



Royal Commission into Aboriginal Deaths in Custody Recommendation

64. Aboriginal involvement in research on alcohol use

That Aboriginal people be involved at every level in the development, implementation and interpretation of research into the patterns, causes and consequences of Aboriginal alcohol use and in the application of the results of that research.¹

Background²	The Royal Commission into Aboriginal Deaths in Custody (RCIADIC) emphasised that research into the causes and consequences of alcohol use in Aboriginal populations should only be conducted if it was deemed necessary by Aboriginal communities and involved them directly in its implementation. Additionally, the Commission found that action-based research that produces solutions to problems, was considered the most appropriate by Aboriginal communities.
Intent	Involve Aboriginal people in every stage of research into causes and impacts of alcohol use.
Responsibility	The Commonwealth and all state and territory governments.
Key contacts	Department of Health; Victorian Aboriginal Community Controlled Health Organisation.

Key action taken

2005 Review³	<p>The Department of Human Services assessed Recommendation 64 as partially implemented.</p> <p>Department of Human Services</p> <p>Drugs Policy and Services advised that Aboriginal people were generally consulted when research was to be conducted in their communities, and the Department of Human Services sought Aboriginal input for service development and review projects.</p> <p>There had been Aboriginal involvement in:</p> <ul style="list-style-type: none"> The Koori Drug and Alcohol Plan 2003-04 which responded to drug and alcohol issues in the Aboriginal community and was developed in response to priority areas recommended by the Koori Drug Strategy Advisory Committee. The committee included members of the Aboriginal and Torres Strait Islander Commission (ATSIC) Tumbukka Regional Council; Victorian Aboriginal Community Controlled Health Organisation (VACCHO); Ngwala Willumbong Cooperative; Rumbalara Aboriginal Cooperative; Gippsland and East Gippsland Aboriginal Co-operative; Central Gippsland Aboriginal Health Cooperative; and other community representatives.
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¹ Royal Commission into Aboriginal Deaths in Custody (Final Report, 1991) vol 2, 330 ('RCIADIC').

² Ibid.

³ Aboriginal Justice Forum (Vic), Department of Justice (Vic), *Victorian Implementation Review of the Recommendations from the Royal Commission into Aboriginal Deaths in Custody* (Review Report, October 2005) vol 1 ('2005 Review').

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- The Aboriginal division of SED Consulting conducted state-wide consultations with Aboriginal organisations, Koori Community Alcohol and Drug Workers and community members to inform establishment of the Koori Youth Alcohol and Drug Healing Service.
- The Premier’s Drug Prevention Council commissioned research to develop an understanding of the use of alcohol and drugs by young Aboriginal women, pregnant women and young mothers; develop a training program for Victorian Aboriginal health care providers on Foetal Alcohol Syndrome (FAS); and develop culturally appropriate resources for Victorian Aboriginal communities to increase awareness of FAS. This work was undertaken by VACCHO, in a consortium comprising the Victorian Aboriginal Health Service; the Koori Health Research and Community Development Unit, University of Melbourne; Ngwala Willumbong and others.
- The National Committee for the Review of Alcohol Advertising, for which Drugs Policy and Services provided the Secretariat, commissioned research on the effects of alcohol advertising on Aboriginal youth. This research was to include involvement with and feedback from Aboriginal communities.

2018 Review⁴

Commonwealth Government

Deloitte found the Commonwealth Government had **fully implemented** Recommendation 64 by promoting the inclusion of Aboriginal and Torres Strait Islander people in health research. The National Health and Medical Research Council (NHMRC) developed broad guidelines which emphasised the involvement of Aboriginal and Torres Strait Islander people at all stages of research that relates to their health. In 2010, the NHMRC launched Road Map II: A Strategic Framework for Improving the Health of Aboriginal and Torres Strait Islander People through Research which sought to improve Aboriginal and Torres Strait Islander participation in research, and to conduct further research into evaluation, intervention and priority-driven areas of Aboriginal and Torres Strait Islander health.

Victorian Government

Deloitte concluded that all states and territories including Victoria had **fully implemented** Recommendation 64 through the introduction of initiatives to support the Commonwealth.

Since then

Department of Health⁵

This recommendation was deemed fully implemented, noting the department engaged KPMG to deliver an independent evaluation of the health-based response to public intoxication reforms. Their team is co-led by their National Indigenous Practice lead partner and includes Aboriginal staff bringing their cultural expertise and perspectives to the work. The evaluation approach will include consultation with Aboriginal Community Controlled Health service providers, Aboriginal service users, and key Aboriginal led advisory groups.

⁴ Deloitte Access Economics, Department of Prime Minister and Cabinet, *Review of the Implementation of the Recommendations of the Royal Commission into Aboriginal Deaths in Custody* (Report, August 2018) 131-132 ('2018 Review').

⁵ Department of Health (Vic), 'Review of Recommendations from the Royal Commission into Aboriginal Deaths in Custody (RCIADIC) ' (Response to AJC Request).

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The Minister for Mental Health also formed the Implementation Monitoring and Oversight Group. The group is majority Aboriginal including its chair. Its work involves regular consultation with community.

Victorian Aboriginal Community Controlled Health Organisation⁶

For over 35 years, our Aboriginal and Torres Strait Islander communities in Victoria have been advocating to have agency over how health, medical and wellbeing research that impacts us, is conducted.

Since colonisation, our people have been subjected to culturally inappropriate and unsafe health and medical research, some of which fails to translate into meaningful benefits for us. Our Community in Victoria has long been attempting to change the way health research is conducted to make it ethical and respect our cultures, knowledges, needs and aspirations.

The Victorian Government finally answered this call in 2018 and took a necessary step by committing to the development of a research accord and provided initial funding for VACCHO to lead its development and initiate implementation.

Marra ngarrgoo, marra goorri, launched in October 2023, is a key action under the Aboriginal Health and Wellbeing Partnership Agreement between VACCHO and the Victorian Government. Research organisations that intend to, or already conduct, health, medical, and wellbeing research that targets, involves or impacts Aboriginal and Torres Strait Islander people in Victoria can contact the Victorian Aboriginal Research Accord Project (VARAP) team at VACCHO about participation in the implementation of the Accord.

Achievement of the objectives and vision of *marra ngarrgoo, marra goorri* requires strong and effective strategic direction, vision, and leadership that is culturally appropriate. Therefore, an Aboriginal and Torres Strait Islander-led Accord Governance Group (AGG) has been set up to govern the stipulated implementation actions, and the evaluation and monitoring of the Accord.

Evidence of impact

Authorising documents

***marra ngarrgoo, marra goorri*⁷**

The vision of the Accord is to improve the ethical standards of Aboriginal health, medical and wellbeing research in Victoria so that they align with Aboriginal principles of self-determination.

The objectives sought by the Accord are:

- implementing principles of self-determination by increasing rates of Aboriginal-led research and Aboriginal participation in research
- creating equitable and trusting relationships between Aboriginal peoples and the health, medical and wellbeing research sector

⁶ VACCHO, 'marra ngarrgoo, marra goorri, The Victorian Aboriginal Health, Medical and Wellbeing Research Accord', *Victorian Aboriginal Research Accord Project (VARAP)* <<https://www.vaccho.org.au/accord/>> ('marra ngarrgoo, marra goorri, The Victorian Aboriginal Health, Medical and Wellbeing Research Accord').

⁷ Ibid.

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	<ul style="list-style-type: none"> • enhancing health benefits for Aboriginal peoples by identifying Aboriginal health, medical and wellbeing research priorities that are relevant to and impact positively on Community • improving the way Aboriginal research is conducted in Victoria, for it to become more cognisant of past trauma, respectful of Aboriginal lore and customs and be culturally appropriate • empowering Aboriginal peoples by actively contributing to research methodologies using Aboriginal ways of knowing, being and doing • protecting Aboriginal health, medical and wellbeing data, knowledges, practices and knowledge systems provided during research, using Aboriginal-led mechanisms <p>The Accord has been developed through broad engagement with Community and the health and medical research sector.</p>
Outputs	<ul style="list-style-type: none"> • Victorian Aboriginal Research Accord Project team at VACCHO. • <i>marra ngarrgoo, marra goorri</i>, the Aboriginal Health, Medical and Wellbeing Research Accord provides a framework to help researchers and research organisations improve ethical standards for research that impacts Aboriginal communities across Victoria. • Aboriginal and Torres Strait Islander-led Accord Governance Group.
Outcomes	<p>Adoption of <i>marra ngarrgoo, marra goorri</i></p> <p>Several research bodies and health organisations have endorsed or officially joined the Accord since its launch, including the Murdoch Children's Research Institute (MCRI) and the Burnet Institute. This demonstrates a commitment by these organisations to transform their practices towards a self-determined approach to Aboriginal health research.</p> <p>MCRI Director Professor Kathryn North said '<i>joining the Accord isn't just a matter of policy – it's a promise to listen, to learn, and to ensure our work lifts up Aboriginal and Torres Strait Islander children and families.</i>'⁸ In addition, Burnet Director and CEO Professor Brendan Crabb described <i>marra ngarrgoo, marra goorri</i> as '<i>not just morally and ethically the right thing to do, but also the evidenced-based way to better research outcomes.</i>'⁹ He emphasised that research is most successful when the communities involved both want the work to happen and feel safe with how it is conducted.</p>
Community views	<p>Graham Atkinson, Indigenous Elder Representative, Melbourne Academic Centre for Health Board and Co-chair, Aboriginal Leadership Group</p> <p><i>The Accord provides a timely opportunity for Aboriginal peoples to participate in research that, among other things, is Aboriginal led and ethically conducted.</i></p>

⁸ Murdoch Children's Research Institute, 'MCRI joins ground-breaking Aboriginal Health Research Accord', 14 October 2025) <<https://www.mcricri.edu.au/news/mcricri-joins-aboriginal-health-research-accord>> ('MCRI joins ground-breaking Aboriginal Health Research Accord').

⁹ Burnet, 'Burnet says 'Yes' to Victorian Aboriginal Research Accord', 13 October 2023) <<https://www.burnet.edu.au/news/burnet-says-yes-to-victorian-aboriginal-research-accord/#:~:text=marra%20ngarrgoo%2C%20marra%20goorri%20will,Torres%20Strait%20Islander%20led%20mechanisms.>> ('Burnet says 'Yes' to Victorian Aboriginal Research Accord').

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It will also be an innovative vehicle for the strengthening of collaborative relationships between Aboriginal peoples and the health, medical and wellbeing research sector for achieving mutually beneficial outcomes.¹⁰

Olivia Payne, Executive Manager, Research at VACCHO

Implementation of the Accord will give voice to Community and assist researchers and research organisations in Victoria on their journey towards conducting ethical Aboriginal research.

With the goal of improving research culture and practices, the Accord aims to increase self-determination and Aboriginal governance in research and lead to tangible and equitable benefits for Aboriginal peoples.

The Aboriginal community in Victoria has attempted many times in recent decades to have a greater voice in the health research sector. There is a need for change and the time is now. The Accord, with the momentum of other statewide processes, aims to enact sustainable and systemic changes to empower self-determination in research.¹¹

Related recommendations

2005 Review¹²

Recommendation 21

That the Department of Human Services:

- (a) address the shortage of trained Aboriginal researchers in the field of alcohol abuse; and
- (l) provide a report to the Department of Human Services Aboriginal Human Services Forum on (a)- (k).

Assessment summary¹³

The intent of Recommendation 64 was to involve Aboriginal people in every stage of research into causes and impacts of alcohol use.

We disagree with the Department of Health's assessment that this recommendation has been fully implemented.

There needs to be more consistency about Aboriginal involvement in research, and more research in the alcohol and other drugs area outside of the work related to public intoxication reforms:

This is around research, not service delivery. We don't feel that it's happening very well. Previously, there's been no guidelines or a framework, or any strategies for this to occur. (Nicola Perry-Peters, VACCHO).

The Aboriginal community in Victoria has continued to push have a greater voice in the health research sector.

¹⁰ Melbourne Academic Centre for Health, 'New research accord to prioritise Victorian Aboriginal health and wellbeing', 19 October 2022) <<https://machaustrialia.org/news/aboriginal-research-accord/>> ('New research accord to prioritise Victorian Aboriginal health and wellbeing').

¹¹ Ibid.

¹² 2005 Review.

¹³ Meeting with Aboriginal Justice Caucus Working Group (Project Team, Online, 22 July 2025) ('Working Group Meeting (22 July 2025)'); Meeting with Aboriginal Justice Caucus (Project Team, In Person, 23 September 2025) ('AJC Meeting (23 September 2025)').

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Greater efforts are needed across government to progress and implement Indigenous data sovereignty principles, research standards and governance across government. The broader Treaty processes may assist with this given it is a critical area for engagement with Aboriginal people.

Aboriginal-led services should be involved at every stage of research into the causes and impacts of alcohol use, as this research has direct implications for our communities and service delivery.

Aboriginal people, Aboriginal services know what to do, how to support an Aboriginal person. If you have non-Aboriginal services trying to service an Aboriginal person with complex needs, it fails every time. We just need to look at the mental health system, and how much it's failing our mob. (Chris Harrison, Co-chairperson, AJC).

Meaningful Aboriginal involvement in research is essential to achieve practical improvements, and effective changes for Aboriginal communities. There needs to be greater support for Aboriginal-led initiatives to promote Aboriginal self-determination in health research and ethical practices like marra ngarrgoo, marra goorri, the Victorian Aboriginal Health, Medical and Wellbeing Research Accord.

With the goal of improving research culture and practices, the Accord aims to increase self-determination and Aboriginal governance in research and lead to tangible and equitable benefits for Aboriginal peoples. (VACCHO).

Assessment of Recommendation 64

Is the intent of the recommendation accurately described?

Yes

Does the action taken align with the intent of the recommendation?

0 – No action taken

1 – Action taken is of little relevance to the intent of the recommendation

2 – Action taken partially aligns with the intent of the recommendation

3 – Action taken fully aligns with the intent of the recommendation

1

(Score out of 3)

Is there evidence of the desired impact or outcome/s?

0 – No evidence

1 – Evidence of output rather than outcome

2 – Some evidence action contributed to outcome/s

3 – Clear link between action and impact or outcome/s

1.75

(Score out of 3)

How relevant is the recommendation in the current context?

0 – No relevance – refers to practices, agencies or laws that no longer exist

1 – Low – some relevance, but most aspects of the recommendation no longer apply

2 – Moderate – remains relevant, but some aspects of recommendation no longer apply

3 – High – entirely relevant to current context

3

(Score out of 3)

Does full implementation have the potential to reduce incarceration, increase safety in custody and/or progress Aboriginal self-determination?

0 – No potential to improve Aboriginal justice outcomes

1 – Low – potential to improve Aboriginal justice outcomes, but none of the three identified

2 – Moderate – potential to progress one or two of the outcomes identified

3 – High – potential to reduce incarceration AND increase safety in custody AND self-determination

1.5

(Score out of 3)

Potential actions for further work

Support implementation of *marra ngarroo, marra goorri*

Continue to invest in the implementation of *marra ngarroo, marra goorri*, the Victorian Aboriginal Health and Wellbeing Research Accord, including the Aboriginal teams and governance structures that support it.

Embed and ensure Indigenous Data Sovereignty, Indigenous Data Governance and Access to Records (*Yoorrook for Transformation, Recommendation 97*)

The Victorian Government must commit funding and resources to systemic reform to facilitate, embed and ensure Indigenous Data Sovereignty and Indigenous Data Governance in relation to Aboriginal people's records, including through treaty by funding, resourcing and supporting the establishment of a Victorian Aboriginal-controlled statewide body for Aboriginal peoples' data, records and data governance expertise.

Moderate priority for further work

Relevance and potential impact

		Low (0-2)	Moderate (3-4)	High (5-6)
Extent of action taken and evidence of outcomes	High (5-6)			
	Moderate (3-4)		Rec 64	
	Low (0-2)			

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