Supplementary Submission No 57a

INQUIRY INTO OVERCOMING INDIGENOUS DISADVANTAGE

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Committee Social Issues - Supplementary submission: Inquiry into overcoming Indigenous disadvantage

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Supplementary submission: Inquiry into overcoming Indigenous disadvantage

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15 August 2007

Mr Ian West Chair Inquiry into overcoming Indigenous disadvantage Standing Committee on Social Issues Parliament House Macquarie Street NSW 20001 5 AUG 2008 RECEIVED

SOCIAL ISSUES COMMITTEE

Dear Sir

Thank you for the invitation to comment on the Committee's Interim Report of the Inquiry into Overcoming Indigenous Disadvantage and to make a supplementary submission.

My remarks are specific to paragraph 10.3 of the Interim Report and accompanying Issues for Consideration; namely Measuring Outcomes, particularly the Committee's concern regarding leadership in the defining of performance indicators.

The Committee is to be commended for giving this issue prominence. No doubt there is a considerable body of material before you concerning performance indicators and measurable outcomes, particularly as they relate to NSW Indigenous data issues. For example the recent work by the NSW Aboriginal Housing Office, †Indicative New South Wales Indigenous Population Projections 2006 to 2021'.

It is therefore imperative that long-term work to overcome Indigenous Disadvantage proceeds confident in the comprehensiveness and appropriateness of performance indicators; and that they can be reliably measured over time.

This issue has even more salience given the NSW Government's commitment through COAG to the National Indigenous Health Equality Summit's â€~National Indigenous Health Equality Targets' (available from HREOC http://www.hreoc.gov.au/social Justice/health/targets/index.html>).

Therefore I strongly recommend that the Committee invites to its final hearings in September representatives of the National Advisory Group on Aboriginal and Torres Strait Islander Health Information and Data (NAGATSIHID). (For more information go to

The NAGATSIHID was established in October 2000 to provide broad strategic advice to the Australian Health Ministers' Advisory Council on ways of improving the quality and availability of data and information on Aboriginal and Torres Strait Islander health and health service delivery, and to draw together the range of Indigenous health information management activities into a coordinated and

strategic process. Since then, the NAGATSIHID has been made a standing committee of the National Health Information Management Principal Committee (formerly the National Health Information Group). The role of the Advisory Group has expanded over time to include monitoring and improving Indigenous identification in a range of data collections, advising AIHW and the ABS on information and data priorities, and providing advice to the Australian Government on the Aboriginal and Torres Strait Islander Health Performance Framework. A vital element of the Advisory Group's operation is having a majority of Aboriginal and Torres Strait Islander members.

The NAGATSIHID Strategic Plan for 2006-2008 notes a number of key achievements and 20 themes as 'priorities for information and data' http://www.aihw.gov.au/publications/ihw/nagatsihidsp06-08-c01.pdf.

However it also notes (2006: 5):

"Despite these achievements, many analytical and conceptual challenges remain. The varying levels of identification between different data collections, and within each data collection over time and between regions, makes it difficult to assess changes in health status over time and between different regions. The mismatch between Census data and some administrative data (death records, for example) as to how people identify, or are identified, also poses analytical problems. In addition, collecting information that is conceptually and culturally relevant to Aboriginal and Torres Strait Islander peoples can be challenging to mainstream statistics."

Two NAGATSIHID members who would be well placed to contribute to this Inquiry are:

Associate Professor Lisa Jackson Pulver (I.pulver@unsw.edu.au)

Associate Professor Jackson Pulver has extensive experience in Indigenous epidemiology for which she is recognised both in Australia and internationally. She has a specific interest in healthy ageing in Indigenous people. As well as being Deputy Chair of NAGATSIHID, Professor Jackson Pulver is a member of the Advisory Group on Aboriginal and Torres Strait Islander Statistics (AGATSIS) to the ABS. AGATSIS's purpose is to:

- 2 i. to provide advice to the ABS on the strategic directions of its program of Indigenous statistics;
- ii. to identify data gaps and areas requiring improvement; and advice on proposed strategies for improvement:
- iii. to provide the ABS with user perspectives on contemporary and emerging Indigenous policy issues requiring a statistical response; and
- iv. to provide views and advice on developmental work being undertaken by the ABS on Indigenous statistics.
- 3. By drawing on this advice and information, the ABS will seek to maintain and improve the relevance and usefulness of the range of Indigenous related statistics produced.

Professor Jackson Pulver has already contributed broadly to this Inquiry through co-authorship of Submission 57.

Professor Ian Ring (iring@uow.edu.au)

Professor Ring, as well as being eminently qualified as an epidemiologist and public health physician, has particular interest in Indigenous health and cardiovascular health. Also recently, Professor Ring has provided expert assistance to the Steering Committee for Indigenous Health Equality as well as contributing as a member of the Target Working Group and the Target Secretariat in the development of the National Indigenous Health Equality Targets. Professor Ring, as the Committee will be aware, has already made contributions to this Inquiry more broadly as part of the oral submission by Australians for Native Title and Reconciliation (NSW).

Given that the reliable measurement of outcomes is core business to both this Inquiry and NAGATSIHID, I could not recommend more strongly that the Committee invite both Professor Jackson Pulver and Professor

Ring to contribute to its September hearings. If there is anything I can do to facilitate this, for instance by way of identifying key questions or other preparatory materials, please let me know.

Yours faithfully

Sally Fitzpatrick

Post script:

By way of post script, I would also like to acknowledge this Committee for referring to the submission made by myself, Dr Susan Greer and Associate Professor Lisa Jackson Pulver (Submission 57) on page 233 of your Interim Report (June 2008) (see text below). The point we made regarding colonisation and the forced removal of children is, however, drawn together from the work of others â€" particularly the paragraph to which you refer. Therefore, we must insist that when referencing the next iteration of this Report, the Committee includes the original work from which we have quoted. We suggest the citation read:

Submission 57, Ms Sally Fitzpatrick et al, pp 23-24 citing Winnunga Nimmityjah Aboriginal Health Service, presentation to the Commission on Social Determinants of Health, Adelaide, 2007.

Text as it currently appears in the Interim Report:

The factors of colonisation and the forced removal of children were discussed by Ms Sally Fitzpatrick in her submission:

These events led to disempowerment, loss of self determination, marginalization, racism and loss of culture and identityâ€| For example, at the individual level intense sadness, depression and remorse can be experienced as well as loss of sense of self. Compounding over generations and growing more complex over time, this pain can become internalised into abusive and self-abusive behaviours within families and communities. Human trauma and anger, mental health problems, drug and alcohol misuse, and domestic violence are some of the lived repercussions of these past government policies. Good parenting models were lost with the institutionalisation of the stolen generations â€| reflected [in] experiences of poor parenting, examples of trauma and anger in committing crime and lack of resilience in stepping out of the cycle of incarceration. 883

883 Submission 57, Ms Sally Fitzpatrick, pp 23-24

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