The Commissioner for Children and Young Western Australia (WA) undertook an Inquiry into the mental health and wellbeing of children and young people after hearing consistently from communities across the State about concerns for the mental health of children and young people, from infants to young adults.

The Report of the Inquiry into the mental health and wellbeing of children and young people in Western Australia was tabled in Parliament in May 2011.

This policy brief focuses on the mental health and wellbeing of Aboriginal children and young people.

In Western Australia, 5.8 per cent of children and young people are Aboriginal and the Aboriginal population is young: the proportion of children and young people in the Aboriginal population is almost double that of the proportion of children and young people in the non-Aboriginal population (40.7 per cent compared to 22.9 per cent). Aboriginal people experience a higher death rate than non-Aboriginal people and a lower life expectancy, thus creating an ‘accelerated’ life course that has implications for the health and wellbeing of Aboriginal children and young people.

The wellbeing gap between Aboriginal children and young people and non-Aboriginal children and young people is evident at every stage of their development. This is reflected in measures such as infant mortality rates, immunisation rates, overcrowded homes, preparedness for schooling, educational achievement, contact with the justice system and injury and hospitalisation.

In a 2005 study, 24 per cent of Aboriginal children aged four to 17 years were found to be at high risk of clinically significant emotional or behavioural difficulties. The Australian Research Alliance for Children and Youth’s 2008 Report Card ranked Australian Aboriginal young people (aged 15 to 24 years) 23rd of 24 countries in the area of mental health.

The Inquiry recognised that Aboriginal people have a holistic view of mental health, a view which incorporates the importance of connection to the land, culture, spirituality, ancestry, family and community.

What do children and young people say?

Despite the numerous challenges some Aboriginal children and young people face, their strong connections to culture, family, the land and spirituality contribute greatly to experiencing positive mental health.
"Family things are important as they give you good memories, role models, a safe home and support." girl 15

"I play sport, trying to keep in as much contact with my family as I can." young person

"Make your kids go to school so they can have a strong mind and a strong culture." girl 9

The most common concerns raised by Aboriginal children and young people related to family conflict, including domestic violence and feuding, substance abuse, involvement with the justice system and coping with suicide and loss. Many also reported that transient living arrangements had caused significant disruption to their lives, particularly at school.

"I had to grow up on my own – dad – don’t know where he was – moved around house to house; don’t know where mum is." young person

"Drugs, alcohol, burglaries, robberies because of the drugs." young person

"It is ridiculous, nannas are fighting with nannas and aunties with aunties." undisclosed

"Half of my family have passed away and we had to go, last week, my mum had to go to a funeral for her aunty and before that, a week ago, we had to go to a funeral for my aunty." young person

"[I just want to] get a good job and get my life on track and not be in here (detention)." young person

Despite significant challenges, Aboriginal children and young people showed resilience and determination to succeed and have a happy life.

"My family have all gone down the wrong path – I want to go a different way to them." young person

What were the Inquiry findings?

Key findings relating to Aboriginal children and young people include:

- For children and young people, mental health is profound in its importance – not only because it is the key to a rich enjoyment of childhood and adolescence, but also because it provides the foundation for a resilient and mentally healthy adulthood.

- The ongoing disadvantage faced by Aboriginal children and young people is significant and, among other things, is culminating in very poor mental health outcomes.

- The nature of unresolved trauma and the intergenerational effects in Aboriginal communities as a result of past policies is well documented. Children and young people exposed to such profound disadvantage and trauma will inevitably experience far greater risk factors to their mental health – thus compounding the cycle of disadvantage.

- Unfortunately, there remain very few mental health services that are culturally safe, appropriate and targeted specifically to the needs of Aboriginal children and young people.
• The Inquiry heard of ongoing challenges in recruitment of Aboriginal staff in the mental health sector. Ensuring Aboriginal workers are involved in mental health service delivery is an imperative aspect of improving the mental health of Aboriginal children and young people.

• Another challenge is accessing services in rural and remote parts of Western Australia, where 64 per cent of Aboriginal children live. The Inquiry heard that children in regional and remote areas experience limited mental health assessment, early intervention and treatment services, despite the often extremely high level of need.

• The majority of children and young people in contact with the youth justice system are Aboriginal and there is a dearth of mental health services available within this system. Many children and young people with mental illness could, with appropriate prevention, early intervention or treatment, be diverted from the criminal justice system.

• Aboriginal over-representation continues to be a significant issue for Western Australia’s out-of-home care system (as at 30 June 2011, 46 per cent of children and young people in out-of-home care were Aboriginal). Children in out-of-home care have a higher prevalence of mental health problems than in the general population of children and young people, including conduct disorder, anxiety, attention and social problems and depression.

• There is significant evidence that the early childhood years play a huge part in setting positive foundations for mental health later in life. The Inquiry made a number of recommendations to boost various health and mental health services for 0 to three year olds (and supports for their parents).

The Inquiry’s 54 recommendations are all relevant to Aboriginal children and young people and are presented as a ‘road map’ for short, medium and long-term action, assisting to guide priorities for children and young people’s mental health over the next 10 years. Some of the more specific recommendations with particular relevance to Aboriginal children and young people are:

**Recommendation 14:** Funding to the State’s Infant, Child, Adolescent and Youth Mental Health Service be increased so it is able to provide comprehensive early intervention and treatment services for children and young people across Western Australia, including meeting the needs of those with mild, moderate and severe mental illnesses.

**Recommendation 16:** A comprehensive mental health workforce strategy be developed by the Mental Health Commission in collaboration with the Commonwealth Government. This strategy to include cultural competency training and specific planning for the recruitment, training and retention of Aboriginal mental health professionals.

**Recommendation 17:** As part of the strategic and comprehensive plan for the mental health and wellbeing of children and young people across Western Australia, the Mental Health Commission identify the unique and specific requirements for:
- Aboriginal children and young people; and
- children and young people who are vulnerable or disadvantaged for any reason.

**Recommendation 18:** The allocation of funding from the Royalties for Regions program be considered for the provision of mental health services for children and young people living in regional and remote communities.

**Recommendation 29:** The number of community child health nurses be increased to provide a comprehensive, universal health service to parents and children across Western Australia.
What is being done?

Several developments relevant to the mental health of Aboriginal children and young people have occurred since the Inquiry.

- The Mental Health Commission has developed a 10-year strategic policy, *Mental Health 2020: Making it personal and everybody’s business* which makes the needs of Aboriginal people, families and communities “a key priority”.\(^\text{10}\) This policy also states that the engagement of vulnerable infants, children and their families during the formative early years is a high priority.\(^\text{11}\)

- The Mental Health Commission’s *Action Plan 2011-2012*, states that “better services to Aboriginal people” is a key goal as is supporting the mental health and wellbeing needs of infants, children and youth.\(^\text{12}\)

- In the 2012-13 State Budget, $58.5 million of new funding over four years for early childhood health care was announced. The funding will provide an additional 100 child health nurses and a major expansion of community child health services across WA. It is hoped that Aboriginal children and their parents will benefit from these additional early childhood services.

- The State Government has launched an ‘Enhanced Aboriginal Child Health Schedule’ which expands upon the Universal Child Health Contact Schedule, offering up to 15 contacts with a Child Health Nurse or Aboriginal Health Worker, from pregnancy to five years of age.\(^\text{13}\)

- The State Government has also taken steps to address the lack of mental health services available for children and young people in the justice system by funding a mental health team at the Perth Children’s Court to provide assessments, referrals and treatment.\(^\text{14}\)

- In December 2007 and March 2008 the Council of Australian Governments (COAG) announced six targets under the Closing the Gap strategy, which aims to reduce Aboriginal disadvantage.\(^\text{15}\) The ambitious targets of the strategy are critical if any progress is to be made on addressing the pervasive disadvantage faced by Aboriginal people. For children and young people particularly, the targets set important goals to help give them a better start in life. They also have the potential to impact positively on the mental health of Aboriginal children and young people.

- As part of the COAG commitment, in 2012-13, under the Indigenous Early Childhood Development National Partnership Agreement, $3.8 million of Commonwealth funding will be allocated for the delivery of Western Australian Health programs in Aboriginal pre-pregnancy, antenatal, sexual and reproductive health, and $2.2 million of State funding will be allocated for Aboriginal maternal and child health strategies.\(^\text{16}\)

- Again, as a part of the COAG Closing the Gap commitment, the State Government has committed just over $22 million to establish a State-wide Specialist Aboriginal Mental Health Service (SSAMHS) that aims to improve access to culturally appropriate mental health services for Aboriginal people and their families. The SSAMHS is not exclusive to children and young people but will include them in the service delivery (including offering services to Bentley Adolescent Unit).\(^\text{17}\)

- In June 2012, the Federal Department of Health and Ageing launched a national consultation process to inform the development of a National Aboriginal and Torres Strait Islander Suicide Prevention Strategy. This will involve a series of community forums in each jurisdiction.\(^\text{18}\)
• The State Government is also rolling out a statewide ‘One Life’ suicide prevention strategy with many regional and remote communities in the process of developing Community Action Plans.  

• The WA Perinatal Mental Health Unit (WAPMHU) has evaluated its Carnarvon Aboriginal Perinatal Mental Health Project – ‘Healthy Parents, Healthy Minds’ – which provides an Indigenous perinatal mental health service for Carnarvon and the surrounding districts. The evaluation showed the service had been effective in building a solid foundation of trust with young Aboriginal mothers and providing them with valuable support. This service has received ongoing funds.

• The WAPMHU also continues to undertake health promotion strategies to raise awareness of perinatal mental health issues among Aboriginal people to encourage early identification and treatment.

What more needs to be done?

• In addition to the need for universal services and programs that reduce risk factors and promote protective factors for mental health (such as early childhood services), the evidence points to the need to have strategies in place across the life of an Aboriginal child that are culturally appropriate, culturally secure and relevant.

• The development of a strategic and comprehensive mental health plan for all children and young people in WA that includes targeted mental health promotion, prevention and early intervention programs to address the mental health needs of Aboriginal children and young people is required.

• Any such mental health plan should explore how community healing can be encouraged in order to address the cycle of intergenerational disadvantage that is being perpetuated. Evidence from Canada points to cultural continuity as protective against youth suicide in Aboriginal communities, so cultural determinants must be addressed as part of a broader mental health plan.

• A comprehensive approach to addressing the developmental needs of Aboriginal children and young people is required. Learning and developmental delays that are left undiagnosed and/or untreated can lead to disengagement from school and the community and, in many cases, can lead to involvement with the justice system. “Mental health problems are just some of several possible negative outcomes for children and young people where key developmental tasks are delayed or problematic.”

• An ongoing commitment to the ‘Closing the Gap’ targets and to addressing the ongoing disadvantage of Aboriginal people is necessary to mitigate against key risk factors for mental health problems. The social determinants present in many Aboriginal communities which cause additional stressors or risk factors for Aboriginal children, such as entrenched poverty, crowded housing and high levels of preventable morbidity, must be tackled as a matter of urgency.

• There is a need for greater focus on working with pregnant Aboriginal women to address mental health concerns, but also health issues such as drug and alcohol use which have a demonstrated link to the mental health and wellbeing of the child as well as other health issues such as Foetal Alcohol Spectrum Disorder.
• For those Aboriginal children and young people who live in regional and remote parts of Western Australia, there remains a need for greater investment in mental health services to these areas.

• The high numbers of Aboriginal children and young people coming into contact with the justice system and the out-of-home care system requires urgent action. These systems are collecting young people but are not necessarily well equipped to then provide the required mental health and wellbeing supports the young people need.

• The Commissioner for Children and Young People has released a publication Building Blocks: Best practice programs that improve the wellbeing of children and young people which describes a number of programs for Aboriginal children and young people that have been evaluated as being successful. Attention and resources should be focused on programs such as these where evidence supports their activities and outcomes.

• Any programs developed for Aboriginal children and young people must consider the child in the broader context of their family, and provide support for family members wherever possible.

Other relevant information

Commissioner for Children and Young People WA

• The following publications are available on the Commissioner for Children and Young People’s website at www.ccyp.wa.gov.au
  o Report of the Inquiry into the mental health and wellbeing of children and young people in Western Australia
  o Speaking out about mental health: The views of Western Australian children and young people
  o Wellbeing Monitoring Framework publications

Mental Health Commission, Western Australia

• The Mental Health Commission’s strategic policy Mental Health 2020: Making it personal and everybody’s business and the Action Plan 2011-2012 are available at www.mentalhealth.wa.gov.au

Telethon Institute for Child Health Research – Aboriginal health

• The website of this program includes a link to the book Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice developed by the Australian Council for Educational Research and the Kulunga Research Network and TICHR with funding through the Office for Aboriginal and Torres Strait Islander Health, Commonwealth Government Department of Health and Ageing http://aboriginal.childhealthresearch.org.au/

Australian Government Department of Families, Housing, Community Services and Indigenous Affairs

• FaHCSIA is the lead Government agency on ‘Closing the Gap’ initiatives www.fahcsia.gov.au/our-responsibilities/indigenous-australians/overview
The Royal Australian and New Zealand College of Psychiatrists

- Prevention and Early Intervention of Mental Illness in Infants, Children and Adolescents: Planning strategies for Australia and New Zealand and The cost effectiveness of prevention and early intervention of mental illness in infants, children and adolescents is available at www.ranzcp.org

Social Inclusion

- This website outlines the Federal government’s principles and policies regarding social inclusion www.socialinclusion.gov.au/