



Indigenous Allied Health Australia

2013 2nd National Conference

Healthy Footprints Leading Generational Change'

Healthy Footprints Leading Generational Change



“imagine”



Dr Tom Calma AO

National Coordinator Tackling Indigenous Smoking



North

Kundjey'mi

Gagudju

Amarak

Bukurnidja

Iwaidja

Konbudj

C Van Diemen

Melville I

Bathurst I

Alilkapiti

Tiwi

Ngombur

Endyalgout I

C Croker
Croker I

Maung

Nguiu

Mbukarla

Van Diemen

Limilngan

Gulf
Field I

Beagle Gulf

DARWIN

East

Gunbalunya

Obiri Rock

Gunv

Belyuen

Woolna

Larrakia

Jabiru

Wadyiginy

Batchelor

Kungarakany

Kakadu

Wuningangk

Tjerratj

Anson Bay

Kuwema

Adelaide

Warray

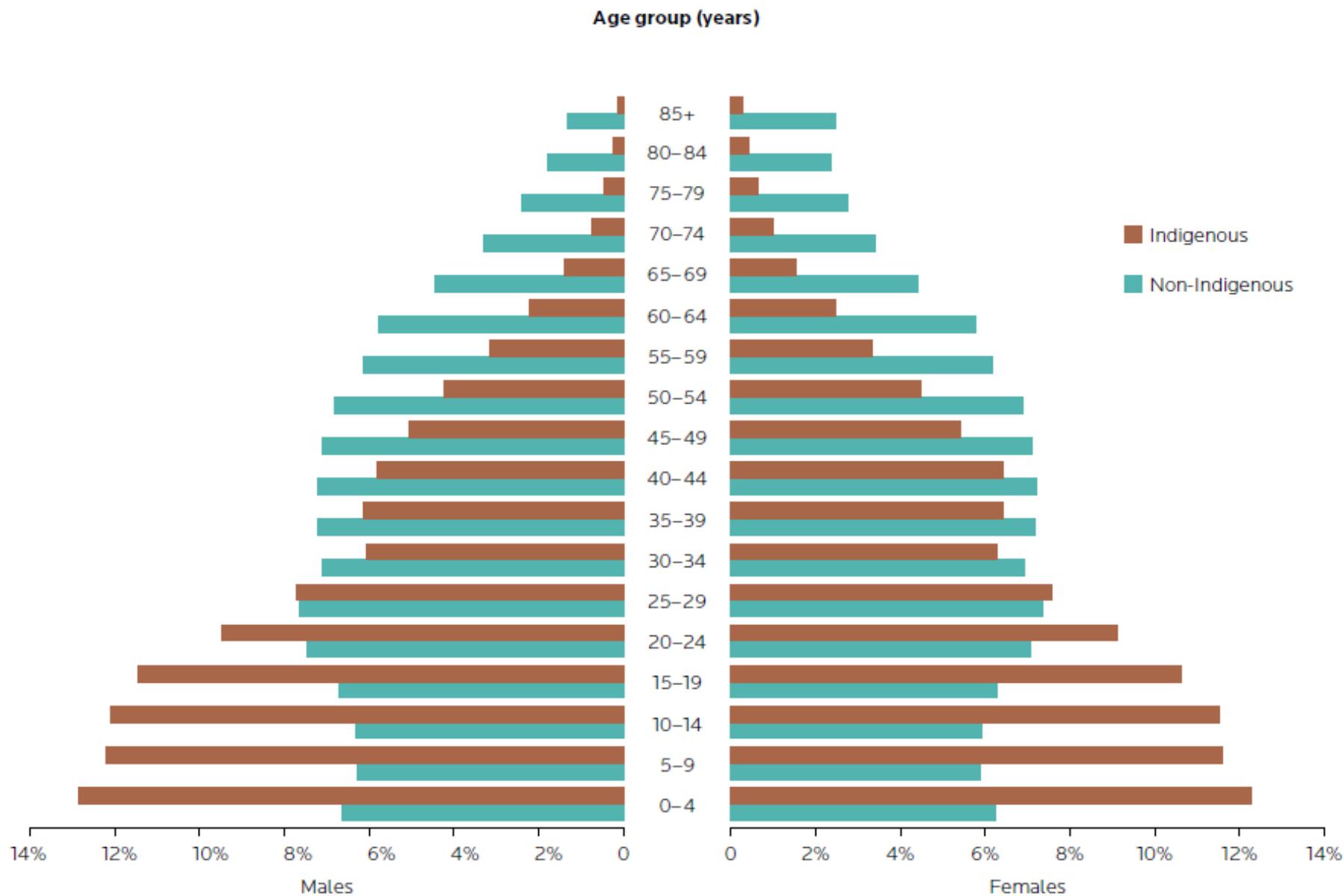
Malak

Daly River

Dingo Creek



Figure 2: Indigenous and non-Indigenous Population estimates, Australia, 2011

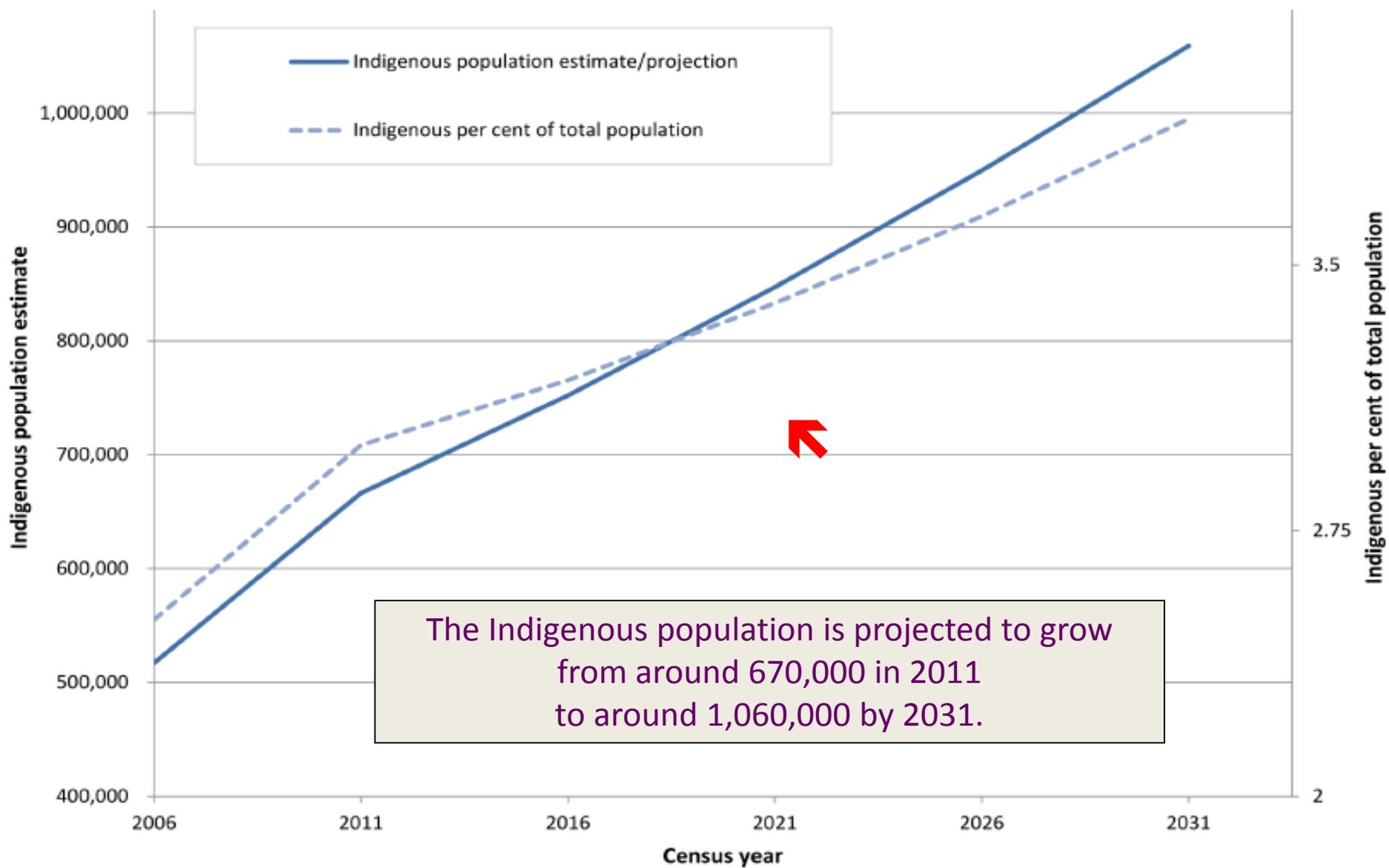


Source: ABS 2011 Census Unpublished data

Demographics

- At 30 June 2006, the Indigenous estimated resident population of Australia was **517,200** or **2.5%** of the total pop
- Just over **50% under 30** years old
- 194,000 Indigenous children **aged ≤ 14 years** (38%, compared with 19 % for the non-Indigenous pop)
- **Fastest growing** population group in Australia
- **75%** live in urban and regional environments
- Is likely to reach between 713,300 and 721,100 by 2021 - about the same as estimated population **at the time of colonisation** in 1788

FIG. 3. Projected Indigenous population, 2006 to 2031



The Indigenous population is projected to grow from around 670,000 in 2011 to around 1,060,000 by 2031.

Source: Customised calculations based on the 2011 Census.

Indigenous Population 2031

ABS 2011

Based on current rates of fertility, mortality and mobility, the regions which are projected to experience the most rapid population growth between 2011 and 2031 are

Brisbane, Rockhampton, Cairns - Atherton, South-Western WA, South Hedland and Townsville - Mackay. Even in

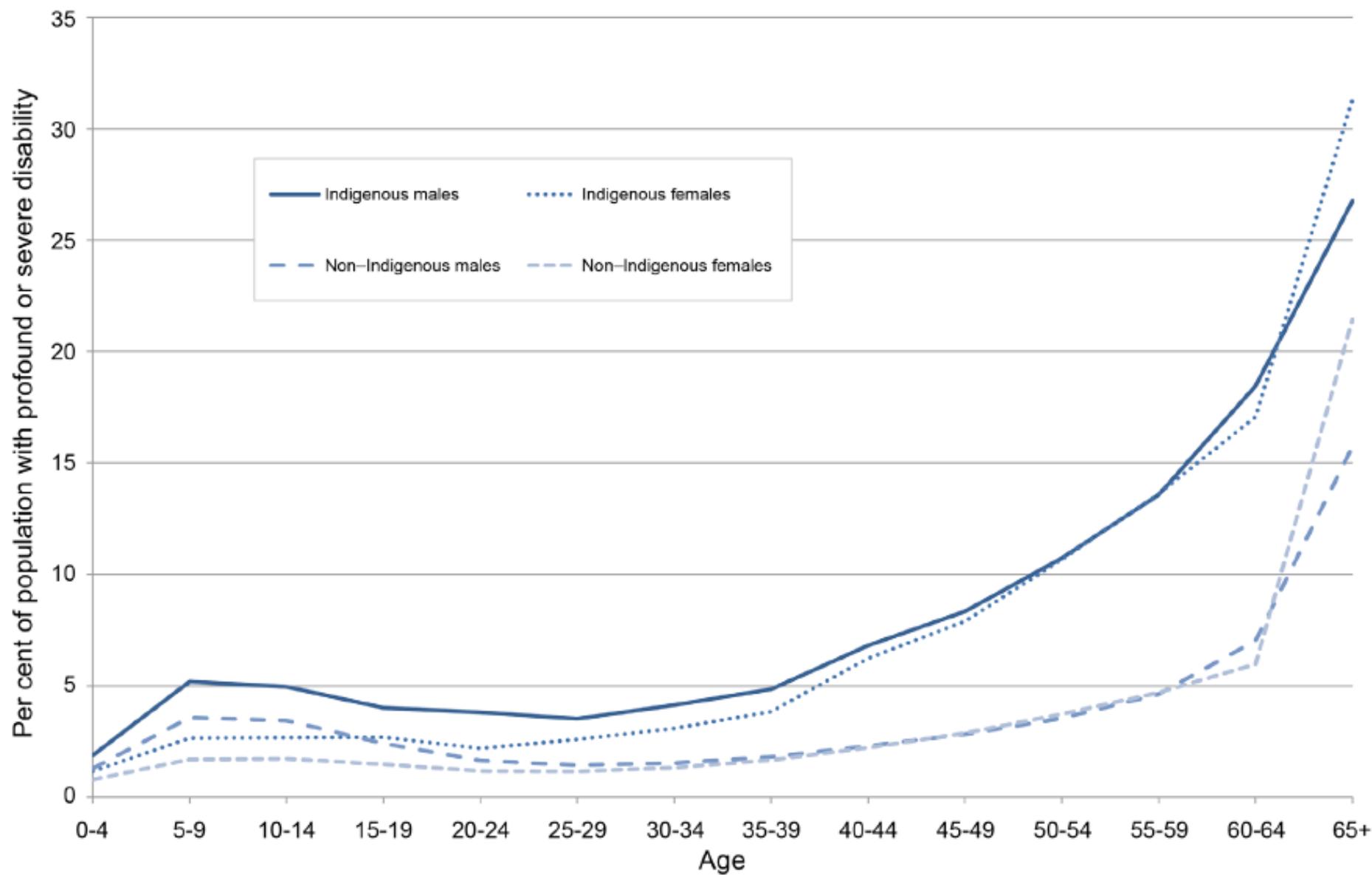
the absence of changes in self-identification, these four regions (four in Queensland and two in Western Australia) are projected to grow by 3 per cent or more per year. On the other hand, there are four regions projected to grow by less than 1 per cent per year over the period—Apatula, Tennant Creek, Katherine and North-Western NSW.

TABLE 1. Projected Indigenous population and growth, 2031

Indigenous Region	Population		Per cent Indigenous		Projected yearly growth rate (2011 to 2031)
	2011	2031	2011	2031	
Dubbo	13,625	16,963	15.1	19.7	1.1
North-Eastern NSW	20,790	26,368	9.8	12.1	1.2
North-Western NSW	9,492	10,684	22.2	28.4	0.6
NSW Central and North Coast	62,896	97,258	4.2	5.9	2.2
Riverina - Orange	24,311	33,548	5.1	7.0	1.6
South-Eastern NSW	13,178	19,060	3.9	5.1	1.9
Sydney - Wollongong	64,184	88,371	1.4	1.6	1.6
Melbourne	22,461	39,268	0.5	0.8	2.8
Victoria exc. Melbourne	24,872	43,570	1.7	2.7	2.8
Brisbane	64,993	133,189	2.2	3.3	3.7
Cairns - Atherton	29,088	57,512	12.6	19.7	3.5
Cape York	9,812	12,772	60.0	65.2	1.3
Mount Isa	9,358	12,126	27.5	31.6	1.3
Rockhampton	22,822	46,290	5.1	8.3	3.6
Toowoomba - Roma	18,389	30,197	5.4	7.8	2.5
Torres Strait	6,885	8,807	85.7	87.9	1.2
Townsville - Mackay	27,807	49,698	7.2	10.1	3.0
Adelaide	25,718	44,134	1.7	2.5	2.7
Port Augusta	8,863	11,768	10.6	14.5	1.4
Port Lincoln - Ceduna	2,827	4,188	8.1	11.9	2.0
Broome	5,481	8,416	34.8	36.2	2.2
Geraldton	8,055	12,246	13.1	16.8	2.1
Kalgoorlie	7,180	9,733	11.8	13.9	1.5
Kununurra	6,611	8,529	54.6	55.6	1.3
Perth	32,837	57,292	1.9	2.5	2.8
South Hedland	10,014	17,921	15.6	17.0	3.0
South-Western WA	13,162	25,763	3.4	5.3	3.4
West Kimberley	4,930	6,206	55.1	61.6	1.2
Tasmania	24,165	32,529	4.7	5.9	1.5
Alice Springs	6,233	9,872	21.9	30.5	2.3
Apatula	9,894	10,448	78.9	80.4	0.3
Darwin	14,660	22,165	11.1	14.6	2.1
Jabiru - Tiwi	12,151	15,551	78.0	81.0	1.2
Katherine	10,543	11,754	53.8	59.1	0.5
Nhulunbuy	10,896	13,912	64.5	71.2	1.2
Tennant Creek	4,473	4,854	68.2	72.7	0.4
ACT	6,160	10,465	1.7	2.3	2.7

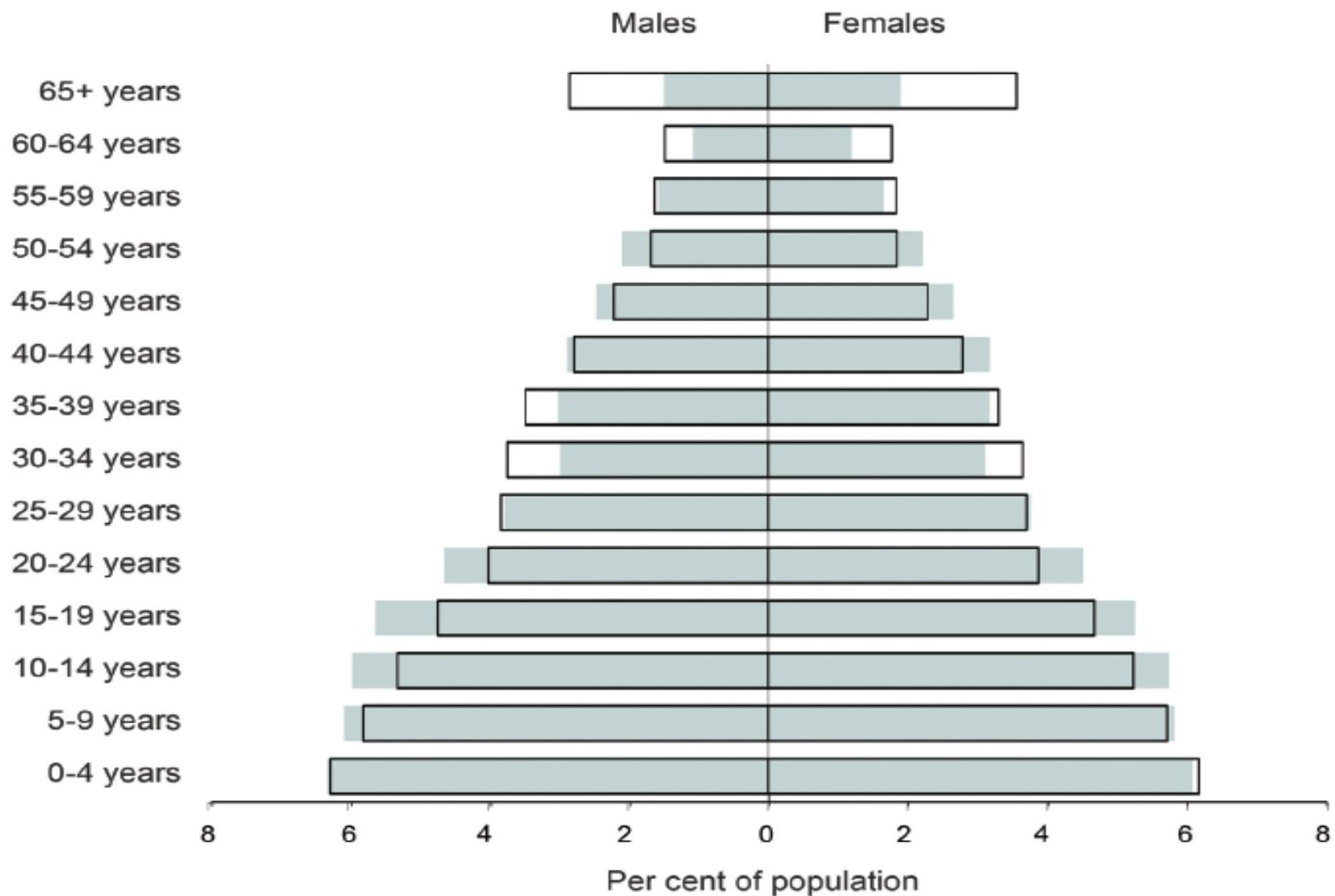
Source: Customised calculations based on the 2011 Census.

FIG. 5. Rates of profound or severe disability by Indigenous status and sex, 2011



Source: Customised calculations based on the 2011 Census.

FIG. 4. Age structure of the Indigenous population, 2011 estimates and 2031 projections

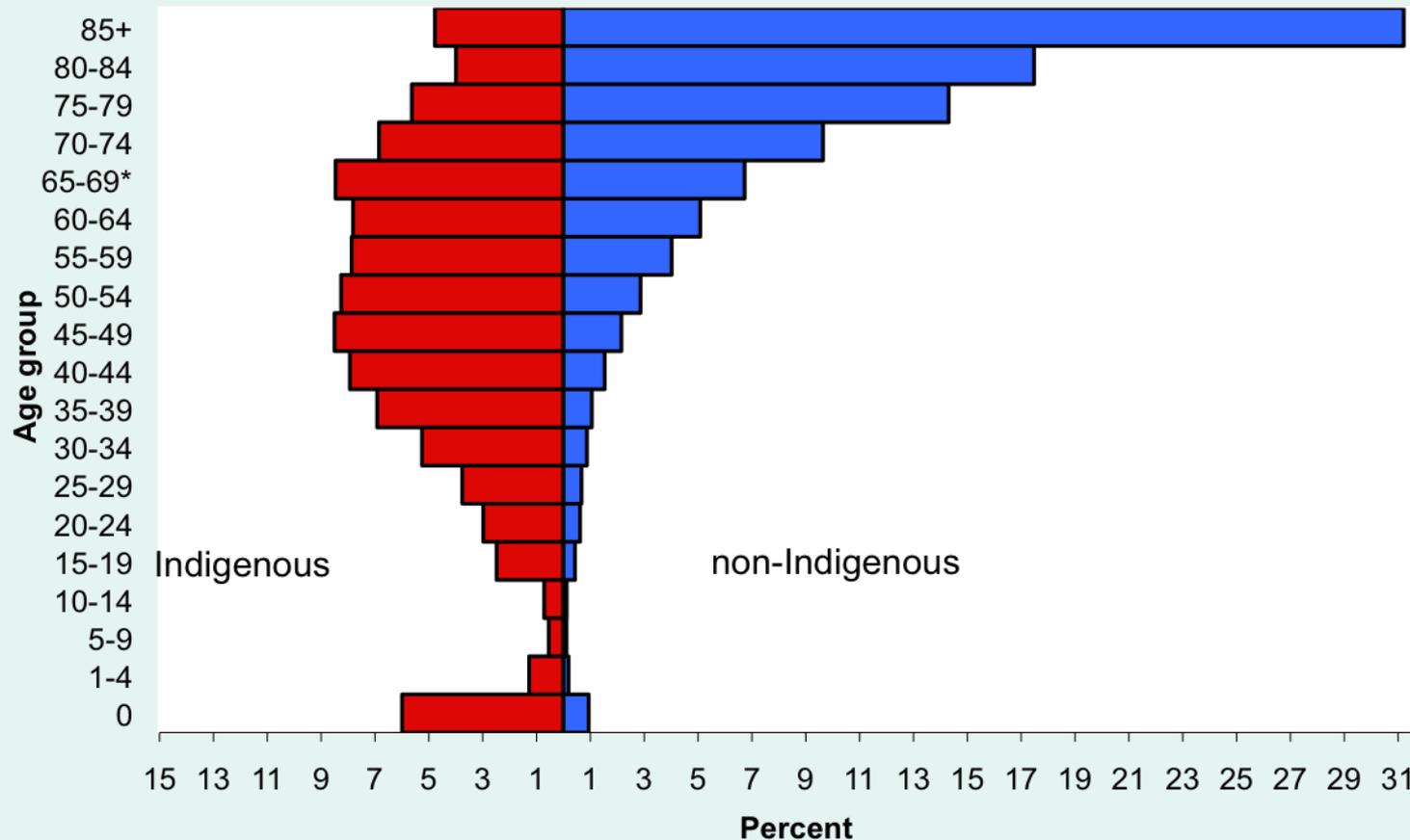


Source: Customised calculations based on the 2011 Census.

Life-expectancy

Most Indigenous deaths occur in the middle adult ages

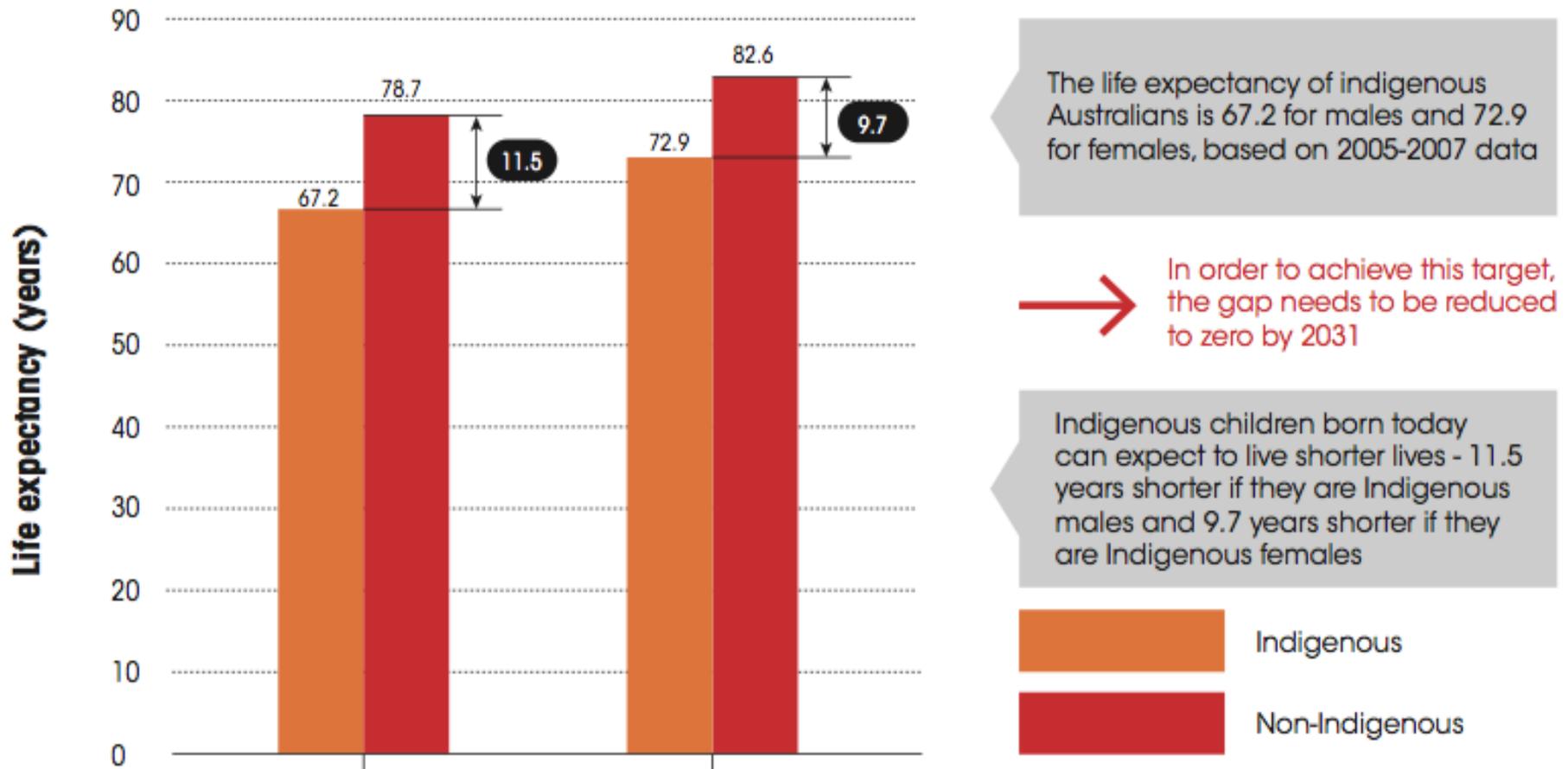
Indigenous and non-Indigenous deaths, 2002-2006



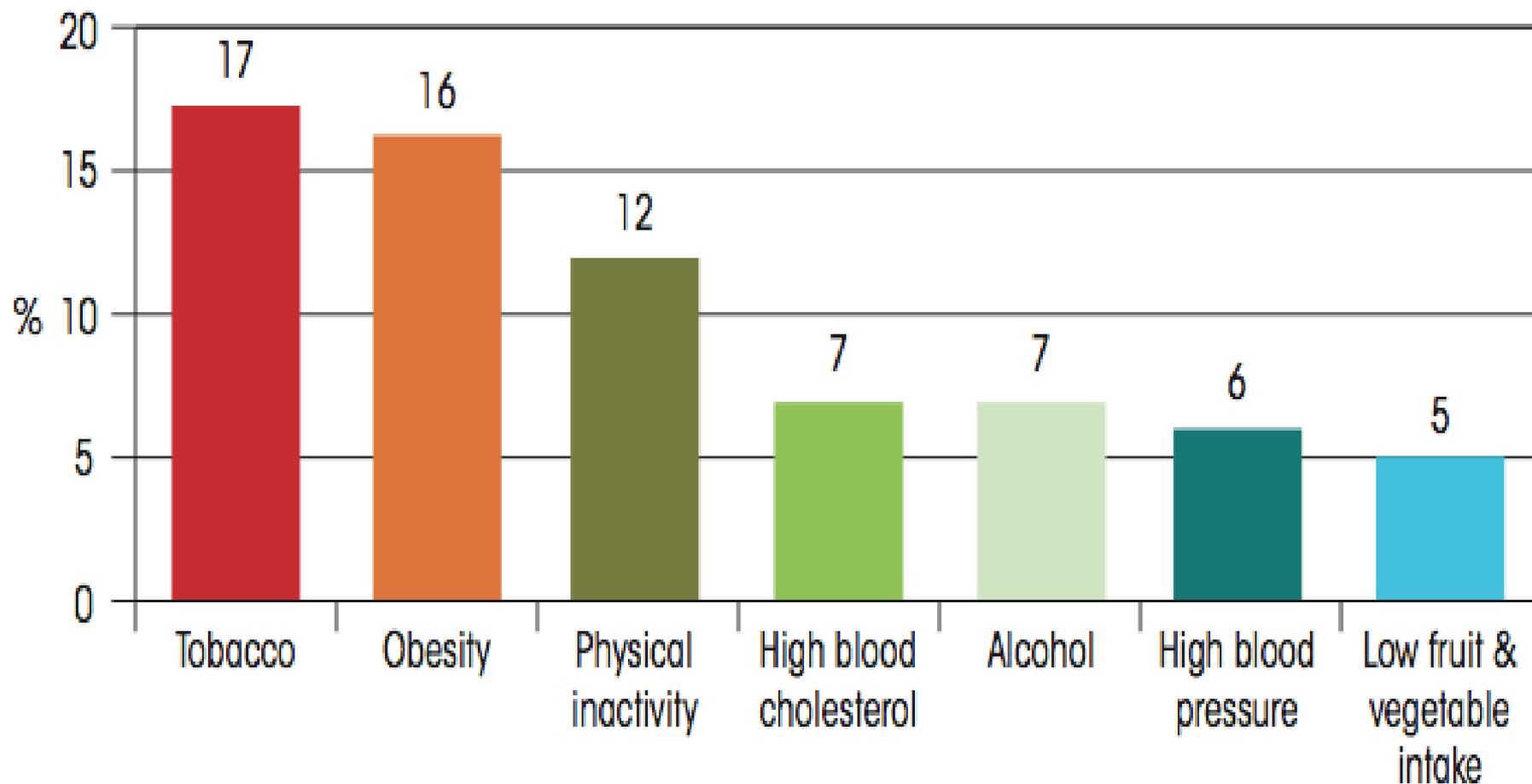
Source: Darren Benham analysis mortality data

Life Expectancy

Figure 1: Life expectancy estimates for Indigenous and non-Indigenous Australians



Chronic disease risk factors - 2010



What are the social determinants of health?

According to [the World Health Organisation](#), the social determinants of health are the conditions in which people are born, grow, live, work and age, including the health system. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries.

Examples of social determinants of health



CLOSE THE GAP

Investing in a healthy future



Photo: Jason Malsam/OxampaUS

The Close the Gap Campaign Coalition:

CO-CHAIRS

- Ms Jody Brown, Co-chair of the National Congress of Australia's First Peoples
- Mr Mick Gooda, Aboriginal and Torres Strait Islander Social Justice Commissioner, Australian Human Rights Commission

MEMBERS

- Aboriginal and Torres Strait Islander Healing Foundation
- Australian Indigenous Doctors' Association
- Australian Indigenous Psychologists' Association
- Congress of Aboriginal and Torres Strait Islander Nurses
- Indigenous Allied Health Australia Inc.
- Indigenous Dentists' Association of Australia

- National Aboriginal Community Controlled Health Organisation
- National Aboriginal and Torres Strait Islander Health Worker Association
- National Association of Aboriginal and Torres Strait Islander Physiotherapists
- National Congress of Australia's First Peoples
- National Coordinator — Tackling Indigenous Smoking (Dr Tom Cairns AO — Campaign founder and former Aboriginal and Torres Strait Islander Social Justice Commissioner)
- National Indigenous Drug and Alcohol Committee
- The Lowy's Institute
- Torres Strait Island Regional Authority
- Australian College of Nursing

- Aboriginal Health and Medical Research Council of NSW
- ANTaR
- Australian Human Rights Commission (Secretariat)
- Australian Medical Association
- Australian Medicare Local Alliance
- Fred Hollows Foundation
- Heart Foundation Australia
- Menzies School of Health Research
- Oxfam Australia
- Palliative Care Australia
- Royal Australasian College of Physicians
- Royal Australian College of General Practitioners
- Professor Ian Ring (expert adviser)

Ian Thorpe asks

Australian governments not to forget Aboriginal and Torres Strait Islander health

Dear state, territory and federal government leaders,

I got behind the Close the Gap campaign because I believed it's totally unacceptable that Aboriginal and Torres Strait Islander Peoples die 10–17 years younger than non-Indigenous Australians.

I believed that long-term commitments to programs and services will dramatically improve people's health outcomes and quite literally save lives.

Thankfully all sides of politics agreed and five years ago the commitment of federal, state and territory governments through COAG to close the life expectancy gap by 2030 was a watershed moment for the nation.

So as the Council of Australian Governments (COAG) prepares to meet tomorrow, I urge all state and territory governments to commit to continuing to invest in Aboriginal and Torres Strait Islander health.

The policies behind the commitments made by COAG in 2008 are just starting to have an impact, with mortality rates for Aboriginal and Torres Strait Islander Peoples aged less than five years starting to fall.

But the fuel that is driving efforts to close the gap — the National Partnership Agreement on Closing the Gap in Indigenous Health Outcomes — is due to expire this June.

The Federal Government has indicated that it will continue funding its share of the agreement.

We now need all state and territory governments to contribute their fair share and commit to renewing the 'National Partnership Agreement on Closing the Gap in Indigenous Health Outcomes'.

The continued funding is required to:

- provide access to critical chronic disease services;
- further develop child and maternal health services;
- develop and implement healthy lifestyle programs and education;
- improve access to smoking programs;
- provide better resourced, more accessible and relevant health services;
- provide more affordable medicines;
- support Aboriginal Community Controlled Health Organisations; and
- train more Aboriginal health workers, allied health professionals, doctors, nurses and health promotion workers.

Australia can't afford to delay. Continued investment is essential if the nation is to build upon the work of the last four years.

I have seen the need and I have seen the impact that quality services can bring. I believe that we can be the generation to end the national disgrace that sees Aboriginal and Torres Strait Islander Peoples die more than 10 years younger than the broader Australian community.

Ian Thorpe, Close the Gap Campaign Patron



Join Ian by writing to your state or territory leader at oxfam.org.au/closethegap

HEALTH IMPACTS ACROSS THE LIFE COURSE

There are a number of health conditions that significantly contribute to the disparity in the health status between Aboriginal and Torres Strait Islander people and the non-Indigenous population. Interventions on these issues need to recognise the importance of a multi-layered approach to risk factor modification including system-level and community responses alongside programs targeted at individuals.

The top seven risk factors that require a continued focus are illustrated below. **Smoking** leads to higher incidence of a number of diseases, including chronic lung disease, cardiovascular disease and many forms of cancer. **Obesity**, which can result from the combination of poor nutrition and physical inactivity, increases the risk of cardiovascular diseases and type 2 diabetes.



ABBOTT'S INDIGENOUS ADVISORY PANEL

WARREN MUNDINE

From NSW a former Labor Party president and has worked as the chief executive of the NSW Native Title Service. Also worked for Andrew Forrest's indigenous employment project GenerationOne

NGIARE BROWN

From NSW south coast. One of the first group of Aboriginal medical graduates in Australia. Dr Brown has previously been indigenous health adviser to the federal Australian Medical Association and was foundation chief executive of the Australian Indigenous Doctors' Association

DANIEL TUCKER

From Kalgoorlie. Founder and managing director of Carey Mining, the largest 100 per cent indigenous, privately owned and managed contracting company in Australia

JOSEPHINE CASHMAN

Descendant of Worimi people of NSW. The managing director and founder of Riverview Global Partners and has worked in private, government and not-for-profit sectors

BRUCE MARTIN

Wik man from Aurukun. Chief executive of Aak Puul Ngantam, a Cape York organisation representing families of Watson River south to the Kendall River

LEAH ARMSTRONG

Torres Strait Islander. Chief executive of Reconciliation Australia. Previously established a not-for-profit company called Yarnteen. Recognised in the 2012 AFR/Westpac 100 Women of Influence awards



DJAMBAWA MARAWILI

Indigenous artist of the Yolngu people. In 1996, won the National Aboriginal and Torres Strait Islander Art Award Best Bark Painting prize. Also the chairman of the Association of Northern, Kimberley and Arnhem Land Aboriginal Artists

RICHELIE AH MAT

From Cape York and currently involved in the Cape York Welfare Reform agenda. Worked for Comalco Mining in Weipa for 27 years. Also served as chairman of the Cape York Land Council

GAIL KELLY

Managing director and chief executive of Westpac. Co-founder of Jawun Indigenous Corporate Partnerships and non-executive director of the Business Council of Australia

ANDREW PENFOLD

Current chief executive of the Australian Indigenous Education Foundation. Previously, had a successful career in international law and finance. Awarded an Order of Merit by the Australian Institute of Company Directors

DAVID PEEVER

Managing director of Rio Tinto Australia. Also the chairman of the Business Council of Australia's economic policy and competitiveness committee

PETER SHERGOLD

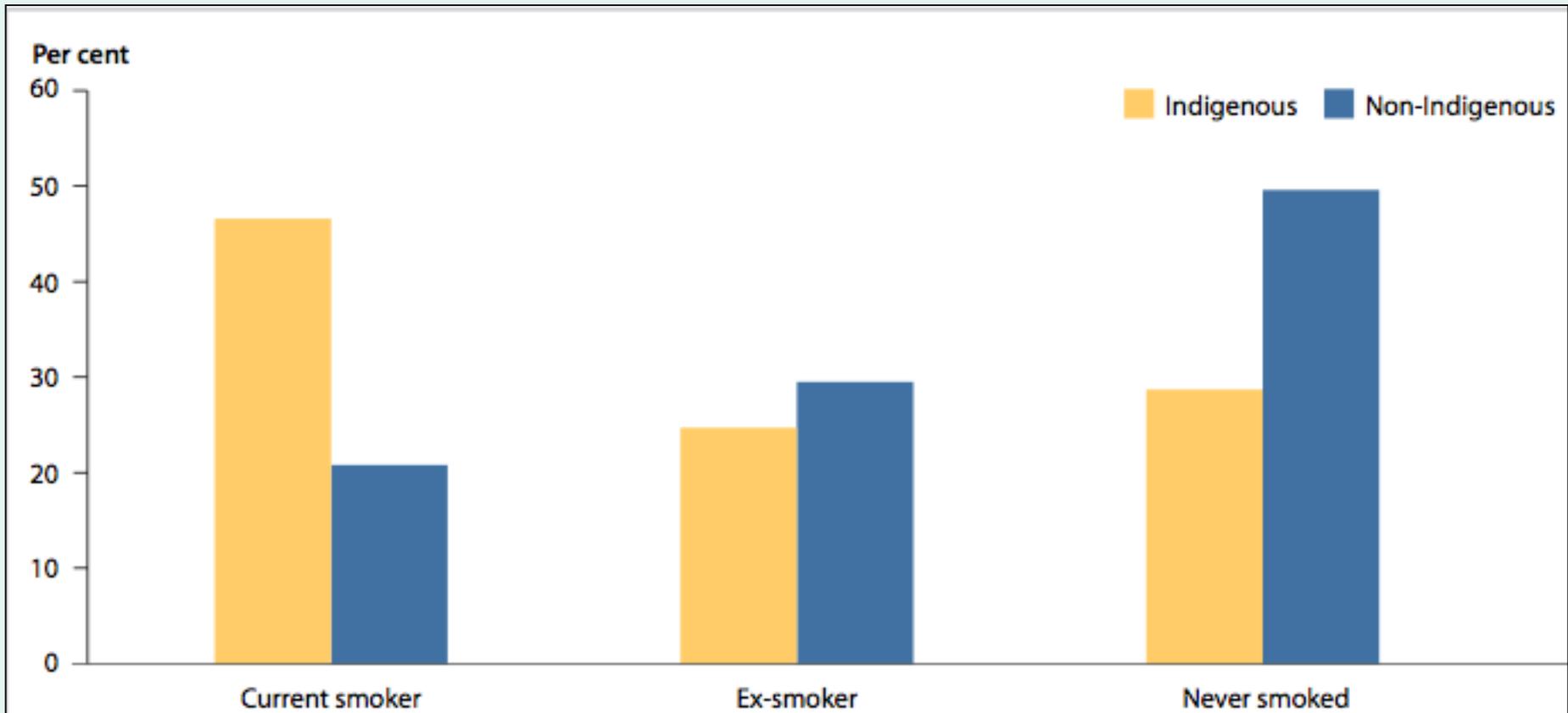
Chancellor of the University of Western Sydney. Also a current board member of the National Centre for Indigenous Excellence and a former secretary of the Department of Prime Minister and Cabinet. Prior to this, he was chief executive of the Aboriginal and Torres Strait Islander Commission



Citizen-centredness has several themes which continue to resonate across the OECD world.

- One is the recognition *that large gains are to be had if only government can be better co-ordinated – both horizontally and vertically.*
- A second, more recent theme is that, like the private sector, *the public sector must innovate in order to survive.*
- The third big idea is **governance**. At heart it comprises *a recognition that government does not govern alone, but usually in co-operation with a number of other players.*

Aboriginal and Torres Strait Islander Smoking story



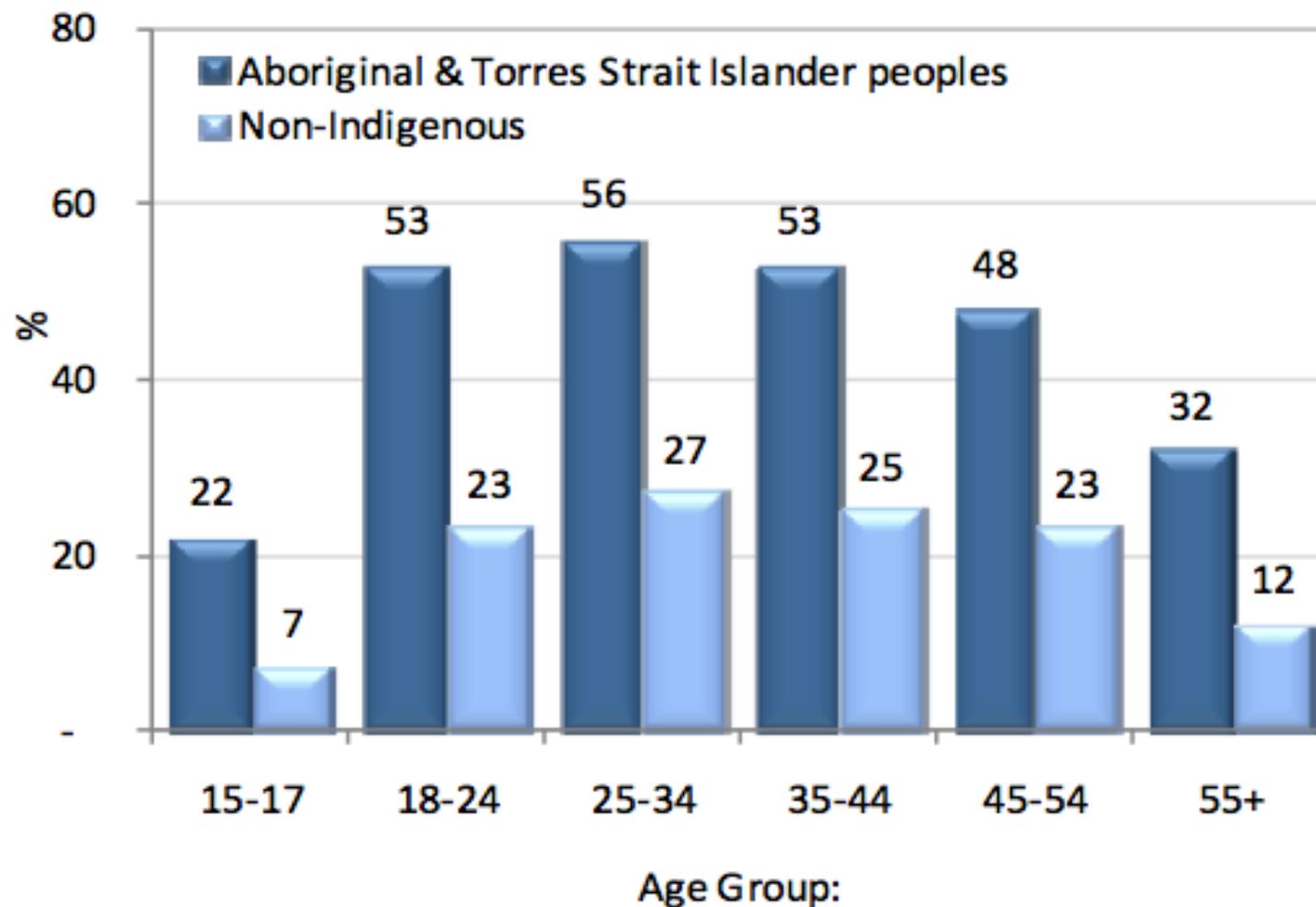
Notes

1. Age-standardised to the 2001 Australian population.
2. Persons aged 18 years and over.

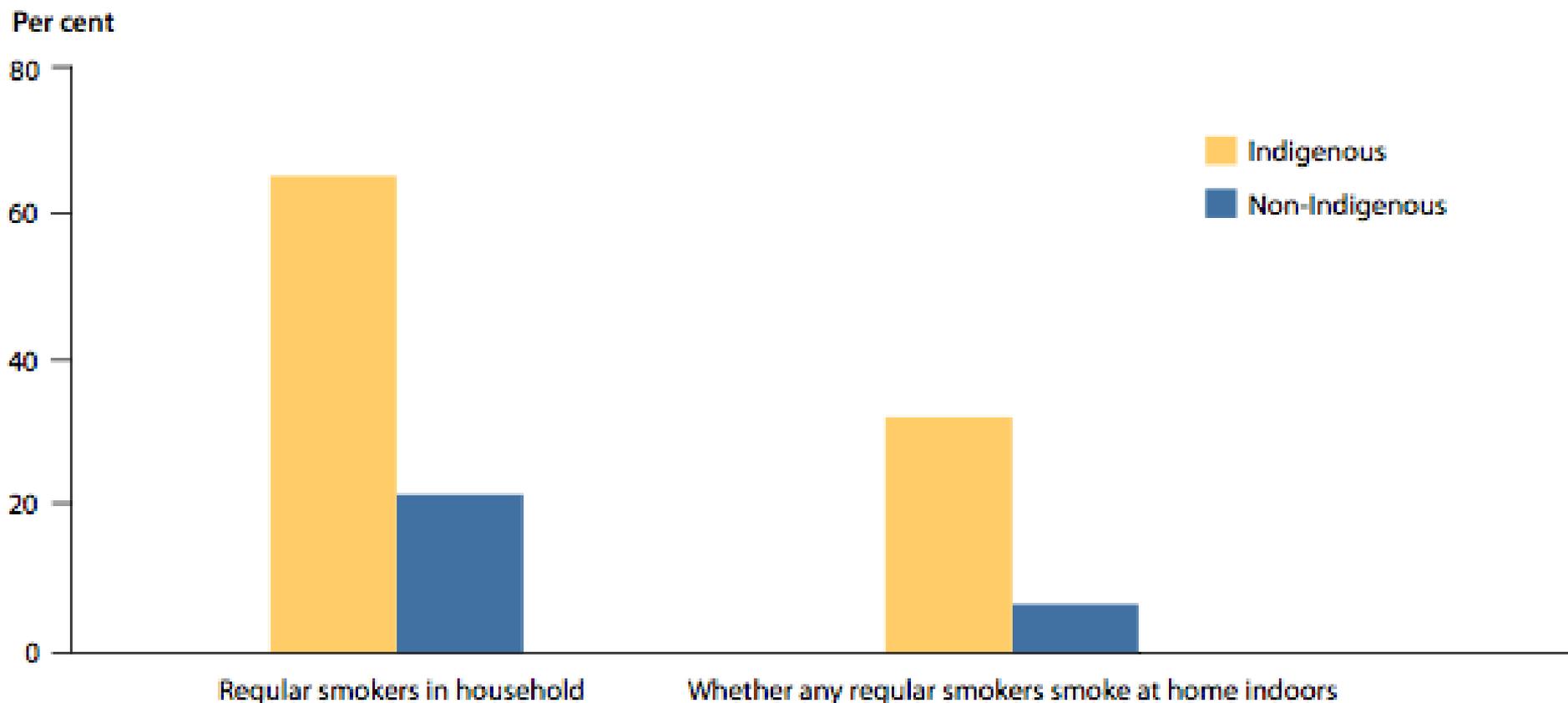
Source: ABS and AIHW analysis of 2008 NATSISS and 2007–08 National Health Survey.

Figure 3.18: Prevalence of tobacco smoking, by Indigenous status, 2008

Figure 115 –Proportion of population aged 15 years and over reporting they are a current smoker by Indigenous status and age, 2008



*Source: ABS and AIHW analysis of the 2008 NATSISS and the
and 2007–08 NHS*



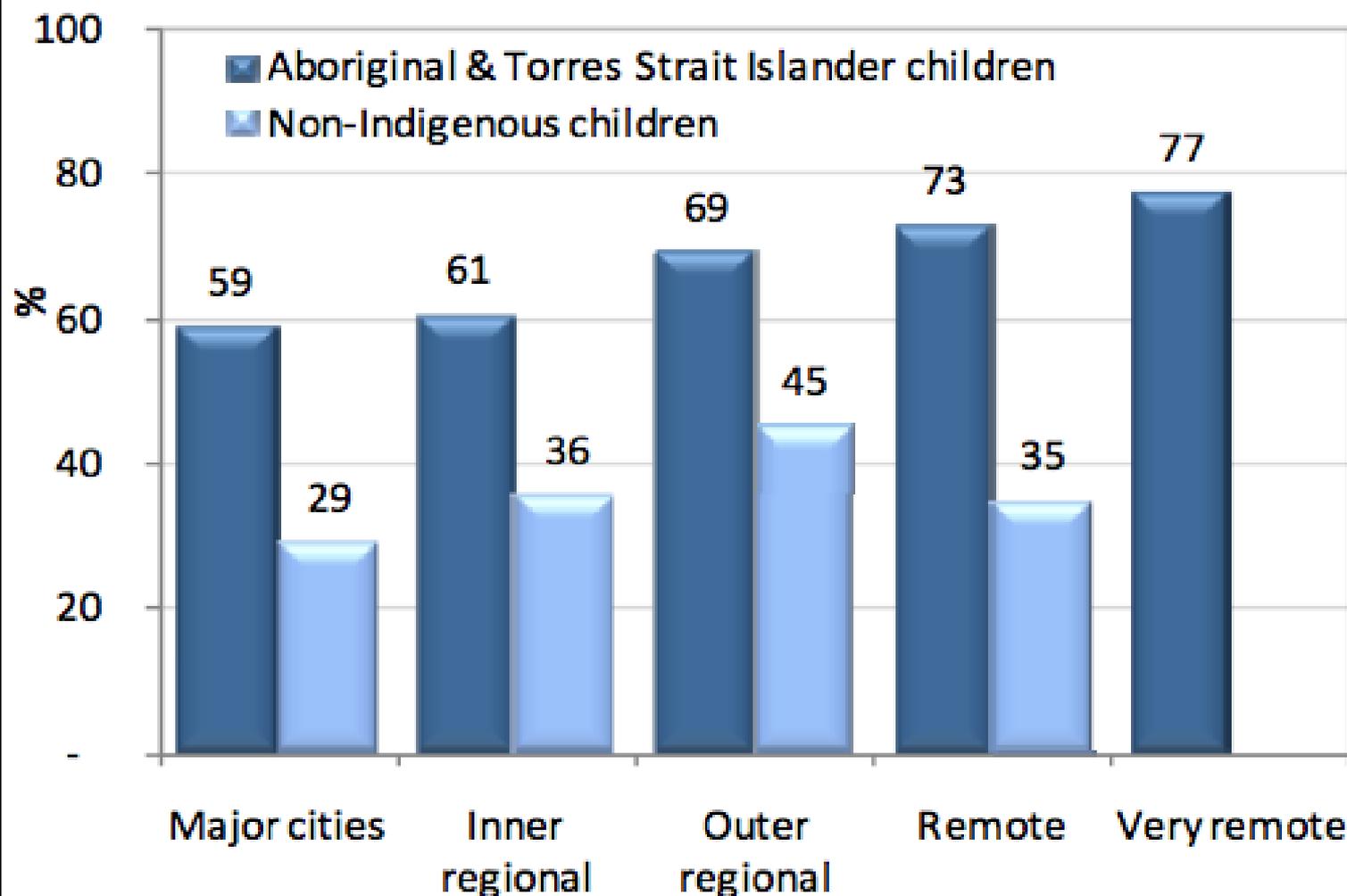
Notes

1. Children aged 0–14 years.
2. Indigenous figures exclude 5,658 children where smokers in household not stated.

Source: ABS and AIHW analysis of 2008 NATSISS and 2007–08 National Health Survey.

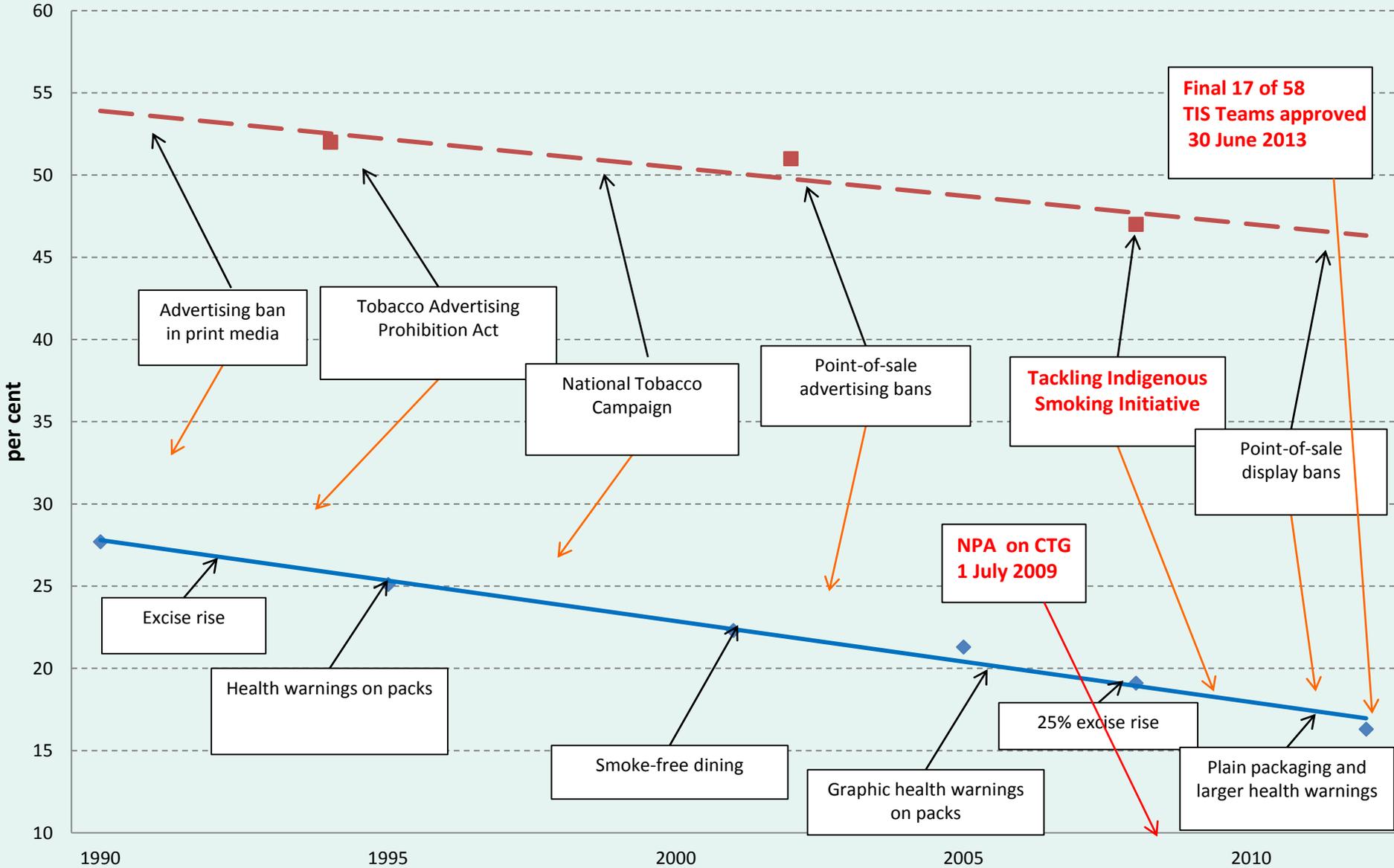
Figure 6.7: Children living in households with current smokers, by Indigenous status, 2008

Figure 74 – Children aged 0–14 years living with current daily smoker(s), by Indigenous status and remoteness, 2008 and 2007–08



Source: ABS and AIHW analysis of 2008 NATSISS and 2007–08 NHS

◆ ABS National Health Survey Data
 ■ National Aboriginal and Torres Strait Islander Social Survey Data



The ABS 2012-13 *National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)* 'First Results' will be released tomorrow – probably around 11.00 am. The survey has the largest sample size ever to assess Aboriginal and Torres Strait Islander health.

The focus of the survey is on long-term health conditions, health risk factors (such as smoking rates), selected social and emotional wellbeing indicators (stressors, psychological distress etc), health measurements and health-related actions.



CLOSING THE GAP
tackling
Indigenous
chronic
disease

Tackling
Indigenous
Smoking
component

- \$100.6 mil over 4 years plus marketing \$
- National coverage through 58 Teams
- National Coordinator, Tackling Indigenous Smoking
- Regional Tobacco Coordinators, Tobacco Action Workers and Healthy Lifestyle workforce of over 340
- Population health approach - community educators and facilitators not clinicians
- Regional Tackling Smoking Fund - \$110,000 pa
- Prevention, reduction and cessation
- Training existing workforce



Pangula Mannamurna Inc.

Aboriginal Community Controlled Health Service

is a smoke free site



Talk to your Aboriginal Health Worker **NOW** to begin your quitting journey.

Quitline 137848



**「GIVE UP SMOKES」
FOR GOOD**

Priority Target areas



Smoke free workplaces, homes, public areas and cars

“ educating those who don't smoke – especially young people – about the **benefits of not smoking**”

Nuff of the Puff!
Do it for your unborn child, give
your baby the best start in life.



**Make the right
decision for two,
not just you.**

**Quit
Smoking!**

Talk to your AHW, Midwife, Nurse or Doctor

quitting

- ▶ Addiction
- ▶ Change your thinking
- ▶ **Ways to quit**
- ▶ Relapse
- ▶ Helping others quit
- ▶ So You Think You Can Quit?

Ways to quit



6 Votes: Click to rate



There are many ways to quit smoking, and you need to find which one works best for you.

You can try one of these ways by itself, or a combination of ways. Or all of them.

You are much more likely to succeed if you get some help.

Before you quit, talk to a tobacco or health worker.

They'll help you to work out the best way for you.

[factsheet](#)

[Ways to quit](#)



How would you try and quit smoking?

- Patches
- Cold Turkey
- Hypnosis
- Gum
- Quitline

Other:

vote ✓

▶ View results

Docur



MEDICINES TO HELP ABORIGINAL AND
TORRES STRAIT ISLANDER PEOPLE STOP SMOKING:
A GUIDE FOR HEALTH WORKERS

Guides for health
professionals and
plain English
versions for
community
members

The Fact or Fiction game is being used across Australia and in a variety of different settings

- Schools
- Youth groups
- Work Place
- Community events
- Women's groups
- Men's Group's
- Shelters
- Custodial setting
- Universities
- Aboriginal Medical Services



What's part of the package?

- AHL – Smoke Free Policy
- NACCHO – Smoke Free policy
- CIETC – National Training – talking up good air
- SA Cancer – National Training
- QUIT line - enhancement
- Chronic disease self management – Flinders
- Healthy, Deadly & Strong Toolkit (Health Infonet)
- Rural Health Education Foundation
- Tobacco Technical Reference Group
 - training and development committee
 - evaluation committee

Where would you go for advice to quit?

- 49% of Aboriginal and Torres Strait Islander people would seek advice on quitting smoking from a GP
- 41% of Aboriginal and Torres Strait Islander people would ask a health professional at the local AMS for help to quit
- 18% of Aboriginal and Torres Strait Islander people would ring the Quitline for help to quit

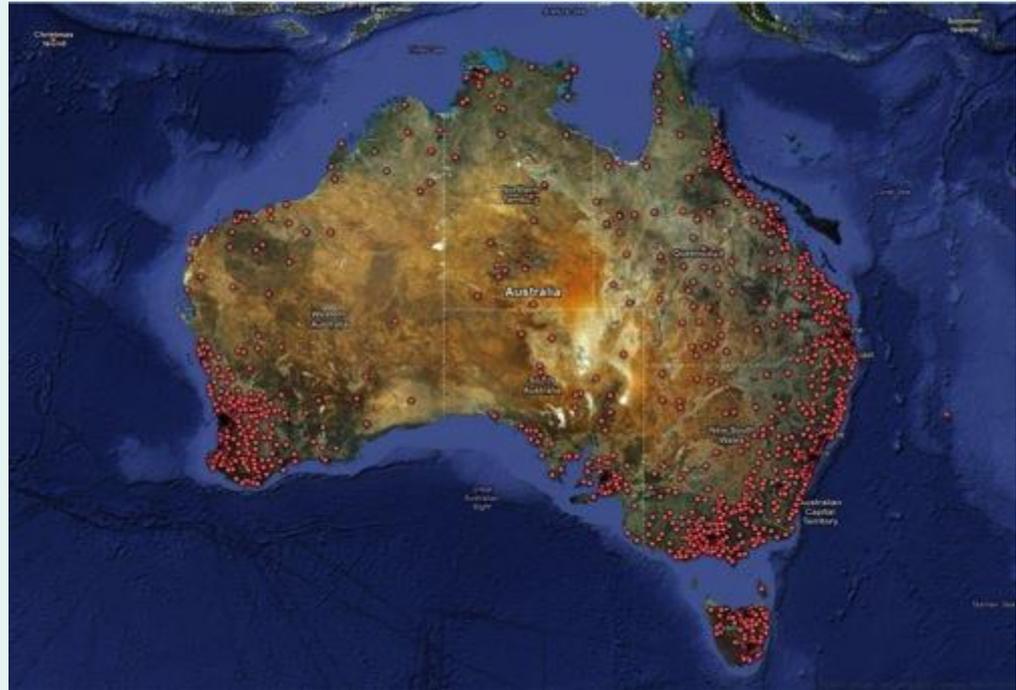
There is a will to be smoke free...

- 75% of survey participants cut down their tobacco use within the last 12 months
- 92% of participants would like to stop smoking
- 87.2% of Aboriginal and Torres Strait Islander smokers were planning on giving up
- The vast majority of smokers were planning on giving up. People want to quit, but social factors such as social networks, are influential in facilitating smoking.
- You can make the difference?

Rural Health Channel

The first dedicated free-to-air health channel nationally available across Australia

- Satellite TV, for those who can't get reliable terrestrial TV
- Convenient, widely available and free to access
- Gives a voice to rural and remote communities



The Rural Health Channel is accessible at over 600 medical centre 'sites' and in over 125,000 households across Australia



Rural Health Education Foundation

Browse by Subject

ALL PROGRAMS

Aboriginal and Torres Strait
Islander Peoples Health

Aged Care/Gerontology

Alcohol & Drug

Be Strong

Behavioural Disorders

Cardiovascular

Clinical Skills

Community Education

Continence

Critical Care / Emergency

Dermatology

Domestic Violence

Ear Health

Endocrine

Eye Health

Family Health

GP Lifestyles

Health Promotion

Infection Control /
Communicable Diseases

Management

Men's Health

Mental Health

Musculoskeletal

Neurology

Nursing

Obstetrics / Gynaecology

Oncology

Oral Health

Paediatrics / Child and
Adolescent Health

Palliative Care

Pharmacology

Renal

Respiratory

Rural Health

Women's Health

Workforce

🔍 Search Programs

GO

JUSTICE
REINVESTMENT
CAMPAIGN

for **Aboriginal** young people

A close-up photograph of a young Aboriginal child with dark hair, wearing a light blue shirt, looking off to the side. The child is holding a colorful ball with green, yellow, and purple segments. The background is blurred.

GIVE THEM A LIFE

NOT LIFE IN PRISON

<http://justicereinvestmentnow.net.au/>

**Policy Position
October 2012**



- Take action
- Find help
- About
- Donate
- Shop
- Events
- Programs
- Partners
- Resources
- Publications

Hey mate,
we can put
a stop to
violence against
women.



White Ribbon Australia news and events



Follow us



76,009
people have got your back.

Hey mate, here's what you can do.



The cold, hard facts

- One Australian woman is killed every week by a current or former partner
- One in three women over the age of 15 report physical or sexual violence at some time in their lives
- One in four young people have witnessed violence against their mother or step-mother
- Domestic and Family Violence - major cause of homelessness for women and their children

I swear

never to commit, excuse
or remain silent about
violence against women

this is my oath

Acknowledgement

CAEPR Indigenous Population Project 2011 Census Papers

Paper 14
Population Projections

Dr Nicholas Biddle
nicholas.biddle@anu.edu.au

Centre for Aboriginal
Economic Policy Research
Research School of
Social Sciences
ANU College of Arts and
Social Sciences