
Social Justice Report 2005

HEALTH FACT SHEET ONE:

The health status of Aboriginal and Torres Strait Islander peoples¹



Life expectation

Over 1996–2001, there was an estimated difference of approximately 17 years between Aboriginal and Torres Strait Islander and non-Indigenous life expectation.²

Life expectancy at birth for Aboriginal and Torres Strait Islander Australians was estimated to be 59.4 years for males and 64.8 years for females, compared with 76.6 years for all males and 82.0 years for all females for the period 1998–2000.³

Death age and rate

Over 1999–2003, in Queensland, South Australia, Western Australia and the Northern Territory, 75% of Aboriginal and Torres Strait Islander males and 65% of females died before the age of 65 years compared to 26% of males and 16% of females in the non-Indigenous population.⁴

For all age groups below 65 years, the age-specific death rates for Aboriginal and Torres Strait Islander Australians were at least twice those experienced by the non-Indigenous population.⁵

Infant and child health

In 2000–02, babies with an Aboriginal and Torres Strait Islander mother were twice as likely to be low birthweight babies (those weighing less than 2,500 grams at birth) as babies with a non-Indigenous mother.⁶

In 1999–2003, the infant mortality rate for Aboriginal and Torres Strait Islander infants was three times that of non-Indigenous infants.⁷

Chronic diseases

In 1999–2003, 2 of the 3 leading causes of death for Aboriginal and Torres Strait Islander people in Queensland, South Australia, Western Australia and the Northern Territory were chronic diseases of the circulatory system and cancer.⁸

Hospitalisation for ischaemic heart disease for Aboriginal and Torres Strait Islander males was double the rate, and for Aboriginal and Torres Strait Islander females four times the rate, than for the general population. Hospitalisations for hypertensive disease were also substantially higher.⁹

Communicable diseases

In 2003, notification rates among Aboriginal and Torres Strait Islander Australians for the majority of communicable diseases were higher than among other Australians. Rates of

¹ This information is a *summary* of the key trends in Indigenous health status. For more detail about particular indicators see: Aboriginal and Torres Strait Islander Social Justice Commissioner, *A statistical overview of Aboriginal and Torres Strait Islander peoples in Australia*, available online at: www.humanrights.gov.au/social_justice/statistics/index.html. See also Australian Institute of Health and Welfare and Australian Bureau of Statistics, *op.cit.*

² Australian Institute of Health and Welfare and Australian Bureau of Statistics, *op.cit.*, p148.

³ *ibid.*

⁴ *ibid.*

⁵ *ibid.*, p151.

⁶ *ibid.*, p79.

⁷ *ibid.*, p150.

⁸ *ibid.*, p152.

⁹ *ibid.*, p101.

chlamydia, gonococcal infection and syphilis infection among Aboriginal and Torres Strait Islander people were up to 93 times the rates among other Australians. Rates of bacteriological intestinal disease and tuberculosis are also significantly higher.¹⁰

The Western Australian Aboriginal Child Health Survey reported that 18% of Aboriginal children had a recurring ear infection, 12% had a recurring chest infection, 9% had a recurring skin infection and 6% had a recurring gastrointestinal infection.

Oral health

In 2003-04 there were approximately 2,000 hospitalisations of Aboriginal and Torres Strait Islander people for diseases of the oral cavity, salivary glands and jaw. The majority of these hospitalisations were for dental caries (54%), followed by diseases of the pulp and periapical tissues (16%) and embedded and impacted teeth (9%). The Child Dental Health Survey in 2001, in New South Wales, South Australia and the Northern Territory reported that Aboriginal and Torres Strait Islander children aged 4-10 years had higher rates of decayed, missing or filled baby (deciduous) and adult (permanent) teeth than for non-Indigenous children; the difference being particularly high among those aged less than seven years.¹¹

Mental health

In 2003-04, Aboriginal and Torres Strait Islanders were up to twice as likely to be hospitalised for psychological and behavioural disorders as other Australians. Hospitalisation rates for assault or self-harm may also be indicative of mental illness and distress. In 2003-04 Aboriginal and Torres Strait Islander males were 7 times more likely, and females 31 times as likely as for males and females in the general population; hospitalisation rates for self-harm was twice as high.¹²

Disability

In 2002, just over one third of Aboriginal and Torres Strait Islander people aged 15 years or older reported a disability or long term health problem in the National Aboriginal and Torres Strait Islander Social Survey,¹³ spread relatively evenly over remote and non-remote areas.¹⁴ Overall, 7 % of respondents reported an intellectual disability; 23.6% a physical disability and 13.7% a disability in relation to hearing, speech or sight (with many respondents reported more than one type of disability).¹⁵

¹⁰ Australian Institute of Health and Welfare and Australian Bureau of Statistics, *op.cit.*, p120-121, Table 7.34.

¹¹ Australian Institute of Health and Welfare and Australian Bureau of Statistics, *op.cit.*, p127.

¹² *ibid.*, p131.

¹³ Australian Bureau of Statistics, *National Aboriginal and Torres Strait Islander Social Survey*, ABS cat.no. 4714.0, Commonwealth of Australia, Canberra, 2004, pp7-8.

¹⁴ *ibid.*, p41, Table 13.

¹⁵ *ibid.*