

Understanding the cultural, social and political determinants of health and their benefits for BlaQ self-determination



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Abstract

Purpose BlaQ people¹ and communities face intersecting, multiple and compounding discrimination, which impacts BlaQ social and emotional wellbeing, and family, community and Country connections. BlaQ perspectives and lifeworlds are excluded in current cultural, social and political determinants of health domains, understandings and Indigenous wellbeing models. Self-determining rights of BlaQ peoples are limited as there is no treaty or convention that specifically focuses on the rights of BlaQ peoples. A preliminary model has been proposed for understanding and advancing the cultural, social and political determinants of health for BlaQ identifying people and the benefits it may bring for BlaQ self-determination and health and wellbeing.

Methods A Queer Indigenous standpoint theoretical framework was used, and a critical and reflexive literature review and thematic analysis that prioritised BlaQ scholarship was used to create the preliminary BlaQ cultural, social and political determinants domains and their benefits for self-determination.

Main findings A preliminary model for BlaQ cultural, social and political determinants domains has been proposed that centres the concept that BlaQ strong culture and health is enabled when cultural, social and political determinants are interconnected. This review and analysis demonstrated that the model has multiple benefits for BlaQ self-determination and can provide a preliminary model for action for BlaQ health justice, equity, safety and inclusion.

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¹Refer to the section titled The term 'BlaQ' for an explanation of the use of the term.





Principal conclusions The model provides a preliminary approach to understanding and addressing health determinants for BlaQ people and communities. Future research is required to further consider the model and its potential application.

Keywords: Indigenous; Cultural; social and political determinants of health; Queer and gender diverse; LGBTIQ+; BlaQ

Highlights

- BlaQ perspectives have been embedded in this proposed cultural, social and political determinants model.
- Combining cultural, social and political determinants contributes to BlaQ self-determination.
- There are strong BlaQ culture and health benefits from Blak solidarity and inclusiveness.
- Collaboration of BlaQ/k lifeworlds benefits Indigenous self-determination.

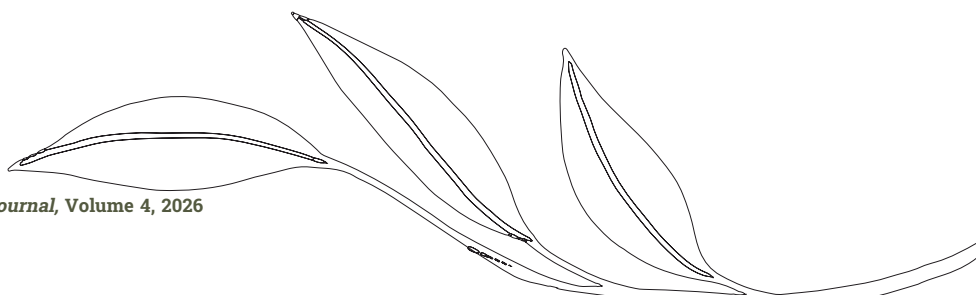
Introduction

This article provides a preliminary model for understanding and advancing the cultural, social and political determinants of health for BlaQ¹ identifying people in the settler colonial state known as Australia. The key objective of this work is to present and highlight the potential benefits of such a model for delivering BlaQ self-determination, particularly focusing on health and wellbeing. The model centres cultural determinants for the provision of BlaQ strong culture and health. This model is proposed for action that calls for societal change to support BlaQ self-determination, through social and political determinants. The preliminary model builds on the legacy work of previous cultural and social determinants domains (Lowitja 2020a, 2020b).

This article is a preliminary exploration of the cultural social and political determinants of health for BlaQ people, progressed with interested curiosity, and with the aim of presenting some initial understandings as it pertains to the domain of health. The article highlights and builds upon the profound knowledge and wisdom held and shared by Aboriginal and/or Torres Strait Islander Queer and gender diverse scholars, writers,

artists, professionals, knowledge-keepers, Elders and community. The current and growing scholarship of Indigenous queer and gender diverse understandings and experiences is crucial to ensure the survival and thriving of all ways of Indigenous knowing, doing and being (Martin and Mirraboopa 2003). This work is offered as a respectful and unique contribution to the perspectives of the body of Queer Indigenous scholarship, with the intention of elevating and progressing self-determination in BlaQ health.

Whilst there has been some literature around BlaQ understandings, experiences and voices in health (Day et al. 2022; Hill et al. 2021; Phelan 2021), the self-determining rights of BlaQ peoples has not been explicitly transformed into legal rights (Briskman et al. 2022) or widely articulated. Although the body of work on the cultural and social determinants of health (Lowitja Institute 2020a, 2020b) and the social and emotional wellbeing (SEWB) model for Indigenous peoples (Gee et al. 2014; Dudgeon et al. 2017, 2020) has advanced, and discourses on the political determinants of health are emerging (O'Sullivan 2012; Rigney and Bignall 2024), the inclusion of BlaQ perspectives in these works are still largely absent





(Spurway et al. 2022; Phelan and Oxley 2021). Failing to appropriately consider or excluding the unique and distinct compounding experiences of BlaQ people within the understandings of the cultural, social and political determinants of health renders this crucial knowledge, and that to arise from it, incomplete. The sustained lapse in actively examining the impacts of colonialism on cultural health and wellbeing through an Indigenous Queer lens means that deeply harmful colonial paradigms regarding gender and sexuality are enabled to remain present, uninterrogated and unchallenged. Conscious or unconscious, this unnecessary omission guarantees that the cultural, social and political determinants of health persist as inadequate and inaccurate, deeply impacting the way in which policy and practice are developed and deployed (Phelan 2023).

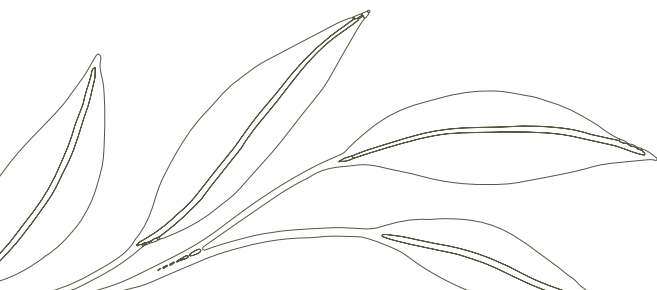
This article aimed to provide a preliminary model for advancing understandings of cultural-social-political BlaQ determinants of health and their benefits for BlaQ self-determination for further application, validation (quantitative and qualitative) and critique. The paucity of research and information on BlaQ health and wellbeing has been flagged and is a consistent barrier to providing culturally responsive and safe support services to address the self-determining needs of BlaQ peoples (Dudgeon et al. 2015, 2025). It aimed to address the absence of BlaQ-led, rigorous research and evidenced-based information about BlaQ wellbeing raised by others (Australian Government 2021; Dudgeon et al. 2015, 2025) through this model. As a strategic step in contributing to BlaQ health wellbeing research gaps, the objective was to provide foundational possibilities for BlaQ cultural-social-political determinants of health and BlaQ self-determination from BlaQ standpoints and lived experiences.

The term 'BlaQ'

The term 'BlaQ' is respectfully used to describe Queer and Gender Diverse (QGD) Indigenous Australian people, Aboriginal and/or Torres Strait Islander LGBTIQ+ Peoples, LGBTQIA+ mob², or other terms that Queer mobs use for articulations and expressions of self, acknowledging that the term 'BlaQ' is used by some. It is also acknowledged that the term 'BlaQ' has been championed by the BlaQ Aboriginal Corporation in Redfern, Sydney, who are committed to 'empowering the Aboriginal and Torres Strait Islander LGBTIQ+SB community' (BlaQ Aboriginal Corporation 2024). It is noted that whilst the term 'BlaQ' is used in the settler colonial state known as Australia (Evans 2023a), it has origins being used by people of 'Black/African descent and/or from the African diaspora who recognise their queerness/LGBTQIA+ identity' (Petersen et al. 2020, p. 3).

The authors also respectfully clarify that while BlaQ and Black identities carry compounding experiences of racism and oppression, such experiences are not homogenous. BlaQ people are subjected to racism and homophobia in multiple and varying ways (Hill et al. 2024). There are complexities in the ways in which racialisation, queerness, skin colour and solidarity movements intersect within BlaQ and Black communities. For example, a White passing Queer mob may face lateral violence for not being Black or Brown enough, and conversely other BlaQ people may face lateral violence for being too Black or Brown (Briskman et al. 2022; Wright 2025). These experiences are distinct to the forms of racism against non-queer Black people.

²The terms 'mob' and 'Blak' are respectfully used to refer to Aboriginal and Torres Strait Islander Peoples as a collective whilst acknowledging that it is not a positively reclaimed term by all First Peoples (see Carlson et al. 2014; Evans 2023a).





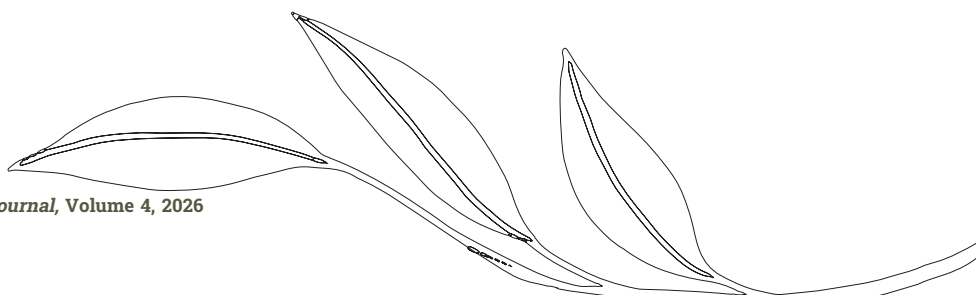
The term BlaQ is being used with positivity and sovereign strength by and for queer mobs ([BlaQ Aboriginal Corporation 2024](#)), as well as an act of powerful Blak Queer resistance and self-determination by BlaQ sovereign bodies ([Evans 2025](#)). BlaQ sovereign bodies are the embodiment of BlaQ mind, body and spirit, including BlaQ ways of knowing, being, doing and belonging to Country and mob, as both individuals and/or collectives. BlaQ lifeworlds include the ‘relational positioning inherent in the social, political, historical, and cultural embodied realities of Indigenous lives’ ([Walter and Suina 2019](#), p.235) and the intersubjectivity of BlaQ sovereign peoplehood. As [Farrell \(2015, p. 1\)](#) states, ‘the Queer Indigenous body is a site of contention’. It is crucial to clarify that BlaQ bodies are extraordinarily diverse and expansive in their presence and expression. Whilst many may utilise the term BlaQ to specifically centre and convey queer and/or gender diverse elements of being, other non-normative ways of existing for Queer and gender diverse people within the narrow bounds of coloniality cannot be set aside or dismissed ([Phelan and Bennett 2024](#)). A vast number of Indigenous Queer and gender diverse bodies also experience being one or more of: disabled, neurodivergent, chronically ill, fat³, criminalised and exploited ([Cross 2022](#); [Phelan 2024](#); [Simpson et al. 2019](#)). The consideration of these other experiences of embodiment for BlaQ scholarship and practices is crucial to ensure all BlaQ people are valued when considering the BlaQ cultural, social and political determinants of health. As Indigenous Queer and

gender diverse scholars and practitioners, it is a foundational element of BlaQ ethic to care for one another, and the authors do not want to make the same essentialising mistakes that they far too often experience in Indigenous literature, frameworks and models ([Uink et al. 2020](#)).

BlaQ self-determination

There is no treaty or convention that specifically focuses on the rights of BlaQ peoples ([Briskman et al. 2022](#)). The United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) ([United Nations General Assembly 2018](#)) is silent on BlaQ rights. Whilst Article 22 states that ‘Particular attention shall be paid to the rights and special needs of indigenous elders, women, youth, children and persons with disabilities’ including the enjoyment of the ‘full protection and guarantees against all forms of violence and discrimination’ ([United Nations General Assembly 2018](#), p. 17), gender is only considered in terms of women. Thus, some argue that the implementation of Indigenous self-determination under UNDRIP does not equally protect all individuals’ rights, including ‘queer individuals’ ([Kuokkanen, 2024](#), p. 58). When seeking to find representation of BlaQ bodies under UNDRIP, Article 33 states that ‘Indigenous peoples have the right to determine their own identity or membership in accordance with their customs and traditions’ ([United Nations General Assembly 2018](#), p. 24) and in Article 2, Indigenous peoples and individuals ‘have the right to be free from any kind of discrimination... based in their indigenous origin or identity’ ([United Nations General Assembly 2018](#), p. 8). Although UNDRIP makes clear the self-determining right to ‘identity’ and to be safe in that identity, the requirement for BlaQ bodies to do so in accordance with their customs and traditions can be challenging. This is due to Indigenous Queer and gender diverse people being impacted by colonisation in distinct and unique ways, such as colonial

³Fatism is another branch of colonial violence and oppression, driven by White supremacy, patriarchy, ableism and neoliberal capitalism ([Ashdown-Franks and Joseph 2021](#)). It conceives and perceives of certain bodies, particularly Blak, Black and Brown, as non-compliant to colonial norms, and surveils, stigmatises, vilifies, marginalises, violates and punishes accordingly. Resistance to colonialist ideologies of acceptable bodies – body sovereignty – is a crucial aspect of enacting Indigenous sovereignty ([Gillon 2020](#)).





ideologies around heteronormativity and gender binaries, stigma, marginalisation, and/or exclusion from their Indigenous communities on the basis of their Queerness or gender diversity (Hill et al. 2024; O'Sullivan 2021). Further, in the settler colonial state known as Australia, BlaQ people are 'unlikely to find remedy through legislation' for discrimination (Briskman et al. 2022, p. 36).

Blac/k struggles for self-determination in the settler colonial state known as Australia have drawn from and aligned with Africana freedom struggles (Swan 2022). Black internationalism and Black Oceania movements provide solidarities across Oceania that support justice for BlaQ and Blac/k bodies. Situated in gendered geographies and powered by Blak, Indigenous grassroots anti-colonial movements, Pasifika Black movements offer political and cultural strength and resistance (Swan 2022). This solidarity for self-determination is crucial to BlaQ thrival, good life, health and wellbeing.

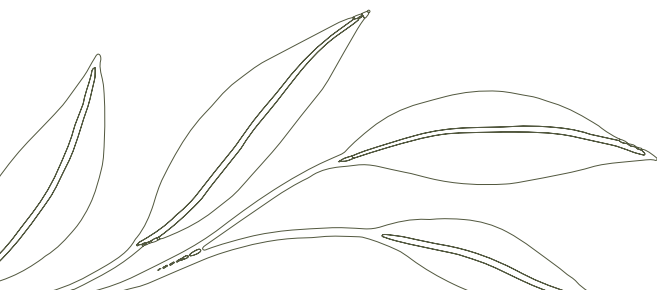
BlaQ self-determination is vital for BlaQ health and wellbeing, both beyond matters of identity and safety, and inclusive of being able to live a full cultural BlaQ life. Self-determining BlaQ lifeworlds may involve new cultural boundaries whilst upholding and respecting protocols and traditional gender roles (Evans 2022). It is recognised that within Aboriginal and Torres Strait Islander communities that good governance that 'respects and reflects cultural diversity' within community is vital for self-determination (Dudgeon et al. 2017, p. 320). Similarly, that being able to connect and care for Country can 'promote dignity, self-determination... build community strength' and engender 'a strong sense of identity and belonging' (Dudgeon et al. 2017). Good life is culturally located and relative to political possibilities, which involves healthcare that is rationed according to privileges,

preferences and practices of the dominant settler group (O'Sullivan 2012). Indigeneity intends that individual liberties are contingent upon group rights, and that political participation is the business of peoples along with individuals (O'Sullivan 2012). BlaQ people can thrive in self-determined spaces of affirmation, resistance and collective care (Keovorabouth 2025) whilst negotiating and asserting diverse BlaQ identities in local and global community contexts (Farrell 2021). In this regard, BlaQ self-determination is both a collective and individual construct. Therefore, there is a need for more specific articulation of BlaQ self-determining rights not only under UNDRIP but in the lived realities and daily lives of BlaQ peoples.

Wellbeing of BlaQ bodies

BlaQ sovereign bodies are inclusive of the many forms of intersecting queer Indigenous identities, can be counter-colonial and creative in their abilities to resist and push back against settler oppressions and Queer White possession (Evans 2023a, 2023b). Liberated in their embodiment of gender and sexual orientation, BlaQ sovereign bodies are flexible and able to make space for r/evolutionary Indigenous cultural frames and BlaQ lifeworlds (Evans 2025). BlaQ sovereign bodies may self-determine how they identify as Queer First Peoples and pursue their culturally framed understandings and use BlaQ storywork for truth telling (Evans 2022, 2024). However, BlaQ bodies must be kept safe and empowered in their pursuits for justice and the right and ability to live a full and well BlaQ life.

BlaQ people and communities experience 'significant historical and continual harms, specifically targeting non-compliant genders and/or sexualities' (Phelan 2023, p. 1). The experience of multiple and compounding levels of discrimination based on Indigeneity, sexuality, gender identity or intersex status may 'exacerbate the effects and impacts of





racism and heterosexism', leading to increased isolation from mob, Queer and/or mainstream communities (Phelan 2021, p. 41). The impacts on BlaQ people from 'discrimination and negative perceptions through lack of understanding of sexuality and gender diversity' are extensive and include feelings and experiences of 'silence, shame, rejection and blame' which deeply and negatively impact BlaQ social and emotional wellbeing, and family and community relationships (Dudgeon et al. 2015, p. 2). There is currently an absence of presence, recognition and consideration of BlaQ people and BlaQ diversity in Indigenous health and wellbeing frameworks, policies and practices (Phelan 2024; Sullivan et al. 2021). Despite this, Indigenous Queer and gender diverse communities overwhelmingly resource themselves to plan, implement and deploy appropriate services to meet the needs of the BlaQ community (Uink et al. 2024, 2023). Although some BlaQ people are able to sustain their overall wellbeing (Sullivan et al. 2021), BlaQ health and wellbeing outcomes vary (Henningham 2024).

The cultural and social determinants of health

Aboriginal and Torres Strait Islander health has been described as a multidimensional concept of health that places mob world views and culture as central (Gee et al. 2014). It has also been characterised as the social, emotional and cultural wellbeing of the whole community, holding a whole of life cyclical concept of life-death-life (NACCHO 2011). Mob health has been defined as good life, with a healthy strong inner spirit that must be protected, healed and strengthened (Smith et al. 2021). It is more than physical health and wellbeing, it is a life course – the cultural, emotional and social wellbeing of communities, families and individuals (Australian Government 2021).

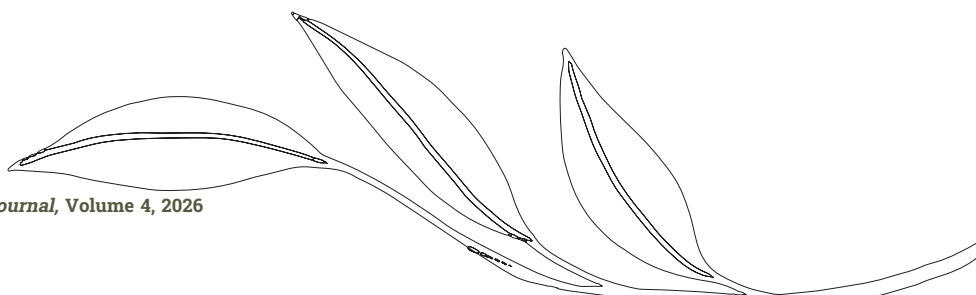
The cultural determinants of health is a conceptual framework that is Indigenous rights-centred, whereby 'cultural identity' can 'act as protective factors of

health and wellbeing' based on Indigenous knowledge (Lowitja 2020b, p. 3). The framework is: a) strengths-based; b) community driven and holistic in approaches to health and wellbeing; and c) generated and empowered by 'cultural understandings' (Bourke 2024; Lowitja 2020b, p. 3). Six domains feature in the framework: i) connection to Country; ii) family kinship and community; iii) Indigenous beliefs and knowledge; iv) cultural expression and continuity; v) Indigenous language; and vi) self-determination and leadership (Lowitja 2020a, p. 14).

Inter-related to the cultural determinants of health are the social determinants of health (Lowitja 2020b). The social determinants of health are 'mostly responsible for health inequities: the unfair and avoidable differences in health status' between populations and countries (Lowitja 2020a, p. 12). For example, in the settler colonial state known as Australia, education, employment, housing and income have a powerful effect on the health and wellbeing of people, causing up to a third (34%) of the gap between Aboriginal and Torres Strait Islander and other populations' health outcomes (Australian Institute of Health and Welfare 2016). Addressing the social determinants of health with an intersectional and rights-based approach is essential to achieving mob health equity and empowerment (Australian Government 2021). Both the social determinants of health and the cultural determinants of health are important contributors to improved health outcomes for Indigenous peoples (Lowitja 2020a; Pearson et al. 2020). The strengths of both the cultural and social determinants of health have been combined to explore their inter-related benefits for BlaQ self-determination.

The political determinants of health

The political determinants of health and wellbeing have been neglected in discourses, are culturally





located and relative to the distribution of political authority and Indigenous self-determination (O'Sullivan 2012; Rigney and Bignall 2024). Gee et al. (2014) describe the 'political determinants' of health as critical factors that impact First Peoples communities' capacities to resist assimilation, retain cultural values, principles, practices and traditions, and retain their right of self-determination and sovereignty. The political determinants are considered as 'part of the broader level of cultural determinants' and can include 'unresolved issues of land, control of resources, cultural security, and the rights of self-determination and sovereignty', which contribute to mob health and wellbeing and reduce health inequity (Gee et al. 2014, p. 62). However, Rigney and Bignall (2024, p. 2) argue that the political determinants of health should not be subsumed by the social and cultural determinants, are primary factors prerequisite to self-governing self-determination, and foundational to creating and sustaining 'culturally distinctive social conditions' essential for flourishing lives. 'The personal is political', whereby the state exercises power relations upon bodies and identities, including, for example, the criminalisation of homosexuality and control of LGBTIQ+ people's sexuality and gender identifications causing significant physical and mental health impacts and harms (Rigney and Bignall 2024, p. 3). Transgender and gender diverse people are being politicised and face increasing discrimination through law and policies that impact their wellbeing (Kuper et al. 2022). Political ideologies and political decisions have profound influence and impact on the health and wellbeing of BlaQ bodies (Briskman et al. 2022; Uink et al. 2024). Thus, a focus on the social determinants of health understates the political nature of the determinants of Indigenous health (O'Sullivan 2012).

Directly linked to the political determinants of health are the commercial determinants of health. Late-stage capitalism intersects with colonisation facilitating political lobbying and favourable regulatory environments, whereby health-harming industries (e.g. ultra-processed foods, tobacco, alcohol and infant formula) have outsized influence on Indigenous communities (Crocetti et al. 2022; Eisenkraft Klein and Shawanda 2024). Whilst the commercial determinants of health and their impact on LGBTIQ+ communities has been discussed by Adams et al. (2023), the intersections of commercial-political determinants of health within BlaQ communities is yet to be specifically considered.

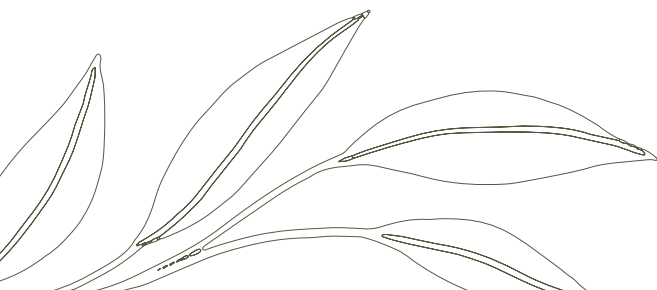
Interconnection of cultural-social-political determinants and self-determination

Indigenous good health and wellbeing require positive social and cultural conditions, enabled by positive political determinants such as Indigenous self-determination and self-governance (Rigney and Bignall 2024). Broad level self-determination is integral to First Peoples' cultural, social and economic rights and are associated with determinants of health (Verbunt et al. 2021). Political, social and cultural determinants of Indigenous health are interconnected and are foundational to holistic conceptualisations of wellbeing (Rigney et al. 2022). Hence, there is a strong relationship between positive cultural, social and political determinants of health and their ability to enable and support Indigenous self-determination. Advancing the understandings of the cultural-social-political determinants of BlaQ health and wellbeing are critical to empowering BlaQ self-determination.

Methods

Queer Indigenous Standpoint

In order to develop a preliminary model that describes the cultural, social and political determinants of BlaQ





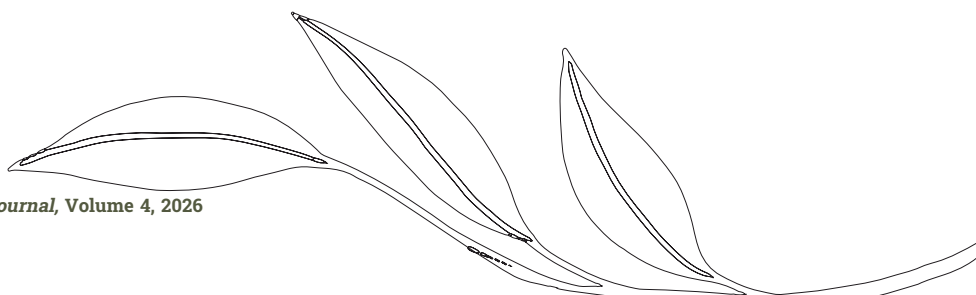
health and wellbeing, the Queer Indigenous Standpoint Theoretical Framework (Evans 2025) that anchors BlaQ self-determination as a core requirement for BlaQ flourishing and thriving was used (Figure 1). This framework builds on the previous work of Sullivan and Day, 2021, p. 4) and their Indigenous Standpoint Theory that ‘assumes that although QGD Indigenous identities are extremely diverse, we share some common experiences’. The Queer Indigenous Standpoint Theoretical Framework enabled the authors to focus on developing preliminary BlaQ cultural, social and political determinants domains that make BlaQ bodies strong in culture, and in health and wellbeing, by describing their benefits for BlaQ self-determination. As the cultural, social and political determinants domains were developed, the authors reflected on their own lived BlaQ experiences at the interface of Blak culture (Nakata 2007) as Aboriginal and Queer health researchers, and people connected to their Aboriginal communities, families and kin, whilst using BlaQ storywork (Evans 2024) to provide insights.

The elements of the Queer Indigenous Standpoint Theoretical Framework (shapeshifting, journeys and terrains) signposted the emergence of the cultural, social and political determinants domains. Shapeshifting guided insights for the domains to reflect the dynamism and fluidity of BlaQ lifeworlds as enablers for BlaQ self-determination. Journeys allowed the domains to be conceptualised from BlaQ experience and included the reimagining of BlaQ knowledges, cultures and identities. Terrains reminded the authors that the overall model needs to reach the goals and achievements of BlaQ self-determination through transformation, decolonisation, healing and mobilisation of BlaQ bodies.

There are similarities between the Queer Indigenous Standpoint Theoretical Framework (Evans 2025) and other models for Two Spirit and Indigi-queer people holistic health (Dykhuizen et al. 2022) and *takatāpui* and LGBTQIA+ people health justice (Parker et al. 2025). All provide conceptual designs for Indigenous LGBTQIA+ wellbeing models that are embedded in BlaQ self-determination and sovereignty reflect the realities of BlaQ lived experiences and call for BlaQ health justice. These models are not empirically tested but provide essential academic discourse to provide urgently needed health and wellbeing research led by and in collaboration with BlaQ people and communities.

BlaQ reflexive literature review and analytical approach

This review identified and analysed the pertinent literature on the social and cultural determinants of health to understand the intersectional and expansive factors relevant to BlaQ people and communities. It used a critical and reflexive process to privilege Indigenous knowledges in literature that included understandings across: i) general social determinants of health; ii) Aboriginal, and Torres Strait Islander contexts; iii) gender; iv) sexual orientation and/or LGBTIQIA+ existences; v) disability; vi) justice; and vii) political. This approach reflects the ethic that deeply considers BlaQ existences as incredibly diverse, and BlaQ experiences of health and wellbeing across the intersections. Aligning with best practice (Faulkhead et al. 2023), literature by Indigenous scholars in so-called Australia was centred and prioritised, with elevated ranking for Indigenous queer and gender diverse scholarship. Where possible, other non-Indigenous scholars in so-called Australia were selected to ensure geographical contextualisation and nuance. It is important to note that much of the primary literature in this space, particularly regarding social determinants of



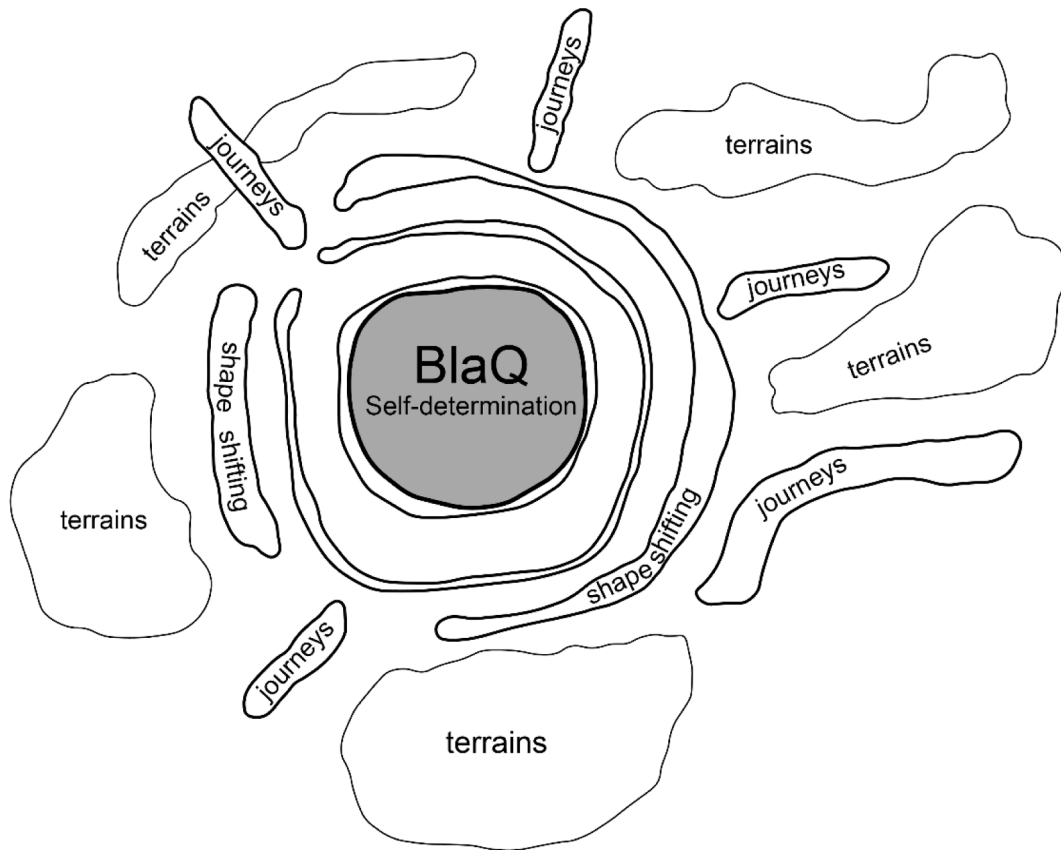


Figure 1: Queer Indigenous Standpoint Theoretical Framework (Evans 2025).

health, is drawn from non-Indigenous and non-Australian scholars as a practice of necessity.

Key literature was identified across each critical domain (i – vii), which formed the literature foundation of the analysis:

- i) **General social determinants of health** (Marmot 2005; Marmot and Wilkinson 2005; World Health Organization [WHO] 2008)
- ii) **Social/cultural determinants of Indigenous health** (Carson et al. 2020; Kingsley et al. 2018; Marmot 2011; O’Sullivan 2012; Verbunt et al. 2021)
- iii) **Gendered determinants of health** (Sen and Östlin 2009; Pega and Veale 2015; Vlassoff 2007)
- iv) **Sexual orientation/LGBTIQ+ determinants of health** (Bailey et al. 2024; Henningham 2024; Hatzenbuehler and Pachankis 2016; Logie 2012; McNair 2017; Pega and Veale 2015)
- v) **Disability determinants of health** (Emerson 2021; Emerson et al. 2011; Frier et al. 2018; Froehlich-Grobe 2021; Green et al. 2022)
- vi) **Justice determinants of health** (McCausland and Baldry 2023; O’Sullivan 2012; Wilson 2009)
- vii) **Political determinants of health** (O’Sullivan 2012; Rigney and Bignall 2024; Sendall et al. 2024).

By employing Indigenous methodologies to analyse and synthesise the data, key themes were identified



that emphasised the strengthening of cultural, social and political determinants of health, alongside the advancement of self-determination for BlaQ peoples and communities. This analysis was undertaken through an extensive, collaborative yarning process between the authors (Bessarab and Ng'andu, 2010) and drew on the novel Indigenous research method MUSHROOMS, as outlined by Phelan (2025). The MUSHROOMS method constitutes a significant contribution to Indigenous research by positioning relationality, creativity and land-based knowledges as central analytic tools. Rather than fragmenting or decontextualising data, MUSHROOMS facilitates the emergence of themes through iterative, collaborative and culturally grounded processes of meaning-making. In doing so, it resists the reductionist and extractive traditions characteristic of Western research, instead privileging Indigenous ways of knowing, being and doing. This approach not only generates themes that are embedded in cultural and political realities but also advances knowledge production that is self-determining and explicitly decolonising. The Indigenous analysis method steps using MUSHROOMS (Phelan 2025) are outlined in Table 1, including the themes that emerged through the yarning process supported by the Queer Indigenous Standpoint Theoretical Framework (Evans 2025).

Results

BlaQ cultural and social determinants domains

Preliminary BlaQ cultural, social and political determinants domains are presented in Figure 2. The model focuses on the core concept that BlaQ strong culture and health is enabled through the interconnection of BlaQ cultural, social and political determinants. BlaQ cultural determinants first ripple out from the centre of the model in recognition of the strengths-based approaches and values they bring. The BlaQ social determinants then BlaQ political

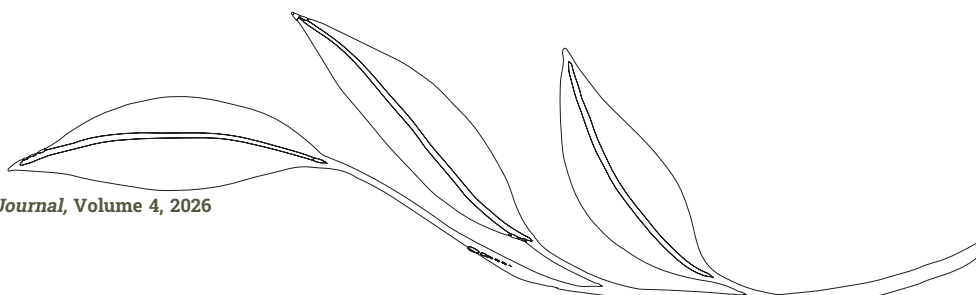
determinants ripple out next, so as to support the inner BlaQ cultural determinants and call for societal action. All BlaQ determinants are then supported by the principle that BlaQ strong culture and health benefits from Blak solidarity, cultural inclusiveness, justice, equity and safety with the purpose of progressing and empowering BlaQ self-determination.

The preliminary BlaQ cultural, social and political determinants domains model (Figure 2) follows the format and legacy work of Gee et al. (2014) and Dudgeon et al. (2017, 2020) in the development of the SEWB model, and the cultural and social determinants of health domains of the Mayi Kuwayu National Study of Aboriginal and Torres Strait Islander Wellbeing (Mayi Kuwayu 2014). The domains proposed in this preliminary model (Figure 2) differ from non-BlaQ cultural, social and political determinants domains, through focusing on the specific requirements for BlaQ self-determination.

The BlaQ cultural determinants domains that are presented in Figure 2 are elaborated in Table 2, including the benefits they provide for BlaQ self-determination. Similarly, the BlaQ social determinants domains that are presented in Figure 2 are elaborated in Tables 3a and 3b, including the benefits they provide for BlaQ self-determination. BlaQ political determinants domains that are presented in Figure 2 are elaborated in Table 4, including the benefits they provide for BlaQ self-determination. Benefits of BlaQ self-determination (Table 2) were developed reflecting the inter-related connections between the domains of SEWB as identified by Dudgeon et al. (2017) and concepts of BlaQ self-determination as proposed by Evans (2025).

BlaQ cultural determinants

Six key themes for BlaQ cultural determinants are represented in Table 2: 1. BlaQ mobs/collectiveness,





Queer Indigenous Standpoint Theoretical Framework (Evans 2025)	MUSHROOMS steps (Phelan 2025)	Theme emergence through yarning
	1. Map literature Determinants of health: general social, social and cultural for mob, gendered, sexual orientation/LGBTIQ+, disability, justice and political	Exclusion of BlaQ perspectives in the cultural, social and political determinants of health
	2. Basic coding Preliminary understanding of the literature to create outputs and frameworks that understand the connections and communities of knowledge for BlaQ cultural, social and political determinants of health and gaps for BlaQ self-determination	Requirements for BlaQ strong culture and health
	3. Merging and strengthening Key themes and patterns that strengthen and decolonise cultural, social and political determinants of health and the advancement of self-determination for BlaQ peoples and communities by positioning relationality	BlaQ justice, health, equity, safety and solidarity through BlaQ growth, belonging, thriving, decolonisation and transformation
	4. Honouring Indigenous ways and wisdom to facilitate and support data processing Focused and iterative yarning, and creative collaborative Indigenous processes to illustrate potential visual representations and options for a preliminary model for BlaQ cultural, social and political determinants domains	BlaQ dignity and community strength, uniting BlaQ mind, body, spirit, culture, Country and kinship
	5. Refresh and reinvigorate Indigenous wisdom to review, sort and consolidate themes and identify deeper meanings, implications and benefits of cultural, social and political determinants domains for BlaQ self-determination	Full BlaQ participation in cultural life, supporting cultural diversity, deep wellbeing and healing, BlaQ strength, autonomy and growth
	6. Defining and naming Clarify themes and sub-themes for the BlaQ cultural, social and political determinants domains and analyse and clarify their benefits for BlaQ self-determination, in the form of tables	Strategies for addressing BlaQ self-determination
	7. Expansion of consciousness Review and refine the preliminary model, and seek clarity and consistency between the final model and the domains tables from multidimensional vantage points and positions	Strong BlaQ culture benefits from BlaQ social, economic and political self-determination
	8. Consolidation and preparation Complete and make visible the final preliminary model woven with the social and political determinants domains tables	Strong BlaQ health benefits from BlaQ solidarity, cultural inclusiveness, justice, equity and safety
	9. Knowledge sporing Expression of final preliminary model and domains with safety and accessibility able to provide foundations for further application, validation and critique	Invitation for others to contribute to improving BlaQ health and wellbeing
The term 'BlaQ' is respectfully used to describe Queer and Gender Diverse (QGD) Indigenous Australian people, Aboriginal and/or Torres Strait Islander LGBTIQ+ Peoples, LGBTIQ+ mob, or other terms that Queer mobs use for articulations and expressions of self, acknowledging that the term 'BlaQ' is used by some. The terms 'mob' and 'Blak' are respectfully used to refer to Aboriginal and Torres Strait Islander Peoples as a collective whilst acknowledging that it is not a positively reclaimed term by all First Peoples (see Carlson et al. 2014; Evans 2023a).		

Table 1: Indigenous analysis method steps

family, kinship and community; 2. BlaQ ways of knowing, beliefs and knowledges; 3. BlaQ ways of being and doing, cultural identities, expressions and bodies; 4. BlaQ self-determination, justice, equity and safety, Eldership and leadership; 5. BlaQ lifeworlds, creativity, flexibility, respect and obligations; and 6. BlaQ connections to Country and safe places.

BlaQ social determinants

Eight key themes for BlaQ social determinants are represented in Tables 3a and 3b: 1. Access to culturally safe, intersectional, inclusive and affirming healthcare; 2. Legal recognition, rights and justice protections; 3. Cultural inclusion, connection to Country, culture and community; 4. Social acceptance, safety and freedom



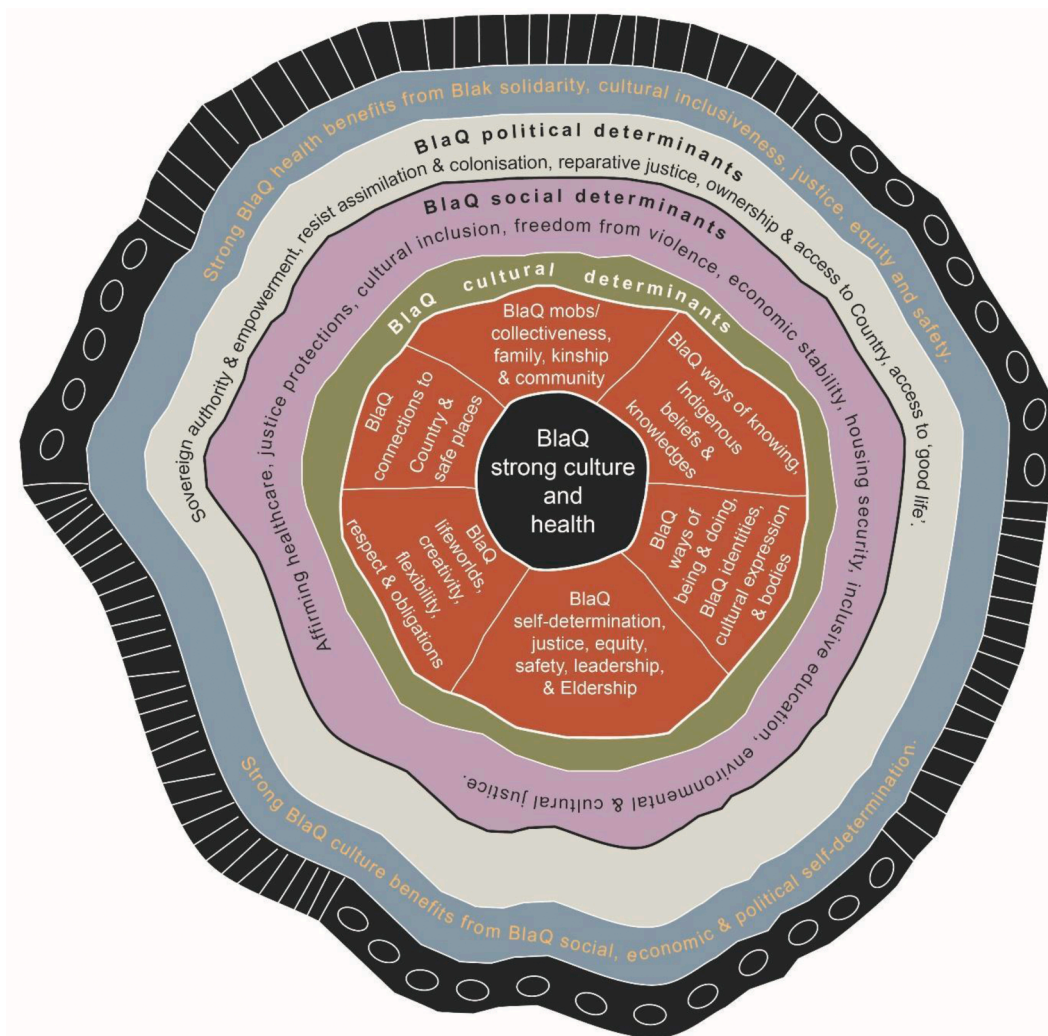


Figure 2: Preliminary BlaQ cultural, social and political determinants domains.

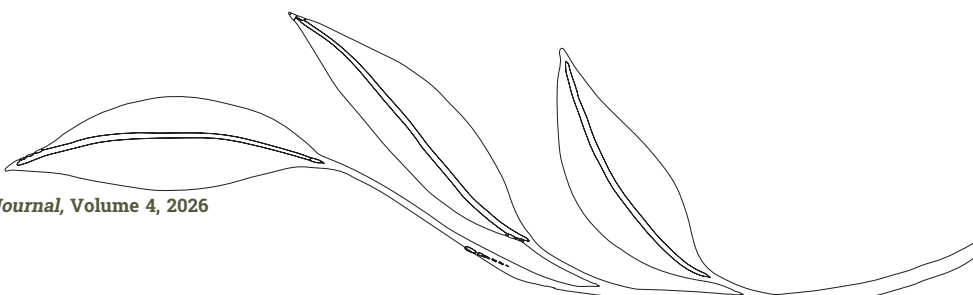
from violence; 5) Economic stability and employment equity; 6) Housing security and safe environments; 7) Education and inclusive knowledge systems; and 8) Environmental and cultural justice.

BlaQ political determinants

Five key themes for BlaQ political determinants are represented in Table 4: 1. Sovereign authority and empowerment; 2. Resist assimilation and colonisation; 3. Reparative justice; 4. Ownership and

access to Country; and 5. Substantive access to good health and wellbeing.

As preliminary findings, each determinants domain will require future exploration and unpacking. Although acquiring justice for BlaQ bodies in each of these domains presents significant challenges due to sustained stigma, discrimination, violence and lack of legal rights (Briskman et al. 2022; Phelan 2023), further work is essential for BlaQ health and self-determination.





BlaQ cultural determinants domain ^a	Benefits for BlaQ self-determination
BlaQ mobs/collectiveness, family, kinship and community	A sense of belonging and acceptance, BlaQ identity, security and stability through family, kinship and community are critical for BlaQ connections, existence and secure identity. Cohesive communities can be strengthened and unified, when cultural diversity is respected and the rights of BlaQs to make contributions to collective decisions are provided.
BlaQ ways of knowing, beliefs and knowledges	BlaQ spirituality can bring strength, deep wellbeing and healing, give meaning to BlaQ life and nurture BlaQ identity. Being able to exercise and pass on BlaQ ways of knowing, beliefs and knowledges can unite BlaQ mind, body, spirit, culture, Country and kinship ties.
BlaQ ways of being and doing, cultural identities, expressions and bodies	The BlaQ body is interconnected with mind and spirit, requiring good health for all of these. Safe and respected BlaQ expression and actions of cultural identity and being and doing are essential to keeping BlaQ bodies and minds healthy. Being able to share, celebrate, connect BlaQ bodies and minds through cultural practice and expression can help keep BlaQ bodies physically and emotionally well, allowing for full participation in cultural life.
BlaQ self-determination, justice, equity and safety, Eldership and leadership	Receiving BlaQ justice, health equity, safety and solidarity whilst maintaining strong BlaQ culture and identity are fundamental to BlaQ self-determination. Being able to freely grow and belong as BlaQs through thriving, flourishing, healing, decolonisation and transformation is essential for BlaQ wellbeing. BlaQ sovereignty and self-determination are supported by Blak/Q solidarity, cultural inclusiveness and custodial belonging.
BlaQ lifeworlds, creativity, flexibility, respect and obligations	Strengthening and reclaiming BlaQ/k cultures and lifeworlds allows for diversity in cultural expression and can be a great strength and central to BlaQ wellbeing. BlaQ expression through culture and creativity can give meaning to life and be central to healing and keeping BlaQ bodies safe and well. Being able to acquire new BlaQ knowledges and meaning-making can help develop and strengthen identity and bring a sense of BlaQ pride.
BlaQ connections to Country and safe places	Being able to connect with and care for Country in safe and respectful ways can promote BlaQ dignity, engender a strong sense of BlaQ identity and belonging, strengthen wellbeing, and build community strength.

The term 'BlaQ' is respectfully used to describe Queer and Gender Diverse (QGD) Indigenous Australian people, Aboriginal and/or Torres Strait Islander LGBTIQ+ Peoples, LGBTQIA+ mob, or other terms that Queer mobs use for articulations and expressions of self, acknowledging that the term 'BlaQ' is used by some. The terms 'mob' and 'Blak' are respectfully used to refer to Aboriginal and Torres Strait Islander Peoples as a collective whilst acknowledging that it is not a positively reclaimed term by all First Peoples (see [Carlson et al. 2014](#); [Evans 2023a](#)). The term 'BlaQ/k' is used respectfully to acknowledge both BlaQ and Blak mobs, recognising them as related but distinct identities. ^aData derived from literature review; see accompanying BlaQ reflexive literature review for full references.

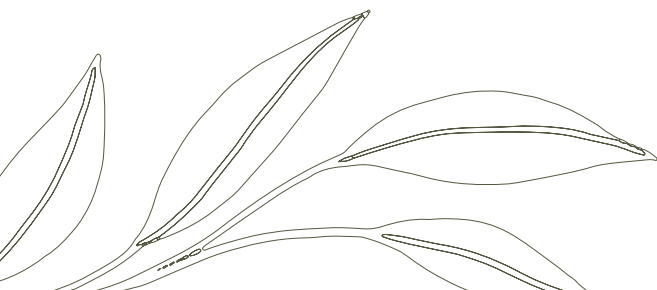
Table 2: BlaQ cultural determinants domains and their benefits for BlaQ self-determination

Discussion

BlaQ health equity, empowerment and self-determination: a preliminary model for action

BlaQ cultural, social and political determinants of health are required for BlaQ self-determination. They are interconnected determinants of BlaQ health and

wellbeing, and each requires consideration to achieve and deliver BlaQ health equity, empowerment and self-determination. The preliminary model for BlaQ cultural, social and political determinants domains (Figure 2) integrates the cultural, social and political domains, but the tables (2, 3a and 3b and 4) separate





BlaQ social determinants domain ^a	Benefits for BlaQ self-determination
Access to culturally safe, intersectional inclusive and affirming healthcare	Culturally safe, gender-affirming and inclusive healthcare services are critical for the mental, physical, social and spiritual health of BlaQ people. A healthcare system that values Indigenous healing practices alongside gender-affirming care is crucial to reducing health inequities.
Legal recognition, rights and justice protections	Legal protections impact access to healthcare, education, employment and housing, all of which are foundational to health security. Protections against discrimination or recognition of gender identity decreases vulnerability and marginalisation. Justice-oriented policies that recognise Indigenous sovereignty and protect against intersectional discrimination create safer environments that uphold the rights, dignity and health of BlaQ people.
Cultural inclusion, connection to Country, culture and community	Cultural connection provides a profound source of resilience, healing and belonging. BlaQ people often navigate complex cultural landscapes and settings, balancing identity within and outside cultural frameworks. Access to inclusive spaces, where both Queer and Indigenous identities are affirmed, strengthens mental health, self-worth and a sense of belonging, reinforcing a holistic sense of wellbeing.
Social acceptance, safety and freedom from violence	BlaQ people experience high rates of interpersonal and structural violence due to racism, homophobia and transphobia, often resulting in trauma and mental health challenges. Efforts to increase safety and social acceptance such as inclusive policies, public education and community-led initiatives reduce harm and foster environments where individuals feel secure, respected and valued.

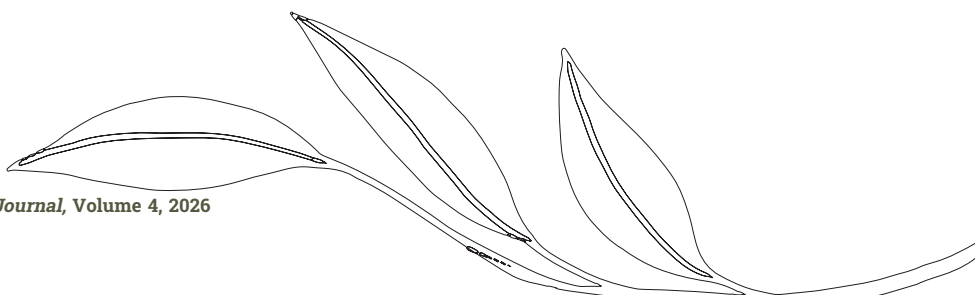
The term 'BlaQ' is respectfully used to describe Queer and Gender Diverse (QGD) Indigenous Australian people, Aboriginal and/or Torres Strait Islander LGBTIQ+ Peoples, LGBTQIA+ mob, or other terms that Queer mobs use for articulations and expressions of self, acknowledging that the term 'BlaQ' is used by some. The terms 'mob' and 'Blak' are respectfully used to refer to Aboriginal and Torres Strait Islander Peoples as a collective whilst acknowledging that it is not a positively reclaimed term by all First Peoples (see [Carlson et al. 2014](#); [Evans 2023a](#)). ^aData derived from literature review; see accompanying BlaQ reflexive literature review for full references.

Table 3a: BlaQ social determinants domains and their benefits for BlaQ self-determination

them so as to fully understand the strengths and benefits that they can bring for self-determination. This approach allows for more in-depth comprehension of the complex nature of the intersectionality of BlaQ lifeworlds and the fundamental requirements for BlaQ strong culture and health. In this regard, the model works two ways: firstly, to provide self-determination for BlaQ bodies through describing the cultural determinants; and secondly, highlighting BlaQ health and pathways towards health equity through the social and political determinants. This method

of integrating BlaQ cultural, social and political determinants and identifying their benefits for BlaQ self-determination creates a preliminary model for action for BlaQ health equity, empowerment and self-determination.

The significance and value of this preliminary model for action demonstrates multiple benefits for BlaQ bodies and also for Blak bodies. The model (Figure 2) argues that strong BlaQ health benefits from Blak solidarity, cultural inclusiveness, justice, equity and safety. It also states that strong BlaQ





BlaQ social determinants domain ^a	Benefits for BlaQ self-determination
<p>Economic stability and employment equity</p> <ul style="list-style-type: none"> • Access to stable, fair and affirming employment is a key determinant of health, providing financial security and independence • Employment equity encompasses the removal of discrimination barriers and the support of employment opportunities that value the intersectional experiences of BlaQ people 	<p>Economic stability provides access to essential resources like housing, healthcare and nutritious food. BlaQ people often face barriers to employment due to intersecting biases, impacting financial stability and quality of life. Policies and programs that promote fair hiring practices, wage equity and inclusive workplaces help mitigate financial stress and improve overall wellbeing.</p>
<p>Housing security and safe environments</p> <ul style="list-style-type: none"> • Secure, affordable and culturally safe housing is essential for health and independence • Housing security includes protections against discrimination and the availability of housing environments that affirm both Indigenous and Queer identities 	<p>Housing instability and discrimination in housing markets disproportionately affect BlaQ people, increasing risks of homelessness, mental health distress and social exclusion. Safe and secure housing promotes stability, fosters mental health and provides a foundation for meaningful participation in society. Community-led housing solutions and policies that protect against housing discrimination are essential for BlaQ people.</p>
<p>Education and inclusive knowledge systems</p> <ul style="list-style-type: none"> • Access to inclusive education that respects Indigenous identities and supports gender diversity is foundational for long-term health and empowerment • Education that incorporates Indigenous knowledge systems, histories and gender diversity fosters positive identity development and mental health 	<p>Inclusive education that reflects the experiences of BlaQ people builds health literacy, self-advocacy skills and empowerment. By validating intersecting identities, education can help mitigate internalised stigma and discrimination, setting a foundation for healthier lives. Supportive school policies, inclusive curricula and cultural representation in education enhance health outcomes and social cohesion.</p>
<p>Environmental and cultural justice</p> <ul style="list-style-type: none"> • Environmental and cultural justice for BlaQ people encompasses the right to a safe environment, clean resources and respect for cultural practices tied to Country • Acknowledgement of the impact of environmental degradations on Indigenous communities and the cultural significance of Country to wellbeing is required 	<p>Environmental justice is central to Indigenous health, as environmental degradation disproportionately affects Indigenous lands and communities. Cultural justice, including the protection of cultural practices and traditional knowledges, also plays a vital role in health. Ensuring Indigenous control over land and resources, as well as protecting cultural practices, supports environmental and cultural resilience, which in turn nurtures physical, mental and spiritual health.</p>

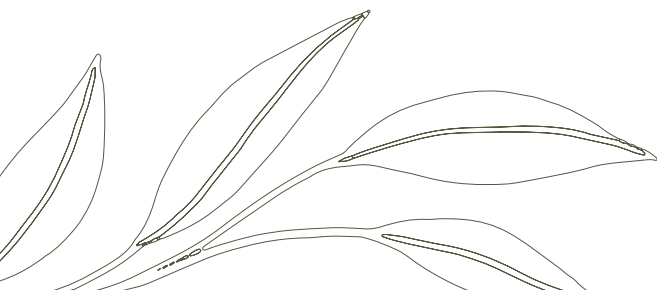
The term 'BlaQ' is respectfully used to describe Queer and Gender Diverse (QGD) Indigenous Australian people, Aboriginal and/or Torres Strait Islander LGBTQIA+ Peoples, LGBTQIA+ mob, or other terms that Queer mobs use for articulations and expressions of self, acknowledging that the term 'BlaQ' is used by some. The terms 'mob' and 'Blak' are respectfully used to refer to Aboriginal and Torres Strait Islander Peoples as a collective whilst acknowledging that it is not a positively reclaimed term by all First Peoples (see [Carlson et al. 2014](#); [Evans 2023a](#)). ^aData derived from literature review; see accompanying BlaQ reflexive literature review for full references.

Table 3b: BlaQ social determinants domains and their benefits for BlaQ self-determination

culture benefits from BlaQ social, economic and political self-determination. This is a positive, strengths-based approach where the collaboration of BlaQ/k lifeworlds brings multiple benefits for solidarity and combined Indigenous self-determination.

This preliminary model has the potential to address the exclusion of BlaQ perspectives in cultural, social and political determinants of health. Further, the model provides inclusive strengths-based benefits of cultural, social and political determinants domains

and has potential to contribute to the SEWB model ([Gee et al. 2014](#); [Dudgeon et al. 2017, 2020](#)) through the addition of BlaQ lifeworlds. Likewise, it aligns with the existing principles of cultural determinants of health, by providing stronger connections for BlaQ bodies to culture and Country, building 'stronger individual and collective' BlaQ identities, a sense of BlaQ self-esteem and resilience, and 'improved outcomes across the other determinants of health, including education, economic stability and community safety' (Professor Ngjare Brown in [Lowitja 2020a](#), p.13).





BlaQ political determinants domain ^a	Benefits for BlaQ self-determination
Sovereign authority and empowerment <ul style="list-style-type: none"> BlaQ self-determination in the absence of treaties Equal and respectful polity-to-polity relationships with the state Self-governance enabling positive cultural, social and political conditions to enable BlaQ health and wellbeing to flourish BlaQ people able to freely pursue economic, social and cultural development 	Exercising BlaQ self-determination and self-governance provides culturally distinctive social and political conditions for flourishing BlaQ lives and wellbeing. Equal and respectful polity-to-polity relationships between BlaQ communities and the state reinforce BlaQ sovereign authority and empowerment.
Resist assimilation and colonisation <ul style="list-style-type: none"> BlaQ resistance to assimilation and colonisation Maintain BlaQ cultural continuity, values, principles, practices and traditions Exercise BlaQ autonomy 	BlaQ resistance to assimilation and colonisation strengthens BlaQ autonomy, connections to BlaQ communities, and growth and continuity of BlaQ values, principles, practices and traditions.
Reparative justice <ul style="list-style-type: none"> Just political relationships with BlaQ people Equal political authority and social participation of BlaQ people Respectful democratic participation in policy-making Rebalance of power and control over Indigenous affairs for BlaQ people 	Ensuring just political relationships, equal political authority and social participation in policy-making is fundamental to erasing the politicisation of BlaQ bodies and eliminating laws and policies that negatively impact on BlaQ health and wellbeing. Makes safe space for a rebalance of power in BlaQ Indigenous affairs.
Ownership and access to Country <ul style="list-style-type: none"> BlaQ participation in the ownership, access and management of Country Control resources that are vital to BlaQ bodies 	BlaQ inclusion in community ownership, access and management of Country strengthens caring for Country, control and protection of resources and BlaQ connections to Country.
Substantive access to good health and wellbeing <ul style="list-style-type: none"> BlaQ self-determination in healthcare Non-rationing of health resources to BlaQ people Integration of clinical with non-clinical determinants of health for BlaQ care BlaQ culturally responsive service delivery Pathways for realisation of BlaQ health goals 	Provision of pathways for self-determined, culturally responsive BlaQ healthcare is essential to ensuring substantive and equitable realisation of BlaQ good health and wellbeing.

The term 'BlaQ' is respectfully used to describe Queer and Gender Diverse (QGD) Indigenous Australian people, Aboriginal and/or Torres Strait Islander LGBTIQ+ Peoples, LGBTQIA+ mob, or other terms that Queer mobs use for articulations and expressions of self, acknowledging that the term 'BlaQ' is used by some. The terms 'mob' and 'Blak' are respectfully used to refer to Aboriginal and Torres Strait Islander Peoples as a collective whilst acknowledging that it is not a positively reclaimed term by all First Peoples (see Carlson et al. 2014; Evans 2023a). ^aData derived from literature review; see accompanying BlaQ reflexive literature review for full references.

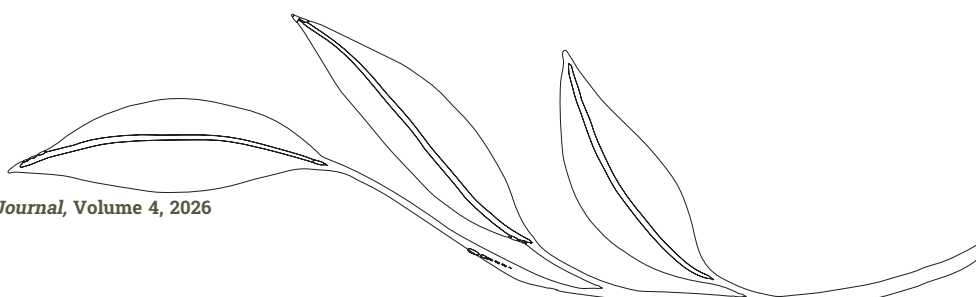
Table 4: BlaQ political determinants domains and their benefits for BlaQ self-determination

Benefits for BlaQ self-determination

In the absence of legal rights for the self-determination of BlaQ bodies (Briskman et al. 2022), the cultural determinants domains of this model offer a sense of BlaQ belonging, acceptance, security, stability and nurturing of BlaQ identity. It promotes BlaQ justice, health, equity, safety and solidarity through making space for BlaQ growth, belonging and thriving, decolonisation and transformation, promoting BlaQ dignity and community strength. This model unites BlaQ mind, body, spirit, culture, Country and kinship through seeking full BlaQ participation in cultural life whilst offering cultural diversity, deep wellbeing and healing. All of these are essential to BlaQ self-determination.

The social determinants domains of this model highlight implications for society, health systems and health practices/practitioners in order for BlaQ self-determination to be realised. It provides a preliminary model for action that seeks culturally safe, gender-affirming and inclusive healthcare, education, employment and housing. Additionally, it urges protections for BlaQ bodies against intersectional discrimination, vulnerability, marginalisation and unsafety, and requests affirmation, respect and valuing of BlaQ identities, cultural and environmental justice.

The political determinants domains of this model foreground the importance of BlaQ self-determination and self-governance in ensuring culturally distinctive





social and political conditions for flourishing BlaQ lives. It envisages BlaQ strength, autonomy, growth and safety through BlaQ resistance to assimilation and colonisation, whilst focusing on connections to BlaQ community, values and traditions. Critically, it aims to erase the politicisation of BlaQ bodies, and laws and policies that prevent substantive and equitable realisation of BlaQ good health and wellbeing.

The proposed model requires further consideration with free, prior and informed consent, self-determination and leadership of BlaQ/k peoples, so as to define, design and implement according to their aspirations. After such consideration, the development of culturally validated tools to identify the risk and protective factors that affect BlaQ people, their families and communities across the domains proposed in this model may be appropriate. The National Aboriginal and Torres Strait Islander Health Plan 2021-2031 ([Australian Government 2021](#)) calls for a strategic approach for updating and implementing social and emotional wellbeing, including complex interactions of broader social determinant influences and the diverse needs of BlaQ communities. Other key objectives are to: a) identify and eliminate racism against BlaQ people; b) ensure access to person-centred, culturally safe and responsive acute care with trauma-aware and healing informed approaches for BlaQ people; and c) ensure that BlaQ people with lived experience are at the centre of the development and delivery of mental health and suicide prevention services ([Australian Government 2021](#)). This preliminary model addresses these objectives and provides self-determining principles and a strategic approach to addressing them. The authors invite application and critique of this preliminary model to deliver the culturally informed evidence base required to drive improved policies and programs for BlaQ people. Further actions such as these are required to

enable practitioners, service providers, health systems and policy makers to improve BlaQ health and wellbeing outcomes.

Limitations and future research

This preliminary model has been developed building on the SEWB and the Mayi Kuwayu cultural and social determinants of health models, and using a Queer Indigenous Standpoint Theoretical Framework, and a BlaQ reflexive literature review and analytical approach. Whilst the model provides foundational insights for BlaQ cultural-social-political determinants of health and BlaQ self-determination, it is acknowledged that this work has limitations. Future research is recommended to capture the breadth of diverse BlaQ voices, lived experiences and lifeworlds, to progress the model and enable BlaQ self-determination. This may include culturally validated tools and approaches that are BlaQ led. Future research is also recommended on BlaQ bodies and the commercial determinants of health, and how these intersect with cultural-social-political determinants of BlaQ health and wellbeing, including how this may be integrated into this preliminary model.

Conclusions

This model for BlaQ cultural, social and political determinants of health and wellbeing offers a preliminary approach to understanding and addressing health determinants for Indigenous Queer and gender-diverse people. It recognises that contextualised cultural responsiveness and justice – whether cultural, social, legal, economic, political or environmental – is integral to reducing health disparities. Through interconnecting health determinants, this model is supportive of pathways toward health equity, empowerment and self-determination, grounded in the specific experiences





and strengths of BlaQ people and communities. It is the authors' intention that this model contributes to the positive transformation of BlaQ health, wellbeing and thriving.

Author contributions

JE conceptualised and designed the article, acquired the data and conducted the analysis and interpretation of data; created and illustrated the model including the BlaQ cultural determinants domains; developed the BlaQ political determinants domains; drafted the article and critically revised for important intellectual content; and gave final approval of the version to be submitted. PP acquired the data and conducted the analysis and interpretation of data; developed the preliminary model for action and the BlaQ social determinants domains; drafted the article and critically revised for important intellectual content; and gave final approval of the version to be submitted.

Declaration of interests

Jennifer Evans is an Associate Editor of First Nations Health and Wellbeing – The Lowitja Journal. The authors declare that they have no other known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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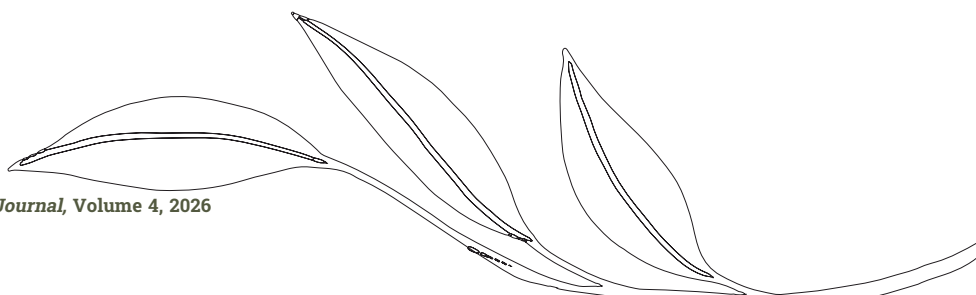
The authors would like to acknowledge that this paper has been written on the unceded sovereign lands of the Palawa Peoples of Lutruwita, and the Wurundjeri Peoples of the Kulin Nation. We pay respect to their

Elders, past and present and to the First Nations Peoples of all countries whose lands are significant. We write as Aboriginal women and/or genderqueer people who identify as lesbian, BlaQ and/or queer researchers. We locate ourselves appropriately within this research with the intent to position and amplify the voices of our communities. We each have an unwavering obligation and commitment to the resistance, interrogation and dismantling of coloniality for the survival and flourishing of all Indigenous People. We thank our dear friend and sista Jacinta Vanderfeen who brought us together to write; may she rest well in the Dreaming.

Author biographies

Jennifer Evans (she/they) is a Queer Dharug scholar with dual connections to Dharug and Palawa Country. They are Professor Aboriginal Health Leadership and Aboriginal Literary Fellow with research expertise in Indigenous and decolonising methodologies. Their leadership and scholarship focuses on health justice and equity for First Peoples and the cultural determinants of health. In 2022, Jennifer won the Tasmanian Premier's Literature Award for their academic work regarding Queer Indigenous voices. They are a transdisciplinary academic who is particularly interested in how BlaQ/k storywork is used as an anti-colonial truth telling methodology for progressing Indigenous self-determination.

Péta Phelan (she/her) is an Aboriginal person with family connections to South-West New South Wales, Australia. A queer, cis-woman with a disability, she is living and thriving as a perpetual guest on the lands of the Wurundjeri Peoples in Naarm (Melbourne). Her academic work is centred in Indigenous social and emotional wellbeing practice specific to Indigenous, QGD and disability communities. Her research and



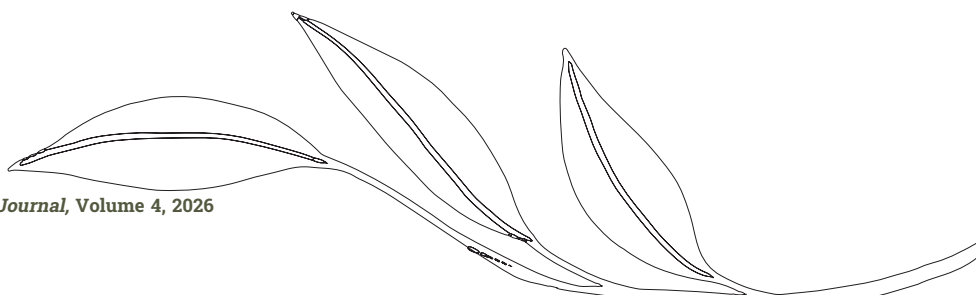
practice is deeply embedded in themes and locales of social justice and liberation, with knowledges and practices explored across her work including areas specific to Indigenous, anticolonial/decolonising, queer and gender diverse, feminist, disability/crip, abolitionist and ecological domains.

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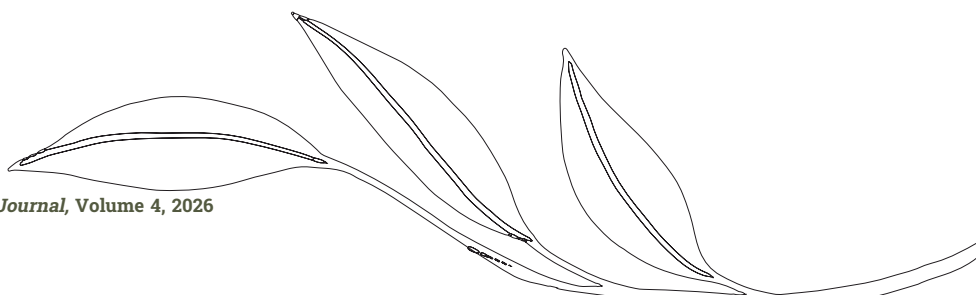


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