

# Submission to National Indigenous Australians Agency

## *Indigenous Digital Inclusion Plan*

November 2021

## **Introduction**

The Queensland Nurses and Midwives' Union (QNMU) thanks the National Indigenous Australians Agency (NIAA) for the opportunity to comment on *Indigenous Digital Inclusion Plan* ('the plan').

Nursing and midwifery is the largest occupational group in Queensland Health (QH) and one of the largest across the Queensland government. The QNMU is the principal health union in Queensland covering all classifications of workers that make up the nursing and midwifery workforce including registered nurses (RN), midwives (RM), nurse practitioners (NP) enrolled nurses (EN) and assistants in nursing (AIN) who are employed in the public, private and not-for-profit health sectors including aged care.

Our 67,000 members work across a variety of settings from single person operations to large health and non-health institutions, and in a full range of classifications from entry level trainees to senior management. The vast majority of nurses in Queensland are members of the QNMU.

The QNMU, in advocating for the interests of our members, is focused on the broader impacts of digital technologies. In this case, the interest of our First Nations members and the communities they care for and live in.

The QNMU will submit a general comment to the proposed NIAA Indigenous Digital Inclusion Plan to ensure that advice has been considered regarding the impact that digital inclusion can have on health equity in the Aboriginal and Torres Strait Islander communities.

## Recommendations

### **The QNMU recommends:**

- NIAA considers the harmful impact of proliferation of health misinformation as a result of digital inclusion in Aboriginal and Torres Strait Islander communities
- NIAA develops a strategy, in partnership with Aboriginal and Torres Strait Islander Communities and peak health bodies, to minimize harm and proliferation of health misinformation as a result of digital inclusion.
- Aboriginal and Torres Strait Islander communities are provided with targeted resources and education to help discern information from misinformation
- NIAA considers the impact of digital inclusion specifically as it relates to the social determinants of health.

## **General comment**

The QNMU recognises the importance of Aboriginal and Torres Strait Islander people having access to information and to the same level of digital access as their non-Indigenous counterparts. This is important for a number of reasons, including, but not limited to, access to digital healthcare, health information and resources, family and community connectedness, economic participation, and access to information.

Lack of access to technology is a significant barrier for Aboriginal and Torres Strait Islander people, particularly those in remote communities. Without the same level of access to information and connectedness, the opportunities for economic participation, business ventures, and long-distance and remote work arrangements are significantly diminished. Effectively addressing the digital divide has the potential to have a significantly positive impact on the expenses and income of individuals and communities. As the single greatest social determinant of health is capital (income vs cost of living), the value of digital inclusion on the net wealth of Aboriginal and Torres Strait Islander communities and individuals cannot be overstated.

The socio-economic impact on health is again vitally important to consider in the context of SARS-COV-2 (as well as potential future pandemics) as increased socio-economic status has been shown to correlate with increased vaccination rates (Glatman-Freedman & Nichols, 2012) and better health outcomes in regard to vaccine preventable diseases.

The QNMU acknowledges that whilst digital inclusion is central to improving quality of life of Aboriginal and Torres Strait Islander people, the proliferation of potentially harmful medical misinformation is a disadvantage that needs to be mitigated (Lavorgna, A. 2021). People from lower socio-economic backgrounds are far more likely to use social media to access health information than to seek reputable and peer reviewed resources. This disproportionately impacts Aboriginal and Torres Strait Islander communities.

This is evidenced by the increase in vaccine hesitancy surrounding the SARS-COV-2 vaccines and other SARS-COV-2 health initiatives in many Aboriginal and Torres Strait Islander communities around Australia. This sadly will likely lead to an increased morbidity and mortality rate of Aboriginal and Torres Strait Islander peoples from SARS-COV-2 when compared with non-Indigenous Australians, particularly as opening up strategies are implemented at the state, territory, and national levels. The QNMU strongly encourages that the plan includes strategies to address the impacts of misinformation, particularly in the context of health information.

The QNMU acknowledges the important work of NIAA in addressing digital inclusion for Aboriginal and Torres Strait Islander peoples and the vital role that digital inclusion plays in addressing the social determinants of health. However, there are associated risks with digital inclusion that are currently not being addressed adequately that are having tangible negative impacts on the projected health outcomes in Aboriginal and Torres Strait Islander communities and should be a priority when considering digital inclusion.

## References

- Glatman-Freedman, A. & Nichols, K. (2012) The effect of social determinants on immunization programs, *Human Vaccines & Immunotherapeutics*, 8:3 (293-301)
- Lavorgna, A. (2021) Information Pollution as Social Harm: Investigating the Digital Drift of Medical Misinformation in a Time of Crisis, *Emerald Publishing, Bingley UK* (5-6)