



FACT SHEET: Social Justice and Health

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Purpose of Resource

The purpose of this resource is to provide additional information and resource to promote the principles of social justice principles in the planning and delivery of health services and programs.

Units of Competency

This resource supports learning and completion of assessments for the following units of competency:

- HLTPOP502C Work with the community to identify health needs
- HLTPOP503C Plan a population health project

What is Social Justice?

Our society is made up of many different communities. Social justice means the rights of all people in our community are considered in a fair and equitable manner. Social justice specifically targets the marginalised and disadvantaged groups in our society such as Aboriginal and Torres Strait Islanders, children, people from culturally and linguistically diverse backgrounds, people with disabilities, older people, women and young people. Some health examples of social justice are as follows:

- Information designed to educate the public about healthy lifestyles should be provided in languages that the community can understand.
- Health policies should ensure that all people have equal access to health care services.
- People living in isolated communities should have the same access to clean water and sanitation as a person living in an urban area.
- People of low socioeconomic backgrounds should receive the same quality of health care as a person of higher socioeconomic background.

A focus on social justice aims to reduce the health inequalities in Australia.

Principles of Social Justice

The principles of social justice are an essential part of effective health promotion. There are four interrelated principles of social justice; equity, access, participation and rights.

Equity

- To ensure fair distribution of available resources across society.

Access

- Ensure all people have access to goods and services regardless of age, gender, ethnicity etc.

Participation

- Enable people to participate in decisions which affect their lives.

Rights

- To protect individual liberties to information about circumstances and decisions affecting them and to appeal decisions to people feel are unfair.

Why is Social Justice Important in the Planning and Delivery of Health Services and Programs?

The delivery of effective and comprehensive health care and health interventions encompasses social justice principles. Social Justice involves the establishment of supportive environments and the promotion of diversity. Social justice principles work together to manage health inequities based on morbidity and mortality rates and cultural, social, economic and political factors.

For example, social justice principles are able to contribute to addressing health inequities for those living in rural and isolated areas. This group of people have the same rights and equal opportunity to achieve optimal health. For this reason, social justice principles aim to provide this group with fair allocation of resources and entitlements without discrimination. There are many health services and resource being developed in isolated areas in order to provide access to these people, providing them with the ability to use a range of health services, and allowing them to participate in the planning and decision making about local and community health.

Closing the Gap Program

Closing the Gap is a commitment by all Australian governments to improve the lives of Indigenous Australians, and in particular provide a better future for Indigenous children. It provides a great example of a Social Justice campaign in Australia.

Underpinning Closing the Gap is a new way of working across government and of engaging with Indigenous communities. Governments are cooperating to better coordinate their services and funding. Clear responsibilities, specific targets and rigorous reporting will help to keep governments on track.

Engagement and partnership with Indigenous people and communities, building on their ideas, strengths and leadership, will help to find sustainable solutions to long-standing problems.

Closing the Gap is a cross-community effort. The corporate, NGO and philanthropic sectors are also important to assisting Indigenous people and communities and contributing to Closing the Gap.

More information about the Closing the Gap campaign is available via <http://www.dss.gov.au/our-responsibilities/indigenous-australians/programs-services/closing-the-gap>

Case Studies

Case Study 1 - Sacred Site Within Healing Centre

The Sacred Site Within Healing Centre was established in Adelaide in 1993. Sacred Site provides grief and loss counselling services to Indigenous people, as well as making presentations and conducting training with government departments and community organisations on the effects in Indigenous communities of unresolved grief and trauma.

Sacred Site was established due to concerns that mainstream counselling services were not appropriate in addressing the grief and loss of Indigenous people. An underpinning belief of the Sacred Site program is that Indigenous peoples' unresolved grief is a major contributing factor to the range of social and health issues which exist in Indigenous communities today.

Healing strategies used at Sacred Site seek to:

- Create an awareness about the impact of losses and the unresolved grief that results;
- Create and develop grieving ceremonies;
- Recreate women's business and ceremonies;
- Recreate men's business and ceremonies; and
- Recreate rites of passage for young people.

Overall, Sacred Site attempts to assist Indigenous people understand their grief and loss in a holistic sense which includes the effects of colonisation. The program also aims to assist people working with Indigenous people to understand issues of grief and loss.

Source: Calma T. 2007. *Social Determinants and the Health of Indigenous People in Australia – A Human Rights Based Approach*. International Symposium on the Social Determinants of Indigenous Health.

Adelaide. <http://www.humanrights.gov.au/news/speeches/social-determinants-and-health-indigenous-peoples-australia-human-rights-based>

Case Study 2 - The Kuka Kanyini project, Anangu Pitjantjatjara Lands

The goals of managing country, conserving biodiversity, maintaining culture, providing employment and training and improving the diet of remote communities coincide in the Kuka Kanyini project. This was initiated in 2003 as a pilot around the remote community of Watarru in the far northwest Anangu Pitjantjatjara Yankunytjatjara (APY) Lands. The project is a local community- government partnership funded by the South Australian Department of Environment and Heritage and the APY land management. The Kuka Kanyini model, it is hoped, will be extended throughout the APY Lands in time.

Watarru has a seasonal population of between 60 and 100 people and is located in an extremely remote part of the APY Lands. It is a lawfully strong, proud and socially cohesive community, generally free of problems like petrol sniffing and domestic violence that occur elsewhere on the APY Lands. However, despite these positive points, a visit to Watarru by staff members of HREOC in 2003 noted high rates of diabetes and other chronic diseases self-reported by community members. There was a limited range of foods stocked at the Watarru community store. Convenience foods high in saturated fat and sugars are often the preferred foods by community members.

Land management is an integral part of the project. This includes maintaining the traditional pattern of fire management regimes that helps minimise the impact of accidental fires that can otherwise devastate the local mulga woodlands from which foods (grubs, mistletoe fruit, honey ants, mulga apples and seeds) and pharmacopeia are found. Fire also is used to encourage regrowth of foods preferred by kangaroos and emus that assist Anangu when hunting. It also includes the control of populations of feral rabbits, foxes, camels, and cats that have had a significant impact on the population of small sized native mammals in the region. Feral camels and horses also foul and damage water sources that native animals rely on and compete with the community for several plant food-sources and are of high cultural significance.

To date the project has exceeded expectations. It continues to employ a minimum of 12 people on a full time basis, increasing the level of self esteem and valuing the 40,000 years information base of the local people to assist western science. By combining contemporary and traditional skills the local people are now able to best manage the land. To date, the increase in the physical activity by participants has assisted in the control of diabetes. The guaranteed wage ensures that people are now saving for large items and buying healthy foods. The increase in self- esteem is obvious with the younger people wanting to participate; young men in particular seek to working with camels and learn fire skills as these are considered prestigious occupations.

Source: Calma T. 2007. *Social Determinants and the Health of Indigenous People in Australia – A Human Rights Based Approach. International Symposium on the Social Determinants of Indigenous Health.*

Adelaide. <http://www.humanrights.gov.au/news/speeches/social-determinants-and-health-indigenous-peoples-australia-human-rights-based>

References, Additional Reading and Links

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