

Mr Romlie Mokak
Commissioner
Productivity Commission
Level 12, 530 Collins Street
Melbourne VIC 3000

28 August 2019

Dear Mr Mokak

Thank you for the opportunity to make a brief submission to the Productivity Commission's inquiry into an Indigenous Evaluation Strategy.

We applaud the Commission's focus on the *United Nations Declaration on the Rights of Indigenous Peoples*, and its centrality to the Indigenous Evaluation Strategy.

We support the issues paper's notion that 'the need to increase Aboriginal and Torres Strait Islander input into policy processes' is a core objective.¹

In terms of the principles-based framework, we argue that the needs of Aboriginal and Torres Strait Islander people should be central.

The main purpose of our submission is to argue that policies and programs that affect Aboriginal and Torres Strait Islander people should be evaluated using an Aboriginal and Torres Strait Islander lens.

We have conducted evaluations of Aboriginal and Torres Strait Islander programs run by government or mainstream services as well as by Aboriginal and Torres Strait Islander community-controlled services.

Non-Indigenous approaches to evaluation can not be expected to identify all the issues that are important to Aboriginal and Torres Strait Islander people, and can not be expected to evaluate them in terms that are relevant to Aboriginal and Torres Strait Islander people.

We'd like to discuss one such approach.

¹ Issues paper, p2

One of us (MW) has developed an Aboriginal and Torres Strait Islander evaluation framework called Ngaa-bi-nya, which means to examine, try, and evaluate in the language of the Wiradjuri peoples of central New South Wales.² Ngaa-bi-nya is flexible yet specific to the lives of Aboriginal and Torres Strait Islander peoples. It provides prompts to stimulate data collection and analysis of factors relevant to Aboriginal and Torres Strait Islander peoples' knowledge, values, ethics, and ways of caregiving that influence health and social support program success.

Ngaa-bi-nya ensures the right types of data are included in evaluation to meet Aboriginal and Torres Strait Islander peoples' needs.

Much of the material below is from **Williams, M.** (2018). Ngaa-bi-nya evaluation framework. *Evaluation Journal of Australasia*, 18(1), 6-20.

Principles underpinning Ngaa-bi-nya

Ngaa-bi-nya is informed by principles for ethical conduct in Aboriginal and Torres Strait Islander research, including spirit and integrity, cultural continuity, equity, reciprocity, respect and responsibility.³ Ngaa-bi-nya aligns with:

- Aboriginal and Torres Strait Islander people's view of health, which refers not just to an individual, but to "the social, emotional and cultural wellbeing of the whole community"⁴
- priorities of the National Aboriginal and Torres Strait Islander Health Plan⁵
- the United Nations Declaration on the Rights of Indigenous Peoples, which asserts the right to self-determination, to strengthen cultural, social, and political life, free from threats of assimilation, and in accordance with diverse local needs and traditions.⁶

² Grant, S., & Rudder, J. (2010). A new Wiradjuri dictionary. Canberra; Australia, ACT: Restoration House.

³ Australian Institute for Aboriginal and Torres Strait Islander Studies (AIATSIS), 2012. Guidelines for ethical research in Australian Indigenous studies. Canberra; Australia, ACT; National Health and Medical Research Council (2018). Ethical conduct in research with Aboriginal and Torres Strait Islander Peoples and communities: Guidelines for researchers and stakeholders.

⁴ National Aboriginal Health Strategy Working Party. (1989). A national Aboriginal health strategy. Canberra; Australia, ACT: Australian Government Publishing Service.

⁵ Australian Department of Health and Ageing. (2013). National Aboriginal and Torres Strait Islander health plan 2013–2023. Canberra; Australia, ACT.

⁶ United Nations. (2007). Declaration on the Rights of Indigenous Peoples. Retrieved from http://www.un.org/esa/socdev/unpfii/documents/DRIPS_en.pdf

Ngaa-bi-nya prompts the user to address social determinants of health, “the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life”,⁷ including economic policies and systems, colonialism, development agendas, social norms, social policies, and political systems.

Ngaa-bi-nya acknowledges that the past affects the present, and that the present affects the future, and that the future cannot be shaped without a consideration of and reckoning with the past. It thereby acknowledges the need for an intergenerational perspective to program delivery, caregiving, and healing.⁸

Further:

Ngaa-bi-nya privileges Aboriginal and Torres Strait Islander people’s priorities, perspectives and voices, given that programs are most successful when Aboriginal and Torres Strait Islander community members have power over governance, design, and delivery.⁹

This includes building capacity of community members to do so, aligned with cultural practices and values,¹⁰ and extends to conducting evaluation, and translating findings from evaluation.

Elements of Ngaa-bi-nya

The Ngaa-bi-nya framework prompts consideration of four domains of program delivery:

1. landscape factors
2. resources
3. ways of working
4. learnings.

⁷ World Health Organisation. (2015). Social determinants of health (Briefing paper). p1. Retrieved from <http://www.who.int/evidence/forum/EVIPNetSDHweekInterview.pdf>

⁸ Williams, 2018, p9

⁹ Williams, 2018, p9

¹⁰ For example Whiteside, M., Klieve, H., Millgate, N., Webb, B., Gabriel, Z., McPherson, L., & Tsey, K. (2016). Connecting and strengthening young Aboriginal men: A family wellbeing pilot study. *Australian Social Work*, 69, 241–252.

Ngaa-bi-nya’s prompts in these domains are to stimulate discussion, data collection, and analysis.

Using Ngaa-bi-nya

The landscape domain

As stated in Williams, 2018:

The landscape domain of Ngaa-bi-nya represents the broadest context a program is located in and influenced by. It is akin to a ‘system’ level and the external influences identified in an ecological model of health (Bronfenbrenner, 1979), and signifies the whole-of-life perspective of the Aboriginal definition of health. Landscape factors influence the foundations and capacity of programs to deliver care, and therefore underpin other domains of Ngaa-bi-nya. Prompts to understand the landscape are outlined below; to understand landscape factors, data should be gathered and discussed about as many of the following items as possible.¹¹

The following tables are prompts from Ngaa-bi-nya.¹²

History

Consider ...
The history of the local area, and experiences of the traditional owners.
The history of program establishment.
Extent to which the program acknowledges the act and nature of colonisation, dispossession and disempowerment experienced by many Aboriginal and Torres Strait Islander people, such as child removal, racism, exclusion, poverty, trauma and poor health occurring across generations.

¹¹ Williams, 2018, p11.

¹² Williams 2018, pp11-17.

Environment

Consider ...
Local Aboriginal and Torres Strait Islander population characteristics, including proportion, recent changes and comparisons to local, state and national proportions.
The location's socioeconomic position, housing affordability, education and employment rates.
Differences and similarities between the lives of Aboriginal and Torres Strait Islander peoples compared to others in the local area.
Proximity to and accessibility of major health and social support services, and barriers and enablers of this accessibility.

Programs and services

Consider ...
Other programs that influence the program, its resources, services and accessibility.
Service-level collaborations and shared-care arrangements with other programs and services.
The extent to which roles, responsibilities and expectations across related organisations and sectors are articulated and realised.
The extent to which coordinated mechanisms for sharing information, resources and responsibilities occur with other related programs and services.
Investment in relevant infrastructure to meet need and serve future generations, such as building and using new technologies, service delivery guidelines, and workforce development and supervision strategies.

Self-determination

Consider ...
The extent to which local Aboriginal and Torres Strait Islander people have been engaged in identifying needs and setting priorities.
The role of Aboriginal and Torres Strait Islander people in program design, delivery and governance.
The role and influence of Aboriginal and Torres Strait Islander people in research, monitoring and evaluation related to the program.
The extent to which Aboriginal and Torres Strait Islander people's ways of relating, caregiving and doing business are embedded throughout.

Policy

Consider ...
The alignment between legislation and policies in relation to the issues addressed by the program, and any shifts in that alignment.
The role Aboriginal and Torres Strait Islander people have in policy development and reviews that impact on the program.
The extent of intergovernmental and intersectoral collaboration to support the program.
The impact of quality assurance and accreditation processes on the program.

Sources of data required to understand landscape factors of Aboriginal and Torres Strait Islander programs requiring evaluation are:

- population- and service-level data
- books and media about the location
- research publications
- service delivery reports
- program websites
- interviews with program participants, staff, informal supports, key stakeholders and community members.

Resources

Usually, physical and financial resources only are counted in program evaluations, which mean a wide range of other resources are often overlooked. The resources domain of the Ngaa-bi-nya framework seeks to identify the human, material, non-material and in-kind resources, and informal economies and relationships that often support Aboriginal and Torres Strait Islander programs.

Financial resources

Consider the adequacy of financial resources to ...
Meet the demand for services and support, and the needs of the local Aboriginal and Torres Strait Islander people.
Support Aboriginal and Torres Strait Islander workforce development.
Support program monitoring and evaluation and participation in research.

Consider the adequacy of financial resources to ...
Support transfer of knowledge and policy advocacy.

Human resources

Consider ...
How program development processes draw on local Aboriginal and Torres Strait Islander people's knowledges and resources.
The mix of skills, experience and roles among program staff, support staff and volunteers.
Networks that support the program, and how they are used.
The in-kind contributions, volunteer community participation and informal supports drawn into the program, and their roles and outputs.
The types of culturally-relevant training and supervision that program staff, board members and other significant support people undertake, and provide to others.

Material resources

Consider ...
The use of data and other evidence to inform program design and development.
The extent to which equipment and information technology are sufficient to meet program needs, with growth needs identified.
The extent to which the physical location is suitable to meet program needs and future growth.
Plans, theories, stakeholders, mapping, investments and relevant community and political contributions that have been made for the program and its sustainability.

Possible sources of data about resources include service agreements, strategic plans, service delivery record-keeping, budgets, income and expenditure statements, service and staff reports, relationship mapping, media, and interviews with program participants, staff, informal supports, key stakeholders and community members.

Ways of working

In this domain the focus is on the delivery of programs and understanding the types of activities, relationships, frameworks, principles and accountability mechanisms that support program delivery. Prompts reflect culturally safe, holistic processes through which Aboriginal and Torres Strait Islander people work to support others. Particularly drawn on here are work of Bulman and Hayes¹³, Haswell, Blignault, Fitzpatrick and Jackson Pulver¹⁴ and Williams.¹⁵

Holistic caregiving principles

Consider the extent to which ...
Caregiving is holistic, addressing multiple social, emotional, mental, environmental, spiritual and physical elements of wellbeing.
Caregiving is provided beyond the individual person to families and across generations.
The program is sensitive to the impacts of trauma, developing opportunities for individual and collective healing.
The program addresses social determinants of health and wellbeing.
Intergovernmental and interdisciplinary partnerships support the program.
Actions are taken at workforce, community, services and systems levels.

Quality caregiving in practice

Consider how program staff and other care providers ...
Negotiate individual and group safety, shared agreements and boundaries with program participants, including reflecting on and enhancing these.
Are positive role models making progress in their own healthcare, relationships and wellbeing.
Develop trusting relationships with program participants through which to influence change.
Are non-judgmental, ethical, responsive and solution-focused.

¹³ Bulman, J., & Hayes, R. (2011). Mibbinbah and spirit healing: Fostering safe, friendly spaces for Indigenous males in Australia. *International Journal of Men's Health*, 10(1), 6–25.

¹⁴ Haswell, M., Blignault, I., Fitzpatrick, S., & Jackson Pulver, L. (2013). *The social and emotional wellbeing of Indigenous youth: Reviewing and extending the evidence and examining its implications for policy and practice*. Sydney, NSW, Australia: Muru Marri, UNSW.

¹⁵ Williams, M. (2015). *Connective services: Post-prison release support in an urban Aboriginal population (Doctoral dissertation)*. Sydney: UNSW Sydney, Australia.

Consider how program staff and other care providers ...
Promote and achieve participant engagement in programs.
Celebrate achievements, remembering days of significance, anniversaries and turning points.
Facilitate connection to Aboriginal and Torres Strait Islander culture and identity, through strengthening individual, group and community connections.
Provide coordinated case management and wrap-around care, supported by partnerships, shared-care arrangements and referral pathways with other services and supports.
Build capacity among participants through leadership, role-modelling, mentoring and planning, including for knowledge and skills development, autonomy and empowerment.
Create opportunities for program participants' family and loved ones to feel comfortable, access support, and strengthen their capacity to provide support.
Provide timely continuity of care and follow-up.

Staff support and development

Consider ...
Mechanisms for recognising and celebrating achievements by staff, volunteers and governance committees.
The extent to which staff influence the development of the program, aligned with their experience and issues they witness in the community.
Whether the aim of the program is meaningful to and motivates staff, including through periods of change and difficulty.
The extent to which staff feel safe and supported to discuss challenges and make improvements.
Peer support opportunities among staff, to share strategies and solutions, address challenges and grow together.
The access that program staff, volunteers and other support people have to education, training and skills development, and career pathways.

Sustainability

Consider ...
The extent to which Aboriginal and Torres Strait Islander people experienced in relevant program delivery are involved.

Consider ...
The extent to which the program is self-determined by the Aboriginal and Torres Strait Islander community, and community controlled.
How timeframes and expectations of the program align.
The extent to which local community needs, resources available, actions taken and broader policies align.
How change is managed at program and workforce levels, especially so that they are respectful of cultural protocols, history and inputs over time, community needs and likely characteristics of future generations.
The extent to which collaboration with other services and supports occurs, with agreements and reviews to support these.
The engagement of program staff, volunteers and other supports in translating learnings about program successes to other contexts, including through presentations, networking, advisory roles, policy submissions and media.

Evaluation

Consider ...
The extent to which accountability, monitoring and evaluation processes are embedded in the program, and resourced.
The extent to which culturally-relevant data collection tools are used, and the involvement of Aboriginal and Torres Strait Islander people in leading evaluation design, data collection, analysis and reporting, and other knowledge exchange actions.
The impact of conducting evaluation and other quality assurance processes on the program.

Sources of data to best understand ways of working include service agreements, strategic plans, service delivery and staff reports, media, program webpages, presentations, networking, and individual and group interviews with program participants, staff, informal supports, key stakeholders and community members.

Learnings

The learnings domain of Ngaa-bi-nya prompts users to reflect on insights gained and what the range of stakeholders and participants have learned, in addition to assessing the extent to which program objectives were met. This domain is to

understand progress made, including in empowerment, attitude shifts, relationship strengthening and self-determination of Aboriginal and Torres Strait Islander peoples. Learnings relate to movement – of ideas, of actions, of purpose, of ways of being, of ways of relating. These are important Wiradjuri values, and are important to other Aboriginal peoples.¹⁶ Given few tools are available to assess effectiveness of programs generally, of holistic care or of making progress, particularly from Aboriginal and Torres Strait Islander people’s perspectives, a dedicated process of critical reflection in dialogue with the Evaluation Reference Group is recommended.

Self-determination

Consider ...
When, how and what aspects of self-determination and rights were or were not experienced, including informed leadership of local community members in priority-setting and planning, and community-control in service delivery.
The commitments made to making progress as well as to outcomes, with progress expressed also through perseverance, despite challenges, constraints and set-backs.
Whether non-Indigenous people undertake critical reflection on their standpoints, engage in cultural awareness and anti-racism training or demonstrate commitment to strengthening personal and professional relationships with Aboriginal and Torres Strait Islander people.

Aboriginal and Torres Strait Islander cultural care

Consider ...
The extent to which appropriate sharing of knowledges and processes strengthen Aboriginal and Torres Strait Islander people’s cultural identity and personal security.
The extent to which the program preserves Aboriginal and Torres Strait Islander cultural heritage.
The extent to which the program strengthens connection to country, waterways, knowledges, material items and people.
The ways that taking responsibility for future generations are expressed by Aboriginal and Torres Strait Islander Elders, leaders and others involved in program delivery, including through role-modelling, mentoring and knowledge exchange.
The opportunities for relationships to begin, or to strengthen, alter, cease or otherwise transform.

¹⁶ Sheehan, N. (2004). Indigenous knowledge and higher education: Instigating relational education in a neo-colonial context (PhD thesis). University of Queensland, Brisbane, Australia.

Consider ...
The strength of ties, and how relationships are experienced such as through trust, integrity, equality, reciprocity, flexibility and sharing.
The use of strengths-based program delivery and connecting people to supports they prioritise, rather than assessing for and identifying deficits or making comparisons to non-Indigenous peoples.

Healing

Consider ...
The extent to which there are safe processes for reflection, access to therapeutic care, identifying inner strengths and addressing trauma, suffering, loss and grieving in individual as well as group contexts.
The extent to which the program addresses experiences of racism.
The opportunities for greater understanding and empathy for others and strengthening relationships, including with self, older and younger generations, and people of other cultures.
The opportunities to enhance re/connections between Aboriginal and Torres Strait Islander peoples and cultural identity, knowledges and practices.
Opportunities to support others as part of one's own healing process.

Developing the evidence base

Consider ...
How the program contributes to an evidence base by developing culturally-relevant tools, methods, measures, indicators and benchmarking, as well as record-keeping and monitoring.
The opportunities for building the capacity of Aboriginal and Torres Strait Islander staff and community members in research, monitoring and evaluation.
Strategies and processes for decolonising research, evaluation and program delivery, including raising awareness among enabling systems, and mainstream researchers, partners and stakeholders.

...

Use of Ngaa-bi-nya is published in (reverse chronological order):

Williams, M. & Ragg, M. (2019). Evaluation of the Civil Law Service for Aboriginal Communities. Sydney: UTS

- Winterford, K., **Williams, M.**, & Fee, A. (2018). PNG Agribusiness Monitoring Evaluation and Learning Report, Sydney: Institute for Sustainable Futures, University of Technology Sydney.
- Williams, M.**, Sweet, M., Finlay, S., & McInerney, M. (2017). #JustJustice online campaign to reduce Aboriginal and Torres Strait Islander over-incarceration. *Australian Journalism Review*, 39(2), pp. 107-118.
- Haswell, M.R., **Williams, M.**, Blignault, I., Grand Ortega, M., & Jackson Pulver, L. (2014). *Returning Home, Back to Community from Custodial Care: Learnings from the first year pilot project evaluation of three sites around Australia*. Sydney: UNSW Australia.
- Delaney-Thiele, D., Schuster, L., Hure, S., **Williams, M.**, Grand Ortega, M., & Blignault, I. (2014). *Returning Home, Back to Community from Custodial Care: Western Sydney pilot project evaluation report*. Sydney: UNSW Australia.
- Grant, T., Bourne, B., Brackenbridge, B., Grant, C., Haswell, M., Andersen, K., & **Williams, M.** (2014). *Returning Home, Back to Community from Custodial Care: Townsville pilot project evaluation report*. Sydney: UNSW Australia.

We are happy to provide more information about our experience with evaluating Aboriginal and Torres Strait Islander programs.

We thank you for the opportunity to put a submission to the inquiry, and wish you all the best.

Regards

Dr Megan Williams
Head of Discipline, Indigenous Health
Graduate School of Health, UTS

Dr Mark Ragg
Director Ragg & Co
Adjunct Fellow
Graduate School of Health, UTS