



## Health Impacts

### The impacts of racism on health and wellbeing

There are a number of First Nations organisations working toward improving the health impacts of racism for adults, children, and young people. In the ongoing process of colonisation, First Nations Peoples have been systemically disadvantaged in areas considered fundamental to a person's health - including housing, education, employment, and healthcare. These service providers often carry unconscious biases and make assumptions about First Nations Peoples, which creates mistrust and prevents equitable services[i]

The dominance of Western understandings of health has hindered First Nations Peoples' ability to practise their own cultures, laws and languages. Culture and language are profoundly important to the health and wellbeing of Indigenous peoples and when they are lacking, socio-economic and health outcomes are likely to suffer[ii]

#### Cultural determinants of health and wellbeing

When considering the health impacts of racism, it is important to recognise that wellbeing means more than just the absence of ill-health for First Nations Peoples. Wellbeing includes connection to culture, connection to Country, spirituality, and a holistic approach to the life cycle of birth and death[iii]. Culture can help to ease the negative impacts of racism. But racism can also be a barrier to full participation with culture and community.

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**Studies have shown there is a strong link between racism and poor mental and physical health [iv].**

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### Racism creates a pathway to ill health through[v]...

- Chronic stress
- Risky health related behaviour i.e. increased drug and alcohol consumption
- Avoidance of health-care services
- Culturally unsafe service-provider relationships i.e. with a nurse/ police officer/ prison guard
- Loss of connection to family and culture
- Intergenerational trauma

This can cause physical and mental health impacts. Mental impacts have been found to include **depression**, anxiety and **low self-esteem**. The physical impacts can be high rates of **preterm birth** and low birth weights [vi], obesity, **high blood pressure** [vii] and cardiovascular disease.



### Impact of racism on children and young people

The developmental years lay the foundations for an individual's future health, wellbeing and educational outcomes. When children and young people are experiencing racism during these years, the implications can be long lasting and detrimental to their future.

Children are at risk of depression, anxiety, suicide,[viii] behavioural issues, sleep disorders and obesity. Chronic inflammation and blood pressure irregularities in adolescents have also been observed[ix]

#### **For First Nations children, racism:**

- doubled the risk of mental health issues or asthma (5-10 years old)[x]
- was associated with emotional and behavioural difficulties (6-12 years old)[xi]
- has a negative impact on mental health, sleep, behaviour at school, and obesity (7-12 years old)[xii].



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### Systemic Reform

To address health inequalities, racism, in all its forms, needs to be explicitly identified as an underlying cause of disadvantage. Far too often First Nations communities are measured against non-Indigenous peoples through a deficit discourse, but there is little attention paid to the systemic problems that create this disadvantage in the first place.

***Put differently, society and policy has attempted to treat the symptom of disadvantage rather than the root causes [xiii][xiv].***

**Moving forward** it is crucial that governments and other institutions address racism as a key factor to improving health. **At an individual level** this means educating yourself on racism and the histories of First Nations Peoples. It also means holding people accountable by calling out racism when you see it. **At a systemic level**, this means supporting self-determination and community-controlled initiatives.

### Community-led initiatives

Aboriginal controlled community health services (ACCHS) have allowed many communities across Australia to gain control over their health care and thrive independently. Community-led and culturally safe programs are developed with over 60,000 years' worth of Indigenous knowledges and skills and are paving the way for a better future for all Australians, because at the heart of reconciliation is self-determination.

### Some notable community initiatives:

**The RHD endgame** strategy is a collaborative approach of leading infectious disease specialists and Aboriginal and Torres Strait Islander leaders that proposes to end RHD by 2031. At the centre of this approach is Aboriginal leadership and the communities at risk. Communities will develop their own culturally appropriate programs to increase awareness about the causes of RHD and an Aboriginal and Torres Strait Islander national implementation unit will coordinate the elimination efforts across Australia.



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**Winnunga Nimmityjah Aboriginal Health and Community Service** is an Aboriginal community-controlled health service that has been providing free and safe health care to the community since 1988.

**The Centre of Best Practice in Aboriginal & Torres Strait Islander Suicide Prevention (CBPATSISP)** was established to share and develop evidence around the most effective suicide prevention in First Nations Communities. The organisation provides a number of resources and practical solutions that focus on culture, community and addressing intergenerational trauma.

**The Aboriginal Medical Service (AMS)** was established in 1971 and was the first ACCHS in Australia. Leading the way for ACCHS, it started as a small community provider in Redfern and has now expanded into a diverse healthcare facility. The AMS offers free medical, dental, psychological, antenatal and drug and alcohol services to First Nations People across the whole of Sydney.

**Mayi Kuwayu** - The National Study of Aboriginal and Torres Strait Islander Wellbeing. A longitudinal study of the impacts of racism on and discrimination on wellbeing. Over 10,000 Aboriginal and Torres Strait Islander adults participated in this study. Hear more about the study.

***These are just a few examples of hundreds of community-controlled initiatives that highlight the strength and resilience of First Nations communities to improve outcomes when they are determining their own futures.***

### Next Steps

- 1** Read more about health impacts at our [resource page](#).
- 2** Become familiar with basic terminology

- [i] "What are the impacts of racism on Aboriginal health?", NACCHO Aboriginal Health News Alert, <https://nacchocommunique.com/2014/02/28/naccho-aboriginal-health-and-racism-what-are-the-impacts-of-racism-on-aboriginal-health/>.
- [ii] Sandy O'Sullivan, "Practice futures for Indigenous agency: Our gaps, our Leaps", in *Challenging Future Practice possibilities*, eds. J Higgins, S Cork & D Horsfall, BrillSense, 2019, 91-100.
- [iii] "Culture is key: Towards cultural determinants-driven health policy", Lowitja Institute, published April 2021, [https://www.lowitja.org.au/content/Image/Lowitja\\_CultDetReport\\_210421\\_D14\\_WEB.pdf](https://www.lowitja.org.au/content/Image/Lowitja_CultDetReport_210421_D14_WEB.pdf).
- [iv] Yin Paradies et al., "Racism as a determinant of health: A systematic review and meta-analysis" *PLoS ONE* 10, no.9, (2015): e0138511, doi:10.1371/journal.pone.0138511
- [v] Niyi Awofeso, "Racism: a major impediment to optimal Indigenous health and health care in Australia", *Australian Indigenous Health Bulletin* 11, no.3 (July-September 2011): 4.
- [vi] JL Alhusen, KM Bower, E Epstein & P Sharps, "Racial discrimination and adverse birth outcomes: An integrative review", *Journal of midwifery & women's health* 61, no.6, (2016):707-720.
- [vii] Tene T Lewis, Courtney D Cogburn & David R Williams, "Self reported experiences of discrimination and health: Scientific advances, ongoing controversy, and emerging issues", *Annual Review of Clinical Psychology* 11, no.1, (2015): 407-440
- [viii] DM Macedo et al., "Effects of racism on the socio-emotional wellbeing of Aboriginal Australian children", *International journal for equity in health* 18, no.1, (2019):1-10
- [ix] "Racism, racial discrimination and child and youth health: a rapid evidence synthesis"
- [x] CCJ Shepherd et al., "The impact of racial discrimination on the health of Australian Indigenous children aged 5-10 years: analysis of national longitudinal data", *International journal for equity in health* 16, no.1, (2017): 116-116.
- [xi] DM Macedo et al., "Effects of racism on the socio-emotional wellbeing of Aboriginal Australian children"
- [xii] L Cave, MN Cooper, SR Zubrick, & CCJ Shepherd, "Caregiver-perceived racial discrimination is associated with diverse mental health outcomes in Aboriginal and Torres Strait Islander children aged 7-12 years", *International journal for equity in health* 18, no. 1, (2019):142.
- [xiii] Sandy O'Sullivan, "Racism: a major impediment to optimal Indigenous health and health care in Australia".
- [xiv] "Racism, racial discrimination and child and youth health: a rapid evidence synthesis", VicHealth, 2021, [https://www.vichealth.vic.gov.au/-/media/Final\\_Racism-full-technical-report.pdf?la=en&hash=ECA65B69DF05CDFC51FF0A2099AE308C2C0EDF1D](https://www.vichealth.vic.gov.au/-/media/Final_Racism-full-technical-report.pdf?la=en&hash=ECA65B69DF05CDFC51FF0A2099AE308C2C0EDF1D)