

08 May 2024

Professor Eleanor Bourke AM, Chairperson
Commissioners Hunter, Walter, Lovett and North
Yoo-rook Justice Commission
Naarm

Dear Commissioners,

I write in my personal and professional capacities. Personally, I am a Waanyi and Jaru man, with extensive lived experience in Aboriginal families and communities here in Australia, and also globally with other Indigenous peoples. Professionally, I am trained as a medical anthropologist, with a PhD from the School of Psychological Sciences at Monash University (my thesis investigated power and cultural safety issues in medical education, Aboriginal health and Aboriginal affairs), a master's in medical science from The University of Queensland (an ethnographic account of addictions, traumatic stress syndromes and healing in remote Aboriginal communities), and a bachelor's degree in Aboriginal Studies and Government.

My current roles and standpoints from which I tender this submission are:

- Co-founder of the Aboriginal and Torres Strait Islander Healing Foundation (in the wake of the federal apology to Indigenous Australians)
- Lead writer of a national curriculum framework for Aboriginal and Torres Strait Islander health in medical education (Phillips 2004)
- Lead writer of the National Registration and Accreditation Scheme's (NRAS) Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020-2025 (covering AHPRA, national Boards and accrediting authorities)
- Professor of First People's Health (Adjunct), School of Medicine, Griffith University
- CEO of ABSTARR Consulting Pty Ltd - specialising in the art and science of decolonisation
- Chair of Ebony Aboriginal and Torres Strait Islander Institute (a Black think tank), and project lead on Ebony's Truth, Justice and Healing (TJH) Project, which has investigated informal and formal truth initiatives in Australia and globally, produced a framework for TJH in Australia, and established a new Aboriginalised methodology for helping stuck factions get unstuck.

My submission covers the following areas:

1. Health - some key evidence linking racism as a public health issue to closing the gap
2. Healing - key elements, principles and socio-political and economic issues
3. Truth, Justice and Healing (TJH) Project – the outcomes of Ebony Institute's research.

Thank you for the opportunity to submit this evidence to your esteemed selves and this esteemed and historic Commission. I am honoured.

Regards,
Professor Gregory Phillips, PhD

This submission is supported by Charles Thorpe-Williams and Elias Jarvis – Victorian traditional owners.

1. Health - some key evidence linking racism to closing the gap

Poorer health outcomes for Aboriginal and Torres Strait Islander Peoples can be directly linked to the structural violence within current western health systems. Some evidence for this includes:

- a) **Racism as a public health issue** – in Victoria, approximately one third of the gap in health outcomes between Aboriginal and non-Aboriginal peoples is due to racism in the Victorian public health system (Markwick, Ansari et al. 2019, Markwick, Ansari et al. 2019). This means policy narratives that posit Aboriginal peoples' individual capacities to look after their health as 'the problem', such as that in 'closing the gap' policies, are at best, mythological, and at worst, fatal (Phillips 2015).

Recommendation 1 - The State of Victoria should invest in cultural safety legislation and mandatory reporting arrangements as an occupational health and safety issue for the entirety of the public service, funded sector and parliamentarians themselves.

- b) **Indigenous youth suicide is emblematic of structural violence and lack of self-determination** – in First Nations communities in British Columbia, those communities with the highest rates of youth suicide are those with the lowest participation in community decision-making (Chandler and Lalonde 1998), and this pattern is repeated in the findings of the Harvard University American Indian Economic Development Program and the Native Nations Institute at the University of Arizona work in Native American nation-building and economic participation (Cornell 2006). This means we should not merely be measuring indicators like individual and family biomedical markers, or even the social and cultural determinants of health, but also structural and socio-political indicators like:
 - a. the incidence and prevalence of racism within policing, corrections and legal systems
 - b. whether Aboriginal and Torres Strait Islander children have access to curriculum and teachers who are trained in Indigenous learning styles and cultural education
 - c. the ability of registered health practitioners to demonstrate and maintain cultural safety in their care for Aboriginal and Torres Strait Islander patients – AHPRA now has more culturally safe notifications system in place, but who is independently and reporting publicly on the number of notifications and their outcomes?
 - d. the capacity of health service providers to effectively identify, address and report racism as part of health services accreditation and funding requirements.

Recommendation 2 – The Productivity Commission, or Victorian equivalent, should be given powers to investigate and report the incidence and prevalence of racism and structural violence, and their economic costs, in publicly funded agencies, including police, courts, prisons, schools, universities, hospitals and governments.

Recommendation 3 - The State of Victoria should invest in a Victorian Aboriginal Cultural Education Institute, with legislated power and resources to design culturally safe curricula for schools and universities, and teacher skills and competencies in teaching it. This initiative should prioritise Aboriginal community members being paid to learn their

culture and languages, and then employed by ACCO's to run train the trainer programs for non-Indigenous teachers, lecturers and policy makers on a fee for service basis.

- c) **Alcohol and other addictions** – rather than focus on the political economy of alcohol sales and taxes (who gets rich off our misery?), as a nation, we prefer to deny mainstream communities problems with addictions, and focus on Aboriginal and Torres Strait Islander peoples' struggles with addictions through harsh and ineffective administrative, political and punitive 'interventions' (Wright 2009). None of these work (Phillips 2007). Instead, properly informed therapeutic and trauma-informed approaches to healing and addictions are required (Aboriginal & Torres Strait Islander Healing Foundation Development Team 2009).

Recommendation 4 – Establish an independent Victorian Aboriginal Health and Human Services Authority – with legislated powers and resources to set policy and strategy, direct funds, ensure culturally safe clinical governance and measure outcomes. This includes conception and funding of at least five healing centres (in line with Recommendation 33 of Victoria's Mental Health Royal Commission), and oversight of Aboriginal alcohol and other drugs, child protection and housing programs. The State will still be responsible for reporting on the National Close the Gap Partnership Agreement and public responsibility for health and social outcomes, particularly as it relates to Aboriginal people accessing state funded service like hospitals, prisons, and schools.

- d) **Government policy and procurement systems are the problem** – The findings of the Productivity Commission's Review of Closing the Gap (Productivity Commission 2024) found that "...there has been no systematic approach to determining what strategies need to be implemented to disrupt business-as-usual of governments. What is needed is a paradigm shift. Fundamental change is required, with actions based on a clear logic about how they will achieve that change." Similarly, ABSTARR Consulting's two national Partnership Health Check Reports (2021 and 2023) of the National Closing the Gap Partnership found that government systems and processes are the barrier to fundamental paradigm shifts (See <https://www.closingthegap.gov.au/partnership>).

Recommendation 5 – The government legislates the First Peoples Assembly to support and advocate for four independent bodies:

- Victorian Aboriginal Education Institute
- Victorian Aboriginal Health and Human Services Authority
- Victorian Aboriginal Land and Culture Authority
- Victorian Aboriginal Economic Development Commission

These bodies should have the power and resources to set policy and strategy, direct funds for Aboriginal programs, measure outcomes and provide fee-for-service advice and direction to mainstream agencies. These bodies' funds and powers are guaranteed by State as part of the State-wide Treaty. The State-wide treaty makes state agencies responsible for overall state performance and outcomes.

2. Healing - key elements, principles and socio-political and economic issues

Western biomedical health systems are inadequate in understanding what healing is. They tend to view it within the narrow limits of their understanding of physical health or mental health within the individual. Instead, Aboriginal psychologists have identified a conceptual model for social and emotional wellbeing of our communities, including the social and political determinants of health; the enabling environment (Gee, Dudgeon et al. 2017). While the social and emotional wellbeing wheel, as it is known, is a much clearer and stronger model for wholistic psychological wellbeing for Aboriginal and Torres Strait Islander communities, its effective implementation is hampered by the western mental health workforce and systems' lack of comprehension, skill and cultural safety.

But beyond conceptions of 'mental health', 'social and emotional wellbeing; and 'wellbeing' is what Aboriginal and Torres Strait Islander peoples refer to as 'healing'.

In my professional and personal experiences with addictions and healing as a family member, community member, researcher, advocate and policy writer, I define healing as:

“A spiritual process that includes:

- Recovery from addictions
- Recovery from trauma
- Cultural renewal.” (Phillips 2003)

Healing can not happen effectively unless all four of these elements are considered and addressed. That is:

- healing is a spiritual *process*, not an event ('spiritual' as defined by that individual)
- recovery from addictions and other maladaptive coping mechanisms/responses (addictions affect the whole family not just the drinker/user, and therefore the whole family/community needs healing from maladaptive coping responses).
- recovery from the range of traumatic stressors including but not limited to intergenerational traumas, cumulative traumas and situational traumas. These trauma-informed approaches can not effectively be delivered using western mental health paradigms alone – they are ineffective. Instead, Aboriginal and other Indigenous practice models must be illuminated and supported.
- cultural renewal is an act of decolonization and self-determination.

See also Gabor Mate (2009), Eduardo and Bonnie Duran (1995), and Jane Middleton-Moz's (1999) work for similar understanding of the aetiology of addictions, trauma and healing in decolonial frameworks.

ABSTARR Consulting are working now with the Victorian Aboriginal Community Controlled Health Organisation to define an Aboriginal conceptual model, practice model, service model, evaluation model and funding model for healing.

The next section addresses healing in social, cultural and political contexts.

Recommendation 6 – The Departments of Health and Human Services fund in perpetuity at least five Aboriginal healing centres, utilising self-determined practice, clinical governance, service, funding and evaluation models.

3. Truth-telling - the findings and outcomes of Ebony Institute's research in truth, justice and healing

The Ebony Aboriginal and Torres Strait Islander Institute's Truth, Justice and Healing Project has identified the necessary principles and elements for successful truth telling initiatives (formal and informal) in Australia and overseas. We have collated these into a body of evidence available to Aboriginal and Torres Strait Islander communities wishing to plan and conduct truth telling initiatives. See attached Discussion Paper Executive Summary and full Discussion Paper.

In summary, Ebony Institute (2020) found the following.

“Strengths of formal truth commissions can include:

- *An opportunity for political leaders and civil society to help their country understand why and how certain events happened, and what lasting impacts there are on society;*
- *An opportunity to help prevent further abuses occurring again;*
- *An opportunity to identify and implement reparations, justice, and institutional and policy reforms; and*
- *An opportunity for individual, family, community, and national healing.*

Weaknesses of formal truth commissions include:

- *Lack of self-determination in the establishment of any formal commission;*
- *Unclear or contested expectations, parameters and terms of reference, for example, focussing exclusively on the past, whether amnesty should be offered, and whether a commission should have powers of compulsion;*
- *Lack of support for those telling and hearing the truth;*
- ***Limited or no guarantee the abuse or conflict will stop;***
- ***Lack of justice or substantive reform;***
- ***Potential for recommendations to not be implemented; and***
- ***Unwillingness to address the fundamental causes of conflict or abuse.”***

I draw your attention to the last four dot points above, and want to highlight that in Ebony's research about issues of truth, justice and healing, of particular note were the reflections of Ovide Mercredi, former National Chief of the Assembly of First Nations in Canada:

“Look, we First Nations peoples in Canada have had a national voice for forty years, we've had treaties – both historic and contemporary – for hundreds of years, and we've had the national Truth and Reconciliation Commission, so you might think our problems would be solved. And yet we still have out-of-home care rates through the roof, intractable poverty, trauma and addictions, and still massive amounts of government disinterest and racism. And also, you can never trust governments. If you have any treaties, you must have an independent umpire to keep them honest.”

Ovide Mercredi in (Phillips 2023)

Further, in conversations with the Canadian National Truth and Reconciliation's leadership team, they made it clear that **public education** was critical to the success of truth, justice and healing. This means it is crucial for policy-makers to not only invest in public education as a public relations or opinion polling exercise, but rather, as a serious public investment in the intellectual and cultural soul of the nation. If the public do not understand **why** treaty or voice or

truth are necessary, they will not have full impact, and will be more vulnerable to the shifting sands of political and media opinion (as we saw with the federal referendum last year).

Recommendation 7 – The State of Victoria should apologise for genocide and continuing racism and structural violence, and establish and fund an independent government oversight body to keep publicly funded agencies to account.

Recommendation 8 – The State of Victoria should invest heavily in a genocide memorial, and remove statues and memorials of colonial figures from public places to this genocide memorial.

Recommendation 9 – The State of Victoria should legislate the mandatory teaching of Aboriginal Studies in K-12 education, as well as all university courses. This curricula should be designed and monitored by Aboriginal Victorians. The State should invest in teacher education in line with Recommendation 3.

Recommendation 10 – The State of Victoria should pay reparations for genocide and land theft in the form of a one off payment \$100,000 to every Aboriginal Victorian, and 5% of all taxes collected by the state every year to go into an Aboriginal Development Fund, to be managed by an independent Board of Aboriginal Victorians.

Recommendation 11 – All available crown land should be given to an Aboriginal Development Fund to own as freehold title in perpetuity for the benefit of Aboriginal Victorians.

Recommendation 12 – All land taxes of all land holders in Victoria should pay 5% of their taxes to the Aboriginal Development Fund.

Recommendation 13 – Senior Aboriginal Elders/traditional owners who provide public service to their communities and broader society should be resourced with an Executive Assistant, driver and car, office expenses and annual salary.

Recommendation 14 – The State of Victoria should invest in an independent media monitoring and oversight commission – specifically to investigate, prevent and fine inflammatory racist language and imputations in public discourse, and refer them to criminal/civil proceedings in courts where relevant.

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