

# Aboriginal Health and Wellbeing Partnership Agreement 2023-2033

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**AHWPF**  
Aboriginal Health and  
Wellbeing Partnership Forum



**VACCHO**

Department  
of Health

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## Overview of Aboriginal artwork

From the Rivers to the Trees

We are children of the Dreamtime. We are part of this land, and this land is part of us. Our spirit sings with ancient songs of ceremony and dance, it is in our blood and veins. Our Culture is our heartbeat, and we will always keep it beating.

We are taught that we must care for Country, and in return, Country will always care of us. This is where we gain our healing and life source from, from the rivers to the trees.

Like the roots of the tall proud grandfather tree that breathes along the river, Aboriginal Culture is resilient and deeply entrenched within the songlines of this land. The scar tree and its carved warrior shield represent Cultural safety and self-determination – they are strength in Culture.

A woven dilly bag and basket carry medicine leaves and medicinal plants taken from along the waterways, they are the connection to our traditional way of preparing nourishing food and vital health giving, they are self-love and care. Yellow ochre is painted on the ceremonial possum skin cloak that lay on the woven healing mat. These represent the ancient sacred cultural practices of mindfulness and meditation, they symbolise the spiritual, mental and physical healing gained when one is still, gained with connection to Culture.

Elders' hands extend gum leaves towards the carved coolamon dish fuelling the cleansing healing smoke, they represent unity and togetherness in the shared health journey. This ancient ceremony represents Cultural safety and protection, it is our healing tradition passed down over time.

Blue wavy lines hug the banks of the rich red soil – our sacred waterways play a significant place in our healing journey and bound us spiritually to our connection to Country. Chevrons represent the strength gained from our presence on Country and the healing plants taken from the bush and mountains.

The map of connecting circles represent the clans throughout Victoria and their coming together in unity for health and self-determination, it is strength in connection. The larger circles to the left and right symbolise communities throughout the state and their coming together on their self-care and healing journeys. They meet in the centre circle represented by the healing sun, the giver of life.

It is restoration and spiritual therapy.

It is cultural well-being.

*Artist Simone Thomson*

*Woi-Wurrung Wurundjeri, Yorta-Yorta 2022*

## Acknowledgement of Aboriginal Victoria

We acknowledge the strength of Aboriginal people across the Country and the power and resilience that is shared as members of the world's oldest living culture. We acknowledge Aboriginal people as Australia's First Peoples.

We acknowledge the impact of colonisation to this day and seek ways to rectify past wrongs, including through truth-telling and the development of treaty. We acknowledge that Victoria's treaty and truth-telling processes may result in reforms addressing systemic injustice including reforms relating to this Aboriginal Health and Wellbeing Partnership Agreement. We recognise that treaty will have wide-ranging impacts for the way we work and will provide a framework for the transfer of decision-making power and resources to

Aboriginal control. We are deeply committed to Aboriginal self-determination and to supporting Victoria's treaty and truth-telling processes.

We acknowledge this Agreement was developed on Aboriginal lands and recognise the richness and diversity of all Traditional Owners across Victoria. Aboriginal people and communities have cared for Country, Songlines, waterways and sky for thousands of years. Holistic practice of Aboriginal health and healing is an inherent part of Aboriginal culture and resilience in surviving colonisation.

We pay our deepest respect and gratitude to ancestors, Elders, and leaders—past and present. They have paved the way, with strength and fortitude, for our future generations.

In this document, 'Aboriginal' refers to both Aboriginal and Torres Strait Islander people.

## Vision

Our shared vision is for Aboriginal people to have access to a health system that is holistic, culturally safe, accessible, and empowering.

## Commitment and Purpose Statement

### *Together we are committed*

The Victorian Aboriginal Health and Wellbeing Partnership Agreement (the Agreement) is a commitment from the Aboriginal Health and Wellbeing Partnership Forum members<sup>1</sup> to work together in reforming the healthcare system. To achieve our vision, we are committed to upholding self-determination as a key principle, to working in an open and transparent manner, sharing information, knowledge, and resources in a way that ensures we remain accountable to each other in achieving our shared priorities.

This Agreement commits us to working together to implement the key actions for health reform within the Action Plan, which will be developed by members of the Forum. These actions are important steps along the journey towards a shared vision of better health and wellbeing for all Aboriginal Victorians, in a health system where there is no wrong point of access for any Aboriginal person.

Our commitment to work together is guided by self-determination, cultural safety, accountability and transparency.

See Appendix 1 for background on Aboriginal health in Victoria.

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<sup>1</sup> Forum members consist of representatives from across the health system (the Aboriginal Community-Controlled Health Organisations and the mainstream system sector) as well as representatives from the Victorian Government Department of Health

## Guiding Principles

*These principles guide the ways that the signatories will work together throughout the life of the Agreement. They are foundational to the ways that we will communicate, work, and share together.*

- Self determination** Self-determination means being able to exercise autonomy and agency over the decisions that affect oneself. It requires shifting ownership and decision-making about Aboriginal people to Aboriginal people, ensuring they have control over their own affairs. In practice, self-determination requires Aboriginal leadership in agenda-setting and decision-making in all matters that impact Aboriginal health and wellbeing.
- Accountability** Members are answerable to each other regarding the scope of this Agreement and the implementation of the Action Plan.
- Transparency** An open and unreserved working relationship where honesty and clarity take precedence. It is important that evidence from discussions and decisions is made available to members, and any conflicts of interests explicitly declared.
- Cultural safety** Members will interact with partners, Community members, stakeholders and individuals in a manner that is culturally safe for Aboriginal and Torres Strait Islander people. To ensure this, ongoing critical reflection of ones' knowledge, skills, attitudes, practicing behaviours and power differentials is required to ensure responsive ways of working that are free of racism.<sup>1</sup>

## Scope

This Agreement focuses on the shared priorities identified by the Aboriginal Health and Wellbeing Partnership Forum (the Forum). The actions required to address these priorities will be outlined in an Action Plan that members commit to implementing. This Action Plan will be reviewed every two years and updated to reflect the most critical matters for health system reform. The implementation of the Action Plan will be measured against the need to achieve outcomes in the following domain areas:

- Prevention and early intervention are central to health
- Culturally safe healthcare
- A self-determined health system
- Working from a shared evidence base
- Building a sustainable health sector

## Policy Context



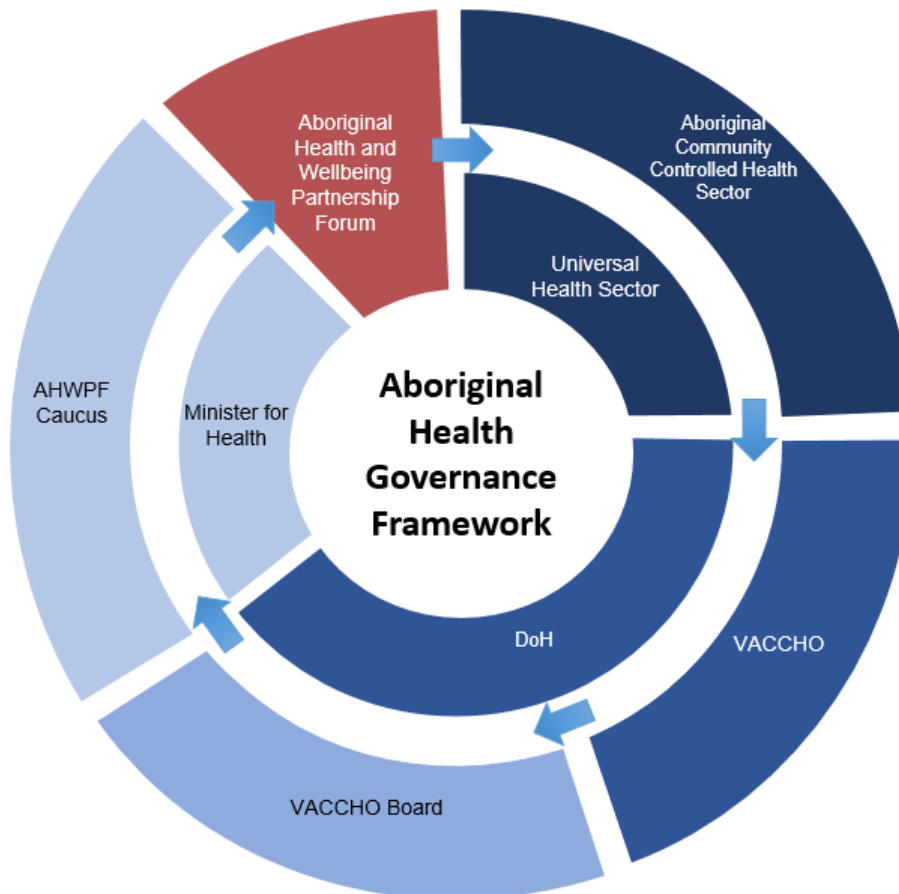
*Figure 1: The diagram outlines the policy landscape that the Agreement exists within. For further details on the Victorian policy context refer to Appendix 2.*

The Aboriginal Health and Wellbeing Partnership Agreement establishes a new policy direction, founded on self-determination and partnership between the health sector and government. This Agreement will enhance the delivery of the existing policies, strategies and frameworks within the national and state context. The Agreement is now the coordinating mechanism for policy across Victorian Aboriginal healthcare reforms, connecting strategies and policies both in Victoria and nationally.

It is acknowledged that Treaty and Truth processes in Victoria may have a significant impact on Government policy, governance and funding across all areas that affect Aboriginal people. A commitment is provided to amend the Aboriginal Health and Wellbeing Partnership Agreement and Action Plans, policy and governance as required to align with progress in Treaty negotiations.

## Governance

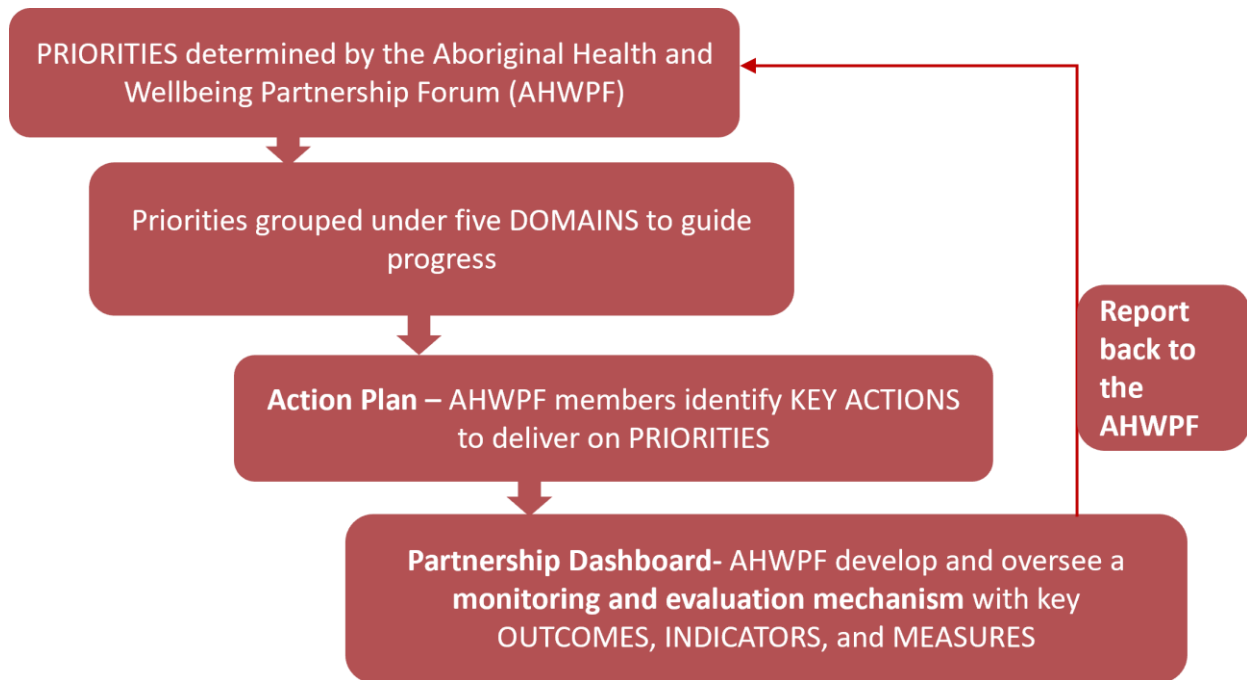
In line with self-determination, governance of the Forum is led by the Aboriginal community-controlled health sector in partnership with government and the mainstream health sector. The following diagram shows the relationship between Forum members and the flow for Aboriginal voice, priority setting and decision making.



## Aboriginal Health and Wellbeing Action Plan

The Action Plan will outline what is required by those accountable under the Agreement, over two-year cycles, to address the priorities that have been identified by the Forum.

The actions in the Action Plan will be grouped under domains. By implementing the actions identified within each outcome and domain, the Forum will have oversight of the progress being made toward addressing its identified priorities and impact.



The domains and outcomes for Aboriginal health in Victoria are defined as follows:

| Domain   | Definition  |
|--|---|
| <b>Prevention and early intervention are central to health</b> | <p>Programs that focus on prevention have a proven ability to foster positive health and wellbeing outcomes for Aboriginal people.<sup>21</sup> A prevention and early intervention focused approach requires sustainable funding and support of ACCHOs, who provide robust evidence-based prevention programs that support Aboriginal people in Victoria before crises, positively transforming lives. Prevention and early intervention cannot occur without recognition of the social and cultural determinants of health and wellbeing, acknowledgment and planning for which will result in better outcomes for Aboriginal community.</p> <p><b>Outcomes</b> in this domain include:</p> <ul style="list-style-type: none"> <li>• Aboriginal people have access to appropriate early intervention care and programs</li> <li>• Aboriginal people enjoy high levels of social and emotional wellbeing</li> <li>• Aboriginal people participate in prevention programs</li> <li>• People enjoy long and healthy lives</li> </ul> |
| <b>Culturally safe healthcare</b>                              | <p>Culturally safe healthcare encompasses <i>how</i> care is provided, as opposed to <i>what</i> care is provided. A culturally safe and racism-free health system is one in which Aboriginal people feel</p>   |



safe, where there is no challenge or need for the denial of their identity, where there is no wrong door to care and where needs are met.

Lack of culturally safe health services, concerns about racism and other fears are significant barriers to accessing essential preventative and health care services. Discrimination and racism are significant health risk factors and impact upon an individual's health and wellbeing. A high number of Aboriginal people continue to experience discrimination, racism, and unconscious bias in healthcare settings.

**Outcomes** in this domain include:

- Aboriginal people have access to Aboriginal community-controlled health services
- Aboriginal people have access to culturally safe mainstream health services

**A self-determined health-system**

Self-determination gives the decision-making power about Aboriginal people to Aboriginal people. Acknowledging that they are best placed to understand and respond to issues that affect their lives. In a self-determined health system Aboriginal people have genuine decision-making power and meaningful control<sup>22</sup>. And rather than merely being 'engaged' or 'consulted' as 'advisors' or 'co-designers' of services and policies, Aboriginal people are authorised and empowered to own, direct and make strategic decisions. A self-determined health system is one where legislative, governance, reporting and other structures and mechanisms have embedded Aboriginal voice, and which reflects Aboriginal values and culture.<sup>2</sup>

**Outcomes** in this domain include:

- Aboriginal voice determines the healthcare received by Aboriginal people in Victoria

**Working from a shared evidence base**

Aboriginal peoples have a right to their own data. A shared evidence base recognises that the sharing and capturing of data across and within the health system is a key enabler to creating a connected and holistic health system. Creating a shared base of evidence requires all sectors to make data more available, accessible, useable, and consumable in a timelier manner for the benefit of Aboriginal communities.

**Outcomes** in this domain include:

- Information and data are shared across the health system
- Aboriginal research in Victoria is self-determined and culturally respectful

**Building a sustainable health sector**

A sustainable health sector requires reforming investment in services, workforce, infrastructure and systems and structures to enable a sustainable health system that is led by outcomes rather than activities. The current approach places undue burden on the workforce, leads to high staff turnover, burnout, and ultimately has detrimental long-term effects on ACCHO's ability to enable better outcomes for Aboriginal people in Victoria.<sup>24</sup> Longer-term outcomes-based funding models are key to improving access to quality health and wellbeing services.

**Outcomes** in this domain include:

- Funding of and resources for the community-controlled health sector are long term and responsive to needs
- Reporting and accreditation suit the needs of the Aboriginal health sector
- Aboriginal health and wellbeing workforce is strong and sustainable

<sup>2</sup> Department of Health, Racism in Victoria and what it means for the health of Victorians, April 2022

## Reporting and evaluation

Monitoring, evaluation and reporting will be undertaken through the following mechanisms:

- Reports will be provided at each AHWPF to update members on progress of implementing priorities and to review key reforms and outcomes. The AHWPF will publish a communique to inform the broader health and wellbeing sector following each Forum.
- Action Plans will be developed and implemented to progress delivery of priority reform work across the health system.
- The AHWPF will identify and agree on a mechanism to continuously monitor and evaluate progress towards the longer-term health and wellbeing outcomes of the Agreement.
- The Aboriginal Health and Wellbeing Partnership Agreement and Action Plans will be subject to review, and amendment based on the commencement and progress of Treaty negotiations in Victoria. This may require amendments to the policy and governance of the Aboriginal Health and Wellbeing Partnership Agreement, funding and agreed actions. It is acknowledged that the timing of progress of Treaty negotiations, as well as findings and recommendations made by the Yoorrook Justice Commission will determine amendments that may occur outside the two-yearly review period of the Aboriginal Health and Wellbeing Agreement.

## Appendix 1: Background: Aboriginal health in Victoria

For Aboriginal people, the concept of health encompasses the physical, social, emotional, and cultural wellbeing of individuals, families, wider kinship groups, and entire Communities. While physical health is important, equal value is placed on strengthening connections to mind, emotions, family, kinship, Community, culture, country, spirituality, and ancestors. Developing connectedness across all these elements empowers Aboriginal self-esteem, belonging, and pride. This is especially critical in the protection of mental health and wellbeing and aids in journeys of healing from the ongoing and persistent harm inflicted by colonisation. In practice, this holistic understanding of physical, social, emotional, and cultural wellbeing requires a health system that is responsive to the needs of Aboriginal people within each of these elements.

Achieving good health and social and emotional wellbeing for Aboriginal people is equally dependent on experiences in the social, historical, political, and cultural determinants of health. In addition to the delivery of health services, critical enablers of health and wellbeing for Aboriginal people include equitable outcomes across housing, education and employment, and the advancement of anti-racism, truth telling, and Treaty. Ultimately, this can only be achieved by a whole of government commitment to reconciliation and access to culturally safe services that are connected and holistic in practice and mindset. In Victoria, best practice in the delivery of holistic and culturally safe services for Aboriginal people is modelled by the Aboriginal community-controlled health sector.

ACCHOs are Aboriginal led, community-controlled health services that provide a suite of primary care, allied health, mental health, alcohol and other drug, housing, disability and aged care services, and many other wrap-around supports for Aboriginal people. Since they were first formally established in the 1970s, ACCHOs have demonstrated excellence in supporting Aboriginal people from birth to dreaming, and in transforming the lives of Aboriginal people for the better. They offer programs across all elements of physical, social, emotional, and cultural wellbeing. In practice, having health services grounded in, governed by, and accountable to Community has also been critical in developing and maintaining trust and connection, which is foundational to achieving equitable health outcomes for Aboriginal people.

There are 73 Victorian public health and hospital services in the Victorian health system that provide health and wellbeing services. These include admitted and non-admitted care, allied health, prevention, early intervention, dental, maternal and child health, mental health, alcohol and other drugs, sexual health, aged care services, rehabilitation, and emergency services across a range of public and private settings. The public health system is funded through the Victorian government.

Rural areas have regional health services, sub regional hospitals, bush nursing hospitals and bush nursing centres. The type of healthcare provided at these services varies depending on local demand, and the need to provide safe, high-quality healthcare.

There are 81 community health services providing mainstream access to services as well as targeted services for priority population groups. They sit alongside general practice and privately funded services to make up the primary health sector in Victoria. Some are also major providers of a range of health and human services including drug and alcohol, disability, dental, post-acute care, home and community care, early years, mental health services and community rehabilitation.

Private sector health service providers include private hospitals, medical and allied health practices, and pharmacies. Private hospitals are owned and operated by private organisations with some services regulated by the Department of Health.

In practice, equitable outcomes for priority populations, including Aboriginal people, have often not been achieved. Outside of the Aboriginal community-controlled health sector, healthcare settings remain a common place where discrimination is experienced.<sup>2</sup> Deficits in trust and cultural safety persist, and significant investment is required to bring about change, both in perception and reality. Dedicated effort to improve the connections between the ACCHO and mainstream sector is required. While there are pockets where alignment and cooperation has been successful, significant work is required to ensure a systemic approach, where parts of the health system are connected and work respectfully together to deliver a holistic and culturally safe model of healthcare.

The reform required for the entire health system in Victoria, articulated in this Agreement and Action Plan, will involve greater connection and partnership with ACCHOs and increased accountability and commitment to change in the mainstream sector. Moreover, it must be led by Aboriginal people, focused on the needs of Aboriginal people, and have Aboriginal voices at its heart.

## Appendix 2: Policy Context

### [National Agreement on Closing the Gap \(National Agreement\)](#)

The new National Agreement, signed in July 2020, was negotiated between all Australian Governments and the Coalition of Peaks, a representative body of over seventy Aboriginal and Torres Strait Islander community-controlled peak organisations and members.

The National Agreement is structured around four Priority Reforms that focus on transforming the way governments work with Aboriginal and Torres Strait Islander people to improve outcomes. The Priority Reforms will:

- Strengthen and establish formal partnerships and shared decision-making
- Build the Aboriginal and Torres Strait Islander community-controlled sector
- Transform government organisations so they work better for Aboriginal and Torres Strait Islander people
- Improve and share access to data and information to enable Aboriginal and Torres Strait Islander communities make informed decisions.

The Victorian Closing the Gap Implementation Plan 2021-2023 embeds the National Agreement's four priority reforms across government's work, and includes actions for achieving the 17 socio-economic targets.

### [Closing The Gap Partnership Agreement 2019-2029](#)

*Closing The Gap Partnership Agreement 2019-2029 (The Agreement)* is a formal partnership between the council of Australian Governments and Peak Aboriginal Community Controlled Organisations. It recognises self-determination as key to achieving change and enhancing positive outcomes for Aboriginal and Torres Strait Islander communities. The Victorian Aboriginal Health and Wellbeing Agreement will establish the landscape for working with the Victorian Government on Closing the Gap and a range of health and wellbeing issues that impact Aboriginal communities.

### [National Aboriginal and Torres Strait Islander Health Plan 2021-2031](#)

*The National Aboriginal and Torres Strait Islander Health Plan 2021-2031 (Health Plan)* is a framework representing the governments' commitment to lead the systemic change required to improve health outcomes for Aboriginal people. It recognises and endorses the importance of holistic health and wellbeing, and the cultural and social determinants of health. The Plan is a mechanism for Closing the Gap and a commitment from governments to work with Aboriginal stakeholders, Communities, organisations and individuals through a bottom-up, Community-led approach.

### [National Aboriginal Workforce Strategic Framework and Implementation Plan 2021-2031](#)

*The National Aboriginal Workforce Strategic Framework and Implementation Plan 2021-2031 (National Workforce Plan)* aims to increase the Aboriginal workforce within the health sector to 3.43% by 2031. This target is representative of the projected proportion of Aboriginal and Torres Strait Islander population estimates in 2031. The National Workforce Plan aims to support this target by focusing on health-related education and workforce initiatives for Aboriginal people entering training and workforce.

### [Victorian Aboriginal Affairs Framework 2018-2023](#)

*The Victorian Aboriginal Affairs Framework 2016-2023 (VAAF)* is an overarching strategic framework that aims to improve outcomes by working with Aboriginal Victorians, organisations and the wider community. The VAAF sets out a whole of government approach to structural and systemic transformation.

[Royal Commission into Victoria’s Mental Health System Final Report](#)

The Final Report from the Royal Commission into Victoria’s Mental Health System was accepted in full by the Victorian Government as its roadmap to reform for the Mental Health and Wellbeing System in Victoria. Its recommendations set out the actions required to address the mental health crisis in Victoria, which disproportionately impacts Aboriginal Communities.

[Balit Murrup: Aboriginal social emotional wellbeing framework 2017-2027](#)

*Balit Murrup* is the Victorian Government’s Aboriginal Social and Emotional Wellbeing Framework. Its objectives are to empower Aboriginal community-led solutions to support Victorian Aboriginal people, families and communities to achieve and sustain the highest attainable standard of social emotional wellbeing, and to reduce the health gap attributed to suicide, mental illness and psychological distress between Aboriginal Victorians and the general population.

[On Solid Ground: VACCHO Strategic Plan 2021-2026](#)

*On Solid Ground* is VACCHO’s five-year strategic plan for Aboriginal knowledge and innovation to be central to the work and advocacy of VACCHO to enable strong Aboriginal voices, health and healing, and sustainability within the Aboriginal Community Controlled sector.

[Victorian Aboriginal Health and Wellbeing Workforce Strategy 2022-2026](#)

VACCHO’s *Workforce Strategy* is a framework for creating an equipped, safe and strong workforce to support Aboriginal people accessing the health system. The Strategy aims to strengthen the Aboriginal and non-Aboriginal workforce to provide culturally safe services and work towards a self-determined health care system for Aboriginal people in Victoria.

## Abbreviations

|        |   |
|--------|---|
| ACCHO  | Aboriginal Community Controlled Health Organisation           |
| AHD    | Aboriginal Health Division                                    |
| AHP    | Aboriginal Health Practitioner                                |
| AHWFS  | Aboriginal Health and Wellbeing Funding Strategy              |
| AHWPF  | Aboriginal Health and Wellbeing Partnership Forum             |
| AOD    | Alcohol and Drugs   |
| CERE   | Centre for Evaluation and Research Evidence                   |
| CSI    | Commissioning and System Improvement                          |
| DET    | Department of Education and Training                          |
| DFFH   | Department of Families Fairness and Housing                   |
| DH     | Department of Health  |
| DPC    | Department of Premier and Cabinet                             |
| DTF    | Department of Treasury and Finance                            |
| HACC   | Home and Community Care                                       |
| HSP    | Health Service Partnerships                                   |
| KMS    | Koori Maternity Services                                      |
| PHD    | Public Health Division  |
| PHU    | Public Health Unit  |
| SCV    | Safer Care Victoria   |
| VACCHO | Victorian Aboriginal Community Controlled Health Organisation |
| VAHI   | Victorian Agency for Health Information                       |
| VHBA   | Victorian Health Building Authority                           |