Submission No 85

## INQUIRY INTO OVERCOMING INDIGENOUS DISADVANTAGE

Organisation:

Human Rights and Equal Opportunity Commission

Name:

Mr Tom Calma

Position:

Aboriginal and Torres Strait Islander Social Justice Commissioner

Telephone:

9284 9600

Date received:

19/08/2008



### Submission of the

# HUMAN RIGHTS AND EQUAL OPPORTUNITY COMMISSION (HREOC)

to the

## LEGISLATIVE COUNCIL'S STANDING COMMITTEE ON SOCIAL ISSUES

on the

## INQUIRY INTO OVERCOMING INDIGENOUS DISADVANTAGE

15 August 2008

**Human Rights and Equal Opportunity Commission** 

Level 8, 133 Castlereagh St

**GPO Box 5218** 

Sydney NSW 2001

Ph. (02) 9284 9600

### Introduction

- The Human Rights and Equal Opportunity Commission ('HREOC') welcomes the
  opportunity to make this submission to Legislative Council's Standing Committee
  on Social Issues for its Inquiry into overcoming Indigenous disadvantage.
  Improving the wellbeing of Aboriginal and Torres Strait Islander peoples is a
  longstanding human rights challenge for governments in Australia, and a matter of
  high priority for the Commission.
- 2. HREOC notes that the Committee's Interim Report, tabled 27 June 2008, identified a number of themes for further consideration in the Committee's Final Report. These themes included: recommendations to improve measurement and evaluation of program outcomes; and means of improving partnerships for service delivery to Aboriginal and Torres Strait Islander peoples.
- 3. While these considerations are highly relevant to all areas of Indigenous policy making, HREOC further notes that the second half of the Committee's Inquiry is particularly focused on reporting on:
  - Policies and programs being implemented both within Australia (States/Territories/Federal) and internationally aimed at closing the gap between Aboriginal people and non-Aboriginal people...<sup>1</sup>
- 4. Since 2005, HREOC has been a major partner in the Close the Gap coalition, which has led a campaign to achieve Indigenous health equality within a generation. The main purposes of this submission are to inform the Committee about the outcomes of the Close the Gap campaign, to reflect upon the lessons learned which may be of use in other areas of Indigenous policy, and to encourage the Committee to report on and utilise the policy framework that has emerged from the Close the Gap process.

<sup>&</sup>lt;sup>1</sup> NSW Legislative Council's Standing Committee on Social Issues, *Inquiry into overcoming Indigenous disadvantage- Interim Report*, Report 40, June 2008, 10.15.

### **Summary**

- 5. HREOC submits that the Committee should consider the following governmental commitments as a framework for the development of all future programs and policies designed to achieve Indigenous health equality in Australia:
  - the Council Of Australian Governments (COAG) commitment of December 2007 to a partnership between all levels of government to work with Indigenous communities to achieve the target of closing the gap on Indigenous disadvantage;
  - the Close the Gap Statement of Intent on 20 March 2008, which committed the Commonwealth government, Opposition, health sector bodies and Indigenous organisations to achieving equality in health status and life expectancy for Indigenous and non-Indigenous Australians by the year 2030; and
  - the development of Indigenous Health Equality Targets, which were submitted to the Commonwealth Government by the *Close the Gap* Steering Committee in July 2008.

#### Recommendations

- 6. HREOC recommends:
  - (a) that the Committee note the commitments agreed to by the Commonwealth government, Opposition, health sector bodies and Indigenous organisations in the Close the Gap Statement of Intent;
  - (b) that the Indigenous Health Equality Targets should be used to guide the evaluation of all policies and programs that aim to improve health outcomes for Aboriginal and Torres Strait Islander people in NSW; and

(c) that the NSW government should ensure Aboriginal and Torres Strait Islander community controlled health services are actively involved in the design, delivery and control of health policies and programs, and that the government should commit to resourcing and supporting partnerships with those services.

### **Background**

- 7. In the Social Justice Report 2005, the Aboriginal and Torres Strait Islander Social Justice Commissioner, Tom Calma, outlined a proposal to achieve health equality for Aboriginal and Torres Strait Islanders within 25 years.
- 8. In March 2006, the Aboriginal and Torres Strait Islander Social Justice Commissioner; the National Aboriginal Community Controlled Health Organisation (NACCHO); the Australian Indigenous Doctors' Association; the Congress of Aboriginal and Torres Strait Islander Nurses; the Indigenous Dentists' Association of Australia; Oxfam Australia; and Australians for Native Title and Reconciliation founded a Steering Committee to guide the development of the Close the Gap campaign.
- 9. On 20 December 2007, COAG agreed to a partnership between all levels of government to work with Indigenous communities to achieve the target of 'closing the gap' on Indigenous disadvantage; and notably, to close the 17-year gap in life expectancy within a generation, and to halve the mortality rate of Indigenous children within ten years. While Australian governments had previously committed to raise the standard of Indigenous Australians' health to that of other Australians, the COAG commitment marked the first time that Australian governments had agreed to be accountable for reaching this goal by placing its achievement within a time-frame.
- 10. From 18 20 March 2008, a National Indigenous Health Equality Summit was convened in Canberra by the Close the Gap coalition. The summit culminated in the signature of the Close the Gap Statement of Intent on 20 March 2008, which

- committed the Commonwealth government and the Aboriginal and Torres Strait Islander peoples of Australia to work together to achieve equality in health status and life expectancy for Indigenous and non-Indigenous Australians by the year 2030. The full text of the *Statement of Intent* is attached at **Appendix 1**.
- 11. HREOC recommends that in making its recommendations, the Committee should note the commitments which were agreed to by the Commonwealth government, Opposition, health sector bodies and Indigenous organisations in the Close the Gap Statement of Intent, and use these commitments to guide the Committee's recommendations to policy departments across the NSW Government.

### Measurement and monitoring of health outcomes

- 12. In HREOC's view, a comprehensive health strategy requires ambitious but achievable target-setting of health outcomes for Indigenous people, and the resourcing of the programs set out to achieve those targets at the appropriate level of need.
- 13. HREOC believes that while the NSW Government's 'Two Ways Together' policy framework has many strengths, it does not embody a targeted, evidence based approach to overcoming Indigenous health inequality.
- 14. HREOC therefore welcomes the finding in the Committee's Interim Report that measurement of health priorities and associated programs should be a key element of the NSW government's health strategy for Indigenous communities, and anticipates the Committee's use of the National Indigenous Health Equality Targets to guide this process.
- 15. The National Indigenous Health Equality Targets (attached at **Appendix 2**) are non-partisan, industry-developed standards of progress which address the 17-year life expectancy gap between Indigenous and non-Indigenous Australians. The targets provide long-term benchmarks with which to evaluate government policies

- and programs. The Targets were designed to inform future evidence-based health programs, targeted to the areas which are most in need.
- 16. The targets are intended to serve two functions. Their first purpose is to guide national target-setting for achieving Indigenous health equality, as has been the overall goal of the *Close the Gap* campaign. Their second purpose is programmatic: to guide a specific strategy that focuses on particular health determinants and issues.
- 17. The Targets also provide a framework which assigns responsibility to different levels of government to achieve discrete outcomes within particular time frames. Ultimately, it is anticipated that the Targets will be embedded into consolidated agreements between the states and Commonwealth for Indigenous affairs, and be built into funding agreements for housing, health, education and other services, with compliance and accountability mechanisms affecting the distribution of Special and General Purpose Payments by the Commonwealth.
- 18. In HREOC's view, the development and implementation of the Indigenous Health Equality Targets represents a 'best practice' approach to co-operative policy making between state/ territory and Commonwealth governments, and sets a precedent for successful policy approaches in areas external to health in the future.
- 19. HREOC therefore recommends that the Indigenous Health Equality Targets should be used to guide the evaluation of all policies and programs that aim to improve health outcomes for Aboriginal and Torres Strait Islander people in NSW, and suggests that the Committee consider the policy development framework utilised by the Close the Gap coalition as a blueprint for successful Indigenous policy development across all NSW government departments.

### **Partnerships for Health Equality**

- 20. HREOC welcomes the finding in the Committee's Interim Report that the development and provision of health services must be guided by members of the Aboriginal communities that they service. HREOC notes the Committee's finding that the provision of health services through partnership with Aboriginal communities is an area in need of improvement.
- 21. HREOC notes that the Commonwealth government has undertaken to develop a national framework agreement to secure the appropriate engagement of Aboriginal and Torres Strait Islander peoples and their representative bodies in the design and delivery of accessible, culturally appropriate and quality primary health care services, and to ensure that nationally agreed frameworks exist to secure the appropriate engagement of Aboriginal and Torres Strait Islander peoples in the design and delivery of secondary care services.
- 22. HREOC believes that this framework will provide a road- map for consultation between the NSW government and Indigenous advisory bodies and peak organisations to develop sustainable partnership agreements for the delivery of health services to Aboriginal communities.
- 23. HREOC urges the Committee to recognise that consultations for partnership with Aboriginal community controlled health services must be followed-up by a realistic assessment of the inputs and approaches necessary to achieve those successful partnerships, and by the implementation of resources to match those levels of need.
- 24. HREOC therefore recommends that the NSW government should ensure Aboriginal and Torres Strait Islander community controlled health services are actively involved in the design, delivery and control of health policies and programs, and that the government commit to resourcing and supporting partnerships with those services.

### Conclusion

- 25. The issue of health inequality is one of the significant barriers to the achievement of social justice for Indigenous peoples in Australia today. However, HREOC believes that the Close the Gap campaign has marked a watershed in the history of Indigenous health, and that the outcomes of the campaign provide a sustainable, evidence-based road map for change.
- 26. HREOC encourages a commitment by the NSW government to fully embedding the National Indigenous Health Equality Targets in existing and future programs that aim to close the gap in health indicators between Indigenous and non-Indigenous Australians.
- 27. HREOC calls upon the Committee to commit the NSW government to the effective resourcing of, and consultation with, Aboriginal and Torres Strait Islander health services and peak bodies within the framework of the Commonwealth's national framework agreement.
- 28. HREOC commends the work of the Standing Committee, and anticipates the release of its final report.

# **Appendix 1- Close the Gap Indigenous Health Equality Statement of Intent**

#### Preamble

Our challenge for the future is to embrace a new partnership between Indigenous and non-Indigenous Australians. The core of this partnership for the future is closing the gap between Indigenous and non-Indigenous Australians on life expectancy, educational achievement and employment opportunities. This new partnership on closing the gap will set concrete targets for the future: within a decade to halve the widening gap in literacy, numeracy and employment outcomes and opportunities for Indigenous children, within a decade to halve the appalling gap in infant mortality rates between Indigenous and non-Indigenous children and, within a generation, to close the equally appalling 17-year life gap between Indigenous and non-Indigenous when it comes to overall life expectancy.

Prime Minister Kevin Rudd, Apology to Australia's Indigenous Peoples, 13 February 2008

This is a Statement of Intent – between the Government of Australia and the Aboriginal and Torres Strait Islander Peoples of Australia, supported by non-Indigenous Australians and Aboriginal and Torres Strait Islander and non-Indigenous health organisations – to work together to achieve equality in health status and life expectancy between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians by the year 2030.

We share a determination to close the fundamental divide between the health outcomes and life expectancy of the Aboriginal and Torres Strait Islander peoples of Australia and non-Indigenous Australians.

We are committed to ensuring that Aboriginal and Torres Strait Islander peoples have equal life chances to all other Australians.

We are committed to working towards ensuring Aboriginal and Torres Strait Islander peoples have access to health services that are equal in standard to those enjoyed by other Australians, and enjoy living conditions that support their social, emotional and cultural well-being.

We recognise that specific measures are needed to improve Aboriginal and Torres Strait Islander peoples' access to health services. Crucial to ensuring equal access to health services is ensuring that Aboriginal and Torres Strait Islander peoples are actively involved in the design, delivery, and control of these services.

#### Accordingly we commit:

- 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 primary health care services and health infrastructure for Aboriginal and Torres Strait Islander peoples which are capable of bridging the gap in health standards by 2018.
- 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 building on the evidence base and supporting what works in Aboriginal and Torres Strait Islander health, and relevant international experience.
- To supporting and developing Aboriginal and Torres Strait Islander communitycontrolled 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, including by ensuring that health services are available, appropriate, accessible, affordable, and of good quality.
- 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.

We are:

Signatures:

Representative of the Australian Government National Aboriginal Community Controlled Health Organisation Congress of Aboriginal and Torres Strait Islander Nurses Australian Indigenous Doctors Association Indigenous Dentists Association of Australia Aboriginal and Torres Strait Islander Social Justice Commissioner, Human Rights and Equal Opportunity Commission

On a separate sheet, the following signed this Statement of Intent: the Hon. Dr Brendan Nelson MP, Leader of the Opposition; Dr Rosanna Capolingua, President, Australian Medical Association; Ms Kate Carnell, Chief Executive Officer, Australian General Practice Network; Dr Vasantha Preetham, President, Royal Australian College of General Practitioners; Professor Napier Thomson, President, Royal Australasian College of Physicians; Mr Andrew Hewett, Executive Director, Oxfam Australia; Professor Michael Dodson, AM, Co-Chair, Reconciliation Australia; Ed Cooper, Get Up!; Gary Highland, National Director, Australians for Native Title and Reconciliation; Catherine Freeman, Catherine Freeman Foundation; Ian Thorpe, Ian Thorpe's Fountain for Youth; and Mr Andrew Schwartz, President, Australian Doctors Trained Overseas Association.

# **Appendix 2- The National Indigenous Health Equality Targets**

(Hard copy of publication to be attached)

#### Committee Social Issues - Submission into the Overcoming Indigenous Disadvantage Inquiry [SEC=UNCLASSIFIED]

From:

"Julia Mansour" <julia.mansour@humanrights.gov.au>

To:

<socialissues@parliament.nsw.gov.au>

Date:

19/08/2008 3:31 PM

Subject: Submission into the Overcoming Indigenous Disadvantage Inquiry

[SEC=UNCLASSIFIED]

Dear Sir or Madam.

Please find attached the submission of the Human Rights and Equal Opportunity to the Legislative Council's Inquiry into overcoming Indigenous disadvantage.

I am aware that the closing date for submissions has closed, and apologise for the lateness of HREOC's response to the Inquiry. I hope that you will nevertheless have the opportunity to take this submission into consideration.

A paper copy of the submission is also in the mail, including the hard copy version of Appendix 2 to this submission.

If you have any questions, please do not hesitate to contact me.

Kind regards,

Julia Mansour Policy and Research Officer Aboriginal and Torres Strait Islander Social Justice Unit **Human Rights and Equal Opportunity Commission** (02) 9284 9750

Tom Calma

<<HREOCNSWOIDinquirysubmission.doc>>

\*

WARNING: The information contained in this email may be confidential. If you are not the intended recipient, any use or copying of any part of this information is unauthorised. If you have received this email in error, we apologise for any inconvenience and request that you notify the sender immediately and delete all copies of this email, together with any attachments.