Available online at www.sciencedirect.com
ScienceDirect
International Journal of Intercultural Relations
31 (2007) 391–406
International Journal of INTERCULTURAL RELATIONS
www.elsevier.com/locate/ijintrel

Research ethics, reconciliation, and strengthening the research relationship in Indigenous health domains: An Australian perspective

Megan-Jane Johnstone*

Division of Nursing and Midwifery, School of Health Sciences, RMIT University: Bundoora West Campus, PO Box 71, Melbourne Vic. 3083, Australia

Received 15 March 2006; received in revised form 1 August 2006; accepted 17 September 2006

Abstract

Australia has one of the best health care systems in the world. Despite this, the health of Indigenous Australians remains poor in comparison to non-Indigenous Australians and in comparison to other Indigenous peoples in other developed countries, such as Canada, the USA and New Zealand. Although the disparities in Indigenous health are the result of a complex array of interacting social and political processes, the historical failings of the nation's research endeavours to directly benefit the health status of Indigenous peoples are bring increasingly implicated in the status quo. Because of their shared memories of past bad experiences, Indigenous communities are profoundly distrustful of non-Indigenous health researchers. As a result of this distrust, opportunities to improve the performance, accountability and benefits of health research in Indigenous health domains are being lost—to the further detriment of the health of Indigenous peoples. In an attempt to redress this distrust and strengthen the research relationship in Indigenous health domains, various national research ethics guidelines and frameworks have been developed. It is evident, however, that if the research relationship in Indigenous health domains is to be improved, researchers need to do much more than merely uphold prescribed rules and guidelines. This article contends that if the research relationship in Indigenous health is to be strengthened, health researchers must also engage in the distinctive political processes of 'recognition' and 'reconciliation'. In support of this contention, the processes of recognition and reconciliation are described, and their

---

*Tel.: +61 3 9925 7557; fax: +61 3 9467 1629.
E-mail address: megan.johnstone@rmit.edu.au.

doi:10.1016/j.ijintrel.2006.09.003

importance to improving the overall performance, accountability and benefits of Indigenous health research explained.

Keywords: Ethics; Research; Reconciliation; Aboriginal health; Indigenous health; Australia

1. Introduction

The history of Indigenous health research in Australia stands as a sobering reminder of the devastating impact that colonialism can have on a nation's 'first people' and how insidious and enduring its legacy can be, even centuries later, in a modern world. In the new millennium, despite years of research, Aboriginal and Torres Strait Islander health in Australia remains poor in comparison to other Australians with life expectancy rates being 19–20 years lower, and prevalence of diseases (such as diabetes, hypertension, and a range of communicable diseases) being significantly higher than that of the non-Indigenous population (AHMAC, 2004; Thomson, Burns, Burrow, & Kirov, 2004).

It is acknowledged that the disparities in the health of Aboriginal and Torres Straight Islander peoples in Australia are the result of a complex array of interacting processes, including various social and health risk factors, such as education, employment, income, poor living environment, and poor nutrition (AHMAC, 2004). The historical failings of the nation's research endeavours to directly benefit the health status of Indigenous Australians cannot, however, be discounted. In keeping with this view, there is a growing understanding that a comprehensive approach to redressing the disparities in the health and care needs of the Indigenous peoples of Australia requires not just a sharper focus on 'improving the performance and accountability of mainstream health services' but also improving the performance and accountability of Indigenous health research (AHMAC, 2004; Humphery, 2001; Thomson et al., 2004).

In recognition of the need to improve the responsiveness and accountability of Indigenous health research in Australia, various documents, frameworks, and ethics guidelines have been developed to guide researcher conduct in Indigenous health domains. Notable examples include the Australian National Health and Medical Research Council's (NHMRC) *Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Straight Islander Health Research*, which gives expression to the following six values:

- Reciprocity.
- Respect.
- Equality.
- Responsibility.
- Survival and protection.
- Spirit and integrity (NHMRC, 2003).

Another example is the Australian Health Ministers' Advisory Council's (AHMAC) *Cultural respect framework for Aboriginal and Torres Straight Islander health 2004–2009*,