

26 February 2025

## **FPDN Submission**

### **Inquiry into Measuring Outcomes for First Nations Communities**

#### **About First Peoples Disability Network**

The First Peoples Disability Network (FPDN) is the national community-controlled disability peak of and for Australia's First Nations people with disability, their families, and communities. We are also a Disability Representative Organisation, a member of the Coalition of Peaks, and a partner to all Australian governments on the National Agreement on Closing the Gap. We are governed by First Nations people with lived experience of disability, and our organisation has a strong focus on human rights and self-determination underpinned by the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) and the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).

#### **Background**

For millennia, First Nations peoples, communities, and cultures have practiced models of inclusion. However, despite this, since colonisation First Nations people with disability and their families have been and continue to be amongst the most seriously disadvantaged and disempowered members of the Australian community. FPDN gives voice to their aspirations, needs and concerns and shares their narratives of lived experience. Our purpose is to promote recognition, respect, protection, and fulfilment of human rights, secure social justice, and empower First Nations people with disability to participate in Australian society on an equal basis with others. Our Policy team advocates for First Nations people with disability nationally and internationally, proactively engaging with communities around the country and actively representing the voices of First Nations people with disability across public policy and discourse.

FPDN is also guided by both the social and cultural models of disability. The social model views society as the disabler that creates barriers to full participation; if a person with



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disability cannot access something, it is because that thing was not designed to be accessible. However, FPDN recognises the critical need to move beyond a social model to ensure the cultural determinants of what keeps First Nations people with disability strong is centred when designing policies and programs to improve outcomes for First Nations people. We call this a cultural model of inclusion. A cultural model of inclusion recognises the diversity of cultures, languages, knowledge systems, and beliefs of First Nations people and the importance of valuing and enabling participation in society in ways that are meaningful to First Nations communities.

## Position

This submission presents FPDN's position on measuring outcomes for First Nations communities in line with this Inquiry.

FPDN was involved in the development of the submission and associated recommendations submitted by SNAICC to the Select Committee on Measuring Outcomes for First Nations Communities. FPDN endorses these recommendations in full and asks the Select Committee to refer to SNAICC's submission to the for a full justification for each recommendation.

For our submission, we have built on SNAICC's recommendations and have also included some additional context to support the full inclusion of First Nations children and parents with disability, and their families and communities. Further to this, we have added additional recommendations that focus on disability, and how disability intercepts with suicide prevention and incarceration.

## Recommendations

FPDN makes the following recommendations to address the regression of Closing the Gap Targets 4, 10, 12, and 14. Some of these build on recommendations made by SNAICC, to enhance FPDN's First Nations disability lens, whilst others are FPDN standalone recommendations. The full list of SNAICC's recommendations is included in *Appendix A*.

FPDN recommends that:



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1. Governments must fully fund the Early Childhood Care and Development, Disability, and Housing Sector Strengthening Plans, to ensure First Nations people with disability, including children and families, have access to the supports they need and that the community-controlled sector is strengthened to deliver these supports. This funding for the Early Childhood and Housing plans must include a dedicated focus on First Nations children and adults with disability.
2. All governments must commit additional funding to the Justice Policy Partnership to ensure continued collaboration on issues affecting First Nations people in the justice system or at risk of contact with the justice system. This must include Australian Government funding for disability-specific justice initiatives in every state and territory, which is necessary to develop tailored responses based on jurisdictional policy and legislation differences that national policy currently cannot address. The Justice Policy Partnership has already commenced work on a Queensland-specific initiative under the First Nations Disability Justice Cross-Sector Partnership, which FPDN has been co-leading alongside the Queensland Government. Ongoing resourcing is required to maintain traction and ensure work to date can be effectively used to inform future solutions.
3. Essential that funding mechanisms, measurement and evaluation of the socio-economic targets are reformed by governments to ensure that they produce more accurate insights. Additionally, a self-determining and strengths-based lens must be placed across this data to ensure that it is not weaponised against First Nations people, and is instead viewed through a holistic, culturally safe and responsive lens. Actions must include:
  - a. Ensuring culturally safe disability screening is available for all children, particularly those in contact with child protection, justice systems (incl. criminal and family courts) and ensure this data is recorded for children entering out-of-home care. Disability screening should also be made available for parents involved with child protection. All diagnoses must be followed by



referrals to disability support and advocacy services before child removal can be considered or sentencing is given.

- b. Establishing an Independent Indigenous Data Agency that reflects the recommendations made by the Productivity Commission in their Review of Closing the Gap (i.e., recommending a Bureau of Indigenous Data, which has not been agreed to but outlined important responsibilities that must be assigned to an independent, self-determining body)<sup>1</sup>. Senior leadership must be reflective of the prevalence of disability amongst the First Nations population and include representation from First Nations people with disability. Indigenous Data Sovereignty/Governance and disability data must be built into the Agency's strategic priorities and planning, and the Agency must have a prominent role in determining how best to include data sovereignty and governance in Closing the Gap.
  - c. Moving away from inaccurate and under representative population-based funding for remote area diagnosis and support, as it does not meet the needs of communities, and instead implement needs-based funding.
4. First Nations children and adults are vastly overrepresented in the out-of-home care and criminal justice systems, and because of this, governments must overhaul policies and funding decisions that are made which affect this cohort with a lens of cultural responsiveness. Given the rates of disability amongst First Nations people, it is vital for governments to get a better understanding of First Nations concepts, and interpretations of disability, and of the systemic injustices that present barriers to disability diagnosis and subsequent access to supports. Opportunities to address this include:
- a. Improving reporting under the *Report on Government Services* to include the proportion of expenditure provided to ACCOs for justice, early childhood education, child protection, and disability and mental health services.
  - b. Work with the proposed Independent Indigenous Data Agency, and the Coalition of Peaks and other relevant bodies (including the NIAA, ABS, and state





and territory governments) to implement national reporting on the prevalence of child/parent disability for children in care, and on the disability status of people in the justice system, accessing mental health services, and dying by suicide. This data must be embedded in reporting against Closing the Gap targets. This must also be accompanied by research into how often people with disability are referred to disability supports prior to child removal, incarceration, or death by suicide.

5. Improve government partnerships and drive transformation of government agencies, in line with the Closing the Gap priority reforms and the findings and recommendations of the Productivity Commission's *Review of the National Agreement on Closing the Gap*. Embedding the commitments of the National Agreement on Closing the Gap in other inter-governmental agreements will be key to achieving this and was recommended in the Review.
  - a. This must include strengthening commitments to First Nations people with disability in Closing the Gap and *Australia's Disability Strategy 2021-2031*. Disability and Indigeneity must be identified as cross-cutting areas in future iterations of each framework, with specific measurement and reporting requirements linked to First Nations people with disability as a vulnerable, priority cohort embedded in each. This will require strengthening collaboration between the NIAA, Department of Social Services, and FPDN to ensure effective cross-implementation of these frameworks.

## Data and service gaps

One of the most vital aspects of improving reporting and progress against the Closing the Gap targets is reforming how data is collected, stored, interpreted, and used.

The current data on First Nations disability prevalence is limited and often inaccurate due to under-reporting and fragmentation across multiple datasets, as well as Western methodologies failing to account for cultural understandings of disability.



Existing data also lacks the detail needed to understand the experiences of First Nations people with disability in different contexts, such as urban, regional, rural, or remote areas, and considering different ages, genders, and other factors.

We know there is a considerable lack of supports available in regional, rural, and remote settings, but more targeted data is needed to identify exactly how many services people with disability need are available in different settings, how much funding is dedicated to disability, advocacy, and early childhood programs in each area, and how this compares to the number of children and parents likely to have disability in these areas.

Early disability screening is one of the best ways to ensure this data is available and allow long-term measurement and tracking of outcomes for First Nations people with disability, from early childhood throughout education, employment, etc. It would allow governments and communities to track how outcomes change for people post-diagnosis and support provision, which in turn would provide a foundation to fund appropriate supports more equitably. This would require a shift away from population-based funding to needs-based funding to ensure resources are allocated efficiently and people have access to the services they need.

Improving data on First Nations people with disability requires governments to prioritise and embed Indigenous Data Sovereignty (IDS) and Governance (IDG). IDS recognises the right of Indigenous people to own and control their data at all stages, and IDG is the right for them to decide how and why their data is collected, accessed, and used to ensure it reflects their priorities and values<sup>2</sup>. In early childhood and child protection settings, adult justice settings, and mental health service settings, IDS and IDG offer a means to improve culturally safe recognition and reporting of disability, allowing greater accuracy and a foundation to implement targeted supports, drive progress against all Closing the Gap targets, and ensure governments can be held accountable for their commitments.

An additional challenge is the need for comparative data. To understand in which settings and how significantly First Nations people with disability are over-represented, we need improved data collection for the entire population that is disaggregated by cohort. Improving data collection for First Nations people with disability could serve as a driver for improved data collection across the board, having benefits that extend far beyond Closing the Gap.



## Addressing Targets 4 and 12

FPDN worked collaboratively with SNAICC on their submission. Given that their submission includes extensive context and recommendations around addressing regression against targets 4 and 12, we refer the Select Committee to their submission for further context on these targets. However, we will address some additional issues with data reporting in the early childhood context and how this detracts from potential progress.

A key example of poor data hindering progress in the early childhood context is that accurate data on the number of children and young people in out-of-home care with disability, and what supports these children are provided, is simply not available. Under-reporting and a lack of culturally appropriate screening are major reasons for this.

Additionally, there is no publicly available data on how many First Nations children in out-of-home care have a parent with disability. Having this information is critical to understanding the racial and ableist drivers of child removal and taking practical action to address this.

The data disaggregation for Target 4 does include disability status but uses the parameters of ‘medically diagnosed special need’ and ‘identified by teachers as requiring further assessment to determine if they have a developmental difficulty that affects their ability to do schoolwork in a regular classroom’. This excludes many children who are undiagnosed or whose behaviours are misinterpreted, e.g. as misbehaving instead of having a psychosocial or learning disability. Over a quarter of First Nations children commencing school in 2021 were identified as needing further assessment<sup>3</sup>, clearly identifying the need for better screening to support reporting against Target 4.

Target 12 also includes disability status but again relies on ‘a reported disability’ when we already know under-reporting is a significant issue in this space. Initial steps to address under-reporting against Target 12 have already been suggested. For example, the Disability Royal Commission made the following recommendation in their final report:

- 9.2: Ages and Stages Questionnaire-Talking about Raising Aboriginal Kids (ASQ-TRAK)  
*State and territory governments should ensure all First Nations children up to five years of age coming into out-of-home care are screened using the culturally adapted*



*developmental screening Ages and Stages Questionnaire-Talking about Raising Aboriginal Kids (ASQ-TRAK) tool. Children who are vulnerable in two or more of the five domains of communication, gross motor, fine motor, problem solving, and personal-social should be supported by an application for an Early Childhood Early Intervention plan.*

FPDN supports this recommendation in principle, noting its implementation should heavily involve SNAICC and other relevant organisations. However, our position is that screening should be undertaken before children enter care. We strongly support screening be made available for all children (regardless of age) and their parents in contact with child protection. This would allow creation of data to help identify the prevalence of disability and provide a means to explore how disability status affects contact with child protection, as well as allowing disaggregated reporting against Target 12. Implementing screening prior to entering care also allows appropriate supports to be put in place. Where screening is undertaken, all diagnoses must be followed by referrals to disability support and advocacy services in the first instance (this must be a first step before child removal is even considered, as offering the appropriate supports may alter the circumstances that led to engagement with child protection and help keep families together).

### **Intersection of other targets with early childhood**

This submission has so far focused on supporting and building on the recommendations developed by SNAICC (with FPDN's support) that seek to address regression against Closing the Gap targets 4 and 12. However, we note that the intersection of disability and Indigeneity impacts almost every aspect of life for First Nations people with disability and is thus linked to every Closing the Gap target.

For example, introducing fully funded, culturally safe and responsive screening for disability in early childhood would have flow-on effects that go beyond targets 12 and 14 of Closing the Gap. Early diagnosis is the best way to implement early supports for children and families, meaning children are more likely to engage in education (supporting target 3). From here, having continuous access to culturally safe supports builds a foundation to support First





Nations children with disability to grow up in a safe, supportive environment, making them more likely finish secondary school (target 5), stay out of detention (targets 10 and 11), and have higher levels of social and emotional wellbeing (target 14). Access to better supports from childhood would vicariously impact every other target, though these examples highlight some that have a clearer direct link. Early diagnosis would also improve the ability to measure outcomes based on disability status, which is currently measured very inconsistently across the targets (and not measured at all for some).

Implementing high quality, connected, and widespread supports at the earliest possible stage ensures children can thrive throughout their lives and allows us to start tackling the misconceptions and discrimination faced by First Nations people with disability at the beginning of the cycle, rather than after they have been thrust into a fear of apprehended discrimination, avoidance of necessary services and supports, disengagement with cultural life, and interactions with the justice system.

### **Beyond childhood – suicide and incarceration**

In relation to this Inquiry's Terms of Reference, we wish to also comment on the regression against targets 10 (by 2031, reduce the rate of First Nations adults held in incarceration by at least 15 per cent) and 14 (significant and sustained reduction in suicide).

Identifying how many First Nations people have disability is exceedingly difficult due to extremely poor data collection and other factors, including the under-reporting, under and misdiagnosis, and differing cultural understandings of disability we outlined previously.

Current disability disaggregation for Closing the Gap targets uses restrictive definitions of disability as well as data that is not comparable between jurisdictions, making it of limited to no use for communities.

The latest update to the Closing the Gap Information Repository dashboard was released on 13 November 2024. The dashboard is intended to provide 'the most up-to-date information available on the targets and indicators'. However, Targets 10 and 14 do not include data on people with disability, instead noting that future reporting will seek to include data disaggregated by disability status. It is unclear what this will look like, as without a



standardised, culturally safe means to identify disability, accurate disability data will be impossible to attain.

### **Target 10 – adult incarceration**

The disproportionate rate of incarceration for First Nations people with disability in a significant issue that must be addressed before regression against Target 10 can be reversed. First Nations people in Australia are imprisoned at the highest rate of any people in the world, at a rate 17 times more than non-Indigenous Australians<sup>1</sup>. Only around 3 per cent of the Australian population aged 18-64 identify as First Nations people<sup>2</sup>, yet, in 2024, 36 per cent of the adult prisoner population in the same age bracket were First Nations people<sup>3</sup>. Precise data on how many of these people have disability is non-existent. However, the Aboriginal Legal Service of Western Australia estimated that 95 per cent of First Nations people appearing in court charged with a criminal offence had some form of intellectual disability, a cognitive impairment, or a mental illness<sup>4</sup>. FPDN, following discussion with community and national representative bodies, believes that this figure exceeds 80-90 per cent nationally. Despite existing evidence emphasising that First Nations people with disability are disproportionately represented in the justice system, disability status remains listed under Target 10's target data specifications as an area 'future reporting will seek to include'. This provides no clarity on how or when such data will be included, whether its collection will

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<sup>1</sup> Roettger, M., Lockwood, K., and Dennison, S., 2019, 'Indigenous people in Australia and New Zealand and the intergenerational effects of incarceration', Indigenous Justice Clearinghouse. Retrieved from: <https://www.indigenousjustice.gov.au/wp-content/uploads/mp/files/publications/files/intergenerational-effects-of-incarceration-fa.pdf>

<sup>2</sup> Australian Bureau of Statistics 2021, 'Estimates of Aboriginal and Torres Strait Islander Australians', ABS. Retrieved from: <https://www.abs.gov.au/statistics/people/aboriginal-and-torres-strait-islander-peoples/estimates-aboriginal-and-torres-strait-islander-australians/latest-release>

<sup>3</sup> Australian Bureau of Statistics 2024, 'Prisoners in Australia', ABS. Retrieved from: <https://www.abs.gov.au/statistics/people/crime-and-justice/prisoners-australia/latest-release>

<sup>4</sup> Australian Senate Community Affairs References Committee 2016, 'Indefinite Detention of People with Cognitive and Psychiatric Impairment in Australia', Commonwealth of Australia, p. 24. Retrieved from: [https://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate/Community\\_Affairs/IndefiniteDetention45/~/\\_media/Committees/clac\\_ctte/IndefiniteDetention45/report.pdf](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/IndefiniteDetention45/~/_media/Committees/clac_ctte/IndefiniteDetention45/report.pdf)



abide by the principles of IDS and IDG, and how disability will be defined. This Inquiry presents an opportunity to work with First Nations people with disability, including through FPDN as the peak representative organisation, to identify the best way to measure and report progress under Target 10 in a way that is genuinely inclusive of First Nations people, and to emphasise the importance of nationally consistent measurement and reporting.

### ***Target 14 – increased suicide rates***

To tackle the problem of regression against Target 14 and increased suicide rates, we require a much better understanding about the way that disability can have a compounding effect on mental health and suicide for First Nations people, meaning that disaggregated data is essential. Unfortunately, one of the nuances often missed is that separate to disability itself, disability is also a contributing factor to some of the major causes of mental health distress and suicide. For instance, unemployment or lack of stable employment are identified as risks which increase the likelihood occurrence of suicide. However, disability is highlighted as one of a multitude of social and interconnected factors which increase the chances that someone may not be able to find employment<sup>4</sup>. In fact, research data shows that for people who were accessing disability services, the leading cause of mortality for those using employment support was suicide. Suicide was also the second leading cause of preventable deaths<sup>5</sup>. Other factors which disproportionately impact First nations people with a disability also increase the risk for suicide, including discrimination and the lived experience of family and domestic violence. This is also inherently connected to systemic ableism and racism which exists not only in the employment system, but in other sectors as well.

Addressing discrimination will be essential to improving the mental health and wellbeing of First Nations people with disability and supporting a reduction in suicide. However, the latest Closing the Gap data shows that in 2022, 60 per cent of First Nations people over 18 years old reported they had experienced racial prejudice in the past 6 months, representing an increase from 43 per cent in 2018<sup>6</sup>. We expect this number would be even higher if it included the number of people who experienced racial or ableist discrimination, yet this does not appear to be a consideration under this target.





Future measurement needs to incorporate factors beyond racial discrimination and explore deeper ways to measure wellbeing. This needs to include experiences of ableism but must also include factors such as connection to culture, Country and kin, and access to services (including disability services and mental health support services).

### **Aligning with *Australia's Disability Strategy 2021-2031***

The focus of both SNAICC and FPDN's submissions has been on Closing the Gap targets, per the Inquiry Terms of Reference. However, FPDN notes the importance of ensuring work affecting First Nations people with disability is not conducted in siloes, thus it is critical to consider how the implementation of *Australia's Disability Strategy 2021-2031* (ADS) relates to Closing the Gap.

Regarding the targets discussed in this submission (4, 10, 12, and 14), each links to areas within the ADS that offer a means to further leverage work to address the regression against these targets. For example, the Safety and Justice Outcome Area includes specific priorities around human rights, trauma-informed approaches, and ensuring the criminal justice system responds effectively to people with disability (with a focus on reducing overrepresentation), which correlates with targets 10 and 12. The Education and Learning Outcome Area has a focus on high-quality early childhood education and care, aligning with Target 4; the Health and Wellbeing Outcome Area addresses health services and mental health, whilst Community Attitudes broadly addresses discrimination and inclusion in line with Target 14. The ADS Outcomes Framework measures progress against the policy priorities. Current measures do not provide disaggregated data based on cohorts, but including this in future is critical to understanding how outcomes differ based on other elements of a person with disability's identity.

All Australian governments have committed to both Closing the Gap and the ADS. Currently, neither framework adequately considers First Nations people with disability (disability is missing from Closing the Gap and First Nations people are not covered under any targeted areas in the ADS, although disability is identified as a cross-cutting outcome area under the *Commonwealth Closing the Gap Implementation Plan*).



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The Productivity Commission's *Review of the National Agreement on Closing the Gap* recommended embedding the commitments of Closing the Gap in other inter-governmental agreements. FPDN sees embedding crossover between Closing the Gap and the ADS as an essential first step to achieve this. Future iterations of both frameworks must include stronger inclusion of the intersection between Indigeneity and disability, and the need to ensure responses consider the distinct context and needs of intersectional cohorts.

## Conclusion

The current regression against Closing the Gap targets 4, 10, 12, and 14 highlights the failure to not only improve outcomes for First Nations people with disability, but also to accurately measure progress. The lack of data on First Nations people with disability is particularly concerning to FPDN given the prevalence of disability in First Nations communities. Without accurate data on progress for people with disability under each of the Closing the Gap targets, it is impossible to know how outcomes differ for people with disability, and to develop targeted measures for this cohort.

FPDN's recommendations focus on increasing funding, improving measurement and reporting, and ensuring cross-implementation of existing frameworks to best support First Nations people with disability, who often sit at the intersection of such frameworks and are thus left behind when their intersecting needs are not met.



## Appendix A: SNAICC recommendations in full.

### SUBMISSION TO THE INQUIRY INTO MEASURING OUTCOMES FOR FIRST NATIONS COMMUNITIES

#### Recommendations

To address the regression of Closing the Gap Targets 4 and 12, the Commonwealth Government must:

1. Fully fund the [\*Early Childhood Care and Development Sector Strengthening Plan\*](#), to ensure Aboriginal and Torres Strait Islander children and families have access to the supports they need.
2. Commit to transition a target portion of funding for child and family services programs to ACCOs to enable Aboriginal and Torres Strait Islander families to access culturally safe services that meet their needs and prevent involvement with the child protection system (target/outcome 12). This funding target should be proportionate to the needs of First Nations children and families (around 30-40% of funding).<sup>5</sup> These targets could be developed and implemented as part of the Department of Social Services (DSS) *Families and Children Activity Funding Review* which is currently underway.
3. Support children to thrive in their early years through improving the accessibility of high quality and culturally responsive integrated health, education and care services for Aboriginal and Torres Strait Islander children by:
  - a. Implementing a dedicated, needs-based, sustainable funding model for ACCOs delivering integrated early years services, as recommended in the *Funding Model Options for ACCO Integrated Early Years Services Final Report*.
  - b. Working with the First Peoples Disability Network to increase funding and reduce barriers to culturally safe and responsive disability advocacy and support services

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<sup>5</sup> The Stronger ACCOs, Stronger Families report recommends funding targets of approximately 30-40%, noting that Aboriginal and Torres Strait Islander children make up 43.7% of all children in out-of-home care, providing a proxy indicator of the level of need for preventative supports. Higher targets of 90-100% are recommended for targeted programs for Aboriginal and Torres Strait Islander children and families and in discreet communities.



and allied health services, to provide timely assessments, care and support to Aboriginal and Torres Strait Islander families with disability, particularly children with learning disability and developmental delay. This includes resourcing the Disability Sector Strengthening Plan as a priority. Funding must be needs-based and prioritise community-controlled organisations while supporting mainstream organisations to embed cultural safety in regions with a lack of community-controlled services.

4. Reform measurement and evaluation of the socio-economic targets to improve the accuracy of insights and shift focus from deficits-based administrative data to holistic and strengths-based measures of wellbeing. Priority actions include:
  - a. Expanding measurement of the Closing the Gap targets beyond the headline targets, including reporting on all the supporting indicators across the Priority Reforms and socio-economic outcomes.
  - b. Working with the forthcoming Data Policy Partnership and Aboriginal and Torres Strait Islander Centre for Excellence in Child and Family Support to embed Indigenous Data Sovereignty principles and Aboriginal and Torres Strait Islander leadership in determining and implementing socio-economic measures that engage with unique wellbeing indicators for Aboriginal and Torres Strait Islander children, particularly connection to culture, Country and kin.
  - c. Establishing an Independent Indigenous Data Agency, to respond to recommendations to improve the implementation of Priority Reform Four (improve data and information sharing).<sup>6 7</sup>
  - d. Change the definition and measurement rules of out-of-home care under Closing the Gap to include children on permanent care orders to more accurately reflect

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<sup>6</sup> Gray, Eva, Bray and Schmider 2024, 'Closing the Gap Priority Reforms Performance Measurement Project 2023-2024', ANZSOG and ANU.

<sup>7</sup> Productivity Commission 2024, 'Review of the National Agreement on Closing the Gap', p. 77. Retrieved from: <https://www.pc.gov.au/inquiries/completed/closing-the-gap-review/report/closing-the-gap-review-report.pdf>.



progress (or lack thereof) against Target 12, aligning with SNAICC's definition as applied in the annual *Family Matters Report*.

5. Build a better understanding of how policy and funding decisions are driving the overrepresentation of Aboriginal and Torres Strait Islander children in care, and opportunities for governments to address this, by:
  - a. Implementing the Aboriginal and Torres Strait Islander Child Placement Principle to the standard of Active Efforts and reporting on all agreed indicators, as part of fully implementing Action 5 of the Safe and Supported *Aboriginal and Torres Strait Islander First Action Plan 2023-2026*.
  - b. Implementing national reporting as part of the *Report on Government Services* on the proportion of child protection, early childhood education and care and family services expenditure provided to ACCOs.
6. Build their capacity to work in genuine partnership and prioritise transformation of government agencies in alignment with the findings and recommendations of the Productivity Commission's *Review of the National Agreement on Closing the Gap* (the National Agreement). This includes:
  - a. Developing a system of clear accountability mechanisms and measures for government agencies and mainstream organisations that do not comply with their responsibilities under the National Agreement.
  - b. Better coordinate reform across Commonwealth, state and territory government departments to progress the Closing the Gap outcomes and increase resourcing to the Coalition of Peaks to support and advise on this work.

