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Summary

The safety of children is intrinsically related to the security of their families and communities and the accessibility of appropriate support systems. National data show that Aboriginal and Torres Strait Islander children, compared with their non-Indigenous counterparts, are over-represented in various aspects of child safety. In particular, Indigenous children have higher rates of hospitalisations due to injury, higher rates of injury mortality and more frequently come into contact with child protection and juvenile justice systems.

Injury and violence

- The injury hospital separation rate among Indigenous children was 1.3 times the rate for non-Indigenous children in 2007–08.
- The leading causes of injury hospital separation for Indigenous children were the same as for non-Indigenous children, although the rates of each were consistently higher for Indigenous children. In particular, the hospital separation rate for assault for Indigenous children was over 5 times the rate for non-Indigenous children.
- In 2003–2007, one-quarter of all deaths among Indigenous children aged 0–17 years were due to external causes of injury. The death rate due to external causes of injury for Indigenous children was almost 3 times the rate for non-Indigenous children.

Child abuse and neglect

During 2009–10, Indigenous children were:

- nearly 8 times as likely as non-Indigenous children to be the subject of substantiated child abuse or neglect
- around 9 times as likely to be on a child protection care and protection order
- almost 10 times as likely to be living in out-of-home care
- most likely to experience neglect in substantiated cases; for non-Indigenous children emotional abuse was most common.

Juvenile justice

- On an average day Indigenous young people were 15 times as likely to be under juvenile justice supervision as non-Indigenous young people. This over-representation was even higher for those in detention – Indigenous young people were 24 times as likely to be detained as non-Indigenous young people.
- Indigenous young people tend to enter their first period of juvenile justice supervision at a younger age than non-Indigenous young people.
- Indigenous young people spent on average 5 days longer than non-Indigenous young people in unsentenced detention.

Introduction

The safety of children is intrinsically related to the security of their families and communities and the accessibility of appropriate support systems. Safe and secure family and community environments can protect children from physical and emotional harm and promote health and wellbeing across the life span (AIHW 2009; COAG 2009a).

Key national indicators of child health, development and wellbeing have been developed, including several that specifically monitor safety and security (Table 1). They include indicators relating to injuries in children, child abuse and neglect and children and crime. Trends in some of these areas show that injury mortality and morbidity and substantiated abuse for all children have decreased over time.

This paper presents key measures that were adapted from this national indicator framework to provide an overview of the safety and security of Aboriginal and Torres Strait Islander children. Data on children who are hospitalised for injuries, are the subject of substantiated abuse, or under juvenile justice supervision are presented because these factors place Indigenous children at immediate and long-term risk of harm and adverse outcomes (AIHW 2009).

Headline indicators were also developed to assess children’s family and community environments. Indicator frameworks have sought to specifically monitor the wellbeing of Indigenous children and highlight areas where there are opportunities for further improvements in Indigenous health and wellbeing (AIHW 2009).

Table 1: Indicator framework for the safety and security of Australia’s children

Risk/outcome area	Indicator
Injuries	Age-specific death rates from all injuries for children ^(a)
	Road transport accident death rate for children
	Accidental drowning death rate for children
	Assault (homicide) death rate for children
	Injury hospitalisation rate for children
	Assault hospitalisation rate for children
	Intentional self-harm hospitalisation rate for children
Child abuse and neglect	Children who were the subject of a substantiation of a child protection notification ^(a)
	Children who are the subject of care and protection orders
Children and crime	Number of children who are under juvenile justice supervision

Children’s Headline Indicator.

Source: AIHW 2009.

Aboriginal and Torres Strait Islander children have higher rates of hospitalisations due to injury, higher rates of injury mortality and more frequently come into contact with child protection and juvenile justice systems. As part of the Council of Australian Government (COAG) reform agenda, work is being undertaken with the aim of reducing the over-representation of Indigenous children within these systems and promoting the safety and wellbeing of Indigenous children, families and communities (COAG 2009a, 2009b).

Child abuse, juvenile offending and injury hospitalisation can be interrelated and have implications for the safety of the children involved. Children in substantiated abuse cases have been found to experience higher rates of injury-related hospital admissions (O'Donnell et al. 2010). Further, young people who commit violent offences often cause injury to their victims (Vitacco et al. 2007) and have high rates of injury mortality themselves (Coffey et al 2003). Research also suggests that children who experience abuse are more likely to engage in juvenile offending (Stewart Dennison & Waterson 2002).

Injury and violence

Injury is a major cause of preventable death, distress and disability across the Australian population (DOHA 2009). Children and young people are particularly vulnerable to certain types of injury according to their stage of development (NPHP 2004a).

Injury mortality and morbidity are key national indicators of child safety. Hospitalisation data provide an indication of the incidence of the more severe injuries that are reported in hospital settings (AIHW 2010a). However, injuries can also be attended to in primary care settings or remain undetected or unreported. As a result, hospitalisation data should be interpreted with caution as these data are likely to significantly underestimate injury occurrences in children.

Injury hospitalisation

In 2006–07, the most common injuries leading to hospitalisation among children aged 0–14 years included falls, land transport accidents, accidental poisoning, burns, scalds, and assault (AIHW 2009). In 2005–06, for young people aged 15–17 years, transport accidents and intentional self-harm were among the leading causes of injury (AIHW 2008).

In 2007–08, the overall injury hospital separation rate among Indigenous children aged 0–17 years was 1.3 times the rate for non-Indigenous children (Table 2). The leading causes of injury hospital separation for Indigenous children were the same as for non-Indigenous children – falls, land transport accidents, assault, accidental poisoning, burns and scalds, and intentional self-harm – although the rates of each of these were consistently higher for Indigenous children.

In particular, the hospital separation rate for assault for Indigenous children was over 5 times higher than for non-Indigenous children and Indigenous children were hospitalised for both accidental poisoning and burns and scalds at around twice the rate of non-Indigenous children (Table 2).

Indigenous young people were also found to have much higher rates of head injury due to assault than non-Indigenous young people, which imply substantial personal trauma and social burden on children, their families, communities, and health systems (Jamieson et al. 2008).

Table 2: Injury hospital separations for children aged 0–17 years, leading specific causes of injury, by Indigenous status, 2007–08 (number per 100,000)

External cause	Indigenous children	Non-Indigenous children	Rate ratio
Falls	560	557	1.0
Land transport accidents	256	231	1.1
Assault	203	37	5.4
Accidental poisoning	80	49	1.6
Burns and scalds	79	38	2.1
Intentional self-harm	62	46	1.3
All injuries	1,997	1,534	1.3

Notes

1. Exposure to animate and inanimate mechanical forces and accidental exposure to other and unspecified factors were also leading causes of injury hospitalisation for children and youth. These categories are diverse and are not useful for reporting purposes.
2. Rate ratio is the Indigenous children rate divided by non-Indigenous children rate.
3. For data quality reasons, data exclude Tasmania, the Australian Capital Territory and private hospitals in the Northern Territory.
4. Indigenous population estimates for children and youth are derived from ABS 3238.0 *Experimental estimates and projections, Aboriginal and Torres Strait Islander Australians, 1991 to 2021*; Non-Indigenous children and youth population estimates are derived from estimated resident population data as at 31 December.

Source: AIHW National Hospital Morbidity Database.

Deaths from injury

In 2003–2007, deaths due to external causes of injury contributed one-quarter of all deaths among Indigenous children aged 0–17 years, with the death rate almost 3 times that of non-Indigenous children.

Land transport accidents and intentional self-harm were the most common causes of death from external causes of injury for Indigenous children (13.6 and 7.3 per 100,000 children respectively) (Table 3).

Intentional self-harm among Indigenous children was over 5 times the rate for non-Indigenous children (Table 3). This includes deaths from suicide, which were reported to be almost 3 times as high for the Indigenous population (4.2%) compared with the non-Indigenous population (1.5%) across all age groups in 2008 (ABS 2010).

The land transport injury death rate for Indigenous children was found to be 2.6 times the rate of non-Indigenous children (Table 3). This over-representation was substantially higher for children aged 0–4 years (4.5 times) and 5–9 years (3.9 times), but not as high for children aged 10–14 years (1.5 times) (AIHW: Henley & Harrison 2010).

Indigenous children were also 5 times as likely as non-Indigenous children to die from exposure to smoke, fire and flames (Table 3).

Table 3: Deaths due to external causes of injury among children aged 0–17 years, by Indigenous status, 2003–2007 (number per 100,000)

	Number per 100,000		
	Indigenous	Non-Indigenous	Rate ratio
Land transport accidents	13.6	5.2	2.6
Intentional self-harm	7.3	1.3	5.4
Other accidental threats to breathing	2.9	1.0	3.0
Accidental drowning and submersion	2.8	1.7	1.7
Assault/homicide	2.3	0.7	3.4
Exposure to smoke, fire and flames	1.9	0.4	5.0
Accidental exposure to other and unspecified factors	1.5	0.9	1.7
Accidental poisoning by and exposure to noxious substances	1.1	0.3	4.0
Event of undetermined intent	1.1	0.4	2.6
Total^(a)	37.2	12.9	2.9

(a) Total includes data that are not published on deaths due to water, air and space transport accidents; falls; exposure to inanimate and animate mechanical forces; exposure to electric current, radiation etc and exposure to forces of nature.

Note: For data quality reasons, data only include New South Wales, Queensland, Western Australia, South Australia and the Northern Territory

Source: AIHW National Hospital Mortality Database (unpublished data).

Factors contributing to injury rates

The relatively high rates of preventable injuries in Indigenous communities have been attributed to a range of factors including the ongoing effects of colonisation, social disadvantage, high rates of drug and alcohol misuse and of violence, high stress levels, residence in remote areas, poor safety standards, unsafe roads and lack of access to primary health care (Crengle et al. 2009; Harrison et al. 2001, Helps & Harrison 2004; Moller 2003). Strategies that attempt to mitigate these risk factors are addressed through a number of injury prevention initiatives (see Box 1).

Box 1: Child injury initiatives

- The National Injury Prevention and Safety Promotion Plan 2004–2014 identifies injury prevention in children and Aboriginal and Torres Strait Islander peoples as priority areas for action. A National Aboriginal and Torres Strait Islander Safety Promotion Strategy was also developed to complement this Plan (AIHW 2009; NPHP 2004a, NPHP 2004b).
- Australian governments have also been world leaders in introducing child safety measures such as swimming pool fencing, child resistant closures on pharmaceuticals and household poisons, and safety standards for children's toys and playgrounds (Patterson 2002).

Senate inquiry into suicide

In response to the overrepresentation of Indigenous people in reported suicide rates, a recent Senate inquiry report into suicide recommended the development of a separate suicide prevention strategy for Indigenous communities within a new National Suicide Prevention Strategy (SCACS 2010). The Australian Government has supported this recommendation in its response, noting its relationship to the Closing the Gap initiative (DoHA 2010).

Child protection

Aboriginal and Torres Strait Islander people are more likely to experience problems such as alcohol abuse and domestic violence that are associated with increased risk for child abuse and neglect (Berlyn & Bromfield 2009). The current data show that Indigenous children are consistently and significantly over-represented across the child protection system (AIHW 2011a).

In Australia, statutory child protection is a state and territory government responsibility. Assistance is provided to vulnerable children who are suspected of being abused, neglected, harmed, or whose parents are unable to provide adequate care or protection. The rate of substantiation of child abuse and neglect has been identified as a key national indicator of child safety, and reducing this rate is a clearly identified priority in programs, policies and legislation across all Australian jurisdictions.

Indigenous children in child protection systems

During 2009–10, Indigenous children aged 0–17 years were more likely than non-Indigenous children to be the subject of a substantiation¹, to be on care and protection orders² and to be placed in out-of-home care³. This is consistent with findings from previous years, and across all jurisdictions, although rates varied (AIHW 2010b). Across Australia (Figure 1):

- Indigenous children were 7.7 times as likely as non-Indigenous children to be the subject of a substantiation of a notification (35.3 per 1,000, compared with 4.6 per 1,000 non-Indigenous children).
- The rate of Indigenous children on care and protection orders was 9 times the rate for non-Indigenous children (48.3 per 1,000 children and 5.4 per 1,000 children respectively).
- The rate of Indigenous children in out-of-home care was almost 10 times the rate for non-Indigenous children (48.4 per 1,000 children and 5.0 per 1,000 children respectively).

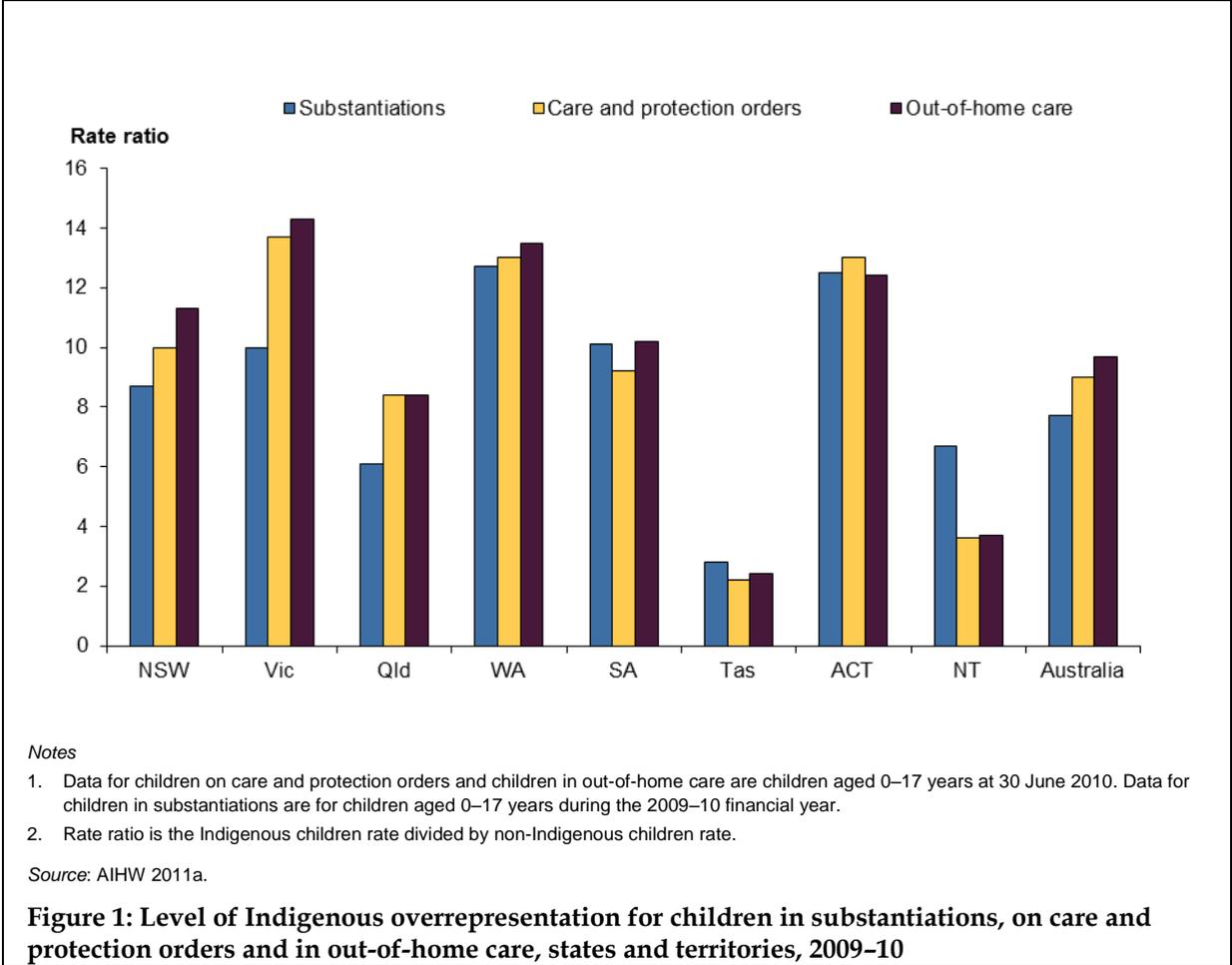
Note that children can and do move between various parts of the child protection system. For example, those who are the subject of a substantiation may be placed on care and

1 Substantiations of notifications refers to the conclusion, after investigation, that a child has been, is being or is likely to be abused or neglected or otherwise harmed. Substantiation data refer to the 2009–10 financial year.

2 Care and protection orders are legal or administrative orders or arrangements that give child protection departments some responsibility for a child's welfare. These data refer to children at 30 June 2010.

3 Out-of-home care provides alternative overnight accommodation for children and young people who are unable to live with their parents. These arrangements include foster care, placements with relatives or kin, and residential care. These data refer to children at 30 June 2010.

protection orders and/or placed in out-of-home care when they are unable to live with their parents.



Type of abuse

Across all abuse types, Indigenous children had higher rates of substantiations when compared with non-Indigenous children. The rate of Indigenous children who were the subject of a substantiation of neglect was 12 times the rate for non-Indigenous children. The rate of substantiated physical, emotional and sexual abuse for Indigenous children was between 5–7 times the rate for non-Indigenous children.

For Indigenous children, the most common type of abuse was neglect (closely followed by emotional abuse) while for non-Indigenous children, the most common type of abuse was emotional abuse (Table 4). Further data and information are available in *Child protection Australia 2009–10* (AIHW 2011a).

Table 4: Children aged 0–17 who were the subject of a substantiation received during 2009–10, by type of abuse or neglect and Indigenous status (rate)

Type of abuse or neglect	Indigenous children	Non-Indigenous children
Neglect	13.2	1.1
Emotional abuse	11.9	1.7
Physical abuse	7.1	1.1
Sexual abuse	3.1	0.7
Total	35.3	4.6

Note: If a child was the subject of more than one type of abuse or neglect as part of the same notification, the type of abuse or neglect reported is the one child protection workers considered to cause the most harm to the child. Where a child is the subject of more than one substantiation during the year, the type of abuse or neglect reported is the one associated with the first substantiation decision during the year.

Source: AIHW Child Protection Collection 2010.

Factors contributing to Indigenous over-representation

The reasons for the over-representation of Indigenous children in the child protection system are complex but may include the legacy of past policies of the forced removal of some Aboriginal children from their families, intergenerational cycles of poverty, and cultural differences in child-rearing practices (HREOC 1997). Research also suggests that other factors such as disadvantaged socioeconomic status, violence, drug and alcohol abuse and inadequate housing may be associated with heightened risk of child abuse and neglect (Berlyn & Bromfield 2009). A number of national initiatives have been implemented to address issues for Indigenous children and young people in the child protection system (see Box 2).

Box 2: Child protection initiatives

- **The Aboriginal Child Placement Principle** outlines a preference for the placement of Aboriginal and Torres Strait Islander children with other Aboriginal and Torres Strait Islander people when they are placed outside their family (Lock 1997). All jurisdictions have now adopted this Principle in both legislation and policy although the actual wording as presented in legislation varies (LRCWA 2005).
- **The National Framework for Protecting Australia’s Children (2009–2020)** aims to substantially reduce child abuse and neglect across Australia and to reduce the over-representation of Indigenous children in child protection systems. To focus effort and actions under the Framework six supporting outcomes have been developed, one outcome being that Indigenous children are supported and safe in their families and communities (COAG 2009a, 2009b).

Juvenile justice

The rate of juvenile justice supervision is a key national indicator of child safety. Indigenous children are over-represented in juvenile justice supervision and, as a result, are likely to have poorer social, emotional and health outcomes (AIHW 2009, 2011b).

In Australia, responsibility for juvenile justice lies with the state and territories and involves both juvenile justice agencies and other justice agencies such as the police and courts. In all states and territories, a young person is deemed to have criminal responsibility if they are 10 years or older. In most states and territories the maximum age of treatment as a young person for criminal responsibility is 17 years; however, it is possible for young people over the age of 17 years to be supervised by a juvenile justice agency⁴.

Diversion

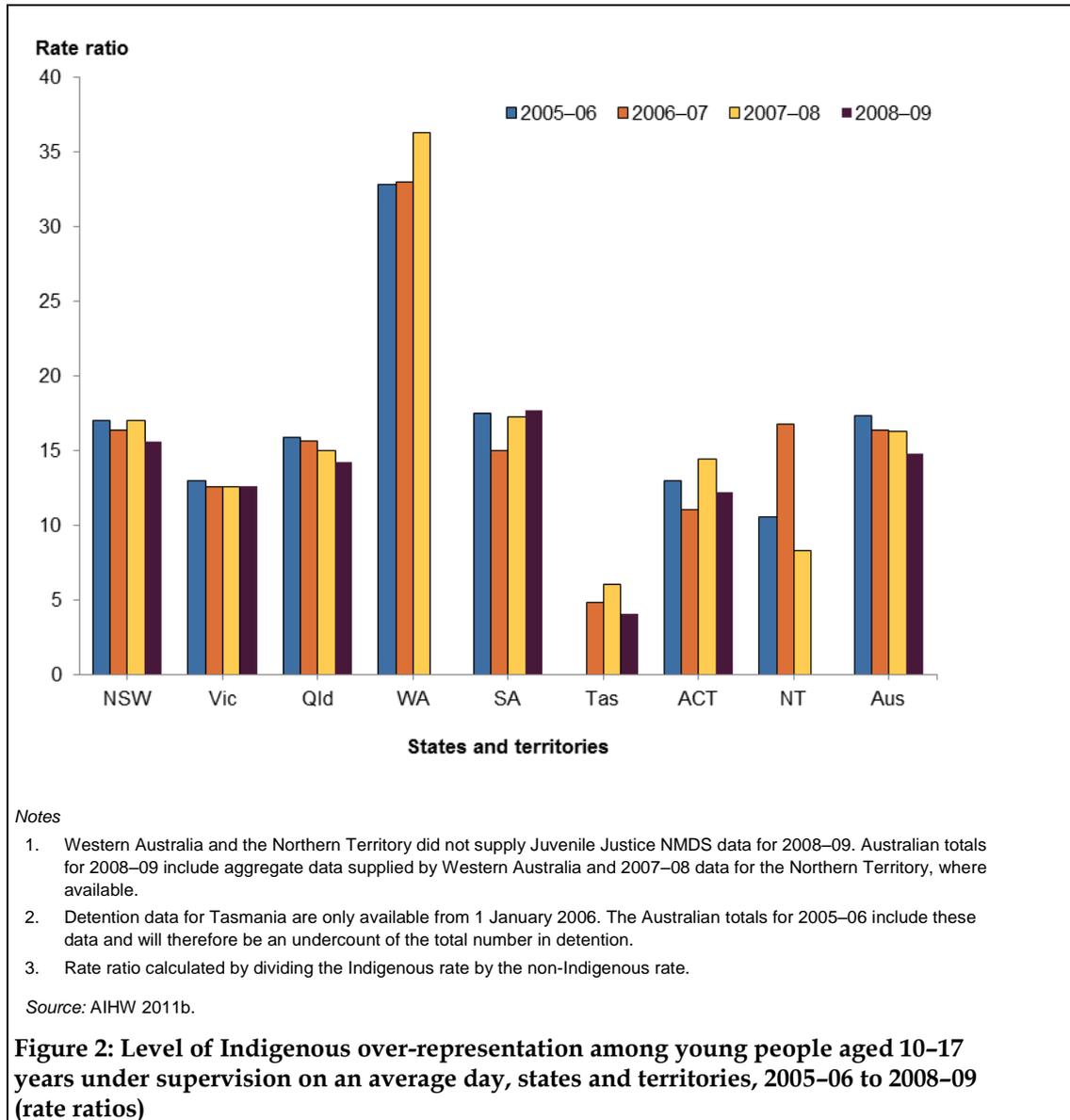
An important feature of the juvenile justice system in Australia is diversion. Diversion involves any process that prevents young people from entering or continuing in the formal criminal justice system; it typically involves pre-court processes such as police cautioning or conferencing (AIC 2010). In most states and territories, both the police and courts can divert young people from the juvenile justice system.

Young people under supervision

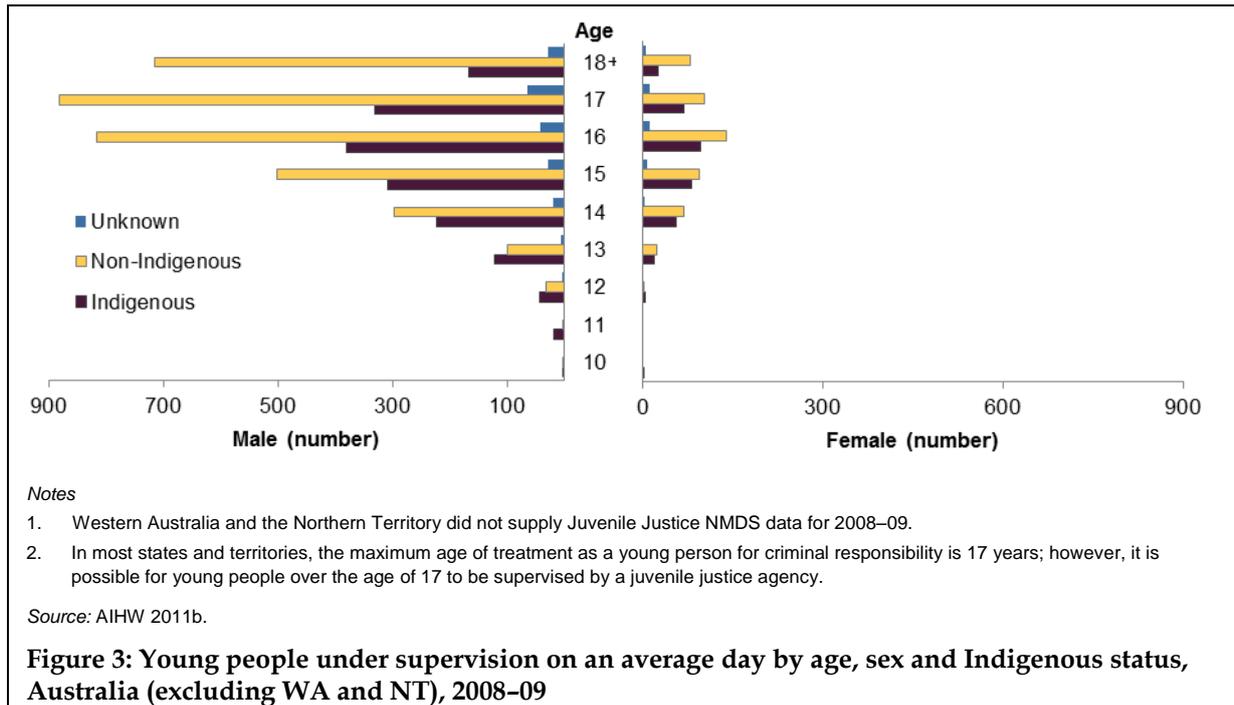
Indigenous young people are over-represented in the juvenile justice system. Although only around 5% of young Australians are Indigenous, in 2008–09 on an average day 37% (2,235) of males and 44% (465) of females under juvenile justice supervision were Indigenous young people. Overall, on an average day Indigenous young people were 15 times as likely to be under supervision as non-Indigenous young people. The level of over-representation was higher for detention than community-based supervision, where Indigenous young people were 24 times as likely to be detained as non-Indigenous young people.

In most states and territories, the level of Indigenous over-representation decreased slightly from 2005–06 to 2008–09 (Figure 2).

⁴ This can occur for a number of reasons. Firstly, a young person may have been apprehended for an offence that was (allegedly) committed when they were aged 17 years or younger. Secondly, if they entered supervision when aged 17 years or younger, they may continue to be supervised by the juvenile justice system once they turn 18 years old; alternatively, they may be transferred to the adult correctional system. Thirdly, in some states and territories, young people aged 18 years and older may be supervised by juvenile justice agencies due to their vulnerability or immaturity. Additionally, young people in Victoria aged 18–20 years may be sentenced to detention in a juvenile detention centre (rather than an adult prison) where the court deems appropriate (the 'dual track' sentencing system).



Excluding Western Australia and the Northern Territory, for which data were not available, Indigenous young people were particularly over-represented in the younger age groups under supervision (Figure 3). On an average day in 2008-09, over half (55%) of those aged 10-13 years were Indigenous, while 42% were non-Indigenous children (the remainder were of unknown Indigenous status). For those aged 14-17 years, 33% were Indigenous while 63% were non-Indigenous and of those aged 18 years and older, 19% were Indigenous compared with 78% non-Indigenous.



Not only are Indigenous young people over-represented in juvenile justice supervision but their experiences are different.

Age at first supervision or detention

Indigenous young people tend to enter their first period of juvenile justice supervision at a younger age (in 2008–09, 60% of 10–12 year olds were Indigenous, compared with 38% who were non-Indigenous). Indigenous young people also tended to enter their first period of detention at a younger age than non-Indigenous young people; 65% of 10–12 year olds were Indigenous compared with 34% of non-Indigenous young people.

Unsentenced detention

On an average day in 2008–09, just under half of all unsentenced young people (45%) and sentenced young people (43%) were Indigenous. Indigenous young people were slightly more likely to complete multiple periods of unsentenced detention during the year than non-Indigenous young people (45% of Indigenous young people in detention completed multiple periods compared with 41% of non-Indigenous) and, on average, spent 5 days longer than their non-Indigenous counterparts in unsentenced detention (8 days compared with 3 days). Further, Indigenous young people were less likely to be released on bail from a period of unsentenced detention compared with non-Indigenous young people. Almost two-thirds (65%) of periods of unsentenced detention involving non-Indigenous people ended with release on bail, compared with 54% of periods involving Indigenous young people.

Information on the young people supervised by juvenile justice agencies in Australia, both in detention and in the community, is obtained from the AIHW's Juvenile Justice National Minimum Data Set. Further information is available in *Juvenile justice in Australia 2008–09* (AIHW 2011b).

Inquiry into Indigenous juveniles in the criminal justice system

In response to the continuing high rate of Indigenous juveniles in detention, the House of Representatives Standing Committee on Aboriginal and Torres Strait Islander Affairs is conducting an Inquiry into the high level of involvement of Indigenous juveniles and young adults in the criminal justice system. The inquiry is focused on prevention and early intervention in order to identify strategies to help reduce the number of Indigenous Australians involved in the criminal justice system.

Areas of focus include the impact of alcohol use and other substance abuse on the level of Indigenous juvenile and young adult involvement in the criminal justice system; and initiatives which would improve the effectiveness of the education system in contributing to reducing this involvement with the criminal justice system (House Standing Committee on Aboriginal and Torres Strait Islander Affairs 2009). Further information about initiatives targeted to Indigenous young people in the juvenile justice system is presented in Box 3.

Box 3: Juvenile justice initiatives

The states and territories have a number of initiatives targeted towards Indigenous young people in the criminal justice system. These include specialist Indigenous staff who work with young people in detention and post-release; programs and support services such as drug and alcohol programs, programs to reduce the incidence of family and intergenerational violence; and Indigenous and cultural specific programs including numeracy and literacy, Indigenous art and counselling.

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