

The Medical Journal of Australia • MJA

MEDIA RELEASE

CALL TO ADDRESS RACIAL VIOLENCE IN HEALTH CARE SYSTEM

EMBARGOED UNTIL 12:01am Monday 17 August 2020

IF Black lives matter then we need to be prepared to examine and address racial violence within the Australian health system, say the authors of a Perspective published online today by the *Medical Journal of Australia*.

Associate Professor Chelsea Bond, Principal Research Fellow in the School of Social Science at the University of Queensland, and colleagues wrote that “the statistical story of Indigenous health and death, despite how stark, fails to do justice to the violence of racialised health inequities that Aboriginal and Torres Strait Islander peoples continue to experience”.

“Tragically, despite the parlous state of Indigenous health, we have not been met here with the kind of urgency that the global Black Lives Matter movement has spurred elsewhere,” they wrote.

“The Australian health system’s Black Lives Matter moment is best characterised as indifferent; a ‘business as usual’ approach that we know from experience betokens failure.

“What is needed is an Australian health system that has a steadfast commitment to black lives: not as in need of saving, but as deserving of care; one that matches the staunchness of grieving Black families marching the streets of our capital cities in the midst of a pandemic.”

Bond and colleagues have suggested a health justice framework to replace the “failed Indigenous health policy” of Closing the Gap. Their model would include but not be limited to:

- a foregrounding of Indigenous sovereignty rendering visible the strength, capability and humanity of Aboriginal and Torres Strait Islanders peoples, services and communities in all processes of health policy formation and implementation, not as partners but as architects;
- state and federal government commitment to the recommendations of the coronial inquiries into the deaths of Aboriginal and Torres Strait Islander peoples who have died of preventable or avoidable conditions in the health system, and the establishment of an Indigenous taskforce to oversee implementation;
- an explicit financial commitment from the National Health and Medical Research Council and the South Australian Health and Medical Research Institute (via the Indigenous Medical Research Future Fund) and the Australian Research Council for research that attends to the nature and function of race in producing the conditions that allow racialised health inequalities to persist, from birth to death, including the embodied consequences of racism;
- the establishment of awareness-raising campaigns that make clear the various ways in which Aboriginal and Torres Strait Islander peoples may seek justice when experiencing discrimination within the health system, and commensurable resourcing of legal services to support Indigenous peoples to take action;
- introduction of publication guidelines for health and medical journals requiring research relating to racialised health disparities to foreground institutional racism in its analysis, rather than socio-economic disadvantage and other social and cultural factors;
- development of an interdisciplinary Indigenous health workforce agenda that centres the care of Indigenous people beyond capacity building to include attending to racial violence within workplaces across the Australian health system.

“We offer these strategies not as a solution, but as some small steps towards a radical reimagining of the Black body within the Australian health system, one which demonstrates a more genuine commitment to the cries of “Black Lives Matter” from Blackfullas in this place right now,” Bond and colleagues concluded.

A podcast with Associate Professor Chelsea Bond will be available from 12.01am AEST on Monday 17 August, at <https://www.mja.com.au/podcasts>.

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