

## Why Australia needs a national college of Aboriginal and Torres Strait Islander health

John Daniels and Sophie Couzos

**TO THE EDITOR:** The recent article by Parker<sup>1</sup> presents an interesting case for the establishment of a national academic college of Aboriginal and Torres Strait Islander health. The notion has been considered within Aboriginal health policy forums in the past, and the federal parliamentary Inquiry into Indigenous Health<sup>2</sup> noted that an exploration of the merits of creating a new medical specialty for health care providers to Aboriginal and Torres Strait Islander peoples was arguably favourable. On the other hand, the concept has not gained significant support from some existing medical colleges.

Broadly, the arguments supporting a college of Aboriginal and Torres Strait Islander health are that the subject is a national health priority,<sup>3</sup> the subject has its own specialised literature, practice within an Aboriginal cultural framework is a specialised activity,<sup>4</sup> technical aspects of health care delivery often require specialist knowledge,<sup>5</sup> and providers of health care for Aboriginal and Torres Strait Islander peoples often act as consultants for other practitioners and policy development.<sup>6</sup> The con-

trary view is that Aboriginal and Torres Strait Islander health is a health science sub-discipline within general practice, and that existing structures satisfy training needs.

In terms of academic education in relation to the health of Indigenous Australians, Aboriginal community-controlled health organisations have had substantial experience and success over the past 25 years — primarily in the provision of accredited Aboriginal and Torres Strait Islander health worker training, but also in undergraduate and postgraduate training in medicine, nursing and allied health. Aboriginal representative bodies such as the National Aboriginal Community Controlled Health Organisation (NACCHO) and its Affiliates are already the arbiters of standards, benchmarks, codes of ethics, policies and protocols that define health care delivery to Indigenous Australians. With appropriate additional resourcing, it would be feasible to build on such existing expertise and infrastructure to develop a national Aboriginal and Torres Strait Islander health college.

Ultimately, consistent with international principles of self-determination, Aboriginal community-controlled health organisations, NACCHO and Torres Strait Islander authorities should determine whether or not to progress the processes required for establish-

ing an Aboriginal and Torres Strait Islander health college. They should also, as a corollary, determine the structure, function and membership of such a college, if it were to be developed.

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1 Parker RM. Why Australia needs a national college of Aboriginal and Torres Strait Islander health. *Med J Aust* 2009; 190: 34-36.

2 House of Representatives Standing Committee on Family and Community Affairs. Health is life: report on the Inquiry into Indigenous Health. Canberra: Commonwealth of Australia, 2000.

3 Macklin J. Closing the gap between Indigenous and non-Indigenous Australians. Canberra: Commonwealth of Australia, 2008.

4 Cultural Safety Training [website]. <http://www.culturalsafetytraining.com.au/> (accessed Jan 2009).

5 Couzos S, Murray R. Aboriginal primary health care: an evidence-based approach. 3rd ed. Melbourne: Oxford University Press, 2008.

6 National Public Health Partnership. Making the connections: guidelines for effective approaches to Aboriginal and Torres Strait Islander public health. Melbourne: NPHP, 2006. □

