

Study on the right to health and Indigenous peoples

AUSTRALIAN HUMAN RIGHTS COMMISSION SUBMISSION TO UNITED NATIONS EXPERT MECHANISM ON THE RIGHTS OF INDIGENOUS PEOPLES

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ABN 47 996 232 602 Level 3, 175 Pitt Street, Sydney NSW 2000 GPO Box 5218, Sydney NSW 2001 General enquiries 1300 369 711 Complaints info line 1300 656 419 TTY 1800 620 241

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1. Introduction

- This information is provided by the Australian Human Rights Commission to the Office of the United Nations High Commissioner for Human Rights for the study of the Expert Mechanism on the Rights of Indigenous Peoples (EMRIP) on the right to health and Indigenous peoples with a focus on children and youth.
- 2. The Commission is an 'A status' national human rights institution established and operating in ful I compliance with the Paris Principles. Information about the Commission can be found at: www.humanrights.gov.au.
- 3. The Commission has a President and six Commissioners. This submission draws on the work of the Aboriginal and Torres Strait Islander Social Justice Commissioner and the Children's Rights Commissioner.
- 4. The office of the Aboriginal and Torres Strait Social Justice Commissioner was established in 1993. The Commissioner reports annually to the Commonwealth Attorney-General on the enjoyment and exercise of human rights by Aboriginal and Torres Strait Islander peoples, and recommends actions that should be taken to ensure these rights are observed.
- 5. In 2010, the incumbent Social Justice Commissioner, Mr Mick Gooda, outlined his agenda for his five year term in his report. Commissioner Gooda undertook to use the United Nations Declaration on the Rights of Indigenous Peoples to guide the performance of his statutory functions, particularly the following principles which he considers underpin the articles of the Declaration:
 - self-determination;⁴
 - participation in decision-making, free, prior and informed consent, and good faith;⁵
 - respect for and protection of culture, and⁶
 - equality and non-discrimination.⁷
- 6. Information on the responsibilities and advocacy role of the Aboriginal and Torres Strait Islander Social Justice Commissioner can be found at: https://www.humanrights.gov.au/our-work/aboriginal-and-torres-strait-islander-social-justice.
- 7. The inaugural National Children's Commissioner was appointed in 2013. The National Children's Commissioner's reports annually to the Commonwealth Attorney-General on the enjoyment and exercise of human rights by children in Australia.
- 8. Information on the responsibilities and advocacy role of the Children's Commissioner can be found at: https://www.humanrights.gov.au/our-work/childrens-rights

2. Background information on the right to health for Indigenous Australian children and youth

- 9. Since the 1970s, many Indigenous communities have established their own independent, community-controlled health services (ACCHOs).
- 10. In 1976 an over-arching representative advocacy body, the National Aboriginal and Islander Health Organisation (NAIHO) was established, which then became the National Community Controlled Community Health Organisation (NACCHO) in 1992.8 The ACCHO model of comprehensive primary health care and community governance supports increased access through culturally safe health care services.9
- 11. Primary health care data indicates that ACCHOs provide:
 - models of comprehensive primary health care consistent with the patientcentred medical home model;
 - better coverage of the Aboriginal populations higher than 60% outside major metropolitan centres;
 - consistently improving performance on best-practice care indicators; and
 - superior performance to mainstream general practice. 10
- 12. In addition, ACCHOs is the largest employer of Aboriginal and Torres Strait Islander people in urban, rural and remote areas.
- 13. In his 2005, Social Justice Report, the previous Aboriginal and Torres Strait Islander Social Justice Commissioner, Professor Tom Calma set out a human rights-based approach to achieve Aboriginal and Torres Strait Islander health equality within a generation.
- 14. The 2005 Social Justice Report highlighted the significant inequalities in the health status of Indigenous Australians compared to non-Indigenous Australians. In particular, it found that the life expectancy gap between Indigenous people and non-Indigenous people was 17 years. 11 The report also noted that between 1999-2003 'the infant mortality rate for Aboriginal and Torres Strait Islander infants was three times that of non-Indigenous infants. 12
- 15. Following the 2005 report, a number of developments have occurred:
 - In 2007, hosted by the Commission and chaired by the Social Justice Commissioner, the Close the Gap Campaign (the Campaign) was launched. The aim of the Campaign was to achieve Aboriginal and Torres Strait Islander health equality within a generation. To date, over 220,000 Australians have formally pledged their support to the Campaign.¹³
 - The Campaign is a collaboration by the Commission, government, private and non-government health sector organisations including:
 - The Campaign Steering Committee members include Australia's peak Aboriginal and Torres Strait Islander and non-Indigenous health bodies, health professional bodies and human rights

- organisations (see Appendix 1), Chaired by the Aboriginal and Torres Strait Islander Social Justice Commissioner and Co-Chair of the National Congress of Australia's First Peoples.
- The Close the Gap Campaign Secretariat is hosted by the Commission.
- In 2008, the Campaign Steering Committee initiated a meeting known as the Indigenous Health Equality Summit. A Close the Gap Statement of Intent was signed by the then Prime Minister, Opposition Leader, Minister for Health and Ageing, Minister for Families, Housing, Community Services and Indigenous Affairs and key Indigenous health organisations. Following the summit most state and territory governments, their oppositions and a number of non-government organisations signed the Close the Gap Statement of Intent, further demonstrating broad support for the campaign principles.¹⁴
- In 2008, the Council of Australian Governments (COAG) announced a reform agenda to address the disadvantage faced by Indigenous Australians in life expectancy, child mortality, education and employment. Additionally, the Government committed unprecedented levels of investment to the 'Closing the Gap'¹⁵ framework in Indigenous disadvantage. Four (4) out of six (6) Closing the Gap framework targets specifically relate to children and youth. They are to:
 - 1) halve the gap in mortality rates for Indigenous children under five within a decade (by 2018);
 - 2) ensure all Indigenous four-year-olds in remote communities have access to early childhood education within five years (by 2013);
 - 3) halve the gap for Indigenous students in reading, writing and numeracy within a decade (by 2018); and
 - 4) halve the gap for Indigenous people aged 20-24 in Year 12 attainment or equivalent attainment rates (by 2020). 16
- 16. Australia has a federated system, with Commonwealth, state, territory and local levels of government. The Commonwealth government has worked with state and territory governments to coordinate programs and services to achieve the Closing the Gap targets.
- 17. As a result of the effectiveness of the Close the Gap Campaign, the National Health Leadership Forum (NHLF)¹⁷ was established in 2011. The NHLF is the national representative committee for Aboriginal and Torres Strait Islander peak bodies who provide advice on health.¹⁸ In particular, the NHLF provides national Aboriginal and Torres Strait Islander led and designed health policy and culturally appropriate guidance to government and the health sector.
- 18. Information on the Campaign, reports and resources is available here: https://www.humanrights.gov.au/our-work/aboriginal-and-torres-strait-islander-social-justice/projects/close-gap-indigenous-health

3. National Plans for Indigenous Health since 2005

- 19. Two national plans have been developed since 2005, they are:
 - 1) the National Aboriginal and Torres Strait Islander Health Plan 2013-2020, and
 - 2) the Implementation Plan of the National Aboriginal and Torres Strait Islander Health Plan 2013-2020
- 20. In 2013, the Australian government in partnership with the NHLF launched the *National Aboriginal and Torres Strait Islander Health Plan 2013-2023* (The Health Plan).¹⁹ The Health Plan provided a 10-year program that seeks to build on the United Nations Declaration on the Rights of Indigenous Peoples and adopted a 'strengths-based approach to ensure policies and programs improve health, social and emotional wellbeing, and resilience and promote positive behaviour.'²⁰ The plan recognises the centrality of culture, that 'Aboriginal and Torres Strait Islander peoples have the right to live a healthy, safe and empowered life with a healthy strong connection to culture and country.'²¹
- 21. The Health Plan has eleven (11) priorities, the two priorities that relate specifically to children and youth are:
 - a) Childhood Health and development (Birth Early Teens): aimed to see 'Aboriginal and Torres Strait Islander children have long, healthy lives, meeting key childhood development milestones.' This goal was linked to strategies that focused on strengthening the family unit (New Directions Program), implementing programs that integrated services across the sectors for children's development outcomes, and several other pre-existing programs and initiatives.²²
 - b) Adolescent and Youth Health (Early Teens to Mid 20s): aimed to see 'Aboriginal and Torres Strait Islander Youth get the services and support they need to thrive and grow into healthy adults.' This goal was then linked to strategies that focused on suicide prevention programs, strengthening pride in identity and culture, and initiatives to encourage healthy choices.²³
- 22. In 2015, the Australian government launched the *Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023* (The Implementation Plan). The Implementation Plan has twenty (20) goals with a series of deliverables to be achieved in two stages, by 2018 and by 2023. The deliverables articulate specific actions and assigns responsibility for those actions building on the vision and general framework of the 2013 Health Plan.²⁴ Development of the Implementation Plan was a collaboration between government and the NHLF.
- 23. The formation of the Close the Gap Campaign and the Government's subsequent Closing the Gap framework has seen an unprecedented level of

scrutiny on an ongoing/annually reported basis regarding the health outcomes of Aboriginal and Torres Strait Islander peoples.

Indigenous Advancement Strategy

- 24. In 2014, the Australian government introduced a new approach to priorities and funding. The Indigenous Advancement Strategy (IAS) which was intended to streamline the funding and management of over 150 individual programmes and activities that provide services to Aboriginal and Torres Strait Islander people.²⁵
- 25. The IAS has five (5) broad-based programs, including 'Children and Schooling' which supports activities 'which nurture and educate Aboriginal and Torres Strait Islander children, youth... to improve pathways to prosperity and wellbeing.'26
- 26. The Aboriginal and Torres Strait Islander Social Justice Commissioner and the Campaign Steering Committee have expressed concerns about the effectiveness of the IAS and provided submissions to a 2015 review by a government senate committee.²⁷

National Children's Commissioner Work

- 27. In 2014, the National Children's Commissioner conducted work in the area of intentional self-harm, with or without suicidal intent, in children and young people under 18 years of age. This Report included reference to Indigenous children and youth which is attached. (see Appendix 2).²⁸
- 28. In addition, the Report referred to a range of national qualitative research and policy initiatives focused on identifying issues and practices which contribute to the wellbeing of children and young people such as:
 - The National Mental Health and Suicide Plans, specifically the National Suicide Prevention Strategy and the National Aboriginal and Torres Strait Islander Prevention Strategy.²⁹
 - The 2014 Elders' Report into Preventing Indigenous Self-Harm and Youth Suicide. 30
- 29. In 2015, the Commissioner focused her work on the effect of family and domestic violence on children aged 0-17 years. This work included specific reference to Indigenous children and youth and is attached (see Appendix 3).
- 30. In addition, the Report referred to the work of the National Advisory Committee for the Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project (ATSISPEP), established to evaluate the effectiveness of existing suicide prevention programs and services in combatting the high levels of suicide in the Aboriginal and Torres Strait Islander population. ATSISPEP aims to report on the characteristics of successful Aboriginal and Torres Strait Islander suicide prevention programs, identify existing programs that appear to be most effective, and deliver a culturally appropriate

- evaluation framework that can be used by governments to inform future funding decisions.³²
- 31. In partnership with key stakeholder organisations, the National Children's Commissioner will continue to advocate for research and other initiatives which adequately prioritise the needs of Aboriginal and Torres Strait Islander children and young people.

4. Most recent data and policy developments

- 32. Australian Indigenous Health statistics and data is published by the Australian Bureau of Statistics. Further information on Australian Indigenous health statistics can be found at:

 http://www.abs.gov.au/websitedbs/c311215.nsf/web/Aboriginal+and+Torres+Strait+Islander+Peoples+-+Health 33
- 33. Since 2005, there has been a number of improvements in the health outcomes for Aboriginal and Torres Strait Islander children and youth. These include:
 - a) improvements in infant mortality and birth weights, and.34
 - an improvement in access to antenatal health care and a decline in rates of smoking – it is understood that targeted 'Closing the Gap' programs have contributed to these improvements.³⁵
- 34. However, in 2016 the Government's *Closing the Gap Prime Minister's Report 2016* noted that 'there remains an unacceptable disparity between Indigenous and non-Indigenous infant mortality rates'.³⁶
- 35. The Campaign notes the contribution of targeted health programs to other social determinants, such as high school education completion rates and enrolments in early childhood education in remote areas and the importance of a sustained long term approach.^{37 38}
- 36. The Close the Gap Campaign's 2016 Progress and Priorities Report (Appendix 4) noted the Australian Government's adoption of the 2030 Agenda for Sustainable Development which contains 17 Sustainable Development Goals (SDGs).³⁹ As per the SDGs, the Campaign has continued to urge Australian governments to support Indigenous led policies and programs. The empowerment of Aboriginal and Torres Strait Islander people to address the health inequalities that their communities face is critical to closing the gap in in health outcomes in this country.
- 37. The Commission looks forward to the outcomes of the study and can provide further information to the Expert Mechanism on the Rights of Indigenous Peoples as required.

5. Recommendations

- The Commission recommends that EMRIP consider the Australian model of Aboriginal community controlled health services as an effective implementation of the United Nations Declaration on the Rights of Indigenous Peoples.
- 2. The Commission recommends that EMRIP notes the value of the collaborative approach taken by the Close the Gap Campaign, engaging the government, non-government and private sector to achieve Indigenous health equality and recommends this sector wide approach. This approach is particularly notable for adopting a human rights based approach to Indigenous health including through the adoption of benchmarks and targets, with regular and transparent reporting and accountability mechanisms, and with significant community engagement through National Close the Gap Day and other events.
- The Commission recommends that EMRIP notes that improving Indigenous health will take consistent prioritisation and funding over a number of generations and recommends that EMRIP consider the long term nature of health reform in its study.

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¹ Mick Gooda, Social Justice Report 2010, Australian Human Rights Commission (2010).

² Mick Gooda, Social Justice Report 2010, Australian Human Rights Commission (2010) 12-13.

³ United Nations Declaration on the Rights of Indigenous Peoples, GA Resolution 61/295, UN Doc A/RES/61/295 (2007). At http://www.ohchr.org/EN/Issues/IPeoples/Pages/Declaration.aspx (viewed 3 February 2016).

⁴ United Nations Declaration on the Rights of Indigenous Peoples, GA Resolution 61/295, UN Doc A/RES/61/295 (2007), arts , 4, 5, Preamble 16, 17. At

http://www.ohchr.org/EN/Issues/IPeoples/Pages/Declaration.aspx (viewed 3 February 2016).

5 United Nations Declaration on the Rights of Indigenous Peoples, GA Resolution 61/295, UN Doc A/RES/61/295 (2007) arts 18 19 5 10 11(2) 27 28 29 32(2) 41 46 At

A/RES/61/295 (2007), arts 18, 19, 5, 10, 11(2), 27, 28, 29, 32(2), 41, 46. At http://www.ohchr.org/EN/Issues/IPeoples/Pages/Declaration.aspx (viewed 3 February 2016). ⁶ United Nations Declaration on the Rights of Indigenous Peoples, GA Resolution 61/295, UN Doc

A/RES/61/295 (2007), arts (1), 31, 11(1), 11(2), 12(1), 13(1), 15(1), Preamble 3, 7, 10, 11. At http://www.ohchr.org/EN/Issues/IPeoples/Pages/Declaration.aspx (viewed 3 February 2016).

⁷ United Nations Declaration on the Rights of Indigenous Peoples, GA Resolution 61/295, UN Doc A/RES/61/295 (2007), arts 8(1)(e), 9, 15(2), 21(1), 22(2), 44, 46(3), Preamble 5, 9, 18, 22. At http://www.ohchr.org/EN/Issues/IPeoples/Pages/Declaration.aspx (viewed 3 February 2016).

⁸ National Aboriginal Community Controlled Health Organisation, Aboriginal health overview (2015). At http://www.naccho.org.au/aboriginal-health/overview/ (viewed 22 February 2016).

⁹ Panaretto K, Wenitong M, Button S and Ring I, 'Aboriginal community controlled health services: leading the way in primary care' (2014) *Medical Journal of Australia*, 200 (11) 649 - 652. At https://www.mja.com.au/system/files/issues/200_11/pan00005.pdf (viewed 22 February 2016).

¹⁰ The article compared the health outcomes for Indigenous people in ACCHSs with the outcomes achieved through mainstream services. Panaretto K, Wenitong M, Button S and Ring I, 'Aboriginal community controlled health services: leading the way in primary care' (2014) *Medical Journal of Australia*, 200 (11) 649 - 652. At https://www.mja.com.au/system/files/issues/200_11/pan00005.pdf (viewed 22 February 2016).

¹¹ Tom Calma, *Social Justice Report 2005*, Human Rights and Equal Opportunity Commission (2005) 9-95.

¹² Tom Calma, *Social Justice Report 2005*, Human Rights and Equal Opportunity Commission (2005) 18.

¹³ Oxfam, Close the Gap. At https://www.oxfam.org.au/what-we-do/indigenous-australia/close-the-gap/ (viewed 19 February 2016).

- ¹⁴ Human Rights and Equal Opportunity Commission, *Close the Gap: Indigenous Health Equality Summit Statement of Intent* (2008). At https://www.humanrights.gov.au/publications/close-gap-indigenous-health-equality-summit-statement-intent (viewed 22 February 2016).
- ¹⁵ The 'Close the Gap' Campaign is a public campaign that advocates for health equality for Aboriginal and Torres Strait Islander peoples within a generation. The 'Closing the Gap' program is the government led framework established in 2008 and based on a series of health outcome targets to be achieved by 2030.
- 16 Council of Australian Governments, Closing the Gap in Indigenous Disadvantage. At https://www.coag.gov.au/closing_the_gap_in_indigenous_disadvantage (viewed 19 February 2016)
 17 The Close the Gap Campaign and the National Health Leadership Forum secretariats are both hosted by the Australian Human Rights Commission.
- ¹⁸ Mick Gooda, *Social Justice Report 2011*, Australian Human Rights Commission (2011) 35-38; Mick Gooda, *Social Justice Report 2012*, Australian Human Rights Commission (2012) 199-205.
- ¹⁹ Department of Health (Cth), National Aboriginal and Torres Strait Islander Health Plan 2013-2023. At
- http://www.health.gov.au/internet/main/publishing.nsf/content/B92E980680486C3BCA257BF0001BAF 01/\$File/health-plan.pdf (viewed 19 February 2016)
- ²⁰ Department of Health (Cth), National Aboriginal and Torres Strait Islander Health Plan 2013-2023, 4. At
- http://www.health.gov.au/internet/main/publishing.nsf/content/B92E980680486C3BCA257BF0001BAF 01/\$File/health-plan.pdf (viewed 19 February 2016)
- ²¹ Department of Health (Cth), National Aboriginal and Torres Strait Islander Health Plan 2013-2023, 7. At
- http://www.health.gov.au/internet/main/publishing.nsf/content/B92E980680486C3BCA257BF0001BAF 01/\$File/health-plan.pdf (viewed 19 February 2016)
- ²² Department of Health (Cth), *National Aboriginal and Torres Strait Islander Health Plan 2013-2023*, 32-34. At
- http://www.health.gov.au/internet/main/publishing.nsf/content/B92E980680486C3BCA257BF0001BAF 01/\$File/health-plan.pdf (viewed 19 February 2016)
- ²³ Department of Health (Cth), *National Aboriginal and Torres Strait Islander Health Plan 2013-2023*, 34-36. At
- http://www.health.gov.au/internet/main/publishing.nsf/content/B92E980680486C3BCA257BF0001BAF 01/\$File/health-plan.pdf (viewed 19 February 2016)
- ²⁴ Department of Health (Cth), *Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023*, 32-34. At
- http://www.health.gov.au/internet/main/publishing.nsf/Content/AC51639D3C8CD4ECCA257E8B00007 AC5/\$File/DOH_ImplementationPlan_v3.pdf (viewed 19 February 2016)
- ²⁵ Department of Prime Minister and Cabinet, *Indigenous Advancement Strategy* (2015). At https://www.dpmc.gov.au/indigenous-affairs/about/indigenous-advancement-strategy (viewed 19 February 2016)
- ²⁶ Department of Prime Minister and Cabinet, *Indigenous Advancement Strategy Guidelines* (2014) 12-14. At https://www.dpmc.gov.au/sites/default/files/publications/ias_guidelines.pdf (viewed 22 February 2016).
- ²⁷ Close the Gap Campaign, Submission 82 to the Senate Standing Committee on Finance and Public Administration, *Commonwealth Indigenous Advancement Strategy Tendering Processes*, Parliament of Australia, 30 April 2015; Aboriginal and Torres Strait Islander Social Justice Commissioner, Submission 15 to the Senate Standing Committee on Finance and Public Administration, *Commonwealth Indigenous Advancement Strategy Tendering Processes*, Parliament of Australia, 30 April 2015.
- ²⁸ Megan Mitchell, *Children's Rights Report 2014*, Australian Human Rights Commission (2014).
- ²⁹ See Appendix 2, Megan Mitchell, *Children's Rights Report 2014*, Australian Human Rights Commission (2014) 98.
- ³⁰ See Appendix 2, Megan Mitchell, *Children's Rights Report 2014*, Australian Human Rights Commission (2014) 104.
- ³¹ Megan Mitchell, Children's Rights Report 2015, Australian Human Rights Commission (2015).
- ³² Megan Mitchell, *Children's Rights Report 2015*, Australian Human Rights Commission (2015) 18-19.
- ³³ Australian Bureau of Statistics, *Topics* @ a glance: Aboriginal and Torres Strait Islander Peoples health (2016). At
- http://www.abs.gov.au/websitedbs/c311215.nsf/web/Aboriginal+and+Torres+Strait+Islander+Peoples+-Health (viewed 23 February 2016)

- ³⁴ Department of Prime Minister and Cabinet, *Closing the Gap Report 2016* (2016) 9. At http://closingthegap.dpmc.gov.au/assets/pdfs/closing_the_gap_report_2016.pdf (viewed 19 February 2016)
- ³⁵ Department of Prime Minister and Cabinet, *Closing the Gap Report 2016* (2016) 9-11, 42-44. At http://closingthegap.dpmc.gov.au/assets/pdfs/closing_the_gap_report_2016.pdf (viewed 19 February 2016)
- ³⁶ Department of Prime Minister and Cabinet, *Closing the Gap Report 2016* (2016) 9. At http://closingthegap.dpmc.gov.au/assets/pdfs/closing_the_gap_report_2016.pdf (viewed 19 February 2016)
- ³⁷ Department of Prime Minister and Cabinet, *Closing the Gap Report 2016* (2016) 12-25. At http://closingthegap.dpmc.gov.au/assets/pdfs/closing_the_gap_report_2016.pdf (viewed 19 February 2016)
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- https://www.humanrights.gov.au/sites/default/files/document/publication/Progress_priorities_report_CT G_2016_0.pdf (viewed 19 February 2016)
- ³⁹ Close the Gap Campaign Steering Committee, Close the Gap: *Progress and Priorities Report 2016* (2016) 26. At
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