Briefing Note
COVID-19 impacts on Aboriginal Communities

Background

1. Aboriginal peoples are resilient, however, the COVID-19 pandemic has highlighted and exacerbated structural inequalities between Aboriginal and non- Aboriginal people.

2. COVID-19 is now reaching many vulnerable Aboriginal peoples - including in regional and remote communities, Elders, and people with underlying health conditions. It is also significantly impacting the mental health and wellbeing of our people.

3. It is the Government's responsibility to keep all citizens safe. Government holds the levers and resources.

4. Governments need to urgently work with Aboriginal community-controlled organisations to design and deliver critical services and responses that meet the needs of our communities.

5. We are concerned that Government has not done enough to keep our communities safe:
   a. Lack of vaccine supply
   b. Lack of vaccination facilities / hubs
   c. Making vaccination appointments has not been easy
   d. Communications from government have not been clear enough, and have not been appropriately targeted to our communities
   e. Not enough has been done to combat misinformation
   f. Lack of testing facilities
   g. Issues with transport, logistics, long distances
   h. There have been some unhelpful comments stigmatising Aboriginal communities – we need this to stop
   i. Lack of assistance to our most vulnerable to access vaccines
   j. Establishment of a designated free COVID 19 Mob assistance hotline.

6. There are many outstanding issues that we need government to work with us on, including:
   a. More supports for our Aboriginal community-controlled health services
   b. Access to medical advice about vaccination options and medical care
   c. More vaccine hubs
   d. More mental health supports
   e. Targeted health promotion needs to be prioritised
   f. More needs to be done to stop the spread of misinformation
   g. Food security and access to fresh healthy food and water
   h. We are concerned that opening up at 70% or 80% vaccinate rates - without having met or exceeded those targets in Aboriginal communities
   i. Ensuring internet access for telehealth, vaccine bookings, and online learning
   j. Better coordination of services and supports
   k. More supports for the work of local COVID-19 committees
   l. Ensuring police are working with our communities to ensure people are not putting other people at risk. We do not want to see people incarcerated or receiving fines, but we need to ensure people are doing the right thing.

<ol type="a" start="13">
Appropriate access points to vaccines considering support and safety and means to register for vaccines for our Elders, Aboriginal peoples with disabilities and the Aboriginal LGBTQI+ community.
For those being fined how we address this in the future without compounding further issues such as loss of licences, possible incarceration etc

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Through the national agreement on Closing the Gap, the Federal and NSW Governments have committed to partner with us and our Aboriginal community-controlled organisations to design and deliver appropriate responses and necessary services, to ensure that our communities – alongside the whole community – stays COVID-19 safe.

National Cabinet passed the Aboriginal & Torres Strait Island COVID-19/Vaccination Strategy in March 2021. The bodies responsible for input into this strategy should be made public. Aboriginal community-controlled organisations in each state need to know when they will have access to this strategy, in order to localise it for communities.

Key issues

Health services
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Aboriginal peoples, who were identified within the 1B and 2A Phases of the National Vaccine Rollout Strategy as priority groups, have been left exposed to the virus following poor vaccine availability and continued movement through vulnerable communities.

People prioritised in these phases were meant to be vaccinated by April. Instead, first-dose vaccination rates for Aboriginal peoples are approximately 20% lower than the national average, with many vulnerable communities forced to travel into bigger towns such as Dubbo (a COVID-19 epicentre) to receive their vaccination[1].

Aboriginal peoples are vulnerable to the risks of COVID-19, with greater likelihood of being infected with COVID-19, and higher risks of serious disease and death from COVID-19. As the full vaccination of Aboriginal peoples may not be fully sufficient in preventing the impacts of COVID-19 within Aboriginal communities, additional measures are needed to ensure the safety of our communities. Outbreaks in schools are a significant concern.. The requirements for all school staff to be fully vaccinated is important, and additional consideration should be given to daily testing/ rapid antigen testing in schools in vulnerable communities. These requirements also exclude the many school staff which present an equal risk of infection to students. These restrictions and resources need to be extended to all school staff.

Significant pressure is being placed on communities and on Local Aboriginal Medical Services, with health services now facing a doubled workload and prospects of increasing pressure as cases grow.

Families encounter multiple access barriers to telehealth including: a lack of access to technology for some; restricted capacity of services to build trusting relationships through online communications; and services that are not culturally safe or designed to meet the specific needs of children and their families."[2]

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[1] https://www.abc.net.au/news/2021-09-07/nsw-covid-outbreak-vaccinations-urgent-as-aboriginal-cases-grow/100436516

[2] SNAICC 2020, 'Brief on COVID-19 response and recovery issues for Aboriginal and Torres Strait Islander children and families in contact with child protection services', https://apo.org.au/sites/default/files/resource-files/2020-07/apo-nid309074.pdf

Mental health and wellbeing during lockdown

14. Prior to COVID-19, Aboriginal and Torres Strait Islander peoples disproportionately experienced health disadvantages and inadequate access to mental health care. Nationally in 2014-2015, 1 in 3 Indigenous young people reported experiencing a high level of psychological distress, compared with 1 in 8 non-Aboriginal and Torres Strait Islander youth[3]. Suicide rates among Aboriginal and Torres Strait people typically double those of other Australians, and with COVID-19 outbreaks and lockdowns, the rate of suicide is predicted to increase[4].

15. COVID-19 support from Government has focused on mainstream mental-health services, however culturally safe solutions that respond to the needs and diversity of Aboriginal peoples and communities are desperately needed and chronically under-resourced.[5]

Inaccessibility of COVID information and services

16. Aboriginal peoples have found it difficult to get timely, accurate information throughout the pandemic, and this is exacerbated for those with disabilities, children in out-of-home care and rural and remote communities. Consistent, clear messaging is needed on vaccine and testing requirements and changing restrictions is essential. Communities require greater information about the COVID-19n roadmap, current and future restrictions throughout the state, and enforceability of restrictions. Aboriginal businesses need clear messaging regarding the impact that future requirements will have.

17. The 2020 Disability Royal Commission about COVID-19 heard that accessible, appropriate information about public health orders and changing rules was difficult to find, and many advocacy organisations, such as FPDN, having to produce their own culturally appropriate and targeted information for people with disability.[6]

Lacking preventative measures for community workers

18. COVID-19 policy for DCJ workers has yet to be updated for the rotating shift workers interacting with Aboriginal children residing in temporary accommodation. Aboriginal children are being exposed to unvaccinated and untested DCJ workers in temporary out of home care. The Government must ensure that there are up to date policies in place to prevent infection of our children, as well as our communities when family contact restrictions are eased. The vaccination and testing of employees and clientele must also be considered within the community services sector regarding parole and probationary services. The spread of Covid within this system is a significant issue, and measures must be implemented to mitigate this issue and prevent the spread of Covid to our communities.

Economic issues

19. The ongoing impacts of COVID-19 in Australia have continued to exacerbate job insecurity for Aboriginal peoples, with the economic fallout of the pandemic disproportionately impacting those that already experience higher levels of disadvantage[7].

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[3] Equity Economics (2020), A Wave of Disadvantage Across NSW: Impact of the Covid-19 Recession, A Report Prepared for the New South Wales Council of Social Service, Sydney, https://apo.org.au/sites/default/files/resource-files/2020-10/apo-nid309022.pdf

[4] Dudgeon, Wright & Derry 2020, 'A national COVID-19 pandemic issues paper on mental health and wellbeing for Aboriginal and Torres Strait Islander peoples', UWA

[5] Dudgeon, Wright & Derry 2020, 'A national COVID-19 pandemic issues paper on mental health and wellbeing for Aboriginal and Torres Strait Islander peoples', UWA

[6] https://fpdn.org.au/media-release-new-resources-about-covid-vaccine-for-first-peoples-with-disability/

[7] Equity Economics 2020,'A wave of disadvantage across NSW: impact of the COVID-19 recession', NSW Council of Social Service, p.4

20. Job losses, financial insecurity, and increasing inability to be able to pay for utilities such as electricity with families at home all the time has led to increased anxiety being felt by communities.

Heavy-handed policing of public health breaches in Aboriginal communities

21. Seen in the 2020 Change the Record 'Critical Condition' report, Aboriginal peoples are disproportionately affected by the more punitive and restrictive policy responses to the pandemic[8]. There have been high numbers of fines issued in towns with high Aboriginal populations and low levels of COVID-19.[9] The Aboriginal Legal Service NSW/ACT stated its concern about over-policing of Aboriginal communities and the potential unfair targeting and intimidation of Aboriginal people, after suburbs with high Aboriginal populations were given the most fines in the 2020 lockdown.

22. There is minimal discretion given by government or police for breaches in public health orders in communities where overcrowding and inadequate access to essential wages and food supplies has led to the breaching of health orders to get essentials.

Education

23. The lack of access to internet, mobile phones and technology is a significant issue for children being home-schooled. Access to the NBN, internet, mobile phones and necessary technology is also reduced for Aboriginal families. This 'technological divide' excludes many Aboriginal children from accessing necessary resources that enable them to receive adequate education throughout the pandemic.[10]

24. Remote areas in particular experience less access to technology and internet, while larger families also struggle to provide adequate computers, phones and other technology for every child.[11]

Youth in community and children in out of home care

25. The number of Aboriginal and Torres Strait Islander children in out of home care has increased since 2019[12]. Children in out-of-home-care during COVID lockdowns have had face-to-face contact with their families replaced with telephone, videoconferencing or other online contact, and reduced in frequency[13]. Lack of access to technology significantly impacts the ability for important contact with families, and this technological contact are often not appropriate for young children or children with disabilities. A lack of face-to-face contact connection with their families throughout lockdown increases experiences of stress and anxieties for Aboriginal children and families, compounding trauma and mental health

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[8] https://www.changetherecord.org.au/critical-condition

[9] https://theconversation.com/for-first-nations-people-coronavirus-has-meant-fewer-services-separated-families-and-over-policing-new-report-139460

[10] SNAICC 2020, 'Brief on COVID-19 response and recovery issues for Aboriginal and Torres Strait Islander children and families in contact with child protection services', https://apo.org.au/sites/default/files/resource-files/2020-07/apo-nid309074.pdf

[11] SNAICC 2020, 'Brief on COVID-19 response and recovery issues for Aboriginal and Torres Strait Islander children and families in contact with child protection services', https://apo.org.au/sites/default/files/resource-files/2020-07/apo-nid309074.pdf

[12] https://www.snaicc.org.au/media-release-accountability-report-calls-on-governments-to-priortise-supporting-families-to-reduce-the-number-of-our-children-in-out-of-home-care/

[13] https://www.theguardian.com/australia-news/2020/may/27/aboriginal-people-in-prison-and-out-of-home-care-suffering-under-punitive-covid-19-restrictions

issues[14]. COVID-19 measures have also prevented parents from following reunification plans due to reduced access to support services, higher levels of stress and anxiety, and reduced physical contact with their children.

Recommendations:

1. **Funding and support should be provided for targeted health communication by Aboriginal community-controlled organisations**. Considerations must be made around messaging to diverse groups, including those with a disability, youth and LGBTQI+ Aboriginal peoples. Consistent messaging being distributed in physical form would also reach those without access to technology.

2. **Greater vaccine supply, and investment and collaboration with Aboriginal Community Controlled Health Organisations is required.** It is essential that the Government increases the rates of vaccine uptake in vulnerable Aboriginal communities, and partnerships with culturally and clinically safe vaccination services is essential in achieving this. More resources are needed for Aboriginal Community Controlled Health Organisations to provide door to door testing and vaccination. Any health measures (clinical and non-clinical) must be done in consultation with the Aboriginal Health & Medical Research Council.

3. As suicide rates among Aboriginal and Torres Strait people typically double those of other Australians, **investment must be given to culturally safe mental health providers**. Aboriginal Community Controlled Organisations provide culturally safe support services for Aboriginal peoples, and the establishment of a mental health line service that engages with these providers would provide needed support to these communities.

4. Appropriate support and access points to information and vaccines is required for our **Elders, Aboriginal peoples with disabilities and the Aboriginal LGBTQI+ community** to ensure that their needs are being met.

5. Greater support needs to be given to those left unemployed or unable to work due to the pandemic.

6. **Government should work with Aboriginal Community Controlled Organisations**, and particularly the Aboriginal Community Controlled Health Organisations, to increase support services for these communities (clinical and non-clinical), providing access to essential products and services, welfare checks and connecting with community.

7. Police should use discretion before issuing fines, as these breaches are at times for essential purposes.

8. Home schooling is inequitable. The **Government must increase investment into telecommunications to improve and upgrade infrastructure in remote communities** to ensure that telecommunications are at a standard that enables Aboriginal communities to access essential services. Access to necessary resources, such as internet, must be provided to Aboriginal students. It is essential to Closing the Gap that our children are provided with equal opportunity for education, and the pandemic has severely impacted this.

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[14] SNAICC 2020, 'Brief on COVID-19 response and recovery issues for Aboriginal and Torres Strait Islander children and families in contact with child protection services', https://apo.org.au/sites/default/files/resource-files/2020-07/apo-nid309074.pdf

9. **Governments must increase their investment in prevention and early intervention family supports**, recognising the greater support needs of families resulting from the crisis. Clear advice and guidance on ensuring the continuation of family support services wherever possible should also be prioritised. **Government should engage with Aboriginal community-controlled services to facilitate safe contact for Aboriginal families and children in out of home care through the current crisis**. Children in out of home care must also have their reunification and restoration plans adapted to be progressed to the fullest extent possible in the context of COVID-19. The rights of Aboriginal children must be upheld during the pandemic and throughout the recovery from it.