NATIONAL Aboriginal and Torres Strait Islander Women's Alliance Position Paper: Aboriginal and Torres Strait Islander Mental Health

November 2025

1. Introduction

Aboriginal and Torres Strait Islander peoples experience unique and disproportionate challenges in mental health and social and emotional wellbeing (SEWB). These challenges are directly connected to the ongoing impacts of colonisation, intergenerational trauma, systemic racism, socio-economic disadvantage, and disconnection from Country, culture, and community. Despite this, Aboriginal and Torres Strait Islander peoples demonstrate resilience through cultural strength, family systems, and community-led healing.

This paper sets out key issues, outlines existing responses, and makes recommendations for strengthening Aboriginal and Torres Strait Islander mental health through community-led, place-based, and culturally safe approaches.

2. Context and Current Situation

2.1 Mental Health Inequities

- Aboriginal and Torres Strait Islander people are twice as likely to experience high or very high levels of psychological distress compared to non-Indigenous Australians.[1]
- Rates of suicide are more than double those of the non-Indigenous population, with suicide now the leading cause of death among young Aboriginal and Torres Strait Islander people.[2]
- Mental health conditions are often intertwined with social determinants such as housing insecurity, unemployment, poverty, and exposure to violence.

2.2 Social and Emotional Wellbeing (SEWB)

The SEWB framework recognises that health is not only the absence of illness but the balance of mental, physical, spiritual, and cultural wellbeing. For Aboriginal and Torres Strait Islander peoples, SEWB is shaped by:

- Connection to Country, culture, spirituality, and ancestry.
- The strength of family and kinship systems.
- Self-determination and community governance.

2.3 Closing the Gap Priority on Mental Health

The National Agreement on Closing the Gap (2020) identifies social and emotional wellbeing as a cross-cutting priority area. Two key targets directly address mental health:

- Target 14: A significant and sustained reduction in suicide of Aboriginal and Torres Strait Islander peoples.[7]
- Increased access to culturally safe services: a national priority is increasing the proportion of Aboriginal and Torres Strait Islander people accessing mental health services that are culturally safe, community-led, and locally available.[8]

3. Existing Services and Programs

3.1 Community-Led Services

- Aboriginal Community Controlled Health Organisations (ACCHOs) provide primary health care and SEWB services designed and governed by local communities.[3]
- Programs like Culture Care Connect (suicide prevention and aftercare) demonstrate the effectiveness of community-based, culturally led responses.[4]
- Healing initiatives such as Akeyulerre Healing Centre (NT), Yorgum Healing Services (WA), and VAHS SEWB programs (VIC) deliver culturally grounded mental health support.[5]

3.2 National Leadership and Policy

- Gayaa Dhuwi (Proud Spirit) Australia provides national leadership on Aboriginal and Torres Strait Islander mental health, embedding cultural determinants in policy and practice.[6]
- The Closing the Gap framework embeds community control and shared decision-making, aligning mental health targets with social determinants and systemic reform.[7]

4. Gaps and Challenges

- Intersectional barriers: Women with disabilities, rural and remote women, and gender-diverse women face heightened barriers to accessing culturally safe care. These groups often experience multiple layers of disadvantage, including discrimination, isolation, and limited service availability.
- Underfunding and short-term contracts undermine the sustainability of Aboriginal-led programs.
- Workforce shortages exist in SEWB and mental health, especially in remote and regional communities.
- Mainstream services remain culturally unsafe, with a limited understanding of SEWB frameworks.

- System fragmentation leads to poor integration between health, housing, education, and justice sectors.

5. Recommendations and Solutions

1. Long-term investment in Aboriginal Community Controlled Health Services (ACCHOs).
- Solution: Establish 10-year funding agreements for SEWB and mental health programs delivered by ACCHOs. This provides stability, supports workforce retention, and ensures continuity of care.

2. Expand SEWB teams across all ACCHOs.
- Solution: Fund dedicated SEWB teams in every ACCHO, including psychologists, counsellors, cultural advisors, social workers, and peer workers. Integrate cultural healing practices such as yarning circles and on-Country programs as part of service delivery.

3. Strengthen suicide prevention through community-designed initiatives (Closing the Gap Target 14).
- Solution: Scale up programs like Culture Care Connect nationally, ensuring all regions have access to culturally led suicide prevention and postvention services. Support peer-led crisis response models in remote and regional communities.

4. Grow the Aboriginal and Torres Strait Islander mental health workforce.
- Solution: Create scholarships, mentoring programs, and career pathways for Aboriginal and Torres Strait Islander people to enter psychology, counselling, and psychiatry. Recognise and fund cultural healers and Elders as essential parts of the mental health workforce.

5. Ensure culturally safe mainstream services (a national mental health access priority).
- Solution: Introduce mandatory cultural safety standards across all mainstream mental health services, with accreditation and annual monitoring. Require co-design with local Aboriginal and Torres Strait Islander organisations to ensure services are genuinely safe.

6. Integrate social determinants of health with mental health strategies.
- Solution: Develop place-based, cross-sector partnerships that link housing, justice, education, and employment programs with mental health care. For example, housing-first models with embedded SEWB workers to address homelessness and mental health together.

7. Embed self-determination in all mental health reform (Priority Reforms of Closing the Gap).
- Solution: Require that Aboriginal and Torres Strait Islander people have decision-making power

in policy, program design, and evaluation. Fund Aboriginal-led governance structures at local, regional, and national levels to oversee implementation and accountability.

8. Ensure that SEWB and mental health strategies are inclusive of intersectional needs. This includes:
- Dedicated outreach and telehealth services for rural and remote women.
- Accessible and culturally safe care for women with disabilities, addressing both physical and systemic barriers.
- Safe, affirming, and community-led supports for gender-diverse women, recognising heightened risks of stigma and mental distress.

6. Conclusion

Improving Aboriginal and Torres Strait Islander mental health requires moving beyond mainstream clinical models towards community-led, place-based, and culturally grounded approaches. Embedding the Closing the Gap mental health targets within long-term investment, community governance, and system integration is essential. By doing so, governments and services can support healing, resilience, and wellbeing for Aboriginal and Torres Strait Islander people across the nation.

Footnotes

1. Australian Institute of Health and Welfare, Aboriginal and Torres Strait Islander Health Performance Framework, measure 1.18 Social and emotional wellbeing, based on ABS National Aboriginal and Torres Strait Islander Health Survey data.
2. Australian Institute of Health and Welfare (AIHW) 2024. Australia's Health 2024: Aboriginal and Torres Strait Islander Health Snapshot.
3. National Aboriginal Community Controlled Health Organisation (NACCHO). About ACCHOs and Social and Emotional Wellbeing. naccho.org.au.
4. NACCHO 2024. Culture Care Connect – Suicide Prevention and Aftercare.
5. Akeyulerre Healing Centre, akeyulerre.org.au; Yorgum Healing Services Aboriginal Corporation, yorgum.org.au; Victorian Aboriginal Health Service, vahs.org.au.
6. Gayaa Dhuwi (Proud Spirit) Australia 2023. Transforming Indigenous Mental Health and Wellbeing.
7. Coalition of Peaks 2021. National Agreement on Closing the Gap.
8. Australian Institute of Health and Welfare, Aboriginal and Torres Strait Islander Health Performance Framework, measure 3.10 Access to mental health services.

PO Box 70 Mortlake VIC 3272 T 0481458339 E ceo@natsiwa.org.au www.natsiwa.org.au ABN 27 732 591 422