

Submission

No 87

INQUIRY INTO CHILDREN AND YOUNG PEOPLE 9-14 YEARS IN NSW

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SUBMISSION TO
THE PARLIAMENTARY
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CHILDREN AND YOUNG PEOPLE

INQUIRY INTO
CHILDREN AND YOUNG PEOPLE
9 -14 YEARS

NSW GOVERNMENT

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INTRODUCTION

The ages of 9 to 14 are a time of change and transition. From an institutional perspective, this is a period in which children move from primary school to high school, but many other changes are occurring.

It is a time of physical changes, beginning with puberty, where healthy living patterns are important and unhealthy lifestyles can begin to emerge. The associated experimentation and exploration can involve risk behaviours, whilst decision making skills and personal responsibility are still developing.

Personal identity is beginning to take shape at this time, along with moral, ethical and emotional development. Central to social development are the competing goals of independence on the one hand, and peer acceptance on the other.

Whilst these numerous changes are occurring inside the minds and bodies of young people, making these changes positive depends to a significant degree on the world around them - the right balance of support, stimulation and guidance.

The NSW State Plan, released in November 2006 after an extensive public consultation process, has identified several priorities that have some relevance to the target age group:

- ***F4 Embedding the principle of early intervention into Government Service Delivery***
- ***S3 Improved health through reduced obesity, smoking, illicit drug use and risk drinking***
- ***S4 Increasing levels of attainment for all students***
- ***F7 Reduced rates of child abuse and neglect***
- ***E8 More people using parks, sporting and recreation facilities and participating in the arts and cultural activity***
- ***R4 Increased participation and integration in community activities***
- ***R3 Reduced levels of anti social behaviour***

Recent actions taken by the Government under the State Plan priorities are published online at: <http://www.nsw.gov.au/stateplan/>

The Government's commitment to services for children and young people, and those who care for them, is substantial and spans numerous portfolio areas.

Many of the programs identified in this submission apply broadly to children or young people. While some are specialised, programs need not be specifically targeted at only the 9 -14 age group to effectively address their needs.

Schooling is compulsory during the middle years. As a result, the Department of Education and Training has the most frequent and sustained contact with the target group of all Government agencies. The Department has developed a rich array of resources to enhance educational outcomes and resilience of students in years 5-9, and strengthen transitions between primary and secondary schooling. (See: <http://www.curriculumsupport.education.nsw.gov.au/middleyears/resources/index.htm>).

Released in October 2006, *Our Middle Years Learners - Engaged, Resilient, Successful: An Education Strategy for Years 5-9 in NSW 2006-2009* is an important strategy for the target age group with the goals of: reaching higher, growing towards independence and strengthening connections.

It is acknowledged that substantial Government investment requires a sound evidence base and several Departments are active in commissioning research and program evaluations. For example, the Department of Community Services has published a literature review on *Early Intervention Strategies for Children 8-14 years* (http://www.community.nsw.gov.au/DOCS/STANDARD/PC_101581.html).

The Government recognises the benefits of early intervention, including with the target group. For example, under the umbrella of “Live Life Well”, NSW Health has implemented programs to promote nutrition and physical activity amongst children and young people.

Strategic planning will impact on the target population, now and as they age. In April 2008, the Government released *Towards 2030 - Planning for our changing population* (<http://www.dadhc.nsw.gov.au/dadhc/towards2030.htm>). A priority under that document is to increase workforce participation, including through flexible work and retention strategies. As we approach 2030, the relatively low rate of workforce participation of women of child bearing age (25 to 44 years) is expected to improve, but the demand for labour should drive more family friendly work practices and this will have implications for the care of children and young people.

The Submission

This submission to the Parliamentary Joint Standing Committee on Children and Young People has been prepared by the Department of Premier and Cabinet on behalf of the NSW Government. It is based on contributions provided from:

- Department of Education & Training
- Department of Health
- Department of Community Services
- Housing NSW
- Ministry of Police
- Attorney General's Department
- Department of Arts, Sport & Recreation
- Ministry of Transport
- Department of Ageing, Disability & Home Care

Part 1 focuses on the needs of children in the target age group and how they vary. Part 2 outlines the programs in place across various portfolio areas relevant to children in the age group.

PART 1

CHILDREN 9 – 14: THEIR NEEDS

Children and young people aged 9 to 14 are in the midst of a profound transition from childhood to adolescence. Such a transition involves significant physical, cognitive, social and emotional changes.

Major developmental issues include coming to terms with puberty and a growing need to form and assert identity, gain acceptance and support from peers and secure personal relationships.

Education

The middle years of schooling (Years 5-9) represent an important stage in educational, spanning the transition from primary to secondary schooling. Developing knowledge, experiencing positive relationships at school, being genuinely engaged in learning and developing high self-esteem have a major and lasting impact on each young person throughout this period.

During the middle years, students are moving from concrete to abstract thinking. They have an intense curiosity and a growing capacity for higher order analysis and reflection. They are also moving towards more rational decision making and better understanding of the consequences of behaviour. However, the younger members of the target group are still fairly concrete thinkers, less able to understand subtlety and they may have difficulty identifying how their immediate behaviour impacts on the future.

As students in the classroom they seek challenge and engagement. A hands-on approach is often preferred with the opportunity to have a say in what they learn, how they learn and how they will be assessed. They enjoy working cooperatively with peers yet also like working independently on individual research and projects. Middle years students are progressively developing the ability to manage their own learning.

Literacy and numeracy skills are a foundation for education. NSW students in the target age perform relatively well in these key areas, but as indicated in the State Plan, there are opportunities for improvement, particularly for lowest performing students, including Aboriginal students.

Children and young people in the middle years are active users of digital technologies – such as computers and mobile phones. This interest can be leveraged to improve educational and social outcomes.

Twenty-seven percent of students within NSW government schools are from culturally and linguistically diverse backgrounds, with this diversity varying greatly from school to school and region to region. Five percent of students are Aboriginal or Torres Strait Islander and 11% of total school population are learning English as a second language. Students are born in over 70 different countries, speak over 50 different languages at home, and come from the full range of socio-economic

backgrounds. Cantonese, Arabic and Vietnamese are the languages most often spoken by government school students. Dari, Hindi, Farsi and Dinka are newly emerging languages spoken by recently arrived students.

The needs of children from Aboriginal and other diverse backgrounds vary, but the ethnic diversity of the school population provides opportunities to stimulate bonding in friendship, class, year, team and school groups. Bridges are built when school communities engage in practices which encourage all students to belong and to participate.

Around 15,500 students aged 9 -14 years participate in educational services and programs for students with a confirmed disability. Around half of these are supported in regular or mainstream classes. The remainder attend Schools for Special Purposes (also known as special schools) or special classes in regular schools. The needs of these students are diverse. While students with similar disabilities may have broadly similar support needs associated with their disability, the level of that need and type of support needed to enable their access and participation in learning is as varied as the individuals themselves and changes with their progression through their schooling. However, in general terms, students with intellectual disability require support for learning that takes into account their cognitive ability. Students with physical and sensory disabilities may require a range of aids, equipment and building modifications to enable their access and participation in learning. Students with communication and language disorders and with mental health disorders may require support to manage behaviour which impacts on learning. Many students may have support needs across more than one of these areas.

When looking at educational needs, each young person's particular circumstances will combine in a unique way. The presence or absence of certain social factors will exacerbate, or ameliorate, any hardship. However, it is important to resist any temptation to craft "one size fits all" programs.

Health and well-being

The determinants of physical and mental health status, at the population level, comprise a range of psychosocial and environmental factors including income, employment, poverty, education and access to community resources (Baum 1998; Kawachi & Marmot, 1998; Yen & Syme, 1999), as well as demographic factors, most notably gender, age and ethnicity. Physical health and mental health are interdependent (Commonwealth Department of Health and Aged Care & AIHW, 1999), and the contribution and interplay of physical health to mental wellbeing and the effect of mental health on physical health must be considered (Mrazek & Haggerty, 1994).¹

Young people have specific health problems and developmental needs that differ from those of children or adults. For instance:

- The causes of ill-health in young people are often psychosocial rather than biological

¹ Page 11 Commonwealth Department of Health and Aged Care 2000, *Promotion, Prevention and Early Intervention for Mental Health - A Monograph*, Mental Health and Special Programs Branch, Commonwealth Department of Health and Aged care, Canberra.

- Young people may engage in health risk behaviours that reflect the adolescent developmental processes of experimentation and exploration
- Young people often lack awareness of the harm associated with risk behaviours, and the skills to protect themselves. Many health risk behaviors and lifestyles are established in adolescence and continue into adulthood leading to chronic health problems – e.g. tobacco use; poor dietary habits; alcohol use
- Young people lack knowledge about how and where to seek help for their health concerns
- Developmental difficulties and conditions related to pubertal growth commonly occur in adolescence.

From a recent review of the literature, the NSW Health has identified a set of key principles for the development of strategies and services to improve the health outcomes of children and young people. These principles promote a focus on:

- a health and well-being perspective
- enhancing protective factors and building resilience
- population health approaches, which focuses on outcomes, influencing the determinants of health, and strategies that have wide population coverage
- whole of government and community approaches where partnerships are fostered and responsibility is shared
- equity and social justice with commitment, effort and strategies (universal and targeted) weighted to address the needs of Aboriginal & Torres Strait Islander communities and other priority groups
- initiatives that are sustainable and have long term commitment; and
- age appropriate evidence based strategies, based on the best available evidence, and where the strategies adopted are designed to address multiple health issues and determinants and result in multiple outcomes.

Nutrition and Physical Activity Needs

The nutritional and physical activity needs of young people differ from those of adults because they are growing and developing. Healthy habits developed in middle childhood encourage healthy habits in adulthood and assist to reduce the risk of diseases such as cardiovascular diseases, and type 2 diabetes (Shilton, 2001).

Since parents / carers exert a large portion of control over their child's food intake and activity levels, a number of guidelines have been developed to assist in this decision making process.

- ***Nutrition:*** To provide guidance to the general population, including parents / carers, on healthy eating for young people aged birth to 18 years, the National Health and Medical Research Council (NHMRC) in 1995, reviewed in 2003, developed the Dietary Guidelines for Children and Adolescents (Commonwealth Department of Health and Ageing & NHMRC, 2005).
- ***Physical Activity:*** To provide guidance to the general population, the Department Health and Ageing (2004) developed physical activity recommendations for children and young people. The recommendations are intended to identify the minimum level of physical activity required for good

health in children and young people from 5-18 years of age. The recommendations are that:

- Children and young people should participate in at least 60 minutes (and up to several hours) of moderate- to vigorous-intensity physical activity every day.
- Children and young people should not spend more than 2 hours a day using electronic media for entertainment (eg computer games, Internet, TV), particularly during daylight hours.

Mental Health

It is estimated that mental disorders account for 22% of the total disease burden of developed countries (Andrews et al., 1999) and that mental disorders account for 55% of disease burden in young people (Mathers, Vos & Stevenson, 1999). The burden of mental health problems and mental disorders is clearly high and it is rising. It is estimated that depression alone will constitute one of the greatest health problems worldwide by 2020 (Murray & Lopez, 1996).

The *National Survey of Mental Health and Well-being* (Sawyer et al., 2000) surveyed 4,500 children and adolescents from households across Australia and found that 14% of Australian young people have mental health problems. For young people aged from 12 to 17 years, prevalence estimates have been shown to be as high as 20-25% (Zubrick, Silburn, Burton, & Blair, 2000). However, these prevalence estimates do not include many children and young people who are 'at risk' for poor outcomes. Of the children and adolescents identified with mental health problems in the National Survey of Mental Health and Well-being, only 25% had sought professional help. The survey also indicated that 70% of the clients attending school-based counselling services were experiencing *High or Very High* levels of emotional and behavioural problems.

As reported in several other large epidemiological studies (e.g., Costello et al., 2004), prevalence rates for having at least one anxiety disorder in childhood vary from 6-20%. Children and adolescents with anxiety disorders are at risk of developing other problems such depression and substance abuse. A prospective study found that anxiety and depressive disorders in adolescence predicted approximately a two- to three-fold increased risk in these disorders in adulthood (Pine et al., 1998). Anxiety and mood disorders disrupt the normal psychosocial development of the child and the sequelae of childhood anxiety disorders include social, family and academic impairments.

While there has been a decrease in recent years in the prevalence of alcohol use for 12 to 15 year olds in Australia, there has been a significant increase in harmful drinking within this age group with 21% of drinkers consuming harmful amounts (White & Hayman, 2006). One-third (34%) of 12 to 15 year olds reported drinking in the past month and 15% reported trying at least one illicit drug (White & Hayman, 2006).

In Australia, the prevalence of conduct disorder (CD) for children aged 6 to 17 is 3% and the prevalence of disruptive behaviour problems (including CD and Attention Deficit Hyperactivity Disorder [ADHD]) for children aged 4 to 17 is 12.9% (Sawyer et al., 2001). The majority of boys with CD also meet the diagnostic criteria for depression or ADHD (Sawyer et al., 2001). According to the NSW Bureau of Crime Statistics and Research (unpublished data), the number of 10 to 14 years old who

have been proceeded against by police for alleged assault in NSW has risen almost 50% from 1996. These data demonstrate that violence and conduct problems by children and young people in Australia are a significant problem for the community, families and the children and young people.

Early onset of mental health problems can also reduce educational and vocational attainments, which have ongoing consequences in adulthood (Kessler et al., 1995). Having a major mental health disorder at this time can cause serious immediate and ongoing problems, with substantial disruptive effects on identity formation and the establishment of adult roles (Raphael, 1986). Robust international and longitudinal studies, such as the *Dunedin Multidisciplinary Health and Development Study* and the *US National Co-morbidity Survey Replication*, have demonstrated that the onset of mental health problems was before the age of 15 years in half of all adults with mental disorders.

Child protection

The statutory framework for child protection in NSW recognises that children and young people need to receive such care and protection as is necessary for their safety, welfare and well-being in an environment that is free of violence and exploitation (see *Children and Young Persons (Care and Protection) Act 1998*).

The number of child protection notifications in Australia has more than doubled over recent years (Australian Institute of Health and Welfare, 2006). Children aged 6 to 11 years make up about a third (34%) of child protection reports in NSW (NSW Department of Community Services, 2006). It should be noted that there is currently a Special Commission of Inquiry into Child Protection Services in NSW chaired by the Hon Justice James Wood AO QC to determine what changes within the child protection system are required to cope with future levels of demand once the current reforms to that system are completed.

Other major issues facing children in this age group are domestic violence and neglect. In 2005/06 in NSW, domestic violence was the most common primary reported issue with one in four child protection reports (totalling 64,916) involving domestic violence. Neglect was the second most common reported issue, accounting for 14.8 per cent of all reports (totalling 32,018; with inadequate supervision for the child's age and inadequate shelter or homelessness being the main issues)². In addition to the increased risk of physical injury and harm, exposure to domestic violence has a range of longer-term mental health and social outcomes on children and young people such as delinquency, poor social skills and poor academic achievement.

Supportive Family Environment

The family environment is a primary source of influence on the wellbeing of a young person. In order to address young people's needs, parents / carers and the family's needs must also be supported. The most salient features of the family environment that impact on young people are the availability of social and economic resources.

² NSW Department of Community Services- Annual Statistical Report 2005-06

For full development, young people should be able to grow up in a family environment of happiness, love and understanding. Support needs to be provided to those within the young person's environment to ensure this occurs. Social resources such as good parenting / carer skills and education, positive intra-familial relations and positive role modelling from family members are important for early childhood development (Irwin, Siddiq & Hertzman, 2007).

Research has shown that parental health status and their behaviours can have a direct influence on the current and future lifestyle patterns of their child. For example:

- **Tobacco:** Young people with family members who smoke are more likely to take up smoking themselves (AIHW, 2005);
- **Healthy weight:** Parental obesity can increase the risk of adult obesity among their children (Whitaker et al. 1997);
- **Physical activity:** Young people may not be inclined to participate in physical activity if their parents are not modelling healthy lifestyle behaviours themselves (AIHW, 2005); and
- **Alcohol:** Parental monitoring, quality of the relationship between young people and their peers and parents / carers, and parental behaviours are all factors which impact on a young person's attitudes towards, and use of alcohol (Hayes, Smart, Toumbourou & Sanson, 2004).

Economic resources including family income, parental / carer occupational status and dwelling conditions are considered as the most powerful explanation for differences in young people's wellbeing across communities (Irwin et al., 2007).

As will be discussed further in Section 2, young people living in families without economic and housing security are at a greater risk of poor health outcomes both in the short and longer term. Having a low income can affect a young person's access to nutritional food and medical care, increases their risk of injury, impacts on their level of stress and anxiety, and impacts on the quality and stability of their care. Each factor increases their risk of poor physical and psychosocial health outcomes (Bradbury, 2003; Mayer, 2002).

Appropriate adult supervision, before and after school, is needed by children and young people in the target age range, though the nature and intensity of supervision changes as the child matures. As discussed above, parental workforce participation is expected to increase in response to the demand for labour arising out of demographic changes and this will impact on the arrangements for supervision of children and young people. Demand for before and after school care arrangements is expected to increase.

Housing

The neighbourhood and community environment, as well as the conditions of housing, impact greatly on the life expectations and experiences of children and young people. Housing stability and the conditions in which children live can have a life-long impact on their experiences as a consequence of such things as academic

achievement and mental health.³ A safe environment provides the much needed stability that assists young people to work through complex emotional and physical changes, and changing social needs that arise during their middle childhood.

Many children and young people live in safe and secure accommodation with family, friends and/or carers, whether in social housing or the private housing market. But for many others this is not part of their day to day reality.

The age group of 5 to 14 years represents the greatest proportion of residents of social housing in NSW (a little over 10% of all social housing residents).

Outside the home, neighbourhood and community factors assist a child's development in this age group. Access to facilities such as parks, sport, libraries, social and recreation venues are important, as is access to transport to reach these facilities, especially when developing independence. Less advantaged communities suffer from lower levels of access to this amenity.

Sport & Recreation

Participation in sport is a valuable experience for young people to help physical and social development. The benefits of physical activity in younger years on health later in life are well documented. The age group 9-14 is significant as it represents both the peak of sporting participation (in the 9-11 age groups) as well as the greatest drop in participation (between 12-14).

In 2006 in NSW 359,500 children aged 9 to 14 years participated in organised sport outside school hours with 184,400 children who did not participate at all in organised sport outside school hours. The definition of 'organised sport' does not cover both 'non-sporting' physical activity (such as dance) as well as activities not formally organised (such as bike riding or bushwalking).

56% of organised sport participant were male and 44% female. Over 80% of participants were participating more than 27 times a year. Participation peaks in the 9 to 11 year age group with 191,300 children participating and then declines considerably to only 168,200 children aged 12 to 14 year-old.

The main organised sports played in NSW in 2006 by 9 to 14 year olds were

1. soccer (outdoor) - 101,900 children
2. swimming - 71,900
3. netball - 11,800
4. rugby league - 44,600
5. tennis - 41,000
6. cricket (outdoor) - 35,000
7. basketball - 26,800
8. Australian Rules - 12,700.

The interesting part of this data is the drop-out rate of children in sport between the 9 to 11 age group and the 12 to 14 year group.

³ Australia's young people: their health and wellbeing. Australian Institute of Health and Welfare 2003

Some of the largest decreases between these age groups were:

- swimming – 46% decrease
- Australian Rules – 34% decrease
- soccer – 22% decrease
- netball – 15% decrease
- cricket (outdoor) – 11% decrease
- tennis - 11% decrease.

The main sports which showed increases between these two age groups were basketball (+68%) and Rugby League (+5%).

NSW Sport and Recreation have identified several key factors which affect sporting participation these can be generally group as logistical (costs, equipment, locations, transport etc), institutional (available facilities and officials, risk of injury in some sports) and personal (changing activity preferences and completion for leisure time).

Youth development, transitions and building resilience

Resilience is commonly thought of as the ability to bounce back from tough times. Resnick et al (1997) and others most commonly describe protective factors to include a strong sense of connectedness to parents, family, school, community institutions, adults outside the family, the development and enhancement of academic and social competence. Connectedness allows children and young people to make the most of their opportunities and overcome barriers (Wise et al, 2003).

As mentioned above, the need to build the resilience of young people is acknowledged by NSW Health and the Department of Education and Training. Also, the NSW Government's *Better Futures* strategy is based on the evidence about factors that are known to increase resiliency.

Youth development services play a key role in developing resilience for this age group. In 2005, the Department of Community Services commissioned research on how to strengthen youth development programming (Chiang et al, 2006). Findings from this review provided the framework and basis for discussions in the Roundtable on Youth Development, held in September 2006. The Roundtable recommended the following actions to improve young people's lives in NSW:

- reframe young people positively in the media
- formalise young people's participation
- improve planning, responsiveness and long term vision for youth development
- continued support for young people's development; through continued investment and by adopting a whole of community approach.

Wise et al (2003) found that effective interventions to enhance the likelihood of young people's successful transition to adult life must:

- build and enhance the personal knowledge, skills, values, beliefs and self efficacy of children and young people
- ensure that government policies, institutions and processes enable and support children and young people to acquire these competencies

- ensure that children and young people who are at risk of not acquiring these competencies receive high quality, evidence-based care and support
- ensure that children and young people who are already experiencing significant problems are cared for, supported and assisted.

Young people in employment

Overall, few of the children and young people in the target age are likely to be in paid employment. However, up to half of the young people at the upper end of the target group may be in paid or unpaid work. As children grow older, greater proportions work in the formal labour market. The older the child, the more likely they will work for a formal employer.

In 2005 the NSW Commission for Children and Young People published *Children at Work*, the first study of its kind in Australia to explore children's work (paid and unpaid) and the important contribution they make to businesses and the community. The survey involved over 10,000 kids aged 12-16.

The research shows that there is considerable diversity to kids' paid and unpaid work, from babysitting and working in retail outlets to making deliveries, teaching and helping on the family farm.

The majority of kids said they enjoy their work because they learn new skills, meet new people, it makes them feel more responsible and they like having their own money to spend.

However, the report also highlighted some serious concerns such as safety and the verbal and physical harassment of children in the workplace. In this regard, it should be noted that there are statutory arrangements regulating children's employment, including an offence for causing or allowing a child to take part in any employment in the course of which the child's physical or emotional well-being is put at risk (see *Children and Young Persons (Care and Protection) Act 1998*, Chapter 13).

Young people as carers

Approximately 6% of all people under 26 years of age can be defined as young carers. Of this group, 50% are under 18 years, with the average being 12-13 years. Just over 3% of the under 18 age group are primary carers, i.e., they are the main provider of care and support. Approximately one quarter of young carers provide care for someone with a mental illness. They provide emotional support, health care, housework, meal preparation, attend to paperwork, property maintenance, transport, and communication such as acting as translators when their parent speaks a language other than English. These tasks and responsibilities affect the health and wellbeing, social participation, family relationships, education and training and financial status of the young carers.

PART 2

CHILDREN 9 -14: PROGRAMS AND SERVICES

This part of the Government's submission describes NSW Government programs and services and is organised on a portfolio basis. However, Government agencies work together in many areas to deliver better outcomes for children and young people and, consequently, there is some repetition and overlap in the description of programs and services.

EDUCATION

Middle Years Strategy

The main actions of An Education Strategy for Years 5 - 9 in NSW 2006-2009: *Our Middle Years Learners - Engaged, Resilient, Successful* are:

- strengthening the effectiveness of transition from primary to secondary school for all students
- providing a challenging, cohesive curriculum across Years 5-9 including using the current primary school Connected Outcomes Groups model to develop integrated, across-faculty units of work in the early secondary years
- improving student well-being through implementing whole school approaches to pastoral care that build positive relationships, foster respect and responsibility and provide targeted early intervention and support
- explore more flexible use of resources, including school staffing in the Middle Years, to enable schools to develop local solutions to local needs
- investigating innovative and flexible ways of using learning environments to meet the particular needs of Middle Years' students
- establishing 'communities of schools' in each school education area to work collaboratively on continuous improvement in Middle Years' education
- increasing teacher professional learning opportunities within and across schools that focus on the Middle Years
- increasing the innovative use of technology to support learning,
- increasing learning choices and develop students' skill and confidence as technology users
- improving communication with parents about student progress and commitment.

Schools are ideally placed to support the development of resilience of all children and young people, including those from Language background other than English, learning English as a second language or newly arrived in Australia. NSW government schools provide a range of programs and services which assist students to develop resilience.

English language support, Years 4 to 6

Children in years 4 to 6 are provided support to learn English as a second language in their local primary school. Following an initial period of intensive English as a

second language support, English as a second language students are supported within the relevant class program by both English as a second language and classroom teacher. Newly arrived students in years 4 to 6 from overseas requiring intensive English enrol directly in primary schools and receive English as a second language support there. If the school has an established English as a second language program, newly arrived students are included in the program.

If the school does not have an existing English as a second language program, as in many rural and regional areas, an additional short term English as a second language teacher position is allocated to the school to provide English as a second language tuition to newly arrived students for up to 5 terms.

Students from overseas who enrol in year 6 in the second semester may be referred to an Intensive English Centre to undertake a program of study prior to enrolling a mainstream school to complete their secondary studies.

Newly arrived students in metropolitan areas enrol in 1 of 14 Intensive English Centre or the Intensive English High School for 3-5 terms. These Centres provide English language, orientation, settlement and welfare programs in preparation for high school.

Post-beginner students then transfer to high school and receive on-going English as a second language support from specialist English as a second language teachers or classroom teachers. In rural and regional areas, where there are no Intensive English Centres, students enrol directly in high school. In schools with no English as a second language program, an additional short term English as a second language teacher position is allocated to the school for up to 5 terms.

Intensive English as a second language classes are provided at selected rural and regional schools which enrol significant numbers of refugees.

Education support personnel

Specialist school counsellors

Specialist school counsellors are appointed to each of the 14 Intensive English Centres and to the Intensive English High School to provide diagnostic, welfare and settlement support to newly arrived children and young people. These specialist counsellors also assist other school counsellors dealing with refugee children and young people from new and emerging communities.

Teachers Aides (Ethnic)

Teachers Aides (Ethnic) provide bilingual and bicultural support for newly arrived students and their families. They are appointed to Intensive English Centres and the Intensive English High School and to schools with intensive English classes. Additional Teachers Aides (Ethnic) may also be appointed to support primary schools with concentrations of newly arrived English as a second language children and young people, in particular those from new and emerging communities.

Community Information Officers

Regional Community Information Officers support schools in communicating and strengthening links with their parents and community members from language backgrounds other than English.

Targeted education programs

Settling In program

Designed as an early intervention program for newly arrived migrant and refugee students, *Settling In* is conducted by trained school counsellors and teachers with interpreter assistance. The program assists children and young people in the process of adjustment to life in a new country and covers issues such as talking about feelings, dealing with anger, anxiety and sadness, people and places that can help, goal setting, problem solving, personal strengths and socialisation. *Settling In* programs are offered in all Intensive English Centres and in primary schools and high schools with significant enrolments of newly arrived students, on a needs basis.

After school tutorial support

After school tutorial support is provided for refugee children and young people who have transferred from an Intensive English centre to high school. In 2008 after school tutorial support is being provided at Beverly Hills, Cabramatta, Chester Hill, Evans, Holroyd and Fairfield Intensive English Centres and Birrong Boys and Lurnea High Schools.

Refugee Action Support Partnership

The *Refugee Action Support Partnership* is a joint initiative of the NSW Department of Education and Training, the Australian Literacy and Numeracy Foundation and the University of Western Sydney. The partnership provides after school tuition and homework support for young refugee students enrolled in high schools. Tutoring is provided by University of Western Sydney students enrolled in an education degree. In 2008 the program is operating at Blacktown Girls High School, Doonside High School, Northmead High Schools, Parramatta High School, St Marys Senior High School, Auburn Girls High School, Fairvale High School and Merrylands High School.

Intensive English Centre transition programs

The Intensive English Centres/Intensive English High Schools offer a transition to high school program to assist exiting students to make a successful transition to their designated high schools. This program can include:

- school experience for Intensive English Centre students in their high school
- liaison with a 'buddy' student as support during high school experience
- students and their families advised of schooling/pathways options
- *Helping Hand* program: Former Intensive English Centre students currently in high school trained as peer support leaders to provide support to ex Intensive English Centres students in first five weeks in high school.
- *LiNCS* program conducted in a number of Intensive English Centres in conjunction with the Service for the Treatment and Rehabilitation of Torture and Trauma Survivors to link new arrival refugee children and young people to different services in their community.

Outreach for students at risk

Many workplace practices and expectations have changed and are continuing to change rapidly as a result of increasingly complex technologies and the development of systems in response to this. This progress and development has a significant impact on many students with additional needs in learning. Some of these students are vulnerable to 'dropping out' in the middle years because of the widening gap between their academic performance and social membership. As a result, they risk economic and social marginalisation due to their limited workforce competitiveness and participation.

The Department of Education and Training provides funding to community organisations to operate Links to Learning projects supporting young people in Years 7-12 who are considered at risk of limiting their educational opportunities (known as Students at Risk projects) and for unemployed people 15 to 24 years who have left school without completing Year 12 or its equivalent (known as Early Leavers projects).

Organisations operating the Students at Risk projects work closely with a local high school to support participants in developing skills to assist them to remain engaged with their education.

In 2007, 35 of these projects worked in partnership with more than 100 Government high schools to support more than 1,180 students in the 9-14 years age range. Anecdotal information from organisations operating projects evidence indicates that a significant number of Students at Risk participants remain engaged with education.

Aboriginal Education and Training

The primary sources of overarching policies that provide a framework for the Aboriginal Education and Training Directorate to work towards addressing the needs of Aboriginal children and young people 9-14 years by closing the gap in the areas of educational outcomes are guided by:

- ***Our Middle Years Learners – Engaged, Resilient, Successful*** – focuses on establishing primary to secondary transition programs to support students in Years 5 to 9.
- ***The NSW Aboriginal Education and Training Strategy 2006-2008*** as a response to the Review. The Strategy aims to linking all sections of the Department to achieving the primary goal of '***By 2012, Aboriginal students' outcomes will match or better outcomes of the broader student population.***'
- ***The Aboriginal Human Resource Development Plan 2006-2008*** which focuses on partnerships with Aboriginal communities, increasing the Aboriginal education workforce and professional development and network support strategies to retain and build capacity of Aboriginal staff.
- ***The Aboriginal Education and Training Policy*** which is currently being reviewed and provides a process for the Department's commitment to improving the educational outcomes of Aboriginal students so that they achieve and maintain equity with the broader student population.

Other programs

The supported and targeted programs that are managed by the Department which fall under the Terms of Reference for the Inquiry and are implemented throughout schools and TAFE include:

- Programs such as Schools in Partnership, Kids Excel and Youth Excel that aim to improve attendance, numeracy and literacy
- Leadership and mentoring programs
- Programs that aim to build partnerships with communities
- Quality teaching initiatives focusing on literacy and numeracy attainment
- Social development programs to address issues of health and wellbeing
- Cultural education and Languages programs and initiatives

Personal Development, Health & Physical Education

The Personal Development, Health and Physical Education learning area plays an important role in enhancing resilience and connectedness. Students have opportunities to explore issues that are likely to impact on the health and wellbeing of themselves and others such as mental health, drug use, supportive relationships, gender roles and discrimination. Learning is designed to be affirming and inclusive of young people who experience a range of challenges in managing their own health. Students have opportunities to develop connectedness and personal coping strategies for everyday life, all of which have been shown to be important protective factors for resilient adolescents.

The Department provides of information and support materials for teachers through publications such as *Curriculum* Support and an email list serve for Personal Development, Health and Physical Education teachers Information and articles about resilience and teaching about resilience has been published during 2007.

Support for teaching resilience will be provided in 2008. This includes:

- The development of a teacher resource for Stage 5 in partnership with the Inspire Foundation to support the use of the *Reach Out Central* interactive game to promote mental health in Personal Development, Health and Physical Education classrooms. This resource will be available to teachers during Term 2, 2008.
- The development of a Stage 5 learning module to demonstrate the use of the *Reach Out!* web site as a source of health information and support for adolescents. The module will require students to undertake an independent investigation of health issues that are impacting on the health and wellbeing of young people and develop practical strategies to find accurate and up to date information and support for themselves and others in each of these health areas.
- The development and implementation of ten statewide workshops focusing on adolescent health issues. The workshops will provide teachers with current research on the health issues impacting on young people and practical strategies for delivering effective health education programs in schools. The workshops will showcase the teacher resources developed in

partnership with the Inspire Foundation. These workshops will be delivered during Semester 2 2008.

The Department's School Library and Information Literacy Unit develops book rap programs. The rap relates to building resilience:

- ***Identity: Sharing our stories.*** Stages 3 and 4 English, Personal Development, Health and Physical Education and Aboriginal studies. The rap will draw on a range of contemporary texts including personal stories to explore Aboriginal perspectives on what builds strong identity. Helpful for cultural understandings for all students. Rap starts 26 May 2008.

The ***School to Work Program: Looking Forward 2006-2010*** is “committed to ensuring that our students develop the resilience and flexibility to meet the challenges of the future”. Directions of the Program for the Middle Years includes “...age appropriate opportunities designed to explore and test career perceptions and encourage student participation in enterprising projects that involve real connections with business and the wider community.”

Reference to some of these opportunities has already been made. Enterprise learning projects provided by schools gives students the chance to develop some resilience in a supported environment by engaging with their community to work on projects that address an identified need in the community. There may be some setbacks along the way and students start to learn the importance of bouncing back when things do not always go according to plan.

Data from the 2007 annual online School to Work Report will be analysed to identify the uptake of enterprising initiatives in schools and the provision of learning opportunities in a real world context.

HEALTH

NSW Health provides primary, secondary and tertiary services for the target population.

Live Life Well Initiative

'Live Life Well' is a NSW Government initiative, a call to action that embraces many of NSW Health's activities that seek to promote healthier lifestyles and avoid ill health, rather than treating symptoms as they occur. 'Live Life Well' is about ensuring that people are able to access the right information at the right time, supporting their needs and to help them make healthy informed choices about their nutrition, physical activity, alcohol consumption, smoking, healthy weight and stress.

Healthy Weight

Young people who are overweight or obese frequently experience health problems ranging from psycho-social problems, asthma, sleep apnoea and early development of risk factors for heart disease such as raised blood pressure (Royal College of Physicians of London, 2004). Even Type 2 diabetes, a chronic disease traditionally diagnosed only among adults, is now increasingly being detected among Australian children (McMahon et al., 2004).

In 2002, the NSW Government convened the Childhood Obesity Summit, which led to *Prevention of Obesity in Children and Young People: NSW Government Action Plan 2003-2007*. The Human Services CEO's Forum has the responsibility for monitoring the implementation of the Action Plan and has established an interagency sub-committee for this purpose. One of the initiatives emerging from the Childhood Obesity Summit was the establishment of the NSW Centre for Overweight and Obesity (COO). This collaboration between public health research groups addresses the growing and serious problem of overweight and obesity, with particular emphasis on children and young people.

Within the Live Life Well initiative, the NSW Department of Health has major commitments to implement programs to promote nutrition and physical activity within the early childhood and schools sectors. Some of the programs include:

- **Fresh Tastes @ School - NSW Healthy School Canteen Strategy.** This strategy was launched in 2004 as a partnership between the NSW Department of Health and the NSW Department of Education and Training, with support by the NSW School Canteen Association, the Catholic Education Commission and the NSW Association of Independent School. The Strategy is a government-endorsed approach to food and drinks sold in NSW Government schools, both primary and secondary, and one that is encouraged in Non-Government schools.
- **The Good for Kids, Good for Life Program** is Australia's largest ever childhood obesity prevention trial. It aims to prevent overweight and obesity in children from 0-15 years of age in the Hunter New England Area and to build evidence for policy and practice related to the prevention of childhood obesity in NSW. The program brings together a variety of agencies, community groups and

industry to provide practical information, as well as new programs and systems, to help children, parents, carers and the wider community, know more about healthy weight, nutrition and physical activity.

- **Crunch&Sip®** is a set break for primary school students to eat fruit (or salad vegetables) and drink water in the classroom. The program originates from Western Australia with ownership by the WA Department of Health, and is an initiative of the Go for 2 & 5® campaign. The Healthy Kids School Canteen Association is assisting in the effectiveness of the Go for 2 & 5® campaign through implementation of Crunch&Sip® in primary schools across NSW. The Healthy Kids School Canteen Association will be implementing the Crunch&Sip® program throughout primary schools in Western Sydney during Term 4 2007 and the rest of NSW in Term 1 2008.
- The ***Live Life Well@School*** initiative is one of two new ***Live Life Well*** childhood obesity prevention programs to be rolled out across NSW following a funding allocation of \$6.5 million over four years in the 2007/08 health budget. The program is funded by the NSW Department of Health for the four years 2007/08 through 2010/11. (The other program is focused on preschools/day care centres, and is known as “Munch & Move”.) ***Live Life Well@School*** is a coordinated physical activity, healthy eating and sedentary activity program in NSW government primary schools targeting students 5 to 12 years of age. This initiative is a joint initiative between the Department of Health and the Department of Education and Training Curriculum K-12 Directorate. A ***Live Life Well@School*** Project Officer will be employed by DET to help coordinate the program. The program adopts a whole of school approach, has a professional development component, incorporates community links and provides strategies/resources for parents/carers.

Targeting adult and parental behaviours is also an important aspect of promoting positive health behaviours and resilience in young people. A key program under the auspices of the Australian Better Health Initiative is the development, implementation and evaluation of a Diabetes Prevention Program (2007/2008 to 2009/2010). The purpose of this program is to develop, implement and evaluate community based diabetes prevention strategies including intensive lifestyle interventions for those at high risk. It is envisaged that this new program will reorient the way diabetes prevention is dealt with in NSW. The program will support and empower adult participants to make positive changes to their diet and increase their amount of physical activity.

Injury Prevention

Injury and poisoning are the leading causes of death and a major cause of disability among young people in Australia. For every young person who dies from injury, many more are admitted to hospital for treatment. Injuries can have lasting effects, such as disability or disfigurement, impairing a young person’s development and future wellbeing (Pointer, et al. 2003).

The NSW Injury Risk Management Research Centre (IRMRC) is an independent research centre of the University of NSW. It was established in 1999/2000 in partnership between UNSW, NSW Health, the NSW Motor Accidents Authority

(MAA) and the Roads and Traffic Authority of NSW (RTA). The IRMRC receives core funding from NSW Health, MAA and RTA. Their value statement is “to advance injury risk management through the conduct of high quality research, the building of research capacity, and the translation of the results of research into policy and practice” (IRMRC, 2006). Injuries impacting on young people are one focus area of the research centre.

Kidsafe NSW (The Child Accident Prevention Foundation of Australia) has now been operating in NSW for over 27 years. Child injury prevention and safety issues are addressed at Kidsafe through various strategies such as advocacy, public education campaigns, the provision of information, development of resources, and the initiation of special projects to raise awareness of child safety issues and injury prevention. Kidsafe works at national, state and local levels, in cooperation with partners, such as government departments, industry, education, hospitals, the media, community groups and voluntary organisations, to address child injury issues for Australian young people. NSW Health contributes funds to support Kidsafe NSW’s Executive Officer position and the general day-to-day functions of Kidsafe NSW.

Tobacco

Tobacco use is the risk factor associated with the greatest disease burden in Australia, responsible for about 10% of the total burden of disease in the Australian population (AIHW, 2005). For this reason, dissuading young people from taking up smoking is a high-priority public health issue. Even adult focused initiatives can have a beneficial flow on effect to preventing young people smoking (AIHW, 2005).

Not only is preventing tobacco use among young people a priority, but decreasing young people’s exposure to environmental tobacco smoke. Young people with any secondhand smoke exposure have a three-fold increase in daily smoking behaviour (Darling & Reeder, 2003 cited in AIHW, 2005). With increased awareness about the harmful effects of environmental tobacco smoke and with many jurisdictions moving towards legislating against smoking in public places and in the workplace, the number of smoke-free homes has also increased (Borland, Mullins, Trotter & White, 1999).

In the area of tobacco use, NSW Health is working in collaboration with partners such as the Cancer Institute NSW, The Cancer Council NSW and University of Sydney to reduce the smoking rates in our community. Current initiatives include:

§ ‘Smoking. Don’t be a sucker’ program is a partnership program between NSW Department of Health, the AFL NSW/ACT, the Sydney Swans and NSW Department of Education and Training. This initiative integrates non-smoking messages with a physical activity program and is designed specifically for students in junior secondary schools. The program has been running since 2003 and integrates non-smoking messages with a physical activity program. In 2006/07, the program was delivered to 51 schools in rural and metropolitan NSW. The program is considered more effective than other programs with a similar target audience as it offers greater depth of message delivery; focuses on greater teacher involvement in the program including supportive classroom activities; and is more sustainable in participating schools through the integration of the *Rise Above the Clouds* program materials into the school curriculum.

- NSW Department of Health has been a major sponsor of the Rock Eisteddfod Challenge since 1998. The challenge is a performing arts competition involving high school students, which encourages young people to lead healthy smoke-free lives. It is a great way for young people to express themselves and learn about the benefits of leading a healthy non-smoking lifestyle. Since 2006, NSW Health and the Cancer Institute NSW have co-funded the event.
- Since 2002, NSW Department of Health has supported a social marketing campaign known as *Car and Home: Smoke Free Zone*. A consortium of non-government organisations including the Cancer Council NSW, National Heart Foundation of Australia (NSW Division), SIDS & Kids NSW and the NSW Asthma Foundation oversee the strategic direction of this program. One of the project aims to increase awareness among parents and carers of the health effects of Environmental Tobacco Smoke (ETS) on young people. To ensure that the project's messages are delivered in a culturally appropriate way, resources are being developed for culturally and linguistically diverse groups (CALD) and CALD community workers.
- The *SmokeCheck* Training Project trains Aboriginal health workers and other health workers who work with Aboriginal communities in NSW, to deliver of evidence-based best practice brief intervention for smoking cessation for adults, including parents and carers.

There have also been significant changes in the legislation to reduce community exposure to Environmental Tobacco Smoke. Comprehensive legislation concerning smoke-free enclosed public places has been enacted in the New South Wales. The Smoke-Free Environment Act 2000 bans smoking in all enclosed public places, such as restaurants, cafes and shopping centres. These changes in the Smoke-free legislation have lead to the continued de-normalisation of smoking within the NSW community.

Urban Planning

The built environment, encompassing all buildings, spaces and products modified by people (Srinivasan, 2003), plays a critical role in shaping young people's lives and subsequently impacting on their health and resilience.

In October 2005, COO, a research centre funded by NSW Health, produced *Creating Healthy Environments: A review of links between the physical environment, physical activity and obesity* (Gebel, 2005). This integrated summary highlights how physical environments can influence physical activity, nutrition and obesity and discusses how the built environment impacts on communities, including young people.

The Premier's Council for Active Living (PCAL) aims to build and strengthen the physical and social environments in which young people and communities engage in active living. PCAL, who reports to the Premier through the Minister for Health, predominantly works to influence policy and high level strategies through intersectoral collaboration.

PCAL comprises senior representatives from across government, industry and the community sector including the NSW Department of Health.

The Healthy Local Government Grants Program (HLGGP), a key partnership initiative between NSW Department of Health and the Local Government and Shires Associations (LGSA), was based on the recognition of Local Government as a setting outside of the health system in which population health gains, particularly for young people can be made. The Grants Program opened in mid-October 2005, with many projects in their final stages. One hundred and fifty-two grants applications were received from 99 councils. Twenty-nine grants were awarded to 24 councils, one regional organisation of councils and one Aboriginal Land Council. Projects ranged from sun protection health promotion initiatives for play equipment, injury prevention for young people, and increasing physical activity and nutritional intake for young people and communities. Negotiations are underway for a second round of grants.

Mental Health

Child and Adolescent Mental Health Services (CAMHS) in NSW focus on assessment and intervention of the mental health needs of children and adolescents from 0 to 18 years and their families/carers. Most specialist child and adolescent mental health staff are involved in general community mental health work, providing the core of mental health services, with other services provided in a range of settings. The core clinical work of specialist CAMHS staff is to provide specialist mental health assessment; care and transition planning; consultation-liaison with a range of other providers (e.g., GPs, early childhood staff, Child and Family Health teams, paediatric services, PANOC/child sexual assault/child protection services, drug and alcohol services, adult mental health services, staff from other agencies); and specialist mental health interventions for children and adolescents and their families/carers. Interventions may include group, individual, family, pharmacological and systems interventions, separately, in combination or in sequence. CAMHS staff also contribute to mental health promotion and prevention programs including positive parenting for mental health and other initiatives such as School Link and Children of Parents with a Mental Illness (COPMI). CAMHS are also specialist partners in working with vulnerable families through other government initiatives. CAMHS service provision is provided in a range of settings.

The NSW School-Link initiative is a significant partnership between NSW Health and the NSW Department of Education and Training, that has received wide acceptance and recognition in NSW, across Australia and internationally. School-Link provides a state-wide framework for child and adolescent mental health services, schools and TAFE to work together to:

- Promote mental health among children and young people;
- Prevent mental health problems using evidence-based programs in schools;
- Improve schools' ability to identify developing mental health problems in their students;
- Enhance the knowledge and skills of school and TAFE counsellors and mental health workers;
- Develop local pathways to care so that adolescents with mental health problems and their families get help more easily.

A major component of School-Link is the ongoing School-Link Training Program, a partnership between NSW Health, the NSW Institute of Psychiatry and the NSW Department of Education and Training. Approximately 2,000 school and TAFE counsellors, mental health workers, psychologists from the Department of Juvenile Justice and the Department of Community Services, and drug and alcohol workers across NSW, participate together in advanced training focusing on important adolescent mental health clinical problems.

An advanced module on mental disorder and substance use issues in adolescents is being delivered across the state during 2007/08 and a module on anxiety in children and adolescents is currently being piloted in rural NSW.

NSW Health and the NSW Department of Education and Training are developing a Memorandum of Understanding that will build on the training component of School Link and further strengthen collaborative support and shared care to improve the mental health of children and adolescents.

Approximately 23% of children in New South Wales live with a parent or carer who has a mental illness. The needs of the children can be placed along a continuum, from those children who are well and living life to the full, to those who are at risk due to factors which include poverty, violence, and the effect of the parent's mental illness symptoms on parenting capability. In 2006, the former Centre for Mental Health (now Mental Health and Drug & Alcohol Office) funded the preparation and distribution of 200 copies of a resource kit, a project initiated by the NSW COPMI Network. The kit contains storybooks and work books which are useful when working with the children and their families. The kit has been distributed to Area Mental Health Services. In addition to the provision of COPMI services in some Area Health Services, other COPMI initiatives include the development and implementation of education and training for mental health workers and the finalisation of a strategic framework for NSW.

NSW Health has worked collaboratively with the Department of Community Services (DoCS) to develop a Memorandum of Understanding that is aimed at securing priority access to NSW Health Services for children and young people who fall within the target client group. The Directors-General of DoCS and Health signed off on the MOU in 2006. A Mental Health Addendum to the *Memorandum of Understanding between the Department of Community Services (DoCS) and NSW Health (2006)* is under development to strengthen the arrangements, particularly for children and young people in out of home care, as set out in the NSW Government Interagency Guidelines for Child Protection Intervention. All children in out of home care (OOHC) need appropriate support and assistance to promote and protect their mental health. The addendum will focus specifically on the mental health needs of this vulnerable group of children and will provide a guide for appropriate referrals, ascertainment of need and jointly planned intervention.

Below are details of some of the current National and State policy and planning frameworks for mental health that also make reference to address the needs of children and adolescence (including those aged between 9-14years):

- National Mental Health Policy
- Mental Health Statement of Rights and Responsibilities

- National Mental Health Plan 2003-2008
- Promoting the Mental Health and Well being of Children and Young People
- National Action Plan for Promotion, Prevention and Early Intervention for Mental Health
- Mental Health - Clinical Care and Prevention Model (MH-CCP) Version 1.11
- Getting in Early: a framework for early intervention and prevention in mental health for young people in New South Wales
- NSW Interagency Action Plan for Better Mental Health
- NSW: A New Direction for Mental Health
- NSW Community Mental Health Strategy 2007-2012: from prevention and early intervention to recovery
- NSW Family and Carer Mental Health Framework
- Families NSW Supporting Families Early Package
- NSW Aboriginal Mental Health and Wellbeing Policy 2006-2010
- NSW Health Multicultural Mental Health Plan (draft)

The *National Mental Health Plan 2003-2008* adopts a population health approach and provides a five-year framework for further reform. The NSW Government, as a co-signatory to the National Mental Health Strategy, is committed to this National Plan and identifies the importance of activities to promote better health for everyone, prevent and minimise risk factors and intervene early to improve treatment outcomes. The *NSW Interagency Action Plan for Better Mental Health* aligns clinical services with services provided by other agencies. The *draft CAMHS Plan* aims to inform the policy and planning work of other key services, agencies and stakeholders regarding mental health initiatives, care and support of children and adolescents and their families. *The National Action Plan on Mental Health 2006-2011* identifies special policy areas to achieve effective promotion, prevention and early intervention in relation to children and young people. These include building resilience and coping skills of children young people and families and improving treatment services to better respond to the early onset of mental illness, particularly for children and young people.

A *NSW Child and Adolescent Mental Health Service (CAMHS) Plan* is being developed for the enhancement of child and adolescent mental health services in NSW. The Plan should improve the mental health of children and adolescents, to help them, their families and others caring for them to optimise their development and to build a secure base for their futures. The Plan acknowledges:

- the growing prevalence and complexity of mental health problems in children and adolescents;
- the earlier age of onset of disorders;
- opportunities to minimise multi-risk trajectories and adverse outcomes; and
- historic barriers and over-emphasis on adult mental health services, as well as Area versus Statewide priorities for limited resources.

Oral Health

Fluoridation of drinking water remains the most effective and socially equitable means of achieving community-wide exposure to the caries prevention effects of fluoride. 94% of children in NSW have access to fluoridated public water supply.

There are also a number of oral health programs that focus on school aged students in NSW. The following programs target remote living and Aboriginal children:

- ***Clean Teeth Wicked Smiles*** – fluoride toothbrushing program in schools in Far West NSW, provided through the Maari Ma Aboriginal Corporation.
- ***Brush and Be Cool*** – fluoride toothbrushing program in schools provided through GWAHS.
- ***Koori Kids Koori Smiles*** – an oral health program for Aboriginal families on the Central Coast of NSW provided by NSCCAHS in a supportive and culturally acceptable environment. Children receive comprehensive dental treatment, culturally appropriate oral health information, oral hygiene products and mouthguards.

All children aged 0-5 years and those children less than 18 years of age undertaking full time primary, secondary or tertiary studies at an educational institution or at home, or who hold a concession card in their own right, are eligible for free public dental care on a needs basis.

Immunisation Services

School-based vaccination services are offered to children in the 9-14 year age group. Children who do not receive these vaccines at school, or who miss a particular dose, are able to receive these services from their general practitioner.

In 2008, Year 7 students are offered hepatitis B and varicella (chicken pox) vaccine and girls in Year 7 to Year 10 are offered human papillomavirus (HPV) vaccine.

Child Protection

NSW Health's child protection role is to recognise and report children and young people who are suspected of being at risk of harm and to provide crisis counselling, ongoing counselling and forensic and medical examinations for children and young people who have experienced abuse and neglect.

Consent and privacy issues

NSW Health recognises that children and young people must be given the opportunity to participate at a level appropriate to their age and development in decisions which significantly impact on their lives and that health services should take on a partnership approach with children, young people and families.

These issues are particularly significant when examining the needs of children in the middle years and their capacity to give consent to undergo medical procedures and for the use and disclosure of their personal health information. This is particularly relevant in relation to providing consent for medical and forensic procedures due to alleged physical abuse and/or sexual assault.

The NSW Health Privacy Manual notes that when treating a minor the treating health care provider should assess the maturity of the client/patient, in particular

their ability to understand the consequences of their decision. The following principles are provided as an age guide:

- Where a client/patient is less than 14 years of age, consent should generally be given by the parent or legal guardian.
- Where the client/patient is between 14 and 16 years of age, efforts should be made to obtain the consent of the parent or legal guardian unless the client/patient indicates a strong objection.
- Where the client/patient is 16 years of age or over, they should generally be capable of deciding on the issue for themselves.

The issue of whether children and young people in the middle years (particularly those in the later middle years) have sufficient capacity to provide consent presents unique challenges for health staff giving the varying levels of maturity and development. This is also the case in assessing whether a child or young person is at risk of harm due to engaging in same age sexual intercourse.

HOUSING

Community Housing Expansion

Under the *Planning for the Future: new directions for community housing in New South Wales 2007-2012* strategy, Housing NSW is expanding their community housing sector with a target to double the number of homes managed by community housing providers to 30,000 over the next 10 years.

As community housing tenants children and young people may be living in generic community housing services which will frequently be provided by one of the specialist services funded through the Supported Accommodation Assistance Program/Crisis Accommodation Program service model.

In either case, community housing services are a particularly useful vehicle for meeting the needs of young people, as they offer lower staff to tenant ratios, and many of the organisations that deliver these services offer social welfare skills and values, promoting a supportive environment that is well suited to children and young people. For example a number of community housing providers, including St George Community Housing and Cumberland Community Housing, offer educational bursary schemes to encourage young people under 16 years of age to be involved in further education and in that way increase their future prospects.

Linking Housing and Support

Early intervention involves intervening at critical points in a child's or young person's development and attempting to ensure that they are given the maximum opportunity to lead productive lives. Both Housing NSW and community housing providers work together to ensure families in crisis are referred to appropriate support services to promote the safety of families, children and young people.

The *New South Wales Housing and Human Services Accord* (the Accord) has established a framework for partnerships between NSW Government agencies that provide housing, health education and other social support services for people living in social housing, including children and young people. Through the Accord government agencies agree to improve the planning, coordination and delivery of services to assist social housing tenants to sustain their tenancies, as well as to facilitate community building and to reduce disadvantage in the larger public housing areas.

Through the Accord, a particular cross-agency agreement, (referred to as a 'Schedule') has been endorsed to support the development of specific community regeneration partnership activities under the *Building Stronger Communities* initiative.

One practical way in which this schedule is now being utilised is through exploring opportunities for improved planning and service coordination of early intervention disability services for families with a child with a disability living in social housing. The *Early Childhood Intervention Coordination Program* (ECICP) aims to strengthen families with a child with a disability living in social housing.

Also, a specific Accord partnership supporting the implementation of the State Plan Priority F1 (Improved Health and Education for Aboriginal People) is being developed between the Department of Community Services and Housing NSW to provide housing with intensive support for women and children escaping domestic violence in five locations in the Orana Far West area. The focus of this project on support for families and women at risk in the far west area also provides some protection and support for children at risk of sexual assault.

Community Regeneration and Tenant Participation

Through community regeneration and tenant participation initiatives Housing NSW promotes and supports positive relationships and the connections between young people, their friends, their families, their schools and their communities.

Housing NSW launched the ***Building Stronger Communities*** initiative in March 2007 in six priority locations, covering 18 social housing communities. This initiative brings together social housing residents, government agencies, community organisations and businesses in an integrated approach to improve housing, services and opportunities for particular locations. A key element of this initiative is the recruitment of Learning & Employment Coordinators within each priority location to broker the co-operation of business and government agencies to improve education, training and employment opportunities for social housing residents.

A Regeneration Partnership Plan has been developed within each location. The following are examples of cross agency strategies that demonstrate a commitment to improve activities, services and support for children & young people aged 9-14 across the priority locations:

- ***Positive School Attendance Programs*** such as implementing promotional campaigns with schools and communities to engage young people and their parents in valuing learning with sponsorship and giveaways, engaging parents in attending high school transition events, implementing study and homework groups and mentoring programs to improve transition to high school.
- ***Connected and Active Communities Initiatives*** increasing the range of organised sport and recreational activities for children and young people out-of-school hours, on weekends and during holidays such as Sport in the Neighbourhood programs, community events such as Midnight Basketball, active play park for teenagers, mural painting and graffiti wall.
- ***Youth Strategies and Engagement Plans*** to improve access and coordination of youth services and better engage with children and young people, such as open space and park improvements with young people's involvement and implementing a Green Corridor with schools along walking paths to school.

Promoting Safe and Strong Communities

Prevention strategies including identifying and minimising potential risk factors for young people, while strengthening protective factors, contribute to the resilience of young people to effectively navigate difficult times.

An example of strategies being employed by Housing NSW includes the Antisocial Behaviour Strategy which aims to improve community safety and strengthen

Housing NSW response to antisocial behaviour. The Antisocial Behaviour Project includes:

- new and revised policies and procedures in Housing NSW's response to antisocial behaviour;
- strengthened partnerships with NSW Police Force; and
- improved use of mediation services and expanded use of safety audits within public housing.

Antisocial behaviour affects children and young people living in public housing in two ways:

- Where a child or young person is engaged in antisocial behaviour, the strategy provides for a problem resolution process that is fair to all parties, and seeks to achieve a positive solution to the problem; and
- Children and young people are often the victims of antisocial behaviour in Public Housing, and will benefit from a safer social environment in Public Housing localities.

Staying Home Leaving Violence Initiative

The Staying Home Leaving Violence initiative is an innovative service model which gives those experiencing family and domestic violence, along with their children, the option of remaining in their own home rather than being forced to seek crisis accommodation to escape the violence. This means that victims and their children can remain in stable, suitable accommodation and maintain their family and social networks, thereby mitigating some of the negative impact associated with exposure to domestic and family violence. Housing NSW operates a pilot Staying Home Leaving project in Eastern Sydney. This is one of two pilots currently operating. The NSW Government has made a commitment to expanding the program to 18 sites across NSW between 2009/10 and 2010/11.

Reducing Homelessness

Housing NSW focuses not only on children within the social housing system but also on children living in homeless families, which is a large and growing proportion of all people accessing the homelessness service system. For example the overwhelming majority of children accessing the SAAP system are aged 12 years and younger. Additionally, the SAAP National Data Collection Annual Report 2005-06 reports that nationally there were 2,000 unaccompanied children aged under 15 accessing SAAP services in 2005-06⁴.

Housing NSW is working to reduce homelessness by leading the Partnership Against Homelessness (PAH). Established in 1999, the PAH seeks to coordinate the activities of the 12 NSW Government agencies that are members with input from the Commonwealth Government and the non-government sector. The overall aims of the PAH are to help people who are homeless to access services, to coordinate support services and prevention approaches and to improve access by people who are

⁴ Housing Ministers Conference and Community Services & Disability Ministers Council Joint Paper to the Commonwealth Government on Homelessness

homeless to temporary or crisis accommodation and facilitate the move to long-term accommodation. The PAH Work Plan 2007-10 outlines the major strategies and actions being undertaken by lead and partner agencies through the Partnership. The strategies and actions are organised under the following 3 goals:

- The PAH has a strong evidence base to guide decision making, service planning and practice, and to secure resources for cross-agency initiatives;
- Homelessness is integrated into service planning and policy development for all PAH agencies; and
- Agencies work together to provide a flexible, holistic, and integrated system of support for people who are homeless.

In May 2007 the NSW Auditor General released the Performance Audit report, *Responding to Homelessness*. The Performance Audit made four recommendations that prioritise the establishment of a statewide homelessness framework and associated performance benchmarks, linked to the NSW State Plan. In August 2007 the Human Services and Justice CEOs forum established an interdepartmental working group to develop a proposal for a Homelessness Strategic Framework. The Working Group is Chaired by Department of Premier and Cabinet with Housing NSW coordinating the developmental work. In April 2008 the CEOs endorsed a Stage 1 Strategic Framework presented by the Working Group, along with a timetable for finalising the Stage 2 (and final) Framework, structured around the release of the Green and White papers on homelessness by the Commonwealth Government during 2008.

The Stage 1 Framework has two overarching outcomes: that less people become homeless, indicated by a decline in the rate of first-time homelessness; and that less people who have been or are homeless become homeless again, indicated by a decline in the rate of recurrent homelessness. A series of actions are identified under the three strategic directions of: Prevention and Early Intervention; Assessment and Crisis Response; and, Longer term accommodation and community support.

COMMUNITY SERVICES

Better Futures Program

The Better Futures program is aimed at increasing coordination and planning for young people aged 9 to 18 across health and community services. The strategy relies on government and non-government services working differently together and with communities to plan and develop more responsive coordinated services, both new and existing. The strategy has the following identified objectives:

- Strengthened connections between communities and families
- Better functioning families
- Improved well being of young people and their participation in communities
- Keeping young people at school and improving their educational attainment
- Reduction in risk factors for young people

Over three years (being 2007-08 to 2009-10) support will be provided for:

- 17 projects focusing on the age range from about 9 to 14 years
- Six projects covering the older part of the age range of interest to the Inquiry, 12 years plus or 14 plus
- 18 projects addressing the full Better Futures program's age range, 9 to 18 years

In addition, nine projects for youth workers and one project for young adults will be supported.

The Better Futures program works to improve outcomes through enabling incremental change in local and regional service systems by:

- facilitating multi-agency planning and action toward defined results
- piloting and evaluating projects which model new ways of delivering services and contribute to the evidence base regarding effective interventions
- promoting evidence and results based practice among service providers
- promoting the participation of young people in community life and decision making relevant to them.

A number of projects where the Better Futures program supports the results for regions include:

DoCS Southern Region

- The Dapto Koonawarra Youth Connect project, is working to strengthen protective factors and reduce risk factors.
- The Shellharbour Aboriginal Youth Worker in Schools aims to keep young people connected to education and family, by providing culturally appropriate services and working with other activities run from the same Centre, including after school and school holiday activity.

DoCS Hunter/ Central Coast Region

- Samaritans Creative Futures project, which is directed at 9 to 14 year olds. The project provides continuity of support to children in the transition from primary through to high school. This project is based on early intervention and prevention. It supports all young people, not just those that have been identified as 'at risk'. The family is an integral part of the project.
- Another 18 Better Futures projects in this region are funded for better connections and participation of young people with family, school and community, and support for young people through times of transition or change. These projects are funded to reduced risk factors for suspended students working with them before and after school and in holiday periods. The projects aim for improved collaboration and partnerships between organisations and integration of services that work with youth.

Evaluations of these and other projects will help to identify whether these differing approaches are meeting the needs of these children and young people in their middle years.

Research to build evidence base

The Better Futures program has funded research into the characteristics of young people 9 to 18 years through the Social Policy Research Centre (SPRC) with the University of NSW. The SPRC reviewed the evidence on the development of young people and the risk and protective factors that shape wellbeing and resilience during the developmental years 9 to 18.

SPRC acknowledged that further evidence in relation to developing effective ways of meeting the needs of and providing support to vulnerable young people in the Australian context was needed.

SPRC found that adolescence is a period of crucial transitions. The development period between 9 and 18 involves some of the most crucial transition points in life, including socialisation, the transition between primary and secondary school, sexual development, peer influence, and the transition from school to work, training or further education. For some it is also a period during which substance-using behaviour starts and contact with the criminal justice system first occurs.

SPRC identified that supporting young people can be effective and that there is a consensus emerging that it is 'never too early, never too late' to intervene. Recent research suggests that interventions focusing on later transitions have as much success as those that focus purely on the early years of growth.

To be effective for children and young people, interventions need to be coordinated and focus on capacity building rather than targeting specific problem behaviours. Research has shown that interventions for young people are more likely to be successful if they are timed to precede the development of difficulties. Problem behaviours are more likely to be reduced by coordinated approaches to community

capacity-building than by programs specifically directed towards the behaviours themselves.

Children and young people need social supports to be in place for them to negotiate their transitions more effectively. Transitions are made more easily when there are personal social supports, such as a network of friends. Transitions are facilitated through appropriate information, understanding and flexibility, including allowing for different points of entry.

Children and young people need to participate in decision-making to help them have a sense of autonomy over their lives and to be generally more positive in establishing their own direction. Young people who believe their lives are largely within their own control are more likely to have positive attitudes towards others. When young people are included in the decision making process, interventions are better implemented and more effective, as their understandings may differ from adults.

New research also shows that adolescence and beyond is a crucial time for brain development. The process of brain maturation continues through adolescence and beyond. The brain's centres for reasoning and emotions continues to develop during and past adolescence. While the implications for policy of this emerging research are yet to be fully understood, this underscores the needs that children and young people have for strong social and emotional, educational and social support structures through this period.

Better Futures Program's Pre-Teens Research Project

Following consultations in 2003 the South East Sydney Senior Officers Group commissioned the Inner and Eastern Sydney Better Futures program Pre-Teens Research Project. The project reviewed current service delivery and look at ways to provide relevant support for 9-13 year-olds. It was auspiced by Waverley Council and funded by the Better Futures program.

The project mapped existing services, identified obvious barriers to participation and gained children's input on preferred activities. The report, *Better Futures Inner and Eastern Sydney Pre-teens Research Report*, gave an overview of primary services and issues that impact on 9 to 13 year olds with a particular focus on Out Of School Hours Care (OSHC) services during 2005. The aim of the report was to provide a broad brush assessment of the primary services and the issues that affect them. The report notes that it was not exhaustive and may have missed some service issues or failed to identify all gaps across the area.

Some of the needs identified in the report included:

- information about what is available for this age group
- private classes and programs that low and middle-income parents can afford
- transport in some areas
- parental involvement in sporting pursuits
- access to sports fields, due to pressure from a range of sports codes
- more challenging environment than that provided by OSHC
- more sports and activities to do, and more space to do them

- better equipment and games, which cost more for the older age group

The report identified a number of things that OSHC centres can take into account to make their services more attractive:

- Make sure children have input into the kind of activities they do
- Create special activities that differentiate them from the younger children
- Give older children more rights and responsibilities
- Provide a stimulating and supportive environment
- Encourage stable and long-lasting relationships to be built up between permanent staff and children over many years
- Design OSHC centres so they are a 'home away from home' and a place where children really want to spend time

The Better Futures Program Connection to Activities project

The findings of the Pre-Teens Research Project are now informing the project Supporting Young People's Connection to Activities Project funded under the Better Futures Programs Strategy also auspiced by Waverley Council.

The Connection to Activities Project aims to initiate an integrated approach to planning for delivery of services and to improve communication between all after school activities and local governments to ensure there are engaging, affordable and accessible activities programs for children aged 9-13 years in the Inner/Eastern region.

The Connection to Activities Project aims to increase physical activity, health, and support young people to feel good about themselves, build skills and confidence, increase the opportunities for socialisation, and ensure that those young people participating in after school activities have positive role models and connections to adults other than their parents. A further aim of the project is to link children to activities groups and services that will support their transition into activities beyond the life of after-school programs.

Resilience Identification Resources Kit

The Better Futures Pogram sponsored the Newcastle University's Family Action Centre's Resilience Identification Resources Kit, including the Resilience Identification Checklist and Resilience Circle and accompanying manual, produced in 2004. The kit is to assist professionals working with children and young people aged between 9 and 16 years, including teachers, youth workers, social workers and community development workers.

Many of the more than 50 Better Futures Programs Projects, being funded in 2007-08, include elements and activities that will help to develop resilience through skills development, changing internal supports and external supports, although they are not directed at that specifically.

Departmental Research - Literature Review: Early Intervention strategies for children and young people 8 to 14 years

The Department of Community Services Research Agenda reflects the Department's commitment to research of youth within the 9 to 14 years age group as reflected by our partnership with the Social Policy Research Centre. It is designed to provide the evidence base to inform policy, practice and program development. The Research Agenda identifies projects and priorities that will inform DoCS programs in a range of areas including community capacity building and resilience.

One of the important recent results of the DoCS Research Agenda is the *Literature Review: Early Intervention strategies for children and young people 8 to 14 years*, November 2007. This literature review examined the evidence supporting the effectiveness of parenting programs, child-focused programs and multi-component programs as early interventions for all families (universal interventions), for high risk families (selected interventions), and for families where the child or young person is already showing difficulties (indicated interventions). Selected and indicated interventions were also described as 'targeted' interventions, since those at high risk for future problems are targeted for inclusion.

The report noted, importantly, that there were a number of methodological problems with many of the research studies included within the review. These limitations included small sample sizes, high attrition rates or differential attrition, lack of long-term follow-ups to determine the durability of the intervention effects, reliance on self-report measures and exclusion of fathers.

The majority of research had been conducted in the USA and there was a lack of research from Australia. As the school system in the USA differs significantly from Australia in terms of structure, policies and practices, replication of study findings in the Australian context is needed. Additionally, the design and analysis of multi-component studies have generally not enabled an estimation of the separate effects of different components of the intervention.

Finally, very few programs have been developed for, or adapted to, culturally and linguistically diverse groups, and only one program has been adapted for Indigenous children and young people, so this issue needs to be addressed in future research.

The report nevertheless found that the research indicates the needs of children and young people and what works for them varies, and it identified a number of implications for the delivery of evidence-based early interventions for parents of children and young people aged 8 to 14. These include:

- Parenting programs should be developmentally appropriate and target risk and protective factors known to be associated with child outcomes such as parental monitoring and supervision, parent-child communication and parent-child relationship quality.
- Universal parenting programs should be delivered early during the transition to adolescence so that intervention occurs prior to initiation of substance use and delinquency.
- Universal parenting programs that target parenting and family interaction have the capacity to prevent the initiation of alcohol and smoking, and may even impact on delinquency.

- Brief or self-directed parenting programs are essential for parents who may not be able to access group or individual programs. Families participating in brief or self-directed programs should be monitored and more intensive interventions should be offered to those who continue to show problems at the end of the program.
- Selected or indicated parenting programs that are behaviourally-based have the potential to improve parenting skills, family functioning and quality of the parent-child relationship and to reduce externalising behaviour problems and risk behaviours in vulnerable children and young people.
- Behaviourally-based parenting programs are likely to be effective for families with parental depression, multiple risk factors, marital separation or divorce, and children with externalising behavioural problems.
- High risk families are more likely to drop out of parenting programs than low risk families, so practitioners may consider implementing strategies such as motivational enhancement programs to improve participation and retention.
- Multi-component interventions that target risk and protective factors in a number of settings may lead to more positive outcomes than single component interventions, especially for high risk children.
- For some child-focused and multi-component programs, such as those to prevent child sexual abuse, bullying and anxiety, intervention should be delivered in the primary school years, prior to the transition to adolescence.
- Child-focused and multi-component programs to prevent violence, depression, anxiety and child sexual abuse should use a cognitive-behavioural or skills-based approach. Programs to prevent substance use should be interactive in content and delivery and delivered, at least in part, by peers.
- Involving parents in a school-based intervention may enhance the effectiveness of the intervention.
- Programs which aggregate high risk children and young people into groups should be avoided due to the potential negative effects of antisocial peers.
- Programs that target known risk and protective factors may lead to improvements in a range of outcomes, rather than a single outcome.
- High quality implementation of an evidence-based intervention is essential for effectiveness in real world settings.

Early intervention

Interventions delivered during the transition to adolescence are necessary in order to capture three groups of vulnerable children and young people:

- those who are currently experiencing problems but who did not receive an intervention during early childhood
- those who received an intervention in early childhood but who continue to experience problems, and
- those who are not currently experiencing problems but are at risk for developing problems during adolescence.

The findings of a recent review of early intervention strategies for children and young people aged 8 to 14 years (Centre for Parenting & Research, 2007), commissioned by the Department of Community Services, provides further insight into the services for and needs of children and young people:

Evidence for Parenting Programs

“There is evidence that universal group parenting programs delivered in the transition to secondary school are effective in preventing alcohol and substance use in young people. Relatively brief programs that focus on enhancing parenting and family communication have been found to show significant preventive effects, even 6 years following the delivery of the program and these programs demonstrate significant cost-benefits in preventing alcohol use disorders. Low-cost, self-directed parenting programs, where families work through the materials at home without the involvement of a facilitator, have also been found to be effective, at least in the short-term, in enhancing a range of parent and child outcomes.” (Centre for Parenting & Research, 2007).

Effectiveness of child-focused and multi-component programs to prevent child sexual abuse, risk behaviours and emotional or behavioural problems.

From the research reviewed, there is evidence that skills-based programs to prevent child sexual abuse are effective in changing knowledge and self-protection skills, but it is not known whether these programs also change behaviours. There is evidence that universal and targeted skills-based programs to prevent violence and conduct disorder are effective, at least in the short-term, and universal substance use prevention programs that are ‘interactive’ in content and delivery are also effective. There is presently mixed support for the effectiveness of programs to prevent bullying, school drop out and depression, and while recent research has demonstrated that cognitive-behavioural programs to prevent anxiety are effective, further research is needed.

Research suggests that school connectedness is an important protective factor for behavioural, emotional and school-related problems and there is evidence that multi-component interventions that specifically target school connectedness improve children’s academic, behavioural and psychological outcomes.

While most of the research reviewed in this paper found early interventions to have positive effects on children’s mental health and well-being, some studies have found that programs which aggregate high risk youth into groups actually increase substance use and antisocial behaviour via contact with deviant peers.” (Centre for Parenting & Research, 2007).

Effectiveness of school-based or community-based strategies

“The findings of this review demonstrate that interventions that involve home-school collaboration are effective in managing school-related problems. There is evidence that even simple one-way communication between the school and home is also effective in managing problems. There is mixed evidence to support the effectiveness of extracurricular activities, after-school programs and mentoring programs as a strategy for high-risk children and young people, although these approaches may be beneficial for low-risk children. Community programs appear to be effective when delivered as part of a multi-component intervention. However, the evidence supporting community programs as stand-alone interventions relates to early childhood,

and it is not known whether these findings generalise to children aged 8 to 14. Finally, there is a lack of research on the effects of health-promoting school interventions and school suspension and expulsion, although one study found that suspension leads to increases in antisocial behaviours.” (Centre for Parenting & Research, 2007).

Factors influencing program effectiveness and implementation

“While there is a lack of research on factors that influence the effectiveness of child-focused and multi-component programs, there is some evidence that multi-component programs are more effective than single component interventions that simply provide classroom curricula. There is also some evidence that involving parents in school-based programs may enhance the effects of the intervention.

For some programs, such as those to prevent child sexual abuse, bullying and anxiety, interventions delivered in primary school may be more effective than in high school. Interventions are effective when delivered by teachers and mental health professionals, although there is evidence that delivery by peers may be important for substance use prevention programs. The quality of implementation of an intervention has been found to be critical to its effectiveness. There are a number of factors that have been found to determine the quality of implementation, including program standardisation, using a local planning process, organisational capacity and organisational support.” (Centre for Parenting & Research, 2007).

Out of school hours care

Out of school hours care services provide a child care environment for children who ordinarily attend school. Out of school hours care can be provided before school, after school and during school holidays.

These services are the only children’s services licensed and registered by DoCS that specifically cater for children aged 9 to 14 years of age.

The definition of an OSHC service is set out in s220A(1) of the ***Children and Young Persons (Care and Protection) Act 1998***: “Out of school hours care service means a service that provides, outside school hours on school days, or at any time during school vacations, care to children who are at school”. Under the same Act a “child means a person who is under the age of 16 years” (at s3).

It can therefore be said that OSHC services cater for children from 4 years and 6 months (being the earliest age that child are generally permitted to commence school) up to the age of 16 years.

In practice however, most children cease attending OSHC once they commence high school, typically around 12 or 13 years of age. This is borne out by data from the 2004 Commonwealth Government Child Care Census which shows that only 70 children over 13 years of age attended Commonwealth funded OSHC services in NSW, from a total of 37,317 children.

The Department is committed to ensuring that children's services operating in NSW provide an environment that safeguards the health, safety and welfare of children.

DoCS is in the process of developing a regulatory framework for the NSW OSHC service sector. In February 2007 the *Children and Young Persons (Care and Protection) Amendment (Out of School Hours Care Services) Regulation 2007* was introduced as the first of a two stage process to encourage the delivery of quality OSHC services in a safe, well regulated environment.

From 1 July 2007 the Regulation required all OSHC services to be registered with DoCS.

OSHC services were not required to change any aspect of their operations as a result of registration. Operating requirements for the OSHC sector are to be introduced under the second stage of regulation.

As part of the initial registration process services were required to complete a questionnaire detailing their operations. This information, along with the *National Standards for Outside School Hours Care* and the provisions that apply to OSHC services in other jurisdictions is now being used to inform the development of the second regulatory stage.

As at the end of March 2008 a total of 2,351 operating OSHC services had registered with DoCS. Of these 1,340 services provide before/after care and 1,011 services provide vacation care. Registered services are operated by 1,110 providers, with some providers operating multiple services.

Some services are operated in conjunction with early childhood services, such as a long day care centre or as part of a family day care scheme. Services operated in conjunction with other types of children's services make up approximately 33% of the OSHC sector, with the greater part of the sector – 67% - being comprised of stand-alone OSHC services.

ARTS, SPORT AND RECREATION

Sport and recreation programs for 9-14 year olds

Outdoor Education Program

The program is offered at 11 Sport and Recreation Centres across NSW and is designed to deliver social outcomes linked to the existing curriculum - predominantly PDHPE. The programs aim to increase personal confidence, awareness, independent living skills and skills of working within a team.

Swimsafe

Swimsafe is a statewide learn to swim and water familiarisation program that has a schools based component and a community based component.

Vacation Activity Programs

Provide a safe, structured and fun environment where children and young people have the opportunity to develop new skills through participation in sporting activities that they may not have tried before or to further develop their skills in their chosen sport. Programs offered in 11 Sport and Recreation Centres and nine regional offices.

NSW Sport and Recreation (NSWSR) also provides vacation activity programs in the after-school setting and during school holidays in priority communities including Dubbo, Brewarrina, Walgett, Wilcannia.

Athlete Development

NSWSR funds 10 regional academies of sport in NSW which provide talent development to junior athletes with demonstrated potential to reach higher levels in sport.

Youth in Sport Program

NSWSR provides funding to PCYC NSW to develop and implement programs which aim to link participation in sport and physical activity to positive changes in anti-social and/or criminal behaviour for young people participating in PCYCs.

Duke of Edinburgh Award

The Duke of Edinburgh Award is a leadership program for young people 14 years and older that incorporates components in adventure, recreation and community service. The Award has three levels – Bronze, Silver and Gold.

Country Athletes Scheme

This scheme is designed to assist talented young athletes from country areas of NSW who are 17 years of age or under as at 31 December to gain access to training,

coaching and competitions similar to those enjoyed by athletes from the city. Funding is provided to over 300 athletes from more than 60 sports per annum.

A Safe Sporting Environment

Child Protection

NSWSR is an Approved Screening Agency and as such works with sport and recreation organisations and provides child protection information to the sport and recreation industry through the information line, publications, internet and training.

Presentations on child protection and advice on legislative requirements for child protection compliance are provided through training and information sessions delivered locally to sport and recreation organisations.

Education and training is delivered to all Agency personnel upon commencement of employment and child protection refresher training is delivered to staff annually. There is requirement on centre staff and regional staff to ensure that they attend this training annually.

Harassment Free Sport and 'Sports Rage' Prevention

NSWSR provides training opportunities for volunteer sport administrators, coaches, officials and participants to build skills and knowledge in the areas of:

- Member protection
- Diffusing Anger and Conflict in Sport
- Complaint Handling
- HFS overview.

NSWSR has developed a comprehensive response to this problem, together with a range of strategies, resources and training to assist sporting clubs and the community tackle sport rage. Major initiatives to address bad behaviour by players and supporters at sporting events include Sport Rage Prevention Kits for Club Committees, Dummy Spits are for Babies (CSA), Fair Play curriculum resource, and the Coloured Vest Program.

Aims to make all beginner officials easily recognisable so players, spectators and others will understand their inexperience and be more tolerant of mistakes. The program targets 12-14 year old learner officials who control games of younger children and identifies them with a brightly coloured vest. The slogan for the program is "*I'm wearing yellow, please don't see red*".

During 2007-08, 370 clubs have registered in the program with mentors and 3000 vests in use.

Fair Play Curriculum Resource

Fair Play is a curriculum resource for upper primary students (stage 3) developed by NSW Sport and Recreation and the NSW Department of Education and Training. It is linked to the Personal Development, Health and Physical Education (PDHPE) K-6 syllabus, Identity or any Social Skills Program and has been designed to assist

primary school teachers and principals to help students understand the true value of fair play, both on and off the field. *Fair Play* contains a range of fun, integrated activities, supported by professional, easy-to-use resources including a DVD

During 2007-08, *Fair Play* has been distributed to over 2600 primary schools (i.e.: 1800 public, 340 Independent, 460 Catholic schools) across the State in Term 3 2007. Follow up case studies on schools using the resource is underway.

Arts NSW

Arts NSW is committed to providing cultural programs to children and young people through the cultural institutions and cultural grants program. These programs provide young people and children with quality arts experiences that educate, challenge, inspire and create well-being.

Arts NSW through the cultural grants program supports professional arts organisations to engage with children and young people aged between 9 – 14 years via four pathways:

- Supporting the development of artistic work for children and young people as independent audience members;
- Supporting the development of artistic work with links to the curriculum for schools audiences;
- Supporting the fundamental role the arts play in the education of school children;
- Supporting participation programs led by professional arts practitioners assisting young people in skills development, cultural expression, communication and self esteem.

ConnectEd Program

Arts NSW in partnership with DET NSW established the ConnectEd Arts Strategy in 2004. This strategic program is targeted at isolated, rural and disadvantaged schools with the specific target group of students in years 5 – 8 (the middle years). The ConnectEd Arts Strategy aims to provide access to this disadvantaged group of young people through travel and ticket subsidy in attending quality performing arts and visual arts workshops, camps and performances.

Cultural Institutions

The State cultural institutions offer an extensive range of education programs and services linked to the NSW school curriculum from years K - 12, as well as specific activities, programs and workshops for children and young people across the age ranges. These include;

- Art Gallery of NSW
- Australian Museum
- Historic Houses Trust of NSW
- Museum of Applied Arts and Sciences (including the Powerhouse Museum, Sydney Observatory and Powerhouse Discovery Centre)

- NSW Film and Television Office
- State Library of NSW
- Sydney Opera House

Performing Arts Touring Program

The Performing Arts Touring program in-part supports regional tours that benefit children in the middle years and are delivered by arts organisations, youth theatre, dance and music companies who are committed to touring in regional NSW.

Companies such as Sydney Youth Orchestra, Monkey Baa Theatre for Young People, OzOpera, Fling Physical Theatre, Flying Fruit Flies, Theatre of Image and the Bell Shakespeare Company tour annually to professionally managed venues.

Youth Theatre Sector

Arts NSW supports metropolitan and regional youth theatres that are nationally and internationally recognised for providing caliber workshop and performing programs for young people aged 4 – 25 years. The Australian Theatre for Young People and the Flying Fruit Fly Circus are the peak youth theatre companies in theatre practice and circus, committed to touring regionally, nationally and internationally. Other companies such as Powerhouse Youth Theatre, Shopfront Youth Theatre and Pact Youth Theatre specialise contemporary theatre practice and offer a range of emerging artist programs for inspiring young artists. Outback Theatre (Deniliquin), Spaghetti Circus (Murwillumbah) and Tantrum Theatre (Newcastle) deliver regionally programs offering professional practice to young people and schools.

ATTORNEY- GENERAL'S DEPARTMENT

Crime Prevention Division

Tirkandi Inaburra is a program that focuses on developing resilience amongst at risk Aboriginal boys between the ages of 12 and 15. Tirkandi Inaburra houses up to 16 Aboriginal boys who stay on site on a voluntary basis for between three and six months. The programs offered during the stay are targeted to Aboriginal boys who demonstrate potential but are just starting to get into trouble or showing signs of being at risk of contact with the criminal justice system. Tirkandi Inaburra aims to teach young people how to develop and draw on their own resilience in order to take responsibility for their own lives, develop strategies to deal with their problems and minimise risk.

Tirkandi Inaburra programs:

- focus on early intervention
- strengthen cultural and personal identity and resilience in participants
- are individually tailored to the needs of each participant
- provide for structured and challenging activities
- provide best practice, culturally appropriate and pupil centred education and training which aim to provide a basis for educational success for young people when they return to their community
- have strong links with other programs and services available to Aboriginal young people and their families
- empower participants to return to their communities and links them to community-based services and networks.

The guiding principles for Tirkandi Inaburra include:

- a select school for boys with potential
- cultural relevant and involvement of elders
- confidence and resilience building
- voluntary participation
- flexible and challenging programs targeted to individual needs
- acting at all times in the best interests of the young people
- providing a safe, secure and challenging environment for young people
- active engagement of families / carers and communities
- Aboriginal community control and leadership within a working partnership with the NSW Government
- responsiveness to youth and community needs
- working in partnership with other government and non-government agencies
- equity of access across communities in the catchment area
- empowering participants to return to their communities.

Participants come from communities located between the Lachlan and the Murray and between Balranald and the western side of the Blue Mountains. The program is currently being evaluated.

Care Circles: A further initiative of the Crime Prevention Division that caters to the needs of children and young people is the proposed introduction of Care Circles. Care proceedings may be distressing and traumatic for families and additional cultural and language barriers may exist for Aboriginal families - barriers that are amplified by the historical association of the court and DoCS with the removal of Aboriginal children and young persons from their families.

The AGD has worked with DoCS to explore alternative court processes for Aboriginal care matters that come before the court. The outcome of this cooperation between the court and DoCS has been the development of the Care Circles proposal. The proposal suggests that two 'care conferences' be added to the traditional court process. Each of these conferences is attended by respected Aboriginal community members who provide local community knowledge and advice to the Children's Magistrate and DoCS on the cultural appropriateness of interim placements, services and supports provided to the family, contact arrangements and long term placements.

Alternative court processes such as Circle Sentencing and Victoria's Koori Court show that the presence of respected community members breaks down barriers between Aboriginal people and the traditional court. This gives community representatives a say about the future of Aboriginal children and young people and supplies Magistrates with additional local and cultural knowledge to base their decisions on. The AGD is currently recruiting for Aboriginal community members to take part in this initiative.

POLICE

Police Community Youth Clubs (PCYC)

Once known as the Police Boys Club, PCYC facilities today are a centre for fun, fitness and friendship, where young people can enjoy a wide range of sports, arts and recreational activities in a safe environment.

For young people brought to attention through the juvenile justice system, courts, the local police or schools, PCYC police use a range of resources and specially designed program. These often involve other agencies and professionals, the teach vital life skills live how to deal with violence, anger management, sex, health and relationship, drug and alcohol abuse self esteem, or training and employment.

PCYC aims for less truancy, less crime, more young people feeling better about themselves and more confident and socially capable.

There are 59 clubs throughout NSW with 136 different types of activity. With the support of public donations more than 1 400 kids from disadvantaged backgrounds are given free membership each year.

PCYC is the largest youth organisation in NSW with over 54 000 members, 120 police officers, 2 500 volunteers and 400 staff.

Targeted Programming

PCYC Police Youth Programmers work to reduce crime with interventions directed at young offenders, young people at risk of offending and crime hotspots.

Recent research shows a high rate of reoffending for young people brought to court with 68% returning within 8 years. The research has highlighted the danger of early onset of criminality and identification of a small group of 'chronic offenders'. The size of this group is not determined exactly but falls within the range of 5 and 12 % of all young people.

With this in mind, targeted programming focuses on three priorities: working with known young offenders, engaging young people at risk and area specific strategies for hotspots.

Mobile Activity Van

In May 2006, two Mobile Activity Vans were introduced in NSW. Each activity van has been assigned a specific town and region, the first being Newcastle and Lake Macquarie. Each van is equipped with the latest sporting equipment, computers, X Boxes, BBQ facilities and storage areas.

The second van visits identified hotspots in Walgett and offer the young people a range of alternative fun activities, build rapport with police and reduce the number of criminal offences.

Youth Liaison Officers

A designated Youth Liaison Officer (YLO) position has been established in each Local Area Command. The YLO is specifically responsible for supporting the implementation of the *Young Offenders Act 1997*. Education of police, making determinations under the Act, issuing police cautions, liaising with officers of the Department of Juvenile Justice in the referral of young people to Youth Justice Conferences and maintaining quality control are some of the tasks associated with supporting the Act

YLOs work closely with relevant police to monitor and respond to juvenile crime. Developing profiles of serious juvenile offenders, mapping the location of juvenile crime and the development of strategies to reduce crime are key responsibilities of YLOs. The position is responsible for dealing with issues such as education, diversionary and interagency programs pertaining to youth, with the aim of diverting young people away from criminal activity.

The Youth Strategic Plan 2009/2007 represents a coordinated approach to guide the work of the Youth Issues Advisory Group in ensuring a coordinated corporate approach to broader youth issues facing NSW, promoting the diversion of offending young people and supporting Youth Liaison Officers as they work with young people and with other commands.

The plan recognises the role of other agencies, particularly the Department of Education and Training and the Department of Juvenile Justice in our work so that at times these agencies may also be involved in providing support to YLOs through joint training activities, the provision of educational material or through joint operations.

The NSWPF Youth Policy Statement (2001-2005) specifically applies to young people between the ages of 10 and 18 years of age. The principles and spirit of the policy apply to children and young people of all ages. It aims to ensure that young people across the State are treated appropriately regardless of how they come into contact with police, whether as victims, offenders, witnesses, through ongoing programs or at a PCYC. This policy is currently under review.

The YLO Development Course comprises a 5 day program which has been designed to provide new YLOs with relevant information, knowledge and skills relevant to the position.

Each year, in August, NSWPF holds a Youth Liaison Officers' Annual Conference. The Conference is an opportunity to learn more about current and developing issues and options in crime prevention. Importantly, the conference is also a chance to meet, talk and network with other YLOs from around the state. The conference outlines best practice in crime prevention activities, which are showcases by YLOs.

School Liaison Officers

In 2007 the NSW Police established the School Liaison Police Program with 40 officers working with schools across NSW. This initiative is designed to improve the

relationship between high school children and reduce the incidence of their involvement in crime, as either victims or offenders.

School Liaison Police (SLP) are appointed to a LAC and will cover schools within several LACs within that region. SLPs work within high schools to help prevent students from becoming involved in crime. SLPs visit every school in their area at least once per year to build comprehensive links with school and are also tasked to focus on school areas identified as higher risk. School tasks are shared between the SLP program and the YLO program; so that the base line tasks in the lower risk areas are managed by the YLO.

The purpose of the program includes:

- Reduction in youth crime through a range of intervention and diversionary strategies, education programs and local relationships
- Reduction in the number of school aged children involved as either victims or offenders
- Reduction in the incidence of violence in schools
- Strengthening relationships between police and school aged children
- Improvement in the identification and targeting of 'at risk' youth

The SLP Program is aimed at high school students only, ranging from years 7 to 12, including those older than 14.

Crime Prevention Officers

NSW Police established Crime Prevention Officers (CPOs) in 1997 to work with the community to reduce local crime. They play an important role in coordinating government, non government and community agencies at the local level to develop strategies and solutions to tackle the social and economic causes of criminal behaviour.

CPOs assist local area police commanders to develop and implement operational policing programs and work with other police liaison officers. As part of the NSW State Plan, CPO duties include:

- Conducting safety audits
- Implementing prevention projects
- Coordinating volunteers to assist police
- Liaising with local schools and councils
- Community Safety Precinct Committees
- Informing the public about personal and property security

All 80 local area commands have a CPO working closely with the community.

The NSW Government has developed a Crime Prevention Framework which substantially refocuses strengths and coordinates activities at both State and local levels which aim to reduce crime levels, deter criminal activities, increase community safety and minimise the occurrence of anti social behaviour. The Crime Prevention Framework will support the NSW Government to work with the community to

reduce crime and anti social behaviour. It will ensure a coordinated approach to the achievement of crime reduction goals identified in the State Plan.

Aboriginal Strategic Direction

The NSWPF Aboriginal Strategic Direction (ASD) is a working document that identifies where police can have a significant input to decrease the over-representation of Aboriginal people in the criminal justice system. The ASD guides police in its management of Aboriginal issues and seeks Aboriginal community ownership and involvement through a consultative and proactive approach.

To implement the ASD, a corporate Aboriginal budget has been established that provides funding to LACs to develop Aboriginal specific crime prevention initiatives. These crime prevention programs address a range of anti social behaviour issues. Programs provide rewards for 'good' Aboriginal children and young people as well as programs to divert Aboriginal young people who have come under police notice. These programs include:

- **Aboriginal Cultural Camps** – Police YLOs and ACLOs provide the opportunity for Aboriginal children and young people to visit Aboriginal cultural sites and learn about their own cultural heritage.
- **Youth Crime Camps** – aim to break down barriers between youth and police and improve understanding between Aboriginal children, young people and police.
- **Operation Beacon** – is a mentoring project which focuses on assisting Aboriginal young people to attend school.
- **Giyaali Program** – A crime prevention initiative established through partnership with DOCS, DET and Police. Giyaali identifies young people at risk and provide them with an opportunity to meet Aboriginal people in other government and non government agencies across NSW. Employment and career options are discussed. Participants sign a 'contract' to improve their behaviour and school attendance as part of a reward program.
- **Wanga Idngii** – similar to the Giyaali program however Wanga Idngii aims to provide opportunities for young people who have not come under police notice to develop leadership skills. In late 2007 participants were provided the opportunity to walk the Kokoda Trail in memory of past Aboriginal servicemen and women.
- **Youth Advisory Committee** - provides for young people to have input into youth programs and discuss how NSWPF addresses issues involving Aboriginal young people.
- **Mobile PCYC** – attends rural and remote communities where an established PCYC does not exist. Children and young people work and interact with police personnel through a range of structured activities. Young people are

afforded the opportunity to gain skills and knowledge to acquire a drivers licence.

- **Blue Reelers** – provides Aboriginal children and young people in rural / remote locations to see recently released movies. This initiative has proven to prevent antisocial behaviour when the movies are shown.
- **PAST Program** – an initiative between police and Street Beat to engage repeat runaways and young people at risk. The aim is to improve relationships, allow young people to identify positive role models and for young people and police to build rapport with each other.
- **Good Kids Program** – designed to assist in the reduction of petty crimes and to improve school attendance.
- **Healthy Choices/Healthy Lifestyle** – designed to develop Aboriginal young people's knowledge about healthy lifestyles which will be achieved through holding cultural and general lifestyle activities.
- **Back on Track** – designed to direct Aboriginal young people at risk of offending away from committing crime and to assist youth to gain and develop skills needed to make informed decisions in their life.

DISABILITY SERVICES

Peer support networks

The time of change during the target age group can be more profound socially for children with a disability. The need for both belonging and independence can strain interpersonal relationships and lead to children with disabilities being marginalised. Positive support is important as well as relationship guidance to help navigate this period.

DADHC has allocated funding to three demonstration projects to establish peer support networks for children and young people with a disability including those with autism. These projects will focus on building social skills for effective interaction.

Transitioning from primary to secondary school

The primary/secondary school transition is difficult for all children and made all the harder for children with a disability. Information and preparation for families is vital at this time. It is also important for families to start planning for their child's future needs. Greater independence can be of particular concern in the context of safety and wellbeing. DADHC is developing a resource kit for families to help manage the transition period.

Community participation and recreation

DADHC has established a new demonstration initiative, *My Time – After School and Vacation Support for Working Parents*. It is aimed at secondary school children and will provide meaningful and positive experiences for adolescents with a disability to participate in community and recreation.

DADHC is also finalising a partnership project with NSW Sport and recreation to trial a 'Leisure and Lifestyle' Program for adolescents with a disability.

Specialist services

The department also provides a range of specialist disability services including information, support networks, therapy, respite and case management.

TRANSPORT

A range of programs recognise that particular groups require assistance to access the transport system, or that the public interest is served by supporting particular groups. Young people are a key target of these endeavours.

Age/School concessions

There are a range of benefits for children of various ages including free travel for children under 4 years of age and half fare concession for those under 16 years of age.

When travelling to and from school students can receive free public transport based on their age and distance (either radial or by best walking route) from home

- Infants School – regardless of distance
- Primary School – more than 1.8km radial or 2.3km walking
- Secondary School – more than 2km radial or 2.9km walking
- TAFE students under 18 – more than 3.9km walking

The Private Vehicle Conveyance Scheme can provide subsidy to parents for transporting children to school in cases where there is no public transport.

Community Transport Program

This program aims to address transport disadvantage at the local level through community transport solutions and particularly focuses on people or communities who experience disadvantage as a result of mobility, age or isolation.

The age criteria includes those preschool aged travelling with an adult who experience problems accessing conventional transport systems and young people up to 17 years of age who need to travel more than 1.6km to community facilities and resources which are not available within the hours when conventional public transport operates.

Area Assistance Scheme

The Area Assistance Scheme is administered through DoCS. It facilitates and supports community development and the integrated provision of services in regions undergoing rapid urban growth or change

The Ministry of Transport is involved in evaluating projects under the program and in funding successful transport projects. The program provides indirect benefits to children in the target age group through improved community and neighbourhood facilities.

Regional Transport Coordinator Program

There are 11 regional transport coordinators working on practical and viable transport solutions aimed at addressing local transport disadvantage.

Many of the recent grants have targeted youth in rural, regional and remote communities such as the Far West, Orana and North Coast. Transport funding has enabled them to travel to sporting, recreation, health, community and school holiday activities.