



SECRETARIAT OF NATIONAL ABORIGINAL AND ISLANDER CHILD CARE

**Australian Human Rights Commission Amendment (National Children's Commissioner)
Bill 2012**

**Supplementary written information to the Legal and Constitutional Affairs Legislation
Committee, 12 June 2012**

SNAICC submits this information as supplementary written information in response to the Committee's question to SNAICC in the public hearing held on 8 June 2012 concerning practical examples of the types of things that make Indigenous and Torres Strait Islander children so much more vulnerable as a group of children.

The extent of poverty experienced by Aboriginal and Torres Strait Islander peoples ranges from between 40 to more than 50 percent across Australia, whether for remote or urban areas.¹ Aboriginal and Torres Strait Islander peoples experience significant disadvantage across all economic and social development indicators, including being five times more likely to live in overcrowded households² and having a life expectancy of 10 and 11.5 years below non-Indigenous Australians for women and men respectively.³ Aboriginal and Torres Strait Islander children bear the brunt of this reality, struggling against the cycle of ongoing impoverishment and exclusion.

Mortality rates of Aboriginal and Torres Strait Islander children up to the age of 4 are 1.6 to 3.8 times as high as those for non-Indigenous children, remaining largely consistent over the previous decade.⁴ The proportion of five-year-old Indigenous children classified as 'at risk' or 'vulnerable' in the domain of language and cognitive skills is also estimated at 52%: 2.4 times greater than the proportion for non-Indigenous children. Vulnerability increases with remoteness 'from 43 per cent in major cities to 73 per cent in very remote areas.'⁵

Disparities in health are of particular concern. Aboriginal and Torres Strait Islander mothers are more than twice as likely to have low birthweight babies, which have a greater risk of dying in the first year of life, early health problems and later chronic diseases.⁶ There were over 5 times the number of births to Aboriginal and Torres Strait Islander teenage women than non-Indigenous teenage women in Australia in 2009, with the Indigenous mother a teenager in 20% of births of Aboriginal and Torres Strait Islander women.⁷ Teenage births are associated with lower incomes and poorer educational attainment and employment prospects for the mother, which in turn influence outcomes for the child.

¹ B. Hunter (2006) *Assessing the evidence on Indigenous socioeconomic outcomes: A focus on the 2002 NATSISS*, p.100.

² Steering Committee for the Review of Government Service Provision (2011) *Overcoming Indigenous Disadvantage Key Indicators 2011*, Productivity Commission (Overcoming Indigenous Disadvantage Report 2011), Overview p.49.

³ *Overcoming Indigenous Disadvantage Report 2011*, Overview, p.13.

⁴ *Overcoming Indigenous Disadvantage Report*, p.4.14

⁵ *Ibid*, pp. 5.45 - 5.47.

⁶ *Ibid*, pp.5.28-5.31.

⁷ *Ibid*, pp.5.18-5.22.

The rate of hearing problems was 2.8 times the prevalence for non-Indigenous children aged 0-14 years in 2008. Some estimates however of Aboriginal children of school age suffering from some hearing loss are 30% – 80%.⁸ Aboriginal and Torres Strait Islander children living in remote communities have the highest internationally published prevalence rates for a middle ear infection. 74% of Aboriginal children checked in the Northern Territory had at least one middle ear condition and 54% had some hearing loss.⁹ Deafness, which is primarily caused by infections to the middle ear untreated or inadequately treated, has serious consequences for education, employment, social success, as well as increasing the risk of exposure to abuse and problems with the criminal justice system.¹⁰

Major structural barriers exist for Aboriginal and Torres Strait Islander peoples to accessing preventative health measures such as primary health care, health promotion, early screening and diagnosis. Lack of access to effective health care is reflected in a rate of hospitalisation for potentially preventable diseases and injuries double that of non-Indigenous children.¹¹ Almost one in seven Aboriginal Australians also report being unable to see a doctor when needed.¹² The UN Committee on Rights of the Child has highlighted to the Australian Government that sustainable progress lies in ensuring access to culturally accessible services, including social and health services and education.¹³

Despite the importance of education as a right in itself and as an enabler for other fundamental human rights, significant discrimination is still evident in access to education from school enrolment, school preparation, school performance to school outcomes. A substantially lower proportion of Aboriginal and Torres Strait Islander students achieve the year three, five, seven, and nine national minimum standards for reading, writing, and numeracy.¹⁴ The rate of 20-24 year olds who complete highschool is half that of non-Indigenous youth. The proportion of Aboriginal and Torres Strait Islander youth who received a year 12 certificate did increase from 20% in 2001 to 26% in 2008 however.¹⁵

Struggles that Aboriginal and Torres Strait Islander children face in the education system are highlighted particularly through policies on bilingual schooling, inequalities in Homeland Learning Centres which have no full-time qualified teachers, Government programs linking school attendance to social welfare payments, lack of Indigenous teachers, and lack of culturally appropriate curriculum and teaching methods. Only 5% of children in the Northern Territory have access to preschools, 27% of primary school children live more than 50kms from their school and there is virtually no school transport in most areas. 54% of children also have no access to a high school. Distance Learning has operated since the 1950's for white

⁸ Samantha Burrow, Ann Galloway and Natalie Weissfner 'Review of educational and other approaches to hearing loss among Indigenous people' (2009) 9(2) Indigenous Health Bulletin, p. 3 in Listen to Children Report, p.20. The Overcoming Indigenous Disadvantage Report 2011 however states that complete or partial deafness of Indigenous children decreased from 6.5% in 2001 to 2.7% in 2008: pp.5.52 – 5.55.

⁹ Overcoming Indigenous Disadvantage Report 2011, p.5.54.

¹⁰ Child Rights Taskforce (2011) Listen to Children, 2011 Child Rights NGO Report Australia, available at <http://www.childrights.org.au/> (Listen to Children Report), p.20.

¹¹ Overcoming Indigenous Disadvantage Report, pp.5.35 – 5.44.

¹² COAG Reform Council Council of Australian Governments, National Healthcare Agreement: Baseline performance report for 2008-09 (2010) xx in Listen to Children Report p.19

¹³ Committee on the Rights of the Child (2005) Concluding observations: Australia. UN Doc CRC/C/15/Add.268, 39.

¹⁴ Overcoming Indigenous Disadvantage Report 2011, p.4.37.

¹⁵ *Ibid* p.4.49.

children on stations but operates to only a tiny few Aboriginal children using English as a medium.¹⁶

All children have the right to grow up free from all forms of physical or mental violence, injury or abuse, neglect, maltreatment or exploitation.¹⁷ Aboriginal and Torres Strait Islander children are however particularly exposed to risks of violence, neglect and abuse, in circumstances of inadequate state support. The gap in the substantiation rate of child abuse and neglect for Aboriginal and Torres Strait Islander children continues to escalate, increasing from 7 times the rate for non-Indigenous children (rates of 37.1 and 5 per 1000 children respectively) in 2010 to almost 8 (rates of 34.6 and 4.5 per 1000 children respectively) in 2011. The most common type of substantiated abuse of Aboriginal and Torres Strait Islander children is neglect (38% compared with 23% for non-Indigenous children) and the least common is sexual abuse (10%).¹⁸ At 30 June 2011 there were 12,358 Aboriginal and Torres Strait Islander children in out-of-home care, 10 times the rate of non-Indigenous children. This is a devastating figure that requires Aboriginal and Torres Strait Islander strategies. The causes of overrepresentation are complex and include the legacy of past policies of forced removal, intergenerational effects of separations from family and culture, poor socio-economic status and perceptions arising from cultural differences in child-rearing practices.¹⁹

Over-representation in the juvenile justice system has been deemed a national crisis in Australia²⁰ with Indigenous children 26 times more likely than non-Indigenous children to be in detention.²¹ The level of life stressors for young Aboriginal and Torres Strait Islander peoples is overwhelming. Suicide is 6th leading cause of death among Indigenous peoples, occurring at a rate almost 3 times greater than the non-Indigenous population, increasing to 4.5 times greater for Aboriginal and Torres Strait Islander youth under 25,²² while still recognising that actual rates of Indigenous suicide are believed to be significantly higher than reported rates.²³ Strategies for redress however remain decades behind international best practice, which focus on Indigenous community based systems for the prevention of and intervention against child abuse and neglect.²⁴

These factors are reinforced by the limited opportunities for Aboriginal and Torres Strait Islander children to grow up enjoying their right to culture. A combination of these kinds of factors leaves Aboriginal and Torres Strait Islander particularly vulnerable as a group of

¹⁶ Combined Aboriginal Organisations of the Northern Territory (2007), 'Submission to the Inquiry into the Northern Territory National Emergency response Bill 2007 and Related Bills,' p. 18.

¹⁷ *UN Convention on the Rights of the Child*, article 19.

¹⁸ Australian Institute of Health and Welfare, Child Protection Australia 2009 – 2010. [Australian Institute of Health and Social Welfare, Child Protection Australia, 2010-11.](#)

¹⁹ Australian Institute of Health and Social Welfare, Child Protection Australia, 2010-11.

²⁰ House of Representatives Standing Committee on Aboriginal and Torres Strait Islander Affairs (2011) *Doing Time – Time for Doing*, p.2.4.

²¹ Australian Institute of Criminology (2009) *Australian Crime: Facts and figures*, p.113.

²² Silburn, Glaskin, Henry & Drew, preventing Suicide among Indigenous Australians, in Purdie, Dudgeon & Walker (eds) *Working Together: Aboriginal and Torres Strait Islander Mental Health and Well-being Principles and Practice*, chapter 7, pp.91-104 at p.92; *Overcoming Indigenous Disadvantage Report* (2011) Figure 7.8.2, p.7.65 drawn from data from those jurisdictions with data available on suicide death (NSW, Queensland, WA, SA and NT).

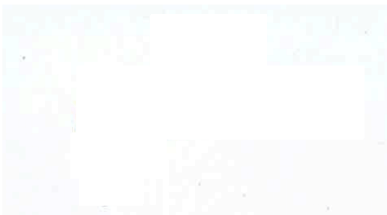
²³ Elliot-Farrelly (2004) Australian Aboriginal Suicide: The need for an Aboriginal suicidology? *Australian e-journal of Mental Health*, 3(3), 1-8, in Silburn, Glaskin, Henry & Drew, preventing Suicide among Indigenous Australians, in Purdie, Dudgeon & Walker (eds) *Working Together: Aboriginal and Torres Strait Islander Mental Health and Well-being Principles and Practice*, chapter 7, pp.91-104 at p.92.

²⁴ See Libesman & Bell (2005) [Aboriginal and Torres Strait Islander Child Protection Outcomes Report](#), Secretariat of National Aboriginal and Islander Child Care.

children. These factors require specific strategies and approaches that draw on Aboriginal and Torres Strait Islander strengths, knowledge and cultures to create sustainable change. The best interests of the child principle articulated in the United Nations Convention on the Rights of the Child requires that Governments consider how any human right for Indigenous children relates to collective cultural rights.²⁵ The Federal Government must be called on to apply this principle and enable Aboriginal and Torres Strait Islander children and peoples to develop solutions to issues in a manner that reflects and supports culture and identity. A Deputy Children's Commissioner focused on Aboriginal and Torres Strait Islander children and young people would significantly assist in charting out this course.

SNAICC would be happy to provide any further information that may be useful for the Committee's deliberations.

Yours faithfully,



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Acting Chief Executive Officer

²⁵ The UN Committee on the Rights of the Child, *General Comment No. 11*, Indigenous children and their rights under the Convention, 12 February 2009, CRC/C/GC/11, Paragraph 30.