Aboriginal Engagement Guide

A guide to engaging with Aboriginal people and organisations in a meaningful and culturally safe way.

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| Term	Definition
MPCN	Melbourne Primary Care Network, trading as North Western Melbourne Primary Health Network (NWMPHN)
NWMPHN	North Western Melbourne Primary Health Network operated by Melbourne Primary Care Network (MPCN)
ACCHO	Aboriginal Community Controlled Health Organisation
ACCO	Aboriginal Community Controlled Organisation
Self-determination	• We have choice in determining how our lives are governed and our development paths. • We participate in decisions that affect our lives. This includes a right to formal recognition of our group identities. • We have control over our lives and future including our economic, social and cultural development.

Contents

Acknowledgement

North Western Melbourne Primary Health Network (NWMPHN) acknowledges and pays respect to the Traditional Custodians of the lands and waterways throughout Victoria, especially of the Wurundjeri Woi Wurrung, Boon Wurrung and Wathaurong lands on which we conduct our business.

We pay our deepest respect to the Elders past, present and emerging, as the Custodians of knowledges, traditions, cultures, and generational foresight for the ongoing health of lands, waters, and peoples. We acknowledge that Aboriginal and Torres Strait Islander peoples continue to live in spiritual and sacred relationships with Country.

In this acknowledgement we are stating our commitment to being in relation to Aboriginal and Torres Strait Islander peoples as sovereigns. This is an ongoing commitment in which we recognise our responsibility to strengthen our ability to be active in a sovereign relationship both as individuals and within the organisational conduct of NWMPHN.

NWMPHN thanks Bundyi Girri Consultancy for sharing their expertise and knowledge to support the development of this Guide.

Throughout this document we use the term 'Aboriginal' to encapsulate the many distinct and connected Aboriginal and Torres Strait Islander cultural and language groups residing, working or accessing services within the NWMPHN region and beyond, unless specific definition is required.
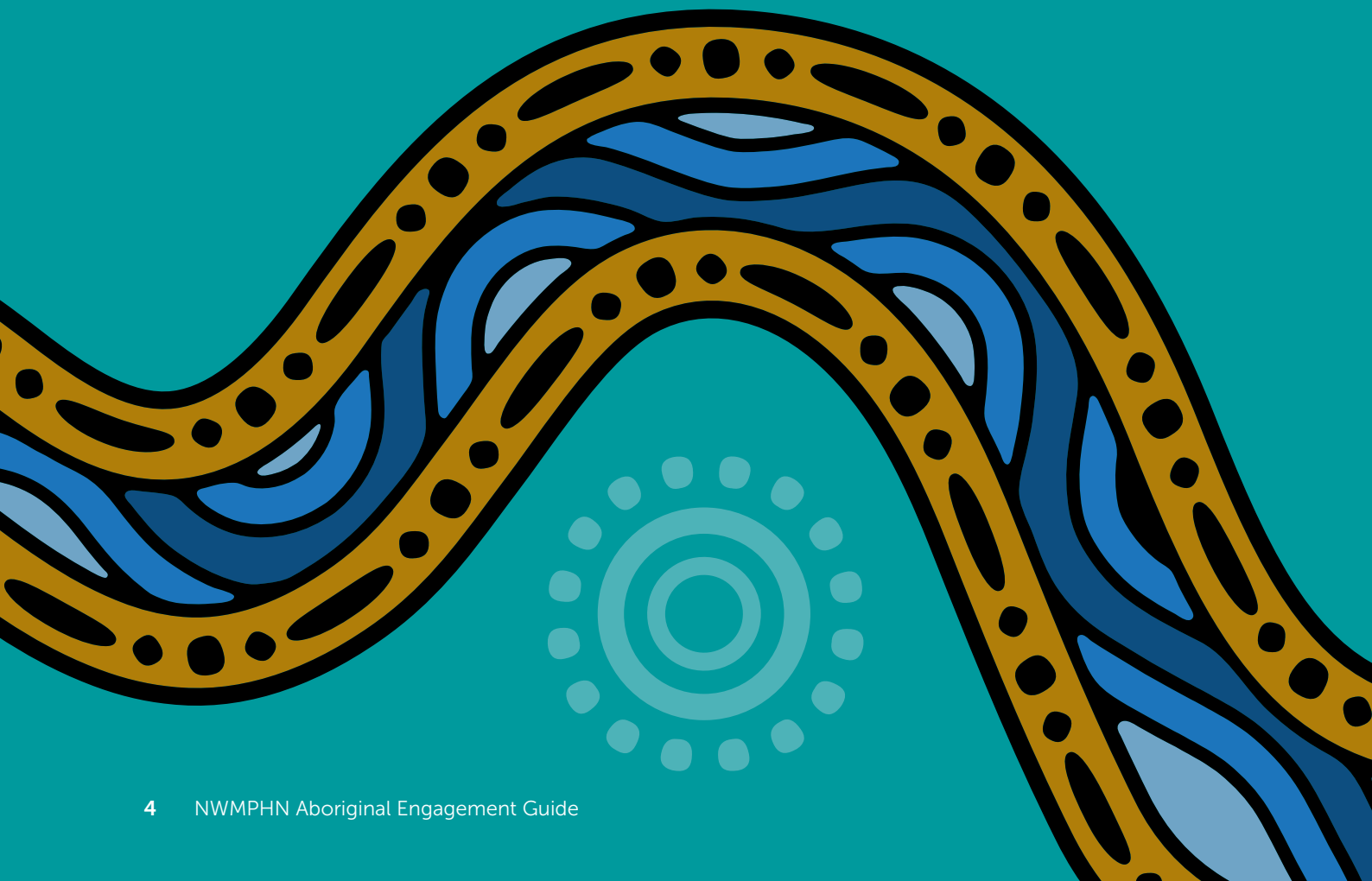
The purpose of the Guide

The *NWMPHN Aboriginal Engagement Guide* was developed to build on the achievements of the <u>NWMPHN Innovate Reconciliation Action Plan 2021-2023</u> (Innovate RAP) by moving towards an organisational approach to engagement with Aboriginal and Torres Strait Islander peoples and their sovereignties. This requires organisational transformation and carefully considered redesign of systems and processes.

Our aim is to advance the equity of health outcomes by encouraging and fostering collaborative relationships with Aboriginal peoples within our organisation and among our health partners, commissioned services and the community. Strong, respectful, and empowering relationships with Aboriginal peoples, communities and organisations are essential to improving community health.

This guide shows our commitment to engaging with Aboriginal peoples and organisations in a meaningful and culturally safe way and is underpinned by principles of self-determination, cultural safety, reflective practice, and a commitment to mutually beneficial relationships.

The purposes of this Guide are to:

- Build the capacity of NWMPHN staff to develop and maintain relationships with Aboriginal people and stakeholders in a respectful, effective, and culturally safe way.

- Promote engagement activities with Aboriginal peoples and stakeholders that are informed and guided by the best available information and resources and carried out in a culturally appropriate and competent manner.

- Encourage our ways of working to be centred on Aboriginal peoples determining solutions and making the decisions on matters impacting their health outcomes.

Cultural safety

NWMPHN sees cultural safety as critically important to the health and wellbeing of Aboriginal peoples. It is a legislative requirement of public agencies to provide safety in the workplace.

A culturally safe environment is one where there is no denial of a person's identity and no challenge to who they are or what they need. When applied to Aboriginal peoples and organisations, cultural safety refers to the sharing of knowledge and experience, and a commitment to redesigning structures and systems to reduce racism and discrimination. Developing trust and long-term relationships is an underpinning factor of culturally safe engagement.

Culturally safe work practices require that we:

- establish rapport

- be sensitive to what Culture means for communities and organisations we work with as well as our colleagues

- ensure organisational policies are designed to empower staff to operate in culturally strong ways

- demonstrate an understanding of power dynamics that underpin relations between people of different races

- use interpersonal skills that acknowledge the integrity and worth of communities and people you work with

- show respect and empathy

- be supportive and non-judgemental

- listen rather than talk.
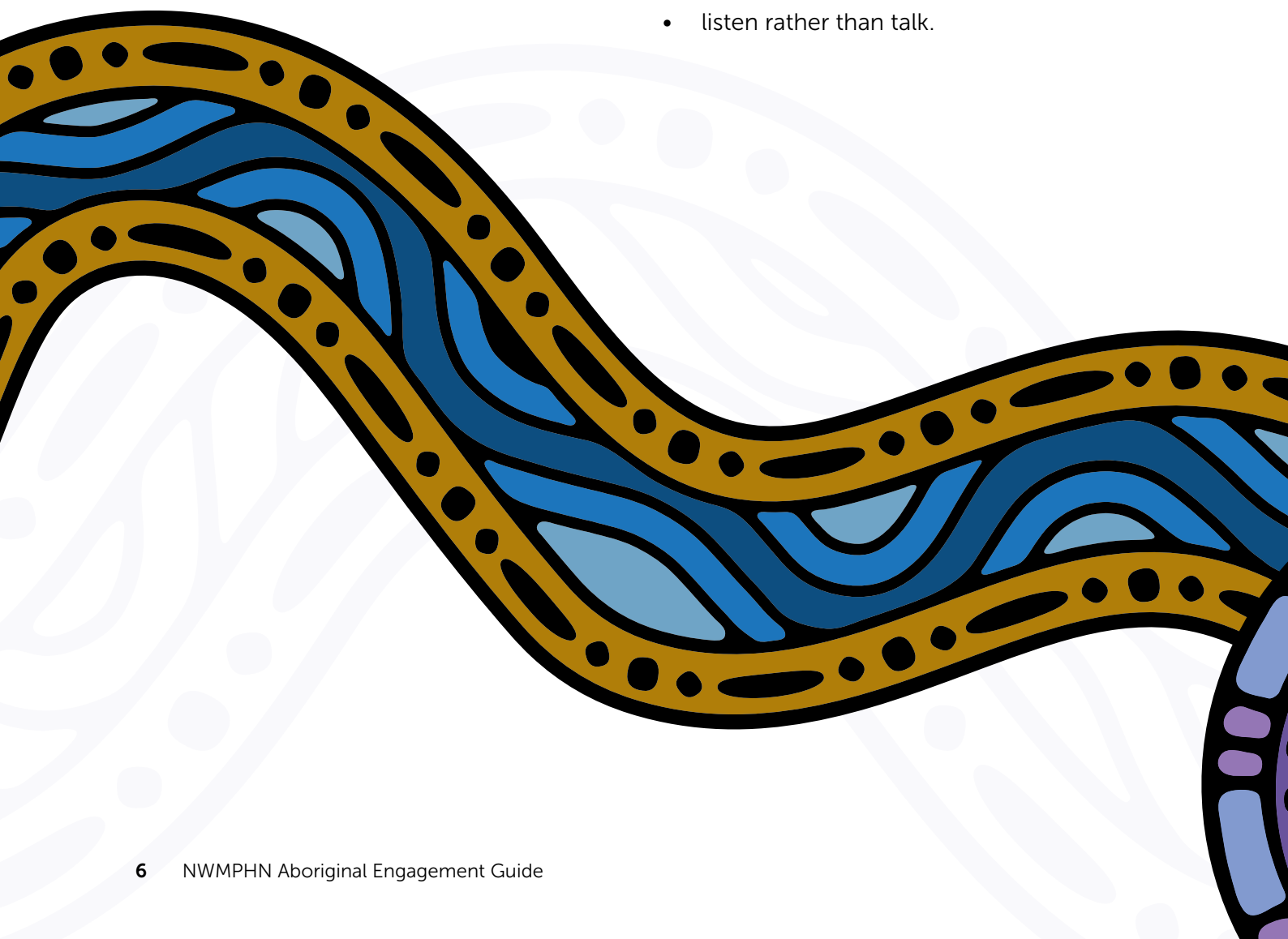
Sovereign relationship

Sovereignty is a complex concept that has had different meanings across time and discipline. In its most accessible terms, sovereignty encompasses the governance and legal framing of the modern state we call Australia. For a nation to be sovereign, it must have a permanent population, defined territory, one government, and the capacity to enter into relations with other sovereign states[1].

When Aboriginal and Torres Strait Islander people use the word sovereignty they are explaining the concept of a connection to Country - since time immemorial – in a way that is understandable to non-Indigenous people. The definition through this lens also includes a spiritual component.

"This Sovereignty is a spiritual notion: the ancestral tie between the land, or 'mother nature', and the Aboriginal and Torres Strait Islander peoples who were born therefrom, remain attached thereto, and must one day return thither to be united with our ancestors. This link is the basis of the ownership of the soil, or better, of Sovereignty. It has never been ceded or extinguished and co-exists with the Sovereignty of the Crown."[2]

An Acknowledgement of Country is a statement of our recognition of Aboriginal sovereignty. Our approach to partnership and engagement is focused on Aboriginal people's knowledge aligning with practices of placing health as a collective community responsibility.

At NWMPHN we have an obligation to be in respectful relationships with Aboriginal and Torres Strait Islander peoples and communities that recognise Aboriginal sovereignty since time immemorial.

It is our responsibility to develop skills and knowledge, guided by the recognition of Aboriginal sovereignty (laws, ways of being, thinking, doing, knowledge and governance as distinct to our own). It is also our responsibility to be aware of our position as visitors or guests in this country and our respectful conduct is our obligation to this sovereign relationship.

An important aspect of sovereignty is that you can only be a sovereign through the recognition of other sovereigns. Our role is to recognise, understand and learn, so that we can be active in a sovereign relationship with Aboriginal and Torres Strait Islander peoples. By doing this NWMPHN creates an organisational environment that doesn't impede or prevent Aboriginal self-determination.

Introduction

In 2021 NWMPHN's Innovate RAP was developed by the Innovate RAP internal working group in consultation with local Aboriginal organisations and Reconciliation Australia.

One of our commitments is to support all NWMPHN staff to work with Aboriginal and Torres Strait Islander stakeholders and organisations in an effective and culturally safe way.

The *NWMPHN Cultural Safety Review Framework* identified engagement and partnership opportunities with Aboriginal and Torres Strait Islander community and organisations as one of the 4 areas NWMPHN should strengthen. One of the objectives of the framework is to transform our ways of working by focusing on developing our skills of working with and being in relation to Aboriginal peoples and their sovereignties.

In addition, the workforce development tool from the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) states partnership as one of the key considerations for organisations.

This Guide is one of the enablers to fulfil our vision to deepen NWMPHN's relationship with Aboriginal and Torres Strait Islander peoples, their knowledge systems, and practices to create genuine health and social value for all.

Policy context

The development of this Guide is informed by national, state, and local policy frameworks. These have been established to provide best practice guidance on approaches that maximise outcomes when partnering and engaging with Aboriginal people and organisations.

This Guide is directly linked to a number of strategic initiatives that support nurturing community partnerships. We are committed to contributing to the development of an interconnected health care system in the NWMPHN catchment through our community and stakeholder engagement that prioritises the total wellness of Aboriginal peoples. We do this by engaging community participants in all that we do as well as partnering with local health organisations, hospitals, human service agencies, universities, not-for-profits, social enterprises and the private sector to support innovation and connectivity.

NWMPHN's corporate frameworks and plans inform and enable this Guide. They include:

- Strategic Plan 2024-2028

- Innovate Reconciliation Action Plan 2021-2023

- Commissioning Framework

- Stakeholder Engagement Framework

- Community Participation Plan 2024-2026

- Access and Equity Framework 2021-24

The *Stakeholder Engagement Framework and Community Participation Plan* apply to NWMPHN staff when engaging with Aboriginal community. However, they must be accompanied by the Aboriginal engagement principles and cultural considerations detailed in this Guide.

Our region's Aboriginal communities

Since time immemorial, the Wurundjeri Woi Wurrung, Boon Wurrung and Wathaurong people have been the Traditional Custodians of the lands across our region. They are 3 of the 5 Nations which make up the Kulin Nations (also includes Dja Dja Wurrung and Taungurong peoples).[3] Within these language groups there are distinct clans or family groups which pre-colonisation shared language but held their own distinct territories where they lived. Bunjil the wedge-tail eagle is the great Creator of the people of the Kulin Nations and after creating the mountains, rivers, animals and humans, took to the sky to watch over his creations.[4]

The population of Aboriginal and Torres Strait Islander peoples in the NWMPHN region is culturally diverse, with many people living off Country in and around Melbourne (or Naarm in Woi Wurrung).*

The 2021 Australian census found that more than 13,770 people identified as being of Aboriginal and/or Torres Strait Islander descent in the NWMPHN region. This is approximately 25 per cent of the entire Victorian Aboriginal population and likely a conservative estimate.

The largest populations reside in the local government areas of Wyndham (2510 residents), Melton (2120), Hume (1870) and Darebin (1440).

Figure 1: map showing the largest Aboriginal resident populations in the NWMPHN region.
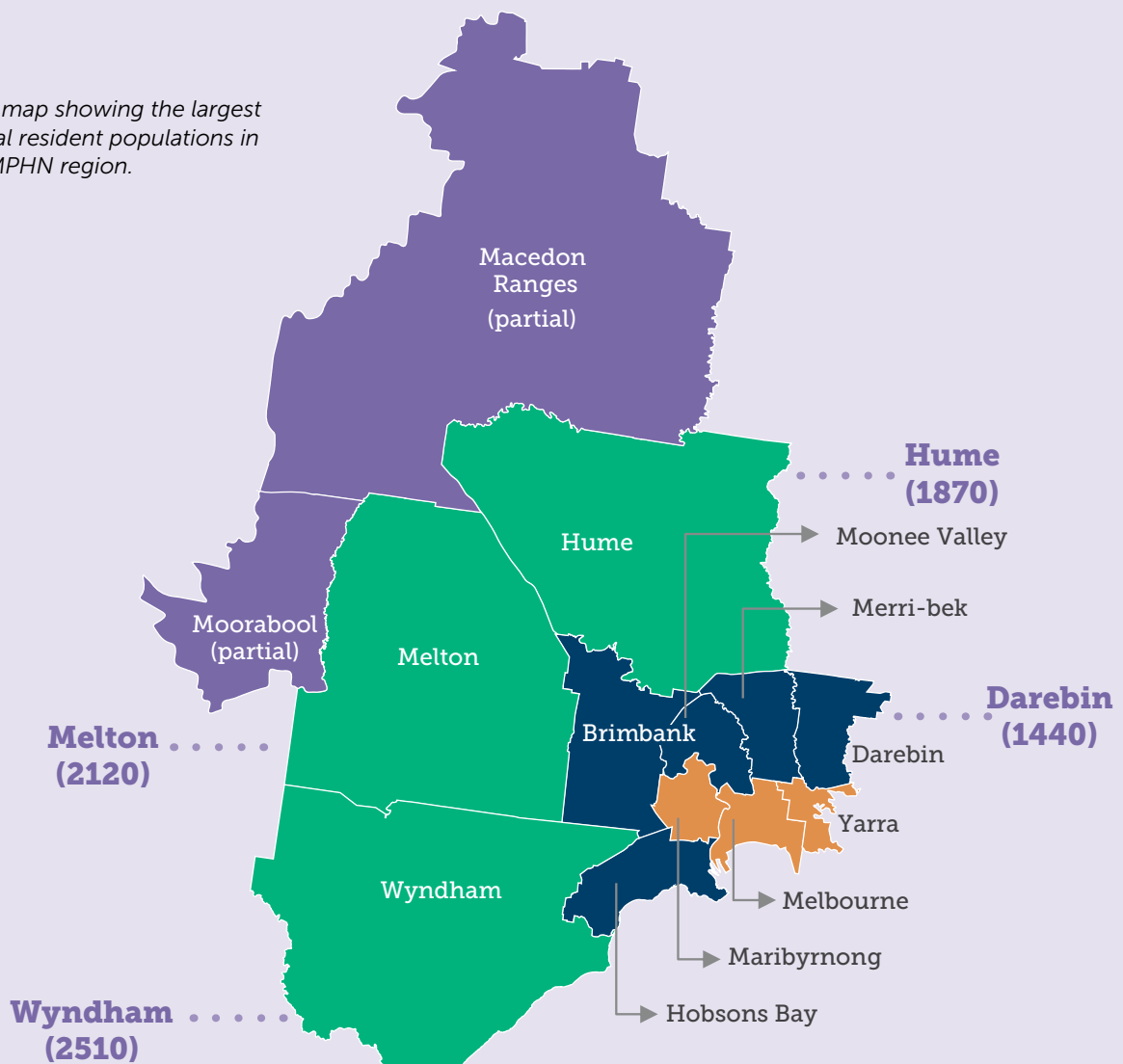
The past decade has seen a significant increase in the number of Aboriginal and Torres Strait Islander people who have taken up residency across the NWMPHN region or have a confidence in identifying as an Aboriginal and/or Torres Strait Islander person.

Despite the ongoing impacts of colonisation, Aboriginal and Torres Strait Islander peoples and cultures are resilient and strong. Aboriginal Community Controlled Organisations and Aboriginal Community Controlled Health Organisations (ACCOs/ACCHOs) across the country work to support the health and wellbeing of their communities.

It is also important that mainstream services are culturally responsive, accessible and integrated with ACCHOs and the wider health service system to appropriately meet the complex needs of Aboriginal and Torres Strait Islander peoples.

Past government legislations and policies have contributed to Aboriginal people being one of the most disadvantaged socio-economic groups in Australia. Statistics also indicate that Aboriginal and Torres Strait Islander peoples experience higher rates of socio-economic disadvantage, family violence and assaults, racism and discrimination, and unemployment. These are all important social determinants of health that influence individual and group differences in health status.

In addition, Aboriginal and Torres Strait Islander peoples have higher rates of mental illness, self-harm, suicide, mental illness-related hospitalisations, drug and alcohol comorbidities, and experience homelessness at a far greater rate that non-Aboriginal people.

* Please note that there are a multitude of spelling and variations of these places, People and Nations.
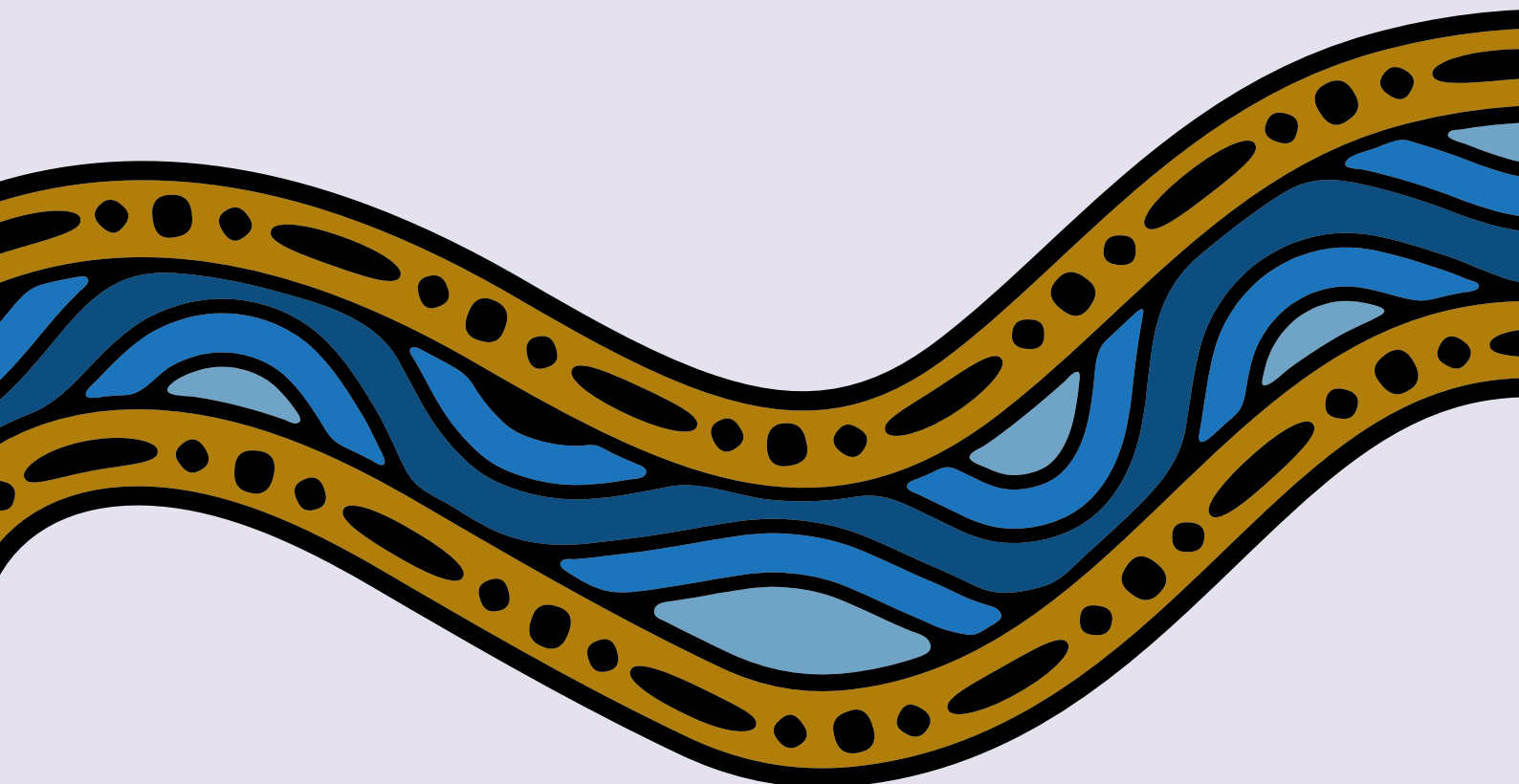
Our principles

Purposeful   **Inclusive**   **Timely**   **Collaborative**   **Respectful**   **Transparent**

The NWMPHN Stakeholder Engagement Framework outlines principles for engaging with all stakeholders, including Aboriginal peoples. In all our interactions we seek to be:

- purposeful
- inclusive
- timely
- respectful and collaborative
- transparent

These principles must be accompanied by Aboriginal cultural considerations and practice principles.

Practice principles

The practice principles support NWMPHN staff's common acceptable behaviours when working with Aboriginal peoples. They are designed to instigate long term transformation and behavioural change as we move towards objectives of cultural responsiveness in which the sovereignty of Aboriginal peoples is the foundation of how we respond.

The practice principles described below outline our approach to working alongside Aboriginal peoples and their knowledge systems. They are held within a structure of Recognition, Establishing and Responsiveness (RER), with the aim of developing capacity to respond to the relationships that emerge from cultural safety into practices of cultural responsiveness. The principles that guide our approach include:

Understanding our role in Aboriginal self-determination

Aboriginal self-determination is a practice which is grounded in NWMPHN's ability to be actively responsive in relation to it.

The Australian Human Rights Commission defines self-determination for Australia's First Peoples as an ongoing process of choice to ensure that Indigenous communities can meet their social, cultural and economic needs.[5]

Self-determination is not about creating a separate state. Rather it is based on the simple acknowledgement that Aboriginal and Torres Strait Islander peoples are Australia's First People, as was recognised by law in the historic Mabo Case.[6]

Principle in Practice:

NWMPHN prioritises commissioning and partnering with ACCOs where appropriate, to support the health and wellbeing of Aboriginal people and communities. When commissioning ACCHOs, NWMPHN frames the relationship as a partnership and puts every effort into collaborating on Key Performance Indicators (KPI) development, program implementation, reporting and evaluation.

At times this can be difficult given the nature of the funder-provider relationship. However we work to ensure Aboriginal self-determination is at the centre of the work we do.

Cultural responsiveness

This describes non-Aboriginal people responding appropriately to Aboriginal people's cultures and knowledges as embedded organisational conduct.

Principle in Practice:

An organisation worked closely with 4 ACCOs in rural Victoria on a 3-year project. The first year was dedicated to building relationships and trust with the local ACCOs, the second year was project implementation. At the end of year 2 a well-respected member of one of the communities sadly passed away. To ensure Sorry Business protocols were upheld, the organisation extended reporting submission timelines and advocated to the funder that extensions were necessary and appropriate.

Continuous improvement (monitoring, accountability and transparency)

This commits us to lead with a mindset centred on Aboriginal health, acknowledging that it is everyone's business.

Principle in Practice:

NWMPHN contract managers can assess if their commissioned programs are providing services to Aboriginal and/or Torres Strait Island communities. If this is not able to be determined, the contract manager can work with the service to update reporting requirements.

This information can be used to assess if programs are suitable and acceptable to Aboriginal individuals and communities. If not, the contract manager can work with the provider to understand develop a Quality Improvement plan. This is also an opportunity for NWMPHN to encourage organisations to develop Reconciliation Actions Plans, complete cultural safety training and review their processes against best practice.

Aboriginal people's knowledge and culture is an organisational benefit (always learning)

This is about empowering leaders and staff to progress a culturally safe environment by bringing the organisational approach into alignment with Aboriginal people's knowledges and sovereignty, which is recognised as organisational strength and benefit.

Principle in Practice:

NWMPHN commissions alcohol and other drugs, mental health and chronic conditions services within Aboriginal organisations. We ensure our commissioning and contract management aligns with the ACCHO's commitment to meet the needs of their communities. Where appropriate, we flex our contract and relationship management approach to ensure self-determination and cultural protocols are upheld.

Agile and generative (innovative approaches)

This maintains and develops flexible ways of working that allow the organisation to pivot in relation to Aboriginal people's self-determination and reflect upon this practice to generate innovative ways of being in the sovereign relationship.

Principle in Practice:

NWMPHN engaged an Aboriginal organisation to develop COVID-19 videos for community. To support this, we developed flexible contract deliverables to accommodate time for the format and topics of the videos to be designed and driven by the community.
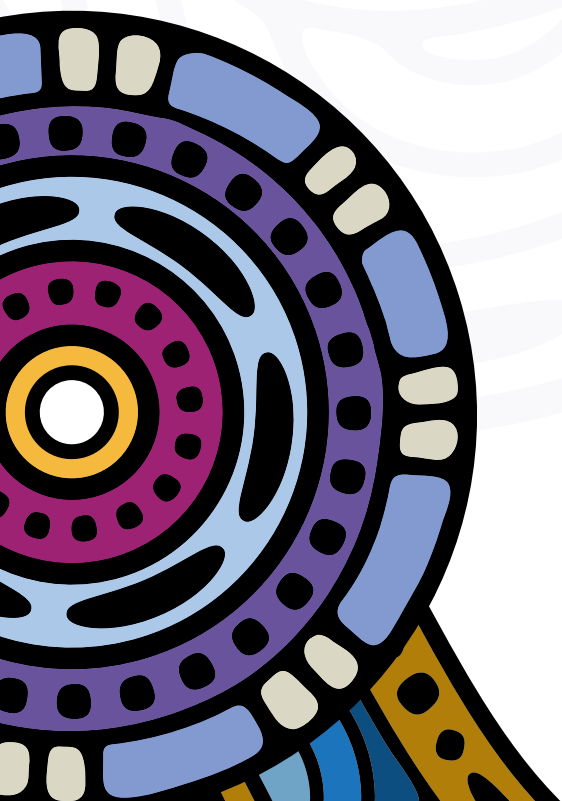
Partnerships and relationships

This is distinctly about our skills in being able to be in productive strengths-based relationships with Aboriginal peoples. We do this in support of advancing the organisation's maturity by recognising what work we can do internally (our skills development) and identifying (understanding) when we need to partner with Aboriginal peoples and non-Aboriginal organisations and when we must make our own decisions based on our sovereign obligations.

Principle in Practice:

NWMPHN recognised that we are unable to complete our Innovate RAP without advice, input and support from Aboriginal people and communities across our region. Actions to address this include engaging Bundyi Girri Consultancy to support us in developing and completing our final Innovate RAP outputs/outcomes, engaging the Wurundjeri Woi Wurrung Aboriginal Corporation to support us in updating our Welcome and Acknowledgement of Country Guidelines, and engaging VACCHO to develop a workforce strategy for our region. We are committed to developing and maintaining relationships with organisations and communities across the region that are mutually beneficial, respectful and recognise the strength and expertise of Aboriginal peoples.

Strengthening the capacity of ACCHOs

This acknowledges that our work represents an opportunity for working with the ACCHO sector to realise its vision, and to facilitate and engage in mutually productive partnerships.[7]

Principle in Practice:

NWMPHN works closely with ACCHOs in our region and seeks out funding opportunities. In addition, we provide professional development opportunities to support and maintain a strong Aboriginal workforce in ACCHOs and mainstream services.
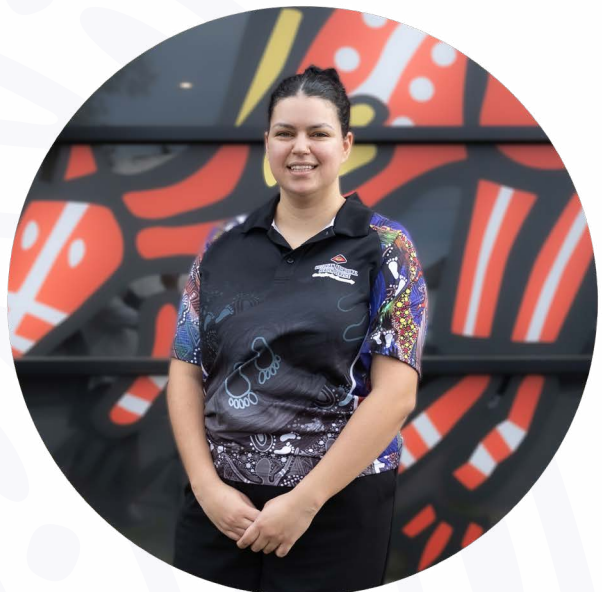
Mahlia Peachey, Operational Lead at the Victorian Aboriginal Health Service in St Albans.

Our engagement process

What is engagement and spectrum of engagement?

NWMPHN's 2022 Community Participation Policy defines engagement as the process arising when "community members are meaningfully involved in decision-making about health policy and planning, care and treatment, and the wellbeing of themselves and the community".

Community engagement describes the ways in which we interact with partners, stakeholders and wider community, and includes activities that are spontaneous and unplanned.

Engagement takes place across a range of business levels and issues. These include participation in decision-making, and the actions and outcomes that arise. It also involves building and maintaining relationships, and empowering communities to increase their capacities for planning, action and learning.

Engagement with all communities must be sustained and sustainable. Doing this with Aboriginal and Torres Strait Islander communities is especially important, given past injustices and continuing inequalities. These relationships must be predicated on integrity and trust, aimed at realising shared goals.

Broadly, the degree to which community members participate in engagement reflects the degree to which they might influence process and outcomes.

The International Association of Public Participation (IAP2) developed a spectrum defining community participant involvement with engagement processes. It ranks them from 'inform' to 'empower', depending on the degree to which participants can influence the definition of the area of concern, the decisions to be made, and the outcomes achieved.

This measure is widely used across industry, government and community. NWMPHN and its partners, such as health organisations, may have engagement activities taking place across all levels of the spectrum simultaneously. Noting that 'engagement' is not a synonym for 'consultation'.[8]

"Engagement is an ongoing process or conversation that builds trust and relationships and is seen as an interaction between groups of people working towards shared goals… There needs to be honesty about the nature of the engagement, opportunities for a diverse range of opinions to be expressed, time for deliberation, and for the people involved to actually have influence over how they will participate, and the outcomes determined."[9]

The following First Nations Community Engagement Scale (Figure 2) is based on the IAP2 spectrum with the adaptations of involving, partnerships and self-determination proposed as methods of First Nations community engagement.[10]

	Inform	Consult	Involve	Partnership	Self-determination
Goal	To provide community with information that helps to understand the problem, alternatives, opportunities and/or solutions and the impact.	Community feedback on the issue, analysis or decision. Communities know what they need and what will work. Assists with making informed decisions. Active listening required.	Involving community early in the process to ensure community views are understood and considered. Build trust early through ongoing community connection (for example, through an advisory committee).	Partnering with community in decision-making and co-creating for solutions. Drawing on community knowledge and expertise, sharing tools and knowledge to deliver outcomes.	Place decision-making with the community. Community drives the decisions and the outcomes. Supports self-sufficient and sustainable communities. Transfer of resources and power to communities.
Engagement commitment	To keep the community informed.	To keep community informed, listen to and acknowledge issues, provide feedback as to how input affected the decision.	To ensure concerns and aspirations are directly reflected in the alternatives developed and to provide feedback as to how input affected the decision.	To seek advice and innovation from the community to formulate solutions and incorporate the advice into alternatives to the maximum extent possible.	To implement what the community decides.
Appropriate when	A decision has already been made. Factual information is needed. The community needs to know the results.	The purpose is primarily to listen and gather information. Policy decisions are still being shaped and discretion is required.	We need 2-way information exchange. Individuals and groups will have interest in the issues and likely be affected by the outcome.	We need the community to talk to one another regarding the issues. There is capacity for the community to shape policies and decisions.	We want to empower the community to manage the process. The community has accepted the challenge to develop solutions themselves. We are ready to assume the role of the enabler.

Figure 2: First Nations Community Engagement Scale

Key steps of engagement

The steps of engagement with Aboriginal peoples and communities described below are aligned with NWMPHN's principles of stakeholder engagement.

Purposeful

Step 1 - Consider whether the topic, issue or problem is a priority issue and/or has specific implications for Aboriginal peoples.

Through initial scoping determine whether the problem you are trying to address has specific implications for Aboriginal peoples or is a general health problem that may also impact Aboriginal peoples.

If the problem has direct implication for Aboriginal peoples, engagement with individuals and organisations should be conducted. Aboriginal peoples and organisations should have leading roles in defining the problem and identifying the solutions.

For example, a parenting intervention for newly arrived people in Australia isn't likely to impact other communities across our region. However, an intensive quality improvement project for cancer screening *will* or *should* impact Aboriginal peoples and so they should be considered and engaged.

Step 2 - Scope relevant issues for Aboriginal peoples

These could include health inequalities, particular risks or cultural considerations. Some potential data sources include:

- NWMPHN Health Needs Assessment 2022-25.

- The Australian Bureau of Statistics and the Australian Institute for Health and Welfare - provide data on the health of Aboriginal Australians, against national key performance indicators (KPIs).

- The Lowitja Institute - search aids to help explicitly identify studies involving Aboriginal and Torres Strait Islander peoples.

- The Cochrane Library – has a special collection on Aboriginal health.

- NWMPHN Aboriginal health team.

Inclusive

Step 3 - Seek Aboriginal representatives

The diversity within Aboriginal Victoria and Aboriginal Australia needs to be taken into consideration when seeking representation. This includes recognising diversity and differences in urban, rural or remote living, gender, class, language, literacy, sexuality and disability.

Aboriginal peoples can often feel a significant load to contribute to various initiatives and projects. Before you reach out be aware of the load and consider how you can lessen it, for example by reviewing existing work and data.

Potential ways of seeking Aboriginal representatives:

- List of local Aboriginal organisations (see page 28).

- NWMPHN People Bank.

- NWMPHN providers and stakeholders (ask Aboriginal health team).

- Aboriginal Health Expert Advisory Group (EAG).

More information about finding community members can be found in the NWMPHN *Communication Channels for finding community participants* resource.

Respectful and collaborative

Step 4 - Start a positive conversation

Building trust and strong relationships takes time. It is important to start developing relationships from the beginning of the activity and maintain them throughout the process. Rushed, one-off consultations without direct input from Aboriginal people don't work. The conversations need to be led by Aboriginal representatives. The engagement needs to be built on the understanding of the historical, cultural and social context and power imbalances as well as respect and the commitment to being in relation to Aboriginal peoples as sovereigns. Cultural safety and responsiveness are essential for working effectively with Aboriginal people and communities. It is also essential that the engagement is underpinned by the 'strengths-based' lens that recognises the resilience and assets of Aboriginal people and communities. At this step it is also appropriate to agree on how you should and can report outcomes and outputs back to community and stakeholders. More on this in Step 7.

Step 5 - Engage respectfully with communities and build relationships

Local protocols, such as laws governing social interaction, and kinship relationships, should be considered when engaging with Aboriginal communities. It is advisable and respectful to take the time to learn these. It is also important to be aware of local names for lands, area-specific history and the languages spoken. It is important to engage key people such as Elders and community leaders in the early stages, and to respect their knowledge and advice throughout the process.It is also important to remember that one Aboriginal person cannot speak for all Aboriginal people, not all Aboriginal people are cultural knowledge holders, and there may be topics that can't be addressed by certain people at certain times.

Timely

Step 6 - Allow adequate time and resources

Developing meaningful relationships and trust takes time. Specific engagement activities may require additional time and resources. These need to be factored into the project's budget and timelines.

This includes having adequate budget for remunerating key stakeholders for their contribution to our activities, and any expenses incurred such as transport to an event or meeting. Refer to the Stakeholder Reimbursement Policy for more information.

Transparent

Step 7 - Consider how you can communicate the outcomes of the engagement effectively

It is important to provide information about the outcomes of the engagement back to participants and organisations and share how their input has been considered and actioned.

Some ways in which this might be appropriate include:

- Completing the Community Feedback Report template and submitting to key stakeholders.

- Holding workshops and meetings across the project or engagement to share progress and outcomes.

- If approved, share outcomes across social media and other media channels.

- If approved, share outcomes on organisational websites.

- Agreeing how you will report back and promote outcomes should be included in the initial steps of engagement.

When do we engage with the Aboriginal community?

NWMPHN delivers a diverse range of activities and services. We develop engagement strategies based on the level of impact, interest, and influence. Certain activities directly impact Aboriginal people and require targeted engagement with them.

At NWMPHN most of the engagement takes place through Aboriginal organisations rather than direct engagement with communities.

Here are some examples of types of engagement with Aboriginal people and organisations undertaken by NWMPHN staff.

Commissioning

Commissioning, guided by a set of principles and a framework, is at the core of NWMPHN's work. It allows us to implement needs-based, locally appropriate, patient-centred and evidence-based solutions to address the health needs of our community.

It involves the ongoing process of assessing community requirements, determining desired outcomes, designing and implementing solutions, and monitoring their effectiveness.

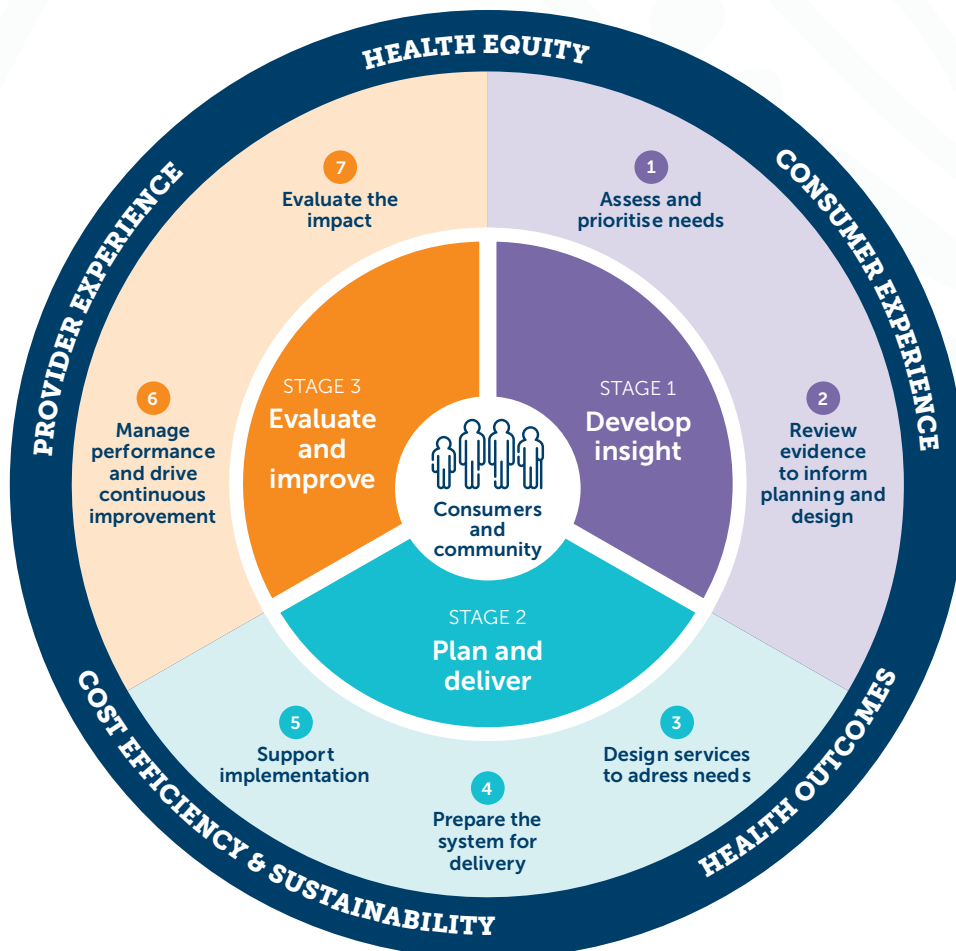Stakeholder engagement occurs throughout all stages of the commissioning cycle.

Figure 3 - NWMPHN Commissioning Framework

Examples of how we engage with Aboriginal people and organisations through commissioning include:

- **Health intelligence and understanding needs** – consultations with Aboriginal community members and organisations to understand the needs and challenges faced in relation to health issues.

- **Planning and design** – engagement with Aboriginal community members and organisations to design the best model that will address the identified need.

- **Procurement** – getting input from Aboriginal community members or organisations to draft tender specifications, inviting Aboriginal community members or organisations to be part of tender evaluation panels.

- **Contract management** – getting input from Aboriginal community members and/or organisations into developing key performance indicators, inviting Aboriginal community members or organisations to be part of project specific advisory group.

- **Evaluation and review** – inviting Aboriginal community members or organisations to be part of the evaluation process.

Governance

We acknowledge that it is part of an ongoing maturity of our organisation to build our capacity to govern with and respond to Aboriginal practices of governing and decision making.

Aboriginal people and organisations participate in our governance structures in several ways, including:

- Clinical Council

- Community Council

- Aboriginal Health Expert Advisory Group

General practice support

NWMPHN quality improvement program officers engage with ACCHOs that offer general practice services. Quality improvement program officers provide support and resources to general practices to deliver integrated, person-centred care that is comprehensive, accessible, safe and coordinated, as well as quality improvement activities aimed at improving inequalities in health and wellbeing experiences by Aboriginal people. See our Quality Improvement Workbook for General Practice: Closing the Gap for reference.

Cultural considerations

Historical context

Since colonisation began, government legislation and the practices thus engendered have played key roles in the deep and ongoing socioeconomic disadvantage experienced by Aboriginal and Torres Strait Islander communities.

The effects of these policies as well as colonisation have left lasting inter-generational impacts and trauma. They include:

- dispossession of land
- family fragmentation
- mental health issues
- poverty
- racism
- unemployment
- alcohol and substance misuse
- over-representation in the criminal justice system.[11]

It is essential that we understand and consider those experiences before we engage with Aboriginal people and organisations. It is also important that we actively acknowledge and recognise the resilience of Aboriginal and Torres Strait Islander peoples in the face of colonisation and the immense strength of community and culture.

Acknowledge and address unconscious bias

Unconscious biases are deeply rooted in social stereotyping, formed by individuals outside their own conscious awareness about certain groups of people. Sometimes referred to as implicit bias, unconscious bias can lead to instinctive assumptions and can be present even in people who genuinely believe they're committed to concepts of equity and social justice. According to a recent study by the Australian National University, most Australians tested for unconscious bias hold a negative view of Aboriginal peoples which can lead to widespread racism.

People's bias is regardless of gender, age, ethnicity, occupation, religion, education level, geography or political leanings, according to the findings.[12] It is important to be aware of how personal unconscious bias can affect your professional practice.

More information on unconscious bias can be found in a 2020 ABC article.[13]
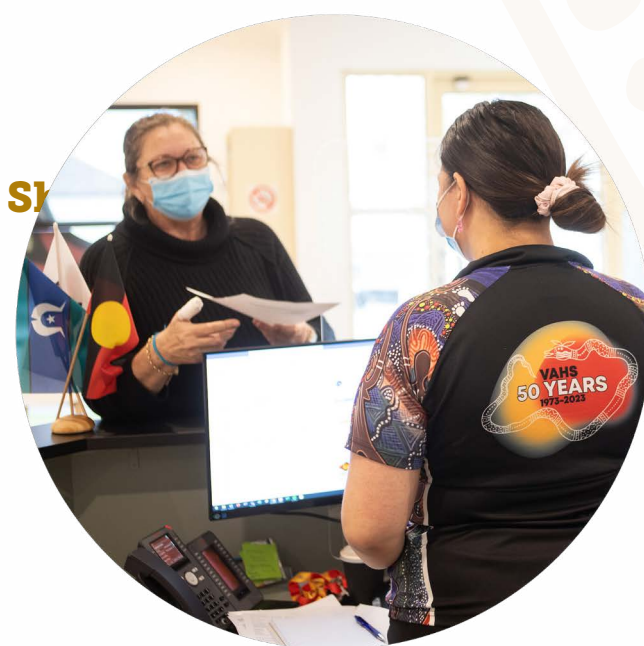
Shainayer Peachey, at Victorian Aboriginal Health Services, St Albans

Acknowledging power imbalances is important. A key right and principle of the United Nations Declaration on the Rights of Indigenous People (UNDRIP) is Aboriginal people being a part of decision-making which affects them.

Before you engage with Aboriginal people, consider the following questions:

- Do current systems allow for this contribution?

- Who has final authority or call on these decisions?

- How is data shared?

- Who owns the data?

Addressing these questions assists in understanding power and control and how to create an environment for shared power and control. For example, don't state a collaborative approach and partnership model if you can only consult and inform.

Recognition of diversity

There are many Aboriginal clan and languages groups in Victoria, each with its own set of lores, practices, kinship and governance. Recognising this diversity is crucial to engagement. A one size fits all approach is not appropriate. Understanding this distinctiveness and tailoring approaches is a fundamental to engagement that is culturally safe and appropriate.

Respect for cultural protocols

Acknowledgement of Country

Reconciliation Australia states: "An Acknowledgement of Country is an opportunity for anyone to show respect for Traditional Owners and the continuing connection of Aboriginal and Torres Strait Islander peoples to Country."[14]

It functions as a cultural protocol that implicitly outlines who you are and how you fit into a sovereign relationship with Aboriginal and Torres Strait Islander peoples. It is also about responding to the invitation to be on Country, and the obligations and laws you need to consider when doing so.

There is no accepted universal wording for an Acknowledgement of Country. There are, however, some protocols that need to universally respected, such as acknowledging ancestors and Elders, and referring to Country by name. These imply an engagement that is all-encompassing rather than just person to person.

Research

Before delivering the Acknowledgment do some research on the Country you are acknowledging. It is appropriate to acknowledge and name the Country you are on and pay respects to the Traditional Custodians.

An Acknowledgement of Country can be offered by any person and is given at the beginning of a meeting, speech, or event. Including recognition of Aboriginal and
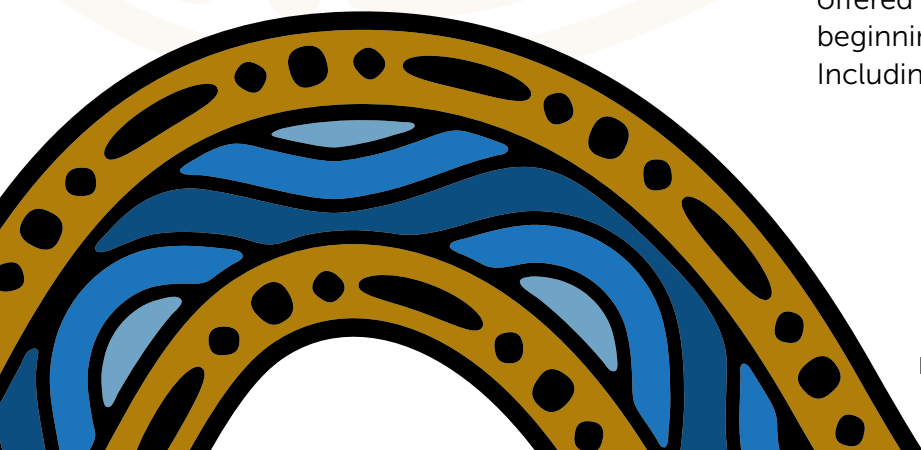
Torres Strait Islander peoples contributes to ending the exclusion that has been so damaging. Incorporating welcoming and acknowledgement protocols into official meetings and events recognises Aboriginal and Torres Strait Islander peoples as Traditional Custodians of land and shows respect.

Consider how the Acknowledgement of Country can be embedded into the way of doing business? How can the sentiment and commitment be carried through your everyday work and life?

Difference between Welcome to Country and Acknowledgment of Country

A Welcome to Country and an Acknowledgement of Country are not the same thing and it is important to know and respect the difference.

An Acknowledgement is a mark of respect and a response to the sovereign act of the Welcome. It can be delivered by anyone. Only a Traditional Custodian of the Country you are on can deliver a Welcome. As demystified by Scott Kneebone, a Bangerang man based in Canberra:

> *"A Welcome to Country is like if you're hosting a dinner in your home. You do a welcome and say thank you for coming to my home. An Acknowledge of Country is like if you're a guest in someone's home. You would say thank you for having me."[15]*

More information about the Acknowledgment of Country can be found in NWMPHNs Welcome to Country and Acknowledgement of Traditional Custodians Guideline.

Men's and Women's Business

Consider Men's Business and Women's Business when planning your engagement as they are both very important and sensitive issues for Aboriginal peoples. Their meaning and protocols also diffe between different family and cultural groups. Pre-engagement research to identify different business will indicate if your team must include male and female project workers or consultants.

For more information refer to:

- Parks Australia Men's and Women's Business

- Deadly Story, Men's and Women's Business

Sorry Business

When engaging with Aboriginal peoples, consider and respect the cultural protocol of Sorry Business. It is very important to recognise that in many communities there is an expectation that funerals involve the whole community and not just the immediate family and friends. As with Men's and Women's Business, protocols can differ between families and cultural groups.

In some communities, Sorry Business prohibitions extend to not conducting activities, events, meetings or consultations during the observance of Sorry Business, and this must be respected by all those working with Aboriginal organisations and communities.

To learn more about Sorry Business, listen to this ABC *Life Matters* podcast.

Cross-cultural communication

Respect and sensitivity

When engaging with Aboriginal people, show your respect for Elders, Country, animals, and ancestors. An Elder may not necessarily be an older person. An Elder may be a person young in years but who holds significant community knowledge and is held in high esteem by the community. In some communities becoming an Elder is not voluntary. It is a status bestowed by others. In some circumstances, too, communities can entrust decision-making responsibilities to individuals but this does not automatically mean that person is considered an Elder.

To facilitate constructive and respectful engagement, it is important to make sincere efforts to determine the status and role of the community members with whom you meet.

Be aware, too, that there are protocols that pertain to the matter of death within a community. These may govern the use, or not, of the deceased person's name, and which activities, if any, can take place during the subsequent Sorry Business period.

Use of the term 'Aboriginal'

When referring to Aboriginal and Torres Strait Islander people, it is appropriate to refer to both so as not to generalise and combine two distinct cultural groups. We have combined the groups and use the term 'Aboriginal' in this document to encapsulate the many distinct and connected Aboriginal and Torres Strait Islander cultural and language groups residing, working or accessing services within the NWMPHN region and beyond. It is not appropriate to use terms such as Indigenous or the acronym ATSI.

Some Aboriginal and Torres Strait people may identify themselves as 'First peoples', or by their cultural group such as Koori, Wiradjuri, Murri, Noongar. If specified, it is appropriate to mirror this language regarding that person.

In 2022, NWMPHN's Aboriginal Health Expert Advisory Group advised that it is appropriate and preferred that NWMPHN staff use the term 'Aboriginal and Torres Strait Islander people' unless otherwise instructed.

Practical tips

Relationship building

Relationship building and developing strategies that support and sustain culturally respectful relationships should be considered the cornerstone to successful culturally competent engagement with Aboriginal Islander people and organisations.[16]

Achieving this requires putting some key ideas and protocols in place.

Acknowledge power imbalances.
The history and effects of colonisation frequently place Aboriginal people in unequal power relationships with non-Aboriginal organisations. This can be partially rectified to strategies such as meeting on Country, and allowing Aboriginal attendees to set the tone, direction and content of meetings.

Engage Aboriginal people right at the start of projects and processes. This is not only respectful, but helps to build a sense of community ownership of projects.

Allow time for relationships to build.
It is important to recognise that establishing trust and building cooperation takes time – and that this process can't be defined by a calendar schedule. Recognise, too, that potential partner organisations are often busy, and dealing with huge workloads and funding challenges. Even if they want to engage with you quickly, they may not be able to do so.

Be prepared to be rebuffed.
Not all Aboriginal people or organisations will welcome your approach immediately. Be patient and flexible, and be prepared to adjust your practice in response to feedback. Don't be surprised if it takes some time before staff in Aboriginal organisations take your interest seriously. Many have witnessed several previous overtures from non-Aboriginal organisations that have faltered or petered out.

Be consistent in your contacts.
Have one, or a small number, of contacts in your team. Consistent contacts and long-running conversation very much help to build solid relationships.

IPC Health, Elders lounge Photo by Alex Rojas
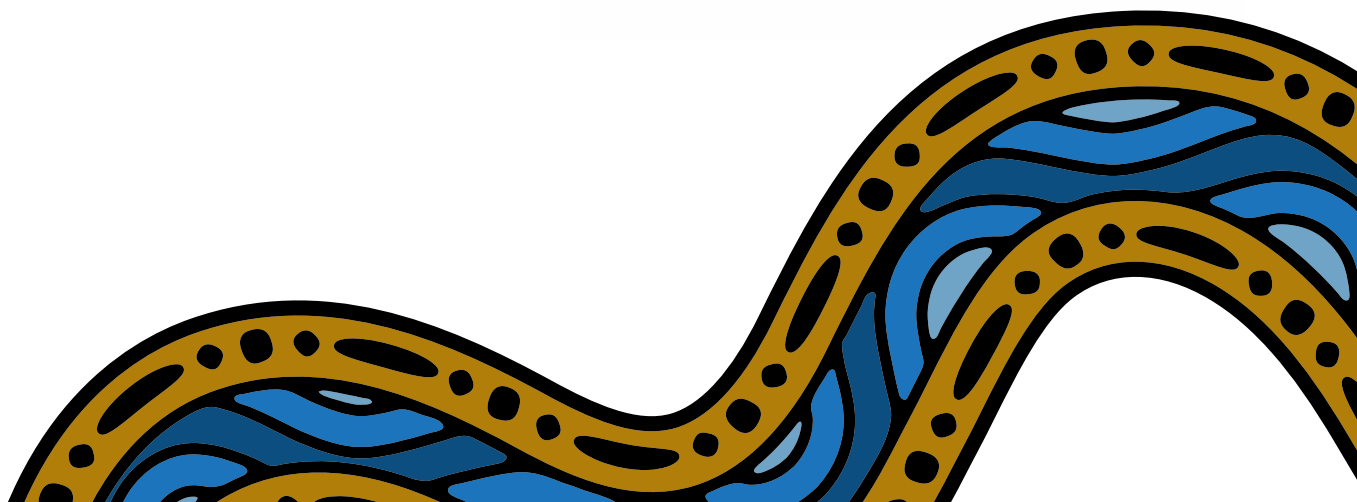
Getting to know your local community

Getting to know your community is an essential part of establishing trust and credibility with in it.

- Find out who are the Traditional Custodians of the land your town, service and community are on. What other Aboriginal peoples or groups live in your location? What are the local Aboriginal community-controlled organisations in your area? What services are currently being offered to the local Aboriginal community? What towns, suburbs or areas are commonly favoured by the local Aboriginal community?

- Assess what relationships or connections your organisation – or staff within your organisation – already have with local Aboriginal organisations, and what has been learned from these connections.

- Initiate contacts and relationships with local Aboriginal community-controlled organisations.

- Let your local community get to know you.

Meetings and consultations

Consultations or meetings with Elders and leaders in Aboriginal communities is essential in developing strategies to increase participation of Aboriginal people in health.

Observing appropriate protocols when working with Aboriginal people, including Elders and wider communities, is critical to establishing positive and respectful relationships. Consultation should always be seen as a 2-way process, with both parties learning together and from each other.

- Regular meetings can assist with building trust and relationships.

- Face-to-face meetings are preferred.

- When proposing a meeting, be clear on purpose and level of engagement and influence involved.

- Before setting up a meeting, be clear about what you need from attendees. For example, do you need additional information? Do you want advice or are you asking them to participate in a meeting with others?

- Look to 'yarning style' meetings. Having a fluid agenda and letting Aboriginal organisations and people to identify topics and issues is preferrable.

- Provide as much information as possible about the topic or project you are trying to expand upon.

- Share any relevant information to identify potential areas of mutual interest on which to work together.

- Be aware of any subjects that may be culturally sensitive, such as suicide.

Aboriginal organisations and networks

Aboriginal community control in health services is defined as 'a process which allows the local Aboriginal community to be involved in its affairs in accordance with whatever protocols or procedures are determined by the Community'.

An Aboriginal Community Controlled Health Organisation (ACCHO) is a primary health care service initiated and operated by the local Aboriginal community to deliver holistic, comprehensive, and culturally appropriate health care to the community which controls it, through a locally elected Board of Management.

ACCHOs understand the position and role they play in supporting their local Aboriginal Torres Strait Islander communities to live better lives. The ACCHO approach has evolved out of an inherited responsibility to provide flexible and responsive services that are tailored to the needs of local Aboriginal and Torres Strait Islander communities. ACCHOs provide many services over and above their funded activities to ensure their community members gain the services they need.

In line with their holistic health approach, ACCHOs support the social, emotional, physical, and cultural wellbeing of Aboriginal and Torres Strait Islander peoples, families and communities.[17]

List of local ACCOs, ACCHOs and other Aboriginal organisations:

- Aborigines Advancement League Inc.
- Aboriginal Community Elders Service (ACES)
- Aboriginal Services Network of Wyndham-Hobsons Bay (ASNoW)
- Aboriginal Wellness Foundation - Wyndham
- Dardi Munwurro
- Djirra
- Kirrip Aboriginal Corporation
- Victorian Aboriginal Community Services Association (VACSAL)
- Victorian Aboriginal Child Care Agency Co-operative (VACCA)
- Victorian Aboriginal Community Controlled Health Organisation (VACCHO)
- Victorian Aboriginal Health Service (VAHS)
- Victorian Aboriginal Legal Service (VALS)
- Koling wada-ngal Committee
- Wurundjeri Cultural Heritage Council
- Deadly Western Connections

Significant cultural events

This is a list of significant cultural events that are important to Aboriginal people and communities. NWMPHN staff are encouraged to participate where appropriate and to consider these dates when planning engagement activities. National Reconciliation Week (May-June) and NAIDOC Week (July) are usually very busy for Aboriginal people and organisations, consider those dates when planning your engagement as there might be limited capacity to participate.

- Reconciliation Week (27 May-3 June)

- Mabo Day (3 June)

- NAIDOC week (second week July)

- National Close the Gap Day (3rd Thursday of March)

- National Sorry Day (26 May)

VAHS Epping

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