

Children and Young People's Health and Rights

Policy Position Statement

Key messages:	<p>Australian children and young people aged 0 to 24 have the right to be meaningfully supported to achieve optimal health and wellbeing.</p> <p>Prevention and early intervention strategies must be strengths-based, culturally safe and embedded both within and across health and wellbeing sectors and all levels of government.</p> <p>Children and young people should be supported through genuine engagement in policy, research, program development and resources that affect their lives.</p>
Key policy positions:	<ol style="list-style-type: none">1. Governments have a responsibility to uphold children and young people's rights, wellbeing and safety, taking into account the social, cultural, commercial, digital and ecological determinants of health, herein considered collectively as the lens through which all positions are framed, and to support families and communities to thrive.2. A public health model and child rights approach should guide the promotion of children and young people's wellbeing, including prevention of harm, ensuring that individuals receive appropriate, safe and effective support as required and recognising their agency as active citizens;3. A culture of participatory service development and policymaking, that enables children and young people to meaningfully influence decisions, should be built within and between Australian jurisdictions.
Audience:	Federal, State and Territory Governments, policymakers and program managers, PHAA members, media.
Responsibility:	PHAA Child and Youth Health Special Interest Group
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PHAA affirms the following principles:

Rights and legal commitments

1. Australia is a signatory to the United Nation's (UN) Convention on the Rights of the Child.⁽¹⁾ By adopting this legal framework, the Australian Government has committed to protect the rights of children and young people 0 to 18 years, so they can live safe, respected, happy and fulfilled lives.
2. All levels of government in Australia have the responsibility to promote the wellbeing and safety, and mitigate the risks of poverty, inequality, and discrimination for children and young people.
3. Young adults aged 18 to 24 should be supported and empowered during this formative stage, given their ongoing brain development and vulnerability transitioning from school, parental and system-based support, while requiring environments that support and recognise their evolving capacities and developmental needs.⁽²⁾

Participation and agency

4. Children should be recognised as agents in their own lives who are entitled to participate in decisions about them and about matters that affect them. Children and young people's voices need to be heard, respected and responded to at all levels of decision-making.^(3,4)
5. Co-design and participatory approaches can engage children and young people meaningfully and actively in policy, research, program and resource development (using co-design, participatory approaches and engaging with children and young people as co-researchers across the policy, research, program and resource development cycle).⁽⁵⁾
6. Safeguarding their mental health and wellbeing during co-design and participation is essential.^(6,7)

Holistic and inclusive practice

7. Decisions and actions affecting children should be child-centred, child-inclusive and view children and young people holistically within the context of their families, communities and cultures.⁽⁸⁾
8. A holistic and intersectional public health model and child rights approach should guide the promotion of children and young people's wellbeing and prevention from harm and ensure they receive appropriate, safe and effective support as required.⁽⁹⁾
9. Protecting the cultural, self-determination and identity rights of Aboriginal and Torres Strait Islander children and young people requires governments to act in a way that recognises these rights.⁽¹⁰⁾
10. Policies, research, programs and resources development should embed inclusive principles that uphold the rights of children and young people of diverse genders, sexualities, and sex characteristics, applying an intersectional lens throughout.

PHAA notes the following evidence:

Health Inequities and marginalisation

11. Some groups of children and young people are impacted by systemic marginalisation that affect their health and wellbeing; support should be prioritised for these groups. Marginalised groups include young

people who are Aboriginal and Torres Strait Islander, culturally and linguistically diverse (including refugee and asylum seeker families), with disability, neurodiversity, identify as lesbian, gay, bisexual, transgender, intersex, queer/questioning, asexual and others (LGBTQIA+),⁽¹¹⁾ in contact with the child protection and/or the criminal justice systems, experiencing homelessness, young parents, children born into poverty, experiencing socioeconomic disadvantage, and those living in rural and remote communities.⁽¹²⁾

12. Greater exposure to marginalisation is associated with poorer health status in young people. Using an intersectional lens can be useful in understanding the unique experiences of young people with different identities.⁽¹³⁾ Their knowledge should be appropriately recognised and can challenge deficit-focused narratives and stigma.

Aboriginal and Torres Strait Islander children and young people

13. Due to policy failures and the ongoing structural violence of settler-colonialism, Aboriginal and Torres Strait Islander children are significantly overrepresented in the child protection and juvenile justice systems.^(14,15) Significant gaps remain in ensuring meaningful responses to family violence within Aboriginal and⁽¹⁶⁾ Torres Strait Islander communities, including the need to improve cultural safety in mainstream organisations, and the secure funding of legal and support services for Aboriginal women.⁽¹⁷⁾

Youth justice and systemic risk

14. Nearly three quarters (74%) of young people in juvenile detention are unsentenced,⁽¹⁸⁾ and many will not receive a judicial sentence.⁽¹⁹⁾ Unnecessary contact with the juvenile justice system impacts their long-term health outcomes.⁽²⁰⁾

Access to health and support services

15. Children, young people and their families experience challenges accessing health services and navigating health systems.⁽²¹⁾ In addition, socially or culturally marginalised people face additional challenges in navigating health systems, contributing to health inequities.
16. Access to timely, affordable and appropriate health care is a major social determinant of health.⁽²²⁾ Services that are youth-friendly, respectful and non-judgmental, and where young people can be actively and meaningfully involved in making decisions about their health and wellbeing increase access and engagement.⁽²³⁾

Violence, Abuse and Out-of-Home Care

17. The most common reasons children are placed on care and protection orders and subsequently placed in out-of-home care is due to familial abuse or neglect.⁽²⁴⁾ Children's diverse experiences of domestic and family violence are also a source of significant harm, including through lack of integration between child protection and domestic violence service systems.⁽²⁵⁾
18. Children in out-of-home care are among Australia's most vulnerable children. Significant concerns remain that children continue to experience physical, emotional and/or sexual abuse while their basic needs are not met.⁽²⁶⁾
19. Women and girls with disability are at far greater risk of violence, particularly sexual violence, than the general population.⁽²⁷⁾
20. Children, young people and adults with disability or innate variations of sex characteristics remain subjected to unnecessary elective medical interventions in Australia (such as forced sterilisation) that are understood to be human rights abuses.^(28,29)

Early childhood development

21. Early intervention, especially in early childhood, is the most cost-effective means of breaking cycles of intergenerational disadvantage and trauma and improving long-term health and wellbeing outcomes.⁽³⁰⁾ Access to quality Early Childhood Education and Care (ECEC) for young children is beneficial for development and allows parents/carers to access employment opportunities.
22. There are limited ECEC places in regional, rural and remote locations,⁽³¹⁾ and mainstream ECEC services can be perceived as financially inaccessible, culturally unsafe or otherwise inappropriate by marginalised families, leading to reduced participation.^(32,33)

Climate change and mental health

23. Children and young people have increased vulnerability to the mental health impacts of climate change, which is a key concern voiced by young people.⁽³⁴⁾ They represent a cohort that is likely to disproportionately suffer the direct and indirect health impacts caused by climate disruption.⁽³⁵⁾

Global Commitments

24. Implementing the actions outlined in this policy would contribute towards the achievement of UN Sustainable Development Goal 3 – [Good Health and Wellbeing](#).

PHAA seeks the following actions:

25. The Commonwealth, state and territory governments should:

Uphold and implement children's rights

- Work to achieve the highest level of implementation of the Convention on the Rights of the Child, including comprehensively incorporating the Convention into Australian law and policy.
- Take a systematic approach to achieve the goals of the Convention on the Rights of the Child and commit to strengthen implementation efforts to address the UN Committee on the Rights of the Child's recommendations in Australia and recommendations made by other UN Committees, Special Rapporteurs and member states about children's rights in Australia.
- Establish clear accountability arrangements to monitor and report on its progress in responding to recommendations made by the UN Committee on the Rights of the Child and others, including adequately resourcing Australian civil society to play its role in these arrangements.
- Prioritise preventive health by reducing children and young people's exposure to harmful commodities, including unhealthy food and beverages, vaping products, gambling, tobacco and alcohol, through regulation, marketing restrictions and public health education.

Ensure inclusion and participation

- Ensure that all children's and young people's interests are equitably represented in activities. Principles of social inclusion, intersectionality and a rights-based approach should guide the authentic engagement of marginalised groups.
- Support mechanisms to build a culture of meaningful child participation and child rights-based service development and policy making. For example, there should be increased participatory strategies created for children and young people to have engagement across the policy, research, program and resource development cycle for relevant public issues.

Address inequity and discrimination

- Address inequity and discrimination facing children and young people in Australia, particularly in

healthcare, police and justice, education and welfare systems.

- Address structural issues facing Aboriginal and Torres Strait Islander children and young people through a focus on self-determination, value for Aboriginal culture and support for children and young people to grow up strong in their identity.
- Reduce over-representation of Aboriginal and Torres Strait Islander children in out-of-home care through applying the Aboriginal and Torres Strait Islander Child Placement Principle.⁽³⁶⁾
- Provide holistic support for children, young people and families, especially marginalised and vulnerable groups, to protect them from violence, prevent children from being removed from families and address their unique recovery needs where they do experience violence.

Reform the youth justice system

- Decrease the proportion of young people in unsentenced detention by increasing police diversionary programs and promoting alternative actions such as community service.
- Reduce disproportionate incarceration of Aboriginal and Torres Strait Islander children and young people by investing resources into communities, reorienting and diverting the criminal justice system to community-led development programs. Providing avenues to hear and respond to the voices of Aboriginal and Torres Strait Islander young people.⁽³⁷⁾
- Commit to providing national leadership for all jurisdictions to raise the minimum age of criminal responsibility to at least 14 years of age and providing programs and support to work with vulnerable children and families between 10 and 13 years of age through appropriate health, education and human service programs.

Improve health equity and health service access

- Ensure equity of access to health services at primary, secondary and tertiary levels, including digital health settings, with special attention to young people experiencing marginalisation.
- Provide accessible and holistic health services, including preventive health care, particularly in mental health and sexual health, and non-traditional services to reach marginalised groups.
- Ensure access to healthcare and wellbeing support for young people in juvenile justice facilities at a level at least equivalent to that offered by community health services.
- Provide greater investment in preventing poor mental health via early intervention and addressing the underlying causes of increasing rates of mental distress in young people.

Strengthen education and wellbeing systems

- Ensure adequate funding for service systems and raise the rate of income supports for children and young people and their families to protect and promote children's rights.
- Ensure that free, quality ECEC is available to all children regardless of location.
- Health literacy, sexuality, relationships and consent education are included in children and young people's education.

Protect from violence and harm

- Prohibit physical and psychological punishments in all settings, including home, alternative care settings, ECEC, schools and prisons.
- End detention of children who are seeking asylum. Ensure support for refugee, migrant children and young people to access healthcare and other supports.

PHAA resolves to:

26. Advocate for the above steps to be taken based on the principles in this position statement and actively ensure that future updates of this position statement meaningfully involve children and young people in the development.

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