ISSUES PAPER: Issues Facing Young Australians 2011: URBAN AND REGIONAL
INDIGENOUS YOUTH

Australian Climate

Aboriginal and Torres Strait Islander peoples comprised 2.5% (537,000 people) of the total Australian population in June 2006, and is expected to reach between 640,700 and 643,800 people by 2016.²

- In 2006, the Indigenous population was (and still is) young with a median age of 21.0 years compared with 37.0 years for the non-Indigenous population. This is largely the result of higher birth rates and deaths occurring at younger ages among the Indigenous population.
- 38% of Indigenous people were under 15 years of age compared with 19% of non-Indigenous people living at 30 June 2006.³
- At June 2006, 75% of Indigenous people lived in non-remote areas (32% of people living in major cities and 43% in regional areas).

- Nationally between 2005–2007, the gap between Indigenous and non-Indigenous life expectancy was 11.5 years for males and 9.7 years for females.⁴ According to the 2006 Australian Census,⁵ 37 out of 100 Indigenous people were aged less than 15 years, compared with 19 out of 100 non-Indigenous people.

Education

There are strong links between higher levels of education and improved employment, income and health outcomes. Improved educational outcomes can also help strengthen communities and regions socially and economically.

The likelihood of engaging in certain health risk behaviours decreases with higher levels of schooling.⁶ ⁷

Educational attainment rates for young Indigenous people are around half those for non-Indigenous people.

Population pyramid of Indigenous and non-Indigenous populations, 2010

Source: Derived from Australian Bureau of Statistics, 2009⁸
The gap in school attendance and retention between Indigenous and non-Indigenous students is large:

- In 2009; the retention rate from Year 7/8 to Year 12 was 45% for Indigenous students compared with 77% for non-Indigenous students.9,10
- In 2008:
  - Only 23% Indigenous young people completed school to Year 12 compared with 58% of non-Indigenous young people;
  - 23% of young Indigenous people aged 15–24 years had left school at Year 9 or below, compared with 4% of non-Indigenous young people.

The evidence about attendance and retention strategies that work for Indigenous students is not strong.11

A common feature of successful educational programs, however, was that of collaboration, which builds bridges between local organisations and the community, often by engaging parents or volunteers from the community.

**Closing the gap and non school attendance**

Closing the school completion gap is a major national challenge and will require effort in a range of areas, not just in schools. Gains in education may be limited unless other aspects of socioeconomic disadvantage are improved, such as health, nutrition, housing, employment and community participation.12

Absenteism among Indigenous students is markedly higher than among non-Indigenous students. Poorer access and absenteeism contribute to lower academic achievement, making it more difficult for many Indigenous students to successfully complete school.

The main factors contributing to school non-attendance and completion rates relate to a failure to fully engage parents, carers and the community; ongoing socioeconomic disadvantage, health problems, and lack of recognition by schools of Indigenous culture and history.13,14,15

The barriers are most commonly summarized as: physical (due to geographic isolation), cultural (due to discrimination), economic (due to the costs associated with attending school) and informational (due to the lower levels of literacy in Indigenous communities).16

**Employment**

In 2009 the unemployment rate for Indigenous Australians was 17%, more than three times higher than the rate for non-Indigenous Australians (5%).

The unemployment rate for Aboriginal and Torres Strait Islander peoples aged 15-19 years (who were also not engaged in fulltime study) was 26% compared with 17% for all young people aged 15-19 years.17

**Health**

In 2003, cardiovascular disease and mental disorders (mainly self-harm and suicide) were the leading causes of disease burden in the Indigenous Australian population.18

- Tobacco contributes most to cardiovascular disease burden, followed closely by high body mass, high blood cholesterol, physical inactivity and high blood pressure.
- Alcohol contributes most to mental disorders burden, followed by illicit drugs, child sexual abuse and intimate partner violence.

Chronic respiratory disease, diabetes and cancers are the next three leading causes.19,20

There is likely to be strong growth in the burden of diabetes over the next 20 years, mostly as a direct consequence of increasing levels of obesity.21

In 2004-2005:

- Asthma was the leading long term health condition for young people aged 10-14 years with rates at 18% for boys and 11% for girls.
- 10% of young people aged 10-14 years experienced some form of mental or behavioural problem as a long-term health condition.22

**Smoking**

Smoking is responsible for one in five of all Indigenous deaths and is the most preventable cause of poor health and early death among Indigenous people. The 2001 National Drug Strategy Household Survey (NDSHS) found that 45% of Indigenous people aged 14 years or older smoked daily.23

Tobacco is responsible for the greatest disease burden in Australia followed by high blood pressure and physical inactivity.24

**Physical Inactivity**

Physical inactivity was the third leading cause of the burden of illness and disease for Indigenous Australians in 2003, accounting for 8% of the total burden and 12% of all deaths.25

Low levels of physical activity are a major risk factor for ill-health and mortality. People who do not engage in sufficient physical activity have a greater risk of cardiovascular disease, colon and breast cancers, Type 2 diabetes and osteoporosis.
In 2004-05, three-quarters (75%) of Indigenous people aged 15 years and over who were living in non-remote areas reported being sedentary or exercising at low levels. One-quarter (24%) reported exercising at moderate/high levels in 2004-05, compared with 32% in 2001.  

Alcohol

Alcohol is second only to smoking as a preventable cause of drug-related death and hospitalisation.  

In 2008, around one in six Aboriginal and Torres Strait islander people aged 15 years and over (17%) drank at chronic risky/high risk levels, similar to the rate reported in 2002 (15%).

It has been associated with a range of factors that may cause ill-health including cardiovascular disease, cancers, liver diseases, mental health problems, injury, self-harm and exposure to violence.

In 2003, alcohol was associated with 7% of all deaths and an estimated 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 men (aged 15-34 years) and the second highest (after intimate partner violence) for young Indigenous women.

Participation in Sport

Participation in organised sport, arts or community group activities has the potential to lead to improvement in many areas of Indigenous disadvantage, including long term health, and physical and mental wellbeing, as well as improving social cohesion in Indigenous communities.

Participation can foster (among other things) self-esteem, social interaction, and the development of skills and teamwork. A reduction of boredom and an increased sense of belonging are generally seen as having positive impacts on Indigenous youth.

Participation in sport and recreation activities from an early age has the potential to widely benefit individuals and communities by:

- Strengthening the body and preventing acute and chronic disease — regular physical activity helps to build and maintain healthy bones, muscles and joints and control body weight.
- Reducing the risk of clinically significant emotional or behavioural difficulties — the Western Australian Aboriginal Child Health Survey (WAACHS) found that young Indigenous children who did not participate in organised sport were twice as likely to be at high risk of emotional or behavioural difficulties than Indigenous children who participated in sport (16% and 8%, respectively).

Urban Indigenous Youth

At June 2006, Indigenous people lived in the following areas:

- 75% in cities and regional areas:
  - 32% (165,800 people) of Indigenous Australians lived in major Australian cities;
  - 21% (110,600 people) lived in inner regional areas;
  - 22% (113,300 people) lived in outer regional areas.
- 25% in remote areas:
  - 9% (47,900 people) lived in remote areas;
  - 15% (79,500 people) lived in very remote areas.

The Indigenous regions with the largest populations were Sydney (46,900), Brisbane (46,300) and Coffs Harbour (43,800).

The highest regional increases in the Indigenous population between 2001 and 2006, based on 2006 Australian Indigenous Geographical Classification (AIGC) boundaries, occurred in the Indigenous Regions of Coffs Harbour (25%), Non-Metropolitan Victoria (25%), Wagga Wagga (21%) and Melbourne (20%).

Indigenous people in major cities are more disadvantaged than non-indigenous people in the following areas:

- More likely to be unemployed and have significantly lower incomes.
- In all aspects of justice and health (however data are very limited).
- Suffer more violence, more likely to be daily smokers and with higher distress levels.
- Less likely to have completed school (44% had completed year 12 compared to 77% of non-Indigenous 19 year olds, in 2006).
- 25% of Indigenous young people in major cities were not working and not studying, compared to 8% of non-Indigenous young people of the same age.

Abuse and Violence

Many Indigenous families and communities live under severe social strain, caused by a range of social and economic factors. This social strain, combined with factors such as alcohol and substance misuse, and overcrowded living conditions, can contribute to the incidence of child abuse and violence.

Around one-quarter (23%) of Aboriginal and Torres Strait Islander people aged 15 years and over had been a victim of physical or threatened violence in the 12 months prior to 2008, similar to the rate reported in 2002 (24%).

Exposure to violence is an environmental risk factor that is closely related with other health and welfare issues. In addition to direct physical injury, victims of violence are at a
greater risk of a wide variety of psychological and behavioural problems. Family and community violence has now been acknowledged by all levels of government as one of the most serious issues currently facing Aboriginal and Torres Strait Islander communities.\textsuperscript{29,40}

The rate of substantiated notifications for child abuse or neglect increased for Indigenous children from 16 per 1000 children in 1999-2000 to 35 per 1000 children in 2007-08 (almost doubling over this period).

Indigenous children were more than six times as likely as non-Indigenous children to be the subject of a substantiation of abuse or neglect in 2007-08.\textsuperscript{41}

41 out of every 1000 Indigenous children were on care and protection orders, compared to 5 per 1000 non-Indigenous children at 30 June 2008.\textsuperscript{42}

**Criminal Justice System**

Indigenous people are over-represented in the criminal justice system, and once they have come into contact with the system, are more likely to have further contact with it. Indigenous people are also likely to begin contact with the system at younger ages than non-Indigenous people. High rates of imprisonment and reoffending affect families and communities, as well as individuals. It is important that Indigenous people who have had contact with the criminal justice system have the opportunity to integrate back into the community and lead positive and productive lives.

Evidence suggests that Indigenous offending is related to socioeconomic conditions and community-level risk factors including alcohol abuse and violence. Of great concern is the identification of an intergenerational cycle of abuse and violence. Indigenous children frequently witness or experience violence, which is normalised and increases the risk that they themselves will use violence.\textsuperscript{43,44}

In the 2009 National Prisoner Census, there were 7,386 Indigenous prisoners in Australia, representing 25% of the total prisoner population. After adjusting for age standardisation\textsuperscript{45} of the Indigenous and non-Indigenous populations, the Indigenous imprisonment rate was 1,891 per 100,000 adult Indigenous population – 14 times the non-Indigenous rate.\textsuperscript{46,47}

In 2008, almost half of Indigenous males (48%) and 21% of females aged 15 years or over had been formally charged by police (over their life time).

Studies on juvenile offenders carried out in NSW, Queensland, WA and SA show that Indigenous juveniles experienced a higher number of court reappearances and higher rates of repeat offending than non-Indigenous Juveniles.\textsuperscript{48} Indigenous juveniles were 28 times as likely to be detained as non-Indigenous juveniles at 30 June 2007. The Indigenous juvenile detention rate increased by 27% between 2001 and 2007.\textsuperscript{49}

Among Indigenous people aged 15 years and over, 14% reported that they, a family member or a friend had experienced trouble with the police as a stress in the last 12 months, while 12% reported that they, a family member or a friend had spent time in jail. The proportion of Indigenous children aged 4 to 14 years who experienced the stress of a family member having been arrested or in trouble with the police in the last 12 months was 10%, while 11% had a parent or other family member who had spent time in jail.\textsuperscript{50,51}

**Potential Impacts of Midnight Basketball**

Safe and supportive communities are fundamental to the physical and mental wellbeing of Indigenous children and adults. Together they provide a protective, caring and resilient environment, promoting a range of positive outcomes. Community breakdown can contribute to alcohol and drug misuse, child abuse and neglect, violence and imprisonment, and poor health, education, employment and income outcomes.

Barriers between Indigenous and non Indigenous young people need to be broken down through safe and supportive integration and participation into mainstream activities. Around 7 in 10 Australians (71%) acknowledge that the level of prejudice Australians hold towards Indigenous people is “very high” “or “fairly high” but they also believe that Indigenous people are prejudiced towards other Australians (72% believe Indigenous people hold “very high” or “fairly high” levels of prejudice towards them).\textsuperscript{52}

Midnight Basketball provides the opportunity for Indigenous young people to participate in a safe, inclusive and non-discriminative environment.

Taking part in sporting, activities can foster self-esteem, social interaction and the development of skills and teamwork. Early participation in these activities can lead to stronger bodies, the prevention of chronic diseases and improved learning and academic performance.

Participation in Midnight Basketball provides the opportunity for disadvantaged youth to address the following:

- Recognise their own potential skills and receive positive feedback that may otherwise may not be forthcoming.
- Learn the skills of teamwork, understand acceptable behaviours and foster friendships.
- Participate in an environment of inclusiveness and understanding between Indigenous and non Indigenous young people.
- Display sporting talents and attributes that may be recognised and fostered by members of the broader community.
- Link with community voluntary organisations that may enhance further integration into mainstream education or employment.
- Participate in opportunities for education about Indigenous culture and history through the workshop.
- Provide a diversionary activity on a weekend night for those who might otherwise be involved in anti-social activities.

2. Australian Bureau of Statistics 2010 - The Health and Welfare of Australia’s Aboriginal and Torres Strait Islander Peoples; Cat 4704.0
3. Ibid
4. Ibid
19. These are the most accurate figures on Aboriginal and Torres Strait Islander burden of disease we have to date
27. Ibid
29. In 2001, the National Health and Medical Research Council (NHMRC) published the Australian Drinking Guidelines, which outlined alcohol consumption risk levels separately for males and females. In 2009, the NHMRC introduced revised guidelines, with a general recommendation that both men and women should not consume more than two standard drinks on any one day. In order to be consistent with earlier ABS reporting on alcohol risk level, the data in this document is based on the 2001 guidelines only.
31. Ibid
32. Ibid
33. Ibid
34. Ibid
35. Ibid
36. Ibid
37. Ibid
41. Ibid
42. Ibid
43. Ibid
44. Ibid
45. Ibid
46. Ibid
47. Ibid
48. Ibid
49. Ibid
50. Ibid
51. Ibid
52. Ibid
53. Ibid
54. Ibid
55. Ibid
56. Ibid
57. Ibid
58. Ibid
59. Ibid
60. Ibid
61. Ibid
42 Ibid
45 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
49 Ibid
51 Australian Reconciliation Barometer 2010 Comparing the attitudes of Indigenous people and Australians overall, Reconciliation Australia 2010