Vote from the Heart
Lowitja Institute Position Paper on an Aboriginal and Torres Strait Islander Voice

September 2023

1. Our position

Lowitja Institute fully supports the establishment of a constitutionally enshrined federal Aboriginal and Torres Strait Islander Voice as described in the Uluru Statement from the Heart, as well as full implementation of the Uluru Statement from the Heart (Uluru Statement): Voice, Treaty, Truth. Lowitja Institute also encourages states and territories to support and implement the Uluru Statement in their jurisdictions.

The Aboriginal and Torres Strait Islander Voice and Uluru Statement from the Heart are consistent with our long-standing advocacy for national recognition, understanding of and action on the social, cultural and political determinants of health and wellbeing.

Constitutional recognition is linked to our health and wellbeing. As demonstrated by Lowitja Institute Recognise Health initiative, recognition of Aboriginal and Torres Strait Islander peoples in the Constitution would acknowledge the powerful sense of identity, pride, history and belonging to this land that we feel as Aboriginal and Torres Strait Islander peoples. It would promote opportunities for full participation in all that Australia has to offer and be a significant step towards equity between Indigenous and non-Indigenous Australia.

2. Introduction

The purpose of the National Agreement on Closing the Gap 2020 (National Agreement) was to create systemic and structural reform and commit governments to joint action that will positively influence the cultural and social determinants of health for Aboriginal and Torres Strait Islander peoples. Progress to date has been impeded by the exclusion of our voices from research, policymaking and government decision-making.
Research has too often been done ‘on’ rather than ‘for’ or ‘by’, Aboriginal and Torres Strait Islander peoples and communities. It was used to inform policymaking that has caused harm to our peoples, through historical protection and assimilation policies.ii Ongoing institutional racism, systemic discriminations and ingrained biases continue to dismiss the priorities of Aboriginal and Torres Strait Islander people and devalue our peoples’ priorities.

Since then, Lowitja Institute’s discussion paper, Indigenous Nation Building and the Political Determinants of Health and Wellbeing (Rigney, 2022) emphasised the importance of the political determinants, in addition to the social and cultural determinants of health and wellbeing.iii Enshrining an Aboriginal and Torres Strait Islander Voice would ensure our peoples inform policymaking that impacts us.

Lowitja Institute fully supports the establishment of a constitutionally enshrined Aboriginal and Torres Strait Islander Voice for the following reasons:

- It was a recommendation made in the Uluru Statement from the Heart and represents the collective will of Aboriginal and Torres Strait Islander peoples.
- It will help facilitate urgently needed progress on implementation of the National Agreement on Closing the Gap (2020).
- It enables Aboriginal and Torres Strait Islander peoples to enact the political determinants of our peoples’ health and wellbeing.

3. Historical context

Over millennia, our peoples have lived on the vast lands, seas and waterways that are now called Australia. Prior to colonisation, we cared for Country and our communities with sophisticated and complex systems of laws and lore, which governed practical, relational, cultural, and spiritual practices that kept us healthy and well.

Colonisation sought to strip this from us. Dismantling our ways of knowing, being and doing led to our declining health and wellbeing, and the compounding impacts of intergenerational trauma. We have fought and continue fighting consistently to preserve, sustain and grow our cultures and their knowledge systems.
Politics and policymaking are core weapons of colonisation, employed since 1788. Before and after Federation, government created and imposed a system of rules and requirements on our peoples cemented in laws and policies. This fractured our communities and families through removal from our traditional lands and cultures, prohibition of speaking our traditional languages or practising ceremony, removal of our children from families, and forced relocation onto missions and later into housing commissions. Despite earlier laws and policies being dismantled, this imposition has continued in more recent decades, as policies and laws continue to be made for us instead of with us.

In combination, non-Indigenous designed laws and policies have resulted in widespread health inequity demonstrated through our people’s burden of disease being, on average, 2.3 times that experienced by non-Indigenous Australians and almost a decade gap in average life expectancy between our peoples and non-Indigenous peoples, as demonstrated below.iv

The Uluru Statement from the Heart is the culmination of years of extensive regional dialogues – the Uluru Dialogues – and founded on two centuries of our people's persistent advocacy for recognition, rights and reform. It outlines our peoples’ aspirations for reconciliation and recognition and seeks improved outcomes through three structural reforms – Voice, Treaty and Truth-telling – supported by a Makarrata Commission. Through first establishing a Voice, our people will be integral to establishing the Makarrata Commission, advise federal government on the process and inform how it progresses the Treaty and Truth reforms.
4. Centring our peoples in policymaking

Social, cultural and political determinants of health and the National Agreement on Closing the Gap 2020

Our peoples understand health and wellbeing as holistic. Our physical, social, emotional, cultural and spiritual wellbeing are interconnected. Therefore, the ‘social and cultural determinants’ of health – ‘non-medical and behavioural influences on health’ – are widely acknowledged by Aboriginal and Torres Strait Islander experts and peak health organisations as having a significant impact on our peoples’ health and wellbeing.

Our 2020 discussion paper, Culture is Key: Towards cultural determinants-driven health policy, outlines factors required to successfully implement a cultural determinants approach to health policy – they are:

- the development and application of shared definitions
- creation and operationalisation of policy mechanisms
- changes to policy approaches and processes.

This requires “change in policymakers, at both individual and organisational levels, including participating in a process that may require relinquishing control of policy to participants outside of the bureaucracy or broader government.” Priority Reform 3 of the National Agreement commits government organisations to systemic and structural transform. The Voice would help facilitate and guide such change.

In March 2008, the Australian Government signed a statement of intent to work in partnership with Aboriginal and Torres Strait Islander peoples “to work together to achieve equality in health status and life expectancy between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians by year 2030.” This was an important acknowledgement by the Australian Government that policymaking had failed to rectify health inequity and a new approach was required, which centres our peoples in Aboriginal and Torres Strait Islander health policymaking.

In 2020, the Council of Australian Governments (COAG) and Aboriginal and Torres Strait Islander peak organisations, now represented by the Coalition of Peaks, formed a formal partnership and signed the National Agreement. The aim of the partnership is to facilitate four priority reforms so structural change...
can support positive health outcomes and close long-standing gaps across 16 health and social-economic areas, each with a specific target.

An Aboriginal and Torres Strait Islander Voice would bolster existing efforts to meet commitments outlined in the National Agreement by strengthening our peoples’ leadership and ability to be heard by government in policymaking that impacts on our health and wellbeing.

**The importance of place-based responses and ACCHS**

We are proud of the power and successes of place-based programs and Aboriginal community-controlled organisations (ACCOs), including Aboriginal community-controlled health services (ACCHS). ACCHS provide excellent culturally safe health services to Aboriginal and Torres Strait islander peoples by operating at a local community level from a holistic framework. They do this on a regular basis and in times of crises. The outstanding leadership of ACCHS through critical health crises in 2020, particularly the COVID-19 pandemic, demonstrated that we have the solutions to health inequity in our grasp.

ACCHS positively influence the political determinants of health, in addition to strengthening the social and cultural determinants. They contribute to Indigenous nation building through:

- strengthening cultural foundations in the community
- targeting service provision to community needs, as expressed by the community
- embedding Indigenous leadership in the corporate governance of health services and in health research partnerships, and
- successfully advocating to embed nation building in policy statements conceived in partnership with the settler-colonial State (Rigney 2022).

Community-led solutions to issues identified by community can achieve great success and outcomes for our peoples.

As a national platform, the Aboriginal and Torres Strait Islander Voice will give our peoples and community members a direct line to the highest levels of government, so local knowledge and solutions are considered and contribute to policymaking. Our on-the-ground experiences can inform the development and/or reform of policies and laws so they meet our diverse lived realities.
5. Legal and governance considerations

Why enshrine the Voice in the constitution?

Constitutionally enshrining the Aboriginal and Torres Strait Islander Voice means this representative body cannot be dismantled at the whim of a new government. This is important because history demonstrates how bodies established to enhance our peoples’ self-determination and include our voices can be dismantled without accountability when constitutional protection is not present.

For example, the Aboriginal and Torres Strait Islander Commission (ATSIC) was established in 1990 by the Australian government. At the time, it was seen as making significant progress in empowering our peoples’ leadership. Two of its three identified functions were to advise government on Indigenous issues, and advocate for the recognition of Indigenous rights on behalf of Indigenous peoples regionally, nationally, and internationally.

ATSIC was undone by several challenges including structural issues, a lack of executive authority and active cooperation and involvement of Commonwealth Agencies and State and Territory governments, and a lack of state and territory involvement. It was dismantled rather than having the opportunity to be repaired. Our voices were silenced once again, as they have been for generations.

The Voice would largely mirror parliamentary committees that already operate within our political system. However, the details of the Aboriginal and Torres Strait Islander Voice model would be designed through a standard legislative process, including a period of extensive public consultations and be informed by existing, publicly available reports.

Future governments can make administrative changes via legislation, which would enable the Voice to be adaptable in meeting future change and challenges, maintain the flexibility it requires to work efficiently and effectively, and repair any operational issues that may arise.

The concept of place-based policy and regional representation is widely accepted and uncontroversial as a beneficial approach. It has already been implemented across the country under both Labor and Coalition governments. Examples include the Empowered Communities initiative and the Maranguka Justice Reinvestment project in Bourke, NSW. These projects
include community input into governance structures and operations, ensuring shared decision-making and empowerment of communities.

The Voice would have local, regional and national components, similar to these place-based initiatives. It would be comprised of people who bring on-the-ground lived experiences and the authority of their Aboriginal and Torres Strait Islander communities to ensure local and regional community expertise informs decision-making.

**Jurisdictional leadership**

State and territory governments have a role in taking leadership to implement the Uluru Statement at the jurisdictional level. They do not need to follow the same rules as required of the federal government during referendums. They are free to advocate for a position, including fund campaigns, and implement structures that would directly support a national Aboriginal and Torres Strait Islander Voice.

Some have already acted. The First Peoples’ Assembly of Victoria and the Yoorrook Justice Commission are guiding the truth-telling and treaty processes in Victoria, and South Australia has recently legislated a state Aboriginal and Torres Strait Islander Voice. Strengthening our peoples’ local and regional voices at the state and territory level will ensure that important jurisdictional policy decisions consider our lived realities, and the social, cultural and political determinants of health.
References


ii W., Fogarty, H., Bulloch, S., McDonnell & M., Davis 2018. Deficit discourse and Indigenous health: how narrative framings of Aboriginal and Torres Strait Islander people are reproduced in policy, The Lowitja Institute, Melbourne.


v M., Salmon, K., Doery, P., Dance, J., Chapman, R., Gilbert, R., Williams, R & R. Lovett, Defining the indefinable: descriptors of Aboriginal and Torres Strait Islander Peoples’ cultures and their links to health and wellbeing, Aboriginal and Torres Strait Islander Health Team, Research School of Population Health, The Australian National University, 2019, Canberra, p. 1.


vii Lowitja Institute 2020, Culture is Key: Towards cultural determinants-driven health policy – Final Report, Lowitja Institute, Melbourne, DOI: 10.48455/k9vd-zp46, p. 28.

viii Lowitja Institute 2020, Culture is Key: Towards cultural determinants-driven health policy – Final Report, Lowitja Institute, Melbourne, DOI: 10.48455/k9vd-zp46, p. 28.


