

Reflection on the National Aboriginal and Torres Strait Islander Women's Health Strategy (2010-2020)

In 2010, the Australian Women's Health Alliance (formerly Network) published the National Aboriginal and Torres Strait Islander Women's Health Strategy ('the Strategy') by Professor Bronwyn Fredericks, Professor Karen Adams, Sandra Angus and an 'Australian Women's Health Network Talking Circle'. The Strategy highlights how First Nations women and their communities must have a pivotal role in consulting, designing, developing, implementing and evaluating community health services.

Calls for investment

The Australian Women's Health Network Talking Circle² ('the Talking Circle') was established in 2009 to develop the Strategy. The Talking Circle was collaboratively organised by a First Nations convenor and non-Indigenous convenor who facilitated discussions with First Nations women nationally. They collectively identified and developed key priorities and actions to improve the holistic health status of First Nations women, extended families and community members. Four action areas and 14 recommendations were identified (see Appendix 1).

Advocates called for Australian Government funding to implement the Strategy recommendations. Unfortunately, no government funding was provided to substantially meet these recommendations, and within subsequent years the policy environment shifted to a period of extreme funding cuts to community health services, and women's health nationally, as well as hostility to First Nations self-determination.^{3 4 5 6 7 8}

Looking back

Various developments in health policy and First Nations health policy have emerged nationally since 2010. These include, but are not limited to the following:

2010 - 2012

- Closing the Gap reports tabled in the Australian Parliament (2010, 2011, 2012).⁹
- Lowitja Institute established as the national community-controlled health research institute (2010).¹⁰
- The National Family Violence Prevention and Legal Services Forum, (the National FVPLS Forum) was established as the national peak body for Family Violence Prevention Legal Services (FVPLS). It provides culturally safe and holistic services to First Nations people affected by family violence (2012).¹¹



2013 - 2015

- Closing the Gap reports tabled in the Australian Parliament (2013, 2014, 2015). 12
- Change the Record, Australia's only First Nations Led Coalition of Legal, Health and Violence Prevention Experts launched (2015).¹³
- Aboriginal Family Law Services hosted the national inaugural launch of the Ochre Ribbon Week campaign in Perth, a First Nations-led advocacy campaign that raises awareness about the impacts of domestic and family violence in First Nations communities (2015).¹⁴
- Indigenous Allied Health Australia (IAHA) published its Cultural Responsiveness Framework (2015).¹⁵

2016 - 2018

- Redfern Statement issued by First Nations leaders (2016).¹⁶
- National Framework for Health Services for Aboriginal and Torres Strait Islander Children and Families (2016) published.¹⁷
- National Cultural Respect Framework for Aboriginal and Torres Strait Islander Health (2016-2026) published.
- Closing the Gap reports tabled in the Australian Parliament (2016, 2017, 2018).
- Uluru Statement from the Heart (2017) published. 19
- National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing (2017-23) published.²⁰
- The Partnership for Justice in Health (P4JH) established. This is an alliance of self-determining
 First Nations academics, legal experts and national peak health and justice organisations
 committed to working together to improve health and justice outcomes through addressing
 racism (2017).²¹
- June Oscar AO is the first Aboriginal woman appointed to the role of the Aboriginal and Torres Strait Islander Social Justice Commissioner at the Australian Human Rights Commission (2017).²²
- Wiyi Yani U Thangani: Women's Voices multi-year initiative commenced (2018).²³
- Close the Gap: 10 Year Review released (2018).²⁴
- Coalition of Peaks formed, led by the National Aboriginal Community Controlled Health Organisation (NACCHO) to ensure genuine community engagement on Closing the Gap (2018).²⁵

2019 - 2021

- Partnership Agreement on Closing the Gap (2019-2029) between all Australian Governments, the Coalition of Peaks and ALGA made.²⁶
- Family Violence Prevention Legal Services National Evaluation Report (2019) published.²⁷
- The National Family Violence Prevention Legal Services Forum launched the #SaveFVPLS campaign after the Federal Government advised the peak body it will not be funded beyond June 2020 (2019).²⁸
- Closing the Gap reports tabled in the Australian Parliament (2019, 2020).²⁹



- Wiyi Yani U Thangani (Women's Voices): Securing our Rights, Securing our Future (2020) report published.³⁰
- National Women's Health Strategy (2020-2030) published, naming First Nations women and girls as 1 of 10 priority populations.³¹
- National Preventive Health Strategy (2021-2030) published, naming First Nations peoples as the 1st of 7 priority populations and including specific target measures to improve their health.³²
- National Aboriginal and Torres Strait Islander Health Plan (2021-2031) published.³³

2022 - 2024

- Territories Stolen Generations Redress Scheme established (2022).³⁴
- An inquiry into missing and murdered First Nations women and children is referred by the Senate to the Legal and Constitutional Affairs References Committee (2022).³⁵
- GENKE II report of strategies for nursing and midwifery education reform published by the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM).³⁶
- Wiyi Yani U Thangani National Summit held (2023).³⁷
- Aboriginal and Torres Strait Islander Action Plan (2023-2025) under the National Plan to End Violence against Women and Children (2022-2032) published.³⁸
- Commitment from Albanese Labor Government to establish a standalone First Nations National Plan for Family Safety (2023).³⁹
- Expert First Nations Steering Committee to advise on reducing rates of family violence and abuse established by The Hon Amanda Rishworth MP and The Hon Linda Burney MP (2024).⁴⁰
- Wiyi Yani U Thangani Gender Justice Institute and Change Agenda launched (2024).⁴¹
- The number of Aboriginal Community Controlled Health Organisations (ACCHOs)⁴² that exist nationally grows to more than 140 and continues to increase.

While around 80% of the Strategy recommendations had commenced through policy mechanisms such as those above, and other local, regional and national initiatives, none of the measures have achieved full success.

Throughout 2022 to 2024, engagement with First Nations women, communities, organisations and networks fostered interest in genuinely reviewing the National Aboriginal and Torres Strait Islander Women's Health Strategy. This engagement included Australian Women's Health Alliance members, representatives from community-controlled organisations, academic institutions and think tanks, lived experience advocates and First Nations women involved in health reforms.

Moving forward

Any review of national policy and action regarding First Nations women's health must continue to be led by First Nations women and their community-controlled organisations. It is vital that First Nations women and organisations are adequately and sustainably resourced to do this work.



While some of the recommendations are now dated the intent of the Strategy remains relevant. This is especially the case given that, despite consultation and collaboration, the current National Women's Health Strategy considers First Nations women as one 'priority population' alongside many others. There is no standalone strategy or ongoing funding dedicated to First Nations women's health.

Advancing the intent of the Strategy continues to require a self-determined, trauma-responsive and intersectional approach, which recognises ongoing colonial and racial violence and the social and cultural determinants of health impacted by, and influencing, policy and health outcomes.

The intricacies of prevention and preventive health must also be acknowledged to avoid perpetuating colonial approaches to health reform. Resourcing for such activities must enable adequate funding and flexibility for self-determination.

Recommendations

The Australian Women's Health Alliance recommends the Australian Government, in consultation with community, invest in the following:

- 1. **Policy:** Develop a monitoring and evaluation framework for the National Women's Health Strategy based on an equity model, which measures progression or regression in First Nations health and informs future investment accordingly. Implementation should be funded and resourced to engage with First Nations women and communities in culturally determined, safe, inclusive and respectful ways.
- 2. **Leadership:** Review First Nations leadership across all national women's health improvement mechanisms, advisory councils, Medicare taskforces, clinical trials, peak bodies, tertiary education institutions and regulatory agencies. Resource authentic engagement with lived experience and opportunities for improvement and community leadership.
- 3. **Research:** Commit to funding community driven research to identify gaps in the knowledge base about First Nations women's health, including primary prevention of gender-based violence. This research should be led, developed, conducted and authored by First Nations researchers, centre Indigenous knowledges and uphold data sovereignty.
- 4. **Services:** Increase investment in First Nations-led models of care, including pregnancy, birthing on Country and reproductive health care, gender-based violence prevention, and cultural healing and holistic community led initiatives that support social and cultural determinants of health.
- 5. **Information and education:** Increase investment in culturally responsive health information developed by, and with, community, adhering to anti-discrimination practice, that is accessible across health care and education settings including schools, Aboriginal Medical Services and other community-controlled settings.

Importantly, these recommendations must be grounded in, and seek to realise, the human rights expressed within the UN Declaration on the Rights of Indigenous Peoples (UNDRIP), the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the International Convention on the Elimination of All Forms of Racial Discrimination (ICERD).



Appendix 1: National Aboriginal and Torres Strait Islander Women's Health Strategy action areas and recommendations

Action area A: Supportive environments

- 1. Include childcare in Aboriginal and Torres Strait Islander employment and education programs.
- 2. Deliver Aboriginal and Torres Strait Islander women's leadership programs aimed at development and advancement.
- 3. Ensure Aboriginal and Torres Strait Islander boards and committees have equal numbers of male and female Aboriginal and Torres Strait Islander members (including government and statutory authority boards and committees).
- 4. Provide community development opportunities to de-normalise violence in Aboriginal and Torres Strait Islander communities. For example, promoting the value of Aboriginal and Torres Strait Islander women in the community, men supporting Indigenous women in the community, and healthy cultural forms of communication.
- 5. Involve Aboriginal and Torres Strait Islander women in the planning, design, development and monitoring of buildings, houses and services, including the choice of sites and building type.
- 6. Organisations and agencies to employ and support career advancement of equal numbers of male and female Aboriginal and Torres Strait Islander employees within structural levels.

Action area B: Health service access and equity

- Implementation of cultural safety accreditation and annual audit by women's health providers.
 This should include policy review, physical environment review (such as Aboriginal and Torres
 Strait Islander relevant posters, artwork, flags and pamphlets), staff cultural competency training,
 partnerships with Aboriginal and Torres Strait Islander health services and Aboriginal and Torres
 Strait Islander women members of organisation boards and committees.
- 2. Implementation of premature ageing policy and programs by women's health providers for Aboriginal and Torres Strait Islander women. For instance, home and community care or rehabilitation support for women experiencing early onset of chronic conditions.
- 3. Provision of social/cultural health and peer support opportunities and programs, such as basket making, textile and fibre work, shell and wood works, story work and social food gathering and cooking.
- 4. Report on Aboriginal and Torres Strait Islander women's participation and outcomes in women's health services, such as, cancer screening, STIs and BBVs notifications, birth outcomes, chronic disease outcomes etc.

Action area C: Women in the health workforce

- 1. Promote the role and importance of Aboriginal and Torres Strait Islander Health Workers working in women's health.
- 2. Increase the number of Aboriginal and Torres Strait Islander women working and studying in the health workforce particularly in women's health areas.
- 3. Biannual Aboriginal and Torres Strait Islander women's health conference.

Action area D:

1. Employ a National Aboriginal and Torres Strait Islander Women's Health Senior Policy Officer.



About us

Australian Women's Health Alliance provides a national voice on women's health. We highlight how gender shapes experiences of health and health care, recognising that women's health is determined by social, cultural, environmental, and political factors.

We remain committed to working alongside and in solidarity with the health reform priorities led by Aboriginal and Torres Strait Islander communities, including First Nations gender justice work such as Wiyi Yani U Thangani. We will continue to elevate First Nations leadership within the Alliance, connect with the Alliance's First Nations membership and build relationships of trust with First Nations community-controlled organisations and peak bodies.

Contact us

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We acknowledge the Traditional Custodians of the lands and waters on which we live and work. We pay our respect to Elders past and present. Sovereignty has never been ceded.

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