

Submission:
Committee Secretary
Senate Select Committee on Men's Health
PO Box 6100
Parliament House ACT 2600
Australia

As Indigenous health providers and researchers we would like to respond to your Senate inquiry.

Firstly, we note that the four levels of interest to this inquiry (but, also, not limited to them) made no reference to Aboriginal and Torres Strait Islander men. We would like to draw the Senate Committee's attention to the serious and critical needs of our Indigenous men at this time. Over a wide range of physical and social health indicators, across remote, rural and urban communities, Aboriginal and Torres Strait Islander men suffer extremely poor health, more so than their female relations and much more so than other Australian men.

Secondly, we note the current consultation process that was initiated by the Minister for Health and Aging on the 25th November, 2008. It is on the development of a National Men's Health Policy. We are wondering how this consultation and your inquiry might work together and how they might attend to the urgent health needs of Indigenous men at this time.

Thirdly, we would like to draw the Committee's attention to the wide range of documentation that already exists to describe and make recommendation about the health needs of Indigenous men in this country. We note our own and recent contributions to this important health and justice issue at the end of this submission. We would also like to draw the Senate Select Committee's attention to *A National Framework for Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Males*. This framework was published in 2004 yet, five years later, has yet to be implemented.

In the desire of the Federal Government to 'Close the Gap' around the very poor health of Indigenous people in this country it would seem both logical, wise and imperative that more attention was to be given to the particular health needs of Aboriginal and Torres Strait Islander men. Indeed, given the "gap" in life expectancy is most extreme in this group, it is statistically impossible to close the health gap overall, without addressing Aboriginal and Torres Strait Islander male health, and making significant improvements. It is our experience, and that of many of our brothers, that there remain a number of barriers to the provision of culturally appropriate and sustainable health care for our men. We have seen the evidence, within Government policy and practice, of many examples of gender and racial bias. We know of many cases where Aboriginal and Torres Strait Islander men have experienced a lack of appropriate understanding and support with health care services and providers. We have seen a similar lack of understanding and support within Government, particularly in relation to the development and implementation of a sustainable health policy affecting Indigenous men.

In the last week of February 2009 in Alice Springs we attended the Second National Aboriginal and Torres Strait Islander Male Researcher meeting. 60 men attended that meeting, more than 90% being Indigenous. The key vision that emerged from that meeting was identified as: *To hold Aboriginal and Torres Strait Islander Men in health and research*. This vision arose out of a clear and united awareness that there are currently three major strengths and weaknesses in addressing men's health issues:

- a) current policies and programs to improve the health of Indigenous men remain grossly inadequate,
- b) however, there exists a large and increasing group of Aboriginal and Torres Strait Islander men who are committed to improving the health and wellbeing of their fellow men, families and communities.
- c) there also exists a growing number of Indigenous men who are developing a range of skills needed to research and evaluate the provision of health care that is most appropriate and critically needed for other Indigenous men.

We appeal to this Senate inquiry:

- a) do not simply make another inquiry that repeats what is already well known and documented: the poor status of our health,
- b) do explore the range of barriers to the provision of health care for our men, particularly in the lack of Government policy and funding,
- c) challenge and urge the development of a National Men's Health policy that includes recommendations from *A National Framework for Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Males*,
- d) urge Government departments to support further gatherings of Indigenous men in health and research (as per the second national one held last month), and
- e) set some benchmarks and timeframes for an implementation of such changes to improve the health of Indigenous men that work along with Close the Gap values and projected deadlines.

Signed:

Dr Mick Adams

Dr Alex Brown

Dr Mark Wenitong

Publications:

Adams, Michael. Sexual and reproductive health problems among Aboriginal and Torres Strait Islander males. Institute of Health and Biomedical Innovation. School of Public Health. Queensland University of Technology 2007

(2004), *A National Framework for Improving the Health and Wellbeing of Aboriginal and Torres Strait Islander Males*. The Office of Aboriginal and Torres Strait Islander Health, Canberra.

Brown, Alex (2004), *Building on the Strengths: A review of male health in the Anangu-Pitjantjatjara Lands*, Nganampa Health Council, Alice Springs.

Wenitong, Mark (2002), *Indigenous Male Health: A report for Indigenous males, their families and communities, and those committed to improving Indigenous male health*, (reprinted 2007), The Office of Aboriginal and Torres Strait Islander Health, Department of Health and Aging, Canberra.