



Health Sector Co-design Group (HSCG) Communiqué – 20 December 2017

The HSCG held its first meeting on 20 December 2017 to commence discussions on a design for the evaluation of the Australian Government’s investment in Aboriginal and Torres Strait Islander primary health care under the Indigenous Australians’ Health Programme (IAHP). After a Welcome to Country by Ngunnawal Traditional Custodian Adrian Brown and general introductions, members discussed their aspirations for the co-design of the proposed evaluation, their role as ‘co-designers’ and approaches to obtain broader input from others into the evaluation design, including from people who use primary health care services.

Members are energised by the opportunity to collaborate on the design of the evaluation and “to be involved right from the start”. They emphasised that it is important for respect and clarity to be at the heart of the co-design work, and that information put out to the public needs to be user-friendly. They suggested that the evaluation learn from other consultation processes, reviews and evaluations as much as possible, so as to not overburden communities and those providing primary health care to Aboriginal and Torres Strait Islander people.

The HSCG highlighted that the scope of the proposed evaluation is “big, complex and exciting”. This proposed evaluation will need to consider the impact of cultural, social and wellbeing determinants on health, and the contribution to population health of the primary health care system for Aboriginal and Torres Strait Islander people. The HSCG also welcomed the opportunity to be part of co-designing an evaluation that will enable a deep understanding of the inter-relationships between communities and their services, and that will promote system learning and adaptation.

The next task of the group is to consider and fine-tune the questions that will be guiding the evaluation. The focus of the next meeting of the group in early April 2018 will then be to develop the evaluation methodologies that will best answer these questions. The evaluation team will be collecting views and ideas from a range of communities and health sector people around Australia to bring to this next meeting.

For further information, please contact nhardie-boys@allenandclarke.co.nz

Background

The Australian Government is committed to closing the gap in health inequality between Aboriginal and Torres Strait Islander people and the rest of the Australian population. The Australian Government’s principal investment in Aboriginal and Torres Strait Islander primary health care is funded by the Department of Health through the IAHP, which commenced in July 2014.

Although some progress is being made on closing the health gap, not enough is known about what is working well and where the IAHP's performance could be enhanced. The Government wishes to increase its support to existing primary health care models and programs that are delivering gains and make improvements in those areas where progress has not been as strong. This proposed evaluation will provide valuable information to inform these decisions.

In mid-September 2017, the Department of Health engaged independent consultants Allen + Clarke to design an evaluation proposal. This work features a commitment to co-design and is structured as two phases as follows:

- Phase One: decide on the design of the evaluation – this phase has begun and will be completed by mid-2018.
- Phase Two: conduct the evaluation itself – this will begin once the design has been approved and will involve regular cycles of collecting and analysing information and of reporting to key stakeholders, including communities involved in the evaluation, over four years.

Established initially for Phase One, the HSCG brings together 14 Indigenous and non-Indigenous Australians with wide experience, expertise and perspectives across the primary health care system. The group's role is to work collaboratively with the evaluation team to help facilitate a robust and high quality evaluation design and the implementation of this design.

Membership of the HSCG includes:

- Dr Mark Wenitong from Apunipima Cape York Health Council.
- Dr Dawn Casey from the National Aboriginal Community Controlled Health Organisation (NACCHO).
- Angela Young from the Queensland Aboriginal and Islander Health Council (QAIHC).
- Karl Briscoe from the National Aboriginal and Torres Strait Islander Health Workers Association (NATSIHWA).
- Janine Mohamed from the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM).
- Bob Davis from Maari Ma Health.
- Professor Norm Sheehan from the Gnibi College of Indigenous Australian Peoples at Southern Cross University (SCU).
- Dr Jeanette Ward from WA Country Health Services.
- Dr Leanne Morton from the Hunter, New England and Central Coast Primary Health Network.
- Jessica Yamaguchi and Kim Grey from the Department of the Prime Minister and Cabinet.
- Dr Fadwa Al Yaman from the Australian Institute of Health and Welfare (AIHW).
- Kate Thomann and Karen Visser from the Department of Health.

The HSCG is co-chaired by two Aboriginal people: Kate Thomann (Assistant Secretary, Primary Health Data and Evidence Branch, Indigenous Health Division, Department of Health) and Dr Mark Wenitong (Senior Medical Adviser, Apunipima Cape York Health Council).

Its input is being facilitated by Allen + Clarke (Ned Hardie-Boys, Robyn Bailey and Matt Allen), who have partnered with Robert Monaghan, from the Bundjalung Nation and Monaghan Consulting; Associate Professor Roxanne Bainbridge, a Gungarri Aboriginal woman from Central Queensland University; Emma Walke, a Bundjalung Aboriginal woman, and Professor Ross Bailie and Jodie Bailie, all from the University Centre for Rural Health (University of Sydney); and Julia Carr, a public health physician and GP from Brisbane.

Indigenous Australians' Health Programme

The IAHP is the Australian Government's principal investment in primary health care for Aboriginal and Torres Strait Islander people. Through this \$3.6 billion (2017/18 – 2020/21) commitment, the IAHP:

- Funds organisations to deliver primary health care to Aboriginal and Torres Strait Islander people.
- Funds other community-based Aboriginal and Torres Strait Islander-specific initiatives addressing issues such as maternal and child health, smoking, mental health, and drug use.
- Seeks to influence the health system so that it works better for Aboriginal and Torres Strait Islander people.

Activities funded through the IAHP fall within the policy framework of the *National Aboriginal and Torres Strait Islander Health Plan 2013-2023*.

Key resources

Minister Ken Wyatt's [Media Release](#)

Information on the [Indigenous Australians' Health Programme](#)

Indigenous Australians' Health Programme [Guidelines](#)