

Submission

National Strategy for Food Security in Remote First Nations Communities

8 August 2024

Introduction

The Aboriginal Health Council of Western Australia (AHCWA) welcomes the opportunity to provide a submission to the National Indigenous Australians Agency (NIAA) on the National Strategy for Food Security in Remote First Nations Communities (the Strategy).

AHCWA is the peak body for 23 Aboriginal Community Controlled Health Services (ACCHS) in Western Australia (WA). WA ACCHS are located across geographically diverse metropolitan, regional and remote locations. They deliver the most effective model of comprehensive primary health care for Aboriginal people¹ and are in a unique position to identify and respond to the local, cultural and health needs of Aboriginal people and their communities. AHCWA exists to support and act on behalf of its 23 Member Services, actively representing and responding to their individual and collective needs.

This submission responds to the Strategy vision, goal and aim outlined in the discussion paper, as well as the target outcomes and underpinning principles. The discussion paper provides an overview of the eight focus areas of the Strategy - Country; Health; Housing; Families and Community Infrastructure; Stores; Supply Chains; Healthy Economies; and Policies, Practice and Governance – and this submission provides feedback provided by AHCWA’s Member Services in the context of Strategy focus areas, potential actions and intended outcomes.

AHCWA Member Services feedback highlights the place-based challenges and barriers to food security in WA remote Aboriginal communities; the detrimental impact of food insecurity on the physical health and wellbeing of Aboriginal people; and potential actions to address them. If Aboriginal people are to enjoy long and healthy lives – Outcome 1 of the National Agreement on Closing the Gap (the National Agreement) – the underlying social determinants of health, including poverty, unemployment and low income, and inadequate housing, must be addressed by the Commonwealth and State and Territory Governments. Similarly, food insecurity in remote Aboriginal communities can only be meaningfully addressed by tackling all of the underlying determinants, rather than a narrow focus on just one or two of the barriers to adequate food.

¹ Throughout this submission, AHCWA uses the term ‘Aboriginal’ to respectfully refer to all Aboriginal and Torres Strait Islander people across WA.

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The discussion paper articulates the issue, and widespread impact of food insecurity. This submission also provides feedback on the Strategy development process and the importance of the inclusion of feedback from community consultations, so that Strategy actions and intended outcomes are determined by, and reflect the priorities of, remote communities. A whole of government approach, across Commonwealth departments and agencies, is essential to the success and mobilisation of the Strategy, and State and Territory endorsement is required. Both Commonwealth and State and Territory Governments must commit to developing sustainable Strategy implementation plans in genuine partnership, based on shared decision-making, with equal representation of Aboriginal remote communities and the Aboriginal Community-Controlled sector. Lastly, AHCWA stresses the importance of good governance, and monitoring, evaluation and continuous quality improvement, which are essential to measuring the outcomes and impact of the Strategy over time.

Strategy overview

AHCWA acknowledges that the Strategy responds directly to Recommendation 10 of the 2020 House of Representatives Standing Committee on Indigenous Affairs Inquiry into food pricing and food security in remote Indigenous communities.²

In its introduction, the discussion paper lists the barriers (as determined by Strategy partners) to food security specific to remote communities, as well as the broad range of contributing factors that protect, or adversely affect, food security, many of which sit outside the health sector. The ACCHS sector Model of Care and modus operandi consider the holistic factors affecting people's lives, and are part of the equation in advocating, and pursuing solutions towards food insecurity. As such, it is important that the discussion paper demonstrates that remote food security must exist cross all levels of Government, private enterprises and the not-for-profit sector and that "addressing the structural barriers to food security requires coordinated action across multiple sectors"(page 5). AHCWA acknowledges that this coordinated approach will require endorsement of, and support for, the Strategy from all levels of government, which is currently not addressed in the Strategy and governance structures of accountability.

AHCWA notes that there is no record of initial remote community consultations despite the statement that "the actions of the Strategy will reflect the priorities of remote communities" (page 5) and that the Strategy "builds on significant remote community consultations" (page 9). Success in improving food security in remote communities requires genuinely engaging Aboriginal people, who have often been clandestine from government decision-making processes, and recognising their agency and perspectives in determining solutions, policies and approaches. Decisions must be made by Aboriginal people, not for them. Feedback from community consultations undertaken after the initial drafting of the Strategy will either validate or challenge the actions set out in the draft Strategy, which must then be modified accordingly to reflect community views and priorities, with complete tabulation of the consultation process over time.

Moreover, feedback on the discussion paper by the Coalition of Peaks and the Closing the Gap Partnership Working Group does not ensure a genuine partnership approach to the

²https://www.aph.gov.au/Parliamentary_Business/Committees/House/Former_Committees/Indigenous_Affairs/Foodpricing/Report

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Strategy development. Additionally, the Strategy discussion paper states that “engagement at key development milestones ensures all Parties to the National Agreement are engaged on National Strategy development” (page 9). AHCWA does not believe this to be the case, as genuine partnership and shared decision-making are defined by ongoing engagement and consultation, rather than ambiguous commitments and subpar acquiescence of the role of community-led solutions and opportunities.

Strategy vision, goal and aim

AHCWA supports the overarching vision of the Strategy and the goal of sustained improvements to First Nations food security in remote communities through actions that address the six pillars of food security. AHCWA’s view considers food insecurity to be a larger geographical problem. The aim of the Strategy and contextual focus of the Strategy states that food security in very remote First Nations communities be at levels consistent with urban centres (<13 per cent) by 2034, and we argue due recognition and efforts be expanded to all rural and remote regions. Nevertheless, appropriately and comprehensively defined elements of food insecurity should be measured and actioned across all communities, regardless of geography to ensure parity. The aim also highlights the importance of a monitoring and evaluation framework developed alongside the Strategy, from the outset, with baseline and ongoing data collection, analysis, revision, and reporting. This will be necessary to define and reach agreement from Aboriginal representatives to measure the success and achievement of the majority of intended Strategy outcomes.

Strategy focus areas and proposed actions

AHCWA in principle agrees with the Strategy focus areas, and believes that they cover the range of components critical to addressing food security in remote Aboriginal communities. Mapping focus areas to Closing the Gap socio-economic targets and outcomes demonstrates the Strategy’s alignment with the National Agreement and reinforces the commitment made by all governments to achieve better outcomes for Aboriginal people; however, it is AHCWA’s view that the final Strategy report should state the Four Priority Reforms of the National Agreement and not simply direct readers to the Closing the Gap website. If the National Agreement is to underpin the focus areas of the Strategy, it is important that it is not relegated to one paragraph in the final report. Similarly, Aboriginal policy design and implementation should always be mapped against the most applicable Articles of the United Nations Declaration of the Rights of Indigenous Peoples, which Australia has endorsed since 2009.

AHCWA recognises that across jurisdictions, and in different communities, it would seem that there would be greater emphasis on some focus areas and intended outcomes over others, and that actions will be tailored to each remote community’s priorities and needs. Along the same lines, it is important that priorities and actions are community-generated and led, so that governments do not pick and choose outcomes and actions that are more easily achieved, given desultory attention, or not a priority and need for the communities.

AHCWA Member Services highlighted the importance of a number of focus areas, including Health, Housing, Employment, Stores and Freight. Emphasising these areas does not detract from the importance of other focus areas, it merely demonstrates challenges and areas of need in these remote communities across WA. While AHCWA Member Services have provided support for some of the proposed actions laid out in the discussion paper, AHCWA notes the challenge of setting intended outcomes and actions that will apply across all remote

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communities across Australia. Moreover, AHCWA acknowledges that the focus areas, actions and intended outcomes have not been fully determined by remote communities. It is AHCWA's understanding that they have been tested with remote communities during community consultations. In this way, the Strategy may have to allow for some flexibility and place-based adaptations to actions in its implementation.

Health

AHCWA Member Services recognise the direct link between food security and health outcomes, and have first-hand experience with the impact of poor nutrition on Aboriginal children and adults in remote communities.

Limited access to nutritious, culturally, and dietary appropriate food affects the health and wellbeing of Aboriginal people from the earliest start in life as poor nutrition is associated with low birth weight and ill health in infancy and childhood. AHCWA Member Services noted that the result of poor diet as a child may lead to tooth decay and poor dental health, childhood overweight and obesity, and increased risk of chronic disease. In providing feedback, AHCWA's Member Services have expressed concern regarding the dual burden Aboriginal communities face as a result of food insecurity, noting the co-existence of (1) underweight children as a result of not having enough nutritious food, and (2) children with early signs of overweight and obesity due to easily accessible high energy and low nutrient foods.

Physical health impacts on adults include obesity and malnutrition as a result of consuming large quantities (relative to more nutritious food) of high calorie, nutrient-poor foods (e.g. simple carbohydrates and processed meats) that cost less than nutritious whole foods (e.g. lean meats, wholegrains, fruits and vegetables). AHCWA Member Services recognised that when Aboriginal people are on income supports or low income, they are often more likely to maximise calories per dollar spent and purchase a higher proportion of energy-dense, nutrient-poor foods, such as sugar sweetened drinks, meat pies and potato chips. These foods are rich in fats, refined starches and sugars and represent the lowest-cost options, with healthy options like lean meats, grains, and fruits and vegetables usually being more expensive. While these foods are ready for consumption, convenient and able to be securely controlled by people in community, their consumption leads to poor health outcomes and burgeoning risk of chronic disease.

In AHCWA's 2022 submission to the WA inquiry on the most effective ways for WA to address food insecurity for children and young people affected by poverty, clinical staff from AHCWA's Member Services (from locations including the Pilbara, Ngaanyatjarra Lands, Perth, and the Kimberley) all highlighted the spectrum of negative effects on childhood health they have seen in clinical settings as a result of calorie dense foods, including childhood obesity, early onset of type 2 diabetes, and tooth decay among Aboriginal children. AHCWA Member Services also said that it was common in clinical settings to see malnourished Aboriginal children who regularly suffer from vitamin/mineral deficiencies related to anaemia, low iron and other micronutrient deficiencies, the direct result of little or poor quality food.

When providing feedback for previous submissions on food security, AHCWA's Clinical Leadership Group highlighted the need to address the impact of poor nutrition on children and young people by supporting pregnant women and new mothers. Maternal health and antenatal care were described as essential components of ensuring Aboriginal children get the best start in life. Clinical staff also discussed the strength of the ACCHS sector in caring for the whole

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mother and, after birth, the whole child – supporting Aboriginal people in their communities in all aspects of health including physical, social, emotional and cultural aspects. AHCWA Member Services continue to recognise the on-the-ground impact of the sector to provide culturally safe, holistic and wrap-around programs to address the many interconnected issues.

AHCWA Member Services strongly supported additional funding to increase the Aboriginal health workforce, to provide clinical, educational and social support to women, new mothers, children and families. Members also recognised the need to train and upskill staff to deliver specialist services and education in the area of nutrition. WA ACCHS are on the frontline supporting children and young people, mothers, families and communities. ACCHS deliver child and maternal health programs in a culturally safe and holistic way to prevent and treat issues caused by poor nutrition and chronic illness. They regularly provide care to address the negative effects of poor nutrition and food insecurity, including the impacts on child development and chronic diseases. Optimal health and wellbeing outcomes for remote Aboriginal communities will only be achieved through community-led partnerships and locally based solutions, to ensure specific community circumstances and needs determine the design and delivery of solutions.

Housing

AHCWA Member Services acknowledge that housing has a strong correlation with health and recognise that culturally appropriate and well-maintained housing, and adequate infrastructure, are critical in ensuring food security. Remote housing must be sufficient for remote community residents to meet their food security needs; however, AHCWA Member Services noted that Aboriginal people in some remote communities live in extremely poor and inadequate conditions, with high levels of intergenerational poverty, and a lack of education, training and employment opportunities. Many remote houses are poorly designed, inadequately constructed, and lacking sufficient health hardware such as functioning kitchens, refrigerators and stoves. Without facilities to cook or store food, people living in remote communities often find themselves consuming nutritionally poor ready-made options.

The Aboriginal and Torres Strait Islander Health Performance Framework found that Aboriginal households in remote areas were more likely to live in dwellings with structural problems than those in non-remote areas (46 per cent and 31 per cent, respectively) and 9.1 per cent of Aboriginal households had no access to working facilities for food preparation.³ In addition, irregular household access to essential services, such as electricity to enable appropriate storage of foods and clean water to wash and cook foods, can result in food wastage, loss of income and health complications. Furthermore, a history of problematic housing maintenance contracts and failed maintenance of remote housing has resulted in the rapid deterioration of uninhabitable houses.

Environmental health and overcrowding compromise all aspects of health⁴, and increase the risk of otherwise preventable health conditions that disproportionately affect Aboriginal people, such as rheumatic fever and rheumatic heart disease, trachoma and otitis media. In 2018–19, almost one in five Aboriginal Australians (18 per cent) were living in overcrowded dwellings,

³ AIHW & NIAA (National Indigenous Australians Agency) 2020. [Aboriginal and Torres Strait Islander Health Performance Framework: 2.01 Housing](#). Canberra: AIHW. Viewed 2 August 2021.

⁴ SCRGSP (Steering Committee for the Review of Government Service Provision) 2020. *Overcoming Indigenous disadvantage: key indicators 2020*. Canberra: Productivity Commission.

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compared with 5 per cent of non-Aboriginal Australians.⁵ Overcrowding rates varied with remoteness with the proportion of Aboriginal Australians living in overcrowded dwellings higher in remote areas (26 per cent in remote areas and 51 per cent in very remote areas) than in non-remote areas (ranging from 8 to 22 per cent). When food is scarce and families are forced to share limited resources, overcrowding can compound psychosocial stress and ill health.⁶ Children's access to food is impacted when overcrowded households are unable to access and/or store the food required to meet the needs of larger numbers of people.

AHCWA recognises that in many respects, housing has been relegated to the responsibility of the States and Territories, despite the fact that external policy settings and drivers, such as taxation, public housing investment, social policy, and infrastructure policies, require national leadership. As such, AHCWA would hope to see a joint approach to realise all the policy and administrative levers to achieve the Strategy's proposed intended outcomes and actions associated with Housing. Public policies need to be clever and well-informed to respond to the current disparities across rural and remote Australia, while considering long-term sustainability that improves the quality of life and self-determination of Aboriginal communities.

Target 9 of the National Agreement seeks to ensure that 88 per cent of Aboriginal and Torres Strait Islander people live in appropriately sized (not overcrowded) housing by 2031 (compared with a 2016 baseline level of 79 per cent). In its submission to the 2022 Inquiry into the most effective ways for WA to address food insecurity for children and young people affected by poverty, AHCWA recommended that, to achieve this, the State government recognises the importance of sharing decision-making with Aboriginal communities and ACCOs in relation to affordable, adequate, safe and sustainable housing and provide greater investment. In alignment with Priority Reform 2 of the National Agreement, AHCWA also recommended the state government increase the capacity of Aboriginal community-controlled housing organisations through increasing the number of those registered, enabling access to government programs and funding, and asset and management transfers.

As noted in the WA Implementation Plan for Closing the Gap, 'to reach the 88 per cent target, further investment in affordable housing options will be required, as well as a more agile housing system that underpins individual, family and community wellbeing'.⁷ AHCWA recommended this could be achieved if the state consider a number of other strategies to improve housing for Aboriginal people, which include undertaking a comprehensive analysis of Aboriginal housing needs across the state and developing a long-term Aboriginal housing strategy that is informed by cultural needs and developed in partnership with Aboriginal people. All of these recommendations could be applied by other state and territory governments and across the Strategy.

In its [submission](#) to the 2020 Inquiry into food pricing and food security in remote Indigenous communities, the WA government acknowledged that overcrowding, cost of living pressures and a lack of health hardware create barriers to storing and cooking healthy meals. It is AHCWA's view that addressing housing issues has the potential to improve conditions that may impede food security.

⁵ IBID

⁶ NACCHO Policy Position Paper: Aboriginal Housing for Aboriginal Health, 2021.

⁷ https://www.closingthegap.gov.au/sites/default/files/2021-05/ctg-national-agreement_apr-21.pdf

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Families and Community Infrastructure

Food assistance and food relief were discussed in response to the 2022 WA Inquiry into the most effective ways for WA to address food insecurity for children and young people affected by poverty. Many of AHCWA's Member Services reported that their clients received food relief support from charitable organisations during the COVID-19 pandemic in 2022. WA ACCHS, across regional and remote communities, mentioned that some clients faced a number of challenges when accessing food relief, including long wait times to receive inadequate amounts of food for overcrowded houses, and a lack of understanding of family structures and cultural practices of food sharing among Aboriginal families.

Government agencies and food relief providers must take into account the amount and type of additional food relief needed in remote Aboriginal communities arising from family structures, cultural practices, and current overcrowding, to ensure adequate provisions. Strategy actions in this area should include engagement and relationship building between food relief providers and remote Aboriginal communities and the inclusion of Aboriginal people in all food relief working groups, local committees and taskforces so that food relief programs are culturally safe and place-based.

While food relief does provide short-term support in times of need, and is essential in times of natural disasters and public health emergencies, it reduces overall autonomy and decision-making power and the ability for people to make choices for themselves. Charitable food is not a panacea for addressing long-term issues of food insecurity, as it fails to tackle some of the key causes of food insecurity. Food relief is not adequate to meet the nutritional, cultural and social needs of Aboriginal people who experience food insecurity. As discussed throughout this submission, the social, political, economic, cultural, and commercial determinants of health must be addressed to ensure Aboriginal people experience ongoing food security.

Stores and Supply Chains

In many remote communities, the community store can be the major source of food, drinks and general provisions. Community stores are usually small businesses working in challenging environments with limited purchasing power to negotiate discounts from suppliers. They also have to manage geographical distance from depots; damaged stock; unpredictable weather; inadequate infrastructure in both the store and community; and high freight costs. Community stores also face infrastructure issues, such as lack of running water, power outages, failed refrigeration, inadequate storage facilities and expensive maintenance. This contributes to wasted stock and higher store overheads. These factors can lead to expensive or poor quality food.

In Bidyadanga for instance, the store is owned and operated by the community through Bidyadanga Aboriginal Community La Grange Inc (BACLGI). All profits are returned to the community through hardship relief, employment, Board support and other non-funded services. The store pricing policy ensures that healthy food and essential items attract margins that cover the cost of products and freight and no other operating costs are included. The cost of utilities, wages and other overheads are covered through margins on all other stock items. Reducing the cost of items sold in the store would need to target the cost of goods and freight.

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Neither buying power, nor the cost of freight, are anywhere as strong as larger national chains who have the ability to negotiate with transport companies.

Given that the stores are often the only source of food for communities, they are critical to ensuring food security and provide an essential social service and focal point for the community. There is often limited stock in stores due to small economies of scale in remote communities, with fewer opportunities to purchase foods at discounted prices in remote areas and unhealthy food is more likely to be cheaper than nutrient dense foods, such as fruit and vegetables. Member Services discussed the potential for subsidising food in remote communities, both to secure supplies and provide nutritional options. Subsidising communities to meet the high costs of freight and transportation could help to mitigate the higher costs of food in remote communities.

Healthy Economies

High rates of unemployment and underemployment, inadequate income supports, and cost of living pressures, are significant contributors to food insecurity⁸ and Aboriginal people are disproportionately affected by all of these factors. Aboriginal people experience high rates of unemployment; the National Aboriginal and Torres Strait Islander Health Survey stated that between 2007–08 and 2018–19, the overall employment rate for Aboriginal Australians aged 15 to 64 dropped from 54 per cent to 49 per cent with employment rates decreasing consistently with increased remoteness.⁹

AHCWA Member Services said that cost of living pressures for Aboriginal people living in remote communities are exacerbated by inadequate income support and fewer employment opportunities as there is a consistent reduction in median gross personal income per week with increasing remoteness.¹⁰ As such, there is a need for renewed efforts aimed at increasing Aboriginal employment. Two of the socio-economic targets of the National Agreement directly relate to employment. The aim of Target 7 is to increase the proportion of Aboriginal and Torres Strait Islander youth (15 – 24 years) who are in employment, education or training from 57 per cent to 67 per cent by 2031. Target 8 aims to increase the proportion of Aboriginal and Torres Strait Islander people aged 25 to 64 years who are employed from 51 per cent to 62 per cent by 2031. There is much progress to be made in both of these areas and it is imperative that the state and federal governments take their role seriously as job creators and job providers.

Strategy development

AHCWA believes that the development of the Strategy must be underpinned by a genuine commitment to the National Agreement. Priority Reform One of the National Agreement states that all governments have agreed to work in genuine partnership with the ACCHS sector, engaging in shared decision-making. Throughout the process of developing, reviewing and implementing the Strategy, it is essential that NIAA genuinely engage and collaborate with community representatives and adequately consult with them about how they would like to be included in decision-making. Aboriginal people and their communities identifying issues and

⁸ Western Australian Council of Social Service, 2018, Cost of Living Report, available at <https://wacoss.org.au/library/cost-living-wa-report-2018/>

⁹ [National Aboriginal and Torres Strait Islander Health Survey, 2018-19 financial year | Australian Bureau of Statistics \(abs.gov.au\)](#)

¹⁰ Australian Institute of Health and Welfare's 2021 report titled 'Indigenous income and finance'

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priorities is critical to the success of the Strategy and feedback from community consultations must be included in the final Strategy.

AHCWA has concerns that the initial draft of the Strategy was drafted without feedback from remote communities and that intended outcomes and actions were not generated or determined by stakeholders. The risk of this, which has been conveyed by AHCWA and other peak body representatives on the Project Reference Group, is that the Strategy does not reflect the priorities of stakeholders and does not have the intended outcome of improving food security, on the ground, for Aboriginal people living in remote communities.

AHCWA has concerns that community consultations taking place prior to the finalisation of the Strategy are utilised to test actions and outcomes, rather than genuinely engage with communities and hear their concerns. Decisions on the Strategy's early Priority Projects were even made prior to engagement with First Nations partners, with the Australian government investing \$11.8m over two years (2023/24 and 2024/25) for the Strategy and implementation of initial Priority Projects that include a government supply chain feasibility study; health cost analysis of food insecurity; and the drafting of a remote stores code of practice. This is not in the spirit of Aboriginal self-determination and shared decision-making.

Shared decision-making and self-determination echo the central message of the Productivity Commission's most recent Review of the National Agreement¹¹. The Review emphasises Priority Reform Three, Governments' commitment to transforming their agencies and changing their systems, culture, operations and ways of working. This includes sharing power with Aboriginal people, recognising they have knowledge and leadership to determine, design and implement solutions and make change for their own communities and allowing them to do so. Establishing a Governance framework is one of the proposed actions of the Strategy essential to ensure ongoing alignment with the Closing the Gap principles.

Polices, Practices and Governance

It is essential that a governance framework is established to ensure NIAA is working to achieve the goal, aim and target outcomes of the Strategy. The discussion paper states that the Strategy will "coordinate action across Australia to address the unique and specific needs of First Nations people living in remote communities" (page 4) and that "Strategy implementation will rely upon guidance by community representatives and collaboration between all stakeholders" (page 5). Good governance and the assignment of roles and responsibilities will ensure accountability for the coordination of actions and Strategy implementation. Early engagement with all the actors that have a stake in food security for Australia is imperative to ensure accountability and efforts are dispersed and allocated where appropriate and impactful. Governance is also essential to ensure remote community representatives are engaged, as well as ACCHS as other stakeholders.

Monitoring, Evaluation and Continuous Quality Improvement

As discussed above, AHCWA acknowledges the importance of developing a monitoring and evaluation framework alongside the Strategy, from the outset, with baseline and ongoing data

¹¹ Productivity Commission (2024). Review of the National Agreement on Closing the Gap, Study report, volume 1, Canberra

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collection, analysis and reporting. This will be necessary to measure the aim of the Strategy, and the success and achievement of the intended outcomes. It is integral that all aspects of monitoring and evaluation reflect principles of Indigenous data sovereignty and governance in that all researchers, both Aboriginal and non-Aboriginal, actively engage with involved Aboriginal peoples, communities and organisations in a way that ensures the reporting of data reflects their priorities, values and cultures.¹² Moreover, AHCWA believed that it is essential that the framework enables the application of flexibility in how Aboriginal-led services and programs are measured to obtain more meaningful and contextual analysis, with a focus on outcomes, not outputs. Success must not be tethered to mainstream norms.

The monitoring and evaluation framework for the Strategy must align with Priority Reform Four of the National Agreement, ensuring Aboriginal communities' access to data that affects them, as well as being available to Aboriginal Community Controlled Organisations (ACCOs) delivering services to improve outcomes for Aboriginal people in communities. This is essential for transparency and trust building, and demonstrates respect for Aboriginal people involved. The Commonwealth must collect, handle and report data at sufficient levels of disaggregation, and in an accessible and timely way, providing remote communities and ACCOs with access to the same data and information they use to make decisions. Moreover, remote communities and ACCOs should be supported by governments to build capability and expertise in collecting, using, governing, and interpreting data in a meaningful way.

AHCWA also recommends that the Strategy evaluation framework is culturally safe including, but not be limited to, genuine engagement and collaboration with Aboriginal people in the development and delivery of the framework, with demonstrated cultural awareness, safety, security and competence by non-Aboriginal evaluators. The framework should incorporate mixed approaches and methods including quantitative and qualitative analysis of programs and support the use of Aboriginal-specific data collection methods including knowledge sharing and yarning.

AHCWA cautions that the framework must not increase the burden of data collection and reporting for Aboriginal-led services and programs. ACCHS already provide multiple data sets to different fund holders and commissioning bodies, therefore, the Strategy evaluation framework should be considerate of this. Moreover, the Strategy evaluation framework provides a unique opportunity to shift the dialogue on Aboriginal health from a deficit to a strengths-based model. Too often, data demonstrating Aboriginal health and wellbeing focus on deficits and limitations when, instead, data should be reframed to reflect achievements in health outcomes. This could be achieved through consulting with ACCHS on how data is interpreted, presented and shared.

Lastly, AHCWA stresses with the greatest of importance that the security of Aboriginal health and wellbeing data is of the highest priority for ACCHS across Australia. Best-practice collection and ethical sharing of data, the responsible use of data by other agencies, integrity in data reporting and the acknowledgement of data sovereignty are key principles that must be upheld. The Strategy evaluation framework should recognise the data sovereignty of Aboriginal people and their communities, and should not allow data to be released without their endorsement.

¹² https://www.lowitja.org.au/wp-content/uploads/2023/10/328550_data-governance-and-sovereignty.pdf

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Strategy Design

Throughout the design of the Strategy, it is important to understand past policies and the role of government in addressing food security in remote Aboriginal communities, to ensure the same pitfalls do not arise. A paper on Australia's efforts to improve food security for Aboriginal and Torres Strait Islander people explored previous initiatives such as outback stores, welfare quarantining, and the National Aboriginal and Torres Strait Islander Peoples in Australia Nutrition Strategy and Action Plan (2000). Respectively, challenges of these measures included taking opportunities away from local businesses, funding being too strict and not considering how and where people buy healthy foods, and the continual failure to move away from individual deficit messaging in healthy eating campaigns.¹³

AHCWA also became aware of a National Strategy to address food security issues in remote Aboriginal and Torres Strait Islander communities commissioned by Council of Australian Governments (COAG) in 2009. At the time, the COAG Strategy aimed to develop a secure, sustainable and healthy food supply to remote Indigenous communities. The actions outlined in the COAG Strategy included the development of national standards for stores and takeaways, a national quality improvement scheme, a national healthy eating plan, a related national workforce action plan, and the transition of community stores registered under state legislation to the *Corporations (Aboriginal and Torres Strait Islander) Act 2006*.

According to the Australian National Audit Office's 2014 assessment of this strategy, only one of the five intended actions - the national healthy-eating action plan for remote Indigenous communities - was completed,¹⁴ which from the outset was more focussed on individual behaviours factors to food insecurity, rather than making systemic changes. The assessment report also determined that the strategy did not clearly articulate how the different responsible agents would conduct action towards food security initiatives, and resulted in isolated efforts and immeasurable outcomes.¹⁵ Furthermore, a 2016 report by the National Rural Health Alliance for the Australian Government, Rural Industries Research and Development Corporation (RIRDC) the Food Security and Health in Rural and Remote Australia, which recommended that policies addressing food insecurity consider and respond to both its causes and effects and promote food security as part of a coordinated national approach to addressing poverty and inequality. The interplay of cause and effect supports further recommendations by the authors that a national strategy addressing food security be developed and managed jointly by the Departments responsible for health, agriculture and natural resources.¹⁶

Conclusion

Food insecurity does not exist in isolation. As such, it must be considered, and addressed, in the context of the socio-economic conditions that perpetuate and exacerbate it, including the social determinants of health. Improving food security among Aboriginal people in remote

¹³ Davy et al. (2016). Australia's Efforts to Improve Food Security for Aboriginal and Torres Strait Islander Peoples. *Health and Human Rights*. 18(2)

¹⁴ Australian National Audit Office, *Food security in remote indigenous communities* (Canberra: Australian National Audit Office, 2014).

¹⁵ IBID.

¹⁶ <https://www.ruralhealth.org.au/document/food-security-and-health-rural-and-remote-australia>

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communities requires addressing the vast range of inequities they experience, focusing on issues related to poverty, lack of employment, income, welfare policies, and improving access to adequate housing, infrastructure and transportation in remote communities. It also needs to recognise the continuous need to empower and uplift communities to exercise their right to finding preferred solutions. For so long, governments have focused their attention on 'downstream' solutions to address food security and are failing to address the systemic issues that make people food insecure.

The Commonwealth government, and State and Territory governments endorsing the Strategy, need to consider the interrelatedness of key human rights in its attempt to develop policy and build cross-sector collaborations to address food security for Aboriginal people in remote communities. Coordination is required across multiple sectors—including health, housing, education, human services, employment and training, social services, child protection, and food—as well as across all levels of government to address food insecurity among Aboriginal in remote areas.

Long-term, sustainable funding is required. Through long term planning and commitment to addressing food security, the root causes can be addressed. This requires genuine commitment, by Commonwealth and State and Territory governments, to work with remote Aboriginal communities and ACCHS in true partnership with the National Agreement guiding the Strategy.

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