Aboriginal and Torres Strait Islander health and evaluation

Research and evaluation are recognised as essential aspects in improving Aboriginal and Torres Strait Islander health policy and practice. Evaluation has the potential to benefit Aboriginal and Torres Strait Islander people and communities both through improved policy and programs. Evaluation can also provide opportunities to harness and develop community expertise. However, there is concern from community, evaluators and government that the evaluation of programs addressing Aboriginal and Torres Strait Islander health and wellbeing do not always deliver these benefits [1-3]. Questions have been raised about the utility, effectiveness and ethics of the research and evaluation undertaken in Aboriginal and Torres Strait Islander health [1-3], leading to reconsideration of the purpose of health program evaluation in this area.

This project

This project aimed to develop a framework to guide future evaluation of health policies, programs and services for Aboriginal and Torres Strait Islander peoples across Australia. The development of the framework was oriented towards improving the benefits of evaluation for Aboriginal and Torres Strait Islander people. The process focused on identifying the essential elements of evaluation planning and practice, and highlighting the requirements needed to undertake evaluations in this area. The project was conducted from September 2016 to December 2017.

In order to develop an evaluation framework, a comprehensive review of peer-reviewed literature, evaluation reports and tender documents was conducted. All evaluation reports, tender documents and peer reviewed articles were reviewed with regards to both ethics and Aboriginal and Torres Strait Islander research principles. Evaluation reports were reviewed to determine how well they integrated these Aboriginal research principles into the methodologies, with particular focus on the program logics, indicators and overall evaluation framework. The program logics of reports provided an indication of how well principles were integrated into the design of the program/plan/policy to be evaluated. The indicators and frameworks sections of the report provide an indication of how well the principles were integrated and measured as part of the evaluation.
The evaluation framework

The project developed an evaluation framework to improve benefits to Aboriginal and Torres Strait Islander communities. The framework has two parts. Part A outlines what to evaluate and Part B outlines how to evaluate.

Part A of the framework is a guide to the stated principles of Australian governments for working with Aboriginal and Torres Strait Islander people. The principles are:

- Partnerships with Aboriginal and Torres Strait Islander organisations and communities
- Shared responsibility
- Engagement with Aboriginal and Torres Strait Islander people and communities
- Capacity building of Aboriginal and Torres Strait Islander communities
- Equity
- Accountability
- Evidence based
- Holistic concept of health
- Cultural competence
- Data governance and intellectual property
- Capitalising on Indigenous strengths.

These principles should underpin any policy, program or service that aims to improve Aboriginal and Torres Strait Islander health and wellbeing and should be included as part of the evaluations for such initiatives.

Part B of the framework is to guide sharing of ethical responsibilities associated with evaluation among all parties involved in evaluation (evaluators, commissioners or program implementers).

RECOMMENDATIONS

The project identified barriers that prevent the evaluation of programs to address health and wellbeing among Aboriginal and Torres Strait Islander people from optimally benefitting those communities. It also identified promising initiatives and exemplars that suggest ways to improve practice. This project makes the following recommendations for an evaluation framework to improve Aboriginal and Torres Strait Islander health and to ensure tangible benefits from the policies, practices and services designed to improve the health of Aboriginal and Torres Strait Islander communities.

Transparency and accountability around Aboriginal and Torres Strait Islander health evaluations should be improved by ensuring access to tender documents, evaluation reports and documentation of responses to evaluations.

The project has reviewed all evaluations of programs addressing health and wellbeing among Aboriginal and Torres Strait Islander people where a request for tender was publicly advertised in the past ten years. Direct requests were made to tenders sites, relevant websites and databases, which were searched and listed contacts individually followed up. Only 5 per cent of tender documents and 33 per cent of evaluation reports were able to be obtained. Positive initiatives are underway to ensure that evaluation results are released. However, this should be expanded to include past evaluations. Documenting responses to evaluations and making these available is also crucial to transparency and accountability and in communicating benefit to Aboriginal and Torres Strait Islander communities.

Evaluations of programs addressing Aboriginal and Torres Strait Islander health and wellbeing should use the framework to address government principles for working with Aboriginal and Torres Strait Islander people.

All Australian governments have developed principles for working with Aboriginal and Torres Strait Islander people. These should be incorporated into all programs and could therefore logically be expected to be reflected in evaluations. Part A of the evaluation framework outlines indicators that can be used to assess this but evaluators should use whatever is most appropriate to the local context. If particular principles are not invoked in a program, this should be noted.

Evaluations of programs addressing Aboriginal and Torres Strait Islander health and wellbeing should use ethical frameworks that recognise the responsibilities of all parties in evaluation and make optimal use of their capabilities to deliver health benefit.

Benatar and Singer [4] have proposed ‘a new, proactive research ethics concerned with reducing inequities in global health and achieving justice in health research and health care’. These new ethical frameworks for ensuring that research and evaluation deliver ‘health justice’ identify specific obligations for commissioners, evaluators and program implementers [5]. Parties are assigned obligations because the functions they typically assume make them particularly capable of fulfilling the obligations [6, 7]. This expands upon but is consistent with existing approaches to ethics in Aboriginal and Torres Strait Islander health [8, 9].
Aboriginal and Torres Strait Islander leadership and ownership should be supported at all phases of the program planning and evaluation cycle.

There is strong recognition that Aboriginal and Torres Strait Islander people need to be involved in program development and evaluation. However, this often consists of consultation rather than leadership roles. Where Aboriginal and Torres Strait Islander leadership is recognised, it is more likely to be at local levels of decision making, often when program parameters have already been defined. Meaningful engagement of Aboriginal and Torres Strait Islander people at any point in the program planning and evaluation cycle will add value. However, improving the benefit delivered through evaluation to Aboriginal and Torres Strait Islander people will require a systemic approach to engagement that enables both leadership and ownership.

Supporting the recommendations

Tender processes should support evaluation proposals that are most likely to benefit Aboriginal and Torres Strait Islander people.

The tender process provides commissioners with an opportunity to define their preferences in the conduct of an evaluation and the criteria against which evaluators are selected. This is a powerful agenda-setting activity in any evaluation. Defining selection criteria around the benefit provided to Aboriginal and Torres Strait Islander people would strengthen this imperative in evaluation.

Evaluation contracts and agreements should be consistent with principles for working with Aboriginal and Torres Strait Islander people and ethical frameworks

Developing contracts and agreements that support community engagement and ownership of data would improve benefits to Aboriginal and Torres Strait Islander people and align contracting with ethical frameworks.

Tender documents, evaluation reports and responses to evaluation should be stored on a publicly accessible database

Tender documents, evaluation reports and responses to evaluation should be stored on a publicly accessible database. If there are sensitivities, information can be embargoed for a period of time.

Past evaluation reports should be released

Past evaluation reports should be released so that the evidence base around policy and programs is more transparent.

A directory of current evaluations should be developed.

Developing a directory of current evaluations would help address issues around the level of evaluation in Aboriginal and Torres Strait Islander health and wellbeing. It would also provide a platform for commissioners, communities and evaluators to share learnings.

Evaluation data should be stored so that they are accessible to the communities in which data are collected, and local data management/analysis capability should be supported.

Aboriginal and Torres Strait Islander communities should host repositories for their own data but this would require considerable capacity building. In the interim, hosting data with a third-party organisations should be considered if data sovereignty and security can be respected.

Training opportunities should be provided to support Aboriginal and Torres Strait Islander leadership in evaluation and participation in co-design.

Training to specifically support Aboriginal and Torres Strait Islander leadership in evaluation will improve benefits to the community both through employment and by improving evaluation itself.

Longer-term partnerships should be developed to support Aboriginal and Torres Strait Islander leadership in evaluation and participation in co-design.

Optimally, supporting a greater focus on co-design and the associated investment in training may require the development of longer-term partnership arrangements with communities.

Evaluation reports should report against principles for working with Aboriginal and Torres Strait Islander people both in terms of the program and evaluation itself.

Clear reporting against principles for working with Aboriginal and Torres Strait Islander people would help develop the evidence base around the application of these principles.

Evaluation reports should report against ethical frameworks both in terms of the program and evaluation itself.

Clear reporting against ethical frameworks would help develop the evidence base around the application of these frameworks.

New models of developing programs and evaluations should be considered.

The project primarily considered evaluations where the evaluator was commissioned to complete an evaluation after a program was developed. A number of emergent approaches to program development and evaluation are more closely embedded within communities.
REFERENCES

1. Bainbridge, R. et al. 2015, No one’s discussing the elephant in the room: Contemplating questions of research impact and benefit in Aboriginal and Torres Strait Islander Australian health research, BMC Public Health, vol. 15:10.


8. National Health and Medical Research Council (NHMRC) 2003, Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research, NHMRC, Canberra.

9. NHMRC 2010, The NHMRC Road Map II: A strategic framework for improving the health of Aboriginal and Torres Strait Islander people through research, NHMRC, Canberra.