



**Gayaa Dhuwi
(Proud Spirit)
Australia**



**Productivity Commission's Final Review
into the National Mental Health and
Suicide Prevention Agreement**

26 March 2025



About Gayaa Dhuwi (Proud Spirit) Australia

Gayaa Dhuwi (Proud Spirit) Australia would like to acknowledge the traditional custodians of Country throughout Australia, and pay respects to all Elders, past, present and emerging.

Gayaa Dhuwi (Proud Spirit) Australia is the national leadership body for Aboriginal and Torres Strait Islander social and emotional wellbeing, mental health, and suicide prevention. As a community-controlled organisation, it is governed by Aboriginal and Torres Strait Islander experts and peak bodies, working in these areas to promote collective excellence in mental health care.

Gayaa’ means happy, pleased, and proud, and ‘Dhuwi’ means Spirit, in the Yuwaalaray and Gamilaraay languages of north-west New South Wales.

Gayaa Dhuwi (Proud Spirit) Australia’s vision is the highest attainable standard of social and emotional wellbeing, mental health and suicide prevention outcomes for Aboriginal and Torres Strait Islander peoples.

About the Productivity Commission’s Final Review into the National Mental Health and Suicide Prevention Agreement

The Productivity Commission’s Final Review into the National Mental Health and Suicide Prevention Agreement (the National Agreement) is a critical evaluation of the Agreement’s effectiveness in improving mental health outcomes and reducing suicide rates across Australia. Initiated by Treasurer Hon Dr Jim Chalmers MP under the Productivity Commission Act 1998, the inquiry seeks to assess the objectives, outcomes, and governance structures of the agreement and identify opportunities for reform. The review examines the effectiveness of current policies, how the gaps and inequalities faced by Aboriginal and Torres Strait Islander peoples are addressed, and explores the efficacy of mental health service-delivery systems. An effective review of the Agreement will ensure that addressing the evolving mental health needs of Australia is met, therefore improving outcomes for individuals experiencing mental health challenges and reducing suicide rates across the nation.

The Productivity Commission has undertaken several pieces of work assessing the impact of government policies on Aboriginal and Torres Strait Islander outcomes, including most recently the progress updates on the Closing the Gap agreement (2025) and the Indigenous Evaluation Strategy (2020). Gayaa Dhuwi has welcomed the previous conclusions made the Productivity Commission in this work that has recommended governments change the way they work with Aboriginal and Torres Strait Islander communities to genuinely share power and allow for meaningful self-determination and decision-making. The position Gayaa Dhuwi has taken regarding the National Agreement aligns with these previous conclusions.

Summary

As the national peak body for Aboriginal and Torres Strait Islander social and emotional wellbeing (SEWB), mental health, and suicide prevention, Gayaa Dhuwi (Proud Spirit) Australia (Gayaa Dhuwi) has an interest in ensuring that the Agreement aligns with the needs of Aboriginal and Torres Strait Islander peoples. Suicide remains a leading cause of death for Aboriginal and Torres Strait Islander communities, and



culturally responsive, community-led approaches are essential to delivering effective interventions. The current landscape of Aboriginal and Torres Strait Islander mental health is of significant importance to the Commonwealth Government given the recent update on Closing the Gap demonstrated that social and emotional wellbeing targets are not on track and suicide rates of Aboriginal and Torres Strait Islander peoples have increased (Productivity Commission, 2025). In this context, the Productivity Commission's inquiry is a welcomed opportunity to assess the commitments and implementation of the National Agreement.

Gayaa Dhuwi calls for future agreements to set a cohesive national strategy that is implemented consistently through bilateral agreements with appropriate governance and accountability mechanisms. Governance and accountability mechanisms must embed Aboriginal and Torres Strait Islander leadership and lived experiences in policy and service delivery. The mental health and suicide prevention system must effectively meet the needs of Aboriginal and Torres Strait Islander communities by embedding social and emotional wellbeing, supporting community-led solutions and ensuring cultural safety. The next Agreement should commit to a governance structure that implements the National Aboriginal and Torres Strait Islander Suicide Prevention Strategy, the Gayaa Dhuwi (Proud Spirit) Declaration Framework and Implementation Plan, and the forthcoming refreshed National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Social and Emotional Wellbeing to support outcomes for Aboriginal and Torres Strait Islander peoples. Gayaa Dhuwi's position is supportive of, and reinforces, previous assessments made by the Productivity Commission advising that the Commonwealth Government need to change the way it operates with Aboriginal and Torres Strait Islander communities.

To obtain the highest attainable mental health and social and emotional wellbeing outcomes for Aboriginal and Torres Strait Islander peoples, Gayaa Dhuwi proposes the following recommendations to build upon the existing strengths and resilience of Aboriginal and Torres Strait Islander communities and enhance future National Agreements and their implementation.

Recommendations

- 1. Future national agreements and their commitments must translate into state and territory bilateral agreements in order to achieve outcomes at the national level and reduce system fragmentation.** Future national agreements and bilateral agreements must commit to the implementation of the Gayaa Dhuwi (Proud Spirit) Declaration Framework and Implementation Plan, the National Aboriginal and Torres Strait Islander Suicide Prevention Strategy and the forthcoming National Strategic Framework for Aboriginal and Torres Strait Islander peoples' Mental Health and Social and Emotional Wellbeing. These documents provide clear guidance on principles, outcomes and initiatives to provide culturally safe and accessible services and to embed self-determination and leadership in the mental health system.
- 2. Future national agreements and bilateral agreements much include a focus on eliminating racism in services and include initiatives focused on enhancing cultural safety.** Negative and harmful experiences at services remains a barrier for Aboriginal and Torres Strait Islander peoples accessing suitable services. Efforts to address this must be coordinated and directed by national mechanisms such as the National Agreement and in consultation with Aboriginal and Torres Strait Islander peoples.
- 3. There needs to be suitable governance mechanisms established in future agreements to enable Aboriginal and Torres Strait Islander influence and leadership and effective jurisdictional implementation of Agreements.** These governance mechanisms should leverage the policy partnerships established under the Closing the Gap agreement that exemplify self-determination through shared governance between Aboriginal and Torres Strait Islander leaders and the Commonwealth Government.
- 4. There needs to be clear implementation plan and accountability mechanisms to ensure Agreements are implemented effectively.** This should include outcomes measures that are strengths-based and informed by Aboriginal and Torres Strait Islander peoples in order to combat deficit-based narratives and to better recognise the strength, resilience and connection of Aboriginal and Torres Strait Islander communities.



Background

The Productivity Commission's Review of the National Mental Health and Suicide Prevention Agreement (the National Agreement) is assessing and making recommendations on the effectiveness of programs and services delivered under the Agreement, as well as the way governments work to achieve the goals of the National Agreement.

There is widespread recognition that Australia's mental health and suicide prevention systems require significant reform to focus on better mental health and wellbeing outcomes. The Agreement aims to improve mental health and suicide prevention for people, including Aboriginal and Torres Strait Islander peoples. This places importance on providing services that address the specific and complex issues that Aboriginal and Torres Strait Islander peoples face. The Agreement acknowledges that the complexity and interrelationships between different parts of the mental health and suicide prevention systems and broader health and other social services that Australians frequently are referred to, and the transition between different services within the system. Aboriginal and Torres Strait Islander peoples often face issues when engaging with providers within this fragmented service environment.

Gayaa Dhuwi calls for future agreements to set a cohesive national strategy that is implemented consistently through bilateral agreements with appropriate governance and accountability mechanisms, including meaningful influence and decision-making between governments and Aboriginal and Torres Strait Islander leaders.

Commitment and alignment to Aboriginal and Torres Strait Islander-led strategies and frameworks

There are several strategies and plans developed by Aboriginal and Torres Strait Islander peoples that should be guiding and informing future national and bilateral agreements and their implementation.

The Gayaa Dhuwi (Proud Spirit) Declaration (the Declaration) emphasises the importance of Aboriginal and Torres Strait Islander leadership across all parts of the Australian mental health system to achieve the highest attainable standard of mental health and suicide prevention outcomes for Aboriginal and Torres Strait Islander peoples. The five central themes of the Declaration promote a transformational approach to mental healthcare delivery and emphasises cultural safety and competence in conjunction with best clinical practice. The Gayaa Dhuwi (Proud Spirit) Declaration Framework and Implementation Plan was launched in February 2025 and provides a long term framework and short term initiatives needed to deliver on this vision. The document was developed in partnership with Aboriginal and Torres Strait Islander leaders, mental health professionals and community stakeholders to translate the principles of the Declaration into practical, impactful actions.

The aim of the National Aboriginal and Torres Strait Islander Suicide Prevention Strategy 2025-2035 (NATSISPS) is to achieve a significant and sustained reduction in suicide and self-harm for Aboriginal and Torres Strait Islander peoples. The NATSISPS includes six priorities to achieve this vision with a focus on self-determination, cultural safety, a responsive workforce, community-led and empowered solutions and data sovereignty. Given suicide rates of Aboriginal and Torres Strait Islander peoples are continuing to increase based on latest Closing the Gap statistics (Productivity Commission, 2025), it is critical future agreements look to implement and embed Aboriginal and Torres Strait Islander-led solutions to achieve genuine progress.

The forthcoming refreshed Social and Emotional Wellbeing Framework for Aboriginal and Torres Strait Islander families and communities (SEWB Framework) provides practical guidance on how governments and services can embed social and emotional wellbeing.



What is SEWB?

Social and Emotional Wellbeing (SEWB) is a holistic concept that encompasses the mental, emotional, cultural and spiritual health of Aboriginal and Torres Strait Islander peoples. It emphasises interconnectedness, recognising that individual wellbeing is inseparable from the health of the community, relationships, Country, and cultural identity. SEWB is not just about mental health but integrates physical health, cultural practices, and spiritual connections, forming a comprehensive framework for overall health and resilience (Dudgeon et al., 2021).

The Centre of Best Practice for Aboriginal and Torres Strait Islander Suicide Prevention (CBPATSISP) identifies social and emotional wellbeing as central to suicide prevention, integrating cultural and social determinants of health (Dudgeon et al., 2021). The forthcoming SEWB Framework provides clear guidance on how SEWB can be embedded into the service system, including describing the importance of protective factors (factors that enhance or strengthen a person's social and emotional wellbeing) and risk factors (factors that risk or disrupt a person's social and emotional wellbeing). While the National Agreement did specifically mention the National Strategic Framework for Aboriginal and Torres Strait Islander Social and Emotional Wellbeing, the bilateral agreements did not mention commitment or initiatives related to the framework. Several bilateral agreements (ie: ACT, Western Australia, Tasmania, Queensland and NSW) referenced social and emotional wellbeing, but only in the context of children Head to Health centres, which are not designated Aboriginal and Torres Strait Islander services.

Future Agreements should commit to implementation of Aboriginal and Torres Strait Islander-led strategies and frameworks to produce the best possible outcomes for Aboriginal and Torres Strait Islander peoples, such as the Declaration Framework and Implementation Plan, the National Aboriginal and Torres Strait Islander Suicide Prevention Strategy, and the forthcoming refreshed National Strategic Framework for Social and Emotional Wellbeing. These documents provide clear guidance on principles, outcomes and initiatives to provide culturally safe and accessible services and to embed self-determination and leadership in the mental health system.

Eliminating racism and increasing cultural safety

There is substantial research, led by Aboriginal and Torres Strait Islander peoples that demonstrates the linkages between racism and negative health outcomes (Ferdinand et al., 2012, ANU 2021, Paradies et al., 2008). In addition to this research, there are several government policies and agreements that identify racism as a driver of poor health and wellbeing outcomes. This includes the National Aboriginal and Torres Strait Islander Health Plan 2021 – 2031, which outlines a vision for a health system free from racism (page 7), the National Aboriginal and Torres Strait Islander Workforce Plan and the National Agreement on Closing the Gap. In spite of this seeming consensus on the role and impact of racism on negative health outcomes, neither the National Agreement nor the bilateral agreements mention racism.

Cultural safety is essential to delivering effective services to Aboriginal and Torres Strait Islander peoples. The Closing the Gap Agreement defines cultural safety as “overcoming the power imbalances of places, people and policies that occur between the majority non-Indigenous position and the minority Aboriginal and Torres Strait Islander person so there is no assault, challenge or denial of the Aboriginal and Torres Strait Islander person's identity, of who they are and what they need” (page ii). In order to provide culturally safe healthcare, services and their workforce must recognize the inherent aspects of delivery of care that may prevent culturally safe care from occurring, including the impact of intergenerational trauma, the historical impact of colonisation, the inherent biases of westernized models of healthcare and unconscious individual bias (McGough., et al 2022). A gap in the National Agreement is its failure to mention or commit governments to enhancing cultural safety in the mental health system. Some of the bilateral agreements include a measure around the proportion of services delivered to the Aboriginal and Torres Strait Islander



population that are culturally appropriate, however there are no initiatives on how appropriate services will be delivered or measured.

Future agreements must include a focus on eliminating racism from services and enhancing cultural safety. Efforts to address these factors meaningfully, must be coordinated by a national effort such as the National Agreement and then implemented effectively through bilateral agreements and governance and accountability mechanisms. Aboriginal and Torres Strait Islander peoples are best placed to measure the cultural safety of services, and therefore must be involved in monitoring these initiatives at all governance levels.

Effective implementation, accountability and governance

The National Agreement and its implementation through bilateral agreements has not been conducive to delivering a cohesive national strategy for improving mental health and suicide prevention and has further fragmented the service system.

The relationship between the bilateral state and territory agreements and the National Agreement is not consistent and there are commitments made within the National Agreement that are not included in bilateral agreements. This includes a commitment under Clause 110 to implement the Gayaa Dhuwi (Proud Spirit) Declaration (page 25) that was made in the National Agreement that was not included or mentioned in any of the bilateral agreements. Furthermore, the process in which priorities within the bilateral agreements were set is not transparent and the bilateral agreements appears to include funding priorities already committed to (eg: Head to Health initiatives) rather than a coordinated approach to innovation and priorities to improve outcomes, especially for Aboriginal and Torres Strait Islander peoples.

Data and performance information between the National Agreement and the bilateral agreements is similarly misaligned. For example, the National Agreement includes a priority performance indicator as social and emotional wellbeing (SEWB) measures for Aboriginal and Torres Strait Islander peoples, however none of the bilateral agreements include such measures. Similarly, the National Agreement includes an indicator related to growth in Aboriginal and Torres Strait Islander mental health workforce that is not represented in the bilateral agreements.

Future agreements provide an opportunity to shift towards a strength-based framework for measuring progress in recognition of the complex and interrelated factors that underpin the social and emotional wellbeing and mental health of Aboriginal and Torres Strait Islander peoples. This aligns with the Gayaa Dhuwi (Proud Spirit) Declaration and the National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing which emphasise how strength in culture, community and connection support outcomes (Dudgeon et al., 2014). This shift is essential in moving away from deficit-based narratives and creating policies and programs that genuinely promote systemic and lasting change. Outcomes measurement in future Agreements should be designed in partnership with Aboriginal and Torres Strait Islander organisations and be committed to in bilateral agreements.

The governance of the implementation of the National Agreement was not conducive to Aboriginal and Torres Strait Islander self-determination, leadership and influence. Priority Reform One of the Closing the Gap agreement committed governments to work collaboratively and in genuine, formal partnership with Aboriginal and Torres Strait Islander peoples. This level of partnership and influence was not present in the development of the National Agreement, the bilateral agreements or in the governance mechanisms that monitored progress. Future agreements, bilateral agreements and governance mechanisms must be developed in partnership with Aboriginal and Torres Strait Islander peoples. The government should look to the example of the five policy partnerships established under the Closing the Gap Agreement that exemplify how self-determination and shared governance can work in practice.



Conclusion

The National Agreement and its accompanying bilateral agreements have not been effective in improving outcomes for mental health and suicide prevention for Aboriginal and Torres Strait Islander peoples. Suicide rates for Aboriginal and Torres Strait Islander peoples continue to increase. Future national agreements and their implementation present a valuable opportunity to set a cohesive national strategy for achieving results in mental health and suicide prevention. Future agreements must be developed in genuine partnership with Aboriginal and Torres Strait Islander peoples including their governance frameworks and outcomes measurement.

The recent update of the Closing the Gap progress demonstrated that governments must change the way they are operating if they are to ever meaningfully deliver outcomes for Aboriginal and Torres Strait Islander peoples. Gayaa Dhuwi welcomes the continued work of the Productivity Commission in its assessment of how government functions can better work with Aboriginal and Torres Strait Islander communities to create genuine impact.



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