



NACCHO

National Aboriginal Community
Controlled Health Organisation

Senate Community Affairs Committee

Universal access to reproductive healthcare

Parliament House Committee Room 2S1, Canberra

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National Aboriginal Community Controlled Health Organisation

NACCHO is the national peak body representing 144 Aboriginal Community Controlled Health Organisations (ACCHOs) across Australia.

NACCHO's advocacy is based on the National Agreement on Closing the Gap and four priority reforms, which should inform all actions to redress barriers and drive structural change to achieve priorities under the National Women's Health Strategy.

We know Aboriginal and Torres Strait Islander women and mothers are more likely to engage with reproductive and maternity care when Aboriginal and Torres Strait Islander peoples are involved in the design and delivery of services, and when care is woman-centred, culturally safe and involves continuity of care. Investment in community-controlled services, models and approaches to service delivery that are community led, culturally safe and take into account diversity in language and ways of being are critical. The ACCHO sector is best placed to provide culturally safe and appropriate care throughout the life-course. The recent launch of Strong Born is an excellent example of community led and controlled messaging.

We know Aboriginal and Torres Strait Islander families have unique needs when it comes to supporting universal access to sexual and reproductive health information. Reproductive healthcare for Aboriginal and Torres Strait Islander communities needs to be looked at holistically, and consider the disparate contexts in which communities exist. Effective solutions must consider the environmental, cultural, commercial and social determinants of health – including housing, clean air, sanitation, food security, access to care, social and emotional wellbeing – as well as intersectionalities with disability and the needs of members of the LGBTQIA+ Community. The specific needs of Aboriginal and Torres Strait Islander women who are pregnant must also be addressed. Affordable access to iodine, and the importance of screening for ECHO screening for Rheumatic Heart Disease, and the value POCT can add to redressing access barriers, are specific examples of the need for localised and community-led approaches.

NACCHO would emphasise Aboriginal and Torres Strait Islander Health Workers and Practitioners are an essential part of a culturally safe workforce. There are opportunities to up-skill, re-train and utilise the current Aboriginal community-controlled workforce, as well as draw from local communities to build a workforce that is sustainable and includes both cultural and clinical experts as well as non-clinical staff. Culturally safe workforce development should include an understanding of Men's and Women's Business, and the importance of offering clients the chance to consult with a member of staff of their preferred gender (which should not be presumed).

Aboriginal health in Aboriginal hands

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