The Critical State of Indigenous Australian Children’s Health and Well-Being in 2020

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In seeking to understand the experiential ground in which the post-colonial Indigenous and non-Indigenous literatures of Australia are rooted, I have, over the last twenty years, explored a multitude of heterogenous non-literary texts. These comprise such documents as official government reports, newspaper articles, statistical research papers, books and scholarly articles in a number of diverse fields, including historiography, anthropology, psychology, medicine, sociology and linguistics. It is the archive assembled from these many different data sources that I draw on here to discuss: 1. The circumstances behind the extraordinary overrepresentation of Indigenous children currently detained in Australia’s carceral institutions and 2. The particularly insalubrious conditions to which these children are condemned today as a result of the COVID-19 pandemic.

Growing up surrounded by the social and psychological pathologies that colonization unfailingly trails in its wake, Indigenous Australian children witness daily the suffering of an adult population ravaged by entrenched poverty, inadequate housing, high-unemployment, mental health problems, high morbidity, familial violence, elevated early mortality and suicide rates, and widespread addiction to alcohol and drugs (Rowley 1970; Stanner 1979; Lavarch 1997; Sizer and Smeerdijk 2017). The chances of these children enjoying the health and well-being typical of their non-Indigenous counterparts are, thus, from the outset, exceedingly slim.

Two Prevalent Post-Colonial Health Problems of Consequence

One of the numerous dramatic consequences of alcohol abuse that has plagued Indigenous Australian communities since colonization is the incidence of Fetal Alcohol Spectrum Disorder (FASD) among Indigenous children. One hundred times more likely to suffer from this incurable yet preventable condition than non-Indigenous children (Hayes et al. 2014), young Indigenous victims of the syndrome’s neurodevelopmental fallout are subject to “intellectual disability, cognitive impairment, learning difficulties, speech and language delay, behavioral and emotional problems” (367). Another health issue experienced by Indigenous Australian communities and closely tied to colonization is that of Otitis Media (OM). Believed to flourish in circumstances of poverty, malnutrition and overcrowded and unsanitary living conditions, OM is a disease, that is frequently associated with low-income countries. Yet, in Australia, a nation declared in 2018 to have the largest median wealth per adult (Research Institute 2018), Indigenous children “experience some of the highest rates [of OM] in the world” (DeLacey et al. 2020, 1). Since the psychosocial consequences of both FASD and OM include difficulties with attention, communication, behavior, relationships and low self-esteem (Hogan et al. 2014, 2), both conditions typically give rise to behavioral problems that psychologists see as determinants of the victims’ drift into petty criminality (Sizer and Smeerdijk 2017; Bower et al. 2018; Cunneen 2017).
The structural racism that underlies Australia’s penal system (Sizer and Smeerdijk, 22—25) subsequently compounds the suffering of children who are affected by OM and FASD by adding experiences of imprisonment to the stress and existential confusion of their already vulnerable state. The United Nation Convention on the Rights of the Child has vocalized “longstanding criticism of the low age of criminal responsibility in Australia” (Cunneen 2017, 4), and conditions of imprisonment (e.g., isolation, constant surveillance, physical restraints) come with high potential for traumatizing or re-traumatizing children (Turner 2020). Yet, despite these documented human right concerns, Australia continues to imprison unconscionable numbers of Indigenous youngsters from 10 years old upwards. In addition to the “traumatising and criminalising” (Turner 2020) experiences many of them undergo in detention, young Indigenous detainees often suffer from “[l]ack of access to education, employment, health and adequate housing” (Sizer and Smeerdijk 2017, 42).

**Juvenile Detention**

Incontrovertible evidence of incarcerated children’s persecution while in detention was presented in an explosive documentary, aired on Australian TV in 2016, showing young Aboriginal inmates of Don Dale (a notorious juvenile detention center in Australia’s Northern Territory) being routinely subjected to degrading and damaging treatment. Obese prison guards were filmed hitting, verbally abusing, sitting on, throwing around, and teargassing the slight and cowering figures of Indigenous youth. Children as young as 13 were further punished by long periods in solitary confinement. Footage of Dylan Voller, a docile Indigenous youth of fifteen, shackled to a restraining chair, his head covered Abu-Ghraib style with a spit-hood, sent shock waves of outrage and protest around Australia.

The Royal Commission (2017, 1—10) subsequently appointed to investigate the detention of Indigenous children in the Northern Territory found that:

- Conditions at Don Dale were “not fit for accommodating, let alone rehabilitating, children and young people.”
- The “health, safety and wellbeing” of young inmates were put at “serious risk” by “inadequate facilities.”
- Young detainees were frequently “subjected to verbal abuse and racist remarks,” held in isolation “for extended periods,” denied “access to basic human needs,” and “offered bribes to carry out degrading, humiliating and/or harmful acts [including] acts of physical violence] on each other.”
- Physical force was routinely used by guards who often held children in chokeholds or threw them forcefully to the ground.
- Children subjected to the policy (preferred by senior executives, management and staff) of “breaking” rather than “rehabilitating” them were thought to suffer “lasting psychological damage.”

Despite the Commission’s findings, the nationwide, automatic imprisonment of disadvantaged Aboriginal children for petty theft and public disorder offences continues uninterrupted. In 2019, the Australian Institute of Health and Welfare reported that “Young Indigenous Australians aged 10–17 were 21 times as likely as young non-Indigenous Australians to be in detention on an average night” (2019, 2). Furthermore, although constituting only 6 percent of the Australian population aged 10 to 17, these detainees accounted for approximately 57
percent of youths in detention over a recent four-year period (Australian Institute of Health and Welfare 2019, 11).

**COVID-19 and its Consequences**

As one report observed this year:

> Youth prisons are hot spots for the transmission of COVID-19. Like cruise ships or nursing homes, they are closed, crowded environments where large numbers of people touch the same surfaces, share facilities and cannot physically distance from one another. Once the virus enters a youth prison, it risks spreading like wildfire. (Trevitt 2020, 7)

As this quote illustrates, the already distressing situation in which young Indigenous detainees find themselves has now considerably worsened due to the threat of COVID-19. Having pre-existing “high rates of chronic illness, respiratory conditions and disability,” Indigenous children are “particularly susceptible to the worst effects of COVID-19” (Trevitt 2020, 14). Moreover, new restrictions imposed by Australia’s carceral institutions in response to the current pandemic have also seriously aggravated the vulnerable psychological health of imprisoned children. New restrictive measures include increased use of separation/isolation within correctional facilities as well as forced quarantine of incoming prisoners and reduced access to programs, education, family, and family and legal visits. (Trevitt 2020, 10). Finally, one further worrying development in light of the Don Dale scandal, is the prison authorities’ decision to suspend “independent oversight bodies and external scrutiny in many states and territories” due to COVID-19 (Trevitt 2020, 11).

**Conclusion**

Given the rapidly growing volume of research demonstrating that maintenance of close links with their traditional land, language and culture are essential to the health and well-being of First Peoples (Chandler and Lalonde 1998; Biddle and Swee 2012; Wakefield and Hudley 2007; Wexler 2009); sentencing Indigenous children to time in Juvenile Detention Centres constitutes a danger to both their current and future life. Detention cannot, therefore, be considered an appropriate response to the petty crimes for which most Indigenous children are taken to court. Keeping them incarcerated in the deleterious ambiance of current pandemic imprisonment conditions is arguably nothing less than a flagrant breach of International Human Rights legislation (Royal Commission and Board of Enquiry 2017).

**References**


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