

Cancer Institute NSW



NSW Aboriginal Cancer Strategy

Building the Foundations

cancer.nsw.gov.au

Inter-Generational Care
**Caring for
Kin & Country**

Publisher

Cancer Institute NSW

Level 4, 1 Reserve Road,
St Leonards, NSW 2065

Locked Bag 2030
St Leonards, NSW 1590

T: (02) 8374 5600

E: information@cancer.nsw.gov.au

W: cancer.nsw.gov.au

Suggested citation

Cancer Institute NSW. NSW Aboriginal Cancer Strategy, Caring for Kin & Country.
Sydney: Cancer Institute NSW, 2025.

Copyright

© Cancer Institute NSW 2025. This work is copyright. It may be reproduced in whole or part for study or training purposes subject to the inclusion of acknowledgement of the source. It may not be reproduced for commercial usage or sale. Reproduction for purposes other than those indicated above requires written permission from the Cancer Institute NSW.

SHPN (CI) 250578

ISBN: 978-1-74231-173-9 Use for print

ISBN: 978-1-74231-174-6 Use for online

HPRM E25/12027



Acknowledgements

Aboriginal people are the first peoples of Australia and have strong cultures and communities. The Cancer Institute NSW is committed to achieving health equity for Aboriginal peoples in NSW and supporting cancer services to respond to the needs and aspirations of Aboriginal people.

Acknowledgement of Country

We acknowledge the Traditional Custodians of the Countries throughout NSW and Australia and recognise their continuing connection to land, waters and culture. We pay our respects to Elders past and present and acknowledge their unwavering pursuit of self-determination and sovereignty of land that has never been relinquished. We also acknowledge that the information presented in this report reflects the real-life experiences of Aboriginal individuals, families and communities. We extend our respect to those individuals who are referenced in this report and thank the Aboriginal people who generously shared their personal stories with us.

Artwork by Dennis Golding (2016)

The artwork illustrated reflects the Cancer Institute NSW; how it collaborates and shares values with other networks to foster greater knowledge, awareness and success of health services for Australian Indigenous communities.

Kamilaroi/Gamilaraay man, Dennis Golding, is a Sydney-based artist who works as the First Nations Creative Producer at the Australian Design Centre. Completing his Fine Arts Honours program at the University of NSW Art & Design, Dennis has developed a creative practice that explores empowering representations of identity and race.

Acknowledgement of lived experience

The below story is based on a collection of experiences gathered from a Birpai Yarning Session, led by Strong Spirit Services.

Hearing the words “*you have cancer*” is more than a diagnosis. It brings to the surface generations of fear, mistrust and isolation that run deep within our community.

Our first thought is usually “*I’m dying*”. That’s because we all know someone who heard those words too late and left us too soon.

In our community, family support is our backbone. There’s no way we could go through cancer alone. Our kin are the ones who are there with us every step of the way.

But the journey isn’t just hard on the person who is sick. It takes a huge toll on the loved ones too and they deserve much more recognition and support than they get. They carry so much of the burden, often in silence.

The lack of trust between our community and mainstream healthcare fuels our fear and anxiety. We’re worried about whether the system truly understands or can meet our cultural needs.

Some families know people who work in the health system. They’re fortunate to have someone who can help translate the medical talk and smooth out such an overwhelming experience. But we all need and deserve the same level of access to information and support.

It also feels like we just don’t hear enough about cancer screening and early detection. We need more proactive health messages, shared by our own mob, to educate and empower us as a community.

There also needs to be consideration into the social determinants of health, like access to education, which play a huge part in our wellbeing.

We need more Aboriginal-led activities, where our own people are building and driving services that truly meet our needs.

Our reflections don’t start with hearing the words “*you have cancer*”. It’s the experiences of multiple generations that are still impacting us today.

Hopefully, through communication and sharing, we can change the experience for the generations of tomorrow.

Strong Spirit Services
Aboriginal Cancer Support Group

Contents

- 3 Acknowledgements
- 4 Acknowledgement of lived experience
- 6 Forewords
- 10 Caring for Kin & Country
 - Our cancer commitment11
 - Aboriginal cancer conversations12
 - Building the foundations.....13
- 14 Aboriginal cultural determinants
 - Inter-generational journeys15
 - Inter-generational trauma.....16
 - Inter-generational empowerment.....18

- 20 Delivering the Strategy
 - Strategic goal A 20
 - Strategic goal B 24
 - Strategic goal C 28
 - Cancer indicators..... 32
- 36 Appendix
- 42 Symbol key



Forewords

NSW Minister for Health

I am immensely proud to introduce the *NSW Aboriginal Cancer Strategy, Caring for Kin & Country*. This landmark document represents a significant step forward in our commitment to achieving equity in cancer outcomes and fostering inclusive cancer care for Aboriginal people across NSW.

The devastating reality is that in NSW, Aboriginal people are 1.5 times more likely to be diagnosed with cancer and 2.1 times more likely to die from cancer than non-Aboriginal people. This is unacceptable and demands our collective and urgent action.

Caring for Kin & Country acknowledges and recognises how the inter-generational trauma experienced by Aboriginal people has contributed to these distressing statistics.

This Strategy also honours Aboriginal cultural practices and lore. It celebrates how connection, to one another and with Country, can empower communities and improve health outcomes.

Central to this Strategy are the National Agreement on Closing the Gap Priority Reforms. This demonstrates our genuine commitment to changing how we, as government, work in partnership with Aboriginal and Torres Strait Islander people and communities. It is about genuine co-design, shared decision making and respecting the lived experiences of Aboriginal communities.

A cornerstone of our efforts will be boosting and enhancing the Aboriginal cancer workforce across the entire ecosystem. This encompasses everything from initiatives focused on culturally-appropriate cancer screening and prevention, through to compassionate and culturally-safe care that extends beyond a diagnosis. This is not just about jobs, it's about building trust, fostering understanding and ensuring care is delivered with sensitivity and respect.

We also recognise the need for a connected experience for people and their loved ones navigating a cancer diagnosis. This means intentionally linking this workforce

and fostering collaborative pathways from the local level, up to regional and state levels. This will require robust and effective partnerships across community organisations, the not-for-profit sector and between other government agencies.

NSW is unique within Australia as the only jurisdiction with a dedicated cancer control agency and our state benefits immensely from the Cancer Institute NSW's leadership and coordinated approach to addressing the overwhelming impact of cancer. With the Cancer Institute's expertise and dedication, coupled with the insights and guidance embedded within *Caring for Kin & Country*, we will make progress towards a future where Aboriginal people in NSW live healthier, stronger lives.

The Hon. Ryan Park MP

Minister for Health,
Minister for Regional Health
NSW Government





Secretary NSW Health

The launch of *NSW Aboriginal Cancer Strategy, Caring for Kin & Country* reflects a profound understanding that meaningful change flourishes when Aboriginal voices lead and guide the decisions that shape their health and wellbeing.

With this Strategy, we are moving beyond consultation to genuine co-design, ensuring that Aboriginal people are at the centre of decision-making that impacts their health. This means actively listening to, respecting and acting on the expertise of Aboriginal individuals, communities and Aboriginal Community Controlled Health Organisations. Their voices, knowledge and lived experience will be the driving force behind the system reform needed to achieve lasting change.

While progress has been made to close the gap, there is a long way to go. In order to move forward we must acknowledge the past and present realities of inter-generational trauma and eliminate all forms of racism in our health services and workplaces. A person's background, race or otherwise, should never predetermine

their access to care or health outcomes. We all have a role to play in recognising and addressing inequities that Aboriginal people and communities continue to experience. With a shared vision, we will foster a culturally safe environment, where holistic, trauma-informed care is a lived reality for every Aboriginal person.

Central to delivering this Strategy is our remarkable workforce. These talented and dedicated people working in our hospital wards, community centres, laboratories and on the road are delivering care with expert skill and kindness. I specifically want to acknowledge our state's Aboriginal health workforce who set the benchmark for truly person-centred care.

The NSW Aboriginal Cancer Strategy is directly aligned with the *NSW Aboriginal Health Plan 2024–2034* and the *NSW Aboriginal Health Governance, Shared Decision Making and Accountability Framework* by committing to their common principles. This includes honouring Aboriginal culture, ensuring Aboriginal self-determination and cultural safety are

at the core of health services; and holding the NSW health system accountable to improving health outcomes.

This Strategy embodies our pledge to listen and co-create a future where Aboriginal people and generations to come are empowered to determine their own health outcomes. Together, we can build a health system that is not only equitable and accessible, but respectful.

Susan Pearce AM
Secretary
NSW Health





CEO AH&MRC of NSW

As a proud Kamilaroi woman who has dedicated over 25 years to improving the health of Aboriginal and Torres Strait Islander people in Australia, I'm immensely proud to share NSW's first dedicated *Aboriginal Cancer Strategy*.

The Strategy is a roadmap for change, crafted with the guidance and wisdom of Aboriginal communities. It's only by listening to the stories, journeys and experiences of Aboriginal people that we can truly create healthier futures.

This Strategy was created through a powerful partnership between the Aboriginal Health and Medical Research Council (AH&MRC) of NSW and the Cancer Institute NSW. Our collaboration is built on the foundations of mutual respect and a shared commitment to empower Aboriginal people and reduce the impact of cancer in our communities.

What you will see throughout this Strategy is the important role of the Aboriginal health workforce, both in mainstream health services and within our ACCHOs.

These professionals provide not only exceptional care but improve the overall experience of people with cancer and their loved ones – in turn, breaking down barriers and generations of trauma. Their expertise, cultural knowledge and deep-seated community connections are invaluable; and their work will create a ripple effect of improved health and wellbeing for generations to come.

In line with the priority reforms of Closing the Gap, we are not simply aiming to reduce disparities, we are working towards genuine health equity. This means ensuring programs and activities are accessible and relevant; strengthening the services providing support across the cancer continuum; tackling racism and embedding cultural safety at the highest levels of government and improving the visibility and access of data.

The themes of this Strategy are profoundly personal to me. As a mother and grandmother and one of the few qualified Aboriginal nutritionists in Australia, I know the importance of promoting inter-generational care. When we make healthier

lifestyle choices and seek knowledge to better manage our health, others across generations will be motivated to do the same. We all have a responsibility to make small choices that will grow into wider change.

We are grateful to the many Aboriginal people who contributed their experiences and wisdom to this Strategy. Their vulnerability and openness have made this Strategy one that reflects the true spirit of hope.

**Adjunct Professor
Nicole Turner**

Chief Executive Officer
AH&MRC of NSW





CEO Cancer Institute NSW

NSW Aboriginal Cancer Strategy: Caring for Kin & Country is a testament to the power of partnerships, the importance of listening and the strength of the world's oldest culture.

We understand that individuals have the power to influence their peers and their family and help create healthier communities. In developing this Strategy, we heard this loud and clear. *Caring for Kin & Country* champions the understanding that everyone has a cultural responsibility not only to be healthy themselves, but to support their kin to do the same. It also celebrates how connection, to one another and with Country, can empower communities and improve health outcomes.

I am indebted to the individuals and community groups whose powerful lived experiences shaped this document. To ensure this first *NSW Aboriginal Cancer Strategy* is grounded in the voices of Mob, we captured the perspectives of Aboriginal cancer survivors, carers, community and healthcare workers through 16 local Aboriginal Cancer Conversations, four regional webinars and more than 100 digital submissions.

From these consultations, we heard about gaps in promoting healthy behaviours and improving health literacy.

We also heard how hearing others' experiences of cancer and their interaction with the health system provides invaluable support and demystifies a complex process.

Our activities will require true partnerships across the state, between government and Aboriginal Community Controlled Health Organisations, the not-for-profit sector and community. These partnerships are the foundation upon which sustainable change will be built.

While achieving equitable cancer outcomes for Aboriginal people in NSW is a longstanding priority under the *NSW Cancer Plan*, this Strategy aims to embed a truly collaborative and community-led approach. This Strategy will take us to 2027. Ongoing, there will be a dedicated *NSW Aboriginal Cancer Strategy* that complements future *NSW Cancer Plans*.

This Strategy and those to follow, are inextricably linked to the *NSW Aboriginal Health Plan 2024-2034* and the National

Agreement on Closing the Gap. We are committed to contributing meaningfully to these critical aspirations, focusing our efforts on tangible improvements in health and wellbeing that directly address the disparities faced by Aboriginal people.

The Cancer Institute NSW is proud to have worked hand in hand with the Aboriginal Health and Medical Research Council (AH&MRC) of NSW and local health districts to deliver this Strategy and I want to thank them for their wisdom and valued input.

The injustices of the past cannot be overlooked or understated, but together we will embark on this journey forward with courage and compassion.

Professor Tracey O'Brien AM

NSW Chief Cancer Officer and
Chief Executive Officer
Cancer Institute NSW



Caring for Kin & Country

“ Sharing information
to help keep all of us
strong and well.

—Elder

Our cancer commitment

In Aboriginal culture, knowledge is shared by listening to the stories and experiences of others. In recognition of this, the *NSW Aboriginal Cancer Strategy* was built upon the foundations of story telling and written in a way to honour inter-generational sharing.

This Strategy harnesses and builds on the perspectives expressed by Aboriginal people, communities and Aboriginal Community Controlled Health Services collected to shape existing national and state plans. This foundational cancer strategy both complements and expands on these existing commitments.

Caring for Kin & Country is aligned with the priorities of the *NSW Cancer Plan 2022-2027* and the *National Aboriginal and Torres Strait Islander Cancer Plan*. By linking actions to these priorities, the Strategy ensures consistency and accountability across state and national levels.

Its focus is also guided by the success measures and priorities of the *NSW Health Aboriginal Health Plan 2024-2034* and its *First Horizon Implementation Plan 2025-2027*, in which the Institute is the lead for three actions. This alignment will allow the Institute to prepare an annual *NSW Aboriginal Cancer Report* in the future.

Together, these plans provide a strong foundation and connect the Strategy to other key documents including *NSW Regional Health Strategic Plan 2022-2032* and *Future Health*, ensuring that Aboriginal cancer priorities remain part of the broader health system.

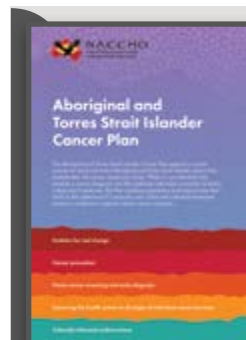


These circles are used to show alignment to these state and national plans. Each activity has been digitally linked to these documents.

NSW Aboriginal Cancer Strategy alignment



A plan for NSW to lessen the impact of cancers



Close the gap in cancer outcomes



Sharing power in system reform

Aboriginal cancer conversations

We ensured everyone could help shape the Strategy through Aboriginal cancer conversations across NSW, using three approaches: engaging diverse groups, meeting in different locations and employing varied communication channels.

It was from these conversations that caring for kin and Country emerged as a key theme, particularly when individuals were sharing their emotive stories about the impact of cancer on their children, their partners and their families.

These conversations reinforced the need to ensure the messages we

are attempting to communicate to Aboriginal people and Aboriginal communities are built around the person (the individual) and/or people (groups) and place (community/Country), instead of specific cancers.

Aboriginal cancer conversations provided a unique and safe environment for individuals, peers and groups to share their personal stories as cancer survivors and cancer carers; as well as an opportunity to garner key insights into how to better inform our mob of the importance of cancer prevention and cancer screening.

Through individuals sharing their stories there were consistent messages of feeling a sense of isolation and alienation, whether this was the cancer clinic environment and/or the language being used by cancer clinicians.



The above three symbols represent the three levels of actions within the three strategic goals of this Strategy.

Listening and learning through Aboriginal cancer conversations

Local community members

- Cancer information
- Cancer support
- Cancer services

Regional webinars

- Cancer workforce
- Cancer centres
- Cancer clinicians

Digital platform

- Cancer prevention
- Cancer screening
- Cancer treatment

Building the foundations

The *NSW Aboriginal Cancer Strategy* outlines the infrastructure required to co-create solutions and instil authentic shared decision making, as well as the instruments required in partnering and transforming the cancer incidence and mortality rates of Aboriginal people in NSW.

A key instrument for the Strategy will be the development and delivery of the *Local Aboriginal Cancer Implementation Plans*, as well as the integration of this Strategy with the Institute's existing plans.

This Strategy also recognises the importance of the cancer workforce to

support Aboriginal people impacted by cancer and specifically, an Aboriginal healthcare workforce that is integrated and coordinated across the state, regional and local levels. The implementation plans will require the enhancement and embedding of the Aboriginal Cultural Framework. It's important the information, education and communication being designed either as health literacy and/or health promotion instruments instil the message of caring for kin and Country. It's in this way that sons, daughters, nieces and nephews encourage their mothers, fathers, aunties, uncles and grandparents to participate in cancer screening programs. In the same way,

the older generation will reinforce and share healthy living messages to reduce the younger generation's risk of developing cancer.



These two symbols across 27 measures and actions represent the necessary infrastructures and instruments to drive effective change within the Aboriginal Cultural Framework.

Caring for kin and Country across the cancer continuum of care

Points of care

Cultural respect
Cultural safety

Continuity of care

Cultural responsiveness
Cultural capability

Connection of care

Cultural leadership
Cultural accountability

Aboriginal cultural determinants

“It means allowing us to care for kin and Country in our way supported by the trained specialist with culture included at every step on our cancer journey.

–Mother

Inter-generational journeys

Aboriginal people and communities' connection to Country and knowledge transfer across generations has existed in line with cultural ways of communicating, learning and understanding ourselves, history and spiritual wellbeing.

Dispossession and displacement by authorities of Aboriginal people and communities has created disadvantages in Aboriginal life expectancies. Aboriginal people are excluded from educational and employment opportunities compared to the general population.

This systemic approach of exclusion by governments through policies and practices has predominantly established a lack of independent economic prosperity for Aboriginal people and communities, creating generations who haven't been able to fully achieve their potential. People and communities have continued to survive and thrive with the limited instruments available to them, resulting in dependency on a system that struggles to recognise our cultural protocols and practices.

The impact of systemic racism influences the high incarceration rates for Aboriginal men, women and young people. Racism

can also be seen through the continual removal of Aboriginal children from families and communities.

This system dependency and systemic racism across generations contribute to the overall health and wealth of Aboriginal people. The sense of alienation and despair has led to Aboriginal people having significant rates of chronic disease, in particular increased incidence and mortality rates of cancer, where Aboriginal people's life expectancies are 10 years less than the general population.

It is through the resilience of Aboriginal people and communities across generations that we see the Aboriginal Cultural Determinants Model of (1) Individuals, (2) Peers, (3) Families, (4) Communities and (5) Country and recognise the influence and impact of caring for kin and Country.

The *NSW Aboriginal Cancer Strategy* message of caring for kin and Country acknowledges the importance of inter-generational journeys from the past, the present and the future, involving culturally tailored approaches guided by and understanding of inter-generational care.

Caring for kin and Country is inter-generational care

Individuals within communities benefit when they see their cultural identity reflected in accessible, holistic services.

Peers are critical in the way they are able to share knowledge, encourage one another and lead by example.

Families serve as the foundations for instilling cultural values and respect by fostering a sense of belonging.

Communities provide a place and space where everybody can feel safe and secure with cultural support weaved throughout every aspect of life.

Country provides the foundation for Aboriginal people to connect both physically and spiritually to strengthen their health and wellbeing.

Through unity, cultural respect and enduring partnerships, we can strengthen current and future generations to thrive, minimising the burdens of cancer and forging healthier pathways forward.

Inter-generational trauma

Knowing your story

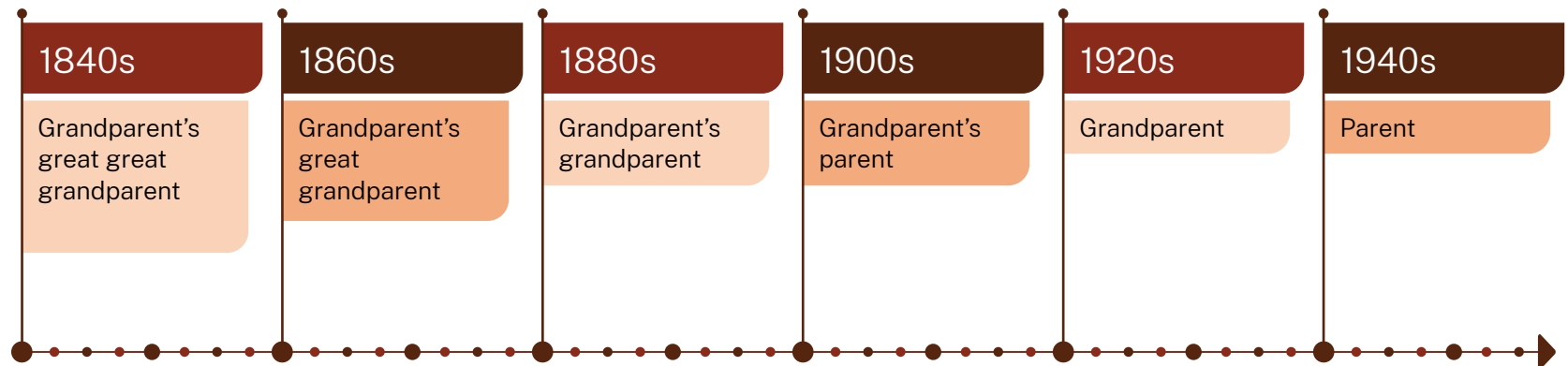
Who you are is influenced by where you are from, how you got there and where you are going – this is your story.

Knowing your own journey means honouring how your present and past walk together. Your story is shaped by lived experience and by the yarns handed down about parents, grandparents and earlier generations – their struggles, strengths and lessons. When you stand back and see that bigger picture, you can map how it influences today's choices, values and responsibilities, including the way you look after kin and Country and the way Country looks after you.

Knowing our stories

Our lived experience contributes to the way that we influence one another as kin – these are our stories.

Our shared history binds Aboriginal peoples through the deep scar of collective trauma. Past policies of dispossession and forced removal echo in every family, leaving disadvantage that still shapes Aboriginal men, women, youth and elders. These inter-generational experiences live with us day by day, influencing health, opportunity and spirit. By naming and understanding our collective journeys we can heal, speak up for change and better care for kin and Country together, always.



Impact of inter-generational trauma

The statistics

Individual cancer statistics

Identity | Inter-generational trauma, societal exclusion and racism have impacted Aboriginal people in many ways. This can be seen in higher cancer incidence and mortality rates, as well as a life expectancy more than 10 years lower than the general population.

5,556 Incidence of cancer
2016–2020

1,941 Mortality of cancer
2016–2020

56% Five-year all cause
survival of cancer

Peers cancer screening

Networks | Exclusion from economic participation and institutional racism have resulted in disengagement and disillusionment. These contributed to lower screening program participation and increased risk factors leading to higher cancer incidence and mortality.

45% Participated in breast
cancer screening

27% Participated in bowel
cancer screening

40% Participated in cervical
cancer screening

Family cancer prevention

Resilience | The past and present experiences of institutional racism and discrimination continue to affect Aboriginal families. This impacts our health literacy on cancer prevention and health messages around cancer risk factors, such as alcohol and tobacco.

71% Aboriginal adults
were non-smokers

57% Consumed alcohol in
recommended levels

34.1% Were a healthy weight

Community health assessments

Connecting | Unemployment, social housing, disadvantage and incarceration create an unhealthy atmosphere, leading to unhealthy behaviour. This increases the likelihood of Aboriginal communities being affected by chronic disease, including cancer.

26% Completed a
health assessment

39% Follow-up services
within 12 months

38% 5–14 year olds completed
a health assessment

Country cultural wellbeing

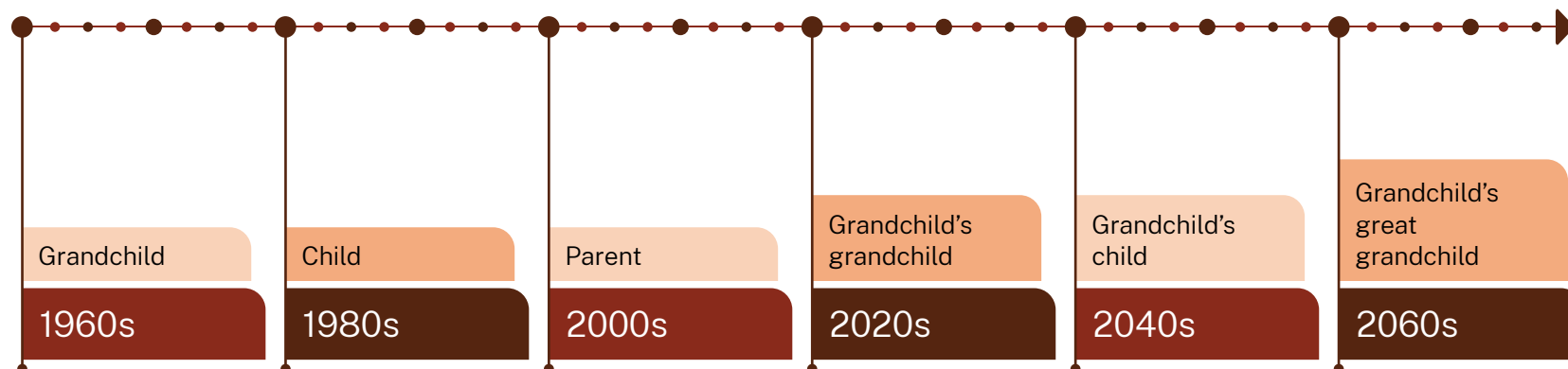
Place | The cultural connection to Country has been impacted by dispossession and displacement. This created disadvantage and disrupted transfer of cultural knowledge, including recognition of cultural protocols and wellbeing within the health environment.

44% Felt affected
by racism

38% Felt their culture was
valued and respected

90% Prefer being around
Aboriginal people

Inter-generational empowerment



Knowing our influence

It's important that we connect with one another and Country to practice our cultural ways of looking, listening and learning – these are our ways.

What you do in life ripples through your group, family and community. Our old ways teach that actions speak louder than words. When you choose healthier lifestyles and seek knowledge to better manage our health, others across generations will notice. Leading by example lifts peers, young ones and elders, building strength, pride and resilience. Together, your choices grow into wider change, supporting us all in caring for kin and Country.

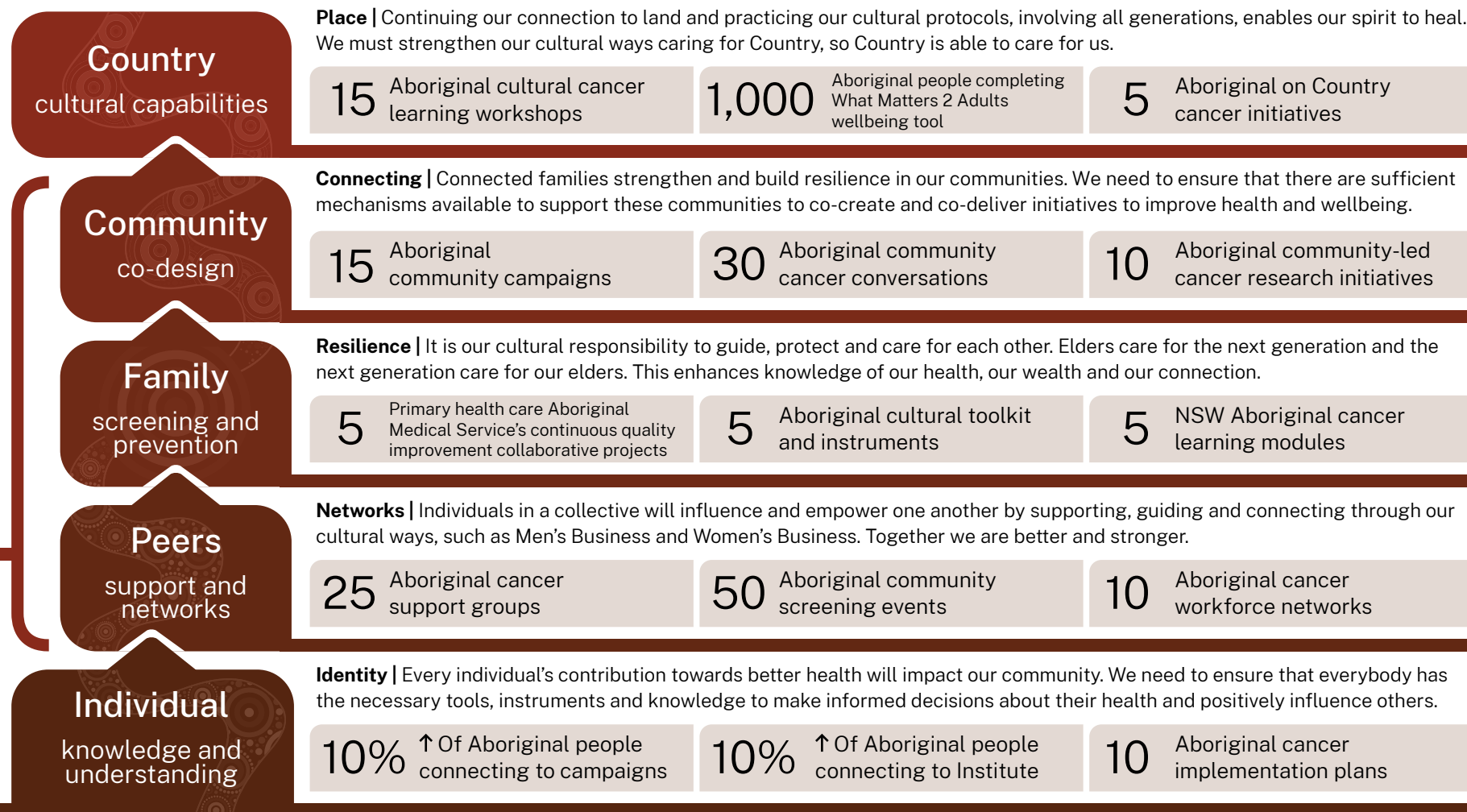
Knowing your impact

We have the opportunity to provide guidance to future generations by leading, learning and influencing their stories – this is your impact.

Caring for kin and Country sits at the heart of our lore: when we look after Country, Country looks after us. Our elders show us that by looking, listening and learning, we gain respect and responsibilities. Strong ties to land and community ground our spirit, guiding and strengthening our ways. Gathering on Country, sharing stories and practising our traditions renew our body, mind and spirit, celebrating the strength of our cultural identity.

Impact of inter-generational empowerment

Indicators of progress



Delivering the Strategy

Strategic goal A

Continuum of care across the cancer ecosystem



State
level



Regional
level



Local
level



Aboriginal Medical Services are so important for providing cultural and clinical wrap around support for our mob and our kin on our cancer journey

–Sister



Adhering to Aboriginal cultural practices and protocols when communicating and engaging with Aboriginal people and providers is essential. Accordingly, we must establish an appropriate mechanism that enhances Aboriginal cultural capabilities across the cancer ecosystem, supporting the continuum of care from prevention to palliative care and from screening to survivorship. This will ensure that cultural safety, respect and equity is present at every stage for individuals, families, kinship groups and the broader community.

AC1



To strengthen investment of time and resources in formal co-creation and shared decision making for meaningful outcomes, in all state level partnership arrangements with Aboriginal people and organisations.

AC1.1



Implement and embed relationship-building shared decision making processes and transparent communications in all state level partnering and contracting arrangements

AC1.2



Establish and implement co-creation opportunities for monitoring and evaluating the cultural safety, accountability and effectiveness of state level partnerships

AC2



Establish and implement co-creation opportunities for monitoring and evaluating the cultural safety, accountability and effectiveness of district level partnerships.

AC2.1



Investigate and implement options for expanding investment in policies, practices and positions that support health system navigation and access for Aboriginal people

AC2.2



Establish and implement co-creation opportunities for monitoring and evaluating social and cultural determinant initiatives, including with priority population groups

AC3



Plan and undertake continuous quality improvement on the NSW Health cultural training program.

AC3.1



Identify and act on opportunities to develop extension learning products that support cultural safety being institutionally embedded across NSW Health

AC3.2



Review and assess the degree to which current services and programs are culturally safe and the mechanisms for doing this, in partnership with Aboriginal people and organisations, including priority population groups



The development and delivery of Aboriginal cancer initiatives require us to connect better in the ways we communicate, collaborate and engage in line with cultural models of care across the cancer workforce spectrum. This will ensure we are able to optimise and maximise the cancer support required through the cancer continuum of care pathway for Aboriginal people.

AC4



To improve accountability, transparency and usability of health data about Aboriginal people.

AC4.1 Support the whole-of-government implementation and respond to findings so Aboriginal people can more easily find, access and use the government-held data they need

AC4.2 Support and contribute to whole-of-government data reforms that address systemic barriers to shared data access and implement findings in a health-specific context, including in Aboriginal health

AC5



Advocate for and/or lead monitoring and evaluation of the effectiveness of redesigned cross-sector collaboration.

AC5.1 Develop and/or source and provide capability strengthening initiatives for the health workforce on monitoring, evaluation and research

AC5.2 Identify and provide opportunities for Aboriginal staff across the health workforce and Aboriginal organisations to lead and/or participate in monitoring, evaluation and research teams

AC6



Map and review government services for Aboriginal businesses and the Community Controlled sector in the cross-sector environment and develop and implement business supports that are more effective, targeted and holistic.

AC6.1 Establish and implement co-creation opportunities for monitoring and evaluating service linkages and care integration enhancement initiatives, including with priority population groups

AC6.2 Identify and address coordination of care, transfer of care and discharge planning issues through existing or new partnerships between LHDs / SHNs and ACCHOs and other primary health care providers



Aboriginal people and communities play a crucial role in achieving better cancer outcomes. Their individual and collective insights, experience and knowledge – shared across generations – place Aboriginal culture at the centre of our work and create a strong platform for improving care today, while shaping healthier futures for the next generations

AC7



To elevate how NSW Health values and invest in the Aboriginal Community Controlled Health (ACCH) sector.

AC7.1



Implement recommendations from the review of funding into the ACCH sector and evaluate the impact of investment

AC7.2



To increase investment in health promotion and early intervention

AC8



Assess health service needs and priorities and agree on resource allocations in partnership with Aboriginal people and organisations.

AC8.1



Identify social and cultural determinants priorities in partnership with Aboriginal people and organisations, including priority population groups

AC8.2



Establish and implement co-creation opportunities for monitoring and evaluating social and cultural determinant initiatives, including with priority population groups

AC9



Identify and address the power differential between NSW Health and the ACCH sector, along with the responsibilities to rebalance this at each level of the health system.

AC9.1



Investigate and address any barriers to Aboriginal people easily accessing and using their health records at any point in their health journey

AC9.2



Develop and/or source and provide capability strengthening initiatives for the health workforce on social and cultural determinants and how they relate to health impacts

Community

3

Strategic
focus

Strategic goal B

Enhancing capabilities to deliver better cancer outcomes



State
level



Regional
level



Local
level



Talking and listening to mob — sharing information and encouraging mob to get checked up

—Brother



A key component of the Strategy is the effective establishment of infrastructures that provide the mechanisms to demonstrate the ways performance is being identified and measured and improve in the way planning, performing and partnering are being developed, delivered and evaluated. This enhances the capabilities at all levels across the cancer continuum of care from prevention to palliative care and screening to survivorship.

BP1



To expand and embed formal Aboriginal health strategic workforce planning at the state, district and service levels with consideration of current and future workforce roles and needs.

BP1.1



Co-create and implement regional and local Aboriginal health strategic workforce plans based on agreed priorities

BP1.2



Establish and implement co-creation opportunities for monitoring and evaluating the progress and effectiveness of regional and local Aboriginal health strategic workforce plans

BP2



Map actions and indicators in existing NSW Health state-wide plans against the Aboriginal Health Plan and identify gaps to be addressed in the Plan's implementation and accountability mechanisms.

BP2.1



Implement and embed relationship building shared decision making processes and transparent communication in all service level partnering and contracting arrangements

BP2.2



Establish and implement co-creation opportunities for monitoring and evaluating the cultural safety, accountability and effectiveness of service-level partnerships

BP3



To improve the understanding and implementation of Indigenous Governance and Sovereignty principles across NSW Health.

BP3.1



Develop and/or resource and provide capability strengthening for the health workforce on Indigenous Data Governance and Sovereignty

BP3.2



Develop and support the implementation of an Indigenous Data Governance and Sovereignty policy with practical procedures or application documents for use within all NSW Health organisations.



In the development of the Strategy, workforce emerged as a consistent theme throughout the various conversations. This focuses on an integrated and coordinated workforce model that enables workers to connect in supporting clients on their cancer journey from the initial point of care through to their continuity of care and connection of care. The design of an NSW Aboriginal Cancer Workforce Network Model across all levels will be a significant outcome in the implementation of the Strategy.

BP4



Map and review existing forums and working groups for integrated cross-sector service planning and delivery and identify overlaps or gaps.

BP4.1 Advocate for and/or lead the re-design of integrated cross-sector forums, working groups and initiatives



BP4.2 Plan an influential role in supporting and informing planning processes of other sectors that intersect with health



BP5



Analyse the effectiveness of NSW Health systems in providing information/data against performance indicators required for monitoring, evaluating and reporting on Aboriginal health outcomes.

BP5.1 Review existing and recent knowledge translation activity and identify how knowledge translation strategies are funded, developed and implemented and with whom



BP5.2 Co-develop and implement practice standards about knowledge translation of monitoring, evaluation and research outcomes into policy and services, in partnership with Aboriginal people and organisations, including priority populations



BP6



Develop and/or source and provide capability strengthening initiatives for the health workforce on what health justice and equity is and how it can be addressed for Aboriginal people, including priority population groups.

BP6.1 Review and assess the health justice and equity of health services, programs and initiatives in partnership with priority population groups



BP6.2 Establish, implement and evaluate organisational health justice and equity initiatives that address health justice and equity gaps or priorities, in partnership with priority population groups





The success of any initiatives to improve outcomes for Aboriginal people need to be co-created from the ground up and involve community members, groups and providers. This approach recognises the uniqueness of Aboriginal communities across NSW, including personal experiences and evidence of the barriers and opportunities to enhance the health and cultural wellbeing of individuals and families, guided by their cultural protocols and practices.

BP7



Explore and agree with Aboriginal people and organisations what and how Aboriginal health data, information and insights are collected and used and how they are shared in a useful form, including with priority population groups.

BP7.1



Investigate and address any barriers to Aboriginal people easily accessing and using their health records at any point in their health journey

BP7.2



Identify, implement and embed opportunities for Aboriginal people to be involved in determining their own health priorities and care pathways

BP8



To strengthen investment of time and resources in formal co-creation and shared decision making for meaningful outcomes in all districts-level partnership arrangements with Aboriginal peoples and organisations.

BP8.1



Review Aboriginal representation in district governance mechanism in partnership with Aboriginal people and organisations and implement the review recommendations

BP8.2



Implement and embed relationship building, shared decision making processes and transparent communication in all district level partnering and contracting arrangements

BP9



Identify and utilise opportunities to invest in and expand ACCH sector models of care and service delivery as best practice across the NSW health system.

BP9.1



Identify co-design and implement flexible and place-based initiatives that facilitate pathways into leadership roles across NSW Health

BP9.2



Identify key barriers to recruitment into and retention of Aboriginal people in NSW Health and develop additional strategies required to address them

Strategic goal C

Improving the development and delivery of service provision



State
level



Regional
level



Local
level



Having a good ally that listens and learns, not only today but everyday by a check up! We can all do better –no shame or blame –just do the screen!

–Aunty



The various systems developing and delivering service provision across the cancer ecosystem require the opportunity to reflect on processes and hear from everybody contributing towards achieving improved cancer outcomes for Aboriginal people. These reflective practices also need to involve Aboriginal clients, carers and families to ensure the system is client centred and community based, with continuous quality improvement embedded into services across the cancer continuum of care.

CS1



Identify opportunities to evaluate, refresh, promote and deliver the product in line with good practice in cultural safety training in partnership with Aboriginal people and organisations, including priority population groups.

CS1.1



Establish, implement and evaluate organisational cultural safety initiatives that address cultural safety gaps or priorities in partnership with Aboriginal people and organisations, including priority population groups

CS1.2



Establish clear, consistent and easily accessible anti-racism policies and procedures across the health system and monitor, evaluate and report on implementation progress in partnership with Aboriginal people and organisations, including priority population groups

CS2



Embed effective and sustainable co-creation into commissioning, design, delivery, monitoring and evaluation.

CS2.1



Establish and implement co-creation opportunities for commissioning, developing and delivering health literacy for individuals, families and communities, including priority population groups

CS2.2



Establish and implement co-creation opportunities for monitoring and evaluating health promotion, prevention and early intervention initiatives, including priority population groups

CS3



To strengthen transparency of NSW Health for funding decisions and resources affecting Aboriginal health, and for achieving improved health and wellbeing outcomes for Aboriginal people.

CS3.1



Establish and implement a transparent system for identifying and reporting on funding decisions and resource allocations affecting Aboriginal health

CS3.2



Embed clear, meaningful targets and outcome measures in relevant health plans, programs and agreements and ensure regular monitoring, evaluation and public reporting on equity of access for Aboriginal people



When considering the type of service provision required for Aboriginal people within the cancer continuum of care, it's important that this is undertaken in partnership with Aboriginal people, groups and/or organisations. The value of investing in service provisions being provided by Aboriginal community controlled and Aboriginal business should be recognised for their cultural perspective and as part of wraparound services within the cancer continuum of care.

CS4



Identify and implement opportunities for continuous quality improvement in co-creation across the health system, including through monitoring and evaluating progress and success.

CS4.1 Establish and implement co-creation opportunities for monitoring and evaluating health literacy initiatives, including with priority population groups

CS4.2 Establish and implement co-creation opportunities for monitoring and evaluating health promotion, prevention and early intervention initiatives, including priority population groups

CS5



To reduce barriers that hinder the growth and success of Aboriginal businesses and ACCHOs in working with NSW Health.

CS5.1 In partnership with Aboriginal business and the community controlled sector, identify key barriers that hinder their involvement with NSW Health and develop and implement solutions.

CS5.2 Assess health services needs and priorities and agree on resource allocations in partnership with Aboriginal people and organisations

CS6



Identify and utilise opportunities to invest in and expand ACCH sector models of care and service delivery as best practice across the NSW health system.

CS6.1 Establish and implement co-creation opportunities for commissioning, developing and delivering health promotion, prevention and early intervention initiatives for individuals, families and communities, including priority population groups

CS6.2 Engage with Aboriginal people and organisations in co-creation processes that address social and emotional wellbeing gaps or priorities through program and service re-design, including with priority population groups



Another key message in developing the Strategy relates to Aboriginal clients and carers. Specifically, their cultural wellbeing during their cancer journey and how important it is that appropriate infrastructures and instruments are available to support them. These cultural wellbeing mechanisms also includes the Aboriginal healthcare workforce supporting Aboriginal clients and carers across the cancer continuum of care.

CS7



To enhance integration and linkages between primary, secondary and tertiary for continuity and coordination of holistic care, including follow up care and support services.

CS7.1



Investigate, identify and prioritise opportunities for enhancing service linkages and care integration across health system in partnership with Aboriginal people and organisations including priority population groups

CS7.2



Design and implement prioritised service linkage and care integration enhancement initiatives in partnership with Aboriginal people and organisations, including priority population groups

CS8



Review planning processes and embed partnerships and shared decision making to support assessment of current and future Aboriginal health workforce needs and priorities with Aboriginal people and organisations.

CS8.1



Identify and provide access to required data and information to support and inform strategic workforce planning and monitor changes in growth and retention over time

CS8.2



Partner within NSW Health system and across non-health sectors to resource and embed sustainable workforce promotional initiatives to facilitate Aboriginal people into health career pathways

CS9



Establish and implement culturally safe capability strengthening initiatives and resources for Aboriginal businesses and the community controlled sector through NSW Health or referrals to organisations.

CS9.1



Establish and implement co-creation opportunities for monitoring and evaluating social and cultural determinant initiatives, including with priority population groups

CS9.2



Establish and implement co-creation opportunities for reviewing whether and how Aboriginal people benefit from knowledge translation of monitoring, evaluation and research outcomes and what actions are required to ensure benefit occurs

Support

3

Strategic
focus

Cancer indicators

Cancer in Aboriginal people in NSW



It's really hard for my nan, she's caring for pop but it's hard to understand all the information that the doctors say – she likes having an Aboriginal health worker to help them

–Granddaughter

People
diagnosed
with cancer
(incidence)

5,556

(2016–2020)

People who died
from cancer
(mortality)

1,941

(2016–2020)

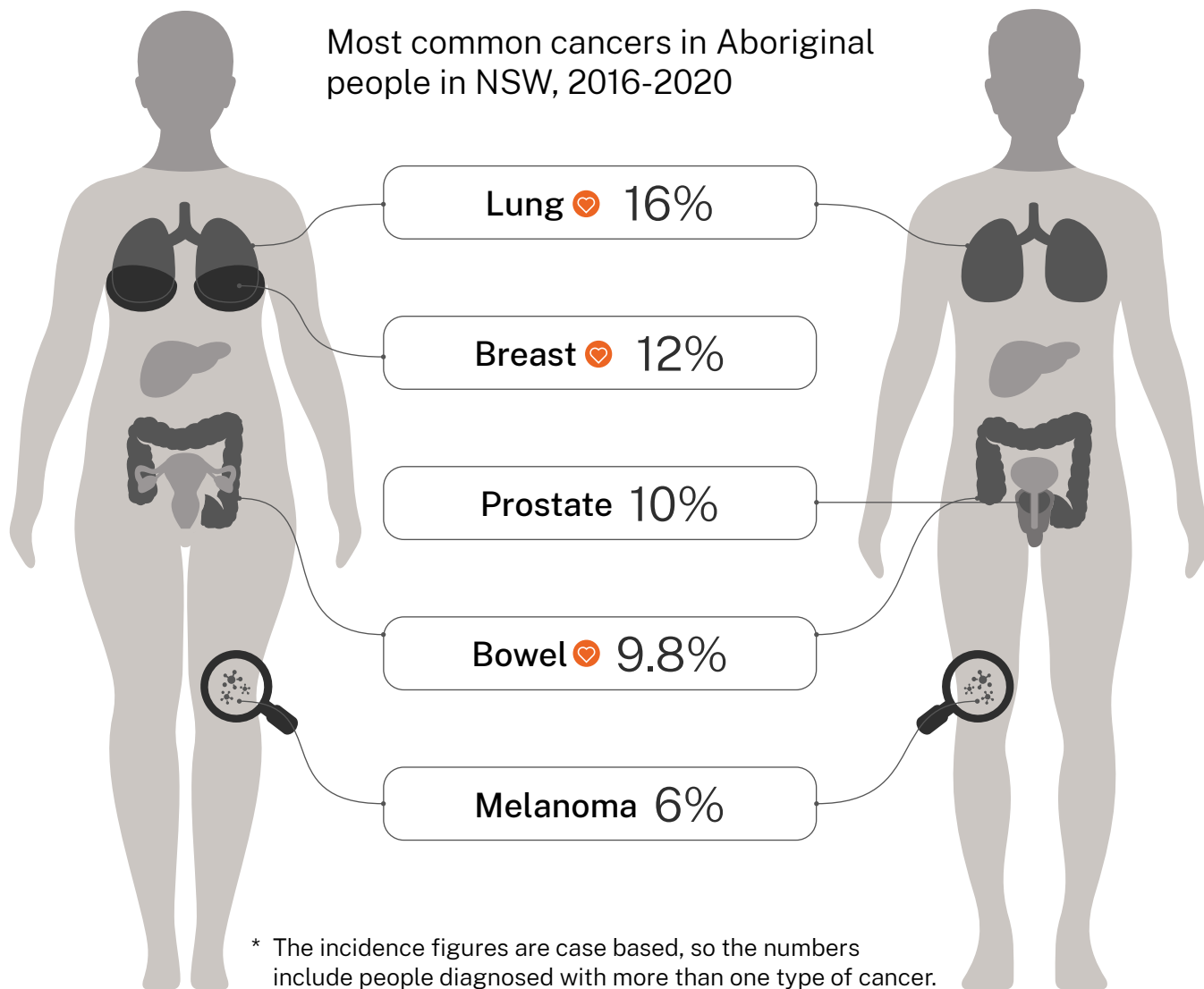
Five-year all-
cause survival

56%

highest survival for
prostate cancer (84%)

lowest survival for
liver cancer (15%)

Most common cancers in Aboriginal people in NSW, 2016-2020



* The incidence figures are case based, so the numbers include people diagnosed with more than one type of cancer.

1 Lung cancer



Lung cancer is the most common cause of cancer death in Aboriginal people.

- | | |
|--|---|
| <p>1.1 Aboriginal people diagnosed with lung cancer have a high burden of chronic conditions with 56% having more than one comorbidity.</p> | <p>1.2 A coordinated approach to managing both cancer and other illnesses (comorbidities) can impact on cancer treatment and outcomes and improve quality of life.</p> |
|--|---|

2 Breast cancer



Among Aboriginal women, breast cancer is the most common cancer diagnosed and the second most common cause of cancer deaths.

- | | |
|--|--|
| <p>2.1 Aboriginal women in NSW with breast cancer were younger and more likely to have more advanced cancer at diagnosis than non-Aboriginal women.</p> | <p>2.2 23% of breast cancers are diagnosed in Aboriginal women under the age of 50 years.</p> |
|--|--|

3 Prostate cancer



Prostate cancer is the most common cancer in Aboriginal men in NSW.

- | | |
|--|--|
| <p>3.1 Three-quarters of prostate cancers are diagnosed among Aboriginal men aged 60 years and older.</p> | <p>3.2 Prostate cancer is uncommon in Aboriginal men aged under 50.</p> |
|--|--|

4 Bowel cancer



Bowel cancer is the third most common cancer for both Aboriginal men and women in NSW.

- | | |
|--|---|
| <p>4.1 Nearly two-thirds of bowel cancers are diagnosed among Aboriginal people aged 50–74 years.</p> | <p>4.2 32% of bowel cancers diagnosed among Aboriginal people have localised extent and 18% have distant spread.</p> |
|--|---|

5 Skin cancer



Skin cancer is the fifth most common cancer diagnosed among Aboriginal people. It is a myth in some Aboriginal communities that Aboriginal people do not get skin cancer.

- | | |
|---|--|
| <p>5.1 One third of skin cancer are diagnosed among Aboriginal people aged under 50 years.</p> | <p>5.2 The median age at diagnosis of melanomas is 60 for Aboriginal people and 67 for non-Aboriginal people.</p> |
|---|--|

6 Health assessments

Aboriginal people can get a health assessment, also known as health checks. They are available at Aboriginal Medical Services and general practice bulk-billing clinics.

- | | |
|---|---|
| <p>6.1 Between 2020 and 2021 across NSW, 26% of Aboriginal people had an Aboriginal specific health check.</p> | <p>6.2 Aboriginal people in the rural and remote areas of NSW had higher rates of participation in Aboriginal specific health assessments. In the Western AH&MRC region, the participation rate was 36%, followed by 28% in Northern, 25% in Southern and 23% in Metropolitan.</p> |
|---|---|

7 Cancer prevention

At any age, healthy living changes can reduce the risk of developing some of the most common types of cancer. In fact, one in three cancers can be prevented.

- | | |
|---|--|
| <p>7.1 In 2022, 71% of Aboriginal adults in NSW were non-smokers.</p> | <p>7.3 In 2021, 57% of Aboriginal adults in NSW consumed alcohol within recommended levels. The trend has remained stable over the past 10 years.</p> |
| <p>7.2 In 2022, an estimated 25.9% of Aboriginal people in NSW aged 16 years and over had ever used an e-cigarette (at least once) and 11.5% were current users of e-cigarettes.</p> | <p>7.4 In 2022, 34.1% of Aboriginal adults in NSW were a healthy weight.</p> |

8 Cancer screening

Cancer screening is important because cancers found early can be treated more effectively and this can result in better outcomes.

- | | |
|--|--|
| <p>8.1 In NSW, 45% of Aboriginal women aged 50–74 screened with BreastScreen NSW in 2021–2023.</p> | <p>8.3 Nationally, 40% of female Aboriginal regular clients aged 25–74 who have not had a hysterectomy had a Cervical Screening Test within the previous five years in June 2022. However this only covers data collected from Aboriginal specific primary healthcare services.</p> |
| <p>8.2 Nationally, approximately 27% of Aboriginal people participated in the National Bowel Cancer Screening Program in 2018–2019.</p> | |

Appendix

Aboriginal Guiding Instruments

Core Services and Outcomes Framework

National Aboriginal Community Controlled Health Organisation (NACCHO) 2021

naccho.org.au/wp-content/uploads/2024/10/Core-Services-Outcomes-Framework-full-document.pdf

2021-22 NSW Implementation Plan for Closing the Gap

NSW Government and Coalition of Aboriginal Peak Organisations (CAPO)

nsw.gov.au/departments-and-agencies/aboriginal-affairs-nsw/national-agreement-on-closing-gap/ctg-report-2021-22

Cultural Safety Framework Summary

National Aboriginal and Torres Strait Islander Health Workers Association (NATSIHWA)

naatsihwp.org.au/sites/default/files/natsihwa-cultural_safety-framework_summary.pdf

Cultural Responsiveness in Action: An IAHA Framework

Indigenous Allied Health Australia (IAHA) 2019

iaha.com.au/workforce-support/training-and-development/cultural-responsiveness-in-action-training/

Indigenous Data Sovereignty Communique: First National Indigenous Data Sovereignty Summit, Canberra, 20 June 2018

Data Sovereignty Collective (MnW) and Australian Indigenous Governance Institute (AIGI)

aigi.org.au/wp-content/uploads/2022/01/Communique-Indigenous-Data-Sovereignty-Summit-1.pdf

NSW Aboriginal Procurement Policy

NSW Treasury

info.buy.nsw.gov.au/policy-library/policies/aboriginal-procurement-policy

Climate Change and Aboriginal and Torres Strait Islander Health: Discussion Paper

Lowitja Institute

lowitja.org.au/wp-content/uploads/2023/12/Lowitja_ClimateChangeHealth_1021_D10.pdf

Culture is Key: Towards cultural determinants-driven health policy – Final Report

Lowitja Institute

lowitja.org.au/wp-content/uploads/2023/06/Lowitja_CultDetReport_210421_D14_WEB.pdf

Knowledge Translation to Research Impact for Empowerment: Policy Position Paper

Lowitja Institute

lowitja.org.au/resource/knowledge-translation-to-research-impact-for-empowerment

Aboriginal and Torres Strait Islander Cancer Plan

National Aboriginal Community Controlled Health Organisation

naccho.org.au/cancer-plan

Optimal care pathway for Aboriginal and Torres Strait Islander people with cancer

Cancer Australia

canceraustralia.gov.au/sites/default/files/2025-01/optimal-care-systems-ocp-refresh-ocp-qrg-accessibility-enhancement-ocp-for-12.12.2024.pdf

Social Determinants of Indigenous Health

Australian Institute of Health and Welfare

aihw.gov.au/reports/australias-health/social-determinants-and-indigenous-health

NSW Guiding Instruments

2022–2024 NSW Implementation Plan for Closing the Gap

NSW Government, Coalition of Aboriginal Peak Organisations (CAPO) and Local Government NSW

[aboriginalaffairs.nsw.gov.au/media/website_pages/closingthegap/nsw-implementation-plan/2022-24-implementation-plan/NSW-Closing-the-Gap-Implementation-Plan-2022-2024-\(4\)-accessible-Updated-\(1\).pdf](https://aboriginalaffairs.nsw.gov.au/media/website_pages/closingthegap/nsw-implementation-plan/2022-24-implementation-plan/NSW-Closing-the-Gap-Implementation-Plan-2022-2024-(4)-accessible-Updated-(1).pdf)

NSW Aboriginal Mental Health and Wellbeing Strategy 2020–2025

NSW Ministry of Health

health.nsw.gov.au/mentalhealth/resources/Publications/aborig-mh-wellbeing-2020-2025.pdf

Future Health: Guiding the next decade of care in NSW 2022–2032: Report

NSW Ministry of Health

health.nsw.gov.au/about/nswhealth/Publications/future-health-report.pdf

NSW Regional Health Strategic Plan 2022–2032

NSW Ministry of Health

health.nsw.gov.au/regional/Publications/regional-health-strategic-plan.pdf

NSW Healthy Eating and Active Living Strategy 2022-2032

NSW Ministry of Health

health.nsw.gov.au/heal/Pages/nsw-healthy-eating-strategy.aspx

NSW Health Strategic Framework for Integrating Care

NSW Ministry of Health

health.nsw.gov.au/integratedcare/Pages/strategic-framework-for-integrating-care.aspx

Cancer in adolescents and young adults in Australia 2023

Australian Institute of Health and Welfare

aihw.gov.au/reports/cancer/cancer-in-adolescents-young-adults-australia-2023/contents/summary

NSW Virtual Care Strategy – 2021-2026

NSW Ministry of Health

nsw.gov.au/health/virtual-care-hub/about#toc-nsw-virtual-care-strategy--2021-2026

National guide to a preventative health assessment for Aboriginal and Torres Strait Islander people: Third Edition

National Aboriginal Community Controlled Health Organisation and The Royal Australian College of General Practitioners

racgp.org.au/FSDEDEV/media/documents/Clinical%20Resources/Resources/Evidence-base-to-a-preventive-health-assessment-3rd-edition.pdf

Communicating positively: A guide to appropriate Aboriginal terminology

NSW Ministry of Health

www1.health.nsw.gov.au/pds/ActivePDSDocuments/GL2019_008.pdf

National Guiding Instruments

National Aboriginal and Torres Strait Islander Health Plan 2021–2031

Commonwealth Department of Health

health.gov.au/resources/publications/national-aboriginal-and-torres-strait-islander-health-plan-2021-2031

National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework 2021–2031

Commonwealth Department of Health

health.gov.au/resources/publications/national-aboriginal-and-torres-strait-islander-health-workforce-strategic-framework-and-implementation-plan-2021-2031

Estimates of Aboriginal and Torres Strait Islander Australians

Australian Bureau of Statistics (ABS)

abs.gov.au/statistics/people/aboriginal-and-torres-strait-islander-peoples/estimates-aboriginal-and-torres-strait-islander-australians/latest-release#methodology

Roadmap for Aboriginal and Torres Strait Islander Adolescent Health

South Australian Health and Medical Research Institute (SAHMRI)

roadmap.org.au/about

Aboriginal and Torres Strait Islander Health Performance Framework

Australian Institute of Health and Welfare

indigenoushpf.gov.au/reports/summary-reports/summary-report

National Agreement on Closing the Gap

Australian Governments and Coalition of Peaks Joint Council

closingthegap.gov.au/national-agreement

National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing

Department of the Prime Minister and Cabinet

niaa.gov.au/sites/default/files/documents/publications/mhsewb-framework_0.pdf



Symbol key

Strategic alignment

The actions within this Strategy have been mapped and electronically linked to equivalent areas of state and national plans, supporting services to report against these.



represents where this Strategy's actions connect to activities within the four priorities of the *NSW Cancer Plan 2022–2027*.



links actions in this Strategy to the five areas of focus in the National Aboriginal and Torres Strait Islander Cancer Plan. indicates where actions



in this Strategy link to measures within either the five priorities or five directions of the *NSW Aboriginal Health Plan 2024–2034*.

Structure of Strategy

The *NSW Aboriginal Cancer Strategy* is structured by three strategic goals (A, B and C), nine strategic focuses (three under each goal) and 54 actions (six for each focus area)

Levels of activity

The focus areas group initiatives occurring at state, regional or local levels and these are represented by symbols.



is the state level symbol.



is the regional level symbol.



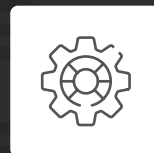
is the local level symbol.

Instruments and infrastructure

Each strategic focus includes activities categorised as either an instrument or infrastructure. Both are required in order to shape the NSW cancer ecosystem.



represents infrastructure – this relates to the people and processes with influence, such as networks, committees and community conversations.



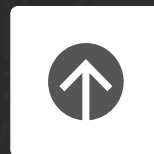
represents instruments – this relates to the products and projects which contribute to communication and engagement, such as campaigns, support groups and events.

Cancer stories and statistics

Aboriginal people impacted by cancer are at the core of this Strategy. As such, their voices, lived experience and burden of cancer are represented throughout. These symbols within the Strategy link to the cancer stories and statistics in the *Reporting for Better Cancer Outcomes Aboriginal People in NSW* report.



is an opportunity to read a story of lived experience from an Aboriginal person impacted by cancer.



is an opportunity to learn more about cancer incidence and mortality, as well as cancer risk factors and prevention initiatives for Aboriginal people in NSW.

Cancer Institute NSW



Level 4, 1 Reserve Road,
St Leonards, NSW 2065

Locked Bag 2030
St Leonards NSW 1590

T: (02) 8374 5600
E: information@cancer.nsw.gov.au
W: cancer.nsw.gov.au