

Reaffirming our commitment to the three pillars of the Uluru Statement from the Heart – Voice, Treaty, Truth

Position statement – June 2025

1. Position

“We need all governments to be promoting a reframed relationship that is grounded in Truth, Justice, and Healing if we are to progress improved outcomes for First Nations Peoples. This is even more important since the Voice to Parliament Referendum outcome, which has seen marked rise in the experience of racism by First Nations peoples.”

Katie Kiss - Aboriginal and Torres Strait Islander Social Justice Commissioner

The Royal Australian College of General Practitioners (RACGP) reaffirms our commitment to [The Uluru Statement from the Heart](#)¹.

As a founding member of the Close the Gap campaign and a public supporter of the Uluru Statement from the Heart since 2018 we recognise that truth-telling and sovereignty* are crucial in overcoming health inequalities and are pathways to implement principles of self-determination and community control in practice.

The RACGP:

- acknowledges the continued leadership and work of Aboriginal and Torres Strait Islander peoples and communities towards self-determination, including truth-telling as well as treaty negotiations.
- acknowledges the strength and resilience of Aboriginal and Torres Strait Islander peoples in the context of the 2023 Voice referendum, including the media narratives promoting misinformation, and recognises that the majority of Aboriginal and Torres Strait Islander peoples voted Yes in support of a Voice to Parliament.
- encourages the Albanese Government to deliver treaty and truth-telling as the remaining reforms of the Uluru Statement from the Heart.
- understands our responsibility to privilege and support Aboriginal and Torres Strait Islander organisations to pursue major reforms that reflect the aspirations of their communities across Australia.
- commits to continue collaborating with the National Aboriginal Community Controlled Health Organisation (NACCHO), NACCHO Affiliates, the Australian Indigenous Doctor's Association (AIDA), the Indigenous General Practice Trainee Network (IGPTN) the Joint Colleges Training Services (JCTS) and other Aboriginal and Torres Strait Islander peak bodies, to collectively advocate on shared priorities.
- acknowledges the cultural and practical knowledge within the Aboriginal and Torres Strait Islander health sector as essential to improving the health and wellbeing of Aboriginal and Torres Strait Islander peoples to achieve health equity.
- considers the perspectives of Aboriginal and Torres Strait Islander clinicians and patients as crucial to achieving health system reform, and elevates the voices of Aboriginal and Torres Strait Islander members

at the RACGP through the Aboriginal and Torres Strait Islander Health Faculty.

- calls on Primary Health Networks (PHNs), as key funders of Aboriginal and Torres Strait Islander Health initiatives, to foster inclusivity and undertake meaningful action to ensure Aboriginal and Torres Strait Islander representation and leadership in their organisations.
- urges PHNs to respond to community-identified needs and gaps in service delivery, to enhance health service delivery for Aboriginal and Torres Strait Islander peoples in Aboriginal Community Controlled Health Organisations (ACCHOs), general practice and other health settings.
- remains a committed and active member of the Close the Gap Steering Committee, through promoting our shared messages and commitment to achieve health equality by 2030, and by encouraging our members and staff to engage in continuous learning.
- commits to engaging with our members to ensure they are well informed of the three pillars of the Uluru Statement from the Heart and how they relate to their work and to improving health outcomes for Aboriginal and Torres Strait Islander peoples.
- acknowledges an increase in experiences of racism reported in the 31 July 2024 Productivity Commission report and commits to advocating for a healthcare system free from racism as outlined in our 2024-25 [National Advocacy Plan](#), Reconciliation Action Plan and [position statement on racism in the healthcare system](#).
- accepts that colonisation is not a single past event but a process that continues to this day, including in experiences of racism and exclusion from healthcare services, and from social and economic opportunities.^{2,3}
- has a zero-tolerance approach to racism in general practice and commitments to support a healthcare system that is free from racism.
- has an [Aboriginal and Torres Strait Islander Cultural and Health Training Framework](#) that puts Aboriginal and Torres Strait Islander sovereignty and self-determination at the forefront of approaches to general practice training.

2. Discussion

2.1 RACGP's ongoing commitment to the Uluru Statement from the Heart

In 2018, the RACGP endorsed support for the implementation of the Uluru Statement from the Heart, the result of a 2017 constitutional convention held at Uluru, which brought together over 250 leaders from Aboriginal and Torres Strait Islander communities. In 2023 the RACGP reaffirmed our support for a Voice to Parliament ahead of the 2023 referendum.⁴

The RACGP is a member of the Close the Gap Alliance. We continue to advocate for self-determination and for meaningful representation of Aboriginal and Torres Strait Islander peoples solution and decision-making processes at all levels of government.

[The principles and campaigns that have led to the Uluru Statement from the Heart will continue to drive for change and solutions long after the referendum.](#)

RACGP submissions

- [An Aboriginal and Torres Strait Islander Voice to Parliament - Position Statement](#)
- [‘Voice to Parliament’ consultation](#)
- [Submission to the Joint Select Committee on Constitutional Recognition relating to Aboriginal and Torres Strait Islander peoples 2018](#)
- [Yoorrook Justice Commission submission.](#)

2.2 The importance of Aboriginal and Torres Strait Islander justice and self determination

Health outcomes are far greater when Aboriginal and Torres Strait Islander peoples take control over their communities' health and wellbeing.^{5,6}

The *United Nations Declaration on the Rights of Indigenous Peoples*⁷ highlights the right of Indigenous peoples to participate in decision-making in matters affecting their rights, and to be consulted prior to any implementation of strategies and initiatives. This international standard is understood and accepted by most Australians in the community, who agree it is important that Aboriginal and Torres Strait Islander peoples have a say in matters affecting them.⁸ Aboriginal and Torres Strait Islander peoples have a deep and long-standing appreciation of the issues and solutions related to their own health and wellbeing. The strength of community governance and leadership, essential to longevity and community buy-in, is demonstrated in ACCHOs.

The RACGP has long-term relationships with NACCHO, embodied in our *Memorandum of Understanding* and with the Australian Indigenous Doctors' Association and the Indigenous General Practice Trainee Network. The RACGP is also committed to supporting the growth and leadership of Aboriginal and Torres Strait Islander GPs. The governing Council of RACGP Aboriginal and Torres Strait Islander Health has majority Aboriginal and/or Torres Strait Islander membership and is uniquely positioned to influence through a permanent identified position for the Council Chair on the RACGP Board.

2.3 The role of general practitioners

As outlined by AIDA, *a culturally safe health practice requires ongoing critical reflection of health practitioners' knowledge, skills, attitudes and practising behaviours, and an awareness of existing power differentials*.⁹ The RACGP is committed to developing and supporting a culturally safe and reflective general practitioner workforce.

To support this commitment the RACGP has an *Aboriginal and Torres Strait Islander Cultural and Health Training Framework* which is a commitment to comprehensive and system-wide action to ensure the rights and sovereignty of Aboriginal and Torres Strait Islander peoples are visible and active within our GP training system.

The primary healthcare sector is well positioned to support good health for individuals, families and communities through the provision of high-quality healthcare, including through health promotion and disease prevention activities and reducing the impact of structural disadvantage.⁶

Guided by Aboriginal and Torres Strait Islander leaders, the RACGP worked in partnership with NACCHO to develop the *National guide to preventive healthcare for Aboriginal and Torres Strait Islander people*. The guide is a key source of evidence for culturally and clinically safe healthcare, providing guidance for GPs and primary healthcare teams on health issues that are preventable, are a priority for Aboriginal and Torres Strait Islander communities and are actionable in primary healthcare settings.

2.4 The role of governments

Aboriginal and Torres Strait Islander peoples have consistently communicated their expectations and priorities based on their first-hand experience and knowledge. The *Partnership Agreement on Closing the Gap* commits governments to *four priority reforms*. With governments and peak organisations working together, a strong mandate for effective and lasting change can be achieved. The ongoing collaboration to deliver the *Aboriginal and Torres Strait Islander Health Plan 2021-2031* is another opportunity to expand this commitment.

The *Productivity Commission's first review of progress on the National Agreement on Closing the Gap* noted that the Gap stems from a disregard of Aboriginal and Torres Strait Islander knowledge and solutions, and that business as usual is not going to support governments to deliver on their commitments. The commission have noted that power sharing requires more than consultation and partnerships. Self-determination is recommended as the basis of shared decision making for Aboriginal and Torres Strait Islander peoples and organisations, recognising that (as demonstrated through the actions and outcomes of the COVID-19 pandemic) Aboriginal and Torres Strait Islander peoples know what their communities need and a

relinquishing of control by governments is required for progress to be made under Aboriginal and Torres Strait Islander leadership.

Collectively, there must be a stronger commitment to work alongside communities and their representatives and be guided by lived expertise on health and wellbeing matters.

All governments have a critical role to play as primary funders and in maintaining a supportive policy environment. It is the particular responsibility of the Australian Government to ensure this commitment is sustained, with effective, collaborative leadership and coordination with state and territory governments.

The RACGP acknowledges the significant work being undertaken by the First Peoples's Assembly of Victoria with the Victorian Government.

Historically, government engagement with Aboriginal and Torres Strait Islander peoples has been inconsistent and often disrespectful. All too often, communities have been subject to policy decisions and changes, without consultation, participation or reliance on evidence of what is effective.¹⁰

Remaining committed to the Uluru Statement from the Heart increases real opportunities for Government to support self-determination, implement priority reform areas and achieve targets under the National Closing the Gap agreement.

'When we talk about progressing Voice, Treaty, Truth we build a broader understanding of how history, activism, leadership and compassion are inextricably linked and necessary to building socio-economic and political equity'.

Close the Gap Co-Chair Karl Briscoe

* Sovereignty is one of the guiding principles in the [RACGP Aboriginal and Torres Strait Islander cultural and health training framework](#). It is defined as follows:

"Sovereignty is exercising autonomy, both at an individual level and as a 'People'. It acknowledges Aboriginal and Torres Strait Islander rights, ownership and authority in Australia which was never ceded in terms of land, law and its People. This recognises that Aboriginal and Torres Strait Islander governance and participation is inherent to the effectiveness and success of programs.

By foregrounding the principle of sovereignty, RACGP are choosing to pay particular attention to the historical and political factors that have shaped the lives and health of Aboriginal and Torres Strait Islander peoples.

This principle is necessary for the RACGP Aboriginal and Torres Strait Islander Cultural and Health Training Framework to embody the kind of systemic and structural change required to improve health outcomes, also aligning with the Uluru Statement from the Heart."

3. References

1. <https://ulurustatement.org/> [August 2024]
2. Department of Health, Racism in Victoria and what it means for the health of Victorians, April 2022
3. <https://www.vaccho.org.au/wp-content/uploads/2023/06/Aboriginal-Health-and-Wellbeing-Agreement-2022-2032-FINAL-22-Mar-23.pdf>
4. <https://www.racgp.org.au/FSDEDEV/media/documents/Faculties/ATSI/An-Aboriginal-and-Torres-Strait-Islander-Voice-to-Parliament.pdf>
5. Harfield SG, Davy C, McArthur A, et al. Characteristics of indigenous primary health care service delivery models: a systematic scoping review. *Global Health* 25 January 2018; 14(1): 12.
6. Aboriginal and Torres Strait Islander Social Justice Commissioner (Calma, T.) Social Justice Report 2012. Sydney: Australian Human Rights Commission, 2013. (<https://www.humanrights.gov.au/our-work/aboriginal-and-torres-strait-islander-social-justice/publications/social-justice-report-11> [August 2024]).
7. United Nations Permanent Forum on Indigenous Issues. United Nations Declaration on the Rights of Indigenous Peoples. (A/RES/61/295). Adopted 13 September 2007. (https://www.un.org/development/desa/indigenouseoples/wp-content/uploads/sites/19/2018/11/UNDRIP_E_web.pdf [August 2024]).
8. Reconciliation Australia. 2018 Australian Reconciliation Barometer. Reconciliation Australia: Sydney, 2018. (https://www.reconciliation.org.au/wp-content/uploads/2019/02/final_full_arb-full-report-2018.pdf [4 May 2020]).
9. <https://aida.org.au/cultural-safety-program/>
10. Thorpe A, Arabena K, Sullivan P, et al. Engaging First Peoples: A Review of Government Engagement Methods for Developing Health Policy. Melbourne, The Lowitja Institute, 2016. (<https://www.lowitja.org.au/wp-content/uploads/2023/05/Engaging-First-Peoples.pdf> [July 2024]).