THE HEALTH OF ABORIGINAL CHILDREN AND YOUNG PEOPLE

KULLARI (BROOME) ATSIC REGION



SUMMARY OF FINDINGS FROM VOLUME ONE THE WESTERN AUSTRALIAN ABORIGINAL CHILD HEALTH SURVEY This booklet summarises information on the Broome ATSIC region from the first volume of the Western Australian Aboriginal Child Health Survey: The Health of Aboriginal Children and Young People.

About the survey

The survey was conducted by the Telethon Institute for Child Health Research (The Institute) in conjunction with the Kulunga Research Network. Information was collected on almost 5,300 Aboriginal and Torres Strait Islander children and young people. The survey also collected information on the carers and other relatives living in these homes and went into some of the schools of these children and young people to interview the school teachers and principals.

The survey was carried out to identify the developmental and environmental factors that help Aboriginal and Torres Strait Islander children and young people develop well and survive.

Aims of the survey

The aims of the survey were to estimate the prevalence and functional impact of:

- Chronic medical conditions and disabilities
- Mental health and behavioural problems in children and youth
- Adverse health behaviours (eg smoking, alcohol, drug and volatile substance misuse)
- Early school leaving, conduct problems and juvenile offending
- Resiliency and competence in children and young people
- Home-community-school influences on development.

What information was collected?

Information was collected from a wide range of issues and included:

- Physical health and disabilities
- Risk behaviours (smoking, alcohol and other drug use)
- Housing
- Family and culture
- Employment and education

How was the survey done?

The survey was done in three parts. Over 130 people were trained to collect data and information out in the field. Approximately 60% of these people were Aboriginal. The three components of the WA Aboriginal Child Health Survey were:

- 1. Household Survey information collected on more than 11,000 family members from 2,000 families across WA.
- 2. Youth Survey separate youth survey for 12-17 year olds.
- 3. Schools Survey information collected from some of the schools attended by Aboriginal children who were selected for the survey (including information from teachers and principals).



Analysis

One of the important aspects of the survey was the ability to link the collected information to several key administrative data sets including the WA Hospitals Database and the Maternal and Child Health Research Database (MCHRDB). The WA Hospitals Database details when and why a person is admitted to a hospital and the MCHRDB has birth records of all children born in WA since 1980.

Consultation

All phases of the survey, including its development, design and implementation, were under the direction of the Western Australian Aboriginal Child Health Steering Committee. The Steering Committee comprises of senior Aboriginal officers from a cross section of agencies and settings, and has the on-going responsibility to control and maintain:

- The cultural integrity of the survey methods and processes
- Employment opportunities for Aboriginal people
- Data access issues and communication of the findings to the Aboriginal and general community, and
- Appropriate and respectful relations within the study team, with participants and communities, with stakeholders and funding agencies and with the governments of the day.

Why Broome ATSIC Region Data?

For reasons of confidentiality of individuals and families the information provided in this profile can only be given at Broome ATSIC regional level.

Unless otherwise stated, all data in this publication refers to the Broome ATSIC Region.

About the Broome ATSIC region

The Broome ATSIC Region extends from Bidyadanga in the south to One Arm Point in the north.

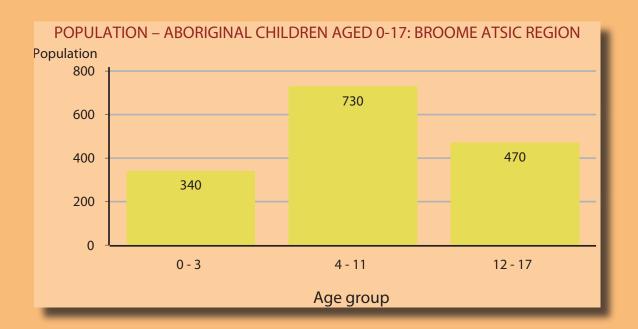
Broome is the only major town in the region. There are several larger Aboriginal communities in the region. These include Bidyadanga, Beagle Bay, Lombadina/ Djarindjin, and One Arm Point. Some of the smaller communities in the region include Frazier Downs, Carnot Springs, Ngamakoon and Mudnunn.



Population

At the end of June 2001 there were about 66,000 Aboriginal people living in Western Australia. This works out to be 3.5% of the total population of WA. Nearly half (45%) of the total number of Aboriginal people in WA was under the age of 18 (representing 6% of the WA general population for 0-17 year olds).

In the Broome ATSIC region there were about 1,540 Aboriginal children aged 0-17 years, which means 5% of Aboriginal children and young people lived in the Broome ATSIC region.



Level of Relative Isolation

The method we have used to describe the remoteness and physical isolation of where Aboriginal people live in WA is called the "Level of Relative Isolation", or LORI for short - a new version of ARIA (Accessibility/Remoteness Index of Australia).

This groups people into five separate categories of isolation within WA:

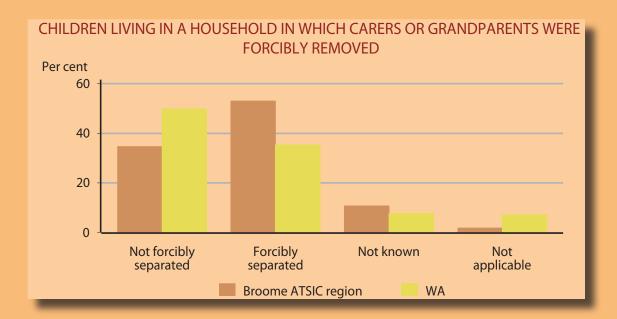
- None (e.g Perth Metropolitan area)
- Low (e.g Geraldton)
- Moderate (Fitzroy Crossing)
- High (Bayulu)
- Extreme (Iminji)

Family and culture

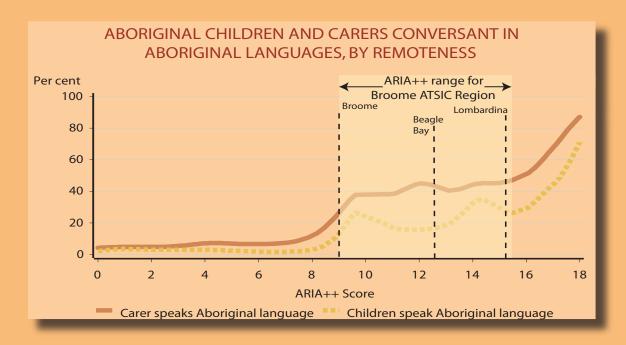
Type of child carers Around 95% of the main carers for Aboriginal children and young people in the Broome ATSIC region were Aboriginal (85% for the whole of WA). 80% of these children were still being looked after by their natural mother

in the Broome ATSIC region compared with 80% in WA overall.

Forced removal of carers or grandparents A total of 53% of children in the Broome ATSIC region were living in a home where one or more carers or grandparents were taken away from their family. 10% of carers said that they were forcibly removed from their natural family and 11% of carers were forcibly removed from traditional lands.

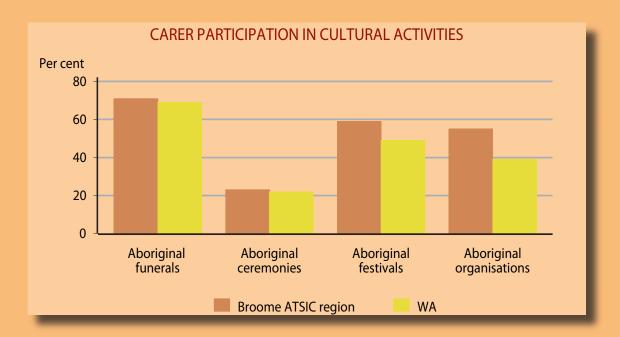


Aboriginal language spoken In the Broome ATSIC region 21% of carers said that they spoke an Aboriginal language and 8% of carers said that their children could also speak an Aboriginal language. This was lower than the WA average where overall 23% of carers can speak an Aboriginal language, and 13% said that their children can speak an Aboriginal language.



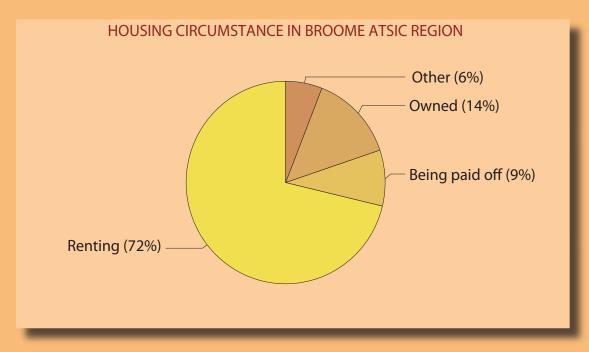


Cultural activities of carers Participation in Aboriginal cultural activities in the Broome ATSIC region was higher than the average for the whole of WA. For example, 71% of all carers in the Broome ATSIC region said that they had attended an Aboriginal funeral compared with 69% for the whole of WA.



Housing Ownership

In the Broome ATSIC region, 14% of families said that they owned their own homes, 9% were paying off their home and 72% were renting. The total amount of families renting in WA is about the same at 71%. A higher number of families are paying off their home (16%) while only 7% of families overall own their own home.





Children at birth

Maternal age In the Broome ATSIC region about 25% of Aboriginal children were born to mothers aged 19 years or less. This compares with 28% of Aboriginal children in WA.

Prematurity About 10% of all Aboriginal children in the Broome ATSIC region were premature (less than 37 weeks gestation). In WA, 13% of Aboriginal children were premature.

Breastfeeding Almost half (48%) of children in the Broome ATSIC region were breastfed for more than 12 months by their birth mothers, compared to 35% for WA. Only 4% of children were breastfed for less than three months, compared to 27% for WA.

Drug use during pregnancy Certain drugs taken during pregnancy can contribute to low birth weights and can effect the growth and development of babies.

In the Broome ATSIC region, 58% of mothers smoked tobacco during pregnancy and 23% drank alcohol during pregnancy. In total the mothers of 49% of children had used tobacco during pregnancy in WA.

Smoking during pregnancy reduces the average birthweight of babies by 200 grams and can endanger the health of the baby.

Mean birth weight The average birth weight for babies in the Broome ATSIC region was 3,120 grams. 11% of babies born in the Broome ATSIC region were of low birth weight (less than 2,500 grams), this equalled with the state with 11% of Aboriginal babies in all of WA.





Physical health

Recurring infections There are a large number of children with multiple infections. On average, 15% of Aboriginal children aged 0-17 years in the Broome ATSIC region were reported by their carers to have recurring ear infections, 6% were reported to have recurring chest infections, and 6% were reported to have recurring skin infections.

Asthma prevalence The prevalence of asthma in the Broome ATSIC region was 17% for Aboriginal children aged 0-17 years. Asthma was found to be almost 3 times less likely in the Broome ATSIC region (17%) than in the Perth ATSIC region (30%).



Acute Otitis Media

Ear Health In the Broome ATSIC region, 11% of Aboriginal children suffered from runny ears (also known as Otitis Media). 11% of Aboriginal children suffered from runny ears in the Perth ATSIC region. In WA, 13% of Aboriginal children were reported to suffer recurring ear infections with at least one instance of runny ears.

Diet Four indicators of dietary quality were assessed:

- drinking sufficient fresh water
- drinking sufficient fresh milk
- eating enough vegetables, and
- eating enough fresh fruit

In the Broome ATSIC region, 77% of children met at least three of these criteria (compared with 59% in WA overall). The consumption of vegetables in the Broome ATSIC region was considerably good, with 61% of children in the region meeting this criterion compared with only 36% of WA children who met this criterion.

Teeth problems In the Broome ATSIC region, 21% of Aboriginal children had a tooth filling compared to 27% of Aboriginal children in WA. 9% of children in the Broome ATSIC region had to have teeth removed because their teeth were bad, equalling 9% for all Aboriginal children for WA.

Use of Services

Doctor In the Broome ATSIC region, 56% of Aboriginal children had seen a Doctor in the last six months, compared to 49% for WA.

Nurse 20% of Aboriginal children in the Broome ATSIC region had seen a Nurse in the last six months, whereas 25% of Aboriginal children seeing a Nurse within the last six months for WA.

Aboriginal Health Worker 17% of Aboriginal children in the Broome ATSIC region were more likely to have seen an Aboriginal Health Worker in the last six months, compared to 15% for WA.



Aboriginal Medical Service 32% of Aboriginal children in the Broome ATSIC region had gone to an Aboriginal Medical Service, compared to only 15% for the whole state.

The following tables are a summary of the data presented in this document. It provides an overview of all the statistical information relevant for the Broome ATSIC region and Western Australia.

General	Broome ATSIC	Western Australia
	region	
Population of Aboriginal children aged 0-	1,540	29,800
17		
0 – 3 years	(340) 22%	(6,910) 23%
4 – 11 years	(730) 47%	(13,800) 46%
12 – 17 years	(470) 31%	(9,100) 31%
Type of care arrangements for child		
Both original parents	43%	47%
Sole parent	38%	33%
One original parent + new partner	7%	7%
Aunts / Uncles	10%	6%
Grandparents	4%	4%
Other	1%	3%
Children whose primary carer is Aboriginal	95%	85%
Children whose primary carer is birth	900/	2007
mother of the child	80%	80%
Aboriginal language spoken – conversational level		
Carers	21%	23%
Children	8%	13%
Participation in cultural activities in last	0 70	15 /0
12 months		
Aboriginal funerals	71%	69%
Aboriginal ceremonies	23%	22%
Aboriginal festivals or carnivals	59%	49%
Aboriginal organisations	55%	39%
Forced separation and forced relocation		
of carers		
Forcibly separated from natural family	10%	12%
Forcibly removed from traditional	11%	6%
lands		
Children affected by forcible removal of		
carer of grandparents		
Children living in household where		
one or more carers or grandparents	F20/	350/
forcibly separated from natural family	53%	35%
Children living in household where		
one or more carers or grandparents	2.40/	340/
forcibly removed from traditional lands	24%	24%
Housing tenure		
Owned	14%	7%
Being Paid off	9%	16%
Rented	72%	71%
Other	6%	6%



Children at birth	Broome ATSIC	Western Australia
	region	
Mean birth weight (grams)	3,120 grams	3,170 grams
Low birth weight babies (<2500	11%	11%
grams)		
Prematurity (births < 37 weeks	10%	13%
gestation)		
Children born to teenage mothers		
Mother under 20 years	25%	28%
Mother under 18 years	14%	13%
Mother under 16 years	3%	3%
Breastfeeding		
- 12 months or more (duration)	48%	35%
- Less than 3 months (duration)	4%	27%
Drug use during pregnancy		
Used tobacco	58%	49%
Smoked cigarettes	58%	46%
Chewed tobacco	0%	3%
Alcohol	23%	23%
Gunjah	11%	9%

Health of children	Broome ATSIC	Western Australia
	region	
Asthma	17%	23%
Indicators of poor diet		
Usually drinks water when thirsty	72%	68%
Regularly drinks unsweetened milk	95%	93%
Eats sufficient fresh vegetables	61%	36%
Eats sufficient fresh fruit	80%	70%
Overall diet meets at least 3 of the		
quality indicators	77%	59%
Teeth problems		
Fillings	21%	27%
Teeth removed	9%	9%
Vision problems	9%	8%
Hearing problems	8%	7%
Recurring infections		
Recurring ear infections	15%	18%
Recurring chest infections	6%	12%
Recurring skin infections	6%	8%
Recurring gastrointestinal		
infections	7%	6%
Otitis Media (recurring ear		
infections with at least one	11%	13%
instance of runny ears)		
i i		

Use of services		Western Australia
	region	
Children using the following health		
services in the last six months:		
Doctor	56%	49%
Dentist	34%	21%
Nurse	20%	25%
Aboriginal Health Worker	17%	15%
Hospital emergency department or		
outpatients clinic	7%	13%
Aboriginal Medical Service	32%	15%

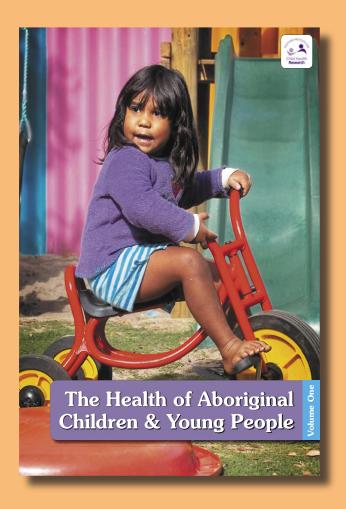


Further Information

How to obtain a copy of the main report

A copy of the report The Health of Aboriginal Children and Young People can be purchased for \$60 (plus postage & handling) from the Telethon Institute for Child Health Research on 08 9489 7777.

A PDF version of the main publication can also be downloaded from our website: www.ichr.uwa.edu.au



Further information

If you would like further information about the Western Australian Aboriginal Child Health Survey, please call our information line on 08 9489 7777 or email: waachs@ichr.uwa.edu.au









The Western Australian Aboriginal Child Health Survey was made possible by funding from:

Healthway Lotterywest

Lotterywest

West Australian Department of Education and Training

West Australian Department of Health

West Australian Disability Services Commission

West Australian Department for Community Development

West Australian Drug Strategy

Rio Tinto Aboriginal Foundation

Australian Government Department of Education, Science and Training

Australian Government Department of Health and Ageing

(Coordinated through the Office for Aboriginal and Torres Strait Islander Health)

Australian Government Department of Attorney General

Australian Government Department of Family and Community Services