Roundtable Summary – Experience of First Nations People

Date: Thursday 25 June and Friday 5 July 2024

Hosts: Ms Robyn Kruk AO, Panel Chair and Professor Catherine Bennett, Commonwealth Government COVID-19 Response Inquiry

Participants: Theses roundtables brought together key stakeholders from a range of First Nations organisations across Australia to discuss the experiences of First Nations people during the pandemic.

Purpose of this roundtable

• These roundtables provided representatives from First Nations organisations who played a key role in the COVID-19 response with the opportunity to share their views on the experiences of First Nations people during the pandemic, what the Australian Government did well and what could be improved for a future crisis.

What we heard at the roundtable

- Community leaders and organisations, such as Aboriginal Community Controlled Health Organisations (ACCHOs), played a vital role during the pandemic. This included advocating for the needs of First Nations people early in the pandemic, developing and delivering tailored resources and initiatives including health care, information, food deliveries, provision of PPE, and other wraparound services. Many ACCHOs delivered support above and beyond their usual primary care role, including to non-Indigenous Australians.
- There is a need for flexibility when responding to emergencies in First Nations communities what works for one community may not work for another. Organisations on the ground are best-placed to understand the unique circumstances and needs of different First Nations communities.
- Flexible funding enables rapidly tailored local responses. Flexibility should be built into grant funding provisions to allow ACCHOs to use funding where needed in an emergency, including responding to evolving circumstances and providing culturally safe services.

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- Genuine consultation and engagement with First Nations people improves outcomes. Where the impact of pandemic response measures on First Nations people was not taken into consideration, there were unintended consequences. For example, while restrictions on movement to and from remote First Nations communities to prevent COVID-19 outbreaks were broadly supported, at times they deterred individuals from accessing vital health services outside their community, such as dialysis or COVID-19 treatments.
- There is also a need to consider how decisions will be implemented within First Nations communities. For example, it was helpful that First Nations people were prioritised in the vaccine rollout, but available vaccines were initially concentrated in metropolitan areas and challenges with access and supply in regional, rural and remote communities' impacted uptake.
- Clear roles and responsibilities and shared decision-making between the communitycontrolled sector and all levels of government is vital. The rapid establishment of the Aboriginal and Torres Strait Islander Advisory Group on COVID-19 (Advisory Group) during the pandemic was effective and well-received. The Advisory Group benefited from representation of states and territories alongside the community-controlled health sector. It would have been more helpful had this mechanism been established before the pandemic.
- Improved coordination between jurisdictions can support an effect crisis response. This is critical for First Nations communities that cover multiple states and territories such as the Ngaanyatjarra Pitjantjatjara Yankunytjatjara Lands, which reaches across South Australia, Western Australia and the Northern Territory. Unique challenges for the coordination of the pandemic response emerged in this area, particularly when movement restrictions were introduced. A tristate coordination mechanism was established, including representatives from the Australian Government and each state and territory, police and health experts. While community organisations were not included until later in the response, it demonstrated cross-jurisdictional coordination can be effective when the right players are included.
- Publication of tailored and translated information was too slow during the pandemic and led to confusion and mixed messages, particularly during the vaccination rollout and transition out of emergency settings. Simple, clear messaging delivered by trusted voices in local languages and via social media is critical. Instead of planning communications top-down, governments should start with understanding what works best for First Nations communities.
- There is a need to consider broader implications in a pandemic and not just the spread of the virus itself. The compounding impacts of lockdowns, movement restrictions, denial of transfers closer to family and country and restrictions on participating in Sorry Business were particularly hard for First Nations people in the criminal justice system. Guidance for prisons was provided only after advocacy by key community organisations.

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- The COVID-19 pandemic demonstrated how barriers to data sharing need be broken down in a crisis. Having access to data on the risk of transmission into a community and vaccine uptake was critical when developing community responses. Proactive data sharing should be continued.
- Early development of pandemic response plans was influential. However, these plans were not always consistently followed, particularly as restrictions began to be lifted. Ensuring plans are followed in future crises and transition periods will improve outcomes, or if changes to plans are necessary that the reasoning and evidence are explained.