap Report presents evidence and community-led solutions, highlighting nine initiatives across Australia that demonstrate progress despite structural and systemic barriers.

The report serves as both a policy tool, highlighting effective approaches and system failures, and a recognition of community knowledge, family, and Elders who safeguard wellbeing. This dual perspective reflects a holistic view of health, encompassing spiritual, emotional, cultural, and collective dimensions.

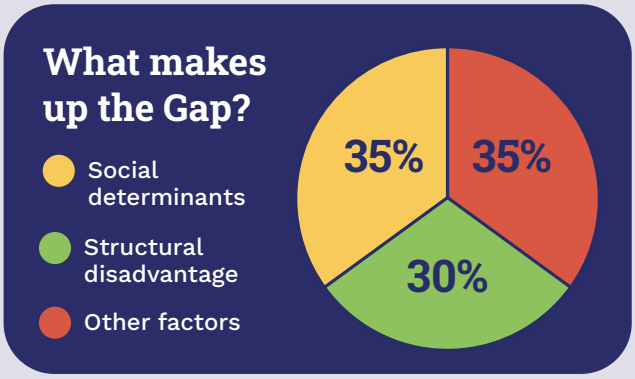
Health inequities for Aboriginal and Torres Strait Islander peoples remain significant, with the overall burden of disease 2.3 times higher than for other Australians (AIHW). For many First People's communities, health is inseparable from family, Country, culture, and identity; policies that ignore this holistic view risk reinforcing inequity.

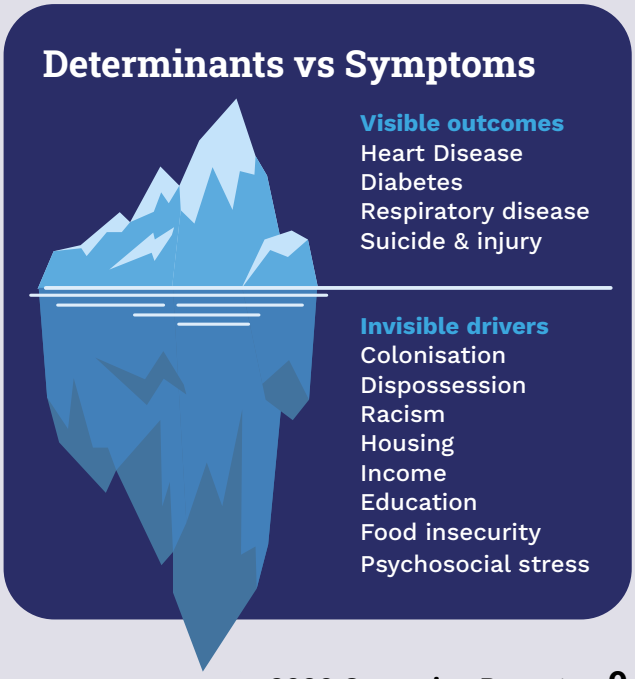
The health gap reflects the ongoing impacts of colonisation, dispossession, racism, and systemic marginalisation, which shape social determinants such as housing, income, education, and food access. About 35 per cent of the health gap is attributable to these determinants, while 30 per cent relate to behavioural risks stemming from structural disadvantage.

Cultural determinants, land, language, kinship, identity, and governance, improve mental health, reduce suicide, and enhance resilience, underscoring the need to integrate culture with biomedical care.

The leading causes of mortality among Aboriginal and Torres Strait Islander peoples further illustrate the intersection of social, cultural, and clinical factors. Ischaemic heart disease, type 2 diabetes mellitus, chronic lower respiratory disease, lung and related malignancies, and external causes (including suicide, injury, and accidental harm) remain prominent contributors to premature mortality. These conditions reflect underlying determinants such as food insecurity, environmental exposures, chronic psychosocial stress, limited access to preventive and specialist care, and mistrust of mainstream health systems. Collectively, these causes account for more than one-third of Aboriginal and Torres Strait Islander deaths annually, demonstrating the disproportionate burden of chronic disease and mental health-related morbidity.[6]







When policy settings fail to align with First Peoples' understandings of health, the result is delayed presentation, disengagement from services, and preventable morbidity and mortality. Policies governing access to nutritious food, safe housing, culturally safe services, and continuity of cultural identity directly influence health outcomes. Consequently, contemporary disparities reflect policy legacies as much as they reflect clinical challenges.

To close the gap in health outcomes, policy must be informed by and accountable to social and cultural determinants, addressing the upstream drivers of disease and premature mortality documented in national health data. When these determinants are centred, biomedical care can be embedded within a broader system that supports holistic healing, cultural continuity, and community-led governance.

Central to sustained progress are the four Priority Reform areas outlined in the National Agreement. These reforms are essential levers for change; without their full and meaningful implementation, structural barriers and entrenched inequities will persist. The Close the Gap Report emphasises that embedding these reforms is not only best practice but a foundation for realising the aspirations of Aboriginal and Torres Strait Islander peoples.

By exploring and centering these reforms in the case studies, the report reflects a clear understanding: transformative progress hinges on shifting power, accountability, and resources into the hands of First Peoples and their communities. This approach is the pathway to meeting the commitments of the National Agreement and closing the gap in health and wellbeing outcomes.

Close the Gap Co-Chairs



Karl Briscoe

Chief Executive Officer

National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners (NAATSIHWP)



Katie Kiss

Aboriginal and Torres Strait Islander Social Justice Commissioner

Australian Human Rights Commission

Themes

Justice

CASE STUDIES:

YOKAI – Healing Our Spirit

Department of Foreign Affairs & Trade

Horizon Power

Equality

CASE STUDIES:

Malpa Young Doctors' Program

Aboriginal Housing Northern Territory

Gur A Baradharaw Kod Torres Strait Sea and Land Council

Healing

CASE STUDIES:

Thirrili

Riverina Medical & Dental Aboriginal Corporation

Dardi Munwurro

Snapshot data on Closing the Gap

Despite years of formal commitments, governments continue to fail in tracking and resourcing progress toward Closing the Gap. The Productivity Commission's dashboard exposes the stagnation and worsening of many targets. Yet gaps in data, inconsistent measurement, and a lack of accountability mean poor outcomes are reported without consequences. Chronic underfunding, short-term project cycles, and funding misaligned with community priorities leave Aboriginal and Torres Strait Islander organisations struggling to deliver effective, culturally grounded programs at scale. Compounding this is a total lack of systematic data on the implementation or impact of the four Priority Reform Areas making it impossible to track whether the structural changes essential for closing the gap are occurring. Without both adequate funding and measurable progress on these reforms, socio-economic outcomes will remain stagnant, structural disadvantages will persist, and communities will continue to bear the burden of government inaction.

Legend

- Good improvement and on track
- Improvement but not on track
- No change from the baseline
- Worsening, not on track
- No assessment available

Priority Reform 1

No data on formal partnerships and shared decision-making is available

Priority Reform 2

No data on building the community-controlled sector is available

Priority Reform 3

No data on transforming government organisations is available

Priority Reform 4

No data on shared access to data and information at a regional level is available

1. Long and healthy lives

71.9 for males

75.6 for females

is the life expectancy of people born in 2020-22

2. Born healthy and strong

89.2%

of babies were born with a healthy birthweight in 2022

3. Early childhood education

89.2%

of children were enrolled in preschool in 2024

4. Children thriving

← **33.9%**

of children commencing school were developmentally on track in 2024

5. Student learning potential

68.1%

of people aged 20-24 years had attained Year 12 or equivalent in 2021

6. Further education pathways

47%

of people aged 25-34 years had completed a tertiary qualification in 2021

7. Youth engagement

58.0%

of people aged 15-24 years were fully engaged in employment, education or training in 2021

8. Economic participation

55.7%

of people aged 25-64 years were employed in 2021

9. Housing

81.4%

of people were living in appropriately sized housing in 2021

No data on households receiving essential services is available

10. Criminal justice

← **2,304.4** per 100,000

adults in prison in 2024

11. Youth justice

26.1 per 10,000

young people were in detention in 2023-24

12. Child protection

← **50.3** per 1,000

children were in out-of-home care in 2024

13. Family safety

8.4%

of females experienced, or were threatened with, physical harm in 2018-19

14. Social and emotional wellbeing

← **30.8** per 100,000

people took their own life in 2023

15. Land and waters

4,314,744 km² of land

113,517 km² of sea country

were subject to Aboriginal and Torres Strait Islander people's rights or interests in 2024

16. Culture and languages

123

Aboriginal and Torres Strait Islander languages were spoken in 2018-19

17. Access to information

88.3%

of people personally used the internet in the last 3 months in 2022-23

SOURCE: Productivity Commission 2025, Closing the Gap Annual Data Compilation Report July 2025, Canberra

Public Sector Reform: The Missing Key to Closing the Gap

> **"Goodwill alone does not change behaviours or drive reform, nor does it create accountability. The lack of progress across the Agreement and the subsequent inadequate response from governments shows us that not only are government agencies and departments ill-equipped to drive critical reform, but the public service also lacks the structural capability to hold itself accountable."**
>
> *– Karl Briscoe, CEO of NAATSIHWP and Close the Gap Co-Chair*



Five years into the National Agreement on Closing the Gap, progress remains deeply concerning. Only four of the nineteen socio-economic targets are currently on track. Several targets are worsening, and while some indicators show marginal improvement, progress has not been sufficient to shift them onto a trajectory that would achieve the agreed outcomes. This overall status has remained largely unchanged. With only five years remaining to realise the objectives of the National Agreement, incremental reform will not be enough. Structural transformation across all levels of government is urgent.

The National Agreement is more than a policy document; it responds to generations of systemic injustice and seeks to realise long-denied rights. Despite repeated political commitments, bolstered by bipartisan support and formal endorsements, progress on Closing the Gap has been slow. This highlights two concerns: without deliberate action to embed the Priority Reform Areas at every level, the public service continues to take a business-as-usual approach that fails to challenge systemic disadvantage; and the absence of binding accountability mechanisms undermines the Agreement's transformative potential. This persistent gap between commitment and delivery reflects not a lack of evidence or solutions, but a failure to confront the systems that continue to marginalise First Peoples' authority and leadership.

If the Agreement is to achieve its intended impact, accountability must extend beyond agencies to the broader system of government. Ministers, Cabinets, Parliaments and Treasuries determine legislative direction, fiscal settings and policy priorities. Public services are required to administer and implement these decisions. Where political direction, legislation or budget commitments are misaligned with the objectives of the National Agreement, public servants have limited authority to recalibrate outcomes independently. Without clear guardrails, including human rights protections, national standards and fiscal alignment, accountability mechanisms risk placing responsibility for failure on implementers rather than decision-makers.

The public service nevertheless sits at the heart of this challenge, translating policy commitments into practical action. The Priority Reform Areas require public servants to work differently: sharing and transitioning decision-making power, building genuine partnerships, and recognising the central role of Aboriginal and Torres Strait Islander community-controlled organisations (ACCOs). These pillars, identified by the National Indigenous Health Leadership Alliance, the Coalition of Peaks, and the Australian Government, are vital to achieving progress on socio-economic targets.

However, the 2019 Independent Review of the Australian Public Service found that siloed approaches, rigid hierarchies, and a lack of unified purpose hold back the APS.[7] These barriers to improving outcomes could be overcome by reforms and innovations that bring together relevant public servants and leaders of First Peoples' corporations and sector entities

to map and guide the implementation of agreed decisions. The Coalition of Peaks' Independent Aboriginal and Torres Strait Islander review further highlighted that inaction is rooted in tensions between a "state-centric approach grounded in settler governance structures" and a First Peoples vision "rooted in human rights, self-determination and sovereignty." Such tensions make it difficult for the system to move beyond the status quo.[8]

While the National Agreement's architecture is robust, implementation has been inconsistent. Public servants often preserve existing structures that minimise risk and maintain hierarchies, creating an environment where progress is slow, inconsistent, and dependent on individual champions rather than systemic obligation. Without structural reform, risk aversion and institutional self-preservation will continue to outweigh accountability for outcomes for Aboriginal and Torres Strait Islander peoples.

These challenges highlight the need for a stronger enabling environment (legislative, fiscal and intergovernmental), to support effective implementation. Australia's current framework, centred on the Public Service Act 1999 and the National Agreement's policy commitments, lacks explicit statutory obligations compelling agencies to prioritise outcomes for First Peoples. It also lacks nationally consistent standards on critical issues such as the age of criminal responsibility, youth detention practices, and anti-racism safeguards. In this context, agencies are often required to administer policies determined by governments of the day, even when those policies may undermine progress toward Closing the Gap targets. Without structural guardrails, responsibilities are interpreted inconsistently, and progress depends on political will, administrative discretion, and ACCOs' capacity to navigate systems not designed to support them.

Amending the *Public Service Act 1999* to implement the National Agreement as a core statutory duty would create a binding obligation on APS agencies and employees. Explicit requirements would introduce:

- **Accountability:** Embedding Closing the Gap as a mandated function ensures it is a core government responsibility.
- **Consistency:** Clear statutory obligations standardise expectations across the Commonwealth and support alignment with state and territory governments.
- **Effective Outcomes:** Agencies would be answerable for results delivered to Aboriginal and Torres Strait Islander peoples, with failures addressed through oversight and independent review.

Incorporating the National Agreement into the Public Service Act would provide a standardised approach and the structural backbone needed to ensure the APS consistently, transparently, and effectively delivers on Closing the Gap commitments. However, codification must be supported and directed by the Government. Legislative amendment, Cabinet endorsement, and fiscal alignment are necessary to empower the APSC and agencies to respond accordingly. Without this political mandate, the public service's capacity to drive transformation remains constrained.

The goal of closing the gaps will be achieved when governments create the legislative and policy mandate necessary to embed rights-based standards across the public sector. Cabinet and Parliament must direct and resource the integration of UNDRIP and the National Anti-Racism Framework into the operating environment. Within this mandate, the APSC could adopt and enforce clear standards across the APS. However, these standards must translate rights-based principles into practical requirements for policy development, service delivery, organisational culture and workforce capability. Implementation should include mandatory training, ongoing evaluation and transparent reporting. To ensure nationally consistent reform, state and territory governments and their public sector oversight bodies should adopt equivalent standards.

The goal of closing the gaps will be achieved when governments create the legislative and policy mandate necessary to embed rights-based standards across the public sector.

These reforms support the four Priority Reform Areas of the National Agreement. By embedding Indigenous rights and anti-racism principles into legislation and enforceable public service standards, governments create the structural conditions necessary for shared decision-making (PRA 1) and ACCO-led service delivery (PRA 2). They also strengthen cultural safety and workforce capability (PRA 3) and establish robust governance, reporting, and oversight mechanisms (PRA 4).

Embedding UNDRIP and anti-racism principles into enforceable public service standards shifts responsibility from Indigenous communities to the state, strengthening accountability and fostering a rights-based public sector aligned with the spirit and intent of the National Agreement.



"After nearly two decades of Closing the Gap initiatives, disparities are not closing; they are deepening. This reflects not a failure of intent, but a failure of systems. It is clear that legislative reform must be the next step. Policy alone cannot protect or advance the rights of Aboriginal and Torres Strait Islander peoples. Rights must be enshrined in legislation; be backed by political will and commitment; and be enforceable, non-negotiable, and enduring."

– Commissioner Katie Kiss, Close the Gap Co-Chair

By codifying responsibilities and introducing robust, system-wide accountability mechanisms spanning Ministers, Cabinets, Parliaments, Treasuries, and public services, Australia can ensure that progress is driven by aligned structural reform rather than individual discretion. Only through deliberate public-sector reform, supported by a coherent enabling environment, can governments meet their obligations and sustain progress on Closing the Gap outcomes.

Justice

Justice, in this report, is not confined to courts, policing, or corrective services. It is a broader social project concerned with the conditions that enable people to live safely, exercise their rights, sustain culture, and participate fully and equitably in Australian society. For many Aboriginal and Torres Strait Islander peoples — particularly Stolen Generations survivors and their descendants — justice is inseparable from truth-telling, reparation, healing, and the dismantling of structural harms created by past and ongoing government policies. It involves building strong, safe, and self-determining communities in which rights are upheld, voices are respected, and cultural identities are actively supported.

Reparative justice provides a critical framework for this work. Rather than focusing solely on punishment, it centres the repair of harm arising from human rights violations and systemic injustice. It prioritises restitution, truth-telling, apology, institutional reform, and rehabilitation. These measures aim not only to compensate victims but to restore dignity and prevent the recurrence of harm.

The forced removal of Aboriginal children from their families throughout much of the twentieth century stands among the gravest injustices in Australia's history. These policies inflicted profound intergenerational trauma, cultural dislocation, and enduring social and emotional harm. Their effects continue to shape health outcomes, family stability, economic participation, and patterns of contact with government systems. Addressing this legacy requires more than symbolic recognition. It demands sustained, community-led, trauma-informed strategies that restore dignity, rebuild cultural connection, and remove the structural barriers that continue to disadvantage survivors and their families.

The work of **YOKAI – Healing Our Spirit** demonstrates how justice can be realised through Indigenous governance, cultural authority, and holistic care. Stolen Generations survivors shape program design and delivery. Healing initiatives integrate emotional, spiritual, cultural, and social wellbeing, recognising that recovery from trauma is inseparable from reconnection to culture, community, and identity.

Distributive justice complements this reparative focus. It concerns the fair allocation of resources, opportunities, and benefits, particularly where historical disadvantage and structural inequality have produced unequal outcomes. Justice, in this sense, requires active redistribution and structural reform.

The **Department of Foreign Affairs and Trade** established the Australia-UAE Comprehensive Economic Partnership Agreement, which illustrates how justice can extend into economic participation. By creating pathways for First Nations businesses to access global markets, it seeks to expand opportunities for community wealth generation and long-term economic empowerment.

In the energy sector, distributive justice entails equitable access to affordable, reliable, and sustainable power. Energy is not merely a technical service; it is foundational to health, education, safety, and economic participation. The **Kimberley Communities Solar Saver Program** offers a practical example. By sharing the financial and environmental benefits of rooftop solar across remote communities, it transforms energy from a source of hardship into a platform for resilience and self-determination.

Together, these case studies demonstrate that justice must address historical harm, dismantle contemporary policy barriers, and invest in Indigenous-led solutions that restore wellbeing and opportunity. Healing is not peripheral to justice; without it, trauma continues to shape life chances and intergenerational outcomes.

Justice ultimately involves enabling Aboriginal and Torres Strait Islander peoples to reach their full potential and to share equitably in the nation's social, economic, and cultural life. The National Agreement on Closing the Gap provides a framework for this work through shared decision-making, structural reform, and strengthening community-controlled organisations. Justice is therefore comprehensive and ongoing: confronting past wrongs, repairing present harm, and building the foundations for equitable futures grounded in healing, truth, community control, and structural transformation.

Case Study:

YOKAI – Healing our Spirit



The history of the Stolen Generations is one of Australia's deepest injustices. For much of the 20th century, government policies forcibly removed Aboriginal and Torres Strait Islander children from their families and cultures, placing them in institutions or non-Indigenous homes to assimilate them into white society. These actions caused lasting intergenerational trauma, cultural disconnection, and social and emotional harm, prompting survivors to call for truth-telling, justice, and healing. YOKAI – Healing Our Spirit emerged in response to those calls.

> **"Operating as a community-controlled organisation created & led by Stolen Generations and their descendants, our governance model ensures that all programs, advocacy and support reflect survivors' priorities and cultural perspectives. We centre Survivor voices and experiences in our service delivery to best support true healing for our Mob."**
>
> *– Brett Ingram, CEO of YOKAI*

As an Aboriginal Corporation, YOKAI provides a range of services that centre social, emotional, and spiritual well-being as essential to health, with its ongoing "Healing Our Spirit" work supporting emotional well-being, cultural reconnection, community connection, and spiritual healing. They provide collective healing, eldercare support, mission reunions, information and support for survivors seeking redress through the WA Stolen Generations Redress Scheme and other state or national initiatives. YOKAI redress staff assist with applications, connect survivors to counselling, and advocate for policy changes that promote justice and healing. The Yokai Elder Care Program team walk alongside Elders, making sure they get the support they need to live well at home for as long as they wish. Eldercare staff assist in addressing critical needs such as access to aged care services. These initiatives encompass a trauma-informed and culturally grounded approach, aligning with best-practice principles that emphasise empowerment, voice, and choice for affected communities.

YOKAI's culturally grounded programs create safe spaces for survivors to rebuild their sense of belonging, purpose, and strength. Their focus on truth, justice, healing, and community-control tackles both immediate needs and the deeper drivers of disparity. By fostering environments where survivors can reclaim their identities and connect with others who share similar experiences, YOKAI's work serves as a bridge between personal healing and collective awareness.

"A critical piece of YOKAI's work is raising awareness and educating the broader community of the injustices Aboriginal families faced, so we can lay the foundations for healing and justice for Stolen Generations survivors and their families. There is no healing without Truth first," said Mr Ingram.

The documentary *Genocide in the Wildflower State*, produced by YOKAI in partnership with Bringing Them Home WA, is a critically acclaimed film that powerfully builds community awareness of the Stolen Generations.

With a small budget and through moving personal testimonies and historical accounts the film highlights the injustices faced by Aboriginal families in WA. ***"This is essential to not only honouring people's stories and histories but providing insight into how government policies continue to impact individuals and families today,"*** said Mr Ingram. Projects like *Genocide in the Wildflower State* amplify survivor voices and educate the broader public about the realities of forced removals. These efforts challenge denial and ignorance, fostering a shared understanding of history as a prerequisite for reconciliation. This community-led initiative highlights the importance of survivor voices and cultural safety in healing.

However, as Mr Ingram emphasised "while grassroots efforts are essential to building social change, systemic change through policy remains critical to achieving justice." YOKAI faces several challenges common to survivor-led organisations. A recurring issue is the lack of sustainable funding, as long-term healing requires consistent support, yet funding is often short-term, or project based. These financial constraints limit the ability to deliver continuous trauma-informed care and cultural programs. Beyond funding, survivors continue to experience entrenched structural inequalities. Many Stolen Generations survivors experience poorer health outcomes, higher rates of chronic illness, and limited access to culturally safe aged care. This disparity — often described as the "gap within the gap" — reflects the fact that survivors experience worse health and wellbeing outcomes than Aboriginal and Torres Strait Islander peoples who were not removed. These inequities are compounded by intergenerational trauma, socio-economic disadvantage, and policy settings that undermine recovery and justice.

As Mr Ingram notes, ***"In most cases, where available, Stolen Generations redress payments are considered assets for the purposes of aged care means testing. This reduces eligibility for government support or increases the amount an individual must pay for care. This approach significantly diminishes the financial benefit of the compensation, as it penalises survivors by reducing their access to vital aged care support at the very point they need it most."***

Such policies perpetuate harm rather than deliver justice. By eroding the intended purpose of redress, survivors are once again disadvantaged, underscoring the urgent need for reform. Closing the gap for Stolen Generations survivors requires more than health service delivery; it demands trauma-informed, justice-oriented, and rights-based policy that addresses the structural drivers of inequality.

> **"Without accelerated action, there is a risk that justice will come too late for those who endured these policies. Policy frameworks must deliver tangible outcomes that honour the resilience and dignity of the Stolen Generations."**
>
> *– Brett Ingram, CEO of YOKAI*

The National Agreement on Closing the Gap provides a critical framework for this work through its emphasis on shared decision-making, structural reform, and community-controlled solutions. For Stolen Generations survivors, closing the gap requires policies that go beyond addressing immediate needs to actively dismantle systems of discrimination and neglect by embedding healing, cultural safety, responsiveness, and self-determination across government practice and service provision. This can only be achieved by recognising survivors' rights to justice, healing, and cultural continuity, and by protecting and advancing those rights through sustained policy commitment and genuine partnership.

Images supplied by YOKAI.





Attending the Austrade Gulfood 2026 Buyers Breakfast. From left: DFAT officer Alicia McAllister, First Nations business delegate Leah Armstrong, Honey for Life business owner Lance (Buddy) Franklin, Ambassador for First Nations People Justin Mohamed and First Nations business delegate Brian Bero. *Image supplied by DFAT.*

Case Study:

Department of Foreign Affairs and Trade

Australia's commitment to the rights and prosperity of Aboriginal and Torres Strait Islander peoples finds powerful expression in the Australia–UAE Comprehensive Economic Partnership Agreement (UAE CEPA).

Entering into force in October 2025, the UAE CEPA broke new ground as the first Australian free trade agreement to include a dedicated Indigenous trade and investment chapter. This landmark development is a tangible step toward realising the principles of the UNDRIP, particularly the right to economic self-determination.

The UAE CEPA Indigenous chapter establishes a robust framework for cooperation between Australia and the UAE, focused on building sustainable pathways for First Nations businesses to access and thrive in international markets.

By addressing interests across key areas such as environmental stewardship, sustainable agriculture, intellectual property, and investment, the agreement actively promotes the growth and resilience of First Nations enterprises. This approach directly supports the National Agreement on Closing the Gap, which recognises economic participation as a crucial foundation for improved outcomes in employment, health, and wellbeing for Aboriginal and Torres Strait Islander peoples.

The launch of the UAE CEPA First Nations Action Plan on 26 November 2025 marked a defining moment to translate ambition into action. Developed with the ongoing guidance and expertise of the pilot First Nations Trade and Investment Advisory Group, the Action Plan is pioneering new avenues for Aboriginal and Torres Strait Islander businesses to capitalise on the opportunities presented by Australia's free trade agreements.

The Action Plan sets out a clear and ambitious agenda. First, it supports First Nations businesses to realise their export potential in the UAE through an Advanced First Nations Export Program, a series of online market seminars tailored to First Nations entrepreneurs, and the development of dedicated resources for exporters.

These initiatives are designed to break down barriers to entry, build export capability, and ensure that Aboriginal and Torres Strait Islander businesses have the tools, networks, and confidence to compete and succeed internationally.

Secondly, the Plan is strengthening relationships between First Nations businesses and the UAE through the introduction of an Australian First Nations–UAE Business Exchange Program and the establishment of a First Nations Trade and Investment CEO Network. These platforms are creating spaces for genuine partnership, knowledge sharing, and cultural exchange, laying the groundwork for enduring business connections. As Ambassador for First Nations People, Justin Mohamed said ***"the UAE recognises the important contribution Australia's First Nations businesses make to our trade and investment, and First Nations people play in deepening our cultural and economic ties."***

Finally, the Action Plan is showcasing Australia's First Nations business excellence in the UAE through the publication of the Australian First Nations Capability Booklet and by elevating First Nations enterprises at key events in both the UAE and Australia. This focus on visibility and celebration is critical, by telling Australia's First Peoples stories on the world stage, the narrative of Indigenous economic development demonstrates the value of Aboriginal and Torres Strait Islander knowledge, innovation, and resilience.

First Nations businesses are uniquely positioned to meet the UAE's growing demand for premium, sustainable, and culturally rich goods and services. From native botanicals used in wellness products to ethically sourced foods, innovative designs, and clean energy solutions rooted in traditional knowledge, these businesses provide authentic offerings that align with the UAE's vision for innovation, sustainability, and cultural exchange.

The UAE is a gateway to the Middle East and beyond, this partnership opens doors for increased cultural and economic exchange. The value of First Nations businesses and trade reaches back along the supply chain and into communities where jobs, wealth and resilience are created and sustained.

For many Aboriginal and Torres Strait Islander business owners, the Plan represents a new era of opportunity, one grounded in respect for Aboriginal and Torres Strait Islander rights, recognition of strengths, and a commitment to shared prosperity. It is a testament to what can be achieved when government, business, and community work together with purpose and respect.

By continuing to build pathways for First Nations economic empowerment, this Partnership is investing in a future where Aboriginal and Torres Strait Islander peoples can determine their own destinies and contribute their unique strengths to the world. The journey is far from over, but together, this partnership is turning ambition into action and action into lasting change.



Case Study:

The Kimberley Communities Solar Saver (KCSS) Program, Horizon Power

Remote and regional Western Australia (WA) is home to many Aboriginal and Torres Strait Islander communities, whose connection to Country and culture spans tens of thousands of years. In these vast and often isolated regions, households frequently experience high energy costs and limited access to renewable infrastructure.

Horizon Power is the WA Government–owned regional energy provider, responsible for generating, distributing, and retailing electricity to more than 38,000 customer accounts and 9,000 businesses across 2.3 million square kilometres. Many of the communities it services face persistent energy inequities making the provision of reliable, sustainable, and affordable energy both a technical challenge and a matter of justice.

The Kimberley Communities Solar Saver (KCSS) Program, led by Horizon Power in collaboration with local Aboriginal communities, responds directly to these challenges by enabling access to shared rooftop solar and equitably distributing the financial benefits across participating households. By reducing reliance on costly and environmentally harmful fossil fuels, the project improves affordability while strengthening community participation over local energy outcomes.

KCSS is co-funded by the Australian Government and the Government of Western Australia under the Community Solar Banks Program, described as "a commitment to deploy community-scale solar for more than 25,000 Australian households that have difficulty accessing solar like renters, low-income households and people living in apartments".[9]

A key driver for the KCSS program is addressing entrenched inequities in energy access. As Dylan Hearty, Horizon Power Senior Manager Customer Solutions explains, ***"These communities often face elevated energy consumption due to extreme temperatures, aging housing assets, and overcrowding. This is paired with barriers in accessing the benefits of the energy transition, such as geographic isolation, low incidence of home ownership and limited access to funding. These factors result in significantly escalated financial and social impacts on the communities and this is why programs like KCSS are so critical. They provide an evidence-based solution of how innovative energy initiatives can drive climate action while empowering Aboriginal and Torres Strait Islander peoples".***

While not all homes in a participating community are fitted with solar systems, the benefits of renewables are shared equitably with all properties in a community. Each household receives two free units of power per day, plus a 12.5% discount on all power consumed from 6am–6pm. This discount is an incentive for communities to shift power consumption to daylight hours, maximising the benefits of rooftop solar when the sun is shining.



The KCSS Program is already delivering tangible outcomes. To date, 122 rooftop solar systems have been installed in five communities, delivering energy-saving credits across ~430 households and providing a total of ~1.3MW of installed rooftop solar capacity. All systems are connected through Horizon Power's distributed energy resource management system (known as Smart Connect Solar), enabling savings to be collated and applied directly to household meters.

Since August 2024, more than $126,000 in energy-saving credits have been applied to households across five Kimberley communities: Ardyaloon, Beagle Bay, Bidyadanga, Warmun and Yungngora. In those communities with one full year of program data, savings are on average $450/household per annum. Collectively, the program demonstrates how shared solar models can deliver immediate cost-of-living relief while expanding access to renewable energy for households that may otherwise be excluded.

Importantly, the KCSS Program has been intentionally designed around principles of partnership and equity. ***"The KCSS Program was designed based on consistent feedback from local Aboriginal stakeholders,"*** Dylan explains. ***"The solution addresses energy affordability, done in a way that suits the communities' priorities for funding, risk, and ongoing governance...***

"Our experience in our first KCSS community informed the planning for future communities. We know each community is unique, and we're committed to adapting how we engage and work alongside each community to deliver a customer-centric approach...

"By designing a solution that returns financial benefits directly to households, without putting upfront or ongoing demands on stretched community resources, the project supports self-determination, strengthens community resilience, and contributes to broader efforts to achieve environmental, social, and economic equity for Aboriginal and Torres Strait Islander peoples," Dylan says.

This approach aligns with the UNDRIP, particularly the rights of Indigenous peoples to participate in decision-making and to pursue economic, social, and cultural development in accordance with their own priorities.
"At Horizon Power, we work directly with communities to co-design energy solutions that incorporate local priorities along the journey. By working in this way, we can deliver not only safe and reliable power but also support community aspirations." – Dylan Hearty

Horizon Power also sets targets for Aboriginal and Torres Strait Islander employment and procurement, and supports training pathways that enable communities to participate in, manage, and benefit from clean energy infrastructure.

> **"At Horizon Power, we work directly with communities to co-design energy solutions that incorporate local priorities along the journey. By working in this way, we can deliver not only safe and reliable power but also support community aspirations."**
>
> *– Dylan Hearty, Horizon Power's Senior Manager Customer Solutions*



Horizon Power also sets targets for Aboriginal and Torres Strait Islander employment and procurement, and supports training pathways that enable communities to participate in, manage, and benefit from clean energy infrastructure.

Aaron Matthews, Horizon Power's Senior Manager Traditional Owner Relationships & Reconciliation explains, ***"By embedding the principles of partnership and equity into our operations, we ensure that our work contributes to Aboriginal and Torres Strait Islander self-determination, economic empowerment, and an equitable transition to clean energy for Aboriginal and Torres Strait Islander communities."***

Beyond energy outcomes, the KCSS Program supports broader health and well-being benefits. Access to reliable and affordable electricity underpins safe housing, education, access to health services, refrigeration for medicines, and economic participation. By ensuring benefits are equitably shared and community-led, Horizon Power reinforces social cohesion, cultural identity, and self-determination, key social and cultural determinants of health. Horizon Power's work in remote Western Australia demonstrates that being future-ready is not only about technology or infrastructure, but about justice, respect, and partnership.

> **"Through our actions, we are demonstrating our commitment to Aboriginal and Torres Strait Islander peoples by working in partnership for meaningful, long-term positive impact and mutual benefit."**
>
> *– Aaron Matthews, Horizon Power's Senior Manager Traditional Owner Relationships & Reconciliation*

Images supplied by Horizon Power.





Equality

Equality as the goal of Closing the Gap cannot be understood solely through national targets and aggregated performance data. Government-approved reporting frameworks provide an important overview of progress but obscure much of what is working. Many community-led, place-based initiatives that achieve meaningful advances in equity and equality of opportunity operate at a scale below the minimum government expenditure thresholds that trigger inclusion in the Closing the Gap data collections. As a result, some of the most effective programs remain statistically invisible, despite their profound local impact.

Yet it is often these local initiatives that most successfully address the social determinants of health, education, housing and employment — the very foundations of equality. They challenge the narrative implied by high-level reporting that progress is limited or stagnant, revealing a landscape of innovation, resilience, and community-led success instead.

These case studies shift the lens from national averages to local realities. Each initiative shows how equality of opportunity emerges when communities design solutions for themselves, effectively tackling the root causes of inequality with sustainable, culturally responsive solutions.

Equality is not achieved by treating everyone the same. These case studies underscore the importance of granular, localised evidence in understanding what genuinely works. They capture outcomes that large-scale data cannot, highlight effective reform models and offer practical lessons for scaling equity in ways that respect self-determination, often with minimal government support.

The **Malpa Young Doctors Program** demonstrates self-determination in practice and how culturally grounded, youth-led health initiatives can transform outcomes in education, health literacy, and social wellbeing. By combining traditional Aboriginal healing with modern medical knowledge and embedding local community input into curriculum design, the program empowers children from disadvantaged backgrounds to become health leaders. Its success is evident in improved attendance, confidence, and engagement, as well as stronger social cohesion and cross-cultural understanding.

Aboriginal Housing Northern Territory (AHNT) shows how community-controlled housing advocacy strengthens health, education, and social outcomes. By ensuring housing policy reflects cultural priorities and lived experience, AHNT addresses structural inequities, overcrowding, and homelessness. Its focus on culturally appropriate, safe housing enables access to education, employment, and family cohesion. AHNT's approach highlights the importance of community governance, cultural relevance, and systemic advocacy, producing tangible improvements.

Gur A Baradharaw Kod (GBK) and Meriba Ged Ngalpun Mab (MGNM) illustrate the power of place-based employment development. By embedding Ailan Kastom and Aboriginal Lore in governance and employment programs, GBK ensures Traditional Owners lead decision-making and benefit directly from sustainable jobs. Programs addressing local skill needs — marine services, cultural tourism, and construction — improve economic independence, mental health, and cultural continuity. Employment on Country, guided by local priorities, strengthens both community wellbeing and self-determination, outcomes often overlooked in national employment data.

A common strength emerges: **community-driven design and place-based delivery enable First Peoples to overcome disadvantage in culturally meaningful ways**, achieving measurable local outcomes that Closing the Gap reports frequently miss.

If Closing the Gap is to fulfil its promise, governments must look beyond headline statistics and engage with the successes unfolding in communities every day where community-led initiatives are already creating fairer opportunities, wellbeing, and lasting change.



Case Study:

Malpa Young Doctors Program

In a transformative effort to bridge health disparities, The Malpa Project continues to inspire Aboriginal and non-Aboriginal children across Australia to become "Young Doctors."

Malpa was established in 2012 by Don Palmer, who was deeply moved by the health inequities he witnessed in the town camps of Mparntwe (Alice Springs). In response to the question posed by Elders, *'Why are so many people unwell, and where is the government support?'* Malpa was born. Named after a Pintupi/Warlpiri/Luritja word meaning 'friends on the journey', the organisation is committed to health equity, working alongside communities to equip young people with the practical tools and confidence to build healthier lives.

Delivered in 55 primary schools across New South Wales, Victoria, South Australia, the Australian Capital Territory, and the Northern Territory, Malpa's Young Doctors for Life project combines traditional Aboriginal Ngangkari healing with modern medical knowledge. At the request of schools, the fifteen-week, community-designed course trains children ages 9 to 12 to be health leaders. The curriculum covers critical topics such as hygiene, nutrition, mental health, environmental health, and leadership, aligning with the Australian Curriculum's Health and Physical Education standards.

But the Young Doctors for Life Project is more than an educational project; through its community leadership, Malpa operationalises First Peoples' rights to determine their own health and education pathways. CEO Tracey Thompson, a proud Dunghutti woman, says, ***"In each school, our Project Leaders develop the course content with local input, ensuring that the voices, authority, and aspirations of First Peoples communities guide every stage of our work".*** It is this collaborative approach that drives the project's success.

While the project shows clear progress in health and education equity, the impact goes much further. Students report feeling more engaged and confident, and the data support it. Regular monitoring and evaluation show increased attendance, improved health literacy, stronger social and emotional wellbeing, and fewer incidents of antisocial behaviour in the classroom.

In more than 50 communities where Malpa runs projects, the ethos of *tjunkajurra* (working together) strengthens positive outcomes by building mutual respect and cultural understanding. Community members and Elders consistently observe strong support for inclusive projects that bring First Peoples and non-Indigenous young people together.

By learning and working together, students build empathy, challenge stereotypes, and develop leadership skills in a setting that reflects the richness of their communities.

"This is critical to addressing issues of racism and genuinely works towards reconciliation efforts," according to Don Palmer, Communications Director. The project not only benefits individual participants but also contributes to stronger, more connected and culturally respectful communities.

Malpa has been highly intentional in selecting the communities where its project is delivered, with a strong focus on engaging students from significantly disadvantaged backgrounds. The organisation is committed to ensuring the project is not only relevant, but also transformative. Malpa directly addresses systemic and root causes of inequality, particularly disempowerment, by restoring control and cultural relevance in health education.

Ms Thompson suggests the project contributes to advancing Aboriginal and Torres Strait Islander peoples' rights by *"reflecting the principle of self-determination in its practice. Projects are locally designed and delivered by mostly Indigenous staff, who determine the priorities, frameworks, and methodology... The Young Doctors project is about empowerment; it's about advancing health equity by giving our communities the tools, confidence, and agency to create the change they want and need."*



Images supplied by Malpa Young Doctors Program.

Despite its demonstrable success and strong community support, the Malpa Project has faced considerable challenges in gaining meaningful support from governments. While it has developed productive partnerships with Aboriginal Medical Services, hospitals, cultural centres, medical training institutions, and organisations like NACCHO, successive efforts to collaborate with government departments have been met with avoidance or inaction. Government resistance to engaging is one of the most significant barriers to scaling the project's impact. Almost all of Malpa's $4.8 million in funding has come from private sources, limiting its ability to expand into the many communities that have requested it.

Still, the project aligns directly with the four Priority Reform Areas of the National Agreement on Closing the Gap. Malpa's community-led model places local voices at the centre of every decision, and the project creates employment opportunities and nurtures leadership among First Peoples facilitators and young people. While government institutions have yet to partner with Malpa, the project continues to demonstrate what culturally grounded transformation could look like.

"A policy shift is urgently needed, one that listens to communities and invests in proven models. The Malpa Project exemplifies what is possible when empowerment, culture, and innovation intersect. It is a powerful model for how systems can be transformed from the ground up. Not only to close the gap but to fundamentally change the way Aboriginal and Torres Strait Islander rights and futures are realised in Australia."

– Tracey Thompson, CEO of Malpa

Case Study:

Aboriginal Housing Northern Territory (AHNT)

Aboriginal Housing Northern Territory (AHNT) is the peak body advocating for Aboriginal community-controlled housing solutions across the Northern Territory (NT). Representing over nineteen member organisations and working alongside the four NT land councils, AHNT's mission is clear: 'Aboriginal housing in Aboriginal hands'. Their work is grounded in culture, language, and Country.

Safe, adequate, and culturally appropriate housing is crucial for the health and wellbeing of Aboriginal and Torres Strait Islander peoples, forming the foundation for physical, mental, and social health. It also enables access to education and employment and strengthens family and community cohesion. Because housing underpins these determinants of wellbeing, it is inherently a rights issue — central to self-determination, cultural continuity, and an adequate standard of living. Recognising these rights means understanding that cultural identity, shared traditions, and social bonds must shape housing policy, as they are essential to community resilience and to closing the gap.

As CEO of AHNT Ms Caton reflects, ***"Housing is not just a roof over one's head; it is a determinant of life itself; it is a cultural anchor, a place for ceremony, language, and kinship. Critically, without good living conditions and fundamentals like access to water, the ability to wash, and a safe house, improving health is impossible. When housing policy ignores these dimensions, it perpetuates harm".***

For Aboriginal and Torres Strait Islander peoples in the NT, the housing crisis is stark: 87% of homeless Territorians are First Nations, and more than half of remote community homes are overcrowded. Furthermore, in severely overcrowded dwellings, 97.6% of residents are First Nations.[10]

> **"This crisis is not accidental; it is systemic. Colonisation, policy failures, and underinvestment have created conditions where Aboriginal people are 12 times more likely to be homeless than other Australians. Equity demands more than equal treatment; it requires structural change to dismantle systemic barriers and restore communities."**
>
> *– Leeanne Caton, CEO of AHNT*

AHNT's approach embodies this principle. By advocating for community-controlled housing systems, AHNT ensures decisions reflect cultural priorities and local knowledge. As the Territory peak body, they use their platform to ensure that the perspectives of members and communities are actively centred, strengthening public understanding of their rights, the systemic challenges they face, and the solutions they identify as necessary for meaningful and lasting change.

Policy is both the problem and the solution. Under the National Agreement housing is recognised as a critical socio-economic priority.[11] The Australian Government has committed to increasing the proportion of Aboriginal and Torres Strait Islander people living in appropriately sized housing to 88% by 2031, up from a baseline of 78.9% in 2016.[12] To achieve this, a Housing Policy Partnership was established in 2022 to embed shared decision-making between governments and First Nations representatives. Significant financial investment underpins these commitments, and the Housing Sector Strengthening Plan, developed with the National Aboriginal and Torres Strait Islander Housing Association, focuses on building the capacity of Aboriginal community-controlled housing organisations like AHNT to deliver key elements.[13]



These commitments aim to reduce overcrowding, improve health outcomes, and strengthen community-controlled housing systems, each a critical step towards achieving equity. While this approach marks a significant move away from traditional top-down models towards co-design and shared governance, it stops short of embedding the full decision-making authority and cultural autonomy necessary for genuine self-determination and sustainable, community-led solutions.

As Ms Caton observed, ***"even with increased — though still insufficient — resources, AHNT faces persistent challenges to meet the scale of need"***. The scale of the problem is significant: more than 13,000 people experience homelessness in the Northern Territory,[14] and delivering housing across 1.3 million square kilometres and 500 homelands presents immense logistical and financial hurdles. Furthermore, fundamentally transforming entrenched bureaucratic systems to enable true community control and leadership requires ongoing advocacy, partnership, and sustained political commitment.

Furthermore, aging housing stock, rising costs, and the lingering mistrust from past government interventions intersect to create an environment for ongoing disadvantage, where even comprehensive reforms struggle to gain traction. These factors compound existing barriers, making it increasingly difficult for communities to secure safe, suitable homes that reflect their cultural values and aspirations. Without addressing both the structural and historical issues at play, efforts to improve housing are likely to fall short of delivering the transformative, community-led outcomes envisioned by true self-determination.

> **"While current reforms are welcome and represent progress in supporting Aboriginal and Torres Strait Islander communities, enduring change will only be realised when community led self-determination is fully respected and resourced, ensuring that housing policy not only addresses immediate needs but also supports the long-term health, culture, and rights of future generations."**
>
> *– Leeanne Caton, CEO*

Image supplied by Aboriginal Housing Northern Territory.

Case Study:

Gur A Baradharaw Kod Torres Strait Sea and Land Council

As the Native Title Representative Body for the Torres and Endeavour Straits, GBK's leadership approach is grounded in *Ailan Kastom* and Aboriginal Lore, respect for Elders' authority, kinship structures, and decision-making on-Country. Recognising the need to expand culturally grounded pathways to wellbeing and economic independence, GBK established Meriba Ged Ngalpun Mab (MGNM), a community led organisation responsible for delivering the Commonwealth Government's Remote Australia Employment Service (RAES) throughout the Torres Strait region.

"Through the collective direction of Traditional Owners, GBK exists to protect, secure and advance the rights and interests of Aboriginal and Torres Strait Islander peoples of the region in relation to land, sea, and cultural heritage... every decision starts and ends with community leadership. Our governance structure is not just symbolic, Traditional Owners hold the seats, set the agenda, and guide the outcomes. When our people lead decision-making, the outcomes reflect who we are: strong, capable, and connected to Country."

– Ned David, GBK Chair

It is this overarching governance that shaped the development of MGNM. Launched in 2019, MGNM was created to promote economic self-sufficiency, to break cycles of disadvantage and to provide Aboriginal and Torres Strait Islander peoples more control over employment and training services in the region. Supported by the Commonwealth Government's Community Development Program, MGNM was designed to trial pathways to real jobs for First Peoples, recognising that employment is not just about income, it is about dignity, cultural continuity, and community wellbeing.[15] GBK saw this as an opportunity to preserve and revitalise Aboriginal and Torres Strait Islander traditions while aligning them with modern economic needs.

The inequities experienced across the region are rooted in a legacy of externally imposed systems, where decisions affecting Country and community have often been made without the input or the authority of Traditional Owners. Furthermore, for decades, systemic barriers such as geographic isolation, limited access to training, and lack of culturally safe workplaces have contributed to high unemployment rates in the Torres and Endeavour Straits.

To address these structural inequities, MGNM addresses root causes by embedding *Ailan Kastom* and Aboriginal Lore and associated cultural protocols in governance, negotiation and planning. MGNM also applies place-based approaches that reflect local identity, priorities, cultures and creating programs that put Traditional Owners at the fore. Chair Ned David explains, ***"we engage and consult with communities regarding programs that may affect them directly and encourage them to play a role in shaping these activities. This is critical to progressing self-determination and equality in the Torres Strait and Northern Peninsula Regions".***





Self-determination, economic participation, and culturally safe community development are all rights that are being actively pursued through this initiative. Embedding First Nations leadership and control in economic initiatives is essential to fulfilling these rights. Mr David says, ***"The success of our Trialling Pathways to Real Jobs Program is proof that community-led program delivery is how things work best. Our people know what their communities need because they live it every day."***

Employment is a key social determinant of health and as Mr David notes, ***"We've seen firsthand that when people are employed in meaningful work on their own Country, wellbeing improves – confidence grows, families are stronger, and culture is alive in the everyday... sustainable employment happens when people work on their own Country, caring for their own land and sea."***

Importantly, this approach ensures that responsibility for outcomes rests with the community, fostering ownership and pride. Participants are not passive recipients; they are active contributors to a shared vision of economic independence and cultural strength. The outcomes of MGNM are tangible and deeply significant. Since its inception, the program has supported job seekers to gain skills in industries such as marine services, construction, and cultural tourism. Many participants have transitioned into long-term employment, reducing reliance on welfare and increasing household stability. Beyond economic metrics, the program has strengthened determinants of wellbeing. Employment has improved mental health, reduced social isolation, and enhanced cultural inclusion by enabling people to work in roles that respect and celebrate their heritage.

In a region where government presence is extensive, GBK's governance model provides an important counterbalance. Shifting systems from 'delivered to community' toward 'designed, led, and governed by community'. GBK notes that while there has been improvement in government recognition of the need to partner with community-controlled organisations, in practice, structural control remains with government, particularly in relation to funding, infrastructure, and service delivery systems.

Most community infrastructure across the region is owned, operated or restricted by government agencies, limiting the ability of Aboriginal and Torres Strait Islander communities to lead local employment, service delivery, and development initiatives.

Mr David points out, ***"shared decision-making is improving but has not yet translated into shared authority".*** Transitioning infrastructure and service control to community-controlled organisations is essential to uphold First Peoples' self-determination, enabling place-based employment, cultural activities, and stronger local decision-making.

By recognising community priorities, governments can invest, enable, and implement policies that empower community-led initiatives and enable Aboriginal and Torres Strait Islander peoples to fully exercise their economic, social, and cultural rights.

Images supplied by Gur A Baradharaw Kod Torres Strait Sea and Land Council.

Healing

By centring local voices, cultural practices, and holistic models of care, these initiatives support healing across individual, family, and community levels. Their work must be understood against the enduring consequences of colonisation: dispossession from Country, suppression of language and law, racialised governance, and the forced removal of Aboriginal children under assimilation policies. These policies fractured kinship systems, disrupted cultural transmission, and produced intergenerational trauma that continues to shape mental health, parenting confidence, family stability, and contact with state systems. Healing in First Peoples communities therefore cannot be reduced to clinical intervention alone; it requires restoration of cultural authority, reconnection to Country, and rebuilding of relational networks damaged by state violence.

Tackling the root causes of disadvantage and systemic harm, these case studies represent Aboriginal and Torres Strait Islander models of innovation and care that embed First Peoples ownership, responsibility, and expertise. They operationalise self-determination while advancing one or more of the four Priority Reform Areas under the National Agreement on Closing the Gap: strengthening community-controlled organisations, transforming government institutions, sharing data and decision-making, and addressing systemic racism.

Healing, in this framework, is both therapeutic and structural.

The case studies presented—Thirrili, Riverina Medical & Dental Aboriginal Corporation (Yalbilinya Miya), and Dardi Munwurro (Ngarra Jarranounith Place residential program)—demonstrate how cultural authority and lived experience are translated into practical, trauma-informed interventions.

Thirrili delivers culturally safe postvention services in response to suicide, walking alongside families and communities in the aftermath of loss. Its approach recognises that suicide cannot be disentangled from cumulative grief, unresolved trauma, and the historical violence of colonisation. By grounding support in cultural protocols, ceremony, and community leadership, Thirrili fosters intergenerational healing rather than pathologising individuals.

Yalbilinya Miya, meaning “baby’s home”, addresses maternal and child health through culturally responsive breastfeeding and parenting support. For many Stolen Generations survivors and their descendants, parenting occurs in the shadow of disrupted attachment and institutional control. By restoring confidence in traditional child-rearing knowledge and embedding Aboriginal health workers at the centre of care, Yalbilinya Miya strengthens early attachment, maternal wellbeing, and cultural continuity. Healing here begins at birth, interrupting cycles of trauma transmission.

Dardi Munwurro’s Ngarra Jarranounith Place residential program works with Aboriginal men to address intergenerational trauma, substance misuse, and family violence. Its model integrates cultural reconnection, emotional literacy, and accountability within a framework of cultural strength rather than deficit. Participants engage with Elders, learn cultural practices, and develop leadership capacities, reframing masculinity through responsibility to family and community. In doing so, the program confronts the colonial roots of violence while building protective factors for future generations.

Collectively, these initiatives exemplify insider knowledge translated into action. They move beyond individual symptom management to address the structural and historical determinants of distress. By embedding governance, cultural continuity, and early intervention, they produce outcomes, renewed identity, strengthened kinship, restored authority, that extend beyond conventional quantitative metrics.

Healing in First Peoples contexts is thus relational, cultural, and political: it repairs harm, rebuilds connection, and reasserts sovereignty in everyday practice.

These models offer transformative pathways that remain largely invisible within national reporting frameworks, yet they are foundational to closing the gap in ways that are just, sustainable, and community-defined.

Case Study:

Thirrili

Suicide remains a leading cause of death among Aboriginal and Torres Strait Islander peoples, occurring at significantly higher rates than in the non-Indigenous population and causing profound and lasting impacts on families, communities, and cultural continuity. Addressing this crisis requires culturally safe, community-led postvention services that provide immediate and ongoing support to those affected by suicide and other fatal traumatic incidents.

Thirrili Ltd is a national Aboriginal and Torres Strait Islander–led organisation delivering this critical support. Established to meet the growing need for culturally safe, community-led responses, ***"Thirrili's purpose is clear: to reduce suicide and its impacts by empowering individuals, families, and communities on their journey of healing and hope,"*** says Tanja Hirvonen, Thirrili CEO.

Grounded in trauma-informed principles and the Social and Emotional Wellbeing (SEWB) framework,[16] Thirrili recognises that suicide is complex and deeply connected to intergenerational trauma, racism, and the enduring impacts of colonisation. Its holistic Model of Care weaves together self-determination, cultural safety, and wellbeing, creating an approach that is both compassionate and effective. Thirrili delivers 24-hour phone contact, on-the-ground community responses, and capacity-building initiatives across urban, regional, and remote communities.

With 85% of its workforce identifying as Aboriginal and Torres Strait Islander, Thirrili's strength lies in lived experience and cultural connection. Ms Hirvonen affirms, ***"Staff bring expertise in clinical practice, governance, and community leadership, supported by Aboriginal-led wellbeing programs, cultural supervision, and yarning spaces to nurture those who care for others".*** This model centres the right to culturally safe services and recognises that healing and suicide reduction are inextricably linked through the restoration of cultural authority and community control.

At the heart of Thirrili's work is community ownership. The organisation walks alongside communities, meeting people where they are and ensuring that local voices guide every step. This ethos is critical to upholding the right of Aboriginal and Torres Strait Islander peoples to participate in decisions affecting their lives. This approach acknowledges that suicide prevention and postvention must be responsive to the lived realities of Aboriginal and Torres Strait Islander peoples — not only as a matter of best practice but to advance First Nations justice and rights.

Rather than imposing external programs, by centring Indigenous leadership and culturally safe collaboration, Thirrili ensures that communities lead the design and delivery of supports that reflect local protocols, values, and aspirations. ***"That's the measure of success: When the knowledge and strength remain and grows in the community",*** says Ms Hirvonen.

The organisation's systems-change initiatives also extend its impact by working with governments and mainstream organisations to embed cultural safety and transform service design. By embedding Indigenous ways of knowing, being, and doing into practice, Thirrili fosters stronger community capacity, increased coordinated postvention responses, and visible signs of healing.

The case of Thirrili's partnership with the Cape York community of Coen illustrates these principles in action. In collaboration with the Coen Regional Aboriginal Council (CRAC) and the Queensland Mental Health Commission, Thirrili supports a community-led approach to suicide prevention and postvention, guided by grassroots leadership and cultural sustainability. Over the past year, Coen community members have undertaken Certificate IV in Mental Health studies, supported by Thirrili mentors. Regular visits from Thirrili's Queensland team, spending time on Country and hosting community gatherings, foster connection, learning, and practical planning for local responses to critical incidents. This partnership demonstrates how Indigenous-led solutions can drive systemic reform and create pathways toward self-determination, intergenerational healing, and long-term community wellbeing.



The implementation of the National Agreement on Closing the Gap has led to a shift in government engagement and greater recognition of the need for partnership and Indigenous-led design. However, Thirrili continues to observe ongoing issues with policy reform and the practical execution of the four Priority Reform Areas.

Ms Hirvonen emphasises ***"the Agreement itself contains all the elements needed to drive systemic change both in policy and practice, but its true potential can only be realised when governments fully commit to community-led implementation, sustained and adequate investment, and structural reform that centres Aboriginal and Torres Strait Islander voices at every level."***

Although Thirrili's work strongly aligns with the National Aboriginal and Torres Strait Islander Health Plan and its priorities, including mental health and suicide prevention,[17] short-term funding cycles continue to undermine workforce stability and service continuity. Organisations can be frequently forced to reapply for funding and renegotiate terms. ***"In a field marked by ongoing, significant loss, this instability affects both staff wellbeing and community trust,"*** Ms Hirvonen explains. ***"It is heart-based work, and people bring their whole selves to it. Short-term funding for this kind of work is not just inefficient, it's unsustainable."*** The reduction of suicide in Aboriginal and Torres Strait Islander communities is inseparable from the right to healing, cultural safety, and self-determination. Policy makers, health professionals, and advocates must recognise that sustainable change requires a rights-based, community-led, and culturally safe approach, underpinned by Aboriginal and Torres Strait Islander governance. Only by upholding these rights and embedding them in policy and practice can Australia move towards a future where every Aboriginal and Torres Strait Islander person enjoys the right to a long and healthy life, free from the shadow of suicide.

> **"Our long-term aspiration is that our work becomes unnecessary — a future where Aboriginal and Torres Strait Islander families and communities no longer experience loss to suicide. Until that day, we will continue to walk beside communities, supporting them as they wish."**
>
> *– Tanja Hirvonen, CEO of Thirrili*

Image supplied by Thirrili.

Case Study:

Riverina Medical & Dental Aboriginal Corporation

The Yalbilinya Miya ('learning together' in Wiradjuri language) project, delivered by RivMed in the heart of the Riverina region, is more than a breastfeeding initiative, it is a culturally grounded response to the systemic health inequities experienced by Aboriginal families. Developed and led by RivMed in New South Wales (NSW), Yalbilinya Miya is a holistic and culturally responsive research project that aims to identify, implement, and evaluate breastfeeding supports that align with the preferences and needs of local Aboriginal women.

Dr Simone Sherrif, Senior Research Fellow, explains the gap in culturally responsive breastfeeding support that prompted the development of the research project. ***"Our women have been breastfeeding for 65,000 years, and many of our women want to breastfeed and start in hospital, but by the time they come to the RivMed clinic a few weeks later, they've run into challenges and stopped breastfeeding. When culturally responsive support isn't available, some women are left with the difficult decision to stop breastfeeding."*** This experience led to the project's central focus. ***"We wanted to understand how we could support mums and bubs through their breastfeeding journey,"*** said Dr Sherrif.

The project was led by a team of all Aboriginal women with their own firsthand breastfeeding experiences, and through extensive consultation with local Elders, mothers, and health workers. The objectives of the project were to:

1. Understand the key challenges and enablers of breastfeeding among local Aboriginal and Torres Strait Islander women living on Wiradjuri Country (Wagga Wagga).
2. Determine the current supports available and the preferences of local Aboriginal and Torres Strait Islander women for breastfeeding supports.
3. Develop, implement and evaluate a holistic breastfeeding support program that is responsive to the desires and needs of Aboriginal and Torres Strait Islander mothers.[18]

For many Aboriginal mothers, barriers to breastfeeding are deeply rooted in the ongoing impacts of colonisation, intergenerational trauma, social and economic injustices, and a health system that has often failed to provide culturally responsive care. These challenges make solutions complex and multi-layered, requiring approaches that go beyond clinical interventions. At its core, Yalbilinya Miya recognises that breastfeeding is not only a health practice but a cultural and relational practice that strengthens identity, nurtures connection, and supports lifelong wellbeing. The program offers practical breastfeeding support alongside cultural mentoring, weaving traditional knowledges with evidence-based health practices. By doing so, it restores confidence and pride in cultural parenting practices disrupted by colonisation and assimilation policies.

> **"We focus on the social and cultural determinants of breastfeeding in our research, as these factors strongly influence breastfeeding initiation and continuation. Understanding how these determinants shape the unique experiences of Aboriginal and Torres Strait Islander families is essential for improving health outcomes."**
>
> *– Dr Simone Sherrif, Senior Research Fellow at Yalbilinya Miya Project*

Healing and wellbeing are central to Yalbilinya Miya, as Dr Simone expressed, ***"through our program breastfeeding is an act of resilience, resistance and cultural continuity".*** The program addresses systemic barriers by embedding care within a holistic model that includes emotional support, connection to Country, and access to

wraparound services. Mothers are not treated as isolated patients; they are embraced as part of a family and community network. This approach counters the fragmentation often experienced in mainstream health systems and responds to the social and cultural determinants of health that undermine breastfeeding success.

A critical driver of this project is developing programs that uphold Aboriginal and Torres Strait Islander women's and children's right to health and health equity. As Dr Simone emphasised, ***"we do this research because Aboriginal and Torres Strait Islander mothers and babies have a right to the highest attainable standard of health and breastfeeding is one key marker for obtaining this"*** Breastfeeding is linked to a notable reduction in the risk of various illnesses, including sudden infant death syndrome (SIDS), ear infections, type 1 and 2 diabetes and offers broad, lasting health benefits for children and improves maternal health including a reduced risk of ovarian and breast cancers.[19]

The outcomes of Yalbilinya Miya are both measurable and deeply felt. Since its inception, RivMed has observed an increase in breastfeeding initiation and continuation rates among participating mothers. More importantly, mothers report feeling empowered and culturally safe, which fosters trust in health services and strengthens family wellbeing. These changes ripple outward: healthier babies, stronger maternal mental health, and reinforced cultural identity all contribute to closing the gap in life expectancy and child health outcomes.

Breastfeeding and the wrap-around support provided to mums and bubs through Yalbilinya Miya directly advance the rights affirmed in the UNDRIP and the National Aboriginal and Torres Strait Islander Health Plan, including the right to a healthy start to life, culturally safe care, and early intervention across the life course.[20] Yet policy settings still fail to recognise breastfeeding as both a health practice and a cultural practice, restricting ACCOs from accessing the funding needed to deliver and expand community-led maternal and child health programs. This lack of structural support leaves families vulnerable to preventable gaps in care. In addition, to strengthen these rights requires government to invest in Aboriginal workforce pathways, particularly for health workers and the development of lactation training grounded in Aboriginal ways of knowing, being and doing to ensure communities have the culturally grounded lactation expertise needed to support mothers and infants.

As Dr Simone noted ***"by aligning policy with community priorities, governments can move toward sustainable, systemic change that addresses health inequities at their root. The Yalbilinya Miya project demonstrates that when policy supports culturally grounded care, the benefits extend far beyond breastfeeding, they strengthen families, preserve culture, and advance health equity for generations".***

Image supplied by Riverina Medical and Dental Aboriginal Corporation.



Case Study:

Dardi Munwurro



The Ngarra Jarranounith Place (NJP) residential program delivered by Dardi Munwurro represents a culturally grounded, trauma-informed approach to addressing family violence and intergenerational harm among Aboriginal men in Victoria. Since participating in NJP, the rate of incarceration among high-risk Aboriginal men dropped from 13% to 4%, and homelessness among participants has been completely eliminated. These outcomes highlight the transformative power of the NJP residential program, which provides support for men at medium to high risk of using violence again. Established in 2000, Dardi Munwurro is a specialist Aboriginal healing and family violence prevention service, working to build stronger families and safer communities by breaking cycles of trauma and empowering men to become proud, responsible leaders.

In 2016, Dardi Munwurro established NJP for men requiring more intensive, holistic cultural healing and behaviour change in response to family violence. The program provides Aboriginal men with safe accommodation while they engage in a 16-week structured program that supports them to strengthen their cultural identity and connection, be accountable for and understand the impacts of their behaviour, maintain a healthy mind, body, and spirit, develop positive communication skills and healthy, respectful relationships, understand the importance of family and develop positive parenting skills, and set goals for their future while connecting with safe housing and employment pathways.

The program is underpinned by Aboriginal cultural healing, connecting men with Elders and other Aboriginal male role models and reintroducing them to cultural knowledge, ceremony, and country. This is supplemented by therapeutic support, including weekly individual and group sessions with a clinical psychologist specialising in trauma-related violence, as well as clinical alcohol and other drug support, person-centred casework, and a weekly parenting program.

The vast majority of NJP clients have exited prison and are deemed medium to high risk of using violence again, with the program supporting up to 12 clients at a time.

"We started this program because we saw a need in our community and we wanted to help. We established this program because our men told us that they needed a space to start their healing journey. From start to finish our program is designed and delivered by Aboriginal leaders who understand cultural context and community needs."

– Alan Thorpe, Program Director at Dardi Munwurro

Participants engage in structured sessions covering Aboriginal identity and connection, understanding emotions and violence, conflict resolution, and respectful relationships. By fostering cultural reconnection and emotional literacy, NJP helps men address trauma-driven behaviours, including substance misuse, violence, and homelessness. A participant reflected on their experience:

"I'm so grateful, blessed, there's too many words. I've never felt so supported, safe. I know I have support when I'm having bad days. I've got direction, self-worth. Not only from working on myself but from helping the other brothers in the program."

A cost-benefit analysis conducted by Deloitte Access Economics found that each dollar invested in NJP yields a return of 50–190%, primarily through reduced incarceration and improved employment outcomes. Key outcomes include a reduction in incarceration from 13% to 4%, elimination of homelessness, a 50% increase in education engagement, reduced family violence incidents, and decreased substance abuse.

"The research shows us that our men's programs are clearly working towards numerous targets in the National Agreement and it's important to have that qualitative data. It's critical to helping us understand the impact of our work, identify areas for improvement, and enabling us to continue our evidence-based advocacy. With it we can ensure the data is used collaboratively to improve outcomes and strengthen policy responses. But for us, it's more about the impact we are having on the ground," Mr Thorpe said.

"A key focus of our work is to break the cycle of intergenerational trauma and build safe and empowered communities by encouraging individuals to heal."

Deloitte's research demonstrates that investment in Aboriginal organisations delivering programs that address social and cultural determinants of health delivers tangible outcomes for individuals, families, and communities. Yet, despite NJP's demonstrated success, Dardi Munwurro continues to face challenges securing long-term, sustainable funding. Without structural reform and consistent funding embedded in justice and family violence prevention programs, NJP and similar ACCO-led initiatives remain vulnerable, despite being critical to reducing harm and advancing the rights of Aboriginal men and their families.

"Our program recognises our communities as rights-holders with a legitimate claim to safety, wellbeing, and self-determination in their healing and support. Through this lens, embedding healing ensures that policies do more than acknowledge harm, they actively create pathways for justice, equality, and cultural strength," emphasised Mr Thorpe.

NJP demonstrates that culturally safe, evidence-based interventions not only transform men's lives but also deliver measurable social and economic benefits. Sustained investment in programs like NJP is critical to breaking cycles of intergenerational trauma and creating safer, stronger communities. The Ngarra Jarranounith Place residential program stands as a clear example of a community-led, evidence-based, culturally safe intervention that empowers Aboriginal men — particularly those at medium to high risk — to heal, reconnect, and lead within their families and communities.

Images supplied by Dardi Munwurro.



Conclusion

In preparing the 2026 Close the Gap Report, we have witnessed first-hand the remarkable strength and leadership of Aboriginal and Torres Strait Islander peoples. Our focus throughout has been on highlighting community-driven solutions that are actively building health, equity and justice. Despite decades of policy promises and bipartisan support, it is clear to us that progress remains frustratingly slow, with most targets still off track. We do not attribute this to a lack of commitment, but rather to the persistent inability of existing systems to empower First Peoples' authority and deliver real change.

The evidence and case studies we have gathered for this report show that Aboriginal and Torres Strait Islander communities are already leading the way in reform. They are driving meaningful improvements through culturally grounded, community-controlled programs. These approaches are achieving better, more sustainable outcomes, demonstrating that the rights recognised in the United Nations Declaration on the Rights of Indigenous Peoples and the National Agreement are being realised in practice. However, as demonstrated through this report, without consistent structural support and legislative backing, these gains remain fragile. Governments must match the leadership shown by communities by providing the frameworks, standards and resources needed to turn commitments into tangible results.

Our central recommendation is for **legislative reform**. We firmly believe that policy alone is insufficient, rights must be protected in law to ensure they are upheld and enforced. We propose amending the *Public Service Act 1999* to make the implementation of the National Agreement a statutory duty, creating binding government obligations. Embedding UNDRIP and anti-racism principles into public service standards would shift responsibility from Indigenous communities to the state and strengthen accountability. The pathway we have mapped towards justice, equality, and healing is clear: it begins with recognising, resourcing, and respecting Aboriginal and Torres Strait Islander leadership, and enshrining their rights in law.

We call for bold and decisive action.

We urge governments to implement all relevant recommendations outlined in this report. Only deliberate public sector reform, sustained funding, and binding accountability will deliver progress across the National Agreement and embed justice, equality and healing for Australia's First Peoples.

Acronyms

ACCO	Aboriginal Community Controlled Organisation
ACCHO	Aboriginal Community Controlled Health Organisation
AHNT	Aboriginal Housing Northern Territory
AIHW	Australian Institute of Health and Welfare
APS	Australian Public Service
APSC	Australian Public Service Commission
COAG	Council of Australian Governments
CTG	Close the Gap
GBK	Gur A Baradharaw Kod (Torres Strait Sea and Land Council)
IDG	Indigenous Data Governance
IDS	Indigenous Data Sovereignty
KCSS	Kimberley Communities Solar Saver
MGNM	Meriba Ged Ngalpun Mab
NAATSIHWP	National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners
NACCHO	National Aboriginal Community Controlled Health Organisation
NJP	Ngarra Jarranounith Place
PRAs	Priority Reform Areas
RAES	Remote Australia Employment Service
SEWB	Social and Emotional Wellbeing
UAE	United Arab Emirates
UAE CEPA	United Arab Emirates Comprehensive Economic Partnership Agreement
UNDRIP	United Nations Declaration on the Rights of Indigenous Peoples

Close the Gap Campaign Alliance Group Members

1. Aboriginal Health and Medical Research Council of New South Wales
2. Aboriginal Health Council of South Australia
3. ANTAR
4. Australasian College for Emergency Medicine
5. Australian College of Midwives
6. Australian College of Nursing
7. Australian College of Rural and Remote Medicine
8. Australian Council of Social Service
9. Australian Healthcare and Hospitals Association
10. Australian Human Rights Commission
11. Australian Indigenous Doctors' Association
12. Australian Indigenous Psychologists Association
13. Australian Medical Association
14. Australian Physiotherapy Association
15. Australian Student and Novice Nurse Association
16. Beyond Blue
17. Black Dog Institute
18. Cancer Council of Australia
19. Community Mental Health Australia
20. Congress of Aboriginal and Torres Strait Islander Nurses and Midwives
21. CRANAplus
22. Expert Adviser – Alcohol and other drugs, Professor Pat Dudgeon
23. Expert Adviser – Epidemiology and public health, Professor Ian Ring
24. First Peoples Disability Network
25. First Nations Eye Health Alliance
26. Gayaa Dhuwi (Proud Spirit) Australia
27. Healing Foundation
28. Heart Foundation Australia
29. Indigenous Allied Health Australia
30. Indigenous Dental Association of Australia
31. Indigenous Eye Health Unit, University of Melbourne
32. Kidney Health Australia
33. Lowitja Institute
34. National Aboriginal and Torres Strait Islander Ageing and Aged Care Council
35. National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners
36. National Aboriginal Community Controlled Health Organisation
37. National Association of Aboriginal and Torres Strait Islander Physiotherapists
38. National Family Violence Prevention Legal Services Forum
39. National Heart Foundation
40. National Rural Health Alliance
41. NSW Aboriginal Land Council
42. Oxfam Australia
43. Palliative Care Australia
44. Perinatal Wellbeing Centre
45. Public Health Association of Australia
46. Reconciliation Australia
47. Royal Australian College of General Practitioners
48. SBS, the home of National Indigenous Television
49. The Fred Hollows Foundation
50. The Pharmacy Guild of Australia
51. Thirrili - Suicide and Postvention Service
52. Tom Calma AO – Campaign founder and former Aboriginal and Torres Strait Islander Social Justice Commissioner – National Coordinator, Tackling Indigenous Smoking
53. Torres Strait Regional Authority
54. Victorian Aboriginal Community Controlled Health Organisation
55. Winnunga Nimmityjah Aboriginal Health and Community Service

Endnotes

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