

Current policy context: child mortality

Working towards closing the gap in child health is a shared responsibility requiring collaboration between individuals, communities, Aboriginal and Torres Strait Islander organisations and all levels of government. Across the Australian Government Health and Ageing portfolio, funding of almost \$1 billion has been allocated in the 2009-10 Budget for health programs specific to Aboriginal and Torres Strait Islander peoples. These recent investments equate to a 57% increase in the Indigenous health funding since the 2007-08 Budget. Funding is provided to 255 Aboriginal and Torres Strait Islander health care services, including services that provide care for mothers and young children. A number of these services have developed specific mothers and babies program such as the ‘Strong Women Strong Babies Strong Culture’ program and ‘Congress Alukura Women’s Health Program.’

The Council of Australian Governments (COAG) has committed to closing the gap in child health.

The [National Partnership on Closing the Gap in Indigenous Health Outcomes](#) and the [National Partnership Agreement on Indigenous Early Childhood Development](#) provide a framework for Commonwealth and State/Territory maternal and child health activities. Examples of current programs include:

- [New Directions Mothers and Babies Services](#)
- [Healthy for Life](#)
- [The Australian Nurse Family Partnership](#)

Indigenous Early Childhood Development National Partnership

The Indigenous Early Childhood Development National Partnership was signed by First Ministers at the COAG meeting of 2 October 2008 and revised on 2 July 2009.

The Indigenous Early Childhood Development National Partnership (IECD NP) agreement comprises \$564 million of joint funding over six years to address the needs of Indigenous children in their early years. The IECD NP is based on evidence that halving the gap in Indigenous child mortality requires better access to antenatal care, teenage sexual and reproductive health services, child and maternal health services and integrated early childhood development and family support services.

The NP has three priority areas:

- Integration of early childhood services through Children and Family Centres: Commonwealth investment of \$292.6 million over six years from 1 January to states and territories to establish 35 Children and Family Centres in targeted urban, regional and remote areas with high Indigenous populations and disadvantage.
- Increased access to antenatal care, pre-pregnancy and teenage sexual and reproductive health: Commonwealth investment of \$107 million over five years to the States and Territories to: improve access to, and use of, antenatal care by young Indigenous mothers; support young Indigenous women to make informed decisions about their sexual and reproductive health; and drive improved data collection and reporting by states and territories on outcomes for Indigenous children.
- Increased access to, and use of, maternal and child health services by Indigenous families - joint investment: Builds on existing Commonwealth election commitment of \$90.3 million for *New Directions: An Equal Start in Life for Indigenous Children* (new mothers' and babies' services) and includes complementary state/territory investment of \$75 million.

New Directions Mothers and Babies Services Program

The New Directions Mothers and Babies Services Program targets regions of high need across Australia and is part of the Government's 2007 election commitment *New Directions: An Equal Start to Life for Indigenous Children*. The program is also the Commonwealth's contribution to the National Partnership Agreement on Indigenous Early Childhood Development. The program provides funding to primary health care organisations to deliver increased access for Indigenous families to antenatal and postnatal care; information about baby care; practical advice and assistance with parenting, breastfeeding and nutrition; monitoring of developmental milestones, immunisation and chronic disease; and health checks and treatment for Indigenous children before starting school. To date 51 services have been approved for funding, 30 are operational and the remaining are being established or negotiating funding agreements.

Healthy for Life

Healthy for Life commenced in 2005-06 as a budget measure offering \$102.4m over 4 years and has since been made an ongoing program. *Healthy for Life* uses a population health approach and quality improvement model to enhance the capacity of primary health care services to improve the quality of Aboriginal and Torres Strait Islander child and maternal health services, men's health and chronic disease care. The program also has a focus on increasing participation in the Indigenous health workforce. There are currently 101 primary health care services funded across 58 sites, many of which are Aboriginal Community Controlled services.

Australian Nurse-Family Partnership Program

Australia has established an international collaboration with Professor David Olds, and the Centre for Family and Child Health Research, at the University of Colorado to undertake a small-scale implementation of the US Nurse-Family Partnership model of home visiting in Australia. \$37.4m over four years was provided in the 2007-08 Budget to adapt and implement the Australian Nurse-Family Partnership Program. The Program will be implemented in up to seven sites in Australia by 2011. To date, five sites have been selected and three have commenced home-visiting, the remaining two are being established.