

12/7/08  
Calma

Tabled by Mr Tom Calma  
Aboriginal and Torres Strait  
Islander Social Justice  
Commissioner, Human Rights  
and Equal Opportunity  
Commission

**Opening Statement by  
Tom Calma, Aboriginal and Torres Strait Islander Social Justice Commissioner,  
Australian Human Rights Commission**

**to the  
NSW Parliamentary  
Inquiry into Overcoming Indigenous Disadvantage  
15 September 2008  
10.00am – 11.00 am**

Good morning,

I pay my respects, and those of the Commission, to the traditional owners of the land where we are meeting, the Gadigal peoples of the Eora nation.

Thank you for the opportunity to appear before the Committee today. You have a difficult task and the extensive nature of your interim report reflects the complexity and the sheer weight of issues that need to be addressed if Indigenous peoples in this state are to be able to enjoy equal life chances to all other citizens.

I want to highlight two sets of issues in my opening remarks.

First, I would refer you to the extensive range of materials produced by my office over recent years that address the issues raised in your interim report. As you would be aware, as Social Justice Commissioner I am charged with the responsibility of producing two reports that are tabled in the federal Parliament each year. These are the *Social Justice Report* and the *Native Title Report*.

These reports touch on nearly every issue that you have raised in your interim report. In particular, these reports focus on:

- The challenges of government service delivery – particularly in terms of achieving whole of government coordination and improved access to mainstream services;
- The importance of engagement with and participation of Indigenous peoples in service delivery arrangements;
- How to achieve appropriate levels of accountability for the performance of governments through the establishment of targets and benchmarks, and monitoring frameworks;
- A human rights based approach to addressing family violence and child abuse, as well as to achieving reconciliation and to closing the gap on health inequality; and
- The specific needs of Indigenous prisoners to ensure reintegration into society and to addressing recidivism rates.

There will be much in these reports as well as my other activities that you may wish to explore with me and my staff today. I would urge you to also look to these reports in formulating your next steps.

Another issue that I have spent some time considering of late is the importance of establishing a National Indigenous Representative Body. I released an issues paper on this in July this year. How it relates to the challenges outlined in your interim report is another key issue.

Second, I want to speak explicitly about the Close the Gap campaign for Indigenous health equality that my office commenced in 2006.

This campaign emerged from the *Social Justice Report 2005*. A copy of that report was provided to all members of the committee at the commencement of your inquiry.

In that Report, I argued that it was unacceptable for a country as rich as ours, and one based on the notions of the 'fair go' and the 'level playing field', to tolerate the gap, or the divides that underlie it, and that have existed between the health of Indigenous and non-Indigenous Australians for as long as records have been kept. I called for action, and I made recommendations that set out a broad path to bring it to an end as soon as practicable.

In particular, I recommended that the following targets be adopted by Australian governments:

- 25 years to achieve equality in life expectation
- 10 years to achieve equality of opportunity in relation to access to primary health care and in relation to infrastructure that supports health (such as housing, food supplies, water, and etc.).

My recommendations encapsulated a human rights based approach to ending the Indigenous health crisis – one that utilises targets and benchmarks to not only provide an end in sight, but also to ensure accountability for achieving the goal of health equality.

Following the release of my report in March 2006, the National Aboriginal Community Controlled Health Organisation, the Australian Indigenous Doctors' Association, the Congress of Aboriginal and Torres Strait Islander Nurses, the Australian Indigenous Dentists' Association, Australians for Native Title and Reconciliation, the Fred Hollows Foundation, Oxfam Australia and I led a coalition of approximately 40 organisations in the National Indigenous Health Equality Campaign.

The two main goals of the Campaign were:

- First, to provide impetus for Australian governments to revitalise their existing commitments to ending Indigenous health inequality, but also – significantly - to place a time frame on these by adopting the targets I had recommended.
- Second, to generate a range of ambitious yet realistic Indigenous Health Equality Targets.

The first stage of this Campaign culminated in the National Indigenous Health Equality Summit held in Canberra over 18 – 20 March, 2008. This Summit resulted in the finalisation of a series of health targets to achieve health equality within a generation; and in the signing of the *Close the Gap Statement of Intent* by the Prime Minister, the Ministers for Health and Indigenous Affairs, the Opposition leader, and every major Indigenous and non-Indigenous health peak body nationally.

We can talk further to the health targets shortly. Upfront I want to highlight the importance of the Statement of Intent. This is a template for action by all Australian governments on Indigenous issues. It has also clearly been something that has driven a lot of the commitments by COAG that are unfolding as we speak.

The statement of intent provides a bipartisan commitment on addressing Indigenous disadvantage – this is critical given the inter-generational nature of our challenge. It commits the Australian government, among other things, to:

- To developing a comprehensive, long-term plan of action, that is targeted to need, evidence-based and capable of addressing the existing inequities in health services, in order to achieve equality of health status and life expectancy between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians by 2030.
- To ensuring the full participation of Aboriginal and Torres Strait Islander peoples and their representative bodies in all aspects of addressing their health needs.
- To working collectively to systematically address the social determinants that impact on achieving health equality for Aboriginal and Torres Strait Islander peoples.
- To supporting and developing Aboriginal and Torres Strait Islander community-controlled health services in urban, rural and remote areas in order to achieve lasting improvements in Aboriginal and Torres Strait Islander health and wellbeing.
- To achieving improved access to, and outcomes from, mainstream services for Aboriginal and Torres Strait Islander peoples.
- To respect and promote the rights of Aboriginal and Torres Strait Islander peoples
- To measure, monitor, and report on our joint efforts, in accordance with benchmarks and targets, to ensure that we are progressively realising our shared ambitions.

Chairperson, this statement of intent has now been committed to by the Queensland Parliament and last month by all sides of politics in Victoria. Other states will follow soon – and we hope NSW will be one of those. Your report should take these basic commitments as a starting point and I urge you to use this as your framework to guide your work.

I also want to briefly outline a series of challenges for all governments if they are to play their part in achieving health equality and to overcome the disadvantage experienced by Indigenous peoples in other areas.

*First – there is a need to ensure the full participation of Indigenous peoples in policy making processes.* Much of the failure of service delivery to Indigenous people and communities, and the lack of sustainable outcomes, is a direct result of the failure to engage appropriately with Indigenous people and of the failure to support and build the capacity of indigenous communities. It is the result of a failure to develop priorities and programs in full participation with Indigenous communities.

*Second – is the importance of taking an approach that sets ambitious targets and timeframes.* There is nothing insurmountable about overcoming Indigenous disadvantage – we need to give people hope that we will strive for this, and then we need to be honest in admitting what we will need to do to achieve it. Current approaches won't work – Indigenous programs are grossly underfunded and are not capable of meeting need. We must face this reality.

*Third – and related – is the need for realistic planning.* NSW has a number of plans such as the Justice Plan, the State wide plan and under the Two Ways Together strategy. If you are not prepared to cost them and fund them to need then you might as well not have them – frankly, you do not deserve praise for having plans in place if you do not then take the steps necessary to implement them. That is the status quo in NSW and it needs to change – with bipartisan support so it is sustainable long term.

History shows us that an absence of targeted action and a contentedness that we are 'slowly getting there' is not going to result in the significant improvements in health status that Aboriginal and Torres Strait Islander peoples deserve – simply by virtue of the fact that we are members of the human race and of the Australian community.

We have an unprecedented opportunity to make this happen due to the recent commitments of Australian governments and the adoption of national Indigenous Health Equality targets, - but targets on their own will not suffice – we need action on many fronts to address the many divides that lay behind the gap. And we do need to augment current efforts.

The failure of the policies and programs of the past twenty years to achieve significant improvements in Aboriginal and Torres Strait Islander health status, yet alone to close the gap, reveal two things that Aboriginal and Torres Strait Islander peoples and the general community can no longer accept from governments.

First, we can no longer accept the making of commitments to address Aboriginal and Torres Strait Islander health inequality *without* putting into place processes and programs to match the stated commitments. Programs and service delivery must be adequately resourced and supported so that they are capable of achieving the stated goals of governments.

Second, and conversely, we can also not accept the failure of governments to resource programs properly. *A plan that is not adequately funded to meet its outcomes cannot be considered an effective plan.*

There is no larger challenge to the sense of decency, fairness and egalitarianism that characterizes the Australian spirit than the current status of Aboriginal and Torres Strait Islander health and disadvantage. Closing the Gap is not only a major human rights issue in Australia, but it should be a matter of pride for us all.

The gap – the Indigenous health equality gap – can be closed, and closed in our lifetimes. The foundations are in place, but none of us can afford to rest on our laurels – it is imperative that we hold Australian governments to their commitments so that by 2030 any Indigenous child born in this country has the same chances as his or her non-Indigenous brothers and sisters to live a long, healthy and happy life.

We would be pleased to address any questions that you may have.