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Indigenous Evaluation Strategy Productivity Commission Locked Bag 2, Collins St East Melbourne VIC 8003

IAHA submission in response to the Indigenous Evaluation Strategy issue paper Background

Indigenous Allied Health Australia (IAHA) is a national, not for profit, member based Aboriginal and Torres Strait Islander allied health organisation. IAHA work to improve access to quality, culturally safe and responsive healthcare and to influence systems and service delivery to Aboriginal and Torres Strait Islander people and communities.

Despite funding for Aboriginal and Torres Strait Islander programs (under the broad banner of Indigenous Affairs), and the profile given to addressing inequity through Closing the Gap and other programs, there remains significant inequities for Aboriginal and Torres Strait Islander people, families and communities. The 2017 Indigenous Expenditure Report states that total direct government expenditure on Aboriginal and Torres Strait Islander Australians was estimated to be \$33.4 billion in 2015-16.

IAHA shares concerns expressed at the time about how this level of expenditure was derived and reported, implying a greater quantum of government expenditure was being allocated for the benefit of Aboriginal and Torres Strait Islander people and was within Aboriginal and/or Torres Strait Islander control or influence. Nonetheless, substantial resourcing has been allocated for the purpose of improving the health and wellbeing of Indigenous Australians. Despite this and over a decade of stated, continuous government commitment, successive Closing the Gap reports have indicated that progress has been slow.

"The main area of change needs to be in how governments approach implementation of policies and delivery of services. Stronger accountability can be achieved through codesigned action plans that link targets to policy action, funding decisions, and regular evaluations." – Closing the Gap Report 2019

IAHA support the intent of the Indigenous Evaluation Strategy (the Strategy) with a focus on improving outcomes and supporting a rights-based approach. IAHA welcome the opportunity to provide a submission in response to the *Indigenous Evaluation Strategy issues paper* prepared by the Productivity Commission (the Commission).

The need to reframe reporting on Aboriginal and Torres Strait Islander program evaluation

In Closing the Gap and the discourse which prevails in key government reports, particularly the Indigenous Expenditure Report, presents a narrative of deficit and failure. Aboriginal and Torres Strait Islander people are often presented as the reason for a lack of success, despite the investments made. While a significant amount of funding has been directed toward Aboriginal and Torres Strait Islander policy and programs, the reporting and public accountability for where this funding is allocated, and how much reaches Aboriginal and Torres Strait Islander led programs, is often absent.

The lack of accurate context in reporting, including recognition for the conditions in which the current inequity has arisen, such as colonisation, racism, and a legacy of exclusionary and paternalistic policies further feeds this narrative. Further, the funding allocation on a per person basis fails to account for funding relative to need or expenditures that could be avoided were preventive measures (in health or other areas) available and applied more effectively.

Reporting on such government expenditure should recognise and promote it as a true investment in Australia and its people, as the deficit narrative which is currently advanced has significant impact on public support and, therefore, the action of our elected representatives. Investments in Aboriginal and Torres Strait Islander health, particularly improving access to allied health services, will provide significant return on investment and is essential to the long-term sustainability of our health budget. While not ignoring the challenges, this messaging needs to be given greater prominence and should form part of the evaluation approach.

Aboriginal and Torres Strait Islander leadership

We know that policies and programs which are truly Aboriginal and Torres Strait Islander led and holistic in nature will provide the greatest impact on improved outcomes. Yet despite this, as noted in the issues paper, four out of every five dollars invested in programs for Aboriginal and Torres Strait Islander peoples are allocated through non-Indigenous, mainstream services.

As a member of the Coalition of Aboriginal and Torres Strait Islander peak organisations, IAHA have welcomed the Partnership Agreement signed with governments to lead the next stage of Closing the Gap. IAHA hope that this signals a shift in how governments do business, with greater emphasis on working with Aboriginal and Torres Strait Islander people, communities and organisations and the direction of funding to locally identified needs and solutions.

The development of the Strategy is timely and provides an opportunity to evaluate and enhance this shift toward Aboriginal and Torres Strait Islander leadership and increased local autonomy in self-determination.

Mainstream Accountability

While Aboriginal and Torres Strait Islander led initiatives, programs and service delivery should always be prioritised, mainstream programs need to be accountable for their role in progressing toward equitable outcomes for Aboriginal and Torres Strait Islander people. Too often, dedicated funding provided for Aboriginal and Torres Strait Islander policies and programs is used to offset or obscure the ineffectiveness of mainstream funding and programs in meeting the needs of Aboriginal and Torres Strait Islander peoples.

Where mainstream organisations and agencies report Indigenous expenditure, it should specify how the expenditure attributed to Aboriginal and Torres Strait Islander people has been determined. Reporting should be accompanied by a statement on how the program and expenditure contributes to government priorities on Closing the Gap and its impact (or lack thereof). For instance, Governments have allocated approximately \$196 million allocated to Primary Health Networks (PHNs) for Aboriginal and Torres Strait Islander mental health and suicide prevention since 2015. Accountability for this funding is low, with it unclear how this money has been spent, the commissioning process and the outcomes achieved.

External monitoring and performance reporting of the funding provided directly to Aboriginal and Torres Strait Islander organisations should be given lower priority than that of mainstream services. These organisations have existing and direct accountability to Aboriginal and Torres Strait Islander peoples, families and communities as well as existing high levels of accountability and reporting to governments and funding agencies.

Support for an ongoing role for the Productivity Commission

IAHA note that the direction given to the Commission includes the statement that:

The Commission will also review the performance of agencies against the strategy over time, focussing on potential improvements and on lessons which may have broader application for all governments.

IAHA note the uniqueness of this direction and strongly support the development of an ongoing role for the Commission in the evaluation of policies and programs which impact on Aboriginal and Torres Strait Islander peoples. Strong accountability – including independent and robust review of whether programs are achieving their policy intent and contributing to increased equity of outcomes – is vital and will be increasingly important as we enter the next phase of Closing the Gap.

Focus Areas for the Strategy

- Support to look at it from Aboriginal and Torres Strait Islander perspectives of success and value for Aboriginal and Torres Strait Islander ways of knowing, being and doing. A principles-based framework a viable approach. IAHA would argue that the Lowitja Institute's Evaluation Framework to Improve Aboriginal and Torres Strait Islander Health should form the basis of such a framework in the Australian context, although this must be broadened to apply across non-health sectors and linked to ethical frameworks. This should also include the use of qualitative data and narrative when evaluating impact.
- It should be acknowledged that governments and policy makers will be required to think and act differently under a principles-based framework which successfully incorporates Aboriginal and Torres Strait Islander worldviews.
- The Strategy should consider data governance and Aboriginal and Torres Strait Islander data sovereignty in the context of some emerging opportunities and challenges, such as big data, data linkage and genomics. IAHA noted with interest some of the international examples mentioned in the issues paper, including the whole of government reporting requirements and local evaluation centres. A combination of these two models may be one approach to high level and cross sectoral reporting, framed and informed by Aboriginal and Torres Strait Islander local centres.
- Governments and commissioning agencies should be required to publicly disseminate evaluation findings, including poor performance, wherever practicable. This is essential for accountability and transparency, including in the use of public resources, as well as to ensure we can learn from what did not work. Too often, even where evaluations are undertaken, we fail to fully implement the recommendations or act on areas for potential improvement in service delivery. Increasing the cross-portfolio, system-wide and independent evaluation capacity of government may go some way toward improving this, with greater confidence in the handling of this information.
- It is important that direct, outcome focussed benefits achieved through evaluation processes exceeds the additional burden which may be placed on service providers, particularly in the community-controlled sector. IAHA would agree that more rigorous evaluation methods should be prioritised in projects and initiatives with higher levels of resourcing and will not be appropriate in every instance, although it is important that evaluation and quality improvement becomes more strongly embedded in everything we do.
- Administration needs to balance oversight with flexibility. The nature of the issues being addressed require stability and long-term planning, supported by flexible administration including a greater willingness for long term contracts where early evidence and evaluation can demonstrate impact.

Conclusion

IAHA commend the Commission for their work in drafting the *Indigenous Evaluation Strategy issues paper*. Stronger evaluation of the policies and programs impacting upon Aboriginal and Torres Strait Islander people, families and communities will support evidence and guide efforts to address the inexcusable inequities that exist in Australia.

It is essential that the development of an 'evaluation culture' is one of several meaningful reforms in how governments and agencies work and translate their objectives and responsibilities toward funding which supports outcomes focussed, Aboriginal and Torres Strait Islander led solutions.

IAHA would welcome the opportunity to engage in the future development of the Indigenous Evaluation Strategy. It is important that Aboriginal and Torres Strait Islander peoples and key organisations, particularly the Lowitja Institute, are engaged throughout the lifecycle of the strategy.