

**Lowitja Institute 20<sup>th</sup> Anniversary and launch of  
*Changing the Narrative in Aboriginal and  
Torres Strait Islander Health Research  
Four Cooperative Research Centres and  
the Lowitja Institute: The story so far***

## **The journey so far**

**By**

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**Canberra**

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Good morning everybody, thank you for coming.

I'd like to, on behalf of us all, pay our respects and acknowledge the Ngunnawal and the Ngambri people, and Paul [House], in particular, for his very generous and warm welcome.

I would also like to pay my respects to Matilda. Matilda House is an old warrior and has been for most of her lifetime, like some of you here in this room.

Lowitja, Minister Wyatt, Warren Snowdon, Patrick Dodson, Richard Di Natale, Your Excellency Paul Maddison, distinguished guests and friends. As Rom said, many of you have been friends of this organisation now for 20 years.

My job today is to summarise these 188 pages of our report in 5 minutes!

What is the heart of the story that sits between these covers?

I think it's this:

For the past 20 years, the four Cooperative Research Centres and the Lowitja Institute have demonstrated what can be achieved when Aboriginal and Torres Strait Islander cultures, knowledges, priorities and leadership are at the centre of the work to improve the health and wellbeing of our First Peoples.

Guided by key principles and with the support of our many partners, we have contributed to a significant body of knowledge, and have earned a place of cultural authority in the health research sector.

I am very grateful for the enormous support, commitment and goodwill by many individuals and organisations in research, communities, government, our CRC partners who have played an integral role in the delivery of our work, and many others.

Warren Snowdon has also been part of most of the 20 years, and Ken Wyatt has been a very strong supporter of ours for many years as well. [With Ken's] busy schedule [he] has always taken time out to accept invitations to come to a conference or open something, and here today he's launching our book. We pay our respects to Ken for the work that he does and has done all his life.

I acknowledge the investment of the Australian Government, through the CRC Programme of the Department of Industry, Innovation and Science, in our capacity to deliver this important work. I've always been really glad that, with all the 20 years, we haven't taken any what's called 'black money'. We've actually accessed the science and technology part of the mainstream society. We haven't asked for any special or extra consideration. We've actually competed with the science world and the research world and we've been very successful.

I thank especially the Aboriginal and Torres Strait Islander communities, organisations and individuals who have shared their expertise, wisdom and guidance.

Each of the CRCs has built on the legacy of the preceding organisation; gathering supporters, partners and a network of researchers committed to its mission, values and methodology – that effective health research requires a process that reflects community priorities. We started with the communities and continue to this day.

Their vision has now been realised in the Lowitja Institute.

This approach was in stark contrast to the way things had been done in the past when many Aboriginal and Torres Strait Islander communities were suspicious of research and researchers. This distrust grew out of conventional research processes that treated us as passive subjects rather than active participants, and too often failed to translate findings into meaningful changes in health policy or practice, or indeed, in our lives.

The early conversations about finding a new and more effective way of doing research occurred in the early 1990s, a time of growing advocacy and independence for Aboriginal and Torres Strait Islander organisations that saw health research — culturally appropriate research — as a rights issue.

And, of course, there were key individuals—some interviewed for this book—who were pivotal in pushing for those changes.

For example, Professor John Matthews—who has joined us today—who from 1994 took on the hugely ambitious task of establishing a CRC for Aboriginal health. John was committed to tossing out old methods of working, in favour of a radically different approach.

It was not an easy task in the early days to bring university-based researchers and representatives from Aboriginal and Torres Strait Islander community health organisations together—myself included—and it took time and inspiration to break through the barriers. I remember a particular meeting with John Mathews and Marcia Langton that was crucial to my understanding of the potential for this new organisation. I'd been resisting John for about four years prior to [1997], been at meetings and stood up and been the lone voice saying 'No, no, we don't want to do that, we're not going down that road with you'.

I think the way, and John has never admitted to this, but I think the way to convince one cheeky woman is to get a cheekier woman [Marcia Langton] to go and talk to her, and he did, and here we are today.

There are many people to acknowledge, among them Stephanie Bell, Johnny Liddle, Professor Michael Good, Terry Dunbar who is here

with us today, Ian Anderson, who, as a young Aboriginal doctor was a member of the first CRC Board and eventually led the process of research prioritisation and research methodology development. I've, in fact, known Ian since he was a medical student.

Lowitja O'Donoghue was our first Chairperson. Her role ensuring the survival and robustness of the early organisation cannot be overestimated. Lowitja's leadership was and is crucial, and remains so to this organisation, and its very foundation, its ethics, and its philosophy, and its commitment and dedication. Also, its robustness for doing the right thing, and knowing what you are talking about.

It's through Lowitja's leadership – she was our first Chairperson. [After] we, very nervously, approached her – at the time I remember, we pushed Johnny Liddle 'You know Lowitja best' at the time 'You go and talk to her', we were able to get her to agree to be our Patron.

Lots and lots of stories, I could stand here all day.

Lowitja has gifted her name to the Institute and we take very seriously the responsibility that that entails.

The great strength of the CRC approach was its focus on bringing together researchers and Aboriginal and Torres Strait Islander community, developing research capacity, improving ethical guidelines, transferring research outputs, and in new methodologies

that are now embodied in the key research principles of the Lowitja Institute:

- Beneficence – to act for the benefit of Aboriginal and Torres Strait Islander peoples in the conduct of the research
- Leadership by Aboriginal and Torres Strait Islander people
- Engagement of research end users
- Development of the Aboriginal and Torres Strait Islander research workforce
- Measurement of impact — not many research institutions do that — measurement of impact in improving the health of Aboriginal and Torres Strait Islander peoples.

When we first started this, I think we had two major researchers in the country, and that was Ian Anderson and Marcia Langton, and now we have a whole cohort, which I'll get to in a minute.

By supporting a new generation of Aboriginal and Torres Strait Islander researchers, we have contributed to the growth of a cohort with high levels of expertise that will deliver positive health outcomes.

We have awarded, to date, 62 doctorate and PhD scholarships, 33 Masters scholarships, and 15 scholarships for other tertiary courses.

But it doesn't start with a PhD. In partnership with QIMR Berghofer Medical Research Institute in Brisbane, we have supported a project hoping to inspire Aboriginal and Torres Strait Islander high school students to become the scientists and medical professionals of tomorrow. It's a program that ... brings in kids from places like [Cloncurry], and they actually work in the science lab.

Also, recognising that as long as high rates of adult illiteracy exist in communities, meaningful progress towards better health outcomes will be impossible, we became a founding partner of the Literacy for Life Foundation. We have supported their very successful Aboriginal and Torres Strait Islander adult literacy program which is now working towards national expansion. You might have seen the program on SBS recently [You Are Here: In My Own Words, SBS-ON-Demand].

This started off to be a very small program. It's like a gift that keeps giving and giving as we see more and more adults be able to read the kids' books that they bring home from school. We've had letters from teachers in the various regions that we run it, letters to us saying how the whole landscape of the school has changed. Parents are now coming to the school, engaging and talking with the teachers because they can darn well read the stuff. They know what's happening and they can check if it's not right.

This is a wonderful program. To all the politicians here – as it goes to national expansion – this is really cheap, and it works. It truly works.

We are also committed to recognising excellence in the research workforce with awards that recognise our Aboriginal and Torres Strait Islander researchers and leaders, as well as a lifetime award, which we gave for the first time, at the International Conference. It was awarded [posthumously] to Mr Bailes from Brisbane.

From the beginning, the CRCs and the Lowitja Institute have brought people together—in convocations—that's a terrible word, we struggled with that word. In the very early days of the CRC we had this terrible word, which is just a sort of conference or congress, and we called it convocations.

Now Congress Lowitja, which we have, conferences, roundtables—into a community of interest that transcends individual disciplines and silos. In these events—where Aboriginal and Torres Strait cultures and knowledges are central—researchers, community and policymakers come together to share their work and identify research priorities.

Indigenous knowledges became a particular focus of the Lowitja Institute International Indigenous Health and Wellbeing Conference in 2016. Which, I think, Ken opened as well.

The conference attracted 700 delegates from Australia and Aotearoa/New Zealand, Brazil, Canada, Chile, India, Nepal, Norway, the Philippines, and the United States of America. Of the 143 presenters, 103 identified as Indigenous, thereby making a key goal of the conference to celebrate, share and strengthen Indigenous knowledges and cultures.

Increasingly, we are reaching out to our global Indigenous family. Currently, His Excellency Mr Paul Maddison, High Commissioner for Canada, who has joined us here today, and our CEO, Romlie Mokak, co-Chair the Canada–Australia Indigenous Health and Wellness initiative.

*The Lancet*–Lowitja Institute global collaboration on Indigenous health published last year, is a landmark study that covers approximately half the Indigenous population of the world. This study, the first of its kind ever conducted, was conceived and led by Professor Ian Anderson, now Deputy Secretary of the Department of Prime Minister and Cabinet responsible for Indigenous Affairs.

On this International Day of the World’s Indigenous Peoples I want to highlight that the study concluded that the implementation of the 2030 Sustainable Development Goals, of which Australia is a signatory, will not be possible without action on the health and social outcomes for Indigenous and tribal peoples. The study called for meaningful engagement and for Indigenous values, health concepts,

and priorities to be reflected in a revitalised global partnership to address Indigenous health.

It's difficult, over these 20 years, to highlight key projects. For example:

- We delivered the first comprehensive assessment of how the burden of disease and injury affects Aboriginal and Torres Strait Islander peoples, called the *Indigenous Burden of Disease Study*. That did affect public policy at the time.
- A landmark project identifying unnecessary reporting burdens that hinder effective health care for Aboriginal and Torres Strait Islander communities and people – *The Overburden Report: Contracting for Indigenous health services*. That was produced [with] the health sector, there was a map in the report showing everywhere we all had to go to and report, and it was called the 'spaghetti map'. It was like someone stood back and threw a bowl of spaghetti on the wall, that's how ridiculous it was, the tracking of the reporting.
- Also pioneering work on the impact of racism on health – *Mental health impacts of racial discrimination in Victorian Aboriginal communities*.

I encourage you to look at the book to get a better understanding of the breadth and depth of the work of the CRCs and the Lowitja Institute.

And at this point, I want to acknowledge the big task that the Australian Institute of Aboriginal and Torres Strait Islander Studies research team undertook to create this narrative and the oral history component of this work. They, together with the Lowitja Institute editorial team, made this possible. The eBook, I understand, will be available soon.

In early 2010, Lowitja O'Donoghue launched the Lowitja Institute in this House. At the launch, she outlined her vision for the new organisation named in her honour. It was to be a place that would reflect her values and her priorities, demonstrating a deep commitment to social equity for Australia's First Peoples.

I hope that we have lived up to her expectations. We are conscious almost every day about our responsibility that we owe to our Patron.

We will continue to be an authoritative and collective voice for the benefit of Australia's First Peoples; and to support Aboriginal and Torres Strait Islander priorities, collective ways of working, strength, agency and knowledges.

The Institute does and will demonstrate the centrality of culture in health and wellbeing; will produce knowledge that is ethical and

intellectually rigorous; will grow strong national and international networks; provide cultural authority for non-Indigenous researchers; nurture the next generation of First Nations health researchers; and take a leadership role in the decisions that affect the health and wellbeing of our communities, our families and individuals.

I hope that you will continue to be part of our story.

Thank you very much.

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**For more information and a copy of *Changing the Narrative* please visit:**

<http://www.lowitja.org.au/changing-the-narrative>