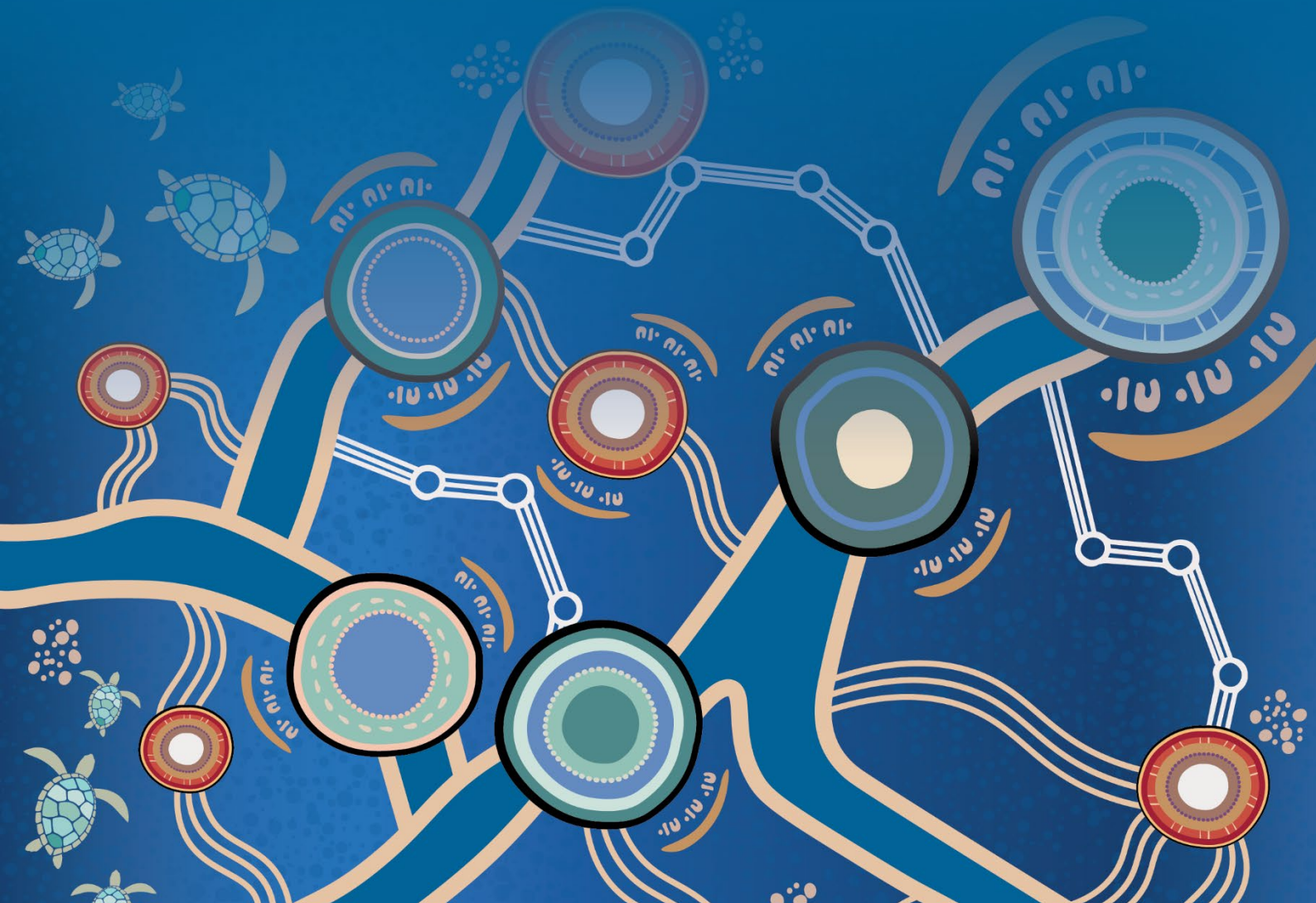


*Let's walk together, work together,
we'll be stronger together*

The need for an Aboriginal and Torres Strait Islander Coalition on Climate and Health

Policy position paper

November 2023



Lowitja Institute acknowledges Aboriginal and Torres Strait Islander peoples as the first custodians of the land, seas and waterways of Australia and pay respect to their cultures and knowledges that have sustainably cared for Country. In this spirit, we have a shared commitment to strengthening health system resilience, preparedness and responsiveness to climate change, and reducing health, social and economic inequities within and across communities and generations.

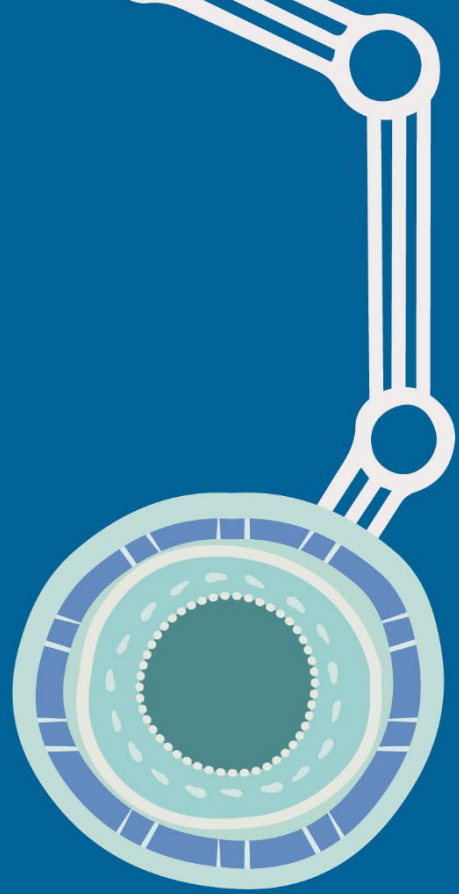
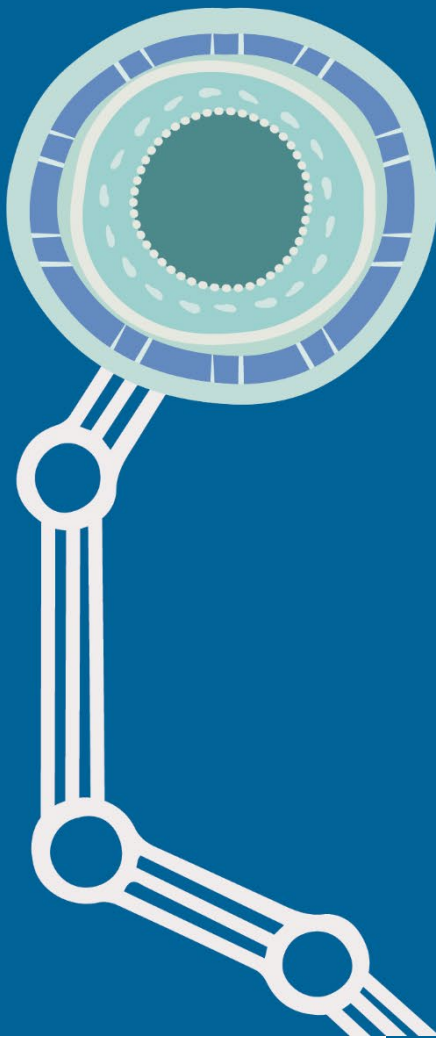
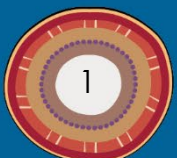
This position paper was developed on the traditional lands of the Wurundjeri/Woiwurrung

where the offices of Lowitja Institute are based. We acknowledge the Traditional Owners of Country throughout Victoria and pay our respect to them, their cultures, and their Elders past, present and future. They have paved the way, with strength, resilience and fortitude, for future generations.

ABOUT THE ARTIST

The artwork featured on the cover was created by Shannan Bishop, Gunggari/Kabi Kabi Woman.

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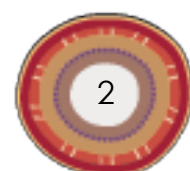
About Lowitja Institute

Lowitja Institute is Australia's only national Aboriginal and Torres Strait Islander community-controlled health research institute, named in honour of its Patron, Dr Lowitja O'Donoghue AC CBE DSG. We work for the health and wellbeing of Australia's Aboriginal and Torres Strait Islander peoples through high impact quality research, knowledge exchange, and by supporting a new generation of Aboriginal and Torres Strait Islander health researchers. Established in January 2010, Lowitja Institute operates on key principles of Aboriginal and Torres Strait Islander leadership, a broader understanding of health that incorporates wellbeing, and the need for the work to have a clear and positive impact.

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THE CHANGED CLIMATE'S *diverse* IMPACTS on ABORIGINAL & TORRES STRAIT ISLANDER HEALTH and WELLBEING



The above image was created by Coolamon Creative to depict the impacts of climate change spoken about during Lowitja Institute's 2023 community engagement.

Recommendation

Lowitja Institute recommends that government funds the establishment of an Aboriginal and Torres Strait Islander Coalition on Climate and Health.

In making this recommendation, we draw on our 2023 community engagement, discussions with key Aboriginal and Torres Strait Islander academics, our previous work in climate and health, and the climate and health panel that Lowitja Institute hosted at our biannual conference in 2023.

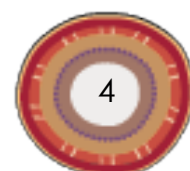
We have also considered the priority reforms outlined in the National Agreement on Closing the Gap, and the recommendations made in the *Aboriginal and Torres Strait Islander Peoples' voices and engagement in the IPCC report* referred to in more detail below.ⁱ

Background

Lowitja Institute is Australia's national institute for Aboriginal and Torres Strait Islander health research, working for the health and wellbeing of Australia's First Peoples through high impact quality research, knowledge translation, and by supporting Aboriginal and Torres Strait Islander health researchers. Our purpose is to invest in knowledge creation and translation by enhancing the capability of the Aboriginal and Torres Strait Islander health research workforce.

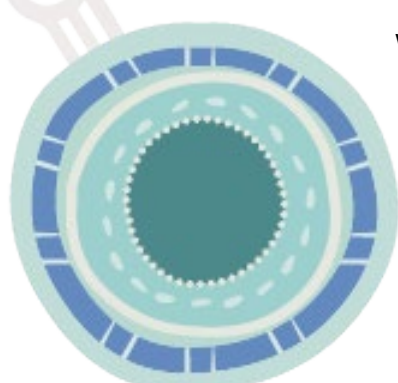
Climate change and health is a core policy priority for Lowitja Institute. We understand that climate change will have a wide variety of impacts – both direct and indirect – on the health and wellbeing of Aboriginal and Torres Strait Islander peoples. Significant health risks are attached to the continuing rise in average temperatures and the increased frequency and intensity of heatwaves, droughts, bushfires, and floods, particularly for people who are already facing overwhelming costs of living.

In 2021 Lowitja Institute held a roundtable with Aboriginal and Torres Strait Islander and international First Nations experts and published a discussion paper, *Climate Change and Aboriginal and Torres Strait Islander Health*, in partnership with the National Health Leadership Forum (NHLF) and the Climate and Health Alliance (CAHA).





During 2023 Lowitja Institute undertook a significant body of work, which included a series of conversations and roundtables with Aboriginal and Torres Strait Islander peoples across Australia and the Torres Strait, to deepen our understanding of how a changed climate is impacting on Aboriginal and Torres Strait Islander health and wellbeing. We heard from communities about their current and emerging priorities relating to those health impacts.



We sought to understand how communities have been engaged in decision making and priority setting by government, and to understand if there is any action moving forward that could support communities to lead in this space. We also discussed whether a national mechanism for collective advocacy, such as an Aboriginal and Torres Strait Islander Coalition on Climate and Health (a Coalition), would be beneficial to and supported by communities.

Summary of findings

The changed and changing climate's diverse impacts on Aboriginal and Torres Strait Islander health and wellbeing

Our peoples view our health and the health of Country holistically: as inextricably linked. Our 2021 discussion paper and 2023 community engagement has consistently shown that the changed climate is impacting everywhere, in diverse ways but with underlying shared themes.

THE ISSUES ARE URGENT

We see a lot of changes. We see Country change. Country died. No water. There's nothing there. No grass, no dirt. Trees all dead because of the heat. Horses died in the thousands. No cattle. Birds falling from the skies. Now in the morning you don't hear nothing because the birds have all died because of the draught.

The heat. Everyone is talking about it... You couldn't see the lizards anymore. Nothing. Not even a crop for four years. When we got our first storm, our kids born years ago had never seen rain. A kid was running around scared in the house because it was his first storm. – Norman Frank Jupurrula.

Norman Frank Jupurrula's words at Lowitja Institute's biannual conference mirror the sentiment expressed throughout community engagement – that the climate has already changed, and communities and individuals are being impacted. We need to act urgently to mitigate and adapt.

HOUSING, ENERGY POVERTY AND INFRASTRUCTURE

Inadequate housing, energy poverty and insecurity, and a lack of proper infrastructure in various communities across the country means that households and communities are vulnerable to exacerbated health impacts from the changed climate. For example, energy poverty and the real and frequent risk of disconnection makes it difficult for communities to stay safe from the heat, to keep food from spoiling, and to keep medications at a safe temperature.ⁱⁱ This is also a significant issue in the Torres Strait, where the extreme heat is dangerous for children and Elders, social housing is not fit for purpose and does not include air conditioning. Families must pay for their own air conditioning and installation, which is a significant expense and not possible for many. When families do have air conditioning, the cost of running it is high.ⁱⁱⁱ

CHANGES TO ECOSYSTEMS

Another consistent theme that emerged during community engagement was that the changed climate is strongly linked to biodiversity loss, which in turn impacts on physical, emotional, cultural, and spiritual health. For example, the disappearance of wildlife on Country, such as kangaroos in Western Australia, has meant the loss of totems for some communities. This causes spiritual and cultural harm. Communities are concerned about being unable to practice traditional hunting and fishing on Country.



Stakeholders shared that the fish kills in New South Wales river systems are a significant concern, as are the windstorms and extreme weather in the Torres Strait that prevent fishing. Turtle nesting patterns in the Torres Strait have been disrupted, which constrains traditional turtle hunting. In Tasmania, there are concerns about disruptions to mutton birds' migration patterns, which also affects a traditional food source. As many stakeholders noted, when traditional hunting and fishing practices are impacted this has multiple flow-on effects. These impact on food security, cultural and spiritual wellbeing, and there are economic impacts for those who rely on hunting or fishing for income (as is the case in the Torres Strait).

Similarly, changes to vegetation, including the loss of certain vegetation and the increase of weeds, means the loss of bush tucker and traditional medicines for our peoples. This impacts on nutrition and healthy lifestyles. In Tasmania, there is also concern about the impacts of rising sea temperatures on the sea grasses and kelp forests. These are used for traditional Palawa shell necklace making, which has cultural and historical significance.

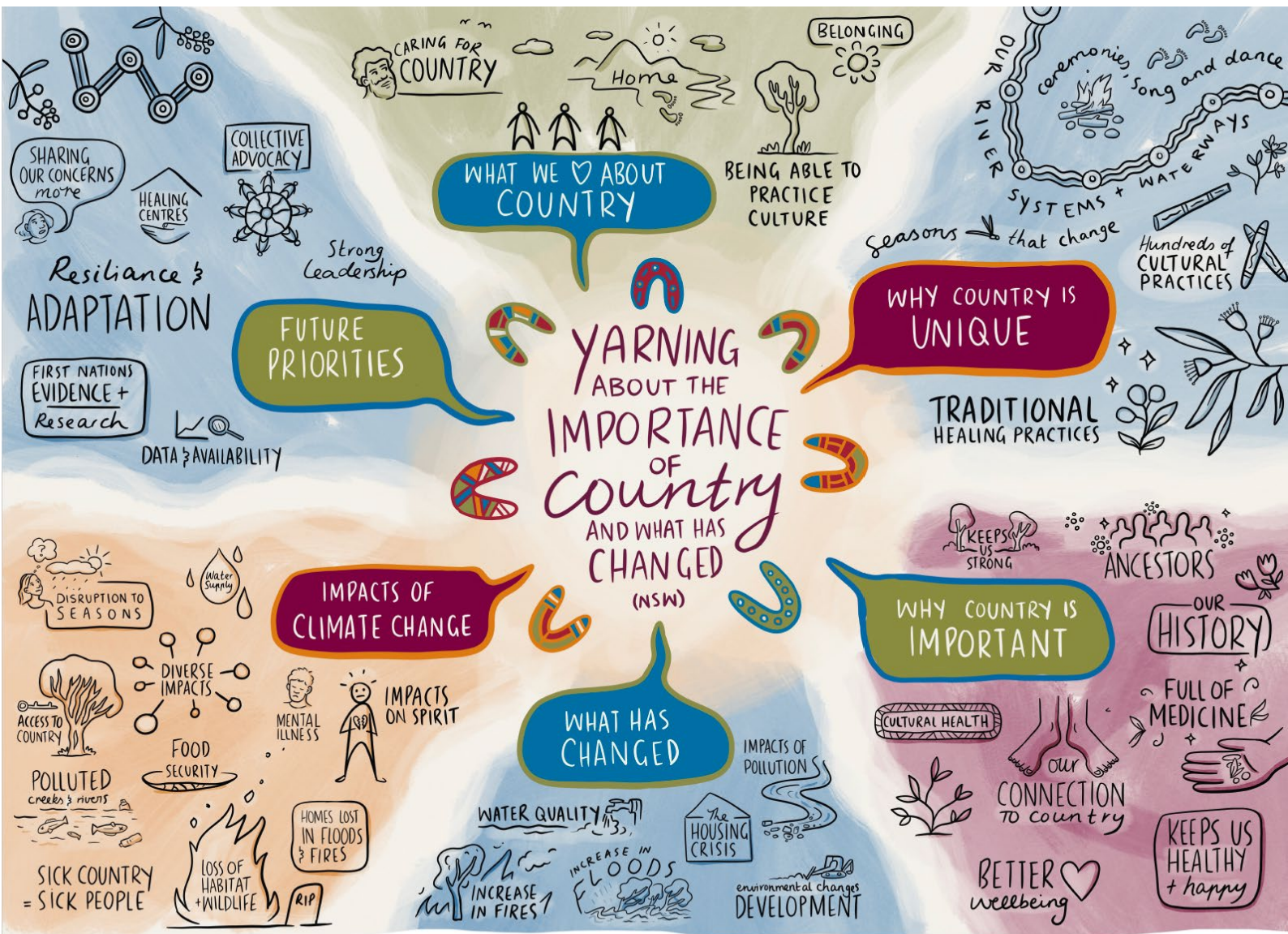
Water security is another concern as river systems dry up or are polluted by agriculture or mining. This was a concern raised by New South Wales stakeholders.

If the rivers are sick, so are we. – NSW stakeholder

IMPACTS TO CEREMONY

Another shared concern that manifests differently depending on the Country and community is impacts to community's ability to practice ceremony. We heard from stakeholders in Western Australia, New South Wales and the Northern Territory who spoke about how extreme heat is making it difficult to practice ceremony on Country. These practices are vital for our people's cultural and spiritual wellbeing. The Mayi Kuwayu Study demonstrates how important the cultural determinants of health and wellbeing are for our peoples.^{iv}





The above image was created by Coolamon Creative during our New South Wales roundtable and demonstrates the many priorities that communities have in this space.

SEPARATION FROM COMMUNITY

Being separated from community and family members also has consequences for wellbeing. In the Torres Strait, inundation and rising seas have been impacting on cultural sites and forcing families to leave their homes. Torres Strait Islander peoples are some of the world's first climate refugees. In New South Wales, the Cabbage Tree Islander community has not been able to

return home after being displaced over a year ago due to floods. Support is needed to assist families to stay in their communities.

Need for workforce development, capability building and funding

Aboriginal and Torres Strait Islander peoples and organisations are under-resourced to effectively respond to the impacts of the changed climate. There are very few roles that are specific to climate mitigation, adaptation, or emergency responses, including in the health sector and the policy context.

In the health context, some stakeholders spoke about the need to develop an Aboriginal and Torres Strait Islander climate and health workforce, including an environmental health workforce. Stakeholders noted that primary health workers require upskilling so that they are able to identify when people are presenting with symptoms that could be related to climate change or environmental health. For example, respiratory symptoms. The development of an Aboriginal and Torres Strait Islander environmental health workforce is needed.

Similarly, Aboriginal community controlled organisations (ACCOs) and communities are not resourced for community-led climate action plans, and disaster and emergency planning and relief. The Healing Country project, led by Associate Professor Veronica Matthews, is a good example of how local communities can lead decision-making around climate challenges with relevant agencies and services.^v The Fire to Flourish project is another good example of a project seeking to enable communities to lead their own disaster resilience planning.^{vi}

Another challenge identified by stakeholders is that some ACCOs are intentionally focusing on sustainability and how they can reduce their emissions. However, it was noted that there is no meaningful incentive for organisations to act on reducing their emissions. Doing so is a challenge because this goal needs to be de-prioritised against the organisation's goals and purpose, and limitations of budgets and funding. This means that even when the will is there, the barriers are insurmountable.

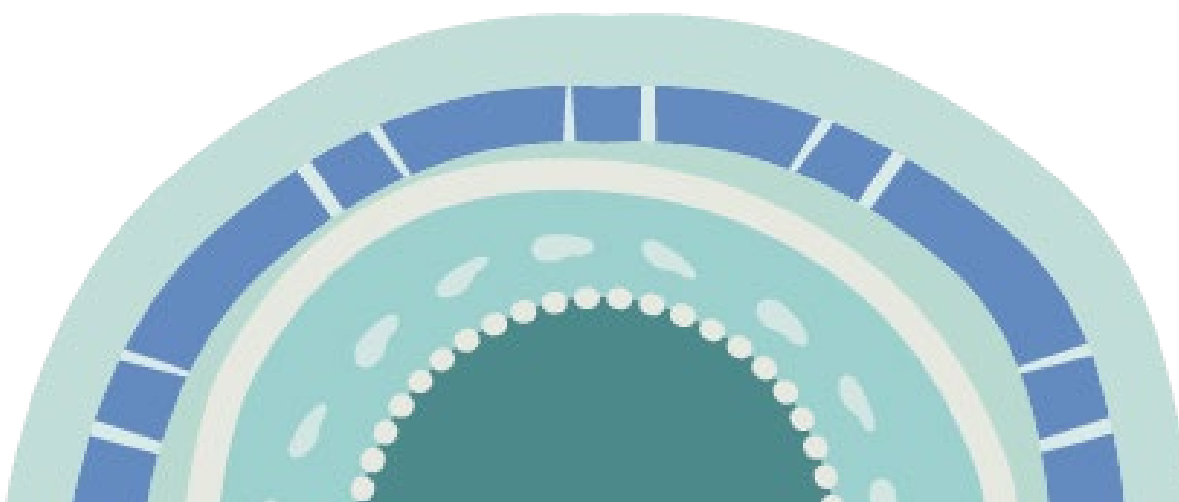
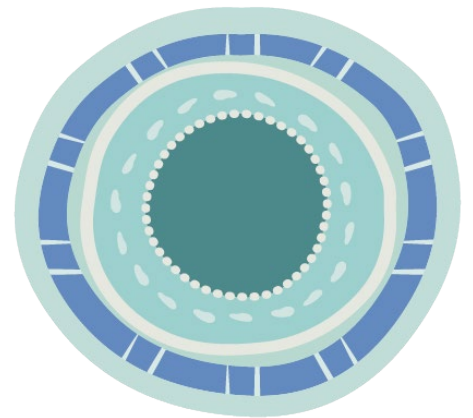
Further, ACCOs are not resourced to employ or upskill workers to specifically investigate and plan for this work, and there is no external funding from government available to employ external consultants who could be engaged

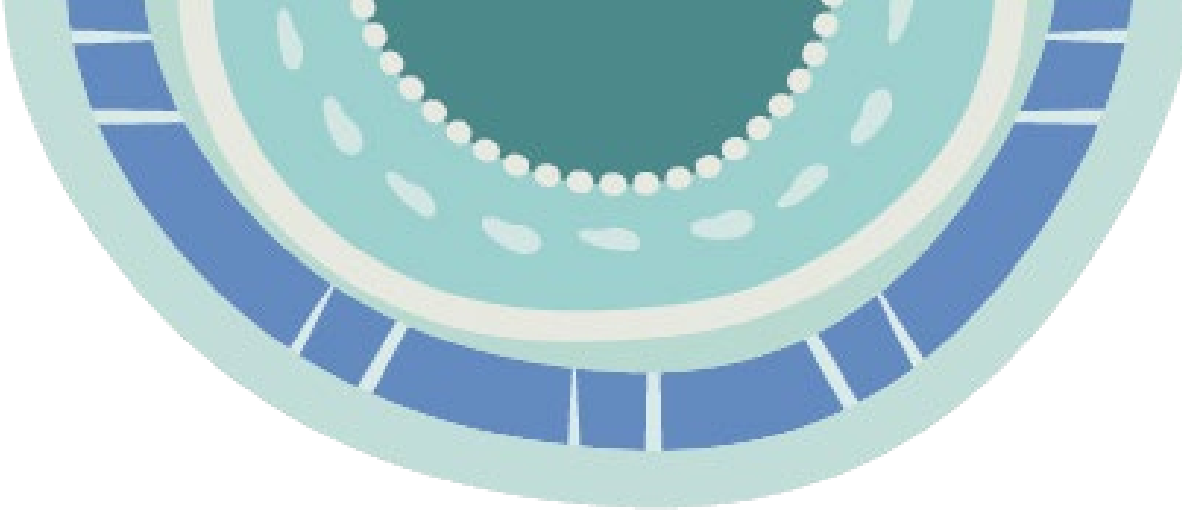
to do this. These limitations and the short-term nature of available grant programs, where they do exist, means that there is uncertainty; ACCOs are unable to plan long-term.

Recognition of Aboriginal and Torres Strait Islander wisdom, knowledge, and research

Another theme in our community engagement was that there is a need for governments and academia to recognise Indigenous knowledges as scientific. Our peoples have a deep connection with Country and have been researching it for millennia to better care for Country and for our communities' health and wellbeing. For example, the Budj Bim eel traps were highlighted in engagement as an excellent example of a practical application of a community's in-depth understanding of the local ecosystem.

The Gunditjmara people's advocacy to recognise the area as a World Heritage Site is a great example of utilising an international system to protect our peoples' rights to Country and to protect Country itself.^{vii} The restoration project exemplifies a model that government can learn from in empowering our peoples' leadership and solutions.^{viii}





International engagement with other Indigenous nations and utilisation of international human rights law

Lowitja Institute has also made representations on the international stage regarding climate and Aboriginal and Torres Strait Islander health. Lowitja Institute CEO, Adjunct Professor Janine Mohamed, with support from CAHA, attended the COP26 Roundtable for Australian health ministries in September 2021. In 2023, she also delivered an intervention at the United Nations Permanent Forum on Indigenous Issues Twenty-Second Session in New York, calling for an international commitment to climate action through decolonisation.

In our community engagement, stakeholders spoke about how the voices of Aboriginal and Torres Strait Islander peoples are not being heard or included adequately at the international level, including within the broader community of Indigenous peoples. This was highlighted as an important gap. Noting the success of the Torres Strait Eight^{ix}, for example, there is no key national Aboriginal or Torres Strait Islander body that is resourced adequately to engage with the international community on climate and health.

Aboriginal and Torres Strait Islander-led solutions

In response to the urgency of these issues, while Aboriginal and Torres Strait Islander leadership on the ground is present, resourcing and support for this is scarce. However, community leaders are already thinking through the diverse and complex issues and are seeking to act; for instance, through the Healing Country project mentioned above.

Another example was noted at Lowitja Institute's panel discussion on climate and health: Jimmy Frank Jupurrurla talked about how his community in Tennant Creek has had to change the time for ceremony because of the extreme heat over the past four years.

In those four years we had to change our ways, we got to practice our culture, our culture is our identity... we got to change that now. Where do we see ourselves in twenty years time?

In Victoria, a deep knowledge of community led to a highly successful emergency response by local Aboriginal community controlled health organisations (ACCHOs) during the Victorian floods.

Stakeholders we spoke with, including those in South Australia, noted that community leaders are concerned with ensuring that communities are resourced to engage in emergency and disaster planning. The will to act is there but communities are not adequately resourced.

Another Aboriginal-led solution to heal Country was suggested by stakeholders in Western Australia. These community leaders emphasised that if we include connection to Country and culture in early childhood and primary education, Country and community could be healed. Holistic approaches such as this tie in with our collective goals under the National Agreement on Closing the Gap.

Knowledge Translation and Peer-to-Peer learning

Aboriginal and Torres Strait Islander peoples with whom we spoke are mobilising and keen to work in this space. As noted, the priorities of each community differ, and this means the solutions differ as well. Resourcing and support required by different communities will need to be tailored to those specific communities.

Stakeholders also noted there is a need for a forum in which Aboriginal and Torres Strait Islander peoples in this space can come together to share knowledge, engage in peer-to-peer learning, and drive advocacy.

The need for a new approach to policy led by Aboriginal and Torres Strait Islander peoples

While contributing the least to climate change in Australia, Aboriginal and Torres Strait Islander peoples are some of the most severely impacted by it.^x As noted, social determinants such as poor-quality housing and energy poverty are widespread among Aboriginal and Torres Strait Islander communities,

which creates vulnerability to extreme heat and weather events. Other factors also contribute, such as socio-economic status.

Climate change compounds already existing health inequities resulting from the impacts of colonisation. Policy making did not consider the health of Country as an important priority and our peoples were locked out of decision-making regarding our lands, waterways, and seas. As noted in Lowitja Institute discussion paper *Climate Change and Aboriginal and Torres Strait Islander Health*:

Climate change is compounding these historical injustices, increasing inequities and feelings of powerlessness as communities despair over the desecration of their land-, water- and seascapes.^{xi}

The connection between climate change and colonisation has been discussed by Indigenous scholars such as Professor Rhys Jones^{xii}, and was explicitly recognised in the most recent International Panel on Climate Change (IPCC) report^{xiii}. There is a risk that policy making to address climate change continues to harm our peoples' health and wellbeing, especially as our peoples continue to be excluded from that policy making. Part of the issue here is that this means our peoples' priorities will not be heard or implemented in an effective way.

Some stakeholders in our community engagement talked about how climate-related disruption to burial sites and ancestors was impacting on cultural and spiritual wellbeing. In New South Wales, there is concern regarding water-buried ancestors being disinterred. In Victoria, during the floods on Yorta Yorta Country, community members banded together to place sandbags and protect the Cummeragunja cemetery from rising flood waters. The state government and local emergency services did not consider this a priority, but the Aboriginal community does. So, it was the Aboriginal community which mobilised quickly and acted to protect what was a priority to them, without any additional support. Their strong connected community and holistic approach meant effective and efficient mobilisation.



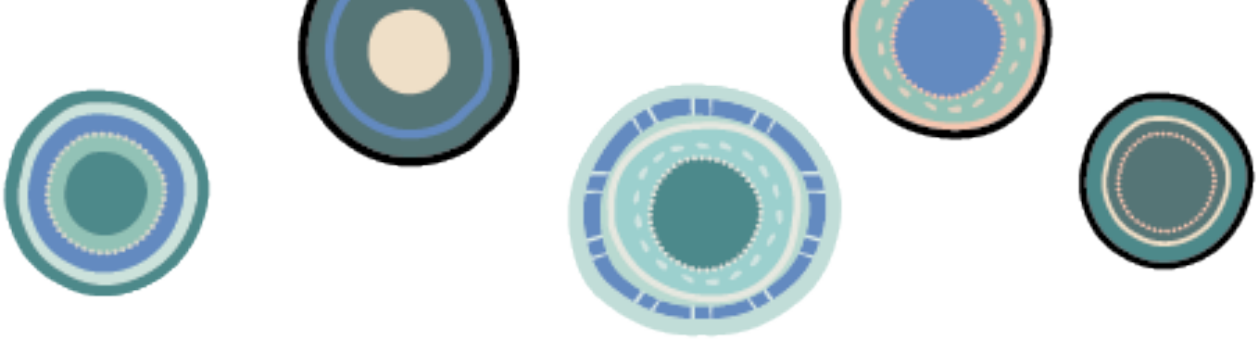
Many stakeholders spoke about the disconnect and conflict between worldviews leading to inadequate, inefficient, and poorly targeted policy. As noted, Aboriginal and Torres Strait Islander understandings of health and wellbeing are strengths-based and holistic. This is in direct contrast with the way that government departments silo different sectors and treat human health as distinct from environmental and planetary health; this approach is inherent in colonisation. This means that priority setting will look very different for our peoples compared with government or mainstream priority setting.

The recently released report, *Aboriginal and Torres Strait Islander Peoples' voices and engagement in the IPCC*, by authors including Associate Professor Sandra Creamer, Associate Professor Bradley Moggridge, Dr Vinnitta Mosby, Lily Island and IPPCC Lead Author Nina Lansbury, speaks strongly to this theme, noting:

The ongoing process of colonisation can only be healed with truth telling, coupled with the paradigm shift and genuine power sharing that is foundation to partnerships by definition (Fischer et al., 2022). Despite the harms inflicted, Aboriginal and Torres Strait Islander Peoples are willing to forge these partnerships, if done with foundations of fairness, justice and self-determination.^{xiv}

The report highlighted that we can only ensure a climate-resilient future by addressing the impacts of colonisation and implementing a strong rights-based approach that recognises self-determination in this space.^{xv} Our self-determination would mean our priorities are included and addressed with Aboriginal and Torres Strait Islander-led solutions.

In practice, this means decolonising conceptions of health and viewing climate and health in a holistic way, aligned with Aboriginal and Torres Strait Islander ways of knowing, being and doing.^{xvi} There needs to be effective and meaningful two-way engagement between decision-makers and Aboriginal and Torres Strait Islander peoples on climate. The report recommends providing an opportunity for Aboriginal and Torres Strait Islander peoples to be heard at all levels.



The IPCC Voices report is timely and aligns with the feedback that we received during our community engagement. As we approach COP28 at the end of this year and the Australian Government seeks to host COP31 in 2026, we encourage the government to take its commitments to our peoples, to upholding the UNDRIP, and tackling the challenges of climate change and impacts on health seriously. This means elevating our voices and leadership and working in partnership with our peoples.

Government engagement

In addition to the above, there was consensus that, as was found in the Lowitja Institute 2021 discussion paper, Aboriginal and Torres Strait Islander voices are still being blocked out of decision-making, siloed, and stifled in this space. Our peoples' leadership is being ignored rather than being valued. National and jurisdictional governments are not including Aboriginal and Torres Strait Islander peoples in decision-making.

Where there are attempts by government to engage with Aboriginal and Torres Strait Islander communities regarding climate and health, other barriers get in the way, including a lack of resourcing, inefficient government processes, and the siloing of climate-related issues across government departments. When asked about government engagement thus far, stakeholders either noted there had been little engagement, or too much consultation done inadequately, which risks tokenism.

For example, in Western Australia, the Aboriginal and Torres Strait Islander community has been engaged extensively by state government, as well as by the national government as the Department of Health and Aged Care develops the National Health and Climate Strategy. However, the Aboriginal community has said they do not have the resources or capacity to engage in consultation. There is also an issue with lack of coordination where the same questions are being asked multiple times throughout different engagement processes. This is leading to a sense of frustration and disengagement, as it is difficult for community representatives to ascertain which consultation or engagement they should prioritise. This also leads to an issue where the voices which government hears are the ones who have the resourcing to engage, excluding the voice of smaller organisations or communities.

Those working in related jobs, such as health or land management are already stretched. There is also double handling due to different government activities

occurring at the same time with no coordination. University-funded projects are coming to communities with similar questions. There is also concern about the lack of transparency or accountability – it is unclear what is done with the information and there is a lack of trust that community priorities will be acted upon.

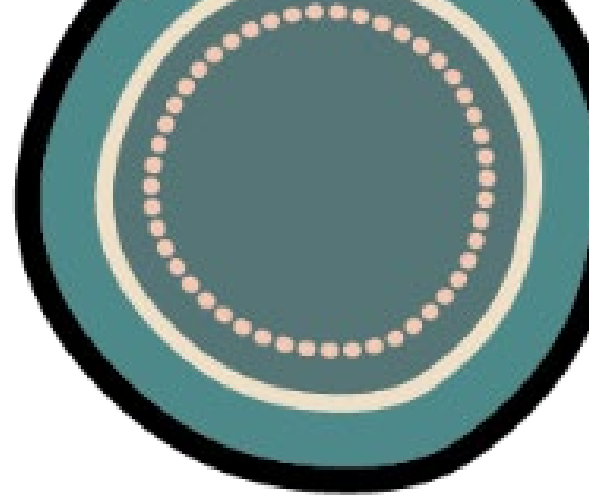
The approach of containing different climate-related issues to separate government departments creates inefficiencies, is a barrier to our peoples' engagement, and it is not a useful framework for policy development on climate and health. As noted, incorporating an Aboriginal and Torres Strait Islander holistic framework would be beneficial for everyone.

Another barrier is the way that issues around climate and health are framed by governments and mainstream organisations. The language used does not align with how Aboriginal and Torres Strait Islander peoples are talking about climate and health. This excludes some communities from engaging in relevant and important conversation.

While on the face of it, such attempts by government to engage are a positive indication, there is significant concern about the large number of consultations that community are invited to participate in and the burden this creates. Communities and Aboriginal organisations are not resourced to participate in these activities and they don't have specific funded roles focused on climate and health.

Some stakeholders made the point that it would be beneficial to find a way to centralise all of this to avoid unnecessary doubling up. As one New South Wales stakeholder stated, 'No more engagement, we want to get married.'

A Coalition would be an opportunity to streamline these engagement processes and ensure that government has a consistent and resourced contact that is in direct touch with and guided by our communities and our leaders.



Conclusion

WHY A COALITION

In light of the above, we know that Aboriginal and Torres Strait Islander communities are concerned about the changed climate's impacts on health and wellbeing, and that this is an urgent issue. Colonial policies have been ineffective for our peoples and the way that government policy making operates today continues to be ineffective and excludes our voices and leadership. Our leadership in this space is vital and would benefit our communities' health and wellbeing as well as that of the broader Australian community. The issues our communities are concerned about are diverse, which means that there is a need for our peoples' diverse voices to be heard. A space is required for our peoples to come together to build each other up, learn from one another, and determine some shared goals and activities to progress these.

Several stakeholders noted that true partnership is required to move forward. Aboriginal and Torres Strait Islander voices need to be elevated and respected. As Norman Frank Jupurrurla said, strong action on climate and health requires that we, *'Walk together, work together... we need to be strong and to be strong we need to work together to make it strong.'*

One stakeholder from South Australia noted that there are too few Aboriginal people at the table when it comes to government decision-making. However, as Francis Nona stated at Lowitja Institute's biannual conference,

*We talk about this phrase 'need to get a seat at the table'.
It's about making a chair for someone to come sit with us.*

Veronica Matthews mirrored this sentiment:

*Going back to justice and **true justice**. If we are going to have equal co-governance with white fellas about management of land, it needs to be equitable power.
Or maybe the balance of power needs to go to us.*

This is what a collective advocacy mechanism such as a Coalition would offer: an independent collective and strong voice that has its own table to invite government to sit at, and representatives that can also sit at the table

of government to advise. A Coalition could work with government as a partner in developing effective and meaningful policy on climate and health.

Further, a decolonising approach is required to heal the relational wounds noted above, and to ensure our peoples have power and agency in this space. A Coalition or similar governance structure would be the perfect mechanism to achieve this. It would enable Aboriginal and Torres Strait Islander stakeholders, including community representatives, experts, researchers, and organisations, to come together to share knowledge, advise government policy, drive solutions and decision-making, and have a platform for collective advocacy.

A Coalition could also contribute to and support several relevant key national policies, including the National Health and Climate Strategy, currently in development. This national strategy has the potential to restore relationships between our peoples and government and mainstream organisations by enabling and respecting our peoples' leadership. With proper partnerships with our peoples and meaningful engagement, the strategy could support our peoples to lead solutions and have impact on climate change mitigation and adaptation.

By providing Aboriginal and Torres Strait Islander leadership, knowledge and experience, a Coalition could support the Department of Health and Aged Care to draft an impactful strategy, as well as guide future iterations and support implementation. A Coalition could also support the Department to understand and include Aboriginal and Torres Strait Islander community priorities, and to monitor and evaluate the strategy's impact and efficacy.

Further, a Coalition would also support the implementation of the priority reforms under closing the gap. A Coalition could enter strong partnerships that go towards priority reform 1: *Formal Partnerships and Shared Decision Making*. It could support and advocate for the strengthening of the community controlled sector, which would contribute to priority reform 2: *Building the community-controlled sector*. A Coalition could also support the implementation of priority reform 4: *Shared Access to Data and Information at a Regional Level*. In working towards mitigating the changed climate's impacts on health and wellbeing via shared decision-making, a Coalition would additionally help to support our shared work towards meeting the Agreement's socio-economic targets.

A Coalition could also support the *National Aboriginal and Torres Strait Islander Health Plan 2021–2031*, with highest relevance to the following priorities:

- P1: Genuine shared decision making and partnerships.
- P3: Workforce.
- P7: Healthy environments, sustainability, and preparedness.

Under P7, the plan seeks to ensure that capacity building and development is undertaken to ensure that Aboriginal and Torres Strait Islander people have access to safe and healthy environments with sustainable housing, sanitation, water security, and food security; and that communities are prepared and have the necessary infrastructure to respond to natural and other disasters. This is aligned with what the purpose and goals of a Coalition would be.

Further, by having a focus on an Aboriginal and Torres Strait Islander climate and health workforce and research workforce, a Coalition would also support the goals of the *National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021–2031*.

A Coalition could work across government departments to support the development and implementation of other related policy, such as the *National Climate Risk and Assessment* and the *National Adaptation Plan*, which sit under the *National Climate Resilience and Adaptation Strategy 2021–2025*. The Australian Government and the Department of Climate Change, Energy, Environment and Water (DCCEEW) have a stated commitment to partnering with Aboriginal and Torres Strait Islander peoples in this policy space. Due to the interconnection between DCCEEW's scope and health, there is specific expertise required to ensure that the health considerations and implications are included in future policy development, including the potential next iteration of this strategy. The Coalition would be perfectly suited to partner with government in this policy space to ensure that the required skills, knowledge, and experience are input into policy development.

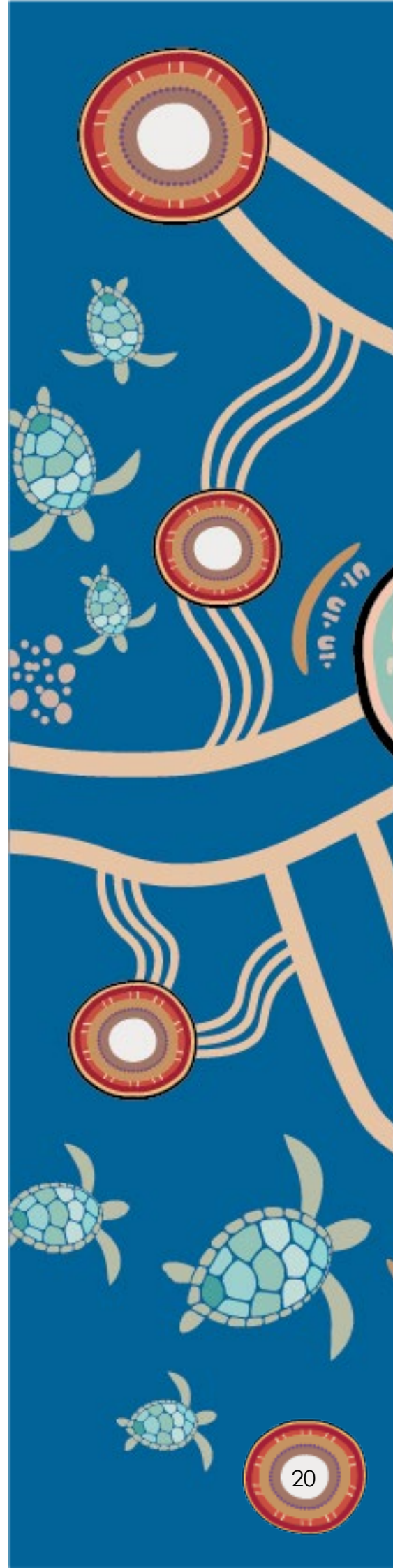
The *National Preventative Health Strategy 2021–2030* is another government policy that a Coalition could support.

For more information on what this Coalition would look like, Lowitja Institute has developed a business case and cost estimate.



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