

COP28, Australian Pavilion – Climate change and Aboriginal and Torres Strait Islander Health

I want to thank the DCCEEW (fyi: Department of Climate Change, Energy, the Environment and Water) for the invitation to speak today.

And thank you to the Department of Industry, Science and Resources and AI for supporting us to attend COP28.

As is customary for me as a First Nations person from Australia, I would like to acknowledge the traditional owners of the country we stand on today.

I recognise and pay my respects to the diverse cultural heritage and traditions of the local people here in the UAE – and acknowledge the First Nations peoples who have lived on and cared for this country for millennia.

I would also like to acknowledge and pay my respects to the First Nations peoples from around the world who are here with us today.

I am a proud Narrunga Kaurna woman from the Yorke Peninsula in South Australia and I am the CEO of the Lowitja Institute, Australia's national Aboriginal and Torres Strait Islander community-controlled health research institute.

Before we go any further, I'd like to tell you a little bit about Lowitja Institute, which was named in honour of our patron — Dr Lowitja O'Donoghue who was and is an amazing female Aboriginal Leader in our country.

As a community-controlled organisation, our work is led by our communities.

This means they help determine our priorities and guide our work – ensuring that everything we do is focused on bettering the health and wellbeing of Aboriginal and Torres Strait Islander peoples.

Our work is born out the need to negate deficit discourse research — that is, research that is done on and about us, and then used against us.

Historically and recently, we have been largely locked out of the research process and our knowledges were not valued or respected – these were thought of as illegitimate and not scientific enough.

Our work is focused on changing this.

By supporting -- and growing--- the First Nations health research workforce through online training, scholarships, and connectedness.

By ensuring that the research we fund is research that our communities want.

And that our funded research grants are First Nations Led – led by our communities, our organisations and our researchers.

And of course, we are an advocacy and policy think tank – translating our knowledges and research into policies and programs that will better serve our communities.

In 2019 and 2020 our communities saw flooding, hail, fires, and extreme temperatures – our communities and board knew we needed act.

Hence, climate and health became a policy priority for us at Lowitja Institute.

We know, as First Nations peoples, that we contribute the least to climate change, and yet we are impacted the most.

This fact was highlighted in this year's IPCC report.

At the Lowitja institute, we understand that climate change is a direct result of colonisation.

It is causing destruction to our lands, sacred sites, and our ways of life.

It threatens our cultural heritage and traditional knowledges – and has a profound impact on the social and cultural determinants of our health and wellbeing.

Aboriginal and Torres Strait Islander peoples survive and thrive because of our connections to our Land.

Our connection to Land determines our Lore, our Language, our relationships and roles in our communities, in ceremonies and in our families.

The practice of passing this knowledge on through generations - - is called cultural maintenance – and is key to keeping culture strong.

How cultural maintenance happens is different from community to community and relationship to relationship.

However, when these connections and practises are disrupted, it impacts our health significantly.

Being able to uphold our culture keeps us healthy.

These are the cultural determinants of health, and these must be considered in policy.

They are foundational to achieving equitable social determinants of health, as recognised in Article 24 of the UNDRIP.

And they are foundational to achieving the UN SDGs.

Climate change presents an urgent risk to the cultural determinants of our health.

And this will have a disproportionate and devastating impact on all First Nations peoples – but particularly our women, babies, and children.

In recent weeks, the WHO (World Health Organisation) the United Nations Children's Fund and the United Nations Population Fund --- jointly called for systematic action to protect pregnant women, and babies and children, from the extreme health risks posed by climate change.

As noted in their recent statement, the research shows that there are multiple causes of maternal and neonatal morbidity and mortality. Including: gestational diabetes, hypertensive disorders, preterm birth, low birth weight, and stillbirth.

The statement makes it clear that these risks are only going to be exacerbated by climate change and extreme heat.

These risks also sound terrifyingly familiar.

Over the period 2014 to 2018, the main causes of death for Aboriginal and Torres Strait Islander babies and young children were complications of pregnancy and birth. Complications such as: birth trauma, foetal growth disorders, hypertension and diabetes.

First Nation babies and young children die at twice the rate of non-Indigenous babies -- the mortality rate for 0–4 year olds was 2.1 times the rate of non-Indigenous children in 2015–2019.

Our babies continue to be born underweight.

89% of First Nation babies were born at healthy birthweight in 2020 – compared to 94% of non-Indigenous babies.

And our women live on average eight years less than non-Indigenous women.

Maternal health is a key driver for these statistics.

And when our women already live in poor housing and in extreme heat —in places like Central Australia — the threat to First Nation families, our peoples, and our population at large and into the future — is heart wrenching.

The Australian government has a commitment — under SDG 3 targets 3.1 and 3.2 — to protecting mothers and children and reducing mortality rates.

This work must include First Nation mothers and children – and requires a multi-faceted approach.

Our peoples have survived centuries of: systematic racism, economic and social exclusion, and intergenerational trauma.

As a result, our peoples now die far earlier and experience a higher burden of disease, disability, poverty, and criminalisation than other Australians.

These are the long-term impacts of colonisation – and they will be compounded by climate change, widening the gap in health outcomes even further and leaving those we value most — our future generations – most at risk.

This is the backdrop to the work we must do together.

Also in that backdrop is the recent result of Australia's referendum – I will talk more about this soon.

In 2021, we published papers on the cultural determinants of health and — importantly — on climate and Aboriginal and Torres Strait Islander health.

This and Lowitja Institute's other climate related papers can be downloaded via the QR code - I'll show it again at the end.

It highlights much of what I have already said here today - but it also warns of the impacts of climate change on our Aboriginal Community Controlled Health Services – these services are already struggling to operate in extreme heat and with a reduced workforce.

We must focus on supporting our health services to manage the impacts of climate change, extreme heat and major weather events and adapt quickly – the health of our people depends on it.

So I call on Governments to work with us and invest in supporting our services to protect our communities.

Earlier this year I delivered an intervention at the UN Permanent Forum on Indigenous Issues in New York.

I called for governments to heal the deep relational wounds between nation states and Indigenous peoples, through: truth-telling, decolonisation, and anti-racism.

I also called on nation states to: fully implement the UNDRIP and to convene a meeting to discuss decolonised approaches and actions to adaptation and mitigation of climate change impacts.

This is imperative to ensure self-determination as stated in Article 3 of the UNDRIP.

As our communities continue to move forward after the unsuccessful Voice referendum, it is more important now than even that the Australian government takes every opportunity to elevate our voices and leadership.

So I again ask that government commits to working alongside us.

As Aboriginal and Torres Strait Islander peoples we hold deep knowledge of this Country.

Our leadership is vital.

We can no longer wait for climate action.

Many communities are already noticing significant changes to ecosystems.

For example, the biodiversity loss that they are seeing on their Country and what this means for traditional hunting and fishing practices.

The loss of economic livelihoods that this brings.

The loss of totems (also known as biodiversity) that has cultural and spiritual impacts.

In Tenant Creek in Central Australia, Norman Frank Jupurrurla's family advocated for years to get solar panels on their house after a life-threatening episode, where Norman's power went off due to the extreme heat and his Insulin was un-usable.

It took advocacy from many sources – and more than six months — for the NT government to connect them to solar power.

Norman's home is the only house in the community to have solar panels.

Governments and mainstream institutions in academia need to recognise First Nations knowledge and wisdom as scientific.

We have been doing environmental science for millennia.

Observational science is part of our everyday life.

This is central to our connection to Country.

We have always known we are part of — not external to — our ecosystems — and we deeply understand our role as custodians of this country.

The methodologies that we have developed and passed down through generations have kept Country and our communities thriving.

Colonisation sought to erase these practices, disrupt these connections — colonisation of our seasons is just one example!

Part of healing, part of the decolonisation work that must be undertaken, is elevating Indigenous researchers and scientists. Researchers like Francis Nona who we will hear from shortly.

Our leadership in this space is unique and important because we take a holistic approach.

Last month we met with government ministers in Australia to advocate for the establishment of a an Aboriginal and Torres Strait Islander Coalition on Climate and Health — a collective advocacy mechanism which will elevate our voices and allow for our leadership and self-determination in this space.

We also recently published a paper with some additional detail – you can download this using the QR code on screen to find out more and offer your support.

The key takeaway here is that to achieve health equity — as we are committed to under the UN SDGs — we must understand and know power — and how to share it.

We must understand equity.

We must know that treating everyone the same doesn't get the same outcome, because we don't all start from the same place.

We must know that blanket cookie cutter approaches do not honour and value us as First Nations people or see and respect our diversity.

I will leave you all with this image from our recent Lowitja Institute conference.

We had more than one thousand Aboriginal and Torres Strait Islander and First Nations peoples from all around the world — sharing knowledge and insights.

It was a powerful space to be in – and one of our themes was climate and health.

And you have a chance to be with us at our 2025 conference.

I encourage you all to look at our website and save this date if you are interested in further supporting our work.

Our conferences demonstrate the depth and strength of our peoples' intellect, knowledge, and voices – and our unyielding dedication to the health of Country and our planet.

The events and gatherings that I've been part of this week with other First Nations people have demonstrated the same.

Which leaves me with some hope for our future.

I will now hand over to Francis. Thank you.