

Australia's universal healthcare system aims to provide equitable access to healthcare services for all Australians, but many of our First Nations peoples are still being left behind.

Released today, the latest issue of the [Australian Health Review](#), the Australian Healthcare and Hospital Association's peer-reviewed journal, examines healthcare policy research focusing on improving the equity gap experienced by First Nations Australians when it comes to healthcare. It also discusses the work still to be done in the areas of institutionalised racism, access to services and cultural safety.

'A policy reflection in this issue of the Australia Health Review discusses how even though Australia's Aboriginal and Torres Strait Islander Peoples have sustained some of the oldest living cultures on earth, health policies still do not adequately meet their needs, and health targets are not on track,' says Australian Health Review Editor-in-Chief Dr Sonj Hall.

'Substantial reforms and investments are urgently needed in this space, and with the Voice to Parliament to be decided in 2023, now is the time to act.'

'The February issue also features research on how the successful implementation of cultural safety into models of care can have positive impacts not only for our First Nations Australians but for the wider, and particularly Culturally and Linguistically Diverse (CALD) community.

A case study of a South Australian Child and Family Assessment and Referral Networks model, showed progress towards providing a more culturally safe referral service for at-risk mothers and infants from Aboriginal, and CALD backgrounds. This was achieved partly through implementing open channels of communication with family and community, including yarning, truth-telling and 'circle work'.

'This is a central theme touched on in multiple articles of this issue, as in order to progress research focused on the experiences of First Nations peoples, strengths-based, community-wide approaches to encourage ownership and engagement, and that build capacity of community members to implement programs should be explored.'

'It is also key to acknowledge the barriers faced by Aboriginal and Torres Strait Islander patients in receiving care, and more research and action on how this could be addressed through specific measures to create a more inclusive, culturally and consumer-focused models of care is needed.

An important topic also covered in the February issue of the Australian Health Review, looks at the recent changes in legislation for voluntary assisted dying (VAD), allowing it in all states, with the territories likely soon to follow.

The online version of this [media release](#) can be found on the AHHA website.

The Australian Healthcare and Hospitals Association (AHHA) is the independent peak membership body and advocate for the Australian healthcare system and a national voice for universally accessible, high-quality healthcare in Australia.

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‘There has been a shift in the national conversation around voluntary assisted dying, moving it from should be legal, to how it should be implemented, and where do we go from here?’

‘A perspective piece examines the Commonwealth Criminal Code restricting the use of telehealth when discussing voluntary assisted dying (VAD) in Victoria, and if this should be reformed to allow for more equitable access to VAD services, particularly for regional and remote patients.

Articles relating to the ongoing COVID-19 pandemic are also featured in this issue, with research relating to increased surge capacity in an elective hospital during the early days of the pandemic and clinician perspectives on the use of telehealth during the rise of COVID-19 cases in Australia.

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