

Integrating services; partnering with community

Health justice partnerships working in
and with Aboriginal communities

Submission to national consultation on Implementation Plan for the National
Aboriginal and Torres Strait Islander Health Plan 2013-2023

2 May 2017

Background to Health Justice Partnerships

Across Australia, over 8.5million people will have three or more legal needs in a given year (Legal Australia Wide survey, Law & Justice Foundation of NSW 2012), half of whom will receive no support for those needs. Among them, people living with disabilities, sole parents, people living in disadvantaged housing and people who rely on income support payments are highly represented.

Of those who will receive support for their legal needs, they're far more likely to raise them with a trusted health professional like a GP, community nurse or social worker, than to seek advice from a lawyer.



**Health
Justice
Australia**

That's why health justice partnerships (HJPs) bring legal services into health settings. HJPs support collaboration between lawyers and health workers to better identify and respond to the legal needs that can undermine people's health.

HJPs support people that are particularly at risk of poor health and justice outcomes. Priority populations include people experiencing domestic and family violence, people at risk of elder abuse, Aboriginal and Torres Strait Islander people, culturally and linguistically diverse communities and people experiencing poverty and inequality.

Health justice partnerships provide legal support across a wide range of needs, such as:

- Advocating for public housing tenants needing repairs to address untreated mould, or having handrails and other aids installed to continue living independently in their own homes;
- Assisting people with accumulated fines or debt that cause stress or act as a barrier to meeting health costs like filling prescriptions; and
- Advising on wills, powers of attorney and custody – the legal needs that can present at the most unexpected times, like following a diagnosis of serious illness.

These are just some of the many legal issues that people can face in life. By integrating legal services into health settings, we can improve access to justice, address the social determinants of health and increase wellbeing.

About Health Justice Australia

Health Justice Australia is the national centre for health justice partnerships. We support the effectiveness of health justice partnerships in Australia through:

- building a body of evidence about health justice partnership through evaluation and research;
- developing resources that support the practical elements of partnership between practitioners;
- brokering, mentoring and facilitating partnerships; and
- achieving lasting change, connecting the issues identified through specific health justice partnerships to policy advocacy and reform.

This submission

This submission is informed by several sources:

- What we know from our national network of health justice partnerships across Australia, particularly those working directly with Aboriginal communities and in partnership with Aboriginal community controlled organisations;¹
- Our participation in a national consultation forum for the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023;
- Our presentation to the Indigenous Health Branch Divisional forum, Australian Government Department of Health; and
- Our engagement with the Social and Cultural Determinates of Health (SCDH) working group supporting the development of the next iteration of the Implementation Plan.

Working in partnership with Aboriginal communities

One of critical ways that health justice partnerships (HJPs) achieve their impact is through the concept of working in partnership. Central to this partnership model is the integration of services not only for communities, important as that is; but also for workers, for the professionals and practitioners who make up our health and human services.

¹ We acknowledge Central Australian Women's Legal Service and Eastern Community Legal Centre for their contributions to this submission.

Aboriginal community controlled organisations (ACCOs) have been demonstrating how to work in partnership for decades. For example, working in partnership is central to the model of care that many Aboriginal community controlled health organisations (ACCHOs) have developed over years; and to which other services are increasingly paying attention. It also reflects a core principle ACCOs have asserted as critical to the effectiveness of how non-Aboriginal organisations work with and in Aboriginal communities.²

ACCOs have also long-asserted the critical role of communities in shaping their own services and supports. This commitment to community control underpins many of the ideas that are increasingly reflected in major policy directions of our health and other systems. Examples include the concept of consumer directed care in health or in the National Disability Insurance Scheme; and the development of the peer workforce being led by the mental health sector.

For these reasons then it is critical that health justice partnerships seeking to improve the health and access to justice of Aboriginal people work in partnership not just between health and legal organisations, but between ACCOs and Aboriginal and Torres Strait Islander communities. These are a number of examples of this within health justice partnerships across the country. In this submission we showcase just three.

² See for example 'Principles for a Partnership-centred approach for NGOs working with Aboriginal and Torres Strait Islander Organisations and Communities', <http://www.acoss.org.au/principles-for-a-partnership-centred-approach/>

CAWLS

The Central Australian Women's Legal Service (CAWLS) was funded in 2015 to establish a health justice partnership (HJP) in Alice Springs. The funding was part of the Women's Safety Package by the Commonwealth Government, seeking to improve responses to people experiencing family violence.

One of CAWLS' partners in this work is Congress (the Central Australian Aboriginal Congress, an ACCHO working in Alice and surrounding communities). Congress is a large organisation with a number of sections through which it delivers client services.

Under the HJP, CAWLS works closely with Congress to provide a holistic service to patients/clients at Congress. CAWLS delivers regular education sessions to Congress staff, mainly to support these staff identify and respond to domestic violence and mandatory reporting obligations. The education sessions are provided to various sections of Congress, including the Social and Emotional Wellbeing Service (SEWB), Congress' health services in Alice Springs and Congress' remote health services.

Under the HJP, Congress can refer women who are affected by domestic violence to CAWLS for legal advice and assistance. CAWLS aims to provide a responsive service tailored to the needs of the client and can attend the Congress health service to provide legal advice to the client on-site.

MABELS

MABELS is a health justice partnership operating since early 2015, providing an early intervention response to family violence through a universal health service. The partnership involves Eastern Community Legal Centre (ECLC), Boorndawan Willam Aboriginal Healing Service (BWAHS), Eastern Domestic Violence Service (EDVOS), Maroondah City Council and Yarra Ranges Council.

Given our emphasis on working in partnership, it is significant that this HJP is the legacy of a longstanding relationship that existed years before the detail of the HJP was agreed or funded. The original partnership began 6-7 years earlier, through a project working to improve the responsiveness and appropriateness of courts to Aboriginal and Torres Strait Islander victims of family violence. As trust between the community legal and Aboriginal health services grew, so too did their interaction, extending into membership of governance processes; trialling dedicated Aboriginal workers in courts; training nurses employed by local council to build their cultural safety and awareness; and developing relationships within the community.

Critically, the strength of this partnership developed outside of a formally funded or defined project with designated outcomes. It is a relationship that built over time; that provided the capacity to enable the community to identify what it wanted and needed; and that has survived through changes in personnel, management and strategy over time.

In a key feature of HJPs more generally, secondary consultations play an important role in the MABELS model. By increasing the cultural safety of professionals working in the partnership, secondary consultations also increase the trust of clients and the community in the service overall. Ultimately, this approach increases referrals through its cultural responsiveness.

Secondary consultations allow one professional to assist another in meeting a particular need, without disrupting the relationship of trust that exists between the primary professional and the community member. For instance, a lawyer might advise a health worker as they provide information to a patient about a legal issue.

Health-harming legal needs

One of the most important elements of the work of health justice partnerships is their ability to address a range of factors beyond the medical, that impact upon people's health. These 'health-harming legal needs' may be issues that undermine people's health, for example public housing landlords failing to install handrails that enable people with mobility issues to live independently at home; or to treat mould that contributes to people's respiratory problems.

Other health-harming legal needs can distract people's attention from their health, or divert their personal resources away from meeting their health costs. The accumulation of fines and debt are examples of legal problems that health justice partnerships have effectively addressed, enabling people to return their attention to their health and to meet the costs of healthcare such as co-payments or prescriptions.

Health workers tell us, 'Having a lawyer in our health service helped me focus my patient's attention back on their health, by taking care of the legal problem that was distracting them from their healthcare!'

Benefits for Aboriginal Health Plan

As a model of integrated service delivery, health justice partnerships have the social and cultural determinants of health at their core. Recognising the complexity of people's lives and the range of needs a person might have at any one time, HJPs build capability for services to identify and respond appropriately to a broad range of needs beyond the expertise of any one professional or practitioner.

Challenges

Working in partnership can be hard. It takes resourcing of collaboration as well as service delivery, to achieve impact and improve outcomes. Working in truly integrated health justice partnerships places value on building capability across workforces, for example so that health workers better identify and respond to legal need and, ideally, so that lawyers can better identify and respond to the health needs of their clients. With limited resources, this might necessitate smaller numbers of community members coming through any one service; but it might also mean that each individual receives a far more comprehensive and effective service in the process.

To discuss this submission further, contact Dr Tessa Boyd-Caine, CEO, at the contact details below.

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