



Australia's National Institute for Aboriginal
and Torres Strait Islander Health Research

Review of the National Agreement on Closing the Gap

Response to review paper 2: Proposed approach and invitation to engage with the review

Submission to the Productivity Commission

The Lowitja Institute, December 2022



Productivity Commission Close the Gap Review: Proposed approach and invitation to engage with the Review

Productivity Commission

Dear Commissioners,

Re: Productivity Commission Close the Gap Review: Proposed approach and invitation to engage with the Review

The Lowitja Institute is Australia's national institute for Aboriginal and Torres Strait Islander health research, named in honour of our Patron, Dr Lowitja O'Donoghue AC CBE DSG. We welcome the opportunity to provide a submission to the Productivity Commission Close the Gap Review.

The Lowitja Institute is a long-time proponent of the *National Agreement on Closing the Gap* (the National Agreement); its four Priority Reforms underpin the policy and advocacy undertaken by the Institute, as well as the research we commission and support. Ensuring the full and effective implementation of the National Agreement is a key priority for the Lowitja Institute and drives our submission to this Review. The proposed approach put forward by the Productivity Commission highlights a number of concerns around Government's commitments to upholding its responsibilities under the National Agreement on Closing the Gap.

In addressing some of the questions in the review, we present a particular focus on the urgent need for Federal, State and Territory governments to take action to embed Indigenous data sovereignty and good data governance practices across the entire National Agreement, as well as discuss good engagement practices, participatory action research and the need to transform the way that governments work with Aboriginal and Torres Strait Islander peoples and organisations.

Please find our submission attached. We would welcome the opportunity to discuss any of the issues contained therein.

Warm regards

Dr Janine Mohamed
CEO, Lowitja Institute

1. About the Lowitja Institute

The Lowitja Institute is Australia's national institute for Aboriginal and Torres Strait Islander health research, named in honour of our Patron, Dr Lowitja O'Donoghue AC CBE DSG. The Lowitja Institute is an Aboriginal and Torres Strait Islander, community-controlled organisation working for the health and wellbeing of Australia's First Peoples through high impact quality research, knowledge translation, and by supporting Aboriginal and Torres Strait Islander health researchers.

Established in 2010, the Lowitja Institute operates on key principles of Aboriginal and Torres Strait Islander control of the research agenda, a broader understanding of health that incorporates wellbeing, and the need for the work to have a clear and positive impact. The Lowitja Institute invests in knowledge creation and translation by enhancing the capability of the Aboriginal and Torres Strait Islander health research workforce.

At the Lowitja Institute our research is built on priorities identified by Aboriginal and Torres Strait Islander peoples. We aim to produce high impact research, tools and resources that will have positive health outcomes for Aboriginal and Torres Strait Islander peoples. To guide this, we work by five key principles that underpin our approach to research. These principles are:

1. **Beneficence** – to act for the benefit of Aboriginal and Torres Strait Islander people in the conduct of our research
2. **Leadership** by Aboriginal and Torres Strait Islander people
3. **Engagement of research end users** (Aboriginal and Torres Strait Islander organisations and communities, policymakers, other potential research users)
4. **Development of the Aboriginal and Torres Strait Islander research workforce**, and
5. **Measurement of impact** in improving Aboriginal and Torres Strait Islander people's health.

2. General preamble

Holistic approaches and understandings to the health and wellbeing of Aboriginal and Torres Strait Islander peoples and communities, unpins the work of the Lowitja Institute. We understand and seek to support Aboriginal and Torres Strait Islander-led research that builds on the growing evidence-base, demonstrating that the social and cultural determinants of health, climate and environmental changes, and justice in our health systems, have significant impacts on the health and wellbeing of Aboriginal and Torres Strait Islander peoples.

The Lowitja Institute has a longstanding commitment to the National Agreement on Closing the Gap (the National Agreement), as members of the Coalition of Peaks



and Partnership Working Group, the National Health Leadership Forum, and the Close the Gap Steering Committee, including authoring the Close the Gap Report over the past 4 years. The National Agreement and its four Priority Reforms¹, align with the Lowitja Institute's long-standing advocacy and vision for a health system that support and empower Aboriginal and Torres Strait Islander peoples. As a community-controlled national health research institute, Aboriginal and Torres Strait Islander decision-making is central to the work we undertake.

In our 2022 Federal Election Priorities², we called for Aboriginal and Torres Strait Islander research leadership to be embedded, the recognition and implementation of the social and cultural determinants of health within policy and programs, investment in data sovereignty, governance and infrastructure, and commitment to workplace development, including supporting the growth of the Aboriginal community-controlled sector.

Based on our work and experience, we offer general comments and responses to the following questions identified in Review:

1. How can the Commission's review be done in a way that will complement the Aboriginal and Torres Strait Islander-led review?
2. Do you have any feedback on the engagement approach or how we can put those principles into practice throughout the review?
3. What criteria should the Commission use to select case studies? Are the Commission's suggested criteria in section 2 appropriate? Are there other criteria the Commission should use?
4. What barriers do Aboriginal and Torres Strait Islander communities and organisations face in accessing and using data? Are there examples where those barriers have been overcome in the past? How was that done?
5. What structures and protocols need to be in place so that governments can share data with Aboriginal and Torres Strait Islander communities and organisations? What are the checks and balances needed to ensure data are shared appropriately?

In addressing these questions, we will focus on Indigenous data sovereignty and governance, good engagement practices, participatory action research and the need to transform government.

¹ Australian Government, 2020, *National Agreement on Closing the Gap – Priority Reforms*, <https://www.closingthegap.gov.au/national-agreement/priority-reforms>

² Lowitja Institute, 2022, *2022 Federal Election Priorities*, https://www.lowitja.org.au/content/Image/Lowitja_ElectionPriorities_040522_D4.pdf

3. Approach to the review

We have reviewed the overall approach described within the review paper and would like to raise a concern with the use of case studies to understand what governments are doing, and whether what they are doing is effective. Whilst case studies may demonstrate examples of success and good practice, this approach does not provide detail on whole of government action, with a risk that good practices will be captured and poor or no action will not. The use of quantitative data and analysis increases accountability across the whole of government and allows for progress to be understood at a level that is required to truly assess progress towards the Priority Reforms.

Despite an accumulation of data, information, and knowledge about Aboriginal and Torres Strait Islander health under the Closing the Gap agenda we have not seen the desired improvements in health outcomes. This is not a result of a lack of evidence or knowledge, but rather a failure to apply this knowledge into practice.

Data is a valuable resource in filling this gap and supporting governments and the community-controlled sector to work in partnership to achieve the goals and priorities of the National Agreement.

To measure the progress against the Priority Reforms at a national scale, requires significant data infrastructure and organisation. A task of this size demands comprehensive and consistent data collection processes that adhere to the principles of Indigenous Data Sovereignty (ID-SOV) and Indigenous Data Governance (ID-GOV).

There is a need for action to break down soils across governments and allow for a better understanding of what data is available and to identify where this data is stored. There are also significant gaps in capability around data development and data governance. The need to develop capabilities of Aboriginal and Torres Strait Islander communities and leaders, as well as across governments to better use data and interpret data, and to uphold the principals of Indigenous data sovereignty is clear.

We have expanded on this below, noting the power of data and the importance of improving data access.

4. Data sovereignty and governance

There has been an emerging and urgent need to address how data is collected and used in ways that shift ownership and control for the benefit of Aboriginal and Torres



Strait Islander people. Unreliability of data on Aboriginal and Torres Strait Islander peoples, and lack of self-determination and decision-making power for Aboriginal and Torres Strait Islander peoples over this data, hinders progress towards positive health outcomes and closing the gap.

Indigenous Data Sovereignty (ID-SOV) relates to individual and collective information or knowledge. ID-SOV refers to Aboriginal and Torres Strait Islander peoples' rights to govern their own data, including its creation, collection and use, and describes how the rights of Indigenous peoples, our experiences, values, and understandings are developed and reflected in the data and information that pertains to us, our communities, and our cultural knowledges. Defined, Indigenous Data Sovereignty:

refers to the inherent and inalienable rights relating to the collection, ownership, and application of data about Indigenous peoples, and about their lifeways and territories. This includes Indigenous peoples' right to maintain, control, protect and develop their cultural heritage, traditional knowledge, and traditional cultural expressions, as well as their right to maintain, control, protect and develop their intellectual property over these.³

The Lowitja Institute released an Indigenous Data Sovereignty Readiness Assessment and Evaluation Toolkit for researchers, governments and communities in early 2022.⁴ The toolkit outlines the five components of ID-SOV, that assert the fundamental rights of Aboriginal and Torres Strait Islander peoples and communities to:

1. Control their data
2. Develop their data
3. Use their data
4. Maintain their data, and
5. Protect their data⁵

Closely related to ID-SOV is Indigenous Data Governance (ID-GOV), which establishes processes and mechanisms for ensuring Indigenous Peoples' rights and interests are reflected in data policies and practices.

Indigenous Data Governance enacts ID-SOV, providing processes and mechanisms for ensuring Indigenous Peoples' rights and interests are reflected in data policies

³ Griffiths K.E., Johnston M., Bowman-Derrick S. 2021, *Indigenous Data Sovereignty: Readiness Assessment and Evaluation Toolkit*, Lowitja Institute, Melbourne, p.5

⁴ Griffiths K.E., Johnston M., Bowman-Derrick S. 2021, *Indigenous Data Sovereignty: Readiness Assessment and Evaluation Toolkit*, Lowitja Institute, Melbourne.

⁵ Griffiths K.E., Johnston M., Bowman-Derrick S. 2021, *Indigenous Data Sovereignty: Readiness Assessment and Evaluation Toolkit*, Lowitja Institute, Melbourne, p.10



and practices. It refers to the right of Indigenous peoples to autonomously decide what, how, and why Indigenous Data are collected, accessed and used. It ensures that data on or about Indigenous peoples reflects Indigenous priorities, values, cultures and worldviews, and diversity.⁶

Barriers to accessing and using data

Data is a powerful tool. Data can be used to hold governments and the community-controlled sector to account on actions under the National Agreement, however there is a risk that this can be decontextualised and misused if data sovereignty and data governance mechanisms are not in place.

The oversupply of deficit-based data has created a discourse that see Aboriginal and Torres Strait Islander peoples presented as a problem, or as wholly responsible for inequities.⁷ Data, when used properly, can be a powerful tool in changing this discourse.

Data is a valuable resource and a cultural, strategic and economic asset for Aboriginal and Torres Strait Islander peoples⁸, and therefore ID-SOV and ID-GOV are central to improving the health and wellbeing outcomes for our peoples and in achieving the targets set out within the National Agreement on Closing the Gap and its Four Priority Reforms. ID-SOV is a process that must be underpinned by Indigenous-led decision making and requires investment in building a skilled workforce with the relevant capabilities to access and use data.

There is a need for governments to make long-term investments in developing the capabilities of Aboriginal and Torres Strait Islander communities and leaders, as well as governments to uphold the principals of data sovereignty and undertake data development.

This is supported by Strategic Direction 6 of the *National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan*⁹ (National Workforce Plan) and Priority 12 of the *National Aboriginal and Torres Strait Islander*

⁶ Griffiths K.E., Johnston M., Bowman-Derrick S. 2021, *Indigenous Data Sovereignty: Readiness Assessment and Evaluation Toolkit*, Lowitja Institute, Melbourne, p.5

⁷ Lowitja Institute 2020, *Culture is Key: Towards cultural determinants-driven health policy – Final Report*, Lowitja Institute, Melbourne.

⁸ Mayi Kuwayu Study, n/d., 'Indigenous Data Sovereignty Principles', *Mayi Kuwayu The National Study of Aboriginal & Torres Strait Islander Wellbeing*, accessed 14 December 2022, <https://mkstudy.com.au/indigenousdatasovereigntyprinciples/>

⁹ Australian Government, 2022, *National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031*



Health Plan¹⁰ (The Health Plan), two national frameworks that both acknowledge the principles of data sovereignty.

Data workforce development and capacity building is particularly important to assessing the progress against the National Agreement on Closing the Gap.

Centrality of data to reporting on the National Agreement on Closing the Gap

Data is central to monitoring progressing against the National Agreement on Closing the Gap. Data must be detailed, consistent and timely, to present a comprehensive national picture of the progress against the Priority Reforms and associated socio-economic targets. Disappointingly, the National Agreement on Closing the Gap does not include reference to Indigenous data sovereignty under its Priority Reform 4: Shared Access to Data and Information at a Regional Level¹¹. Indigenous data sovereignty must be explicitly included within the National Agreement to support this aspiration.

The Closing the Gap Dashboard¹², run by the Productivity Commission, presents the architecture for reporting on the progress against the National Agreement and it's Four Priority Reforms and socio-economic targets across all states and territories. It has the potential to present a very detailed and comprehensive picture of progress. However, there are significant gaps; the dashboard and its data are inconsistent and present an incomplete and inaccurate picture of the progress across the country. Significant data development and capacity building, underpinned by the principles of ID-SOV and ID-GOV, is required to ensure that this repository functions as intended, and can effectively and accurately report on the National Agreement.

Additionally, case studies will not be a useful inclusion to the Closing the Gap Dashboard. It is vital within any engagement process that Aboriginal and Torres Strait Islander voices are heard and case studies are important to achieving this.

However, Aboriginal and Torres Strait Islander communities have been asking for data sovereignty and proper and meaningful implementation of the Priority Reforms for a long time. Case studies are an inadequate mechanism for assessing whether states and territories are meeting their commitments under the Priority Reforms. They do not provide the necessary level of detail, nor are they timely to ensure that whole

¹⁰ Australian Government, 2021, *National Aboriginal and Torres Strait Islander Health Plan 2021-2031*

¹¹ Australian Government, 2020, *National Agreement on Closing the Gap – Priority Reforms*, <https://www.closingthegap.gov.au/national-agreement/priority-reforms>

¹² Australian Government, 2022, *Closing the Gap Information Repository*, <https://www.pc.gov.au/closing-the-gap-data>



of government is changing the way they work with Aboriginal and Torres Strait Islander people and communities.

Governments must uphold their commitments to the National Agreement, and their responsibility within the Partnership to both gather and share data on its progress. The lack of consistent data collection on the progress towards the Priority Reforms from states and territories undermines the success of the National Agreement and is revealing of Governments' commitment to the agreement.

We call on governments, both Federal, State and Territory, to uphold their commitments under the National Agreement, importantly, their consistent and timely provision of data on progress.