Establishment of an Aboriginal Advocacy Agency

Submitted to the Aboriginal Policy Unit: AboriginalPolicy@dpc.wa.gov.au

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Introduction
The Health Consumers’ Council (WA) Inc. was established in 1994 with the purpose of giving a voice to health consumers in Western Australia and improving health outcomes by encouraging and supporting consumer engagement and involvement in health services. In 2006 HCC was funded to run an Aboriginal Advocacy service to address the concern about having an independent organisation to provide feedback on all health services, including Aboriginal Community Controlled organisations. While the Aboriginal-specific funding didn’t continue past 2016, HCC has retained an Aboriginal Engagement program as a small part of our core funding as we are committed to equity in health care and believe that health outcomes of Aboriginal people need to continue to be a focus and priority.

What do you think of the Government’s proposal? Do you have comments or suggestions?
Historically, many decisions made by governments have had a profound and direct impact on Aboriginal people, and often despite targeted and concerted efforts of Aboriginal people, Aboriginal organisations and their allies, the result of these policies and decisions on Aboriginal people are not overseen or monitored. HCC is therefore supportive of a government initiative to create a new, independent office solely focused on monitoring and reporting on the policies and directions of Government departments in an Aboriginal context.

It is well documented that people who are from Aboriginal and Torres Straight Islander backgrounds continue to have poorer health outcomes than Non-Indigenous Australians due to an experience of complex and historical inequity. The cumulative effects of poorer health outcomes continue to contribute to further social and political disadvantage for Aboriginal and Torres Strait Islander people. We believe an office with the statutory power to investigate and report on systemic issues Aboriginal people can face in our health system would be beneficial in helping to reduce inequity and shining a light on the shortcomings within our system with the aim of quality improvement for consumers.

Importance of considering individual advocacy
Based on our organisation’s long history of supporting health consumers, we believe that the Government also needs to better support Individual advocacy services to Aboriginal and Torres Strait Islander people, to ensure that the immediate and often dire situations people can find themselves in, can be addressed.

Systemic advocacy is vital in long term improvement; however, it needs to be acknowledged that our systems are so fractured that people often cannot wait for systemic change, they need and deserve individual help now. We acknowledge the position of the discussion paper in stating that individual advocacy lies with the specialist organisation, however due to funding/role constraints and the complex entanglement of systems who service consumers this is sometimes messy and ineffective for the consumer.

We recommend forming a network of the current agencies like ours who provide individual advocacy to ensure that this vital support is enhanced and that it continues to inform the systemic advocacy strategies. We also believe there needs to be a strategy gather grassroots, representative consumer views on issues Aboriginal people are experiencing, informing priority areas of systemic change. This will also provide an important monitoring mechanism of community concerns on individuals once systemic and policy changes have been implemented by the office.
How should Aboriginal people be involved in choosing the right person?
We believe that for significant and meaningful change to occur, the office needs to encourage the active participation and contribution of Aboriginal and Torres Strait Islander consumers. Aboriginal people who have a lived personal experience are the best people placed to inform and achieve the functions of the office as proposed in the discussion paper. The office should be provided with adequate resourcing to design culturally appropriate responses to barriers and inequities that contribute to poorer outcomes experienced by their people. Solutions and recommendations need to be heard and implemented in terms of real practice and change within the system for the benefit of consumers.

What should the name of the organisation be?
We trust that the Aboriginal and Torres Strait Islander people who are appointed to enact the function of the new office will choose an appropriate title for the office.

Conclusion
In summary, the Health Consumers’ Council WA (Inc) is supportive of an independent, statutory office to provide greater accountability, coordination, consumer focussed service delivery of Aboriginal people, and to address the ongoing inequities experienced by Aboriginal people within all political and social systems. In addition, we recommend consideration of Individual Advocacy Services for Aboriginal People to support consumers in the here and now, and to accurately inform development, implementation and review of the function of the office. We support the active contribution and participation of Aboriginal and Torres Strait Islander people holding meaningful positions of power within the office, and ongoing resourcing to create substantial, grass roots change for the current systemic inequities that affect Aboriginal people.

We welcome and invite collaboration with the new office to discuss health system issues that affect Aboriginal people, based on our consumer input.

Please contact the undersigned for any clarification or further information.

Kind regards

Pip Brennan
Executive Director

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