

## Appendix 2

# A statistical overview of Aboriginal and Torres Strait Islander peoples in Australia

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### 1. Introduction

This collection of statistics has been chosen to highlight the current situation of Aboriginal and Torres Strait Islander peoples in Australia (hereon referred to as Indigenous peoples) across a range of indicators including: health; education; employment; housing; and contact with criminal justice and welfare systems. Where possible, data is also provided that identifies:

- absolute change in the situation of Indigenous peoples over the past five and ten years; and
- relative change in relation to the non-Indigenous population over the past five to ten years.

While reducing people and their experiences to percentages and numbers is problematic, statistics are useful as indicators of trends over time and disparities, as well of similarities, between Indigenous peoples and the non-Indigenous population.

I also note that the statistics reproduced here are not exhaustive of data available on Indigenous peoples in Australia.

The main sources of information used here are the national censuses undertaken by the Australian Bureau of Statistics (ABS), particularly the 2001 and 2006 Census; as well as the following ABS Indigenous specific surveys:

- *National Aboriginal and Torres Strait Islander Social Survey* (2002) (NATSISS 2002) sample size 9,400 persons;<sup>1</sup> and

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1 Australian Bureau of Statistics, *National Aboriginal and Torres Strait Islander Social Survey 2002*, ABS cat no 4714.0 (2004).

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- *National Aboriginal and Torres Strait Islander Health Survey (2004–05)* (NATSIHS 2004–5), sample size 10,439 persons.<sup>2</sup>

Data from these and other sources (including administrative data sets) is drawn together in the Australian Institute of Health and Welfare and ABS biennial publication *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples*, the latest being released in May 2008.<sup>3</sup> This comprehensive publication is acknowledged as the source of much of the information presented here.

Statistics on Indigenous peoples are subject to a range of data quality concerns. In addition to cultural considerations in relation to statistical matters (such as concepts, definitions, collection practices), data quality issues arise from the relatively small size of the Indigenous population in comparison with the total population, the dispersion of the Indigenous population, particularly across remote areas of Australia, and the way in which Indigenous persons are identified in statistical collections.<sup>4</sup> When appropriate, these issues are explained here.<sup>5</sup>

## 2. Population figures

Aboriginal people were first counted as citizens in the 1971 Census. Since then, censuses have shown a significant increase in people identifying as Aboriginal and/ or Torres Strait Islander peoples:

- Between the 1991 and 1996 Census there was a 33% increase recorded in the numbers of Indigenous peoples.
- Between the 1996 and 2001 Census there was a 16% increase.
- Between the 2001 and 2006 Census there was an 11% increase.<sup>6</sup>

The increases in the Indigenous population cannot be accounted for by the birth rate alone. The ABS attributes the increase to a growing propensity of people to identify as Aboriginal and/ or Torres Strait Islander, and the greater efforts made to record Indigenous status in the censuses.<sup>7</sup>

Because of the recorded increases in the number of Indigenous peoples, the ABS has warned that comparisons made between two censuses must be made with caution. They recommend comparing percentages from two censuses, rather than directly comparing counts or numbers.<sup>8</sup>

Despite the increases in the numbers of people identifying as Indigenous in censuses, however, there are still believed to be significant undercounts occurring. In the 2006

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2 Australian Bureau of Statistics, *National Aboriginal and Torres Strait Islander Health Survey 2004–05*, ABS cat no 4715.0 (2005).

3 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008).

4 Australian Bureau of Statistics, *Population Distribution, Aboriginal and Torres Strait Islander Australians 2001*, ABS cat no 4705.0 (2002) p 7–15.

5 For further information, see also Australian Human Rights Commission, *Face the Facts* (2008). At: [http://www.humanrights.gov.au/racial\\_discrimination/face\\_facts/index.html](http://www.humanrights.gov.au/racial_discrimination/face_facts/index.html) (viewed 22 January 2009).

6 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 12.

7 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 12; Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2001*, ABS cat no 4713.0 (2001) p 12.

8 Australian Bureau of Statistics and Australian Institute of Health and Welfare, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2003*, ABS cat no 4704.0 (2003) p 245.

Census, Indigenous status is unknown for 1,133,466 people, comprising 5.7% of the total number of people surveyed.<sup>9</sup>

Because some of these people will be Indigenous, the ABS calculates what it calls 'experimental estimates' of the true number of Indigenous peoples.<sup>10</sup> It is important to distinguish actual counts from the experimental estimates when considering the size of the Indigenous population.

## 2.1 Size and characteristics of the Indigenous population

In the 2006 Census, 455,028 people identified themselves as being of Aboriginal and/or Torres Strait Islander origin, comprising 2.3% of the total population.<sup>11</sup>

There were approximately 409,729 people of Aboriginal origin (90% of the total) and 29,239 of Torres Strait Islander origin (6%). A further 19,552 people (4%) identified as of both Aboriginal and Torres Strait Islander origin.<sup>12</sup>

As explained above, due the undercount believed to occur in the Census the ABS has estimated that the Indigenous population in 2006 numbered 517,174, or approximately 2.5% of the total Australian population.<sup>13</sup>

## 2.2 Growth of the Indigenous population

While an overall decline in the Indigenous fertility rate has been reported since the 1960s, in 2006 the rate was still higher than for the non-Indigenous population at 2.1 babies per Indigenous woman compared to 1.8 babies per non-Indigenous woman.<sup>14</sup>

The ABS notes that the fertility of Indigenous women may be underestimated because of the incomplete identification of Indigenous status of the mother in birth registrations. Further, because Indigenous babies are born to non-Indigenous women (with an Aboriginal or Torres Strait Islander father), estimates of population growth based exclusively on the fertility of Indigenous women results in an underestimate of the actual growth of the Indigenous population.<sup>15</sup>

Teenage births are more common among Indigenous women than among other women. In 2006 the teenage birth rate among Indigenous women rose to be more than five times the overall Australian teenage birth rate.<sup>16</sup> Teenage pregnancies are associated with low birth weight babies.<sup>17</sup>

9 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 10.

10 Australian Bureau of Statistics *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 15.

11 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 12.

12 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 19, table 2.2.

13 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 9.

14 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 79.

15 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 79.

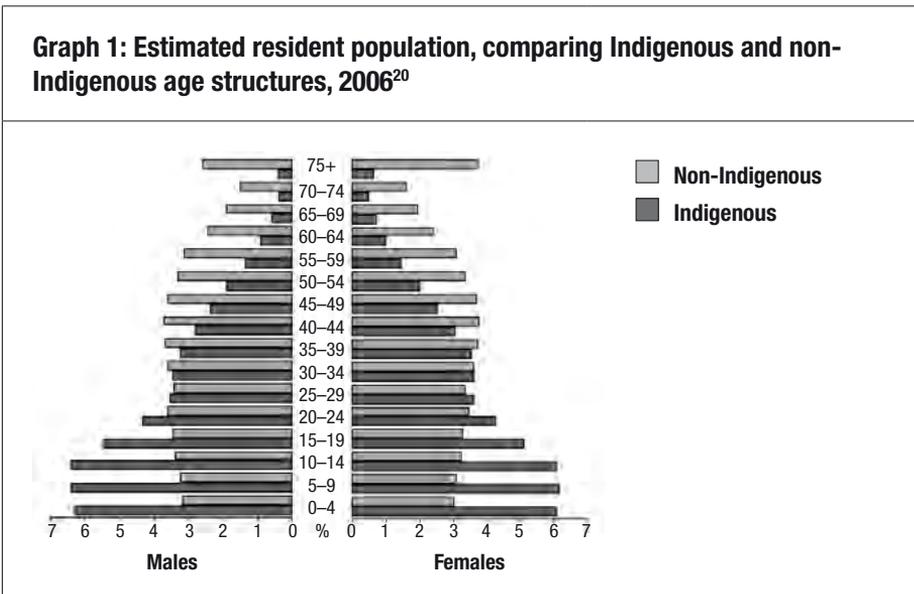
16 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 80.

17 Australian Bureau of Statistics and Australian Institute of Health and Welfare, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2005*, ABS cat no 4704.0 (2005) p 74.

### 2.3 Age structure of the Indigenous population and the cohort of young Indigenous peoples

As illustrated by Graph 1 below, the Indigenous population has a different age structure to the rest of the Australian population. In common with many other developed countries, the non-Indigenous population of Australia is ageing, whereas Indigenous peoples are facing increased growth in younger age groups.

In 2006, the median age was 21 years for Indigenous Australians, and 37 years for the non-Indigenous population. Thirty eight (38) percent of the Indigenous population were under 15 years of age compared with 19% of the non-Indigenous population.<sup>18</sup> Indigenous persons aged 65 years and over comprised 3% of the total Indigenous population in 2006.<sup>19</sup>



### 2.4 Where Indigenous peoples live

In 2006, over half of the total Indigenous population lived in New South Wales and Queensland (29% and 28% of the total Indigenous population respectively). Despite this, Indigenous peoples make up a small minority of the total population of these States (2% and 3.5% respectively). In the Northern Territory by contrast, while total numbers are relatively small, Indigenous peoples constitute 32% of the total population.<sup>21</sup>

Table 1 below details the percentage of the total number of Indigenous peoples that lives in each State and Territory, and the proportion of each State and Territory's population that is Indigenous.

18 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 14–15.  
 19 Australian Bureau of Statistics, *Yearbook 2008*, ABS cat no 1301.0 (2008) p 198.  
 20 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 15, (unnumbered graph).  
 21 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 14.

	<b>Percentage of the total Indigenous population living in a State or Territory</b>	<b>Percentage of the State or Territory's total population that is Indigenous</b>
NSW	28.7	2.2
Vic	6.0	0.6
Qld	28.3	3.6
SA	5.0	1.7
WA	15.1	3.8
Tas	3.3	3.4
NT	12.9	31.6
ACT	0.8	1.2

The majority of Torres Strait Islanders (86.2%) live on mainland Australia, with 13.8% living in the Torres Strait region. In 2006, 64% of the Torres Strait Islander population lived in Queensland.<sup>23</sup>

#### **(a) Remoteness**

With reference to the categories of the Australian Standard Geographical Classification Remoteness Structure, in the 2006 Census almost one third of the estimated Indigenous population resided in Major Cities (32%); 21% lived in Inner Regional areas; 22% in Outer Regional areas; 10% in Remote areas and 16% in Very Remote areas.

In contrast, with the non-Indigenous population there was a much higher concentration in Major Cities (69%) with less than 2% living in Remote and Very Remote areas.<sup>24</sup>

### **3. Indigenous households and families**

An Indigenous household is defined by the ABS as being one in which an Indigenous person was resident and present on census night. These are further classified as family, multi-family, group and lone person households.<sup>25</sup>

In the 2006 Census there were 166,668 Indigenous households recorded. Of these, 76% were one family households, of the remaining 24%, 5% were multi-family households, and 5% were group households. Approximately 14% were lone person households.<sup>26</sup>

22 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 16.

23 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 12.

24 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 13.

25 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 27.

26 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 27.

Couples with dependent children comprise 40% of Indigenous families, whereas 30% were one parent families (as opposed to 10% of non-Indigenous families) and 33% were couples without children (compared with 53% of non-Indigenous couples).<sup>27</sup>

Indigenous peoples are more likely to live in one or multi-family households than non-Indigenous peoples (81% compared with 68%) and less likely to live in lone person households (14% compared with 23%).<sup>28</sup>

Living arrangements vary according to remoteness. For example, multi-family households increase with remoteness whereas one parent families tend to live in major cities.<sup>29</sup>

### 4. Language and culture

Indigenous cultures today reflect both traditional elements and the influence of non-Indigenous cultures. The 2006 Census reported:

- 86% of Indigenous respondents reported speaking only English at home, which is about the same as the non-Indigenous population (83%);
- 12% of Indigenous respondents reported speaking an Indigenous language at home; with three quarters of those recording they were also fluent in English;
- Many Indigenous peoples are bilingual; however, the pattern varies with geographical location with 56% of respondents living in remote areas reported speaking an Indigenous language, compared with one per cent in urban centres;
- Older Indigenous peoples (over 45 years) are more likely to speak an Indigenous language than younger Indigenous peoples. (Of those Indigenous peoples aged 45 years and over, 13% speak an Indigenous language, compared with 10% of 0–14 year olds);
- Indigenous languages are more likely to be spoken in the centre and north of Australia than in the south.<sup>30</sup>

The Indigenous social surveys indicate Indigenous peoples are maintaining their links to Indigenous cultures. The 1994 National Aboriginal and Torres Strait Islander Survey (the predecessor of the NATSISS 2002) reported approximately 60% of Indigenous respondents identified with a clan, tribal or language group.<sup>31</sup> The NATSISS 2002 shows a similar proportion (just over half) of Indigenous respondents continued to identify with a clan, tribal or language group despite there being a decline in the proportion (29% to 22%) of people who lived in homelands and traditional country over the period of the social surveys.<sup>32</sup>

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27 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 28.

28 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 27.

29 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 27.

30 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 35–37.

31 Australian Bureau of Statistics, *National Aboriginal and Torres Strait Islander Survey 1994 – Detailed Findings*, ABS cat no 4190.0 (1995) p 4.

32 Australian Bureau of Statistics, *National Aboriginal and Torres Strait Islander Health Survey 2004–05*, ABS cat no 4715.0 (2005).

## 5. Health

### 5.1 Self reported health status

In the NATSIHS 2004–05:

- 43% of Indigenous respondents aged 15 years and over reported their health as very good or excellent;
- 35% reported their health as being good; and
- 22% reported their health as fair or poor.

After adjusting for differences in the age structures of the Indigenous and non-Indigenous populations, Indigenous Australians were twice as likely as non-Indigenous Australians to report their health as fair or poor in 2004–05.

Indigenous Australians aged 15 years and over in non-remote areas were more likely than those in remote areas to report fair or poor health (23% compared with 19%).<sup>33</sup>

### 5.2 Life expectation and mortality

Under the life expectation estimation formula adopted by the ABS in 2003,<sup>34</sup> Indigenous males' life expectation was estimated to be 59.4 years over 1996–2001, while female life expectation was estimated to be 64.8 years: a life expectation inequality gap when compared to the general Australian population of approximately 17 years for the same five year period. The ABS has not released a life expectation estimate for Indigenous peoples for the years 2002 on.<sup>35</sup>

Indigenous peoples' life expectation appears to be similar to that of people in developing countries. Although international comparisons should be made with some caution because of the different formulae with which life expectation is calculated between jurisdictions, with reference to the 2005 United Nation's Human Development Index Indigenous peoples appear to have a life expectation approximating that of the people of Turkmenistan (62.4 years).<sup>36</sup>

The gap in life expectation between Indigenous and non-Indigenous Australians exists in part because of the dramatic increase in life expectation enjoyed by the non-Indigenous population over the past century. Over the period 1890 – 1997, for example, it has been estimated that, for the non-Indigenous population, women's life expectancy increased around 26 years; while for males, 28 years. In contrast, while figures are not available, much smaller gains appear to have occurred in the Indigenous population contributing to the development of a 17 year life expectation gap.<sup>37</sup>

In 2006, the median age at death for the general population in Australia was 77.3 years for males and 83.3 years for females. This represents an increase of 6.2 years and 5.7 years for males and females respectively since 1986 alone.<sup>38</sup>

33 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 9.

34 There are long-standing issues pertaining to the identification of an Aboriginal and/or Torres Strait Islander person as the deceased on death certificates that prevent definitive statements being made about Indigenous peoples' life expectation, hence the reliance on life expectation estimation formulas to arrive at figures. In 2006, it was estimated that only 55% of the deaths of Indigenous peoples were correctly identified. Australian Bureau of Statistics, *Deaths 2006*, ABS cat no 3320.0 (2006) p 69, Table 9.1.

35 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 154.

36 United Nations Development Program, *Human Development Report 2005* (2005) p 220, Table 1.

37 F Baum, *The New Public Health* (2002) p 198.

38 Australian Bureau of Statistics, *Deaths 2006*, ABS cat no 3320.0 (2006) p 9.

Other statistics show remarkable reductions in the impact of diseases in the general population. These statistics demonstrate that significant improvements in the health and life expectation of population groups can occur within decades. For example, in the general population:

- death rates from cardiovascular disease have fallen 30% in Australia since 1991, and 70% in the last 35-years;<sup>39</sup> and
- the infant mortality rate in 2006 was 4.7 infant deaths per 1,000 live births – 46% lower than the 1986 rate which was 8.8 deaths per 1,000 live births.<sup>40</sup>

Because of these rapid health gains in the general population, and despite some significant health gains being made by Indigenous peoples in the 1970s and 1980s, the relative health status of the two population groups is marked by a significant equality gap that has remained static or even grown wider across a number of indicators as set out below in the text under various sub-headings.

### **Text Box 1: International comparisons in Indigenous peoples' life expectancy**

Approximately 30 years ago, life expectation for Indigenous peoples in Canada, New Zealand and the United States of America was, like Indigenous peoples in Australia today, significantly lower than that of the respective non-Indigenous populations of those countries.

However, significant gains in life expectation by Native Americans and Canadians and the Maori have been made in recent decades. Today, Australia has fallen significantly behind in improving the life expectation of its Indigenous peoples. Although comparisons should be made with caution (because of the way different countries calculate life expectation) data from the late 1990s suggests Indigenous males in Australia live between 8.8 and 13.5 years less than Indigenous males in Canada, New Zealand and the USA; and Indigenous females in Australia live between 10.9 and 12.6 years less than Indigenous females in these countries.<sup>41</sup>

### **(a) Mortality**

For the period 2001–05, among the residents of Queensland, Western Australia, South Australia and the Northern Territory (jurisdictions where the data is deemed reliable), deaths recorded as being of an Indigenous person accounted for 3.2% of all deaths, higher than their presence as a percentage of the total population (as noted, estimated at 2.5%).<sup>42</sup>

In Queensland, Western Australia, South Australia and the Northern Territory combined, approximately 75% of Indigenous males and 65% of Indigenous females died before the age of 65 years. In contrast, in the non-Indigenous population 26% of males and 16% of females died aged less than 65 years.<sup>43</sup>

39 Australian Bureau of Statistics, *Australian Social Trends 2002*, ABS cat. no. 4102.0 (2002) p 83–85.

40 Australian Bureau of Statistics, *Deaths 2006*, ABS cat no 3320.0 (2006) p 8.

41 I Ring and D Firman, 'Reducing Indigenous mortality in Australia: lessons from other countries', *Medical Journal of Australia* (1998) 169, p 528–533.

42 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 156–7.

43 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 156–7.

For the period 2001–05, Indigenous infant deaths represented 6.4% of total Indigenous male deaths and 5.7% of total Indigenous female deaths compared with 0.9% and 0.8% of the total for non-Indigenous male and female infant deaths.<sup>44</sup>

### (b) Years of life lost

Years of Life Lost (YLL) is an indicator of premature mortality.

A 2003 study on the burden of disease and injury among Indigenous peoples found there were an estimated 51,475 YLL due to disease and injury for the Indigenous population, or approximately 4% of the total YLL for disease and injury for the total Australian population.<sup>45</sup> This is significantly higher than their presence as a percentage of the total population.

Cardiovascular disease was the leading cause of years of life lost accounted for around one-quarter of total YLL among Indigenous peoples; followed by cancer (14% of YLL); unintentional injuries (11%), intentional injuries (9%) and diabetes (7%).<sup>46</sup>

## 5.3 Infant and child health

### (a) Low birth weight infants

Indigenous infant and child health is significantly poorer than that of non-Indigenous infants and children. A 'low birth weight baby' weighs less than 2,500 grams at birth<sup>47</sup> indicating, among other things, foetal malnutrition. There is a growing body of evidence that suggests a malnourished foetus will program its body in a way that will incline it to chronic diseases later in life.<sup>48</sup>

Approximately twice as many low birth weight infants were born to Indigenous women compared to those born to non-Indigenous women over 2001 and 2004.<sup>49</sup> The ABS reported in 2005 that since 1991 there appears to be no change in both the rates of low birth-weight infants being born to Indigenous women and the mean birth weights of those infants.<sup>50</sup>

### (b) Infant mortality

After significant reductions to the Indigenous infant mortality rate in the 1970s and 1980s, there was a levelling out of the rate in the mid 1990s. The decline is believed to have halted because of the generally poorer health of Indigenous mothers; their exposure to risk factors; and the poor state of health infrastructure in which infants were raised.<sup>51</sup>

The infant mortality rate is expressed as the number of deaths in the first year per 1,000 births in a population. The ABS concluded in 2001 that no reliable Indigenous infant mortality rate national trend (either for better or worse) was identifiable, largely

44 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 156–7.

45 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 159.

46 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 159.

47 Australian Bureau of Statistics and Australian Institute of Health and Welfare, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2005* (2005) p 79.

48 National Health and Medical Research Council, *Nutrition in Aboriginal and Torres Strait Islander Peoples, an information paper* (2000) p 21.

49 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 83.

50 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 84, Graph 6.6.

51 N Thomson, 'Responding to our "Spectacular Failure"', in N Thompson, *The Health of Indigenous Australians*, (2005) p 490.

because of the poor quality of data.<sup>52</sup> In jurisdictions where the data is deemed reliable, for the period 2001 to 2005, approximately two to three times the number of Indigenous infants died before their first birthday, as non-Indigenous infants.<sup>53</sup>

### 5.4 Chronic diseases

Chronic diseases, and in particular cardiovascular disease, are the biggest single killers of Indigenous peoples and an area where the Indigenous and non-Indigenous health equality gap is most apparent.

The rates of death from the five main groups of chronic diseases compared to the non-Indigenous population over 2001–05 is set out in Table 2 as a Standardised Mortality Rate (SMR). The SMR is calculated by dividing recorded Indigenous deaths by expected Indigenous deaths (with the latter based on the age, sex and cause specific rates for non-Indigenous Australians).<sup>54</sup>

<b>Cause of Death</b>	<b>Males SMR</b>	<b>Females SMR</b>
Diseases of the circulatory system	3.2	2.7
Neoplasms (including cancer)	1.5	1.6
Endocrine, nutritional and metabolic diseases	7.5	10.1
Diabetes	10.8	14.5
Diseases of the respiratory system	4.3	3.6
Diseases of the digestive system	5.8	5.1

### 5.5 Communicable diseases

Data highlighting the significantly higher rates of communicable diseases among Indigenous peoples compared to the non-Indigenous population is presented here from the National Notifiable Diseases Surveillance System. The ratio is calculated by dividing reported Indigenous notifications divided by expected Indigenous notifications. Expected notifications are calculated based on the age, sex and disease-specific rates of other Australians.<sup>56</sup>

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52 Australian Bureau of Statistics, *Deaths 2001*, ABS cat. no.3320.0 (2002) p 23.  
 53 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 94.  
 54 Standardised mortality rate is observed as Indigenous deaths divided by expected Indigenous deaths, based on the age, sex and cause specific rates for non-Indigenous Australians: Australian Institute of Health and Welfare, *Australia's Health 2008*, ABS cat no 8903.0 (2008) p 76.  
 55 Australian Institute of Health and Welfare, *Australia's Health 2008*, ABS cat no 8903.0 (2008) Table 3.4.  
 56 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 130.

**Table 3: Communicable diseases in Indigenous peoples reported as multiples of the rates in the non-Indigenous population (2004–05)<sup>57</sup>**

Communicable disease	Detected in Indigenous peoples at...
Hepatitis A	11.7 times the rate detected in the non-Indigenous population
Hepatitis B	5.4 times the rate detected in the non-Indigenous population
Meningococcal infection	7.8 times the rate in the non-Indigenous population
Salmonellosis	4.3 times the rate in the non-Indigenous population
Chlamydia Infection	7.9 times the rate detected in the non-Indigenous population
Tuberculosis	1.6 times the rate in the non-Indigenous population

## 5.6 Eye and ear health

Indigenous peoples reported having cataracts and either complete or partial blindness at higher rates than non-Indigenous people. Within the Indigenous population, those living in non-remote areas were more likely to report eye and sight problems (32%) than those living in remote areas (25%).<sup>58</sup>

Otitis media is a common childhood disease of the inner ear and easily treated. Untreated recurrence of chronic otitis media is often characterised by a perforated eardrum, which can lead to hearing loss and even deafness, impacting on a child's ability to learn, and gain employment later in life.

In 2004–05, rates of otitis media were three times as high among Indigenous children aged 0–14 years as non-Indigenous children. In 2004–05, a higher proportion of Indigenous peoples than non-Indigenous people reported ear and hearing problems across all age groups, except for those aged 55 years and over.<sup>59</sup>

## 5.7 Social and emotional well being

The NATSIHS 2004–5 was the first Indigenous-specific survey by the Australian Bureau of Statistics that aimed to measure the emotional and social health of Indigenous adults. In this, more than half the adult Indigenous population reported being happy (71%), calm and peaceful (56%), and/ or full of life (55%) all or most of the time. Just under half (47%) said they had a lot of energy all or most of the time.<sup>60</sup> And Indigenous peoples in remote areas were more likely to report having had these positive feelings all or most of the time, than were Indigenous peoples living in non-remote areas. Conversely, about 15% of the total number of adults who were asked felt these things

57 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 121, Table 7.34.

58 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 133.

59 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 134.

60 Australian Bureau of Statistics, *National Aboriginal and Torres Strait Islander Health Survey 2004–05*, ABS cat no 4715.0 (2005) p 3.

only a little of the time, or none of the time. Results again were better for Indigenous peoples in remote areas.<sup>61</sup>

The NATSIHS 2004–5 also included five questions designed to highlight psychological distress. Responses showed that almost one in ten Indigenous adults reported feeling nervous all or most of the time. When asked how often they felt without hope, 7% said that they had this feeling all or most of the time. Similarly, 7% said that they felt so sad that nothing could cheer them up, all or most of the time. A higher proportion of the Indigenous population reported feeling restless (12%) and/ or that everything was an effort all or most of the time (17%).<sup>62</sup>

The Western Australian Aboriginal Child Health Survey collected data on approximately 5,000 Indigenous children over 2000–01. It reported that one in four Aboriginal children were at high risk of developing serious emotional or behavioural difficulties. This compares to about 1 in 6 or 7 of non-Aboriginal children.<sup>63</sup>

### 5.8 Mental health

Data on hospitalisations for mental and behavioural disorders provide a measure of the use of hospital services by those with problems related to mental health. In 2005–06 there were more hospitalisations of Indigenous males and females than expected based on the rates for other Australians for most types of mental and behavioural disorders.<sup>64</sup> In particular, hospitalisations for 'mental and behavioural disorders due to psychoactive substance use' were almost five times higher for Indigenous males and around three times higher for Indigenous females.<sup>65</sup>

Hospitalisation rates for intentional self-harm may also be indicative of mental illness and distress. In 2005–06, Indigenous Australians were three times more likely to be hospitalised for intentional self-harm than other Australians.<sup>66</sup>

### 5.9 Health risk factors

#### (a) Tobacco smoking

Tobacco smoking was the leading cause of the burden of disease and injury for Indigenous Australians in 2003, accounting for 12.1% of the total burden and 20% of all deaths.<sup>67</sup> In 2004–05, half (50%) of the adult Indigenous population were current daily (or regular) smokers, approximately twice the rate in the non-Indigenous population.<sup>68</sup>

While smoking rates have decreased slightly for the total Australian population over the ten years to 2004–05, there has been no significant change in smoking rates for

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61 Australian Bureau of Statistics, *National Aboriginal and Torres Strait Islander Health Survey 2004–05*, ABS cat no 4715.0 (2005) p 3.

62 Australian Bureau of Statistics, *National Aboriginal and Torres Strait Islander Health Survey 2004–05*, ABS cat no 4715.0 (2005) p 3.

63 S Zubrick, S Silburn, D Lawrence and others, *The Western Australian Aboriginal Child Health Survey: The Social and Emotional Wellbeing of Aboriginal Children and Young People*, Curtin University of Technology and Telethon Institute for Child Health Research (2005) p 30.

64 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 111.

65 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 111.

66 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 111.

67 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 139.

68 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 139.

the Indigenous population in this period. For both men and women, smoking was more prevalent among Indigenous adults than non-Indigenous adults in every age group.<sup>69</sup>

### (b) Obesity

High body mass and obesity was the second leading cause of the burden of illness and injury among Indigenous Australians in 2003, accounting for 11% of the total burden of disease and 13% of all deaths.<sup>70</sup>

In 2004–05, it was reported that 38% of Indigenous peoples aged 15 years and over were a healthy weight, 28% were overweight, and 29% were obese. Overall, more than half (57%) of Indigenous peoples aged 15 years and over were overweight or obese.<sup>71</sup>

Between 1995 and 2004–05, rates of overweight/ obesity among Indigenous peoples aged 15 years and over in non-remote areas increased from 48% to 56%.<sup>72</sup>

Overall, rates of overweight/ obesity for Indigenous and non-Indigenous men are similar. In contrast Indigenous women are more than one and half times more likely to be overweight/ obese than non-Indigenous women.<sup>73</sup>

### (c) Excessive alcohol consumption

In 2003, alcohol was associated with 7% of all deaths and 6% of the total burden of disease for Indigenous Australians. Excessive alcohol consumption also accounted for the greatest proportion of the burden of disease and injury for young Indigenous males (aged 15–34 years) and the second highest (after intimate partner violence) for young Indigenous females.<sup>74</sup>

In the NATSIHS 2004–5, Indigenous peoples aged 18 years and over were found to be more likely than non-Indigenous people to abstain from drinking alcohol. Of those who did consume alcohol in the week prior to the survey, one in six Indigenous adults (16%) reported long-term (or chronic) risky/ high risk alcohol consumption, up from 13% in 2001. In non-remote areas, the proportion of Indigenous adults who drank at chronic risky or high risk levels increased from 12% in 2001 to 17% in 2004–05.<sup>75</sup>

While rates of risky/ high risk drinking were similar for Indigenous peoples in remote and non-remote areas, people in remote areas were nearly three times as likely as those in non-remote areas to report never having consumed alcohol (18% compared with 6%).<sup>76</sup>

### (d) Petrol sniffing

Petrol sniffing is reported in many Indigenous communities across Australia, but it is a particular problem in central Australian Indigenous communities. While it is not a major determinant of poor health in Indigenous Australians nationally, it is included here

69 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 139–140.

70 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 144.

71 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 144.

72 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 144.

73 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 145.

74 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 140.

75 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 141.

76 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 141.

because of the public interest shown in petrol sniffing and Indigenous communities following media attention to the subject in recent years.

Where it occurs, petrol sniffing is also associated with a range of health and social harms including increased violence, acquired brain injury, property damage, child abuse and neglect, dispossession of Elders and theft.<sup>77</sup>

It is difficult to obtain definite figures on the numbers of people engaging in petrol sniffing. However, when looking at trends from various reports, it appears that over 2006–08 the incidence of petrol sniffing in central Australia has reduced significantly coincident with the roll out of Opal fuel across central Australia.

Across reports there appears to have been a drop from approximately 600 to 85 sniffers in central Australia with a drop from 178 to 80 sniffers on the Anangu Pitjantjatjara Yankunytjatjara Lands also reported over 2005–08.<sup>78</sup>

### 5.10 Disability

In the 2006 Census of Population and Housing, a total of 19,600 Indigenous peoples (approximately 4% of the total Indigenous population) were recorded as requiring assistance with core function activities (self-care, mobility and/ or communication) on a consistent basis. The level of assistance required by the Indigenous population was twice as high as that required by the overall Australian population.<sup>79</sup>

According to the NATSISS 2002, due to differences in the way disability data were collected in remote and non-remote areas, comparisons with the non-Indigenous population are limited to those Indigenous respondents living in non-remote areas. When the effects of age differences were removed, the disability rate among Indigenous respondents was 1.4 times higher than among the non-Indigenous population.<sup>80</sup>

## 6. Income

Estimates of household income are adjusted by the ABS according to ‘equivalence factors’ in order to recognise the impact of different household compositions and different household sizes.<sup>81</sup>

In the 2006 Census, the mean equivalised gross household income for Indigenous persons was \$460 per week, which amounted to 62% of the rate for non-Indigenous Australians (\$740 per week).<sup>82</sup>

For Indigenous persons, income levels generally decline with increased geographic remoteness. In the 2006 Census, in major cities the average equivalised incomes

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77 Department of Families, Housing, Community Services and Indigenous Affairs, *Review of the First Phase of the Petrol Sniffing Strategy* (2008). At [http://www.facsia.gov.au/indigenous/petrol\\_sniffing\\_strategy\\_review/p02.htm](http://www.facsia.gov.au/indigenous/petrol_sniffing_strategy_review/p02.htm) (viewed 19 January 2009).

78 Department of Families, Housing, Community Services and Indigenous Affairs; Department of Health and Ageing; and others, *Submission to the Senate Inquiry into Petrol Sniffing and Substance Abuse in Central Australia*, 22 August 2008, p 8. At [http://www.aph.gov.au/SENATE/COMMITTEE/clac\\_ctte/petrol\\_sniffing\\_substance\\_abuse08/submissions/sub14.pdf](http://www.aph.gov.au/SENATE/COMMITTEE/clac_ctte/petrol_sniffing_substance_abuse08/submissions/sub14.pdf) (viewed 19 January 2009).

79 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 55.

80 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 55.

81 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 81.

82 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 103.

for Indigenous persons was 69% of the corresponding income for non-Indigenous persons. This declined to approximately 40% in remote areas.<sup>83</sup>

Between 2001 and 2006 the average equivalised gross household income for Indigenous persons increased by 9% (after adjustment for inflation) which was the same increase for non-Indigenous people.<sup>84</sup>

In 2006, the median weekly gross individual income for Indigenous peoples was \$278, this represented 59% of the median weekly gross individual income for non-Indigenous peoples (\$473).<sup>85</sup>

## 7. Employment

### 7.1 Participation in the labour force

The census data shows slight but significant improvements in Indigenous participation in the labour force over 2001–06.

In the 2006 Census, 55% of Indigenous peoples aged 15 years and over were participating in the work force (i.e. were engaged in mainstream employment, participating in CDEP or unemployed) up from 52% in 2001.<sup>86</sup>

The labour force participation rate for the non-Indigenous population was 63% in 2001 compared with 65% in 2006. When adjusted to include only people aged 15–64 years, the disparity in labour force participation widens further. In 2001 there were 54% of Indigenous peoples in this age group in the labour force compared with 73% of the non-Indigenous population. In 2006, 57% of the Indigenous population in this age group was participating in the labour force compared with 76% of the non-Indigenous population.<sup>87</sup>

Labour force participation rates for Indigenous peoples declines with remoteness, with a 57% participation rate in major cities compared with 46% in very remote areas.<sup>88</sup>

Nationally, 46% of all Indigenous peoples aged 15–64 years were not in the labour force in 2001. This figure dropped to 43% in 2006. (This indicates that they were not actively engaged in the labour market, for reasons including carer responsibilities, illness, disability or lack of market opportunities.) In 2002, 27% of the non-Indigenous population in the same age group were not participating in the labour force, while in 2006 this figure dropped to 24%.<sup>89</sup>

### 7.2 Employment and unemployment

The unemployment rate is the number of people unemployed expressed as a proportion of the total labour force. The ABS does not classify participation in the CDEP scheme as unemployment. The CDEP Scheme enables participants to earn the equivalent of

83 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 103.

84 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 104.

85 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 107.

86 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2001*, ABS cat no 4713.0 (2001) p 65; Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 80.

87 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 80.

88 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 66.

89 Australian Bureau of Statistics, *Population Characteristics, Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 81.

unemployment benefits with some extra payment for undertaking work and training in activities managed by local Indigenous community organisations.

Within these parameters, the census data shows slight but significant reductions in Indigenous unemployment over 2001–06, and from 1996 – 2001. In the 2006 Census, the unemployment rate for Indigenous peoples was 16%, whereas in 2001, the unemployment rate for Indigenous peoples was 20%. The rate in 1996 was 23%.

In 2006, 14,200 Indigenous CDEP participants identified themselves in the census. Compared with all Indigenous peoples who were employed, Indigenous peoples identified as CDEP participants were:

- twice as likely to work part time (75% compared with 39%);
- more likely to report working in a low skilled occupation (78% compared with 60%); and
- one third as likely to report having a non-school qualification (13% compared with 37%).<sup>90</sup>

## 8. Education

Educational attainment among Indigenous peoples continues to improve. Between 2001 and 2006, the proportion of Indigenous peoples aged 15 years and over who had completed Year 12 increased from 20% to 23%. There was also an increase in the proportion of people who had completed a non-school qualification (20% to 26%).

Higher educational attainment was associated with better employment prospects and higher income in 2006. The NATSIHS 2004–5 results also demonstrate that higher levels of schooling were also linked with improved health outcomes.

### 8.1 School retention

The National Schools Statistics Collection showed that, in 2007, the apparent retention rate for Indigenous full-time students from Year 7/8 to Year 10 was 91% and to Year 12 was 43%.<sup>91</sup>

Indigenous retention to Year 10 and beyond has steadily increased over the last 10 years. This trend is particularly evident at the Year 11 level, where the apparent retention rate from Year 7/8 rose from 52% in 1998 to 70% in 2007.<sup>92</sup>

While Indigenous retention rates remain considerably lower than those for non-Indigenous school students, the disparity between the two groups is slowly lessening. In Year 11, the difference between Indigenous and non-Indigenous students decreased by 13 percentage points between 1998 and 2007. While the Year 12 differences decreased by 8 percentage points over this time period, Indigenous students were still much less likely than non-Indigenous students to progress to the final year of schooling in 2007.<sup>93</sup>

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90 Australian Bureau of Statistics, Population Characteristics, *Aboriginal and Torres Strait Islander Peoples 2006*, ABS cat no 4713.0 (2008) p 83 and 104.

91 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 16–17.

92 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 16–17.

93 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 16–17.

## 8.2 Year 12 completion rates

In the 2006 Census, among those who reported their highest year of schooling, the proportion of Indigenous peoples aged 15 years and over who had completed school to Year 12 increased from 20% in 2001 to 23% in 2006.

Rates of Year 12 completion improved in all states and territories, with the largest increases recorded in Tasmania (17% to 22%), the ACT (42% to 46%) and Queensland (26% to 30%).

Younger Indigenous peoples were more likely than older Indigenous peoples to have completed Year 12. The proportion of Indigenous peoples who had completed Year 12, as shown in the 2006 Census, ranged from 36% of people aged 18–24 years to 9% of people aged 55 years and over.

Overall, Indigenous males and females reported similar rates of Year 12 completion (22% compared with 24%).

Indigenous peoples living in rural or remote areas of Australia were less likely than those in urban areas to have completed Year 12. In 2006, 31% of Indigenous peoples living in major cities had completed school to this level, compared with 22% in regional areas and 14% in remote areas.

Despite these improvements however, Indigenous peoples aged 15 years and over were still half as likely as non-Indigenous Australians to have completed school to Year 12 in 2006 (23% compared with 49%). They were also twice as likely to have left school at Year 9 or below (34% compared with 16%). These relative differences have remained unchanged since 2001.<sup>94</sup>

## 8.3 Post secondary education

Although there have been continued improvements in the educational attainment of Indigenous Australians in recent years, levels of attainment remain below those of non-Indigenous Australians. Non-Indigenous people were twice as likely as Indigenous peoples to have a non-school qualification in 2006 (53% compared with 26%). Non-Indigenous people were more than four times as likely to have a Bachelor Degree or above (21% compared with 5%) and twice as likely to have an Advanced Diploma or Diploma (9% compared with 4%).<sup>95</sup>

## 8.4 Impact of educational attainment on employment, income and health

The positive effect that education has on an individual's economic outcomes, particularly employment and income, has been well established. Results from the 2006 Census show that Indigenous peoples aged 15 years and over with higher levels of schooling were more likely than those with lower levels of attainment to be in full-time employment.

This was particularly the case for young people aged 18–24 years, where the rate of full-time employment among those who had completed Year 12 was four times as high as among those who had left school at Year 9 or below (37% compared with 9%).<sup>96</sup>

94 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 16–17.

95 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 16–17.

96 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 20.

Correspondingly, Indigenous peoples who had completed secondary school had higher incomes than those who had left school at lower grades. Among those who were employed, Indigenous peoples aged 15 years and over who had completed Year 12 had a median gross individual income of \$620 per week compared with \$405 per week for those who left school at Year 9 or below.<sup>97</sup>

The NATSIHS 2004–5 allows for the interactions between educational attainment and health outcomes to be explored. Results show that educational attainment was positively associated with health status.

Indigenous adults aged 18–34 years who had completed Year 12 were more likely than those who had left school at Year 9 or below to rate their health as excellent or very good (57% compared with 45%), and were less likely to rate their health as fair or poor (10% compared with 16%). They were also around half as likely to report high/very high levels of psychological distress in the last four weeks (19% compared with 35%). A similar pattern of association between educational attainment and health outcomes was also observed for Indigenous peoples aged 35 years and over.<sup>98</sup>

The likelihood of engaging in health risk behaviours also decreased with higher levels of schooling. In 2004–05, young adults who had completed Year 12 were half as likely as those who had completed Year 9 or below to regularly smoke and to consume alcohol at long-term risky/ high risk levels. In non-remote areas, Indigenous young people with higher educational attainment were also less likely to be sedentary or engage in low levels of exercise, and to have no usual daily intake of fruit or vegetables.<sup>99</sup>

Education level has also been shown to be positively associated with reductions in the rates of long-term health conditions, particularly heart disease and diet-related illnesses. In 2004–05, Indigenous peoples aged 35 years and over who had completed school to Year 12 were around half as likely to report having diabetes or cardiovascular disease as those who had left school at Year 9 or below. They were also less likely to report eye/ sight problems, osteoporosis and kidney disease.<sup>100</sup>

## 9. Housing and homelessness

### 9.1 Housing tenure

Indigenous households have been defined as households containing at least one Indigenous person of any age, excluding visitors. Of the 166,668 Indigenous households identified in the 2006 Census, 34% were home owners (with or without a mortgage), 59% were renting and 3% had other types of tenure.<sup>101</sup>

Between 2001 and 2006 the proportion of Indigenous home owner households increased from 31% to 34%. The proportions of Indigenous households renting from Indigenous or mainstream community housing organisations and those renting from private or other providers, fell by around two percentage points between 2001

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97 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 22.

98 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 24.

99 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 24.

100 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 25.

101 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 29–30.

and 2006, while the proportion of Indigenous households renting from state housing authorities remained relatively unchanged over this period.<sup>102</sup>

In comparison, 69% of the estimated 7 million other Australian households were home owners (with or without a mortgage) 26% were renting and 2% had other tenure types.<sup>103</sup>

Generally speaking, in remote areas, Indigenous peoples are less likely to own their home than in urban centres. This, in part, reflects the type of tenures available to people on traditional Indigenous lands.<sup>104</sup> However the issue of ownership in remote communities is more complex than simply relating to “types of tenure”. Issues such as availability of housing purchase stock, affordability and regular employment/ income streams are contributing factors.

Of among the 98,100 Indigenous households in rental accommodation, 27% were renting privately, 20% were renting from state or territory housing authorities, and 9% were renting from Indigenous or mainstream community housing organisations.

Of the 1.8 million Other Households that were renting, the majority were renting privately (1.4 million or 20% of other households), with just 4% renting from state or territory housing authorities and 1% from Indigenous or mainstream community organisations.<sup>105</sup>

## 9.2 Household size and overcrowding

Households with Indigenous person(s) tend to have more residents than other households. At the 2006 Census, there was an average of 3.4 persons in households with Indigenous person(s), compared with 2.6 persons in other households.

Both household size and the proportion of households requiring at least one additional bedroom rose with increased geographic remoteness. The size of the average household with Indigenous person(s) increased from 3.2 residents in major cities to 5.3 residents in very remote areas.<sup>106</sup>

Although there is no universally accepted definition of what constitutes overcrowding, data presented below uses the Canadian National Occupancy Standard as a measure. This standard specifies who should reasonably be expected to share bedrooms, dependent on age and sex.<sup>107</sup>

102 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 30.

103 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 30.

104 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 30.

105 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 30.

106 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 37.

107 The Canadian model is sensitive to both household size and composition and uses the following criteria to assess bedroom requirements:

- there should be no more than two people per bedroom;
- a household of one unattached individual may reasonably occupy a bed-sit;
- couples and parents should have a separate bedroom;
- children less than five years of age, of different sexes, may reasonably share a bedroom;
- children five years of age or over, of the opposite sex, should not share a bedroom;
- children less than 18 years of age and of the same sex may reasonably share a bedroom; and
- single household members aged 18 years or over should have a separate bedroom.

Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 40.

Based on this definition, 14% of households with Indigenous person(s) were considered to be living in dwellings requiring at least one additional bedroom, compared to 4% of other households. This was a decrease from 16% in 2001.<sup>108</sup>

Overcrowding rates varied according to tenure, with the highest rates of overcrowding found in Indigenous households renting Indigenous/ mainstream community housing (40% of Indigenous households and 64% of Indigenous peoples). In contrast, home owners (with or without a mortgage) had the lowest rates of overcrowding (7% of Indigenous households and 11% of Indigenous peoples).<sup>109</sup>

The highest rates of overcrowding among Indigenous households were in the Northern Territory (38%) followed by Western Australia (16%). Rates of overcrowding were especially high in the Indigenous/ mainstream community housing sector in the Northern Territory, where 61% of households were overcrowded.<sup>110</sup>

In terms of numbers of overcrowded Indigenous households, in 2006, Queensland had the largest number (6,200) followed by New South Wales (5,200).<sup>111</sup>

### 9.3 Housing quality

The most recent national survey to include measures of housing quality was the NATSISS 2002. It reported approximately one-third (35%) of Indigenous households were living in dwellings that had structural problems (e.g. rising damp, major cracks in floors or walls, major electrical/ plumbing problems and roof defects). Just over half (55%) of Indigenous households renting mainstream or community housing reported that their dwellings had structural problems.<sup>112</sup>

In 2006, the ABS Community Housing and Infrastructure Needs Survey (CHINS) also collected information about the state of repair of houses in discrete Indigenous communities, and their connection to essential services. This is also discussed in the next section.

The CHINS data on dwelling condition were collected for permanent dwellings and categorised according to the cost of repairs required to the dwelling. No data were collected on the 1,596 temporary or improvised dwellings in these communities which are likely to have been in the poorest condition. Some 4,039 Indigenous peoples (4% of the usual resident population) were living in temporary or improvised dwellings in 2006.<sup>113</sup>

In discrete Indigenous communities across Australia, there were around 6,674 dwellings (31%) that required major repair or replacement (table 4.13). Dwellings in remote and very remote areas tended to be in the poorest condition, with 9% requiring replacement compared with 4% of dwellings in non-remote areas.<sup>114</sup>

The Western Australian Aboriginal Child Health Survey developed a measure of housing quality based on the healthy living practices outlined in the National Framework for Indigenous Housing. The survey classified 16% of dwellings with Aboriginal children

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108 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 40–41.

109 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 41.

110 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 41.

111 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 41.

112 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 42.

113 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 43.

114 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 43.

as being of 'poor housing quality'. Dwellings with poor housing quality were more likely to be rented, and to be located in areas of extreme isolation and areas of relative socioeconomic disadvantage.

Households living in poor quality dwellings tended to have poorer economic wellbeing, lower levels of family functioning, experienced more life stresses and their members were more likely to overuse alcohol.<sup>115</sup>

### (a) Discrete Aboriginal or Torres Strait Islander communities

'Discrete' communities are those that comprise predominantly (i.e. over 50%) Indigenous peoples.<sup>116</sup> While they are found across Australia, the majority are situated in the Northern Territory and Western Australia.<sup>117</sup> They are primarily located in remote and very remote areas. Conditions in these communities were until very recently far poorer than conditions in non-Indigenous communities.

The Community Housing and Infrastructure Needs Surveys (CHINS) have been carried out every two years since 1997 by the ABS. They aim to provide a picture of life in discrete communities and allow government programs to improve conditions there to be monitored. In 2006, these communities had an estimated population of 92,960 people.<sup>118</sup>

The 2006 CHINS collected data on the main source of water, sewerage and electricity at the community level for all discrete Indigenous communities:

- The main source of drinking water for the majority of permanent dwellings (53%) was bore water; 30% were connected to a town supply and for 11% the source was a river or reservoir.
- In relation to sewerage, 33% of buildings were in communities with some type of septic system. The next most common type of sewerage system was a town system (30%) followed by community water-borne systems (30%) of dwellings).
- The main type of electricity supply for the majority of permanent dwellings (53%) was a community generator; 37% of dwellings were connected to the state grid and 3% relied on domestic generators.<sup>119</sup>

Between the 2001 and 2006 CHINS there was a decrease in the number and proportion of permanent dwellings not connected to an organised sewerage system or an organised water supply. However, there remains a small but significant number of dwellings without an organized sewerage system or water supply.<sup>120</sup>

Note that there are improvised dwellings in these communities for which data were not collected in the survey.<sup>121</sup>

115 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 42.

116 Australian Bureau of Statistics, *Housing and Infrastructure in Aboriginal and Torres Strait Islander Communities 2006 (Reissue)*, ABS cat no 4710.0, (2007) p 87.

117 Australian Bureau of Statistics, *Housing and Infrastructure in Aboriginal and Torres Strait Islander Communities 2006 (Reissue)*, ABS cat no 4710.0, (2007) p 56, Table 4.9.

118 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 43.

119 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 43.

120 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 43.

121 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 42.

## 10. Indigenous peoples and criminal justice systems

### 10.1 Indigenous adult prisoners

The *Royal Commission into Aboriginal Deaths in Custody* (RCIADIC) reported in 1991. At that time, Aboriginal people made up 14% of the total prison population and were up to 15 times more likely to be in prison than non-Aboriginal people. The Report made a large number of recommendations to address this issue.<sup>122</sup>

Despite this, the number of Indigenous prisoners has increased significantly over the 17-years since the RCIADIC. Indigenous prisoners represented 24% of the total prisoner population (6139 males and 567 females)<sup>123</sup> as of the 30<sup>th</sup> June 2008, a proportion unchanged from the previous year.<sup>124</sup> The ABS notes that caution must be taken in interpreting the increases in the percentage of Indigenous peoples in the prison population, the increase may be due to alterations in the method of data collection and/ or the willingness of Indigenous prisoners to participate and identify themselves as Indigenous.<sup>125</sup>

Age standardisation is a statistical method that adjusts crude rates to account for age differences between study populations. Age standardisation enables better comparisons between different populations. In the context of such a comparison, the key variable interests are the ratio of rates, rather than the age standardised rates alone. Using this, the ABS calculates that at June 2008 Indigenous peoples were 13 times more likely than non-Indigenous people to be in prison, unchanged from 2007.<sup>126</sup> Between jurisdictions, rates vary. For example, as of June 2008, Indigenous peoples in Western Australia were 20 times more likely to be imprisoned than non-Indigenous people. This was the highest age standardised ratio in Australia.<sup>127</sup>

A 2003 study demonstrates the extent of contact Indigenous peoples have with criminal justice processes in New South Wales. Between 1997 and 2001, a total of 25,000 Indigenous peoples appeared in a NSW Court charged with a criminal offence. This constitutes 28.6% of the total NSW Indigenous population. In the year 2001 alone, nearly one in five Indigenous males in NSW appeared in Court charged with a criminal offence. For Indigenous males aged 20–24 years, this rate increased to over 40%.<sup>128</sup>

The median age of all prisoners as of June 30 2007 was 33 years, while the median age of Indigenous male prisoners was 31 years, and the median age of Indigenous female prisoners was 30 years.<sup>129</sup>

### 10.2 Indigenous women

Although there are less Indigenous women in custody they are currently the fastest growing prison population and are severely overrepresented.

Incarceration rates for women generally have increased more rapidly than for men and the increase in imprisonment of Indigenous women has been much greater over the

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122 *Royal Commission into Aboriginal Deaths in Custody, National Report* (1991) volume 1, para. 9.3.1. At [www.austlii.edu.au/au/other/IndgLR/res/rciadic](http://www.austlii.edu.au/au/other/IndgLR/res/rciadic) (viewed 19 January 2009).

123 Australian Bureau of Statistics, *Prisoners in Australia 2008*, ABS cat no 4517.0 (2008) p 22, table 8.

124 Australian Bureau of Statistics, *Prisoners in Australia 2008*, ABS cat no 4517.0 (2008) p 6.

125 Australian Bureau of Statistics, *Prisoners in Australia 2008*, ABS cat no 4517.0 (2008) p 6.

126 Australian Bureau of Statistics, *Prisoners in Australia 2008*, ABS cat no 4517.0 (2008) p 6.

127 Australian Bureau of Statistics, *Prisoners in Australia 2008*, ABS cat no 4517.0 (2008) p 6.

128 D Weatherburn, B Lind, B Hua and J Hua, 'Contact with the New South Wales court and prison system: the influence of age, Indigenous status and gender' (2003) *Crime and Justice Bulletin* 78(1) p 4–5. At [http://www.lawlink.nsw.gov.au/lawlink/bocsar/ll\\_bocsar.nsf/vwFiles/CJB78.pdf/\\$file/CJB78.pdf#target='\\_blank'](http://www.lawlink.nsw.gov.au/lawlink/bocsar/ll_bocsar.nsf/vwFiles/CJB78.pdf/$file/CJB78.pdf#target='_blank') (viewed 19 January 2009).

129 Australian Bureau of Statistics, *Prisoners in Australia 2008*, ABS cat no 4517.0 (2008) p 8.

period compared with non-Indigenous women.<sup>130</sup> The Indigenous female imprisonment rate has increased by 34 % between 2002 and 2006 while the imprisonment rate for Indigenous men has increased by 22%.<sup>131</sup>

Indigenous women are also 23 times more likely to be imprisoned than non-Indigenous women while Indigenous men are 16 times more likely to be imprisoned than non-Indigenous men.<sup>132</sup>

### 10.3 Indigenous juveniles

In 2005–06, Indigenous young people are significantly overrepresented in the juvenile justice system: 44 per 1,000 Indigenous youths were under juvenile justice supervision, while only 3 per 1,000 non-Indigenous youths were under such supervision.<sup>133</sup>

A study in Queensland has tracked the trajectory through the criminal justice system of young offenders who first appeared in the juvenile justice system from 1994–95 (through custodial and non-custodial orders) up to September 2002<sup>134</sup>. The study reported that by September 2002, 89% of Indigenous male juveniles on supervised orders had progressed to the adult system, with 71% having served at least one term of imprisonment. It also reported there was an increased likelihood that those juveniles who were subject to a supervised justice order and had been the subject of a care and protection order would proceed to the adult criminal justice system, with 91% of all such juveniles having some contact with the adult system, and 67% having served at least one term of imprisonment. The study concluded that ‘over time, the probability of those juveniles on supervised orders in 1994–95 who are subject to multiple risk factors (e.g. male, Indigenous, care and protection order) progressing to the adult corrections system will approach 100 per cent.’<sup>135</sup>

### 10.4 Indigenous prisoner health status

Data collection on Indigenous prisoner health status is very poor, however, given the extensive evidence of Indigenous health inequality, it is reasonable to assume that Indigenous prisoners would experience ‘a health status the same or probably worse than that of the general prisoner population’.<sup>136</sup>

The National Prison Entrants Bloodborne Virus Survey found that levels of Hepatitis B exposure is considerably higher for Indigenous prisoners, with 29% of Indigenous prisoners reporting exposure compared to 18% of the non-Indigenous prisoner population.<sup>137</sup> Similar levels of Hepatitis C were found for Indigenous and non-

130 M Cameron, ‘Women Prisoners and Correctional Programs’, *AIC Trends and Issues in Crime and Criminal Justice*, no 194, Australian Institute of Criminology (2001) p 1.

131 Steering Committee for the Review of Government Service Provision, *Overcoming Indigenous Disadvantage: Key Indicators 2007*, Productivity Commission (2007) p 128.

132 Steering Committee for the Review of Government Service Provision, *Overcoming Indigenous Disadvantage: Key Indicators 2007*, Productivity Commission (2007) p 129.

133 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia’s Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 228.

134 M Lynch, J Buckman, and L Krenske, *AIC Trends and Issues in Crime and Criminal Justice*, Australian Institute of Criminology and Queensland Crime and Misconduct Commission, Issues paper 265 (2003).

135 M Lynch, J Buckman, and L Krenske, *AIC Trends and Issues in Crime and Criminal Justice*, Australian Institute of Criminology and Queensland Crime and Misconduct Commission, Issues paper 265 (2003) p 2.

136 Australian Medical Association, *Undue Punishment? Aboriginal People and Criminal Justice in Prison: An Unacceptable Reality*, Australian Medical Association Report Card Series (2006). At [https://fed.ama.com.au/cms/web.nsf/doc/WEEN-6PU9BH/\\$file/Indigenous\\_Report\\_Card\\_2006.pdf](https://fed.ama.com.au/cms/web.nsf/doc/WEEN-6PU9BH/$file/Indigenous_Report_Card_2006.pdf) (viewed 19 January 2009).

137 T Butler, L Boonwaat and S Hailstone, *National Prison Entrants Bloodborne Virus Survey Report 2004*, Centre for Health Research in Criminal Justice and National Centre for HIV Epidemiology and Clinical Research (2005), p 5. At [http://www.justicehealth.nsw.gov.au/publications/bbv\\_survey.pdf](http://www.justicehealth.nsw.gov.au/publications/bbv_survey.pdf) (viewed 19 January 2009).

Indigenous prisoners, with 37% of Indigenous prisoners compared with 34% of non-Indigenous prisoners, having Hepatitis C antibodies.<sup>138</sup>

Another way of looking at the health inequality of Indigenous prisoners is tracking the mortality rate of prisoners upon their release from custody. A retrospective cohort study of adults imprisoned in NSW between 1988 and 2002 found that Indigenous men were 4.8 times more likely; and Indigenous women were 12.6 times more likely, to die after release from custody than the general NSW population.<sup>139</sup> Many of these deaths were attributed to mental and behavioural disorders and drug-related deaths.<sup>140</sup>

### 10.5 Indigenous deaths in custody

Over 1990–1999, the decade since the RCIADIC reported, the Australian Institute of Criminology reports that despite some fluctuations in rates of both Indigenous and non-Indigenous deaths in custody since 1982, the rates of death per 1,000 prisoners have become more similar since 1999 and both have begun to trend downward since 1999. This indicates that the disproportionate number of Indigenous deaths in custody relative to the total Indigenous population is a reflection of the over-representation of Indigenous peoples in criminal justice processes.<sup>141</sup>

In 2006, there were 54 recorded deaths in custody and custody-related operations. There were 11 recorded incidents of Indigenous deaths in custody: four in prison custody, six in police custody and custody-related operations, and one in juvenile detention.<sup>142</sup>

## 11. Child protection

### 11.1 History of Indigenous child removals

To measure the number of Indigenous peoples potentially impacted by the removal of children from their families under past practices of forcibly and administratively removing Indigenous children from their families, the ABS social surveys have included questions asking respondents whether they or any of their relatives had been removed from their natural families.

Both the 1994 and 2002 surveys report that 8% of Indigenous respondents aged 15 years or over at the time of the surveys, had been taken away from their natural family.<sup>143</sup> The incidence of removal increased slightly with age, (perhaps reflecting greater numbers of removals in the past):

- 10% of Indigenous respondents aged 25 years or over reported that they had been taken away from their natural family.

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138 T Butler, L Boonwaat and S Hailstone, *National Prison Entrants Bloodborne Virus Survey Report 2004*, Centre for Health Research in Criminal Justice and National Centre for HIV Epidemiology and Clinical Research (2005), p 5. At [http://www.justicehealth.nsw.gov.au/publications/bbv\\_survey.pdf](http://www.justicehealth.nsw.gov.au/publications/bbv_survey.pdf) (viewed 19 January 2009).

139 A Kariminia, T Butler, S Corben, M Levy, L Grant, J Kaldor and M Law, 'Extreme cause-specific mortality in a cohort of adult prisoners – 1988–2002: a data linkage study' (2007) 36(2) *International Journal of Epidemiology* 310, p 314.

140 A Kariminia, T Butler, S Corben, M Levy, L Grant, J Kaldor and M Law, 'Extreme cause-specific mortality in a cohort of adult prisoners – 1988–2002: a data linkage study' (2007) 36(2) *International Journal of Epidemiology* 310, p 310.

141 M Lynch, J Buckman, and L Krenske, *AIC Trends and Issues in Crime and Criminal Justice*, Australian Institute of Criminology and Queensland Crime and Misconduct Commission, Issues paper 265 (2003) p ix.

142 J Joudo and J Curnow, *Deaths in Custody in Australia: National deaths in Custody program annual report 2006*, Australian Institute of Criminology, Technical and Background paper no. 85 (2006) p xiii.

143 Australian Bureau of Statistics, *National Aboriginal and Torres Strait Islander Health Survey 2004–05*, ABS cat no 4715.0 (2005) p 2.

- 10% was recorded for the closest equivalent age cohort group (35 years or over) in the NATSISS 2002.

In the NATSISS 2002, 38% of respondents reported that they had either been removed themselves and/ or had relatives who, as a child, had been removed from their natural family. The most frequently reported relatives removed were grandparents (15%), aunts or uncles (11%), and parents (9%).<sup>144</sup>

The intergenerational impacts of past child removal practices (see Text Box 2 below) are reflected in the higher numbers of substantiation orders, child protection orders and child removal orders being made in the present day in relation to Indigenous children.

### **Text Box 2: The intergenerational impacts of past child removal practices<sup>145</sup>**

The Western Australian Aboriginal Child Health Survey (WAACHS) 2002 provides a robust scientific evidence-base of the intergenerational effects on today's Indigenous children and their carers of past child removal practices. The WAACHS surveyed the health and wellbeing of 5,289 Western Australian Indigenous children aged 0–17 years and their carers.

In the survey, around 12.3 per cent of primary carers and 12.3 per cent of secondary carers reported they had been subject to such separation. Carers were also asked whether either of their parents had been forcibly separated from their natural family. Some 20.3 per cent of the mothers of primary carers (e.g. grandmothers of the survey children) and 12.6 per cent of the fathers of primary carers (e.g. grandfathers of the survey children) had been forcibly separated.

Among all of the Aboriginal children and young people living in Western Australia, 35.3 per cent were found to be living in households where a carer or a carer's parent (e.g. grandparent) was reported to have been forcibly separated from their natural family.

It was found that carers who had been forcibly separated from their natural families (compared with carers of Aboriginal children who had not been forcibly separated) were:

- 1.95 times more likely to have been arrested or charged with an offence
- 1.61 times more likely to report the overuse of alcohol caused problems in the household
- 2.10 times more likely to report that betting or gambling caused problems in the household
- Less than half as likely to have social support in the form of someone they can 'yarn' to about problems
- 1.50 times more likely to have had contact with Mental Health Services in Western Australia.

Further, Aboriginal children whose primary carer had been forcibly separated from their natural family were found to be 2.34 times more likely to be at high risk of clinically significant emotional or behavioral difficulties than children whose carers were not forcibly separated

144 Australian Bureau of Statistics, *National Aboriginal and Torres Strait Islander Health Survey 2004–05*, ABS cat no 4715.0 (2005) p 5–6.

145 Kulunga Research Network and the Telethon Institute for Child Health Research, *Submission to the Senate Committee Inquiry into the Stolen Generation Compensation Bill 2008*, April 9, 2008. At [www.aph.gov.au/SENATE/committee/legcon\\_ctte/stolen\\_generation\\_compensation/submissions/sub42.pdf](http://www.aph.gov.au/SENATE/committee/legcon_ctte/stolen_generation_compensation/submissions/sub42.pdf) (viewed 19 January 2009).

## 11.2 Present day

There are three areas of child protection services for which national data is compiled:

- Child protection notifications, investigations and substantiations;
- Children on care and protection orders; and
- Children in out-of-home care.

Children who are perceived to be in need of protection can come into contact with community services departments or child protection agencies (in the states and territories) by someone expressing concern about the welfare of a child or making a report to the department.

From the reporting stage, if it is decided that the child is prima facie under risk of harm (neglect or abuse) the report is classified as a notification. Most notifications are investigated and classified as substantiated or not substantiated according to the degree of risk to the child. A range of services are then provided to that child and the child's family.

In extreme cases, state departments can apply to a court for a care and protection order. Children can also be placed in out-of-home care, either temporarily or more long term, by order of the court.<sup>146</sup>

### (a) Child protection notifications, investigations and substantiations

The rates of Indigenous children entering the child protection system are higher than the rates for other children. In 2005–06, the rates of Aboriginal and Torres Strait Islander children who were the subject of a child protection substantiation were substantially higher than the rates for other children in all jurisdictions except Tasmania.<sup>147</sup>

Table 4 below sets out the rate of substantiated child protection notifications per thousand children for Indigenous and other children, and a standardised ratio (SR) showing the Indigenous rate as a multiple of the non-Indigenous rate.

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146 For a detailed explanation of care and protection classifications and statistics see: Australian Institute of Health and Welfare, *Child Protection 2001–02* (2003) ch 1.

147 The ABS cautions that data for Tasmania, however, should be interpreted with caution due to the low incidence of child protection workers recording Indigenous status at the time of the substantiation: Australian Bureau of Statistics, *Population Distribution, Aboriginal and Torres Strait Islander Australians 2001*, ABS cat no 4705.0 (2002) p 222.

**Table 4: Children who were the subject of child protection substantiation: By State and Territory, Indigenous status 2005–06<sup>148</sup>**

State/Territory	Indigenous (per 1,000 children)	Other children (per 1,000 children)	Likelihood that Indigenous children will be subject of a child protection substantiation as a multiple of the rate for other children
NSW	44.2	6.9	6.4
Vic	67.7	6.0	11
Qld	23.0	10.9	2.3
WA	10.9	1.4	7.8
SA <sup>149</sup>	32.2	3.5	9.2
NT	15.2	3.2	4.8
Tas	4.4	6.2	0.7
A.C.T	56.8	10.9	12.0

Substantiations are classified into one of the following four categories depending on the main type of abuse or neglect that has occurred: physical abuse, sexual abuse, emotional abuse, or neglect. The precise definition of type of abuse or neglect, as well as the types of incidences that may be substantiated, vary according among jurisdictions.

Compared to non-Indigenous children, Indigenous children were more likely to be the subject of a substantiation of neglect than other children. For example, in Western Australia 40% of Indigenous children in substantiations were the subjects of a substantiation of neglect, compared with 30% of other children.

Contrary to popular perceptions, the data suggests that non-Indigenous children were more likely than Indigenous children to have substantiations where the main type of abuse was sexual. For example, in New South Wales, 17% of other Australian children had substantiations where the main type of abuse was sexual abuse, compared with 9% of Indigenous children .

Likewise in the Northern Territory, in 2005–06 (the year prior to the Northern Territory Emergency Response (NTER)) 4.2% of Indigenous child substantiations were for sexual abuse compared to 9.3% of other Territorian children,<sup>150</sup> a figure that does not appear to support the allegations of endemic child abuse in NT remote communities that was the rationale for the NTER. However, the possibility of significant under-reporting must be considered as an explanatory factor, particularly in the light of the

148 Australian Bureau of Statistics, *Population Distribution, Aboriginal and Torres Strait Islander Australians 2001*, ABS cat no 4705.0 (2002) p 223, Table 11.2.

149 The ABS cautions that SA data should be interpreted with caution due to the high proportion of investigations not finalised by 31 August 2006 (the cut-off date for the processing of investigations for inclusion in the data for that year).

150 Australian Bureau of Statistics, *Population Distribution, Aboriginal and Torres Strait Islander Australians 2001*, ABS cat no 4705.0 (2002) p 223, Table 11.3.

findings of the Little Children are Scared Report.<sup>151</sup> There was, in the authors' opinion, 'sufficient anecdotal and forensic and clinical information available to establish that there is a significant problem in the Northern Territory in relation to the sexual abuse of children'.<sup>152</sup>

**(b) Care and protection orders**

The rate of Indigenous children being placed on care and protection orders was around seven times the rate for other Australian children. Table 5 shows the rate ratios varied considerably by jurisdiction and were highest in Victoria. Otherwise, the rate per 1,000 Indigenous children is significantly higher than the rate for other children across all jurisdictions.

State/Territory	Indigenous children (rate per 1,000)	Other children (rate per 1,000)	Ratio of Indigenous children to other children on care and protection orders
NSW	37.2	4.5	8.3
Vic	56.4	4.6	12.3
Qld	26.7	5.2	5.1
WA	31.8	3.9	8.2
SA	25.8	2.7	9.6
Tas	15.2	6.5	2.3
A.C.T	12.2	3.8	3.2
NT	53.3	6.2	8.6

**(c) Children in out-of-home care**

Table 6 compares the rate per 1,000 Indigenous children and rate per 1,000 other children in out-of-home care. It shows that the national rate per 1,000 Indigenous children is 7.3 times the rate for other children across all jurisdictions.

151 P Anderson and R Wild, Ampe Akelyernemane Meke Mekarle – *Little Children are Sacred, Report of the Northern Territory Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse* (2007).

152 P Anderson and R Wild, Ampe Akelyernemane Meke Mekarle – *Little Children are Sacred, Report of the Northern Territory Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse* (2007).

153 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 225, Table 11.4.

**Table 6: Rate of children in out-of-home care: By Indigenous status and state/territory, 30 June 2006<sup>154</sup>**

State/Territory	Indigenous children (rate per 1,000)	Other children (rate per 1,000)	Rate/ratio
NSW	44.7	4.6	9.7
Vic	42.1	3.7	11.4
Qld	24.0	4.7	5.1
WA	30.2	3.4	8.9
SA	24.8	2.6	9.5
Tas	11.9	5.4	2.2
A.C.T	10	3.0	3.3
NT	43.7	4.1	10.7
<b>Total</b>	<b>29.8</b>	<b>4.1</b>	<b>7.3</b>

At 30 June 2006, 62% of Indigenous children in out-of-home care across Australia were placed in accordance with the Aboriginal Child Placement Principle. This Principle outlines a preference for placing Indigenous children with an Indigenous family. It places a preference for placements first with their extended families, second with their Aboriginal or Torres Strait Islander community and third with Indigenous peoples before placing the child with a non-Indigenous family.<sup>155</sup>

## 12. The economic cost of inequality

In 2008, Reconciliation Australia published *An overview of the economic impact of Indigenous disadvantage*, a report commissioned from Access Economics, that attempted, for the first time, to quantify the economic impact of Indigenous socio-economic disadvantage.

Extracts from the Summary are included in Text Box 3.

154 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 225, Table 11.4.

155 Australian Institute of Health and Welfare and Australian Bureau of Statistics, *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples 2008*, ABS cat no 4704.0 (2008) p 225.

### Text Box 3: Economic cost of inequality

The analysis in this report shows there are sizeable economy wide benefits to be achieved from improving the quality of life of Indigenous Australians. In a 'what if' scenario based on raising the life expectancy of Indigenous Australians and increasing the proportion of the Indigenous population in the workforce who are also able to take on higher skilled and better paid jobs to levels commensurate with those of all Australians, real GDP could be 1% higher than otherwise in 2029 – equivalent to around \$10 billion today. Further, since the increase in GDP is larger than the forecast increase in the total population, national living standards for all Australians would increase. Therefore, there are clear economic benefits from government action to reduce Indigenous disadvantage.

The economic benefits will only be realised if the health and educational attainment of Indigenous Australians improves. In fact the modelling outcomes are predicated on the many facets of Indigenous disadvantage that contribute to their poorer health and labour market outcomes being addressed. In another light, achieving the economic benefits implies an improved quality of life for Indigenous peoples – a reduction in the burden of disease and an improvement in the ability of Indigenous Australians to share in economic prosperity....

If the circumstances of Indigenous Australians improve to match those of the Australian average:

- government revenue in 2029 would be \$4.6 billion higher than otherwise; and
- government expenditure in 2029 in key portfolios relevant to Indigenous Australians would be \$3.7 billion lower than otherwise....

Foreshadowing possible policies and programs required to achieve the economic benefits was out of the scope for this project. However, the analysis of government budgets suggests that from 2029, there will be an additional \$8.3 billion available to governments each year if Indigenous disadvantage were alleviated. In principle, these additional public funds could be allocated to policies and programs aimed at improving the quality of life of Indigenous Australians.<sup>156</sup>

<sup>156</sup> Access Economics for Reconciliation Australia, *An overview of the economic impact of Indigenous disadvantage*, (2008) p 5–6 (extracts). At <http://www.reconciliationaustralia.org/downloads/772/TheeconomicimpactofIndigenousdisadvantageSep08.pdf> (viewed 19 January 2008).