

Australian Government Department of Health
c/o Institute for Global Health
Adelaide SA 5000

Email: InjuryStrategy@georgeinstitute.org.au

17th June 2020

Att: Team

Re: National Injury Prevention Strategy 2020-2030

As the South Australian Commissioner for Children and Young People my mandate under the *Children and Young People (Oversight and Advocacy Bodies) Act 2016* is to advocate for the rights, interests and wellbeing of all children and young people in South Australia. My work is guided by the United Nations Convention on the Rights of the Child (CRC).

Since I was appointed as the inaugural South Australian Commissioner for Children and Young People I have spoken to thousands of children about the issues that affect their lives. In relation to health issues they have raised a number of concerns, including:

- the lack of access to health services and social and educational services that keep children safe;
- lack of ongoing education, especially in relation to respectful relationships, sexual education and the prevention of violence; and
- their lack of voice when strategies and policies are designed to “improve” their lives, which often result in little or no improvement.

The National Injury Prevention Strategy (the Strategy) appears to implement some concrete actions ensuring a decrease in injuries. However, the Plan – in relation to children – appears to have overlooked a few objectives, which will be articulated in the recommendations made below.

The draft strategy plan is strong as it is based on the current evidence and it appears that objectives have been based on research. However, despite recognising that more data is needed in some areas, it is disappointing that there is no action to collect that information at a systemic level, only an action to seek the “opinion of relevant experts”. I would suggest that children themselves should be considered relevant experts.

Yours sincerely,



Helen Connolly
Commissioner for Children and Young People

The Rights of Children and Young People

The Strategy should ensure that it protects, respects and gives effect to the rights of children and young people. Under the CRC children and young people have a right to:

- Have their best interests considered (Article 3)
- Develop healthily and live a full life (Article 6)
- Live in a clean environment (Article 24) free from the dangers and risks that environmental pollution poses, including from climate change.
- Relax, play and participate in community culture (Article 31).

Children also have a right to be heard and considered in matters that affect them (Article 12) and there appears to be little consideration of the voices of children in the development of this strategy. This is particularly important as children's voices are often dismissed and policy and decision are exclusively considered. It is important that the Strategy recognises and gives effect to children's rights.

Currently, the objectives as detailed give little room for children to be part of the solution. Many of the actions talk about "doing things" to children through adult agencies, but not working with children. There also appears to be a distinct lack of educational objectives for children, so they become more aware about injury prevention. Much of the education outlined within the objectives is about making adults more aware about injuries and injury prevention in relation to children, but not about educating children about injuries in a sustained way that is built-in throughout their school years.

The high rates of suicides for 10-14 year olds

The information and evidence that informs the actions of this strategy reveals the extent of evidence for this age group. The fact that the ages were further broken down shows that there is an understanding that there are great changes in the development of children over the first 14 years.

It is noted, however, that one action is not being considered for those 10-14 year olds, whose injuries are different than those below 10. Of concern to this office is the fact that this age group's highest incident of injury is actually suicide and self-harm, closer to the pattern of injuries of those in the 15-24 age group. This is not surprising, given the developmental and psychosocial changes at this age. To fill this gap, it is recommended that "objectives 1 and 2' be included in 0-14 age group, consistent with the higher age group.

Not addressing family and domestic violence for the 15-24 year old age group

Evidence suggests that young women between 18 and 34 years are 2.7 times more likely than women aged 35 or older to have experienced intimate partner violence in the 12 months prior to 2016. What is more concerning is that "there are also indications that an increasing number of girls aged 15-17 and young women are victims of violence perpetrated by their partners."¹ Despite these worrying figures objectives 10 and 11, that address intimate and domestic violence, are not included within this age group.

¹ Australian Human Rights Commission, Children's Rights Reports 2019, accessed at https://humanrights.gov.au/our-work/childrens-rights/publications/childrens-rights-report-2019?_ga=2.177163239.334850281.1591737433-2039623520.1565144501

This oversight also runs counter to the issues that this age group have told me they want to be educated and empowered in. Currently this office is working with a group of young people who are asking the state government to implement a more comprehensive and compulsory sexual health, wellbeing and relationship education program in schools. This program would include information on respectful relationships, understanding violence and what a healthy sexual relationship is. At this point in time, schools can choose what part of the sexual education curriculum they can teach. For some schools, this means they can choose to teach nothing at all. A strong respectful relationships curriculum will satisfy Objective 10 as it will instil generational change and the reduction of intimate and family violence.

Not being given age appropriate sex and relationships education can also result in young people overreliance on pornography to learn about sexual relations. Some pornography is neither age appropriate, or realistic, especially pornography that condones violence or dehumanises women. In one Australian study among 16 and 17-year-olds, 73% of boys watched an X-rated video, with one in twenty watching them on a weekly basis, while more than a fifth watch an X-rated video at least once a month². This office has also heard from stakeholders about injuries sustained by young people believing they can do what is on pornography sites.

As Australian researchers' state:

“Exposure to pornography helps to sustain young people’s adherence to sexist and unhealthy notion of sex and relationships. And, especially among boys and young men who are frequent consumers of pornography, including of more violent materials, consumption intensifies attitudes supportive of sexual coercion and increases the likelihood of perpetrating assault. While children and young people are sexual beings and deserve age-appropriate materials on sex and sexuality, pornography is a poor, and indeed dangerous sex educator.”³

² Australian Council on Children and the Media, Senate Standing Committee on Environment and Communications: Environment and Communications Reference Committee on *Harm being done to Australian Children through Access to Pornography on the Internet*, March 2016 at page 5

³ Ibid at 6.