

Beyond endorsement: reflecting on the 18th anniversary of the United Nations Declaration on the Rights of Indigenous Peoples

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The United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) stands as the most comprehensive international charter for Indigenous rights.¹ The 18th anniversary of the adoption of UNDRIP by the United Nations (UN) General Assembly (13 September 2007) provides an opportunity for reflection and a renewed commitment to its application to realise health equity.

UNDRIP affirms the collective and individual rights of Indigenous Peoples, including the fundamental right to self-determination (Article 3).¹ This is not just a political ideal; but the foundation on which health equity must be built. Article 24 states that “Indigenous Peoples have the right to their traditional medicines and to maintain their health practices” and “Indigenous individuals have an equal right to the enjoyment of the highest attainable standard of physical and mental health.”¹ Critically, UNDRIP must be read holistically, recognising that health is not merely an individual right, but an inherent collective and community right that cannot be separated from self-determination.

Self-determination shifts the power dynamics from colonial control to Indigenous agency and leadership. Self-determination recognises that Aboriginal and Torres Strait Islander Peoples, as bearers of vast cultural knowledge and custodians of Country, are best placed to define their own health priorities, design their own services, and lead initiatives that genuinely address the complex determinants of their wellbeing. Top-down approaches have proven to be inadequate, disempowering communities via colonial domination.² Self-determination, however, enables communities to reclaim sovereignty, to make decisions about their lives, lands and institutions, including their health care systems, thereby promoting health and healing. Genuine wellbeing is directly linked to self-determination.

Australia’s adoption and endorsement of UNDRIP was laborious. Initially, Australia was one of four nations that refused to endorse UNDRIP, citing concerns over provisions related to self-determination, land rights and the status of customary law, and co-led efforts to weaken its original text.³ Although formal endorsement came on 3 April 2009, indicating a commitment to upholding Aboriginal and Torres Strait Islander rights, a critical paradox remains: Australia has not incorporated or implemented UNDRIP directly into domestic law. This stands in stark contrast to the nation’s commitments made in multilateral forums to democratic principles and human rights, creating dissonance between international posture and domestic action, particularly regarding the right of Indigenous Peoples to self-determination.

Despite a lack of legal integration, the implementation of UNDRIP in Australia has been a subject of significant interest and discussion, driven by Aboriginal and Torres Strait Islander

scholars, activists and community leaders. A pledge made during Australia’s successful 2017 bid for a seat on the UN Human Rights Council promised to “support the declaration on the rights of Indigenous Peoples in both word and deed, including the promotion of the declaration’s principles through national engagement.”⁴ Yet, there has since been a lack of tangible policy changes. As the UN Special Rapporteur on the rights of Indigenous Peoples noted in 2017, it is “woefully inadequate that, despite having enjoyed over two decades of economic growth, Australia has not been able to improve the social disadvantage of its Indigenous population,” citing the clear insufficiency of existing measures and the distressing rates of Indigenous incarceration.⁵ The 2020 Australian Human Rights Commission report further highlighted the absence of an audit of existing laws for UNDRIP compliance and the lack of a negotiated national action plan with Aboriginal and Torres Strait Islander Peoples.⁶ Formal incorporation of UNDRIP into Australian law and policy is imperative as it will recognise that implementation is not programmatic but constitutional, and collective rights must be placed at the centre of public policy.⁷

Despite inaction by governments, Aboriginal and Torres Strait Islander Peoples continue to embody and advance their right to self-determination. Indigenous scholars are leading research that redefines health through a strengths-based, relational lens, and are developing and implementing best practice methodologies grounded in Indigenous knowledge systems and governance frameworks. In this issue of the *MJA*, Gray and colleagues provide perspective on the approaches to evidence-based practice in contemporary Australian psychology.⁸ The article problematises the historical reliance on medical science models, and the paternalism of Western population positionality. The authors advocate for the implementation of practice-based evidence approaches, citing the importance of Indigenous-led solutions:

Administrators and regulatory bodies should partner with Aboriginal and Torres Strait Islander communities in developing guidance and oversight for evidence-informed practice. This should include regulation of practice standards and their implications for Aboriginal and Torres Strait Islander communities by, for and of Aboriginal and Torres Strait Islander peoples, rather than retaining this in the hands of non-Indigenous professional associations and regulatory bodies.⁸

Indigenous-led solutions, while filling gaps left by policy failures, also contribute to building the foundational structures for wellbeing. This commitment to the continuous pursuit of self-determined pathways exemplifies the profound resilience and enduring strength of Aboriginal and Torres Strait Islander

Key focus areas and actions for the implementation of the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP)

Focus	Action
Domestic incorporation of UNDRIP	Advocating for the formal incorporation of UNDRIP into Australian law and policy.
Indigenous leadership	Significantly increasing investment in, and transferring control to, Aboriginal and Torres Strait Islander community-controlled organisations. Recognising them as the primary drivers of change, and embodiment of self-determination, through Indigenous-led governance frameworks, not merely service delivery enhancement.
Cultural safety and anti-racism	Moving beyond basic cultural awareness to embed genuine cultural safety and actively dismantle systemic racism within all services, education and research, thereby cultivating environments that prioritise Aboriginal and Torres Strait Islander strengths and resilience.
Indigenous methodologies	Actively seeking to understand and integrate Indigenous methodologies, acknowledging their inherent value and effectiveness, for all. It is crucial to accept that we cannot force traditional and mainstream systems to validate each other; rather, recognise that both stand as distinct and valuable.
Data sovereignty	Supporting Indigenous communities in owning, controlling, accessing and possessing their health data, enabling self-determined research and policy development that truly reflects community needs and aspirations.

Peoples, demonstrating that self-determination is not only a fundamental right but a lived practice.

Over the past 18 years, we have witnessed important shifts in the discourse and, in some areas, the practise of Aboriginal and Torres Strait Islander health in Australia. There is a growing recognition of the critical role of Indigenous-led health organisations. Concepts such as cultural safety and co-design have gained traction, reflecting an emerging understanding that genuine partnership and respect for Aboriginal and Torres Strait Islander ways of knowing, being and doing are vital. These concepts are now being embedded in national accreditation standards, practice standards and health strategies, signalling a broader acceptance of these principals as essential for equitable health care.⁹⁻¹¹

As we look to the next 18 years, the health and medical community in Australia has a responsibility to actively push for the full implementation of UNDRIP, which requires dedicated actions to move beyond endorsement to measurable **outcomes** (Box).

The 18th anniversary of UNDRIP is a historical marker but serves as a powerful call to action. It reminds us that health is

inextricably linked to human rights, self-determination and cultural integrity.

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