3 Understanding the outcomes and how they can be improved

This chapter draws together some of the common themes across the Report that place the outcomes in context, and also identifies the common themes for approaches that may assist to improve these outcomes.

Section 3.1 discusses the key contextual factors important to understanding the outcomes for Aboriginal and Torres Strait Islander people, especially when compared to those for non-Indigenous people. Section 3.2 identifies the common characteristics of approaches that research indicates appear to be successful in improving outcomes for Aboriginal and Torres Strait Islander people.

3.1 Understanding outcomes for Aboriginal and Torres Strait Islander people

Three common themes identified across this Report place the outcomes reported in context. Firstly, Aboriginal and Torres Strait Islander people and communities have strengths and capacities that comes from their cultures. Secondly, the outcomes measured in this Report do not always fully capture the elements of wellbeing that are important for Aboriginal and Torres Strait Islander people. Thirdly, in many areas outcomes are improving for Aboriginal and Torres Strait Islander people, but when outcomes have not improved they need to be understood with reference to the personal challenges and systemic and structural barriers that some Aboriginal and Torres Strait Islander people have experienced and continue to experience.

Aboriginal and Torres Strait Islander people and communities have significant strengths and capacities that comes from their cultures

Before colonisation, Aboriginal and Torres Strait Islander people thrived and their cultures were strong and well developed. These cultures included complex kinship structures, defined roles relating to laws, education, languages, ceremonies and traditions, and extensive knowledge of the environment (see chapter 1 *About this report*).

These cultures have proven to be resilient. Despite the many impacts of colonisation, the way Aboriginal and Torres Strait Islander people have been dispossessed of lands,

languages, families and income (see chapter 1 *About this report*), Aboriginal and Torres Strait Islander people and their cultures remain strong.

Connection to culture is a key element of many Aboriginal and Torres Strait Islander people's identities. As such, cultures are a key source of strength and a foundation on which the wellbeing of Aboriginal and Torres Strait Islander people can continue to be built.

While Aboriginal and Torres Strait Islander cultures are diverse, each with their own distinct norms, lore, languages and identity, some of the strengths they each provide include:

- child-rearing practices that encourage independence, and that build children's capacities to self-judge and take risks from an early age (section 4.3 *Early childhood education*)

- strong connections with family and kin, and cultural and spiritual practices that support resilience (sections 11.5 *Community functioning* and 4.12 *Family and community violence*)

- a strong belief that it is the responsibility of family to provide care and support (sections 4.9 *Disability and chronic disease* and 6.3 *Teenage birth rate*)

- respect for the leadership of Elders, their role in decision-making and the value of spending time with them (sections 5.2 *Participation in decision-making* and 11.5 *Community functioning*)

- an acceptance of differences and diversity, which helps build a sense of belonging and community (sections 4.9 *Disability and chronic disease* and 11.5 *Community functioning*)

- connection with, and caring for, Country, which is considered as caring for oneself and one's community and is also associated with the management of land (sections 4.1 *Life expectancy,* 11.5 *Community functioning* and 5.8 *Access to traditional lands and waters*).

Language is closely linked to culture, and revitalising Aboriginal and Torres Strait Islander languages can help to strengthen cultures (section 5.5 *Indigenous language revitalisation and maintenance*). Furthermore, when Aboriginal and Torres Strait Islander people are separated from their community, such as if they are in prison, it is important that their connection is sustained (sections 4.*13 Imprisonment and youth detention* and 11.4 *Repeat offending*).

The outcomes measured do not always fully capture the elements of wellbeing that matter

Not everything that matters is captured in indicators. Indicators are by nature an 'indication' of wellbeing or an outcome, but cannot always provide the full picture. Consequently, the wellbeing of Aboriginal and Torres Strait Islander people may be overstated or understated in this Report.

Outcomes measured may not fully capture wellbeing, as:

- the indicator concepts are suited to measuring outcomes for the general population, but do not always readily translate to the cultures or experiences of Aboriginal and Torres Strait Islander people

- some of the things that matter to Aboriginal and Torres Strait Islander people do not fit into the current framework, or the relevant indicators (and data sets) have not yet been developed.

Some of the concepts measured in this Report may apply well to some Aboriginal and Torres Strait Islander people, but do not necessarily capture the wellbeing of all. These include measures of:

- personal and household income, where higher income is a proxy for improved overall wellbeing (section 4.10 *Household and individual income*). For the general population higher income is correlated with improved wellbeing, but the relationship is not as straightforward for Aboriginal and Torres Strait Islander people. For example, higher income at the expense of the degradation of Country or not undertaking cultural obligations may decrease wellbeing

- overcrowding in housing, where overcrowding is measured by the Canadian National Occupancy Standard which is sensitive to household size and composition (section 10.1 *Overcrowding in housing*). This may not necessarily translate well for Aboriginal and Torres Strait Islander communities who, may choose to have larger household sizes and are motivated by a strong connection to family and, for many, a culture of sharing accommodation

- life expectancy as a measure of population health. Aboriginal and Torres Strait Islander people have a more holistic view of health beyond the individual (section 4.1 *Life expectancy*) — in which to be healthy is to be well physically, spiritually and emotionally, and to be connected with family, community, culture, language, and Country

- disability prevalence, where living with disability is understood as a person having an impairment that limits everyday activities or restricts their participation in school or work, without assistance — however, for many Aboriginal and Torres Strait Islander people it is not the limitations in function that result in disability, but the associated barriers to equal participation in the social and physical environment.

Some of the things that matter do not fit into the framework in this Report, or relevant indicators (and data sets) are yet to be developed. Some issues of significant concern for Aboriginal and Torres Strait Islander people that are not reported in the framework include:

- the cultural competence of service providers (including but not limited to police, corrective services, child protection services, health services, early childhood education services, schools and higher education institutions)

- what proportion of services are provided through Aboriginal Community Controlled Organisations (ACCOs), and what the outcomes are from these providers both overall and compared to non-ACCOs.

While there are some limitations on what is measured, outcomes in a number of areas have improved for Aboriginal and Torres Strait Islander people over time...

In a number of areas covered in this Report, outcomes for Aboriginal and Torres Strait Islander people have improved over time.

- More expectant mothers are attending antenatal visits in the first trimester (section 6.1 *Antenatal care)*, and rates of smoking and alcohol use during pregnancy have declined (section 6.2 *Health behaviours during pregnancy*).

- The teenage birth rate is at its lowest level since reporting began (section 6.3 *Teenage birth rate*).

- Young child mortality rates, and in particular, infant mortality rates, have fallen (section 4.2 Young child mortality) and the proportion of babies born with a low birthweight (which is a key indicator of future development) has decreased (section 6.4 *Birthweight*).

- The proportion of young children who are developmentally 'on track' has increased over time, with the majority now entering preschool developmentally on track (section 6.8 *Basic skills for life and learning*). The proportion of children with long-term hearing problems has also decreased (section 6.7 *Ear health*).

- More children are participating in early childhood education in the year before school (section 4.3 *Early childhood education*).

- More young people have reported attaining Year 12 or equivalent or above (section 4.6 *Year 12 attainment*), and the proportion of adults reporting that they have or are working towards a post-secondary qualifications has nearly doubled in the past two decades (section 4.8 *Post-secondary education — participation and attainment).*

- The median equivalised gross weekly household income has improved over time (section 4.10 *Household and individual income*).

- Adult tobacco consumption has decreased significantly over the past 20 years (section 8.4 *Tobacco consumption and harm*), and potentially avoidable deaths rates have fallen (section 8.3 *Potentially avoidable deaths*). These reductions in avoidable deaths rates have contributed to around half the overall reduction in overall mortality rates (section 4.1 *Life expectancy*).

- Life expectancy, particularly for males, has improved over time (section 4.1 *Life expectancy*).

…and where outcomes for Aboriginal and Torres Strait Islander people have not improved, or they remain poorer than for non-Indigenous people, they need to be understood in context

Where outcomes have not improved for Aboriginal and Torres Strait Islander people, or they remain poorer than for non-Indigenous people, they need to be understood in context if change is to occur. Poorer outcomes are not due to people *being* Aboriginal and/or Torres Strait Islander, rather, they are attributable to the additional personal challenges and structural barriers faced by many Aboriginal and Torres Strait Islander people compared with non-Indigenous people.

- Aboriginal and Torres Strait Islander people are more likely to have the personal risk factors associated with poorer outcomes, and are more likely to have multiple risk factors. These risk factors have been transmitted across generations through the trauma caused by colonisation, and subsequent government policies, under which Aboriginal and Torres Strait Islander people lost much, including their lands and waters and the freedom to practice their cultures and speak their languages (see chapter 1 *About this report*). The risk factors include insecure housing, poor physical or mental health, socioeconomic disadvantage, and underlie a range of poorer outcomes including higher rates of alcohol consumption, substance misuse, family violence, and offending behaviour leading to imprisonment and repeat offending (see sections 4.12 *Family and community violence,* 4.13 *Imprisonment and youth detention,* 6.2 *Health behaviours during pregnancy,* 8.4 *Tobacco consumption and harm,* 8.7 *Mental health,* 11.1 *Alcohol consumption and harm,* 11.2 *Drug and other substance use and harm* and 11.4 *Repeat offending*). In turn, these poorer outcomes then become risk factors for insecure housing, poor physical or mental health and socioeconomic disadvantage.

- Aboriginal and Torres Strait Islander people are often disproportionately affected by structural barriers due to their particular circumstances or the disadvantage they experience. This occurs when policies, laws and practices that appear neutral, operate in an uneven or unfair manner that is detrimental to Aboriginal and Torres Strait Islander people, for example in the areas of:

  – criminal justice: laws that declare people with cognitive impairments unfit to plead, and bail laws that favour those with secure accommodation, have a greater impact on Aboriginal and Torres Strait Islander people's rates of imprisonment because they are more likely to experience these barriers (sections 4.13 *Imprisonment and youth detention* and 11.3 *Youth diversions*)

  – child protection: factors related to cultural competency in decision-making processes compounded by difficulties in getting the support needed to navigate the system, may mean that Aboriginal and Torres Strait Islander children are more vulnerable to entering the child protection system irrespective of the underlying prevalence of abuse and neglect (section 4.11 *Substantiated child abuse and neglect*)

  – income support: income management arrangements that affect the way income support payments are delivered and/or how the money can be spent

disproportionately affect Aboriginal and Torres Strait Islander people because of the geographical locations and trial sites selected (section 9.4 *Income support*).

- Many Aboriginal and Torres Strait Islander people also experience discrimination and racism. This can affect their outcomes by diminishing their physical and mental wellbeing (sections 6.2 *Health behaviours during pregnancy* and 8.7 *Mental health*). It can also mean that they avoid accessing services they need (section 5.3 *Engagement of services*) or they are discriminated against when seeking opportunities to improve their wellbeing. For example, racism can negatively affect Aboriginal and Torres Strait Islander people in their education, or in gaining and maintaining employment, or in accessing finance to purchase a home (sections 4.7 *Employment,* 4.8 *Post-secondary education — participation and attainment* and 9.3 *Home ownership*).

3.2 Improving outcomes for Aboriginal and Torres Strait Islander people

In previous editions of this Report, some key success factors for improving outcomes for Aboriginal and Torres Strait Islander people were identified. In this edition, further research has built on this work and identified further common factors across areas to improve wellbeing. These factors are interrelated, and it is the combination of these factors that will contribute to improved outcomes rather than any one factor alone. Box 3.1 provides a consolidated list of these factors.

Box 3.1 **Key factors for improving outcomes for Aboriginal and Torres Strait Islander people**

- Addressing racism and discrimination in the Australian community through structural changes by building knowledge and understanding through education.
- Enabling Aboriginal and Torres Strait Islander people to share in decision-making on things that affect them.
- Addressing laws, policies, and practices that operate to the detriment of Aboriginal and Torres Strait Islander people.
- Ongoing government investment, collaboration and coordination.
- Ensuring access to effective, culturally safe services that are available at the right time and suited to the local context.

Improving outcomes for Aboriginal and Torres Strait Islander people requires… addressing racism and discrimination in the Australian community through structural change, and building knowledge through education…

Aboriginal and Torres Strait Islander people continue to experience racism and discrimination that can have a significant effect on their health and wellbeing, and can also limit opportunities (such as in employment and education) to improve their wellbeing. Under the National Agreement on Closing the Gap, Australian governments have committed to identifying and eliminating racism as part of transforming mainstream government organisations (part of Priority Reform Three).

Racism and discrimination are driven by values and beliefs. Research indicates that values and beliefs can change through knowledge and education.

- Increasing knowledge of the shared history of Australia could promote understanding of the effects that colonisation and government policies have had, and continue to have, on Aboriginal and Torres Strait Islander people, and change the values and beliefs across the community that lead to racism. The Uluru Statement from the Heart proposed the establishment of a Makarrata Commission to supervise truth-telling about this shared history (section 5.1 *Valuing Aboriginal and Torres Strait Islander people and their cultures*).

- Education in schools on the cultures of Aboriginal and Torres Strait Islander people can promote a greater understanding of, and build respect for, Aboriginal and Torres Strait Islander people (section 5.6 *Indigenous cultural studies*).

- Education to build cultural capability in service delivery areas that significantly affect Aboriginal and Torres Strait Islander people's outcomes, including education, health, police and child protection to ensure these services are culturally safe (see sections 7.1 *Teacher quality*, 8.1 *Access to primary health care*, 8.2 *Potentially preventable hospitalisations*, 8.6 *Oral health,* 11.3 *Youth diversions* and 4.13 *Imprisonment and youth detention*).

Other structural changes to support changes to values and beliefs are also required. These include policies that may discriminate positively towards Aboriginal and Torres Strait Islander people to help address any existing biases, for example:

- to increase Aboriginal and Torres Strait Islander people's employment and retention, this might include implementing policies that encourage non-standard recruitment methods, or offers of additional support mechanisms to improve employee retention, including ongoing mentoring and support and flexible work arrangements (section 4.7 *Employment*)

- to reduce Aboriginal and Torres Strait Islander children's overrepresentation in child protection services, providing Aboriginal and Torres Strait Islander families with children who are in, or at risk of entering, the child protection system with the support they need to:

– interact and navigate the system (including accessible and culturally appropriate legal advice)

– access long-term stable housing in a timely manner for women and children who have experienced domestic violence (section 4.11 *Substantiated child abuse and neglect*).

…enabling Aboriginal and Torres Strait Islander people to share in decision-making on things that affect them…

Improving outcomes for Aboriginal and Torres Strait Islander people requires enabling Aboriginal and Torres Strait Islander people to share in making decisions on things that affect them. Aboriginal and Torres Strait Islander community involvement in policy, program and service design, and decision-making — a 'bottom-up' rather than 'top-down' approach — is important to 'drive real change on the ground', and close the gap in life outcomes between Aboriginal and Torres Strait Islander people and non-Indigenous people (section 5.4 *Case studies in governance*).

> When [Indigenous people] make their own decisions about what development approaches to take, they consistently out-perform [non-Indigenous] decision makers. (Harvard Project nd)

Shared decision-making needs to occur at all levels and for all types of decisions relating to Aboriginal and Torres Strait Islander people. Levels of decision-making include national, state and territory, local and service level, and the types of decisions are varied. Examples in this Report range from national policies as part of the Closing the Gap agenda (section 5.4 *Case studies in governance*), to planning for appropriate community housing or the effects of sealing roads in a geographical region (sections 9.2 *Indigenous owned or controlled land and business* and 10.1 *Overcrowding in housing*), to the design of programs and services to meet the needs of Aboriginal and Torres Strait Islander people in different service areas (sections 4.1 *Life expectancy*, 6.1 *Antenatal care*, 8.4 *Tobacco consumption and harm*, 10.1 *Overcrowding in housing*).

Key features to support shared decision-making include:

• providing Aboriginal and Torres Strait Islander people with decision-making authority

• making adjustments for power inequalities and sharing power

• ensuring that Aboriginal and Torres Strait Islander people can choose their representatives, and that these representatives are provided with the resources they need to negotiate on an equal footing (section 5.4 *Case studies in governance*).

…addressing laws, policies, and practices that operate to the detriment of Aboriginal and Torres Strait Islander people…

Improving outcomes for Aboriginal and Torres Strait Islander people requires addressing laws, policies, and practices that operate to their detriment due to their particular circumstances or the disadvantage they are experiencing. For example, income management

arrangements affecting the way that income support payments are delivered and how the money can be spent, disproportionately affect Aboriginal and Torres Strait Islander people due to the selection of the geographical locations and trial sites (section 9.4 *Income support*).

To ensure that laws, policies, and practices are designed, implemented and reviewed with Aboriginal and Torres Strait Islander people's wellbeing in mind, a range of mechanisms are needed. Examples in this Report include:

- increasing Aboriginal and Torres Strait Islander people's representation in parliament (section 5.2 *Participation in decision-making*)

- appointing Aboriginal and Torres Strait Islander advisory bodies to government, to provide advice on the impact of community-wide decisions on Aboriginal and Torres Strait Islander people (section 5.2 *Participation in decision-making*)

- developing whole-of-government evaluation strategies that require departments and agencies within jurisdictions to thoroughly evaluate the impact of government policies and programs on Aboriginal and Torres Strait Islander people (section 5.4 *Case studies in governance*).

…ongoing government investment, collaboration and coordination…

Improving outcomes for Aboriginal and Torres Strait Islander people requires ongoing government investment. Funding simplicity and lack of duplication in funding streams is also important and this requires collaboration and coordination within and across governments (section 5.4 *Case studies in governance*). Many Aboriginal and Torres Strait Islander organisations, with long track records, are funded through multiple, short-term government contracts that increase red tape and uncertainty and place pressure on capacity, stability and sustainability (section 5.4 *Case studies in governance*).

Improving outcomes for Aboriginal and Torres Strait Islander people also requires improved collaboration and coordination. For example, effective strategies to address common risk factors and barriers to improve outcomes requires collaboration between governments (including across government agencies), Aboriginal Community Controlled Organisations, service providers, communities and families (section 10.2 *Rates of disease associated with poor environmental health*).

…and ensuring access to effective culturally safe services, available at the right time and suited to the local context

Improving outcomes for Aboriginal and Torres Strait Islander people requires ensuring access to effective, culturally safe services, available at the right time and suited to the local context. Services that Aboriginal and Torres Strait Islander people are more likely to access, and that work best for them are those that meet their particular health, education or support

needs in an environment and manner that is culturally safe (sections 4.3 *Early childhood education,* 6.1 *Antenatal care* and 8.6 *Oral health*).

Key approaches to improving the cultural safety of services include:

- increasing the availability of services provided by ACCOs, and/or giving ACCOs control over aspects of service provision (sections 4.11 *Substantiated child abuse and neglect* and 8.1 *Access to primary health care*)

- improving the cultural capability of other service providers, by employing more local Aboriginal and Torres Strait Islander staff, or building the capacity of non-Indigenous staff to provide services in a culturally safe manner (sections 4.11 *Substantiated child abuse and neglect*, 4.13 *Imprisonment and youth detention,* 6.2 *Health behaviours during pregnancy*, 7.1 *Teacher quality* and 8.1 *Access to primary health care*).

Services need to be available at the right time. Services that can address risk factors and prevent problems developing are key; for example, addressing the issue of insecure housing, providing family support services and increasing family income may prevent problems such as family violence, child abuse and neglect and youth detention (sections 8.2 *Potentially preventable hospitalisations*, 8.3 *Potentially avoidable deaths*, 4.11 *Substantiated child abuse and neglect,* 4.12 *Family and community violence* and 4.13 *Imprisonment and youth detention*).

Services also need to be suited to the local context. While important for all Aboriginal and Torres Strait Islander people and communities, it is particularly important in remote or very remote areas, where poorer outcomes are often reported than in less remote areas. In these areas, effective services need to take account of the local context and utilise local solutions (sections 8.4 *Tobacco consumption and harm*, 8.5 *Obesity and nutrition*, 8.6 *Oral health,* 10.1 *Overcrowding in housing* and 10.3 *Access to clean water and functional sewerage and electricity services*).