



the  
**Lowitja**  
Institute

Australia's National Institute for Aboriginal and  
Torres Strait Islander Health Research

## **The Lowitja Institute – Cultural Determinants roundtable Melbourne, 26<sup>th</sup> November 2014**

### **Background Paper**

*“Cultural wounds require cultural medicine”*

*Professor Michael Chandler, speaking at the Healing Foundation public forum, Canberra, Friday 4 July 2014”*

#### **The Lowitja Institute**

The Lowitja Institute Aboriginal and Torres Strait Islander Health CRC (Lowitja Institute CRC) commenced operations on 1 July 2014, following in the footsteps of predecessor organisations, and have also commenced research activity for this new funding phase.

Our new research program comprises the following research themes:

- Community capability and the social determinants of health
- Health policy and systems
- Health workforce to address Aboriginal and Torres Strait Islander health

We believe that it's important, at this early stage of our research program, to consider the role of culture in health. The Lowitja Institute publication *Beyond Band-aids – Exploring the Underlying Social Determinants of Aboriginal Health*<sup>1</sup>, states that culture as a determinant of health remains unexplored in public health research, and that this limited use of culture as a health resource, rather than as a barrier to health, reflects the dominant deficit model of public health inquiry.

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<sup>1</sup> Beyond Band-aids – Exploring the Underlying Social Determinants of Aboriginal Health – Papers from the Social Determinants of Aboriginal Health Workshop, Adelaide, July 2004, Edited by Ian Anderson, Fran Baum and Michael Bentley – Cooperative Research Centre for Aboriginal Health, page 234  
<http://www.lowitja.org.au/beyond-band-aids>

Noting, the document is now ten years old, it is reasonable to claim that culture as an enabler of health is still in need of exploration in the public health discourse.

There has been a developing body of international work around the link between culture and health (see suggested reading list at end of this paper), but a strong evidence base in the Australian context, for Aboriginal and Torres Strait Islander people, is yet to emerge.

The purpose of this paper is to provide background information that may help facilitate discussion at the forthcoming roundtable.

## **Defining Culture**

Without attempting the notoriously difficult task of defining culture, we can only outline broadly what we mean for the purpose of this exercise. As stated in the National Aboriginal and Torres Strait Islander Health Plan 2013-2023, culture must be differentiated from the excessive behaviours that contribute to ill-health and harm.<sup>2</sup> Rather, culture is about the life-giving values from which individuals, families and communities can draw strength, resilience and empowerment, thus contributing to health and wellbeing.

## **What do we mean by cultural determinants?**

The term social determinants of health is well defined, researched and accepted as an important aspect of health. The notion of cultural determinants and therefore culture as a condition to positively impact on our health, is relatively new to the public health discourse. It should be noted here that this work does not refer to organisational culture, which sits within health systems. The cultural determinants of health are enabled on a more personal basis for individuals, families and communities.

Professor Ngiare Brown describes cultural determinants of health as follows:

*“Cultural Determinants originate from and promote a strength based perspective, acknowledging that stronger connections to culture and country build stronger individual and collective identities, a sense of self-esteem, resilience, and improved outcomes across the other determinants of health including education, economic stability and community safety”<sup>3</sup>*

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<sup>2</sup> National Aboriginal and Torres Strait Islander Health Plan 2013-2023, page 9  
[http://www.health.gov.au/internet/main/publishing.nsf/content/B92E980680486C3BCA257BF0001BAF01/\\$File/health-plan.pdf](http://www.health.gov.au/internet/main/publishing.nsf/content/B92E980680486C3BCA257BF0001BAF01/$File/health-plan.pdf)

<sup>3</sup> Promoting a social and cultural determinants approach to Aboriginal and Torres Strait Islander Affairs, Prof Ngiare Brown, Executive Manager Research, NACCHO – PM IAC – available online  
[http://www.checkup.org.au/icms\\_docs/183362\\_Prof\\_Ngiare\\_Brown.pdf](http://www.checkup.org.au/icms_docs/183362_Prof_Ngiare_Brown.pdf)

It may be useful for the Lowitja Institute's Cultural Determinants roundtable to work towards a shared understanding of cultural determinants, using the above description as a basis.

Although we don't have a definition of cultural determinants, we have a sense of those aspects of culture which foster resilience, that are protective of health, and that contribute to our identity and unique place within the Australian polity. Enabling, protective and healing aspects of culture can include, but are not limited to, identity, traditional cultural practice, connection to land and nature, language, healing, spirituality, empowerment, ancestry and belonging, Indigenous knowledge, men's health / women's health, and more.

As Professor Ngiare Brown states in a 2013 online article about cultural determinants<sup>4</sup> "Consistent with the thematic approach to the Articles of the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP), cultural determinants include, but are not limited to:

- Self-determination;
- Freedom from discrimination;
- Individual and collective rights;
- Freedom from assimilation and destruction of culture;
- Protection from removal/relocation;
- Connection to, custodianship, and utilisation of country and traditional lands;
- Reclamation, revitalisation, preservation and promotion of language and cultural practices;
- Protection and promotion of Traditional Knowledge and Indigenous Intellectual Property; and
- Understanding of lore, law and traditional roles and responsibilities.

For the purpose of differentiation, it may be useful to identify also those issues that have historically, and continue to, contribute to illness, such as racism, colonisation, marginalisation and dispossession.

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<sup>4</sup> Culture is an important determinant of health: Professor Ngiare Brown article in Croakey, 20 August, 2013, <http://blogs.crikey.com.au/croakey/2013/08/20/culture-is-an-important-determinant-of-health-professor-ngiare-brown-at-naccho-summit/>

While issues such as these have had, and continue to have a catastrophic impact on Aboriginal and Torres Strait Islander health, their effect has been to contribute to illness and debility rather than health and wellness. The value of cultural determinants is that they influence health and wellness.

### **Aboriginal Definition of Health and Wellbeing**

The discussion of cultural determinants should be informed by the Aboriginal and Torres Strait Islander understanding of health. There have been a number of definitions of Aboriginal and Torres Strait Islander health including the following:

The National Aboriginal Health Strategy (National Aboriginal Health Strategy Working Party, 1989) defines Aboriginal health as:

*'... not just the physical wellbeing of the individual but the social, emotional, and cultural wellbeing of the whole community. This is a whole of life view and it also includes the cyclical concept of life-death-life.'*

This was expanded upon in a definition developed by Swan and Raphael (1995)<sup>5</sup>

*'The Aboriginal concept of health is holistic, encompassing mental health and physical, cultural and spiritual health. Land is central to wellbeing. This holistic concept does not merely refer to the 'whole body' but in fact is steeped in the harmonised inter-relations which culturally constitute wellbeing. These inter-relating factors can be categorised largely as spiritual, environmental, ideological, political, social, economic, mental and physical. Crucially it must be understood that when the harmony of these interrelations is disrupted, Aboriginal ill-health will persist.'*

In 2007, Professor Helen Milroy developed a contemporary Aboriginal and Torres Strait Islander definition of health referenced in the Health Impact Assessment on the Northern Territory Emergency Intervention, published by the Australian Indigenous Doctors' Association<sup>6</sup>. The Dance of Life was developed by Professor Helen Milroy and consists of five dimensions – cultural, spiritual, social, emotional and physical – within which are a number of layers that reflect historical, traditional and contemporary influences on health. This concept emphasises the intersection of both the layers and dimensions which creates the interconnectedness for a whole of life approach to Aboriginal and Torres Strait Islander wellbeing.

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<sup>5</sup> Swan P, Raphael B (1995) National Consultancy Report on Aboriginal and Torres Strait Islander Mental

Health: Ways Forward, Part I. Canberra: Office of Aboriginal and Torres Strait Islander Health, p. 13.

<sup>6</sup> Australian Indigenous Doctors' Association and Centre for Health Equity Training, Research and Evaluation, UNSW. Health Impact Assessment of the Northern Territory Emergency Response. Canberra: Australian Indigenous Doctors' Association, 2010.

## **Aboriginal and Torres Strait health policy**

There is a need to promote the concept of cultural determinants to health policy makers, to provide evidence, particularly in the Australian context, so that there is a greater understanding and appreciation of the relationship between Aboriginal and Torres Strait Islander culture and health.

The National Aboriginal and Torres Strait Islander Health Plan 2013-2023, identifies the centrality of culture and wellbeing as an important aspect of the health of Aboriginal and Torres Strait Islander people. While the acknowledgement of culture in this high-level policy instrument is welcome, the development of an evidence base will strengthen the argument for culture to be integrated into Aboriginal and Torres Strait Islander health programs and policies.

### **Background Reading**

Following is a list of resources that may be helpful for reference for informing the Cultural Determinants roundtable discussion:

<b>Lowitja Institute (and predecessor CRC publications)</b>	
Publication	Summary
<p>Beyond Band aids – Exploring the Underlying Social Determinants of Aboriginal Health – Papers from the Social Determinants of Aboriginal Health Workshop, Adelaide, July 2004, Edited by Ian Anderson, Fran Baum and Michael Bentley – Cooperative Research Centre for Aboriginal Health</p> <p>Chapter 15 – Michael Morrissey, Rogelia Pe-Pua, Alex Brown &amp; Ahmed Latif, Culture as a Determinant of Aboriginal Health - See more at: <a href="http://www.lowitja.org.au/beyond-band-aids#sthash.WdbaXXiJ.dpuf">http://www.lowitja.org.au/beyond-band-aids#sthash.WdbaXXiJ.dpuf</a></p>	<p>Chapter 15 addresses some social science approaches to the concept of culture and the question of the link between health and illness, canvassing the sociology of culture, varieties of medical anthropology, cultural explanatory models and culture care theory.</p>
<p><b>Chapter 16 – (Band aids – as above)</b> Heather McDonald, Culture in Health Research and Practice - See more at: <a href="http://www.lowitja.org.au/beyond-band-aids#sthash.WdbaXXiJ.dpuf">http://www.lowitja.org.au/beyond-band-aids#sthash.WdbaXXiJ.dpuf</a></p>	<p>Chapter 16 examines the relationship between culture and health in Western and Indigenous health research and practice.</p>
<p>Discussion Paper Series No. 9 : Aboriginal Spirituality: Aboriginal Philosophy, The Basis of Aboriginal Social and Emotional Wellbeing, V. Grieves 2009, <a href="https://www.lowitja.org.au/sites/default/files/docs/DP9-Aboriginal-Spirituality.pdf">https://www.lowitja.org.au/sites/default/files/docs/DP9-Aboriginal-Spirituality.pdf</a></p>	<p>This discussion paper presents evidence about the nature of Aboriginal and Torres Strait Islander Spirituality, its relationship to wellbeing, and the ramifications of this to the application of social and emotional wellbeing policy and programs in Australian Aboriginal and Torres Strait Islander communities.</p>
<p>Discussion Paper No. 7 – The Role of Spirituality in Social and Emotional Wellbeing Initiatives: The Family Wellbeing Program at Yarrabah <a href="https://www.lowitja.org.au/sites/default/files/docs/DP7_FINAL.pdf">https://www.lowitja.org.au/sites/default/files/docs/DP7_FINAL.pdf</a></p>	<p>Within the context of the Family Wellbeing Program in Yarrabah, Qld, this paper explores personal views of spirituality– for some it might mean churchgoing, for others it might be connect with land, or sitting quietly in nature.</p>
<p>Discussion Paper Series No. 2 –Aboriginal Holistic Health : A Critical Review –CRC for Aboriginal Health, 2007 <a href="https://www.lowitja.org.au/sites/default/files/docs/DP2_Mark-Lock.pdf">https://www.lowitja.org.au/sites/default/files/docs/DP2_Mark-Lock.pdf</a></p>	<p>Provides a critical analysis of the concept of Aboriginal holistic health and ‘demonstrates how the validity of such concepts can be undermined by poor definition, operationalization, and conflicting and confounding discourse’.</p>
<p>Discussion Paper Series No. 10 Living on the Edge: Social and Emotional Wellbeing and Risk and Protective Factors for Series Psychological Distress among Aboriginal and Torres Strait Islander People – Kerrie Kelly, Pat Dudgeon, Graham Gee, Belle Glaskin – on behalf of the Australian Indigenous Psychologists Association, 2009, <a href="https://www.lowitja.org.au/sites/default/files/docs/DP%2010_web_0.pdf">https://www.lowitja.org.au/sites/default/files/docs/DP%2010_web_0.pdf</a></p>	<p>Identifies important strengths and protective factors for social and emotional wellbeing, and states that at present, this is an under-researched area. “Further research is needed to gain a better understanding of the nature and impact of protective factors related to social and emotional wellbeing.” (P 3, Executive Summary).</p>

## Other (i.e. Non-Lowitja Institute) publications

<p>Culture as a Social Determinant of Health: Examples from Native Communities – James Knibb-Lamouche, Seattle, Washington, November 2012 - <a href="http://www.iom.edu/~media/Files/Activity%20Files/SelectPops/HealthDisparities/Culture%20as%20a%20Social%20Determinant%20of%20Health.pdf">http://www.iom.edu/~media/Files/Activity%20Files/SelectPops/HealthDisparities/Culture%20as%20a%20Social%20Determinant%20of%20Health.pdf</a></p>	<p><b>Abstract</b> Native American populations in the USA are subject to the longstanding effects of historical subjugation. The consequences of colonization, forced migration from their land and oppression include poor health conditions, high mortality rates when compared with the majority white population, and disproportionately high rates of diseases such as diabetes, alcoholism, and tuberculosis. The extreme levels of poverty among Native American populations mean lower education attainment, economic adversity, social dysfunction, and little or no access to high-quality health care. Additionally, because the standard biomedical approach focuses primarily on disease progression and treatment, traditional Indigenous healing practices and other cultural complexities often have not been taken into account in the design of programs to change health behaviours and improve health outcomes in Indigenous communities. The purpose of this project then, is to describe the role of culture in health promotion and disease prevention for Native American communities.</p>
<p>Cultural Continuity as a Hedge Against Suicide in Canada’s First Nations – Michael Chandler and Christopher Lalonde, 1998, <a href="http://web.uvic.ca/~lalonde/manuscripts/1998TransCultural.pdf">http://web.uvic.ca/~lalonde/manuscripts/1998TransCultural.pdf</a></p>	<p>This 1998 paper from Canada is a very well referenced source within Aboriginal and Torres Strait Islander health and wellbeing.</p> <p><b>Abstract</b> This research report examines self-continuity and its role as a protective factor against suicide among Canadian First Nations youth. The central theoretical idea is that, because it is constitutive of what it means to have or be a self to somehow count oneself as continuous in time, anyone whose identity is undermined by radical personal and cultural change is put at special risk to suicide because they lose those future commitments necessary to guarantee appropriate care and concern for their own well-being. Adolescents and young adults—who are living through moments of especially dramatic change—constitute such a high risk group. This generalized period of increased risk during adolescence can be made even more acute within communities that lack a concomitant sense of cultural continuity that might otherwise support the efforts of young persons to develop more adequate self-continuity warranting practices. Next, the paper demonstrates that, while certain Indigenous or First Nations groups do in fact suffer dramatically elevated suicide rates, such rates vary widely across British Columbia’s nearly 200 Aboriginal groups: some communities show rates 800 times the national average, while in others suicide is essentially unknown. The paper then demonstrates that these variable incidence rates are strongly associated with the degree to which BC’s 196 bands are engaged in community practices that are employed as markers of a collective effort to rehabilitate and vouchsafe the cultural continuity of these groups. Communities that have taken active steps to preserve and rehabilitate their own cultures are shown to be those in which youth suicide rates are dramatically lower.</p>

<p>Culture and Language as Social Determinants of First Nations, Inuit and Metis Health – National Collaborating Centre for Aboriginal Health, Canada, 2009-2010  <a href="http://www.nccah-ccnsa.ca/docs/fact%20sheets/social%20determinates/NCCAH_fs_culture_language_EN.pdf">http://www.nccah-ccnsa.ca/docs/fact%20sheets/social%20determinates/NCCAH_fs_culture_language_EN.pdf</a></p>	<p>Looks at culture and language is “a conveyor of culture “and the means by which knowledge, skills, and cultural values are expressed and maintained – and connection to health. Language suppression, particularly for Indigenous peoples, is “a form of disempowerment and oppression, “that impacts self-identity, well-being, self-esteem and empowerment, all of which are key ingredients for individual and community healing.</p>
<p>Family Matters – Kids Safe in Culture, Not in Care – An invitation to change the lives of Aboriginal and Torres Strait Islander children  <a href="http://www.snaicc.org.au/_uploads/rsfil/03333.pdf">http://www.snaicc.org.au/_uploads/rsfil/03333.pdf</a></p>	<p>This paper explores some of the characteristics of traditional Aboriginal and Torres Strait Islander cultural practices that contribute to effective family functioning, and how these practices can have positive effects on children and communities. The approach is to gather the views of Aboriginal and Torres Strait Islander families and compare these perspectives with supporting evidence drawn from the literature. The findings suggest that, provided the necessary social conditions are in place, culture can be a protective force for children, families and communities.</p>
<p>Aboriginal and Torres Strait Islander Children’s’ Cultural Needs-  <a href="http://www.snaicc.org.au/_uploads/rsfil/02932.pdf">http://www.snaicc.org.au/_uploads/rsfil/02932.pdf</a></p>	<p>Aboriginal and Torres Strait Islander children’s’ cultural needs diagram, developed by SNAICC, portrays different aspects of cultural connections that enhance a young person’s sense of identity and wellbeing. Developed for working with children, and with consideration that some children may not be already culturally connected.</p>
<p>Birthing on Country could deliver healthier babies and communities – The Conversation, 20 September 2014, Sue Kildea and Fleur Magick Dennis  <a href="http://theconversation.com/birthing-on-country-could-deliver-healthier-babies-and-communities-31180">http://theconversation.com/birthing-on-country-could-deliver-healthier-babies-and-communities-31180</a></p>	<p>Recent article in “The Conversation”, references an Inuit “experiment” that is now referred to as the jewel in the crown of Inuit achievements. Commenced by Inuit women in 1985 in Nunavik, as a response to high number of youth suicide. The women agreed they could no longer be flown eight hours away to have their babies, to a place that felt foreign, so set up a birthing centre in their remote community. It is now linked to excellent health outcomes.</p> <p>The article asks why such an initiative cannot be undertaken in Australia.</p>
<p>Culture is an important determinant of health: Professor Ngiare Brown article in Croakey, 20 August, 2013,  <a href="http://blogs.crikey.com.au/croakey/2013/08/20/culture-is-an-important-determinant-of-health-professor-ngiare-brown-at-naccho-summit/">http://blogs.crikey.com.au/croakey/2013/08/20/culture-is-an-important-determinant-of-health-professor-ngiare-brown-at-naccho-summit/</a></p>	<p>Croakey article re Professor Ngiare Brown’s address to 2013 NACCHO Summit re cultural determinants.</p>