The State Of Victoria’s Children Report 2016: why place matters

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# MINISTER’S FOREWORD

This year’s State of Victoria’s Children Report explores how the outcomes for many Victorian children and young people can be different according to where they grow up.

Victoria is a great place for children and young people to live. However, their progress against developmental milestones and their outcomes in later years are impacted by where they live, amongst other factors.

This report focuses on all aspects of a child’s life, from early childhood education, to school, to further education and employment. It outlines key policies and programs of government that are focused on place-based responses to challenges that impact the outcomes of children.

The value of this report is that it provides evidence to understand how Victoria’s children and young people are faring from a perspective of place, with a focus on their health and wellbeing, their safety, their education and academic achievement, and their economic participation.

The Andrews Labor Government recognises the importance of early childhood education as evidenced by the creation of a standalone portfolio for Early Childhood Education. Good quality early childhood education is critical to a child’s future wellbeing and learning.

The Education State Early Childhood Reform Plan: ready for kinder, ready for school, ready for life, released in May 2017, invested $202.1 million in services across the state to better support Victoria’s young children when they need it most. It is a comprehensive response to the overwhelming evidence that learning starts at birth and represents the single largest investment in early childhood from a state government ever.

It is a vital step in achieving the Government’s ambition to making Victoria the Education

State, where all children and young people are supported to gain the personal and practical skills they need to thrive, regardless of their start in life.

The large majority of children and young people in Victoria fare well. While the report highlights areas in Victoria that are experiencing challenges, it also celebrates and showcases the many government local interventions that are making a difference in all Victorian communities.

It provides a snapshot of outcomes for Victorian children, and is invaluable for policy and program development at all levels of government, as well as in the community and not-for-profit sector.

Victorian children are the future of our State and our collective responsibility to support young children and their families will ultimately lay the foundation for a bright future for all Victorians.

Governments and organisations that focus on improving their outcomes can help to build a generation of Victorians who have improved health, education and economic participation.

This report provides the building blocks for understanding the current state of Victoria’s children, and the important work that is already underway to support and improve their outcomes.

Hon Jenny Mikakos, MLC

Minister for Families and Children

Minister for Early Childhood Education

Minister for Youth Affairs

# EXECUTIVE SUMMARY

The children and young people of Victoria today are growing up in a world vastly different than that of generations before them. In the past few decades our social and economic environment has changed significantly. Social relationships are changing, adapting to a world more increasingly reliant on virtual boundaries and less reliant on physical surroundings. Family structures are changing, as are family circumstances.1 Jobs in the more traditional sectors are now giving way to employment prospects generated by new and emerging industries. Skills and capabilities need to change to align with this shift.

Within this changing environment, some things have remained the same. Many Victorian communities across the state face similar problems; problems which can impact on the developmental outcomes for their younger citizens.

Children continue to be challenged in aspects of their development; at a minimum, one in seven Victorian children begin school with a developmental vulnerability. While attendance for students in Victorian government schools remains high nation-wide, students across the state are still missing school, and at increasing rates. Adolescence remains a time where risky behaviours, such as smoking and alcohol consumption, begin or are consolidated: proportions of young people reporting that they have smoked in their lifetime increased across the majority of areas across Victoria, but decreased for alcohol consumption. Many areas of Victoria are seeing a rise in the proportion of students reporting less physical activity and more screen time. Youth unemployment remains an issue. Family violence is an issue that can affect any family, and affects many, with reported incidences increasing in areas across Victoria.

There is great diversity across the Victorian population. The 2016 Census showed that Victoria’s population is among the fastest growing and most diverse in Australia, with some parts seeing greater growth than others. This growth, mainly concentrated in metropolitan areas and major cities, provides benefits through greater opportunities and access to services. As growth is concentrated in certain areas, so are the benefits.

The demographic mix of our younger population is in a state of change. Children and young people in Victoria (up to the age of 24) now make up nearly one-third of the total population, with numbers in this age group increasing by nearly eight per cent over the last five years. Victoria’s Aboriginal population of children and young people aged up to 24 increased to just under 25,000 in 2016, an increase of 20 per cent since 2011, now making up just over half of the total Aboriginal population. Estimated numbers of students with a refugee background are on the rise. Areas in Greater Melbourne are seeing greater increases in population than regional areas, and there is greater diversity in backgrounds and individuals’ needs than ever before:

* One in six children and young people (aged one to 19) in Victoria were born outside Australia
* One in four speak a language other than English
* Nearly one in five children and young people are reported to have special care needs
* Just under three per cent of the population aged under 19 have a need for assistance with core activities.

By its very nature, diversity brings difference. This is something to be celebrated, with areas and communities each having their individual strengths and unique opportunities. Regional and rural locations offer a strong sense of community engagement and participation, and families, children and young people in these areas report a higher feeling of community safety. Children and young people growing up in major cities and metropolitan areas can enjoy access to a greater breadth of services and opportunities than those in more remote locations. However this diversity and difference also brings challenges. There is a major body of evidence that social and economic disadvantage is increasingly concentrated in particular places, making inequality based on place a leading contributing factor to an individual’s outcomes.2 In short, place matters.

How do we know this? The 2016 State of Victoria’s Children Report consolidates the evidence that outcomes for Victorian children and young people can be different according to where they grow up. Sometimes this difference can be positive, sometimes not. We can see differences in outcomes at a very early age, and these differences can continue to have an impact on a child’s life through school and beyond. This report looks at development outcomes for children and young people ranging from the early years through school and onto post-school destinations, and covers aspects of health and wellbeing, safety, and the economic environment Victoria’s children and young people are living in.

Note: Throughout the report references to changes over time across various indicators reflect a change in absolute numbers/terms rather than statistically significant changes.

**EARLY CHILDHOOD**

Children living in some areas of Victoria are at greater risk than others of poor development. According to the Australian Early Development Census (AEDC), a triennial assessment of children beginning school, those living in the most disadvantaged areas are more likely to be developmentally vulnerable. Analysis shows that these children are less likely to perform well on national testing of literacy and numeracy (National Assessment Program - Literacy and Numeracy, or NAPLAN) than other children in their year level who are developmentally on track.

Information collected from parents through the annual School Entrant Health Questionnaire (SEHQ) shows that Prep-aged children living in regional areas have a higher likelihood of beginning school with speech and language difficulties. In some areas, this is at a rate nearly double that for other children starting school. Children who start school with speech and language issues are at greater risk of poorer academic outcomes, but also three times as likely to have issues with their social and emotional development as well.3

The Maternal and Child Health (MCH) service is available for all Victorian children from birth until they enter school. Through the Key Ages and Stages visits (KAS), MCH nurses are in a unique position to provide much needed early support to all Victorian families, and to identify those who need extra help. Attendance at the KAS visits steadily declines from the home visit shortly after birth to the 3.5-year old visit. Some families are less likely to attend the last visit than others. At a statewide level, for example, the drop is more prevalent for Aboriginal families. At a local level, families in some areas of Greater Melbourne have greater declines in attendance leading up to this last visit.

Kindergarten participation, widely held to be an enabler of positive childhood development, is quite high across the state; in 2016, more than nine out of ten Victorian children attended a kindergarten program in their year before school. This continues a historically high pattern of strong engagement. Participation rates show that children in regional areas are more likely to participate in a kindergarten program.

Good quality early childhood education and care settings are linked to strong outcomes for children’s wellbeing and learning. Assessments of service quality under the National Quality Framework (NQF) show that, on average, Victoria provides a high level of education and care for our younger children; eight out of ten services assessed to December 2016 were meeting or exceeding the National Quality Standards (NQS). Higher ratings were concentrated in certain areas, particularly eastern areas of Victoria. The recently completed E4Kids study identified a number of equity issues in early childhood education and care access and service quality. At the time of the study, it was found that the quality of service provision in low socio-economic areas was of lower quality when compared to services in other areas.4

Government priorities recognise how important the period of early childhood is to establishing positive outcomes in later life, and recent investments reflect this. The Education State Early Childhood Reform Plan: ready for kinder, ready for school, ready for life is investing a record $202.1 million to help every Victorian child thrive.

This is the largest single investment from a state government in early childhood ever. Funding has been heavily directed towards increasing the quality and accessibility of kindergarten programs and providing more support for parents and families, with a strong focus on the expertise of the MCH workforce. This investment will help to build an early childhood system that is high quality, equitable and inclusive of all children and families. It will lift outcomes for all children, but particularly those children and families who need extra support.

**EDUCATION**

Students attending government schools in Victoria’s regional areas are more likely to miss school through unapproved leave and chronic absences. Students in some of these areas are more than two and a half times as likely to take unapproved leave from school as students in areas closer to Melbourne, and higher proportions of students miss more than 30 days of school per year (defined as chronic absence). This is likely to be a reflection of many factors, which may include a student’s mental and physical health, family circumstances and other presenting issues that impact on students’ connectedness to school. Government school students across Victoria, in both primary and secondary school, report varied feelings of positive connection to their school.

In 2016, Victorian students continued their high performance in NAPLAN, achieving results above the national average. The distribution of performance across the state shows that geographic location can be associated with performance. Students attending schools in regional and rural areas demonstrate poorer academic achievement compared to students in major cities, with the gap growing to as much as two years of learning growth over the span of NAPLAN testing.5 This is not solely an issue in Victoria; Australia-wide, NAPLAN results are generally better the closer a student is to a major city.

Many students in regional and rural areas of Victoria have lower levels of engagement, higher absenteeism and poorer academic achievement. Higher proportions of students from these areas also leave school early.

For students who do complete Year 12, their choice of post-school destination appears different depending on where they live. Lower proportions of young people finishing school in regional areas continue with further education (50 to 70 per cent compared to 75 to 90 per cent of Year 12 completers in areas of Greater Melbourne). There are many reasons for this, some of which may be a lack of access to higher education and/or training facilities, intergenerational attitudes and beliefs about post-school education, or the existence of immediate employment opportunities.

The Education State’s aim is clear: to build a world-class education system that transforms Victoria into the Education State. The Victorian Government has invested five billion dollars in Victorian students, to see each and every one reach their full potential. There is a focus on improving all students’ performance in key learning domains - reading, mathematics and science, as well as building foundations in future-looking skills and capabilities such as critical thinking, the arts, physical education and resilience.

In addition to achieving excellence, the Education State aims to achieve equity. Education can be a fundamental pathway to financial independence, improved self-esteem and wellbeing, and social inclusion for all students. However, research shows that students from disadvantaged backgrounds are at greater risk of achieving poor educational outcomes. ‘Breaking the Link’ between disadvantage and poor educational outcomes is a pillar of the school reforms. To break this link, the Education State targets aim to reduce the gap in achievement between disadvantaged and other students, and to halve the number of students dropping out of school between Years 9 and 12.

**HEALTH AND WELLBEING**

Good health and wellbeing can start early through pre- and post-natal maternal care. On average, nearly one in two Victorian babies is exposed to alcohol in utero, and this proportion varies markedly across areas. Proportions of Victorian babies born at a low birth weight, an indicator of post-natal health, vary slightly across the state.

Immunisation programs are an effective way of reducing the spread of some diseases and protecting the community against outbreaks of potentially serious health issues. In 2015-16 the proportion of Victorian families choosing to immunise their child generally increased, following slight declines in recent years. Lower proportions of children in areas of Greater Melbourne are up to date with their vaccines.

There are important differences across the state in the health of Victorian children. Teachers assess one in every ten Prep students in some areas as vulnerable on the AEDC physical health and wellbeing domain, compared with one in 20 students in other areas. Proportions of older students (Years 5, 8 and 11) reporting a special health care need, meaning they need support over and above that required by young people generally, vary across the state.

Nearly ten per cent of all Victorian Prep children have parents that identify them as being at high risk of emotional and behavioural difficulties. These children face poorer academic outcomes as they move through school; analysis has shown that difficulties in regulating emotions and behaviour at school entry can have a negative impact on results on NAPLAN in Year 3.6 Children starting school in Regional Victoria are more likely to be at higher risk of emotional and behavioural difficulties, with rates in some regional areas at times more than twice that of other areas, mostly those in Greater Melbourne.

As a whole, young people in Victoria are showing some signs of declining good health; lower proportions are exercising regularly and higher proportions are in front of screens on a daily basis. Approaches to nutrition could be dramatically improved, with one in ten students in Years 5, 8 and 11 reporting that they eat the daily recommended serve of fruit and vegetables (Victorian Student Health and Wellbeing Survey (VSHAWS), 2016). There are positive signs in some regional areas, with students reporting increased physical activity and less use of electronic media.

Adolescence can be a difficult period of development. It is a time when young people begin to assert more control over their actions. This could mean establishing positive, or negative, health behaviours. Results from the most recent VSHAWS (2016) show that students across Victoria are dealing with different challenges to their health and wellbeing: students in Regional Victoria are more likely to report alcohol consumption or tobacco use, while higher proportions of students in Greater Melbourne report drug use. This is a pattern consistent with results from the previous survey in 2014.

There are signs that mental illness and low levels of resilience are increasing in prevalence for students not only in Victoria, but nationwide. In 2016, nearly 20 per cent of Victorian students surveyed through the VSHAWS reported that they had depressive symptoms.

Over the past two years some areas across Victoria have seen increases in students reporting depressive symptoms and decreases in students reporting high levels of resilience. Resilient students have the skills to tackle life challenges, face adversity, and reach out for help when they need it. The Education State reforms seek to increase the proportion of students who report high levels of resilience.

A life-course approach to health and wellbeing shows that at certain times of our lives, some factors are more influential than others. The early years are very important in setting up the foundations for future health and wellbeing and are critical for identifying any factors that may adversely impact a child’s development.

Adolescents go through a period of rapid emotional, physical and intellectual change, so it is important to establish positive health and wellbeing behaviours which will follow them into adulthood. Viewing health and wellbeing in such a way means that there are multiple points for intervention across the life course, and points where particular interventions will be more effective than others.

The Victorian public health and wellbeing plan 2015-2019 sets out a long-term agenda to improve all Victorians’ health and wellbeing based on a life-course approach. The plan identifies six priorities based on an analysis of the multiple contributions to health and wellbeing: healthier eating and active living, tobacco-free living, reducing harmful alcohol and drug use, improving mental health, preventing violence and injury and improving sexual and reproductive health. It also outlines three implementation platforms for change: healthy and sustainable environments, place-based approaches and people-centred approaches.

Victoria’s 10-year mental health plan sets out a long-term vision for mental health and wellbeing across all stages of life, from infancy to old age. The plan seeks to equip children, young people and their families with the tools to manage their own mental health by recognising and promoting the importance of support networks. This will be underpinned by a collaborative approach across the spectrum of services for children and young people, including schools, health, mental health and other social and community services.

**SAFETY**

Safety and security within the home and learning environment are fundamental for children and young people to be able to thrive. Providing a safe environment from an early age is central to attendance and engagement in education and other community-based activities. Children exposed to early risk factors have poorer outcomes. These risks include income poverty, lack of stable housing and living in unsafe environments, which includes exposure to family violence.

Rates of reported family violence incidents by parents of Prep-aged children show some geographical differences when it comes to exposure of children to family violence. This demonstrates a higher likelihood that children of this age in regional areas will be exposed to family violence. Data collected through Victoria’s Crime Statistics Agency (CSA) show that rates of family incidents with children of all ages present reported to police are higher in areas closer to Melbourne.

The majority of Victorian parents and young people perceive their neighbourhoods to be safe, with this sentiment felt more widely in Regional Victoria than in Greater Melbourne. Some groups of young people are less likely to report feeling safe, including Aboriginal students and those from a language background other than English.

Bullying has severe consequences for reducing the safety of children and young people, and can have pronounced negative personal, social and educational impacts - up to one in two students report bullying in Victoria (VSHAWS, 2016). Among those students more likely than others to report being bullied are Aboriginal students, female students, and students with a language background other than English. Young people who are Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) also experience high risks of bullying.

Research indicates that children who are placed in out-of-home care (OOHC) are at greater risk of poorer educational outcomes than those in the broader community. Victoria’s rates for all children receiving this care has been consistently below the national average over the last five years, however over this time, there has been a steep increase in the rate for Aboriginal and Torres Strait Islander children. As at 30 June 2016, over 8,000 Victorian children were in OOHC, with numbers spread across the state.

Ending family violence is a priority of governments across Australia. In 2016 Ending Family Violence: Victoria’s plan for change was released. The plan, which responds to all the recommendations of Australia’s first Royal Commission into Family Violence, outlines the 10-year strategy required to achieve a state free of family violence. These strategies focus on prevention (formation of a prevention agency), support (improved access to housing or safety hubs for the ongoing safety of affected women and children) and legislation.

Ending Family Violence: Victoria’s plan for change aligns with another significant government reform, the Roadmap for Reform: strong families, safe children. Focusing on protecting Victoria’s vulnerable children, young people and families, the Roadmap for Reform is a once in a generation transformation of the child protection and family services sector to focus on early intervention and prevention rather than a crisis response.

**ECONOMIC ENVIRONMENT**

Victoria has been experiencing pronounced and sustained economic growth for some time, but the benefits of this growth do not appear to be evenly spread across the state. Our population has been rapidly growing; the recent Census places Victoria among the top three fastest growing states. However, this growth has been primarily driven by Melbourne - currently the fastest growing capital city in Australia - and caused in part by an influx of interstate and international migrants, and those moving to the capital from regional areas within Victoria. By contrast, Regional Victoria has not been growing at the same rate, with some areas experiencing a decline in population growth.

Victoria’s communities are unequal in terms of distribution of income, housing and employment. Some areas, generally those located near to major cities or regional centres, have lower proportions of low-income, welfare dependant families. Over the long term, there has been growth in casual, part-time and fixed-term employment arrangements, potentially resulting in future financial insecurity.

Housing affordability and availability in Victoria is also declining, with the rapidly rising prices of houses and escalating rents. While houses in more remote areas are generally more affordable than those in metropolitan areas, this could still prove to be a source of financial stress for owners or tenants with low incomes or unemployment.

The move away from large-scale manufacturing has also resulted in rapid change to Victoria’s economy. There are widespread implications for workforces which depend on these industry sectors, and Victoria’s young people will now require the skills, knowledge and qualifications necessary to navigate the job market of the future.

Victoria’s Regional Statement outlines the Government’s approach to providing a bright start and future for young people, families and communities located within Victoria’s regions. The statement acknowledges the significant contribution Regional Victoria makes to Victoria’s economy and the urgent need to tackle pockets of entrenched disadvantage and disparity in some parts of the state. It is built on the Victorian Government’s recognition that every region is different and that governments need to listen and work directly with local communities to better serve their needs.

Its centrepiece is the establishment of nine Regional Partnerships across Victoria that are working with communities to identify the strategic priorities for their regions, and feeding these straight into government to inform decision making. The establishment of the partnerships highlights the recognition that regional communities are diverse, with distinctly complex challenges and opportunities, so a regionally centred approach is necessary. It also highlights the Government’s commitment to working with communities to provide Regional Victorians with a direct pathway into government decision making across all areas of policy and service delivery.

Another example of place-specific interventions is the establishment of Children and Youth Area Partnerships (Area Partnerships). Established in eight locations across Victoria, Area Partnerships are working to ensure all children and young people grow up happy, healthy, resilient, engaged and able to reach their potential. The breadth of work of these Area Partnerships reflects the diversity and complexity of need across Victoria.

Drivers of vulnerability vary from place to place and shift over time. Reflecting this, the work of Area Partnerships is across the lifecycle of children and young people, from pre-conception to 24 years. Six Area Partnerships have a focus on driving work to improve outcomes in the early years - for example Inner Gippsland is focused on strengthening the capacity of parents to support the health and development of their children. Other partnerships are focused on school, for example Central Highlands is working to increase the number of young people completing Year 12 or equivalent and Southern Melbourne is working to increase engagement in primary school by children in OOHC. The Outer Eastern Melbourne Area Partnership has a focus on improving the employment, housing and social connectedness of young people leaving care.

These two approaches highlight the rationale for place-based responses to complex and at times interconnected issues. What may work in one community may not work in another. The suite of government reforms outlined throughout this report recognise the importance and role of place-based interventions alongside improved universal services for all Victorians.

INTRODUCTION

The annual State of Victoria’s Children Report provides the Victorian community with a comprehensive and balanced picture of how our children and young people are tracking against a range of outcomes. These outcomes reflect what matters most across the life course, beginning in early childhood, and progressing through school and into post-school destinations. Each year, the Children’s Services Coordination Board provides this report to the Victorian Minister for Families and Children.

While the report presents data and evidence across chosen outcomes for all Victorian children and young people, it also focuses on groups that are more likely than others to be experiencing challenges. This can be for a variety of reasons, one of which may be where they live. That is why this year’s report looks at the impact of place on outcomes for younger Victorians. It considers how a child or young person’s physical surroundings can and do shape their progress against developmental milestones and their outcomes in later years.

The outcomes this report highlights are loosely grouped into four themes (early development and education, economic environment, health and wellbeing and safety); loosely grouped because of the interconnectivity between them. Positive signs in early development and education outcomes cannot exist where good health and wellbeing and a safe environment do not. The economic environment can underpin the health and wellbeing and feelings of safety of individuals. Levels of education of individuals can, in turn, affect the economic environment of that community. And so on.

Why place? Human beings develop according to their environment.7 We know that where people live, work and play has a major impact on their life. We also know that the people themselves can shape their surroundings.

The economic, social and physical environment of today is in a state of great change. Historically profitable industries, many based on manufacturing, are now giving way to a knowledge economy, driven by innovation and information technology. Traditional ideas of community are being altered by an increasingly virtual world, and the composition of families and family circumstances are changing. Place can make a difference to how communities are responding to this change.

Evidence shows that place can contribute to differences in outcomes across a range of factors, with some locational characteristics proving to be more advantageous than others. These include access to public transport and basic services such as healthcare and education, employment opportunities and a strong sense of community.

As a whole, the children and young people of Victoria are healthy, happy and achieving good outcomes at school. Engagement with early childhood education and care (ECEC) services is high, as is the quality of service provided. Signs of positive health in the early years are widespread; very high proportions of children engage with their MCH nurse in the early stages, however this does decrease as children get older. Immunisation rates have increased over the last year, though they could increase further.

The majority of Victorian children begin school ready and able to learn, with no signs of impediments to their development. Victoria performs well against the AEDC, however one in five Prep-aged children is assessed as developmentally vulnerable on one or more domain included in the Census. Enabling children to reach the highest levels of development in the early years remains a priority across government.

As children get older some may begin to disengage from school - a marker of adolescence - though most students are attending school and performing well. Victorian students are continuing their strong performance in national testing of literacy and numeracy, although improvements in performance are more visible for younger students.

Increasing rates of mental illness and youth unemployment are issues that are becoming more prevalent in many communities across the nation, including Victoria. Other risk factors more commonly associated with adolescence, such as incidences of risk-taking behaviours, are also rising slightly.

Recent years have seen a slight increase in the proportion of parents reporting that their child has been witness to an incidence of family violence. There have also been increases in numbers of children interacting with child protection services.

This is the Victorian story. At a more granular level, the data and evidence show signs of inequality across a range of outcomes for children and young people living in different areas of Victoria. Place is one of the many, interconnected, factors that contribute to this. Differences emerge largely, but not exclusively, between regional areas and those closer to Melbourne in terms of child development, academic achievement, feelings of safety and signs of positive health and wellbeing. The influence of changing economic environments, some substantially more than others, must also be considered here.

This report presents 2016 data (or the most recent available) at both a statewide level and for the 17 local service area levels shared by the Departments of Health and Human Services (DHHS) and Education and Training (DET), as shown in Figure 1.

**Figure 1: Victoria’s 17 local service areas**

| **Local area** | **Local area** | **Local area** | **Local area** | **Local area** |
| --- | --- | --- | --- | --- |
| Mallee | Ovens Murray | Inner Gippsland | Barwon | Outer Eastern Melbourne |
| Loddon Campaspe | Goulburn | Southern Melbourne | Central Highlands |  |
| Hume Moreland | Inner Eastern Melbourne | Bayside Peninsula | Western Melbourne |  |
| North Eastern Melbourne | Outer Gippsland | Wimmera South West | Brimbank Melton |  |

Source: DET

Analysis of data at this level is intended to show where place is having an impact on selected outcomes for children and young people in Victoria. The analysis presented for individual outcomes throughout this report does not control for other known indicators of community disadvantage - for example, social distress, health, community safety, economic and education. Many of these are concentrated in certain geographic locations8, and the cumulative effect of these factors may exacerbate some, if not all, issues.

The idea of whether children in regional areas experience a ‘tyranny of distance’ (differences in development due to remoteness) or a ‘tyranny of disadvantage’ (differences in development reflecting the evidence that many regional areas are disadvantaged when compared to cities) has previously been examined.9 This report does not explore the extent to which this is occurring, but evidence suggests that: (a) disadvantaged children and young people have poorer outcomes than others; (b) they are more likely to exhibit certain (mostly known) characteristics; and (c) place is a contributing factor to this.

For the purpose of many comparisons throughout this report, areas have been classified as areas of Greater Melbourne or Regional Victoria (based on the Australian Bureau of Statistics (ABS) Greater Capital City boundaries). This classification has been selected as it recognises that areas within Regional Victoria share certain geographic, social and economic characteristics, as do those in Greater Melbourne. It is however not intended to solely show differences between regional areas and those located closer to Melbourne.

**Table 1: Local service areas - Regional Victoria and Greater Melbourne**

| **Areas of Regional Victoria** | **Areas of Greater Melbourne** |
| --- | --- |
| Barwon | Bayside Peninsula |
| Central Highlands | Brimbank Melton |
| Goulburn | Hume Moreland |
| Inner Gippsland | Inner Eastern Melbourne |
| Loddon | Outer Eastern Melbourne |
| Mallee | Western Melbourne |
| Outer Gippsland | North Eastern Melbourne |
| Ovens Murray | Southern Melbourne |
| Wimmera South West |  |

While this report does highlight areas that are experiencing challenges, it also celebrates those that are seeing success, and showcases relevant government interventions that are making a difference in all Victorian communities. The aim of the report is to focus on the role of place in shaping government policy, rather than to single out communities.

A focus on place recognises the extent to which an individual’s life outcomes, in the short and long term, are affected by their immediate surroundings. This includes both the physical environment - for example, location and access to basic services - and the social context, which includes social supports within local communities and a sense of social inclusion.

Some communities face greater hardships than others by reason of locational disadvantage. These communities may be at the heart of greater social or economic change, such as the recent shift away from the manufacturing and automotive industry to industries heavily reliant on innovation and information technology. Unaddressed, this disadvantage can flow through the generations, evidenced by continuing levels of low school attainment, high unemployment, poor health, high crime rates and family violence.10

Such complex environments need an integrated approach to deliver the appropriate supports. Place-based responses or interventions are one way for government and communities to work together to deliver this.

Put simply, place-based responses are coordinated and collaborative approaches to address issues within a geographic space. This can range from local neighbourhoods or communities to metropolitan cities or even states. Such an approach across service delivery agencies enables better integration of service systems that can more readily respond to the needs of families and communities.

The aspect of place recognises that many key drivers of complex problems are quite specific to the context in which they operate. While two communities may be facing the same challenge, they are not facing it within the same physical and social settings.

Place-based responses allow the unique strengths of communities and places to deliver solutions that are not only effective and efficient, but also relevant and sustainable. This enables local knowledge and innovation to be captured and ownership of solutions to remain at the local level.

The Victorian Government is taking a place-based approach to understanding the local priorities of different communities to better inform its decision making. Examples of this coordinated, place-based approach are the eight Children and Youth Area Partnerships, the nine Regional Partnerships, and the six Metropolitan Partnerships across the state.

**CHILDREN AND YOUTH AREA PARTNERSHIPS**

Children and Youth Area Partnerships (Area Partnerships) work to enable all children and young people to grow up happy, healthy, resilient, engaged and able to reach their potential. They use the collective impact framework, a structured approach to collaboration designed to address complex social problems to improve outcomes for children and young people in two areas: learning and development from cradle to career, and safe and supportive homes and communities.

Area Partnerships bring diverse people together to improve outcomes for children and young people experiencing vulnerability by developing local solutions to local problems. This includes key leaders from across government (state, local and federal), Victoria Police, community, health and education sector organisations, business and community members to develop and test new ways of making an impact on complex local issues.

Each Area Partnership draws on local data and knowledge to identify shared priorities, develop prototypes and to test and try new ideas, develop feedback loops as to what is effective, what is not, what to move forward with to maturity, what to release ñ and then developing revised approaches.

Eight Area Partnership sites have been established across Victoria - Central Highlands, Inner Gippsland, Mallee, Loddon, Outer Eastern Melbourne, Ovens Murray, Southern Melbourne and Western Melbourne.

**Figure 2: Map of Children and Youth Area Partnerships**

| **Name of Children and Youth Area Partnership** | **Area** |
| --- | --- |
| Mallee | Mildura |
| Mallee | Swan Hill |
| Mallee | Gannawarra |
| Mallee | Buloke |
| Loddon | Loddon |
| Loddon | Campaspe |
| Loddon | Greater Bendigo |
| Loddon | Mount Alexander |
| Loddon | Central Goldfields |
| Loddon | Macedon Ranges |
| Central Highlands | Ararat |
| Central Highlands | Pyrenees |
| Central Highlands | Ballarat |
| Central Highlands | Golden Plains |
| Central Highlands | Moorabool |
| Central Highlands | Hepburn |
| Ovens Murray | Towong |
| Ovens Murray | Wodonga |
| Ovens Murray | Indigo |
| Ovens Murray | Alpine |
| Ovens Murray | Wangaratta |
| Ovens Murray | Benalla |
| Ovens Murray | Mansfield |
| Inner Gippsland | Baw Baw |
| Inner Gippsland | Latrobe |
| Inner Gippsland | South Gippsland |
| Inner Gippsland | Bass Coast |
| Outer Gippsland | Areas not defined |
| Southern Melbourne | Areas not defined |
| Western Melbourne | Areas not defined |

Source: https://areapartnerships.vic.gov.au/news/children-and-youth-area-partnerships-initiativelaunched-may-2014

**REGIONAL PARTNERSHIPS**

Regional Partnerships, established to give a voice to regional communities, are at the centre of Victoria’s Regional Statement. Nine Regional Partnerships have been established across the state, comprising representatives from local communities, businesses and the three levels of government. The nature of these partnerships enables greater collaboration between communities, industry, businesses and government to address the most important challenges and make use of the opportunities in each region.

The nine Regional Partnerships are: Barwon, Central Highlands, Gippsland, Goulburn, Great South Coast, Loddon Campaspe, Mallee, Ovens Murray and Wimmera Southern Mallee.

**Figure 3: Map of Regional Partnerships**

| **Name of Regional Partnership** | **Area** |
| --- | --- |
| Mallee | Mildura |
| Mallee | Swan Hill |
| Mallee | Gannawarra |
| Mallee | Buloke |
| Wimmera South West | West Wimmera |
| Wimmera South West | Hindmarsh |
| Wimmera South West | Horsham |
| Wimmera South West | Yarriambiack |
| Wimmera South West | Northern Grampians |
| Great South Coast | Glenelg |
| Great South Coast | Southern Grampians |
| Great South Coast | Moyne |
| Great South Coast | Warrnambool |
| Great South Coast | Corangamite |
| Loddon Campaspe | Loddon |
| Loddon Campaspe | Campaspe |
| Loddon Campaspe | Greater Bendigo |
| Loddon Campaspe | Mount Alexander |
| Loddon Campaspe | Central Goldfields |
| Loddon Campaspe | Macedon Ranges |
| Central Highlands | Ararat |
| Central Highlands | Pyrenees |
| Central Highlands | Ballarat |
| Central Highlands | Golden Plains |
| Central Highlands | Moorabool |
| Central Highlands | Hepburn |
| Ovens Murray | Towong |
| Ovens Murray | Wodonga |
| Ovens Murray | Indigo |
| Ovens Murray | Alpine |
| Ovens Murray | Wangaratta |
| Ovens Murray | Benalla |
| Ovens Murray | Mansfield |
| Gippsland | Baw Baw |
| Gippsland | Latrobe |
| Gippsland | South Gippsland |
| Gippsland | Bass Coast |
| Gippsland | Wellington |
| Gippsland | East Gippsland |
| Goulburn | Moira |
| Goulburn | Greater Shepparton |
| Goulburn | Strathbogie |
| Goulburn | Mitchell |
| Goulburn | Murrindindi |

Source: http://www.rdv.vic.gov.au/regional-partnerships

**METROPOLITAN PARTNERSHIPS**

Metropolitan Partnerships have been established across Melbourne in recognition of the challenges our suburbs are expected to face with a large and growing population. As Melbourne’s population increases, so will demand for services. Partnerships with local communities are the best way for government to focus on the right priorities for the right place.

Similar to Regional Partnerships, the Metropolitan Partnerships will include community and business members, and representatives from local, state and federal government. By identifying opportunities to improve outcomes on a social, economic and environmental level, these partnerships provide a chance for government, business and communities to drive real change.

Coordination of government responses will help improve the liveability, prosperity and sustainability of Melbourne’s suburbs. Six Metropolitan Partnerships have been established: Inner Metro; Inner South East: Western; Northern; Eastern, and Southern.

**Figure 4: Map of Metropolitan Partnerships**

| **Name of partnership** | **Name of partnership** | **Name of partnership** |
| --- | --- | --- |
| Western | Inner Metro | Eastern |
| Northern | Inner South east | Southern |

Source: https://www.suburbandevelopment.vic.gov.au/partnerships/metropolitan-partnerships

While place-based responses offer unique opportunities and approaches to service delivery, they are not without their limitations. If the level of analysis is too high; for example, at a community level instead of individual neighbourhoods, some issues can be disguised. This is important when considering varying population sizes, relevant at times for this report. Some areas of Regional Victoria have significantly smaller populations when compared to areas of Greater Melbourne, meaning a similar increase or decrease in performance against one outcome would impact a vastly different number within the population. The use of appropriate place-based responses needs to recognise this.

Secondly, there is little evidence currently available on the success of place-based responses. This is not to say there is a lack of success - just a lack of evidence, given longer term, rigorous evaluations of this type of government intervention are hard to find. Many evaluations are also focused on the process of response implementation, and not the outcomes.11 Notwithstanding this, place-based responses do have an important part to play in government interventions, as part of a broader framework of policy and/or legislative reform.

Equitable and targeted interventions form the heart of the Victorian Government’s suite of major reforms. Given the extent of these reforms, they are referenced numerous times throughout this report.

**EDUCATION STATE EARLY CHILDHOOD REFORM PLAN: READY FOR KINDER, READY FOR SCHOOL, READY FOR LIFE**

The Education State Early Childhood Reform Plan: ready for kinder, ready for school, ready for life outlines the Victorian Government’s vision for early childhood, and the reforms required to create a higher quality, more equitable and inclusive early childhood system. These reforms include help for parents to handle the challenges of parenting, increased funding for kindergartens to deliver high-quality early learning programs, reducing disadvantage, and making the system more inclusive and accessible. Koorie families need particular support, as do families of children with a disability in preparation for their transition to the National Disability Insurance Scheme.

**EDUCATION STATE**

The Victorian Government’s Education State reforms aim to build a system that provides every student with the knowledge, capabilities and attributes to help them to thrive throughout their lives, to acquire the skills that industry needs and that employers expect. The reforms will improve outcomes for all students, regardless of their start in life - promoting foundational learning domains such as reading, mathematics and science, alongside other important areas such as critical thinking, the arts, physical education and resilience. The agenda is strongly focused on building a world-class education system that produces excellence and reduces the impact of disadvantage.

**VICTORIA’S PUBLIC HEALTH AND WELLBEING PLAN 2015-2019**

Victoria’s public health and wellbeing plan 2015-2019 maps out a four-year strategy to provide all Victorians with the highest possible standards of health, wellbeing and participation, regardless of their age or stage of life. The plan outlines six key priorities to improve health and wellbeing for Victorians, particularly the most vulnerable. These priorities include: healthier eating and active living; reducing harmful alcohol and drug use; improving mental health; tobacco-free living; improving sexual and reproductive health, and preventing violence and injury.

**VICTORIA’S 10-YEAR MENTAL HEALTH PLAN**

Victoria’s 10-Year Mental Health Plan was released in 2015. Developed to drive better mental health outcomes for all Victorians, it focuses on prevention and better integrated support for people facing challenges of mental illness.

The plan is designed to promote positive mental health from infancy until old age. For younger Victorians, this means recognising the importance of individual support networks, and enabling children, young people and their families to best manage their own mental health.

**PLAN TO END FAMILY VIOLENCE**

Developed in response to Victoria’s Royal Commission into Family Violence, the first of its kind, the Ending Family Violence: Victoria’s Plan for Change invests nearly $2 billion into reforming the system for family violence survivors. This whole-of-government response crosses the areas of police, housing and MCH services, and aligns with the Roadmap for Reform: strong families, safe children. The Roadmap’s aim is to protect Victoria’s vulnerable children, young people and families. It is centred on strengthening communities, supporting children, young people and their families with holistic and targeted interventions, and providing the best possible environment for children and young people who cannot live at home.

**VICTORIA’S REGIONAL STATEMENT**

Victoria’s Regional Statement was released at the end of 2015, following a review of regional economic development and services. This statement recognised the importance of Regional Victoria in terms of the state’s economic, social and cultural environment. It outlines the Victorian Government’s approach to providing a bright start and future for young people, families and communities located in Victoria’s regions.

Through the establishment of the nine new Regional Partnerships, the government is providing local communities with a direct pathway into government decision making across all areas of policy and service delivery. This includes better healthcare, education and training, jobs and growth, quality of life, safer regional communities, and transport and infrastructure. The partnerships enable government policy to be appropriately tailored to the unique strengths and opportunities of different regions, better serving the needs of local communities. These reforms simultaneously recognise the need for high-quality, universal services for all Victorians, balanced with the additional, more targeted support needed by some families and communities. In these instances, government interventions are more appropriate when they are specific to the location of the issue, or recognise the impact of place - these are highlighted throughout the report.

This report is grounded in the latest evidence and research about what really matters in the lives of young Victorians. It is not only a useful tool for policy makers, informing the direction of current policies and further policy development, but also a useful tool for the Victorian community to hold the government accountable for the outcomes of all our children and young people.

VICTORIA’S CHILDREN AND YOUNG PEOPLE IN 2016

## Victoria’s population of children and young people is increasing

In 2016, Victoria was home to more than 1.8 million children and young people under the age of 25. This is an increase of more than 130,000 since the previous Census in 2011. Larger increases within this cohort have been in the number of children aged between five and nine. Victorians aged 24 and under now make up nearly one third (31.3 per cent) of the total state population, a slight decrease from 2011, but consistent with nationwide figures.

**Figure 5: Number of children living in Victoria by age (24 and under), 2011 and 2016**

| **Age group** | **2011** | **2016** |
| --- | --- | --- |
| 20-24 years | 375,108 | 413,792 |
| 15-19 years | 345,338 | 356,340 |
| 10-14 years | 327,939 | 341,063 |
| 5-9 years | 326,121 | 368,631 |
| 0-4 years | 344,733 | 371,220 |

Source: ABS, 2011 and 2016

Victoria recorded the highest population growth rate of all states and territories in 2016 (2.4 per cent).12 This growth, however, was not evenly distributed across the state. Melbourne accounts for the majority of Victoria’s natural population increases and overseas migrants, and is currently Australia’s fastest growing capital city, growing by an average of more than 1,800 people per week.13 Rural Victoria has experienced lower rates of population growth as a whole, with some areas declining in population between 2011 and 2016.

Previous analysis of intrastate migration has found that Melbourne gains young adults from Regional Victoria in pursuit of employment opportunities and the greater breadth of further education options available.14

**Figure 6: Growth in population (people aged 19 and under) in Victoria**

| **Areas with high population growth** | **Areas with low population growth** |
| --- | --- |
| Cardinia | Benalla |
| Casey | Buloke |
| Golden Plains | Corangamite |
| Hume | Glenelg |
| Melbourne | Hindmarsh |
| Melton | Northern Grampians |
| Monash | Queenscliffe |
| Port Phillip | Southern Grampians |
| Whittlesea | West Wimmera |
| Wyndham | Yarriambiack |

Source: ABS Population Census, 2011 and 2016

## The population of children and young people who identify as Aboriginal is also increasing

Since 2011, the Aboriginal population aged 24 and under increased to slightly fewer than 25,000 (24,963), an increase of 20 per cent. This cohort now makes up more than half of the total Victorian Aboriginal population, and 1.3 per cent of the total Victorian population in this age group.

**Figure 7: Age groups as a proportion of Victorian Aboriginal population, 2011 and 2016**

| **Age group** | **2011** | **2016** |
| --- | --- | --- |
| 65 years and over | 4.3% | 5.3% |
| 55-64 years | 6.3% | 7.3% |
| 45-54 years | 9.7% | 10.6% |
| 35-44 years | 12.3% | 11% |
| 25-34 years | 12.6% | 13.7% |
| 15-24 years | 19.5% | 19% |
| 5-14 years | 22.9% | 21.8% |
| 0-4 years | 12.3% | 11.5% |

Source: ABS, 2011 and 2016

## We are growing in diversity of background and individual need

Victorians come from diverse backgrounds and circumstances, with communities across the state characterised by a breadth of cultural, socio-economic, and geographic factors. For children and young people this is a positive environment to grow up in, with a range of experiences and opportunities, but it may also present challenges and service needs. Some of these are common issues across the community and others particular to segments with additional support needs. There is, as a result, a strong demand for culturally responsive and targeted services for Victorian children, but this demand is not uniform across the state.

## One in six Victorian children and young people (aged 1 to 19) were born outside Australia

Victoria is Australia’s most culturally diverse state. Some migrant communities have been established in Victoria for generations, and the state continues to attract new arrivals from across the globe. In 2016, 16.2 per cent of Victorian children and young people were born outside Australia, fewer Victorians (68 per cent) spoke English at home than in 2011 (72 per cent), and 41.8 per cent of Victorians aged 19 and under had one or both parents born overseas.

## One in four speak a language other than English

Some migrant children require support to learn English as an additional language, and particularly vulnerable cohorts, such as refugees and asylum seekers, are at high risk of poor outcomes. It is important to note, however, that not all culturally and linguistically diverse children have poorer outcomes, with relatively high educational achievement of first generation migrant children in national and international testing.

The proportion of children and young people speaking a language other than English varies dramatically across the state, from as low as one in fifty (2.6 per cent) in Outer Gippsland to as high as one in two (49.4 per cent) in Brimbank Melton.

Overall this demographic is highly concentrated in Greater Melbourne. Some locations such as Geelong, Shepparton and Swan Hill, have proportions of children and young people speaking a language other than English that is markedly higher than the average for other areas of Regional Victoria, but still far lower than is found in Greater Melbourne.

## The number of students with a likely refugee background is increasing

In 2016 there was estimated to be more than 10,000 students with a refugee background attending government schools in Victoria. Since 2014 the biggest percentage increases in student numbers have been in Hume Moreland, North Eastern Melbourne and Barwon.

## Nearly one in five young people are reported to have special health care needs

Responses to the 2016 VSHAWS indicate that nearly one in five (17.7 per cent) young people have a special health care need. This means that they require more extensive health and related services than other young people.

Just under three per cent of Victorians aged 0 to 19 have a need for assistance with core activities

The 2016 Census found that 36,265 Victorians aged 19 and under were identified as needing assistance with core activities, indicating that they had a profound or severe disability. This comprises approximately 2.5 per cent of the Victorian population in this age range.

**Figure 8: Proportion of Victorians aged 0-19 identified as having a disability, 2016**

| **Region** | **Area** | **Percentage** |
| --- | --- | --- |
| North Eastern Victoria | Outer Eastern Melbourne | 3.0% |
| North Eastern Victoria | Inner Eastern Melbourne | 1.8% |
| North Eastern Victoria | Goulburn | 3.0% |
| North Eastern Victoria | Ovens Murray | 2.9% |
| North Western Victoria | Hume Moreland | 2.6% |
| North Western Victoria | North Eastern Melbourne | 2.2% |
| North Western Victoria | Loddon | 3.1% |
| North Western Victoria | Mallee | 2.9% |
| South Eastern Victoria | Southern Melbourne | 2.5% |
| South Eastern Victoria | Bayside Peninsula | 2.1% |
| South Eastern Victoria | Outer Gippsland | 3.6% |
| South Eastern Victoria | Inner Gippsland | 3.2% |
| South Western Victoria | Brimbank Melton | 2.6% |
| South Western Victoria | Western Melbourne | 2.2% |
| South Western Victoria | Barwon | 3.2% |
| South Western Victoria | Central Highlands | 3.2% |
| South Western Victoria | Wimmera South West | 2.8% |

Source: ABS, 2016

## Over 8,000 Victorian children and young people were in out-of-home-care (OOHC)

Out-of-home care living arrangements are for children and young people who cannot live in their family home, often for reasons related to violent or unsafe family environments. These children are at particularly high risk of poor outcomes, and may require significant support to stay in education. The number of children in OOHC in Victoria changes from day to day, but as at 30 June 2016, over 8,000 children were in OOHC.

Young people who are Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI)

Data on the proportion of Victorian young people who are LGBTI are not available, however, it is estimated that people of diverse sexual orientation, sex or gender identity may account for up to 11 per cent of the Australian population, and that one per cent of Victorian children and adolescents’ gender does not align to the gender assigned to them at birth.15

Young LGBTI people can experience poorer educational, social and health outcomes, often as a result of bullying, discrimination and harassment, much of which occurs in school environments.

Where do children and young people live in Victoria?

Between 2011 and 2016, population growth of Victorians aged 19 and under was concentrated in Greater Melbourne, with areas including Southern and Western Melbourne experiencing particularly high growth rates. During this period, many regional areas experienced a decline in the population of this age.

**Figure 9: Population growth (19 years and under) in Victoria, 2011 to 2016**

| **Region** | **Area** | **Number** |
| --- | --- | --- |
| North Eastern Victoria | Outer Eastern Melbourne | -3398 |
| North Eastern Victoria | Inner Eastern Melbourne | 4739 |
| North Eastern Victoria | Goulburn | 47 |
| North Eastern Victoria | Ovens Murray | -820 |
| North Western Victoria | Hume Moreland | 7315 |
| North Western Victoria | North Eastern Melbourne | 11217 |
| North Western Victoria | Loddon | 291 |
| North Western Victoria | Mallee | -1839 |
| South Eastern Victoria | Southern Melbourne | 17505 |
| South Eastern Victoria | Bayside Peninsula | 4319 |
| South Eastern Victoria | Outer Gippsland | -1161 |
| South Eastern Victoria | Inner Gippsland | -1053 |
| South Western Victoria | Brimbank Melton | 7263 |
| South Western Victoria | Western Melbourne | 25566 |
| South Western Victoria | Barwon | 3223 |
| South Western Victoria | Central Highlands | 1439 |
| South Western Victoria | Wimmera South West | -3717 |

Source: ABS, 2011 and 2016

In 2016, three quarters (74.4 per cent) of Victorian children and young people under the age of 20 lived within areas of Greater Melbourne, consistent with the general distribution of the overall population. Different demographics however are dispersed differently across the state. A large proportion of Aboriginal Victorians live in regional communities, and Aboriginal children are more likely to live in Regional Victoria (45.1 per cent live in Greater Melbourne).

A large number of Victorian Aboriginal children and young people (under 20 years old) are concentrated in a few locations, with more than 40 per cent of this demographic living in just ten Local Government Areas (LGAs). Most of these are outside of Greater Melbourne, and include Greater Geelong, Mildura, Greater Shepparton, Greater Bendigo, Ballarat and Whittlesea.

Children who speak a language other than English are unlikely to live in Regional Victoria, with 94 per cent living in areas of Greater Melbourne. Most Victorians aged 19 and under with a disability (68.5 per cent) also live in areas of Greater Melbourne. ECONOMIC ENVIRONMENT

The economic environment of a community is a key determinant of the health of its individuals. A secure job, stable income and safe housing all contribute to improved health and wellbeing.

Victoria has an expanding economy with increasing productivity, improving workforce participation, and Australia’s highest population growth rate, but not all Victorians are experiencing the benefits of this strong statewide performance.

While living conditions are good for most Victorians, a small number of communities experience a disproportionate amount of economic disadvantage, which can affect the ability of parents to provide a secure home environment for their children. While an increasing demand for professional services in inner metropolitan areas has created a large number of jobs, declines in the manufacturing sector and increased job automation have reduced the availability of employment in other parts of the state.

This section looks at:

* indicators of economic disadvantage
* job security.

ECONOMIC DISADVANTAGE

The distribution of income across Victoria is uneven; a higher proportion of individuals and families in Regional Victoria earn low incomes, and concentrations of high incomes are predominantly found in parts of Greater Melbourne. There are, however, locations across Victoria where economic disadvantage, including low income, housing instability and higher rates of unemployment affects key social, health, and educational indicators. Some family types, such as single parent families, are also at greater risk of financial stress.

**Figure 10: Proportion of children in low-income, welfare dependent families as at June 2016**

| **Areas in highest percentage quintile** | **Areas in lowest percentage quintile** |
| --- | --- |
| Bass Coast | Areas of North Eastern Melbourne |
| Benalla | Areas of South Eastern Melbourne |
| Central Goldfields | Golden Plains |
| East Gippsland | Macedon Ranges |
| Glenelg | Surf Coast |
| Greater Bendigo |  |
| Greater Shepparton |  |
| Latrobe |  |
| Loddon |  |
| Mildura |  |
| Northern Grampians |  |
| Pyrenees |  |
| Yarriambiack |  |

Source: Social Health Atlas of Australia

In Regional Victoria, economic disadvantage is associated with lower rates of Year 12 completion and significantly fewer people holding post-school qualifications than average. These areas are more likely to have a higher representation of Aboriginal Victorians, and tend to have low or no population growth and an overrepresentation of people in older age brackets.

These patterns are not necessarily reflected in economically disadvantaged locations in Greater Melbourne such as Greater Dandenong and Hume. Year 12 completion rates can be high and the prevalence of post-school qualifications are closer to the state average. These areas are more likely to be culturally and linguistically diverse, with higher-than-average numbers of new humanitarian arrivals. Population growth in these areas is also either high or similar to the state average.

Some Victorian children are negatively affected by housing insecurity. Housing affordability in Victoria is in decline, with both house prices and the cost of renting increasing. Housing is generally more affordable in Regional Victoria, but for those with low incomes or experiencing unemployment, these costs may nevertheless present an additional source of financial stress. Housing security may also be threatened by experiences of violence. In Australia and Victoria, family violence is a major cause of women and children’s homelessness, with incidents of violence forcing victims to leave their homes.16 Victorian research has found that experiences of homelessness during childhood are associated with lower educational attainment, higher incarceration, higher receipt of general and mental health disability-related welfare, and reduced likelihood of employment.17 Parental separation experienced during childhood has also been found to significantly increase the likelihood of young people experiencing homelessness in later years.18 JOB SECURITY

Over recent decades, casual, part-time, and fixed-term employment arrangements have increased as a proportion of all employment, meaning that many parents do not have the long-term financial security and benefits afforded by permanent full-time work. This can leave families in a position of financial insecurity, creating stress and obstacles to planning for the future.19 Employment opportunities in Victoria have also changed, with an increase in highly skilled occupations and professional services, and declines in large-scale manufacturing. The effects of these changes can compound existing disadvantage, with some locations more likely to depend on sectors such as manufacturing for employment, while professional, scientific and technical services tend to be more concentrated in other locations.

**Figure 11: Industry employment across selected Victorian areas, 2011 Sectors of employment**

| **Sector of employment** | **Hume** | **Boroondara** |
| --- | --- | --- |
| Professional, Scientific and Technical Services | 2.07% | 16.18% |
| Manufacturing | 23.19% | 3.34% |
| Transport, Postal and Warehousing | 20.05% |  |
| Other | 54.69% | 74.77% |
| Financial and Insurance Services |  | 5.71% |

Source: 2011 Census of Population and Housing

Encouraging a diversified economy is a priority for many Regional Partnerships. This can be seen through work in Gippsland (refocusing industries and investing in new jobs and industry, for example the food and fibre sector) and Mallee (tailoring training opportunities to meet the needs of key employers and regionally significant sectors). DEVELOPMENT IN THE EARLY YEARS

The early years are a vital period for every child’s development. It is the best time to build strong foundations for lifelong health and learning, it is a critical time for physical development, and it is the starting point for strong social, emotional and learning skills. The first three years of life are a critical period for learning, and children who experience poor home learning environments at this stage are particularly vulnerable to poorer child and adult outcomes.

Developmental problems that remain unaddressed can have lifelong adverse impacts; by the time a child starts kindergarten they are already learning the skills that are critical across the lifespan. Early childhood is particularly important for children who start from a position of disadvantage. If children start behind, they often stay behind.

Reforms outlined in the recently released Education State Early Childhood Reform Plan: ready for kinder, ready for school, ready for life focus on improving the system as a whole. Key actions under the plan work to achieve four main objectives: (1) supporting higher quality services and reducing disadvantage in early education; (2) providing more support for parenting; (3) making early childhood services more accessible and inclusive; and (4) building a better system.

THIS SECTION FOCUSES ON:

* children with developmental vulnerabilities
* engagement with early childhood education and care services
* quality of early childhood service provision.

## CHILDREN WITH DEVELOPMENTAL VULNERABILITIES

Most Victorian children are growing up happy and healthy, and showing no signs of significant developmental delays. Results from the 2015 AEDC place Victoria in the top three states and territories for children on track against each development domain. Victoria’s results against the Census have remained stable over the last few years.

The AEDC is held across Australia every three years. Teachers of children in their first year of full-time school use a research tool - the Australian version of the Early Development Instrument - to collect data relating to five key areas (or domains) of early childhood development: physical health and wellbeing; social competence; emotional maturity; language and cognitive skills; and communication skills and general knowledge. These domains have been shown to predict later health, wellbeing and academic success.

While the majority of Victorian children are faring well in all aspects of their development, too many start school already behind. On average, one in five Prep children is assessed by their teacher as being vulnerable on one or more of the AEDC domains. This could include facing challenges relating to getting along with other children (social), managing aggression (emotional), reading and writing (language), clumsiness (physical) or talking to others (communication).

These children face poorer achievement outcomes during their school life. According to DET analysis, children who are developmentally vulnerable on one or more AEDC domains are:

* more likely to be in the bottom 20 per cent of student scores on NAPLAN assessments in Years 3, 5 and 7 when compared to those who were developmentally on track
* half as likely to reach the top two bands in NAPLAN reading in Year 3 as children without these vulnerabilities, and even less likely in Year 5.20

Rates of childhood developmental vulnerabilities vary widely across Victoria

Developmental vulnerabilities can affect all children, but the 2015 AEDC National Report shows that children living in the most socio-economically disadvantaged areas are more than twice as likely to be developmentally vulnerable as those from areas with the least disadvantage. This gap has been widening over time.21

In Victoria, the proportion of children assessed as vulnerable on one or more domains of the AEDC varies across locations; from one in four (highest rate) to around one in seven (lowest). When looking at this data it is important to remember that:

* at a local level, fluctuations in assessments of children with developmental vulnerabilities may be impacted by a range of factors other than the prevalence of vulnerabilities themselves. One may be the changing demographics and movement of cohorts of populations in and out of areas, another may be the impact of a child’s family and how they value early learning and learning as a whole
* the proportion of children living in areas can also vary greatly - this means in smaller populations (more likely regional areas), a slight shift in assessments of children with developmental vulnerabilities can appear more significant when compared to similar numbers in areas with greater populations.

While this could partly explain differences between areas across Victoria, where population sizes can differ greatly, the general pattern is that regional areas have higher proportions of children with developmental vulnerabilities.

**Figure 12: Proportion of Victorian children vulnerable on one or more domains of the AEDC, 2015**

The table shows:

* Areas in which the proportion of Victorian children are vulnerable on one in four AEDC domains: Brimbank Melton, Goulburn.
* Areas in which the proportion of Victorian children are vulnerable on one in four and one in five AEDC domains: Mallee, Hume Moreland, Southern Melbourne, Ovens Murray, Western Melbourne, Inner Gippsland.
* Areas in which the proportion of Victorian children are vulnerable on one in five AEDC domains: Loddon, Central Highland, Wimmera South West, Outer Gippsland, Victoria (19.9%).
* Areas in which the proportion of Victorian children are vulnerable on one in six AEDC domains: Barwon, North Eastern Melbourne, Outer Eastern Melbourne.
* Areas in which the proportion of Victorian children are vulnerable on one in seven AEDC domains: Bayside Peninsula, Inner Eastern Melbourne.

Source: Australian Early Development Census, 2015 Since 2009, there has been a decrease in the proportion of children with developmental vulnerabilities (against one or more AEDC domains) in many areas of Victoria. The largest percentage point decreases have been in Hume Moreland, Outer Gippsland and Southern Melbourne. In some areas, though, rates have increased - Brimbank Melton, Central Highlands, Goulburn, Ovens Murray, Western Melbourne and Wimmera South West.

More children living in Brimbank Melton and Goulburn are assessed as developmentally vulnerable on the social competence domain than any other domain of the Census (12 and 11 per cent of children in these areas respectively). Children who are developmentally vulnerable on this domain experience a number of challenges with poor overall social skills. According to the Census, this could include:

* not getting along with other children on a regular basis
* not accepting responsibility for their own actions
* having difficulties following rules and class routines
* being disrespectful of adults, children, and others’ property
* having low self-confidence and self-control
* not adjusting well to change
* usually being unable to work independently.

**Improving outcomes for children in their first 1000 days**

The Inner Gippsland Children and Youth Area Partnership has the collective vision of Great start, Bright future. This was agreed in response to key data regarding declines in childhood development outcomes (as measured by the AEDC) and increasing rates of child abuse and neglect and family violence.

To ensure the work of the Inner Gippsland Area Partnership was embedded in place, a different approach to develop innovative solutions was adopted. A co-design methodology was used to develop local solutions to strengthen parents and support children’s development in the first 1000 days.

Teams across the four LGAs in Inner Gippsland (Bass Coast, Baw Baw, Latrobe and South Gippsland) used data, evidence and local knowledge to identify more effective ways to support local parents to foster an environment where their children can thrive:

* Bass Coast - addressing social disconnection and disadvantage for young parents in Wonthaggi.
* Baw Baw - developing family friendly spaces across the community (as part of responding to increases in families experiencing family violence).
* Latrobe - addressing intergenerational trauma and increasing connection to culture for Aboriginal parents and boorai (Aboriginal children).
* South Gippsland - strengthening linkages across services and improving access for families so that they are confident in their neighbourhoods and communities.

Each of the four LGA-based teams has engaged broadly with parents, carers, young parents, community members, Aboriginal elders, councillors as well as different parts of the service system to develop their prototypes. Each of the four prototypes developed encompass solutions that sit outside of the service system. This reflects the recognition of the need for more than a service delivery response to shift the conditions that impact a child’s development. Work is currently underway to further develop the prototypes. Children in Regional Victoria are more likely to start school with speech and language issues

Speech and language difficulties affect around one in seven children who start school in Victoria (SEHQ, 2016). According to their parents, these children may have trouble with specific aspects of their speech, language and communication, such as not understanding others, unclear speech, a difficulty in finding or using words, or stuttering and/or stammering.

Victorian parents report issues with their child’s speech and language at varying rates across the state, from one in ten (Inner Eastern Melbourne) to one in five (Mallee). Generally speaking, higher proportions of children with speech and language issues on entry to Prep live in Regional Victoria, with rates for all regional areas above the statewide average.

Some regional areas have seen improvement in this measure over the last three years, with Loddon and Outer Gippsland reporting the largest percentage point decrease from 2014 to 2016, followed by Western Melbourne, Barwon and North Eastern Melbourne.

**Figure 13: Proportion of Victorian Prep children with speech and language difficulties (parent-identified),** **2016**

| **Region** | **Area** | **Percentage** |
| --- | --- | --- |
| North Eastern Victoria | Outer Eastern Melbourne | 15.4% |
| North Eastern Victoria | Inner Eastern Melbourne | 11.5% |
| North Eastern Victoria | Goulburn | 18.8% |
| North Eastern Victoria | Ovens Murray | 19.5% |
| North Western Victoria | Hume Moreland | 13.3% |
| North Western Victoria | North Eastern Melbourne | 11.6% |
| North Western Victoria | Loddon | 15.8% |
| North Western Victoria | Mallee | 20% |
| South Eastern Victoria | Southern Melbourne | 13.7% |
| South Eastern Victoria | Bayside Peninsula | 11.7% |
| South Eastern Victoria | Outer Gippsland | 16.9% |
| South Eastern Victoria | Inner Gippsland | 16.5% |
| South Western Victoria | Brimbank Melton | 13.9% |
| South Western Victoria | Western Melbourne | 12% |
| South Western Victoria | Barwon | 15.4% |
| South Western Victoria | Central Highlands | 17.5% |
| South Western Victoria | Wimmera South West | 18.4% |
| Victoria |  | 13.9% |

Source: SEHQ, 2016

Children starting school who experience difficulties with speech and language are at greater risk of poorer education outcomes in NAPLAN testing in Year 3 (DET, SEHQ-NAPLAN linkage), and may also encounter other challenges in their development:

* Links to social-emotional and behavioural issues: A recent study conducted by the University of Melbourne found that children assessed as having speech and language difficulties are more than three times as likely to demonstrate social-emotional and behavioural issues as those without speech and language difficulties. The study also highlighted a number of community and family level factors (reported through the SEHQ) that were associated with co-morbidity of these two issues, including child exposure to violence, parent mental health difficulties, living in more disadvantaged communities, and parental educational experiences.22
* Links to interaction with the youth justice system: A 2016 review of available evidence regarding the discrete language skills of youth offenders found considerable evidence that youth offenders perform poorly on language measures relative to age-matched peers, demonstrating that youth offenders have compromised language skills.23

A recent study into the provision of speech pathology services in metropolitan Melbourne found a mismatch between supply and demand. Looking at the distribution of private and public providers in areas of high language vulnerability (as determined by the 2012 AEDC), the Murdoch Children’s Research Institute found: (a) poorer availability of services in some of the most vulnerable areas; and (b) far more private services located in areas with lower prevalence of children with these difficulties. The usually high cost for care from these services rules out many of the most vulnerable children, who are more likely to be Aboriginal or have a language background other than English.24

**Increasing school readiness in the Mallee**

The Mallee Children and Youth Area Partnership agreed a priority of acting earlier to support families in which children may be vulnerable. As a starting point, the partnership focused on families with children transitioning from preschool to school in the Gannawarra Shire.

A broad range of partners, including Gannawarra Shire, Northern District Community Health Service, Mallee Family Care, local primary schools and government departments, came together, looked at local data and engaged with the community - including mums, Aboriginal families, Elders and the Gunnawarra Shire Early Years Playgroup Think Tank. The local community identified the need to better support vulnerable mothers and to improve children’s readiness to start school.

To achieve this, two additional supported playgroups were established in Gannawarra Shire - a new playgroup in Kerang and a pop-up playgroup in Koondrook. The approach includes visits by key professionals to the playgroups to lift the capability of mothers and coordinators. This support from professionals has a thematic focus at each visit - for example, the ‘5 Ways to Wellbeing’, oral health or early literacy. The approach has improved the capacity and reach of playgroups through multi-agency supports, resources and information.

Alongside the playgroups, all primary schools across the Gunnawarra Shire committed to developing a transition booklet to support children and families, and a ‘Getting Ready for School’ evening has been held in Kerang.

Focussing on early years’ development and adequately preparing children for school has been identified as a key action through many Regional Partnerships. The Wimmera Southern Mallee Regional Partnership has identified ‘Early Years and Access to Education’ as a priority, and the Loddon Campaspe Partnership is advocating for resources in the early years to improve children’s health and development, supporting them to be school ready. ENGAGEMENT WITH EARLY CHILDHOOD EDUCATION AND CARE SETTINGS

Maternal and Child Health

MCH services are an important enabler for monitoring Victorian children’s health and development between birth and four years of age. The MCH system is funded and overseen by DET and provided by local councils across the state.

Engagement with MCH nurses can minimise preventable developmental and behavioural issues; participation in the service is also related to early diagnosis and treatment of conditions that influence children’s learning such as vision and hearing difficulties.25

Family engagement with MCH services is high following a child’s birth but tapers off

The proportion of Victorian children enrolled with a MCH service has remained stable in recent years, alongside a growing birth rate. For those children enrolled with the service, nearly all are seen by their MCH nurse for the important home visit in their first few days. However, engagement decreases as children grow older, with lower proportions of children attending the later KAS visits.

Attendance at KAS visits for Victorian Aboriginal children is more unpredictable than statewide averages, fluctuating greatly and showing a much stronger decline between visits. Significantly lower proportions of Aboriginal children attend each visit with their MCH nurse when compared to the general population.

Research shows that the following factors indicate that a family is less likely to attend the final 3.5 year check ó where the child is listed on a concession card, where it is a single parent household, where there are low education levels in one or more parents, where the primary caregiver has an Aboriginal background, or where the mother or child were born overseas.26 This is a concerning trend, given that these are the families that are likely to have higher needs and would benefit most from additional support.

Area level data for attendance at the 3.5 year KAS visit show significant variance between those with the lowest and highest attendance. In 2015-16, just under 50 per cent of children attended their last MCH visit in Hume Moreland, while the rate in Ovens Murray was nearly 80 per cent. Areas with a higher percentage point decrease in participation at the 12-month and 3.5-year KAS are generally in Greater Melbourne. **Figure 14: Percentage point decrease in attendance at 12 month and 3.5 year KAS visits, 2015**

| **Region** | **Area** | **Percentage** |
| --- | --- | --- |
| South Western Victoria | Brimbank Melton | 9.4% |
| South Western Victoria | Wimmera South West | 14.4% |
| South Western Victoria | Western Melbourne | 15.1% |
| South Western Victoria | Central Highlands | 18.7% |
| South Western Victoria | Barwon | 23.4% |
| South Eastern Victoria | Inner Gippsland | 7.3% |
| South Eastern Victoria | Outer Gippsland | 12.6% |
| South Eastern Victoria | Bayside Peninsula | 15.3% |
| South Eastern Victoria | Southern Melbourne | 26.1% |
| North Western Victoria | Loddon | 9.7% |
| North Western Victoria | Mallee | 12.1% |
| North Western Victoria | North Eastern Melbourne | 14.6% |
| North Western Victoria | Hume Moreland | 22.4% |
| North Eastern Victoria | Ovens Murray | 5.5% |
| North Eastern Victoria | Goulburn | 13.7% |
| North Eastern Victoria | Inner Eastern Melbourne | 20.3% |
| North Eastern Victoria | Outer Eastern Melbourne | 20.4% |
| Victoria |  | 16.8% |

Source: DET

The Education State Early Childhood Reform Plan: ready for kinder, ready for school, ready for life includes initiatives to expand and enhance parenting support and the MCH service. As part of 2017-18 Budget, the Victorian Government is investing $81.1 million for MCH and parenting support reforms, to help families get their children ready for kindergarten and beyond.

Funding includes:

* $4.9 million to respond to demand on the telephone information line (MCH line)
* $37.7 million to progressively expand the Enhanced MCH Service to support children up to the age of three
* $11 million to fund an additional MCH visit to women and children at risk of family violence
* $5.2 million to attract new MCH nurses to the service and support the development of all MCH nurses in the latest techniques and practices to support families, including those struggling with trauma.

The government has also provided $22.3 million to increase the availability of supported playgroups so they are available across the state, and better connect first time MCH parent groups with community playgroups.

**Building a better system: partnership with local government**

**Supporting children and families in the Early Years: A Compact between DET, DHHS and local government (represented by the Municipal Association of Victoria) 2017-2027.**

The Early Years Compact represents a landmark commitment between local government, DET and DHHS. It formalises a closer working relationship between state and local government and new ways of working together to improve outcomes for all young children and families, with a strengthened focus on supporting vulnerable children and families. The Compact was signed by all parties in April 2017 and has a ten-year life-span to support consistent long-term systemic change.

The Compact sets out a clear, shared view of the role of state and local government, recognising the key role local government plays in supporting and responding to the needs of children and families at the local level. It is a key enabler for DET’s Early Childhood Reform Plan: ready for kinder, ready for school, ready for life and strengthens the Government’s commitment to supporting Victoria’s most vulnerable children through the DHHS program Roadmap for Reform: strong families, safe children. The Compact provides a mechanism for state and local government to work together to put in place a coherent, connected and flexible early childhood system ñ ensuring planning, coordination and information sharing is integrated across the Victorian early years sector.

### Kindergarten

Research shows that children who have participated in early childhood education demonstrate greater social competence and higher levels of academic achievement.27 Some studies following the progress of participants over decades have found that these benefits are long-term, and that early years education improved employment prospects and reduced the likelihood of committing criminal offences in adulthood.28 The importance of early years education in improving the outcomes of disadvantaged children in particular has been confirmed in the findings of Victorian based research, such as the E4Kids study.29

Some children, however, miss out on this early learning experience. A 2014 Productivity Commission Inquiry into early childhood recognised that children with additional needs or developmental vulnerabilities benefit most from some early learning - but the inquiry found that these children and their families may have difficulties accessing ECEC. Local unavailability of services was found to be one of the barriers.30 In Victoria, some children can access a kindergarten program through pre-purchased places. Kindergarten places are reserved for children known to Child Protection, refugees and Koorie children, even if they miss the enrolment dates. In 2016, the pilot year, over 90 per cent of the places taken up through this program were by children who would not otherwise have had access to kindergarten.

Central Enrolment schemes also provide a single point of contact for families to access kindergarten in their area and support services to prioritise access for vulnerable children to kindergarten programs. This allows local governments to establish greater links with other important services like MCH services to improve the earlier identification of children who need more support. The Victorian Government has committed $5.5 million to strengthen Central Enrolment schemes, which ran in 45 locations across Victoria in 2016.

Much of the Victorian Government’s investment in ECEC is rightly focused on the state’s traditional responsibility in kindergarten programs. However, the Victorian Government continues to be a lead advocate for greater investment in early childhood education in Commonwealth areas of funding responsibility in the first three years of life. Early Start Kindergarten (ESK) for vulnerable three year olds is an example of this.

Higher proportions of children in Regional Victoria participate in a kindergarten program

Most Victorian children attend kindergarten in the year before they go to school; the statewide participation rate in 2016 was just over 96 per cent.31 Victorian Aboriginal children are less likely than other children to attend kindergarten, though participation has been increasing steadily in recent years. There is some locational variance in the proportion of children attending kindergarten in the year before school, with higher proportions in the majority of areas in Regional Victoria.

**Figure 15: Proportion of Victorian children attending a kindergarten program in the year before school, 2016**

This figure shows that kindergarten participation rates vary across Victoria from 93.1% to 101.7%.

Source: DET, 2016 Increasing participation in early childhood services for vulnerable children

Increasing participation in both MCH services and kindergarten programs are a key focus of Best Start Partnerships across Victoria. Best Start is a Victorian Government initiative aimed at the early years, providing support to families and/or care givers of children from birth to age eight.

These partnerships are examples of collaborative place-based responses that use local level data and community knowledge to identify vulnerable children and their families and develop appropriate solutions. There are 30 Best Start sites across Victoria, six of which are dedicated to working with Aboriginal communities. These sites are based in Delkaia (Horsham); Djillay Lidji (Baw Baw and Latrobe); East Gippsland; Mingo Waloom (Geelong); Njernda (Echuca) and Tartu-nganyin Bopop (Dandenong).

Another initiative to increase kindergarten participation for vulnerable children is the ESK grant. This grant provides free or low-cost kindergarten to eligible three-year-old children where programs are offered by a qualified teacher. A child is eligible if they are known to Child Protection or are Aboriginal and/or Torres Strait Islander.

Enrolments in ESK have been increasing over the last three years, from nearly 800 in 2014 to nearly 1,200 in 2016óan increase of 50 per cent.

Across the state, higher rates of growth in enrolments have occurred for children known to Child Protection. At the area level, there have been substantial increases in overall enrolments in the Central Highlands, Hume Moreland and Western Melbourne.

**Table 2: Number of enrolments in Early Start Kindergarten, 2014-2016**

|  | **Area** | **2014** | **2015** | **2016** |
| --- | --- | --- | --- | --- |
| Children known to Child Protection | Children and Youth Area Partnerships - focus on ESK | 51 | 107 | 97 |
| Children known to Child Protection | Other Children and Youth Area Partnerships | 121 | 179 | 203 |
| Children known to Child Protection | Statewide (includes areas that are not part of a Child and Youth Area Partnership) | 329 | 499 | 569 |
| Aboriginal and/or Torres Strait Islander children | Children and Youth Area Partnerships - focus on ESK | 90 | 119 | 121 |
| Aboriginal and/or Torres Strait Islander children | Other Children and Youth Area Partnerships | 144 | 132 | 178 |
| Aboriginal and/or Torres Strait Islander children | Statewide (includes areas that are not part of a Child and Youth Area Partnership) | 462 | 507 | 620 |
| Total | Children and Youth Area Partnerships - focus on ESK | 141 | 226 | 218 |
| Total | Other Children and Youth Area Partnerships | 265 | 311 | 381 |
| Total | Statewide (includes areas that are not part of a Child and Youth Area Partnership) | 791 | 1006 | 1189 |

Source: DET

**Increasing participation in Early Start Kindergarten**

Between 2014 and 2015 the Central Highlands, Inner Gippsland and Loddon Children and Youth Area Partnerships increased participation in ESK by 60 per cent (from 141 to 226 children), compared to a 27 per cent increase statewide.

These Area Partnerships each agreed local priorities around supporting vulnerable children to start school ready to thrive. Actions to achieve this included a range of work at the local level to increase participation.

Each of the Area Partnerships implemented a range of strategies that sought to better identify eligible vulnerable children and to enrol them in ESK. These included building local understanding of the responsibilities of local government and community sector organisations in the Early Childhood Agreement for children in OOHC; intensive local audits of families accessing supports through family services to identify eligible children; developing an email notification tool to advise local government partners when a child enters OOHC; and deeper engagement with carers and families to understand what factors support successful participation.

DET and DHHS are currently developing a more structured and strategic approach to translating effective local innovation tested through Area Partnerships into broader-based change. The successes achieved in increasing ESK enrolments will be used as an initial example.

While these recent improvements in ESK enrolments are promising, there is still more work to be done to increase the proportion of eligible children enrolled; in 2016 only one in seven children known to Child Protection accessed ESK. QUALITY OF EARLY CHILDHOOD SERVICE PROVISION

The quality of ECEC services makes a difference. Good quality ECEC programs have benefits for children’s wellbeing and learning that last into adulthood. Early childhood services with lower child-to-staff ratios, better qualified staff, better learning environments and better relationships between educators and children have a greater positive impact on children’s cognitive development. These structural factors, which support better practice, are reflected through the standards under the NQF for ECEC services across Australia.

A focus of the recently completed E4Kids study was the quality of adult-child engagement in ECEC services. The quality of child-educator interactions in ECEC settings was found to be consistently lower in services located in lower socio-economic areas. This could lead to children attending these services being three to five months behind their peers. There was also less availability of care found in lower socio-economic areas. Given that most families were shown to use services within five kilometres of where they live, a priority for government reform is to improve the quality of programs in low socio-economic areas.32

Three broad comments can be made about the scope of the E4Kids findings:

* if the purpose of ECEC programs is providing good quality care, then the study’s findings suggest that most programs are performing to a medium-to-high level and that there is only a minority of programs where poor quality is a problem
* if the purpose is education, then the study defines the level of challenge in raising low-to-medium quality learning support to a high level
* if the purpose is to improve learning and development outcomes of children, particularly those from disadvantaged backgrounds, then the study defines a further high level of challenge to make sure that these children are enrolled in high quality programs early enough and at a sufficiently high dosage to make a major difference.

**WHAT IS THE E4KIDS?**

The Effective Early Education Experiences for Kids study, or E4Kids study, is Australia’s largest research project into ECEC. The study, funded by the Australian Research Council in partnership with Victoria’s DET, tracked the outcomes of more than 2,500 children living in Victoria and Queensland, from three to four years of age until Year 3. These children, who had attended ECEC settings, were compared to another group of children who had not. Researchers investigated the importance of quality early childhood experiences, the effects of growing up in disadvantaged circumstances, and what types of programs had the greatest benefit.

Key findings of the study include:

* the quality of adult-child engagement in ECEC programs makes a significant contribution to children’s achievement outcomes, with children living with a range of risk factors getting the most benefit from quality teacher-child interactions
* most ECEC services provided a level of instructional support, a key predictor of cognitive outcomes, below the level that US research has indicated is needed to positively shift children’s learning trajectories, particularly for disadvantaged children - this is further supported in E4Kids data which show that the gap in cognitive outcomes between advantaged and disadvantaged children widens rather than narrows
* a positive home environment was correlated with increased NAPLAN achievement across all domains
* socio-economic status (SES) influences the level of ECEC program quality experienced by Australian children, with ECEC classrooms within the lowest SES areas rated consistently lower in the level of teaching and learning support provided to children than those in the highest SES areas.

All children benefit from access to a quality kindergarten, regardless of where they live or how much their parents can afford to pay. The Education State Early Childhood Reform Plan: ready for kinder, ready for school, ready for life will boost funding to our kindergarten system by injecting over $100 million to help kindergartens deliver high-quality and inclusive programs that make the most of every minute that Victorian children are playing and learning. This funding includes:

* $55.3 million in ‘school readiness’ funding to support kindergartens based on children’s level of need
* $22.8 million in increased support for kindergarten services to improve their quality
* $10 million to fund the development of early childhood facilities co-located at government primary schools
* $1.1 million to reform kindergarten funding for non-government schools to encourage more to offer a kindergarten program
* $6.3 million to meet increasing demand for ESK, so more Koorie children and children known to Child Protection can access two years of kindergarten free of charge
* $2.3 million to keep kindergarten places open for families in need
* $5 million to expand the Kindergarten Inclusion Support program, to support children with a disability to access and participate in kindergarten
* $5.5 million to support local government to adopt and expand kindergarten central enrolment.

Early childhood education and care settings in eastern Victoria receive higher quality assessments

At the end of 2016, eight out of ten Victorian ECEC services that had been assessed were rated as meeting or exceeding the NQS- but performance varies widely across areas, from two thirds of services (Brimbank Melton) to nearly all services that had been assessed as meeting or exceeding the standards (Ovens Murray). Generally speaking, areas on the eastern side of Victoria are receiving higher ratings against the standards; over 90 per cent of services have been assessed as meeting or exceeding the standards in: Ovens Murray, Goulburn and Inner Eastern Melbourne.

**Figure 16: Proportion of Victorian early childhood education and care services assessed as meeting or exceeding the National Quality Standards, December 2016**

| **Region** | **Area** | **Percentage** |
| --- | --- | --- |
| North Eastern Victoria | Goulburn | 93.7% |
| North Eastern Victoria | Inner Eastern Melbourne | 90.5% |
| North Eastern Victoria | Outer Eastern Melbourne | 85.2% |
| North Eastern Victoria | Ovens Murray | 97.0% |
| North Western Victoria | Hume Moreland | 74.3% |
| North Western Victoria | Loddon | 82.0% |
| North Western Victoria | Mallee | 85.7% |
| North Western Victoria | North Eastern Melbourne | 74.5% |
| South Eastern Victoria | Bayside Peninsula | 87.8% |
| South Eastern Victoria | Inner Gippsland | 85.7% |
| South Eastern Victoria | Outer Gippsland | 89.6% |
| South Eastern Victoria | Southern Melbourne | 80.8% |
| South Western Victoria | Barwon | 82.4% |
| South Western Victoria | Brimbank Melton | 67.6% |
| South Western Victoria | Central Highlands | 76.2% |
| South Western Victoria | Western Melbourne | 70.9% |
| South Western Victoria | Wimmera South West | 78.4% |
| Victoria |  | 81.4% |

Source: Australian Children’s Education and Care Quality Authority

Services in these areas are also performing well against the seven individual quality areas of the NQF. The percentages of services assessed as meeting or exceeding each individual standard in Goulburn and Ovens Murray are in the top three highest in the state for at least four of the seven National Quality Standard Areas.

**Table 3: Three highest-ranking Victorian areas against individual National Quality Standard Areas, December 2016**

| **National Quality Standard Area** | **Areas with top three ranked percentages of ECEC services assessed as meeting or exceeding standard** |
| --- | --- |
| 1. Educational program and practice | Ovens Murray (98.0%); Bayside Peninsula (94.7%); Mallee (94.6%) |
| 2. Children’s health and safety | Ovens Murray (98.0%); Goulburn (97.3%); Inner Eastern Melbourne (94.7%) |
| 3. Physical environment | Mallee (98.2%); Ovens Murray (98.0%); Central Highlands (97.1%) |
| 4. Staffing arrangements | Mallee (100.0%); Inner Eastern Melbourne (98.6%); Goulburn (98.2%) |
| 5. Relationships with children | Goulburn (100.0%); Ovens Murray (99.0%); Inner Eastern Melbourne (98.1%) |
| 6. Collaborative partnerships with families and communities | Mallee (100.0%); Ovens Murray (100.0%); Bayside Peninsula (99.6%) |
| 7. Leadership and service management | Ovens Murray (97.0%); Outer Gippsland (95.8%); Goulburn (95.5%) |

ECEC services can use the data publicly provided through the AEDC as a guide for service improvement. Domains with high numbers of children with developmental vulnerabilities in certain locations may turn into a focus of improvement for ECEC service providers in that area. Conversely, ECEC services can build on their practice where developmental vulnerabilities are low on the AEDC domains.

# EDUCATION AND LEARNING

All Victorian students deserve the opportunity to develop and achieve their best. The Victorian Government’s Education State reforms aim to equip students with the broad range of skills they need to reach their potential and achieve success in school and in life.

A key focus of the suite of reforms is improving the literacy and numeracy skills of all our students. These are key life skills, and are foundational for engagement in education and lifelong achievement. Strong literacy and numeracy skills not only enable our students to navigate the school curriculum, but also help them to develop reasoning and critical thinking skills, and to contribute to their broader social, cultural and economic surroundings.

Engagement at school supports improved learning. This means that getting students to school, and keeping them in school, is essential for improving their academic outcomes. Year 12 completion (or equivalent) has become the norm for Victorian learners, so the negative consequences of a learner disengaging from education prematurely have intensified. Disengaged learners are more likely to make a poorer transition to employment or further education than those who complete Year 12 or equivalent.

Place makes a difference for a student’s school experience. A 2014 report from the Victorian Auditor-General’s Office found that students attending rural government schools generally exhibited poorer academic performance when compared to students in metropolitan schools. There were also differences in attitudes to school, with students from rural Victoria less engaged with their education. The combination of these two factors has led to lower rates of school completion for rural students and to fewer students choosing to continue on to further education or training.33

THIS SECTION FOCUSES ON:

* Student engagement
* Literacy and numeracy skills
* Staying in school and post-school pathways.

## STUDENT ENGAGEMENT

How students feel about their learning environment has a direct influence on their performance at school. Student dissatisfaction with schooling is linked to lower morale and less favourable attitudes towards academic achievement.34

Student attendance and participation are important factors in school engagement; there is a strong correlation between attendance and achievement.35

Attendance is also one of the key predictors of early dropout rates. Analysis undertaken by DET shows that students who left school early had higher absence days than students who remained at school. The research followed one cohort of students and discovered that the differences in median absence days between stayers and early leavers grew every year from Year 4 (2008) through to Year 9 (2013).

**Figure 17: Median absent days: Victorian Year 10 Early Leavers vs Stayers (government schools) 2008-2014**

| **Year level** | **Early leavers** | **Stayers** |
| --- | --- | --- |
| Year 4 | 10 days | 14 days |
| Year 9 | 14 days | 32 days |

Source: DET

Many students struggle with the transition from primary to secondary school – adolescence is a time when emotional and behavioural problems can become more pronounced. Disengagement from school can be an indicator of the onset of mental health issues or behavioural problems.36

### Location appears to influence feelings of school connectedness

The Attitude to School Survey (AtoSS) measures various levels of student satisfaction, one of which is how connected students feel to their school. Through this survey, students in government primary schools across Victoria are reporting more positive feelings about school than students in government secondary schools (2016). This is a pattern consistent with previous years.

In primary schools, the proportion of students reporting positive connections with their school in areas across Victoria ranges between 59 and 70 per cent of students. This drops to around one quarter to one third of secondary school students.

**Figure 18: Proportion of Victorian government school students in Years 7-12 reporting positive feelings of school connectedness, from lowest to highest.**

| **25%** | **Area** | **Area** | **Area** | **Area** | **33%** |
| --- | --- | --- | --- | --- | --- |
|  | Hume Moreland  Inner Gippsland  Ovens Murray  Goulburn | Outer Eastern  Central Highlands  Outer Gippsland  Brimbank Melton  Loddon  North Eastern | Victoria (30.3 per cent)  Barwon  Western Melbourne  Mallee | Bayside Peninsula  Southern Melbourne  Inner Eastern  Wimmera South West |  |

Source: AtoSS 2016

Schools that foster a strong sense of connectedness are characterised by school staff that understand the importance of belonging, inclusion and caring and respectful relationships, and start to establish this even before a student has commenced at the school. They understand that all students need to feel that school is a safe place where people care about them, and their needs for support, respect and friendship are met.

**Increasing student connections**

The School Wide Positive Behaviour Support program aims to create a positive, safe and inclusive school environment for responding to student behaviour. Individual students are provided with the learning supports they need to achieve academic and social success. The program is based on a collaborative and open approach, fostering a culture where open and responsive management is shared by school community members.

Regional Partnerships across Victoria are taking action to improve student connectedness. The partnership in Central Highlands heard that building engagement from an early age through aspirational career pathways for all students (including primary students) is important, and supporting students to stay connected to the region is a focus in Ovens Murray.

### Rates of student absences are higher in schools in Regional Victoria.

Victoria remains the only jurisdiction in Australia where average attendance in government schools across Years 1 to 10 is above 90 per cent. In 2016, the average number of days that Victorian government school students were absent from school was higher in Regional Victoria. This is true for both approved and unapproved absences (this includes where a student has been truant, where there has been unauthorised absence but with parent permission, and for unexplained reasons).

Data for 2016 also show that unapproved absence rates were highest in Outer Gippsland (Years 5-6) and Goulburn (Years 7-12). In these areas, students were absent more than two and a half times the number of days that students in Inner Eastern Melbourne were absent. This was the area with the lowest unapproved absence rates in 2016.

**Figure 19: Average number of absence days per full-time equivalent student (government schools) in Years 7-12, 2016**

This figure shows that the number of absence days per full time students (unapproved and all) across Victorian government schools varies across the state. The areas across the regions with the highest rates (for all absences) are Goulburn, Outer Gippsland, Mallee and Central; and the areas with the lowest rates are Inner Eastern Melbourne, Bayside Peninsula, North Eastern Melbourne and Wimmera South West.

Source: DET, 2016

### Students in some areas of Victoria are more likely to miss 30 days or more of school

Since 2012, the proportion of government school students with reported chronic absence (more than 30 days absent in a year) has been increasing. All areas are experiencing challenges with engaging these students, either because of increasing rates (the vast majority), a high percentage of students (more true for areas in Regional Victoria), or a mixture of the two.

**Table 4: Proportion of Victorian government school students absent for more than 30 days in one year (of all students with absence days)**

| **Region** | **Area** | **2012** | **2013** | **2014** | **2015** | **2016** |
| --- | --- | --- | --- | --- | --- | --- |
|  | Victoria | 11.5% | 11.3% | 11.4% | 11.8% | 12.6% |
| North Eastern Melbourne | Goulburn | 18.8% | 17.4% | 16.0% | 15.4% | 16.9% |
| North Eastern Melbourne | Ovens Murray | 11.1% | 12.9% | 13.2% | 12.9% | 14.4% |
| North Eastern Melbourne | Outer Eastern Melbourne | 10.9% | 9.5% | 10.2% | 10.3% | 11.1% |
| North Eastern Melbourne | Inner Eastern Melbourne | 7.1% | 5.4% | 6.4% | 6.6% | 7.3% |
| North Western Melbourne | Mallee | 14.9% | 16.6% | 17.6% | 16.1% | 16.8% |
| North Western Melbourne | Loddon | 11.4% | 13.0% | 12.9% | 15.9% | 15.7% |
| North Western Melbourne | Hume Moreland | 15.1% | 15.8% | 14.8% | 15.6% | 16.8% |
| North Western Melbourne | North Eastern Melbourne | 9.8% | 10.0% | 10.5% | 11.1% | 11.7% |
| South Eastern Victoria | Outer Gippsland | 14.9% | 14.6% | 15.1% | 16.7% | 16.3% |
| South Eastern Victoria | Inner Gippsland | 13.0% | 13.8% | 14.0% | 14.0% | 14.3% |
| South Eastern Victoria | Southern Melbourne | 13.1% | 12.3% | 13.1% | 12.9% | 13.8% |
| South Eastern Victoria | Bayside Peninsula | 9.2% | 9.1% | 9.0% | 9.3% | 10.3% |
| South Western Victoria | Barwon | 13.3% | 13.7% | 12.6% | 13.5% | 14.1% |
| South Western Victoria | Wimmera South West | 11.8% | 11.7% | 12.3% | 13.5% | 14.6% |
| South Western Victoria | Central Highlands | 12.4% | 12.2% | 12.3% | 13.2% | 13.0% |
| South Western Victoria | Western Melbourne | 11.0% | 11.3% | 11.3% | 11.3% | 12.7% |
| South Western Victoria | Brimbank Melton | 13.7% | 12.9% | 12.2% | 13.4% | 14.4% |

Source: DET, 2012

There is generally a pattern between positive perception of the school environment (how connected students feel to their school and how safe they feel when they are at school) and low levels of absence. Through the AtoSS, secondary school students in government schools in Inner Eastern Melbourne and Bayside Peninsula report high feelings of safety and low incidences of bullying. Students reporting chronic rates of absence in these areas are the lowest across the state.

### Some regional areas show signs of improvement in unapproved and chronic student absences

Between 2015 and 2016, the Central Highlands and Loddon Areas, both with absence rates above statewide levels, had the biggest drop in average unapproved absences; a decrease of 3.1 days for Central Highlands and 1.8 days for Loddon. Rates of chronic absence in Goulburn have decreased overall since 2012, despite fluctuations between years.

In mid-2016, DET’s North Eastern Victoria Region office focused on chronic absenteeism in the Goulburn area, and committed to undertake action to improve attendance for Aboriginal students. The result was improved attendance for some students deemed ‘at risk’ by virtue of low attendance.

**Figure 20: Goulburn Area response to absenteeism – a specific response to Aboriginal children with less than 80 per cent attendance**

In Term 3, 2016 224 Aboriginal primary and secondary students across Goulburn had below 85 per cent attendance.

Students were identified as (by their attendance rate): a) critical – less than 30 per cent attendance (42 students); b) at risk – less than 70 per cent attendance (64 students), or c) engaging – less than 85 per cent attendance (118 students).

Multidisciplinary teams developed individual student strategies which targeted individual needs and concerns (Terms 3 and 4, 2016) and ‘At risk’ group attendance improved from 54 per cent to 79 per cent for some students in Term 1, 2017.

Source: DET, 2016

Where students are having attendance issues, DET has a range of policies and procedures in place to ensure that children and young people attend school every day. This includes schools working directly with families to identify and resolve attendance issues through proactive strategies.

## LITERACY AND NUMERACY SKILLS

Traditional skills such as literacy and numeracy remain essential for students’ future participation in an economy that is becoming increasingly reliant on collaboration, communication, critical thinking and innovation.

According to data collected by the Organisation for Economic Co-operation and Development (OECD), the literacy proficiency of workers in Australia tends to closely match the literacy competency required by their jobs, indicating that literacy capabilities have a strong link to employment outcomes.37

### Victorian students continue to perform well in national literacy and numeracy tests

NAPLAN is an annual assessment for all Australian students in Years 3, 5, 7 and 9, testing key literacy and numeracy skills. In 2016, Victoria was one of Australia’s top performing jurisdictions on NAPLAN across domains and year levels, with a higher proportion of students performing above the National Minimum Standards (NMS) and in the top two performance bands than the Australian average.

**Table 5: Proportion of students at or above NMS and achieving results in the top two bands, Australia and Victoria, NAPLAN 2016**

|  | **Year 3** | **Year 3** | **Year 5** | **Year 5** | **Year 7** | **Year 7** | **Year 9** | **Year 9** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Reading** | **Numeracy** | **Reading** | **Numeracy** | **Reading** | **Numeracy** | **Reading** | **Numeracy** |
| **At or above national minimum standard (%)** |  |  |  |  |  |  |  |  |
| **Victoria** | 95.8% | 95.9% | 94.6% | 95.3% | 95.3% | 96.1% | 93.4% | 95.4% |
| **Australia** | 95.1% | 95.5% | 93% | 94.3% | 94.6% | 95.5% | 92.8% | 95.2% |
| **Top two bands (%)** |  |  |  |  |  |  |  |  |
| **Victoria** | 54.1% | 40.7% | 38.3% | 31.7% | 27.4% | 32.4% | 20.7% | 23.3% |
| **Australia** | 49.4% | 35.6% | 35.3% | 28.3% | 26.2% | 30.3% | 20.6% | 22.5% |

Source: ACARA, NAPLAN National Report for 2016

Note: NAPLAN results at the Victorian state level are based on plausible values. This means that students who were absent or withdrawn from the NAPLAN test were given an imputed score based on the background profile of the student. The methodology ensures that the results reflect the full student cohort.

Victoria’s 2016 NAPLAN results continue some patterns that have been evident for some time; higher proportions of primary students achieve results in the top two bands of performance at every year level. This is in part influenced by the nature of the tests. NAPLAN performance from Year 3 through to Year 9 is not linear, and the tests are constructed so that the minimum score possible increases at each year level. Scores are grouped into one of six bands, and the bands increase with each year level to reflect the higher expectations of students and more challenging content. There has been some improvement over the last year in the proportion of students achieving the highest results in NAPLAN testing, particularly for students in Year 3 across both domains.

**Figure 21: Proportion of Victorian students achieving in the top two bands of NAPLAN (reading and numeracy), 2016**

|  |  |  |
| --- | --- | --- |
| **Domain** | **Year level** | **2016** |
| Reading | Year 3 | 54 |
| Reading | Year 5 | 38 |
| Reading | Year 7 | 27 |
| Reading | Year 9 | 21 |
| Numeracy | Year 3 | 41 |
| Numeracy | Year 5 | 32 |
| Numeracy | Year 7 | 32 |
| Numeracy | Year 9 | 23 |

Source: ACARA, NAPLAN National Report for 2016

The Education State reforms in literacy and numeracy have been developed to help more students achieve excellence in reading and maths, and to help break the link between disadvantage and outcomes for students.

Progress will be measured against the following targets: (i) increasing the proportion of Year 5 and Year 9 students achieving at the top two bands for NAPLAN numeracy and reading by 25 per cent, and (ii) reducing the gap in average achievement between disadvantaged and other students in Year 5 and 9 reading by 15 per cent.

Victoria’s results also show significant differences in performance across demographics. There are certain cohorts of students who consistently show poorer performance in NAPLAN testing than the general student population, including Aboriginal students and students in OOHC. This issue is evident not only in Victoria’s results, but nationwide.

### Links between literacy and numeracy performance and geographic location

NAPLAN results are reported by geographic location (geolocation) using the Australian Statistical Geography Standard for each school. Results are presented for students from schools in major cities, inner regional, outer regional, remote and very remote geolocations for each jurisdiction and for Australia overall. When results are presented like this, it is evident that geographic location is another characteristic associated with academic achievement.38

Australia-wide patterns show that students from major cities have the highest mean scale scores, which decrease as areas become more remote. This is in part due to the interrelation between geography and demographic characteristics such as parental education levels and SES.

Analysis of Victorian NAPLAN results (2009-2015) conducted by the Grattan Institute shows that in some cases, geographic differences in learning gains, as measured by NAPLAN, may be equivalent to two years of academic progress between Years 3 and 9. The analysis found that the biggest difference in learning growth is between regional and rural students, and those in the inner city.39

In Victoria in 2016, students achieving results in the top two bands of NAPLAN reading and numeracy at levels higher than the statewide average were from only a few areas. These included Bayside Peninsula and Inner Eastern Melbourne (across all year levels and domains) and to a lesser extent, North Eastern Melbourne, Outer Eastern Melbourne and Western Melbourne. Over the last five years, Western Melbourne has also shown consistent improvement in higher-level numeracy results for students in Years 3, 5 and 7.

There is a significant difference between the proportions of students achieving at this level across areas. Such a large range may mean that the statewide average is somewhat distorted, particularly given the highest performing areas are generally also those with a higher student population. Notwithstanding this, there is a clear difference in results of students from areas of Greater Melbourne and those in Regional Victoria; students in the former are up to two to three times more likely than the latter to achieve results in the top two bands for both NAPLAN domains.

The proportion of Victorian students achieving results in the top two bands declines from primary into secondary school. This is consistent with national trends. In some areas of Victoria the decline is more pronounced, with proportions of students performing in the top two NAPLAN bands equalling the proportion performing in the bottom two bands in the later year levels. For reading, this is more evident in Year 7, for numeracy, this becomes apparent in Year 9.

Education State targets aim to increase both the proportion of students in Years 5 and 9 achieving results in the top two bands of NAPLAN reading and numeracy, and improve the performance of disadvantaged students. For some areas, this means focusing on lifting students out of the bottom levels of performance.

Some areas across Victoria have shown stronger improvement than others against this measure over the last year, most notably in Regional Victoria. These areas have a higher percentage of students performing at this level than others; therefore there is generally more opportunity for improvement.

**Table 6: Largest percentage point decrease of students in the bottom two bands for NAPLAN reading and numeracy, 2015-2016**

| **Year Level** | **Numeracy** | **Reading** |
| --- | --- | --- |
| Year 3 | Goulburn, Outer Gippsland, Ovens Murray | Inner Gippsland |
| Year 5 | Central Highlands, Ovens Murray, Goulburn | Ovens Murray, Goulburn, Central Highlands |
| Year 7 | Central Highlands, Ovens Murray, Wimmera South West | Nil |
| Year 9 | Brimbank Melton, Outer Gippsland, Outer Eastern Melbourne | Outer Gippsland, Ovens Murray, Inner Gippsland |

Source: VCAA, NAPLAN 2015-16

**Improving literacy and numeracy**

In 2017, DET released the Literacy and Numeracy Strategy. The aim of the strategy is to support Victorian principals and teachers to improve the literacy and numeracy capabilities of their students.

The success of the strategy will be based on a deep understanding of individual students’ capabilities and needs and instructional guidance that is grounded in evidence-based practice and precision teaching. Additional support will be offered to schools requiring intervention to meet required levels, and to staff for professional learning.

These initiatives will further support excellence in teaching and learning, leading to stronger outcomes across all learning areas, with a particular focus on literacy and numeracy.

## STAYING IN SCHOOL AND POST-SCHOOL PATHWAYS

The decision to finish school can have a significant impact on a young person’s life. When young people do not complete a Year 12 certificate (or its equivalent), they risk serious lifetime social and economic disadvantages. There is a positive correlation between increased individual learning and a reduction in the risk of future unemployment and long-term social and economic disadvantage.40

A recent study by the Mitchell Institute found that roughly one quarter of Australia’s 19-year-olds do not complete Year 12 or equivalent qualifications and a similar proportion of 24-year-olds are not actively engaged in work or education. The social costs of leaving school early can be significant for the individual and society. For each student who does not complete Year 12 or equivalent, compared to a student who does, the social impact is more than $600,000 over the adult years (aged 25-64). Most of this impact is attributable to lower earnings of early school leavers across their working life, as well as substantial economic impacts in terms of crime and marginal tax burden.41

### Disadvantaged students and those living in regional areas are less likely to stay in school

Nearly all Victorian senior secondary students (96.6 per cent) in Years 9-12 continued in their education in 2016. A measure of success of the Education State reforms is to halve the proportion of students leaving education during these year levels by 2025.

DET analysis of early school leavers in government schools – students who left school before completing a qualification and did not re-enrol in another school or education institute (such as TAFE) by August the following year – shows differences by both area and level of disadvantage. Disadvantaged students are more likely to leave school early than non-disadvantaged students. The difference in early leaving rates of these two cohorts is more pronounced in areas of Regional Victoria. In these areas, the proportion of all students leaving school early is higher than equivalent rates in Greater Melbourne.

**Re-engaging students at risk**

The two-year Navigator service pilot aims to increase the numbers of young people across the state that are connected to school and engaged in learning. The program received an initial $8.6 million investment in 2016, and operates in eight areas across the state (Mallee, Central Highlands, Goulburn, Ovens Murray, Hume Moreland, Western Melbourne, Bayside Peninsula and Southern Melbourne). It supports young people aged 12-17 who are not connected to schools at all or are at risk of disengaging.

A further $7.8 million was announced for the program as part of the 2017-18 Budget. This additional funding is for extension of the existing Navigator sites until the end of 2018, with provision for additional case managers across the sites.

Navigator provides intensive case management and assertive outreach support to disengaged learners. The program actively works with these young people and their support networks to return them to education. Navigator is delivered by community agencies that work closely with local schools, and regional offices.

Across the Navigator program pilot sites, 583 young people were receiving case management support as at July 2017, with an additional 255 young people on the waiting list. Around 407 young people have been re-engaged in education.

Two Navigator pilot programs operate in DET’s North Western Victoria Region. The lead providers of Navigator are Jesuit Social Services, in Hume Moreland, and Northern Mallee Local Learning and Employment Network (NMLLEN), in Mallee.

Jesuit Social Services designed its Navigator model to draw on its work in the justice system and with families and children, as well as applying trauma-informed practice, restorative practice, assertive outreach and case management work. Jesuit Social Services has a strong focus on building relationships with other services and stakeholders to support the re-engagement of young people back to education.

In the Mallee Area, which is geographically the largest of the Navigator pilot areas, NMLLEN employs a joint partnership model with the Murray local learning and employment network and a number of other partner providers. A key strength of this Navigator pilot program model is that it delivers services to young people in dedicated geographic areas, and case managers are linking in with other local services to promote a holistic approach to supporting young people to re-engage with education.

Young people who disengage from education early put themselves at greater risk of both short- and long-term unemployment. In Victoria, unemployment rates for young people not in full-time education are higher than unemployment rates for all people.

**Figure 22: Proportion of 15-24 year olds not attending full-time education and unemployed population, Victoria, 2007-2016**

This figure shows the youth unemployment rate hovering at around 11 per cent between 2007 and 2016, with spikes up to 15 per cent in January 2013 and 18 per cent in January 2015.

The figure shows the overall unemployment rate hovering between 5 and 7 per cent over the same period.

Source: ABS Labour Force, Australia, July 2017

Analysis of youth unemployment data by the Brotherhood of St Laurence shows that across Australia, youth unemployment is generally higher in rural, regional and outer suburban areas. While this is not a new finding, the report does identify the 20 worst performing areas nationally for youth unemployment over the year to January 2016.

Victoria had three areas identified (as defined by the ABS data used) including: i) Melbourne West region of Victoria, including Footscray, Laverton Werribee, Sunshine, Melton (17.3 per cent youth unemployment rate) ii) Geelong region of Victoria, including Winchelsea, Queenscliff, Lorne, Torquay (16.9 per cent) iii) Hume region of Victoria, including the Goulburn Valley, Wodonga, Wangaratta (16.0 per cent).

Through identifying these specific locations, the report does highlight how outcomes for Victoria’s young people can vary even within a rural or metropolitan context. This is particularly so for regional areas with major cities, such as Barwon. Employment in the regional centre, in this case Geelong, is high, however in locations further afield, young people are finding it more difficult to secure a job.42

### Post-school destinations for students completing Year 12 vary widely according to where they live

The choice of post-school pathways for students leaving school is critical. Attaining a qualification in the higher education or the training and TAFE sectors increases an individual’s employability and earning capacity as well as reducing their risk of poverty, unemployment and homelessness.

Through the On Track survey, school leavers are contacted within six months of leaving school to see if they are on a path to further education, training or employment. Results from the 2016 On Track survey showed that lower proportions of young people who completed school in Regional Victoria pursued further education and training than young people from Greater Melbourne.

This may be due to a number of reasons, some of which were highlighted in a Victorian parliamentary inquiry into the difference in participation in higher education due to geographical location. These include: i) access to higher education institutions and/or prohibitive costs of university for rural students, particularly when considering many would have to move away from home ii) family attitudes and beliefs about the benefits of higher education iii) differences in school academic outcomes and proportions of students completing Year 12.43

**Figure 23: Percentage of Year 12 completers in further education and training, 2016**

|  |  |
| --- | --- |
| **Area** | **Education and training** |
| Inner Eastern Melbourne | 88.8% |
| Western Melbourne | 84.3% |
| Brimbank Melton | 81.1% |
| Southern Melbourne | 79.7% |
| North Eastern Melbourne | 79.4% |
| Hume Moreland | 79.1% |
| Bayside Peninsula | 78.4% |
| Outer Eastern Melbourne | 74.1% |
| Central Highlands | 68.6% |
| Barwon | 68.6% |
| Goulburn | 68.1% |
| Inner Gippsland | 67.5% |
| Mallee | 62.2% |
| Loddon | 60.4% |
| Outer Gippsland | 59.1% |
| Wimmera South West | 58.1% |
| Ovens Murray | 53.9% |
| Victoria | 76.8% |

Source: On Track, 2016

**Greater Shepparton Lighthouse Project Greater**

Shepparton is a services, agriculture and food processing centre with a population of more than 60,000. This includes a significant Aboriginal population. The municipality also has a large refugee population, which in recent years has come mainly from Iraq, Afghanistan and Sudan.

At any given time, about a quarter, or an estimated 2,000 young people, are not in work or study in Greater Shepparton. While this figure is relatively similar to other places in Australia, the Greater Shepparton community was concerned that so many young people were not realising their potential.

The Greater Shepparton Lighthouse Project was launched in 2013 to improve the social and educational outcomes for children and young people. The project began when business leaders identified a disconnect between the high numbers of disengaged youths and the inability to find work-ready young people to fill employment roles. The project is driven by business, community and sector leaders who are committed to a 20-year plan to improve the education and other outcomes for the region’s young people.

The Lighthouse Project focuses on supporting children and young people from conception to career, including ensuring that more are ready for school; transition successfully to secondary school; are healthy and happy in their teens; complete Year 12 and transition to work and post-secondary study. HEALTH AND WELLBEING

Health and wellbeing includes not only physical health, relating to the prevention and management of diseases, injuries and disabilities affecting the body, but also mental health or psychological wellbeing, relating to people’s emotions, thoughts and behaviours. For children and young people, both physical and mental health are critical contributors to development and learning, and have a strong relationship with other long-term life outcomes.

A number of factors can put children and young people at greater risk of poorer health outcomes, including exposure to alcohol in utero, low birth weight, poor nutrition and sedentary behaviours. Children and young peoples’ psychological wellbeing is also affected by family, social and educational environments, as well as their relationships with peers and adults.

A range of factors including behaviours, genetics, access and quality of clinical care, and the physical environment all influence health and wellbeing. Analysis has found, however, that socio-economic factors also have a considerable influence on health outcomes, and may account for as much as 40 per cent of all determinants of health.44

In Victoria, socio-economic disadvantage is the greatest cause of health inequality, while the greatest relative difference in health status for population groups is between Aboriginal Victorians and others. There are also health inequalities between males and females, and for those living in regional and rural areas. Other demographics and subsections of the community may also have greater vulnerability to specific health and wellbeing risks.45

THIS SECTION FOCUSES ON:

* health and wellbeing in the early years
* protective health behaviours and risk factors
* mental health and resilience.

## HEALTH AND WELLBEING IN THE EARLY YEARS

Laying the foundations for good health starts early - a woman’s health and health behaviours even before pregnancy can affect birth outcomes for her unborn child. A mother’s intake of alcohol, tobacco and other drugs during pregnancy may increase the risk of her child experiencing poor pre and post-natal outcomes, such as low birth weight, developmental delay and behavioural implications.46

### Levels of protective ante and post-natal factors vary across Victoria

**Exposure to alcohol**

Babies exposed to alcohol in utero may be at risk of disturbed development and problems in later life. Fetal Alcohol Spectrum Disorder is a general term that describes the range of effects that can occur in a baby who has been exposed to alcohol in their mother’s womb; these effects can include delayed development, slow growth and behavioural disorders.47

The Victorian Child Health and Wellbeing Survey (VCHWS, 2013) shows that nearly half of Victorian babies are exposed to alcohol in utero. There is a significant difference in this proportion across the individual areas, ranging from one in five babies (Hume Moreland) to nearly three quarters (Central Highlands) of all babies. There is no clear pattern associated with geographic location.

**Low birth weight**

A baby born at a weight below 2,500 grams is considered to have a low birth weight. These babies face higher risks of neurological and physical disabilities, with smaller babies facing higher risks.48

There are some maternal factors that can increase the likelihood of a baby being born at a low birth weight. According to the Australian Institute of Health and Welfare (AIHW), babies born to mothers living in remote areas and socio-economically disadvantaged areas are slightly more likely to be born at a low birth weight.49

One in fifteen Victorian babies is born weighing under 2,500 grams (VCHWS, 2013). There are slight differences in the birth weight of Victorian babies depending on where they are born. While higher proportions of babies are born at a low birth weight in some regional areas, for example Inner and Outer Gippsland - 7 to 8 per cent when compared to the state average of 6.6 per cent - there does not seem to be a consistent pattern across the areas.

**Antenatal home visiting program - Wangaratta**

The Ovens Murray Area Partnership supported Wangaratta Rural City Council to evaluate an innovative antenatal home visiting program designed to engage much earlier with families who are at risk or who may struggle with parenting.

Funded through the MCH Innovation Fund, this project was run in partnership with North East Health/Child First and DHHS. The project aimed to build greater trust of services and longer-term engagement with families to address many post-natal needs ñ ranging from cot and car seat safety through to smoking and drug and alcohol issues, family violence, and maternal emotional wellbeing.

The project has brought together key health and family support services to share information and consider each individual family in the process. It has also developed a new risk assessment tool. To date, there are very positive and promising signs that the program is making a difference, including increased take-up of services and improved MCH visitation.

The role of the Area Partnership is to assist in a thorough evaluation of the project that encourages take-up of similar practices elsewhere in the region by sharing the process and results widely to improve outcomes for vulnerable women and their children.

### Immunisation rates vary across Victoria

Immunisations are a successful way of reducing the spread of vaccine-preventable diseases, providing protection against potentially serious health problems spreading throughout the community.

Immunisation rates across the state in 2015-16 were promising, with a slight increase for nearly all areas across the three ages (12-<15 months, 24-<27 months and 60-<63 months). This follows slight declines in Victorian immunisation rates over the last ten years, where some areas had dropped below 90 per cent for some age groups.

Although Victoria’s overall childhood immunisation coverage is 90 per cent or higher and increasing in every age cohort, there are some geographic cohorts with much lower rates. No Jab No Play was introduced to protect the whole community and boost vaccination rates further across the state towards the target of 95 per cent, which is necessary to halt the spread of particularly virulent diseases such as measles.

The No Jab No Play legislation means that children who are not fully immunised for their age cannot enrol in ECEC services unless they have an approved exemption for a medical reason. Conscientious objection is not an approved exemption. Introduced in 2016, the new law is designed to provide parents and carers with a reminder point and additional motivation to keep their children’s vaccinations up to date.

Victorian immunisation rates are generally high when compared to the rest of the nation, though participation varies across age groups and areas. In general, immunisation rates are highest at five years (60-<63 months), possibly due to requirements for immunisation at school entry, and lowest for the two-year immunisation (24-<27 months). In 2015-16, families in Wimmera South West recorded the highest vaccination rates in Victoria across the two younger age groups.

Rates of children up to date with their immunisations are generally lower in areas of Greater Melbourne, particularly when looking at the five year age group. This is possibly a response to exaggerate concerns about what are in fact low health risks associated with immunisation. **Figure 24: Proportion of Victorian children fully vaccinated (aged 60-<63 months), 2015-16**

This figure shows that immunisation rates vary across Victoria from 92.4% to 95.2%.

Source: Australian Immunisation Register, 2015-16

**Ensuring immunisation coverage for Victorian kids**

In 2015 a new app, VaxOnTime, was developed by DHHS to help remind parents and carers in Victoria when immunisations for their children are due. The app was developed in response to one of the most common reasons parents cite for falling behind in vaccinations -an estimated 20 per cent of parents forget when vaccinations are due. This is particularly likely as vaccinations become more spread out - from birth to five years of age, once home from hospital, there are six age-points for vaccinations.

The app prompts parents with an immunisation due-date reminder, helps them find and make an appointment with the nearest immunisation provider, and links to trusted information on the Better Health Channel. It was downloaded approximately 11,000 times during 2016, with numbers rising in 2017.

Differences in some childhood health patterns are evident across the state from an early age Establishing healthy behaviours and attitudes provides a child with the best chance of living a healthy and happy life. This means that testing for health issues early is key to identifying children who need immediate help and support.

The proportion of Prep-aged children assessed by their teacher as being vulnerable on the physical health and wellbeing domain varies across areas (AEDC, 2015). Figures range across the state from nearly 5 per cent (4.7 per cent) in Inner Eastern Melbourne to over 10 per cent (10.6 per cent) in Inner Gippsland. Areas with proportions of children vulnerable on this domain at levels lower than the statewide average are in Greater Melbourne.

**Figure 25: Proportion of Prep-aged children developmentally vulnerable on physical health and wellbeing domain, 2015**

This figure shows that the proportion of Prep-aged children developmentally vulnerable on physical health and wellbeing domain varies across Victoria from 4.7% to 10.6%

Source: AEDC, 2015

According to the AEDC, children who are developmentally vulnerable on the physical health and wellbeing domain experience a number of challenges that interfere with their ability to physically cope with the school day. This may include being dressed inappropriately, frequently late, hungry or tired. These children are usually clumsy and may have fading energy levels.

### Around one in ten children start school at risk of emotional and behavioural difficulties

Nearly ten per cent of Victorian children start school at high-to-moderate risk of clinically significant problems related to their emotional and behavioural development. Through the 2016 SEHQ, higher proportions of parents from Victoria’s regional areas reported that their child experienced these difficulties. In a number of regional areas, these children were more than twice as likely as some other children to be experiencing challenges with behaviour such as paying attention, controlling their aggression and playing well with others.

**Figure 26: Proportion of children with emotional and behavioural difficulties (as reported by parents)**

| **Percentage** | **Area** | **Area** | **Area** | **Area** | **Area** | **Area** |
| --- | --- | --- | --- | --- | --- | --- |
| **Under 7.5%** | Inner Eastern Melbourne | Bayside Peninsula | North Eastern Melbourne |  |  |  |
| **7.5% to 9.9%** | Western Melbourne | Outer Eastern Melbourne | Victoria (9.3%) | Southern Melbourne | Barwon | Brimbank Melton |
| **10% to 12.5%** | Hume Moreland | Wimmera South West | Inner Gippsland | Central Highlands | Loddon |  |
| **Over 12.5%** | Ovens Murray | Goulburn | Mallee | Outer Gippsland |  |  |

Source: SEHQ, 2016

Children who are not developmentally ready, or who have emotional and behavioural problems at school entry, often find it difficult to concentrate and learn. This may mean they fall behind academically as they progress through school. Analysis of linked datasets maintained by DET and the Melbourne School of Global and Population Health found that emotional and behavioural difficulties present at school entry were strongly correlated with children falling below the NMS in NAPLAN reading and numeracy at Year 3.50

**Southern Mallee Early Years Together project**

Funded through the MCH Service Innovation Fund, this is a shared initiative across the LGAs of Gannawarra, Swan Hill and Buloke. The project built on the recognised need for simple communication protocols and tools to better enable all services to support families with complex needs through pregnancy and with children up to eight years in a more continuous, coordinated way. This project was driven by a project steering group - together they have built a local model that aims to keep all eyes on the child. The model:

* applies the Team Around the Child framework to bring together local services to identify needs, develop a plan and implement
* uses the Patchwork tool, to connect services working with the same client
* uses the Continuum of Needs framework as a ‘common language’ around risk and needs assessment.

### Special health care needs

Children and young people with special health care needs have chronic physical, developmental, behavioural or emotional conditions that require health and related services of a type or amount beyond what is required by this age group generally.

Responses to the 2016 VSHAWS show that proportions of Victorian students in Years 5, 8 and 11 reporting special health care needs (expected to last for at least 12 months) vary across the state.

**Figure 27: Proportion of students with special care needs, 2016**

| **Region** | **Area** | **Percentage** |
| --- | --- | --- |
| North Eastern Victoria | Goulburn | 17.6% |
| North Eastern Victoria | Ovens Murray | 16.0% |
| North Eastern Victoria | Outer Eastern Melbourne | 20.5% |
| North Eastern Victoria | Inner Eastern Melbourne | 16.6% |
| North Western Victoria | Mallee | 22.6% |
| North Western Victoria | Loddon | 22.1% |
| North Western Victoria | Hume Moreland | 16.9% |
| North Western Victoria | North Eastern Melbourne | 18.9% |
| South Eastern Victoria | Outer Gippsland | 17.2% |
| South Eastern Victoria | Inner Gippsland | 24.1% |
| South Eastern Victoria | Southern Melbourne | 15.9% |
| South Eastern Victoria | Bayside Peninsula | 18.3% |
| South Western Victoria | Barwon | 17.0% |
| South Western Victoria | Wimmera South West | 11.7% |
| South Western Victoria | Central Highlands | 26.9% |
| South Western Victoria | Western Melbourne | 16.1% |
| South Western Victoria | Brimbank Melton | 13.3% |
| State | Victoria | 17.7% |

Source: VSHAWS, 2016

Over one quarter of students in Central Highlands reported having a special health care need. Responses to the same survey also indicate that high proportions of students in this area report accessing physical health services (90 per cent) and mental health services (85 per cent) when needed.

## PROTECTIVE HEALTH BEHAVIOURS AND RISK FACTORS

Early patterns of health and wellbeing behaviours can have lifelong impacts. Good health has a major impact on a child’s quality of life and can influence aspects from schooling to participation in extra-curricular activities.

Adolescence is a time of intense change and development. While this period presents children and young adults with many opportunities for positive growth, it can also be a period when many risk behaviours start or are consolidated. These extend from diet and physical activity, to substance use and risky sexual behaviours, and can have major impacts on future adult health.51

**Doctors in Secondary Schools**

The $43.8 million Doctors in Secondary Schools initiative is delivering on the Government’s election commitment to fund general practitioners (GPs) to attend up to 100 Victorian government secondary schools up to one day a week to provide medical advice and health care to those students most in need.

The objectives of the program are to: (a) make primary health care more accessible to students; (b) provide assistance to young people to identify and address any health problems early; and (c) reduce the pressure on working parents and community-based GPs.

All secondary school students enrolled in a participating school will be able to access an adolescent-health trained GP.

In 2016, the Government announced the 100 successful schools that would participate in the program - only schools with higher levels of socio-economic disadvantage in areas with relatively limited access to GPs were invited to apply. Of the 100 schools selected, more than half are in rural or regional areas, and 25 are in Melbourne’s growth areas and urban fringe. The program is part of the government’s efforts towards achieving the Education State target of ‘happy, healthy and resilient kids’ by improving ease of access to health services for young people.

### Participation in protective health behaviours is declining

Australian guidelines provide advice on the best nutrition and lifestyle choices we can make for our health and wellbeing. In relation to diet and exercise for Victorian children and young people, this means that:

* children and adolescents should be physically active every day - for children over five years of age, the recommendation is for at least 60 minutes of moderate to vigorous activity every day.52
* the minimum recommended intake of vegetables for younger children ranges from two and a half serves a day for two- to three-year-olds to four and a half serves a day for four- to eight-year-olds. This increases to five to five and a half serves a day for older children and adolescents.53

**Physical activity**

Regular physical activity has many benefits for children and young people, including promotion of healthy growth and development, strong muscles and bones, improved physical fitness, including coordination and movement skills, and reduced risk of disease and unhealthy weight gain.54

A recent review has also found that physical activity can benefit brain health at each stage of life, with growing evidence to suggest that physical activity during the early period of brain development positively impacts cognitive development, attention regulation and memory performance. Additionally, psychological benefits of physical activity can include the reduction of mental health issues such as depression and anxiety, and boosts to self-esteem.55

Since 2014, the proportion of Victorian students in Years 5, 8 and 11 doing the recommended amount of physical activity every day has decreased (VSHAWS). Across areas of Victoria, this rate varies from one in five to nearly one in three students. Despite an overall decrease statewide, some areas have actually seen improvements. Between 2014 and 2016 there was a substantial increase in the proportion of students in Outer Gippsland doing the recommended amount of physical activity every day. This area now records the highest rate in the state for this measure.

Education State targets aim to increase the proportion of students doing physical activity for an hour a day, five times a week by 2025. Between 2014 and 2016 the proportion of students who were active at this level also decreased, from 55 per cent (54.6) to 52 per cent (51.8). Higher decreases were reported in Western Melbourne, Ovens Murray, Goulburn, Central Highlands and Hume Moreland.

Over fifty per cent of students in most areas are meeting this level of activity, however rates fall below one in two students in Western Melbourne, Central Highlands, Goulburn, Southern Melbourne and Hume Moreland.

**Improving the physical health of younger Victorians**

One of the six priorities of the Victorian Public Health and Wellbeing Plan 2015-2019 is healthier eating and active living for Victorians.

Key actions under the plan to promote this among children and young people include:

* updating the School Canteens and Other School Food Services Policy to increase access to healthy food and drink for school students
* strengthening the role of physical education and recreation and sport in Victorian schools, and exploring ways to design schools to decrease sedentary behaviour, increase physical activity and increase active transport
* delivering a range of physical activity and active transport programs including the Premier’s Active April and an expansion of the Ride2School program.

**Sedentary behaviours**

Children and young people are now exposed to information technology in a way never previously experienced. While the modern world of technology offers many valuable opportunities, we need to be mindful about how much is too much.

A systematic review of research by Deakin University found a strong consistent relationship between time spent using screens for leisure by adolescents and depressive symptoms and psychological distress. Poorer mental health status was found among adolescents using screens for more than two to three hours per day, and there was moderate evidence supporting a relationship between low self-esteem and screen use.56

According to the 2016 VSHAWS, nearly two-thirds of Victorian students in Years 5, 8 and 11 are on electronic media for more than two hours a day. This is a slight increase from 2014. There is significant variance across areas, from one in two students in Central Highlands to nearly three in four in Mallee, however there is no clear geographical pattern.

**Figure 28: Percentage of students reporting electronic media use for more than two hours a day, 2016**

This figure shows that the percentage of students reporting electronic media use for more than two hours a day varies across Victoria from 53.5% to 71.6%.

Source: VSHAWS, 2016

There is a more pronounced pattern of increased usage of electronic media. Nearly all areas in Greater Melbourne reported an increase in the proportion of students using electronic media for more than two hours a day from 2014 to 2016. These increases were as high as a 12.4 percentage point jump for students in Southern Melbourne, from 55.9 per cent to 68.3 per cent of students. Proportions of students reporting this much screen use also increased substantially in Inner Eastern Melbourne.

**Figure 29: Percentage point difference in proportions of students using electronic media for more than two hours a day, 2014-2016**

| **Region** | **Area** | **Percentage point difference** |
| --- | --- | --- |
| North Eastern Victoria | Goulburn | 0.7% |
| North Eastern Victoria | Ovens Murray | 3.1% |
| North Eastern Victoria | Outer Eastern Melbourne | -3.4% |
| North Eastern Victoria | Inner Eastern Melbourne | 10.9% |
| North Western Victoria | Mallee | 4.0% |
| North Western Victoria | Hume Moreland | 1.3% |
| North Western Victoria | North Eastern Melbourne | 3.7% |
| South Eastern Victoria | Outer Gippsland | 3.5% |
| South Eastern Victoria | Inner Gippsland | 2.3% |
| South Eastern Victoria | Southern Melbourne | 12.4% |
| South Eastern Victoria | Bayside Peninsula | 0.5% |
| South Western Victoria | Barwon | -5.1% |
| South Western Victoria | Wimmera South West | 6.5% |
| South Western Victoria | Central Highlands | -8.5% |
| South Western Victoria | Western Melbourne | 5.0% |
| South Western Victoria | Brimbank Melton | 0.6% |
| State | Victoria | 3.4% |

Source: VSHAWS, 2014 and 2016

Note: due to insufficient 2014 data for Loddon, a comparison cannot be made.

**Healthy eating**

Good nutrition plays an important part in keeping our bodies in working order, and is also a key preventative factor for warding off diseases such as Type 2 diabetes, cancer and cardiovascular disease.57 Only one in every ten Victorian students (Years 5, 8 and 11) are eating the minimum recommended daily serve of fruit and vegetables. On the whole, young people in areas of Regional Victoria are more likely to eat the minimum recommended daily serves of both fruit and vegetables (VSHAWS, 2016).

**Figure 30: Proportion of students reporting they eat the daily minimum recommended serves of fruit and vegetables, 2016**

This figure shows that the percentage of students reporting that they eat the daily minimum recommended serves of fruit and vegetables varies across Victoria from 8% to 15.0%

Source: VSHAWS, 2016

### Children and young people living in different areas of Victoria are dealing with different health and wellbeing challenges

Adolescence can be a particularly influential period of development; it is a time of increased likelihood of disease and health conditions, such as substance-use disorders and mental health issues and injuries. Adolescence is also a time when detrimental behaviours may start or be reinforced.

**Risky health behaviours**

Adopting risky behaviours such as smoking, alcohol and/or drug use not only has immediate consequences for a young person’s health and wellbeing, but may also adversely affect their social engagement and education. Establishing these behaviours early can lead to potential harm in adulthood.

**Smoking, drinking and drug use**

Findings from the 2016 VSHAWS show that the proportion of Years 5, 8 and 11 students reporting they had smoked in their lifetime increased across the majority of Victorian areas, but decreased for alcohol consumption. One in ten report having smoked tobacco, and more than half report having drunk alcohol. Higher proportions of students reporting either are in Victoria’s regional areas, which is consistent with results from previous surveys.

The 2016 VSHAWS also showed that the higher proportions of students identifying drug use were from areas of Greater Melbourne. Students in areas where reported drug use was high also reported more favourable parental attitudes to drug use, indicating that parental attitudes to such behaviours can have an impact on the choices their child makes.

This is also true of students who report not taking drugs. Between 2014 and 2016 the proportion of students attending school in Inner Gippsland who reported using marijuana or illegal drugs dropped substantially; from nearly four in ten to just over one in ten. Over this period there was a substantial increase in students reporting that their parents had an unfavourable attitude towards drug use.

**Sexual activity**

Around one in seven Victorian students in Years 8 and 11 report that they have had sex (VSHAWS, 2016). Across Victorian areas, this ranges from one in ten (Loddon and Western Melbourne) to one in five (Wimmera South West). The statewide proportion of young people reporting sexual activity has remained stable since 2014. However, there have been larger increases over the last two years in some areas, the majority of which are in Greater Melbourne.

Of those young people who reported having sex, just over one quarter always use a condom (2016, however results are similar to 2014). Proportions of young people who report always using a condom are generally lower in areas of Greater Melbourne. MENTAL HEALTH AND RESILIENCE

One in every two Australians is affected by mental health issues at some point in their life.58 The promotion of positive wellbeing and preventative measures is a key platform of major government policies around Australia, and Victoria is no exception.

Evidence shows that half of mental health disorders start by age 14, and three quarters by age 24.59 Mission Australia’s 2016 Youth Survey found that concerns about mental health among 15- to 19-year-olds have doubled since 2011, and that mental health is now one of the top three national concerns for young people.60 Given this, recent Victorian reform initiatives have focused on promoting positive mental health in children and adolescence.

Improving mental health is a priority of the Victorian Public Health and Wellbeing Plan 2015-2019. Key actions under the plan supporting this priority for younger Victorians include: identifying mental illness early through enhanced connectedness of services that support positive whole-of-family health and wellbeing, increasing the capacity of child and adolescent mental health services, working closely with existing school-based programs and supports to build resilience and influence attitudes that support mental wellbeing of children and young people, and delivering initiatives to build community resilience and positive social connection.

**Victoria’s 10 Year Mental Health Plan**

DHHS is currently implementing Victoria’s 10 Year Mental Health Plan (2015), which recognises the importance of intervening early through age appropriate and family inclusive supports to promote strong mental health. This includes initiatives such as:

* $34.5 million over four years to expand specialist Child and Adolescent Mental Health Services (CAMHS) to provide child-centred and family-focused intensive psychiatric interventions
* Clinical Specialist Child Initiative to improve CAMHS engagement with, and assessment and treatment of, children aged 0 to 12 years with mental disorders
* expansion of the Child and Adolescent Schools Early Action Program, which works with schools to support primary school age children with conduct disorders.

### Challenges to student mental health and resilience show some increases and variation by location

**Depressive symptoms**

The VSHAWS uses the short version Moods and Feelings scale of the International Youth Development Study as an index of depressive symptoms. The scale requires students to respond about their frequency of feelings to questions such as ‘I felt miserable or unhappy’, ‘I was very restless’ and ‘I was a bad person’. In 2016 nearly one in five Victorian students (Years 5, 8 and 11) reported through the VSHAWS that they had depressive symptoms, a slight increase from 2014. Rates vary across the state; however a few areas have both high proportions of students reporting depressive symptoms and have seen significantly larger increases than others. These include Barwon, Hume Moreland, Western Melbourne, and Outer Gippsland. Proportions of students from some of these areas reporting they have access to mental health services when needed were below the statewide average.

**Improving community connectedness for children in OOHC**

Children in OOHC have higher rates of diagnosable mental health conditions. Southern Melbourne Area Partnerships worked to improve community connectedness for children in OOHC.

A 2017 survey of nearly 80 primary school-aged children in OOHC in Southern Melbourne showed that many are not engaged in regular social activities, including sport and recreation, and many had limited to no contact with friends outside of school.

Harnessing this information, the Southern Melbourne Area Partnership identified a range of actions to:

* understand what might help or hinder children in care participating in sport and recreation
* build relationships with sports and recreation providers and promote awareness of what is available
* engage with volunteers, business and philanthropy to support the work.

The Southern Melbourne Area Partnership has developed a partnership with the major sports and recreation provider for the Cardinia Shire, who is now offering 400 foster and kinship families free Leisure Voucher books so that they can participate in activities such as swimming, tennis, gymnastics and other recreational opportunities.

**Resilience**

Children and young people can experience a range of challenges and changes on a day-to-day basis related to their social life, family, school or personal circumstances. Resilience is the ability to cope with these potential sources of stress. Resilient children and young people have problem-solving strategies, are able to manage their emotions, and demonstrate appropriate help-seeking behaviour when adult assistance is required.

Education State targets have been developed to set higher aspirations for Victorian students and to shape how they are supported in our schools and communities to achieve their best. This includes building their resilience: the goal is that, by 2025, the proportion of Victorian students reporting high resilience will grow by 20 per cent.

Over the last two years the overall proportion of Victorian students in Years 5, 8 and 11 with high levels of resilience has decreased slightly, from 70.1 per cent in 2014 to 68.8 per cent in 2016 (VSHAWS). Proportions of students reporting high levels of resilience are generally spread across the state. Areas with the highest rates, nearly three quarters of students, are Inner Eastern Melbourne, North Eastern Melbourne and Barwon.

While statewide levels of students reporting high resilience have decreased, there has been improvement in some areas. Compared to results in 2014, higher proportions of students were reporting increased levels of resilience in 2016 in Central Highlands, Outer Eastern Melbourne, Goulburn, Bayside Peninsula, North Eastern Melbourne and Mallee.

Students with high levels of resilience are more likely to report having a trusted adult to turn to in times of crisis. Areas where levels of student resilience have decreased more significantly than others also saw decreases in the proportion of students reporting they had a trusted adult in their lives.

**Table 7: Areas showing decreases in proportions of students reporting high levels of resilience and access to a trusted adult, and/or an increase in depressive symptoms, 2014 and 2016**

| **Region** | **Area** | **Decrease in resilience** | **Increase in depressive symptoms** | **Decrease in trusted adult** |
| --- | --- | --- | --- | --- |
| South Western Victoria | Barwon | Yes | Yes | Yes |
| South Eastern Victoria | Bayside Peninsula | No | No | No |
| South Western Victoria | Brimbank Melton | Yes | Yes | Yes |
| South Western Victoria | Central Highlands | No | No | Yes |
| North Eastern Victoria | Goulburn | No | Yes | No |
| North Western Victoria | Hume Moreland | Yes | Yes | Yes |
| North Eastern Victoria | Inner Eastern Melbourne | Yes | Yes | Yes |
| South Eastern Victoria | Inner Gippsland | Yes | No | No |
| North Western Victoria | Loddon | n/a | n/a | n/a |
| North Western Victoria | Mallee | No | Yes | No |
| North Western Victoria | North Eastern Melbourne | No | Yes | No |
| North Eastern Victoria | Outer Eastern Melbourne | No | No | No |
| South Eastern Victoria | Outer Gippsland | Yes | Yes | Yes |
| North Eastern Victoria | Ovens Murray | Yes | No | Yes |
| South Eastern Victoria | Southern Melbourne | Yes | No | Yes |
| South Western Victoria | Wimmera South West | Yes | Yes | Yes |
| South Western Victoria | Western Melbourne | Yes | Yes | Yes |

Source: VSHAWS, 2014 and 2016

Note: due to insufficient 2014 data for Loddon, a comparison cannot be made.

**Promoting healthy minds and positive mental health**

Victorian schools have a range of strategies to promote healthy minds and positive mental health, including creating safe environments, teaching social and emotional learning and recognising the importance of families.

DET invests approximately $200 million annually across a range of health and wellbeing services both in schools and through tertiary health institutions. This includes the provision of allied health workers such as social workers and psychologists.

The Department also runs programs that specifically address mental health, such as Promoting Healthy Minds for Living and Learning: An initiative of the Victorian Mental Health Reform Strategy 2009 ñ 2019, which supports schools to create environments that promote positive mental health for students, and SAFEMinds, a comprehensive professional learning package for schools and families addressing the mental health needs of young people, developed by headspace.

A cluster of schools in Langwarrin are creating a new approach to student and community wellbeing. The Langwarrin Positive Education Network combines Positive Psychology with best practice teaching to encourage students, the schools and community to flourish.

The network will incorporate Positive Psychology with evidence-based mental health frameworks KidsMatter (for primary schools) and MindMatters (for high schools). There will also be an investment in the professional development of teachers, including the explicit teaching of social and emotional skills in the classroom, and increased support for parents and families.

Regional Partnership Assemblies have recognised the importance of establishing positive health and wellbeing behaviours at a young age. Ideas to support this include establishing a youth space or hub with access to mentoring life skills such as cooking and staying fit and healthy (Goulburn) and creating an inclusive, safe, healthy and resilient community for everyone, with a specific action of increasing resilience for selected cohorts of the community (Barwon). SAFETY

In addition to its intrinsic value, a safe environment is an important factor for enabling children and young people to learn and develop. When children and young people feel safe they are more likely to attend and engage in education and other activities.61

This includes feelings of safety both at school and in their community. Conversely, when children and young people feel unsafe they are more likely to have poor attendance, or avoid participation in education.62

Threats affecting children’s safety and wellbeing may be obvious, such as with physical violence, or may be less tangible, as with other forms of bullying, such as social exclusion or ridicule.63 Injuries and illness may also directly contribute to children missing school or other educational and social opportunities. Some children are less safe than others as a result of family instability, lack of stable accommodation, or family violence.

In cases where those with parental responsibility do not protect children in their care, the child protection system is responsible for receiving and assessing reports, investigating reports concerning children in need of protection and taking action where abuse or neglect is substantiated.64

THIS SECTION FOCUSES ON:

* safety within the home, community and school
* child protection and children in out-of-home care
* youth justice.

SAFETY IN THE HOME, COMMUNITY AND SCHOOL

Children and young people need to feel safe and secure to thrive. This begins with the home and family environment, and extends to their learning environment as they grow older; school is where young people develop the social skills and decision-making strategies they will use in future environments such as the workplace.

The contribution of bullying to the perception of an unsafe school environment can have dramatic effects. Not only are individual victims of bullying more likely to avoid school and be less successful academically, the prevalence of bullying predicts levels of dissatisfaction and disengagement among all students in a classroom.65

Children living in Regional Victoria may have higher rates of exposure to family violence; Family violence can cause terrible physical and psychological harm; it destroys families and undermines communities. Sometimes children who have directly experienced family violence or have been exposed to it go on to become victims or perpetrators of violence later in life, so that the effect of family violence is passed to the next generation.66

Family violence includes any violent, threatening, coercive or controlling behaviour in family, domestic, or intimate relationships. There is an interrelationship between family violence and child abuse, with this form of violence being most often directed towards women and children. Exposure to violence can have a range of adverse physical, psychological and behavioural effects on children. Data collected through the CSA show that family violence incidents reported to police are spread geographically across the state, though there is higher prevalence throughout Regional Victoria.

**Figure 31: LGAs with the highest rates of Family Violence, as measured by family incident rate per 100,000 population, 2015-16**

| **LGA** |
| --- |
| Mildura |
| Swan Hill |
| Gannawarra |
| Greater Shepparton |
| Benalla |
| Wodonga |
| Horsham |
| Southern Grampians |
| Ararat |
| Northern Grampians |
| Mitchell |
| Latrobe |
| Wellington |
| East Gippsland |

Source: CSA

Each year, greater numbers of people are reporting that they have been affected by family violence. According to the CSA, the number of family members reporting family violence incidents to police is growing, reaching over 75,000 people at the end of 2016. Of these, around 25 per cent were aged 24 and under. For this age group, females were nearly twice as likely as males to report a family violence incident, and the most commonly affected were those aged between 20 and 24.

There is a negative relationship between a child witnessing violence and their achievement in NAPLAN. DET analysis of linked SEHQ-NAPLAN data shows that, of the family risk factors reported through the SEHQ, the largest differential in NAPLAN performance was associated with the factors of ‘child witnessing violence’ and ‘abuse to child’.

**Figure 32: Proportion of children in top two bands of NAPLAN Year 3 Reading (2013)**

|  | **Responded yes** | **Responded no** |
| --- | --- | --- |
| Alcohol or drug related problems in family | 40 | 52 |
| Abuse to parent | 40 | 52 |
| Abuse to Child | 38 | 52 |
| Child witnessing violence | 36 | 52 |
| Parent witnessing violence | 41 | 52 |
| Gambling problem in the family | 39 | 52 |
| Mental illness in parent | 48 | 52 |
| High family stress level | 50 | 52 |

Source: DET linkage of SEHQ (2010) with Year 3 NAPLAN (2013)

Data collected through the SEHQ indicate that higher proportions of parents of Prep-aged children in Regional Victoria report that their child has been exposed to family violence than parents in Greater Melbourne, and that this has mostly trended upward over the past three years. This is not the case for parents in Greater Melbourne.

**Figure 33: Proportion of parents reporting that their Prep child had witnessed Family Violence, 2014-2016**

This figure shows that rates of Prep children witnessing Family Violence varies across Victoria, and trend data (from 2014-16) shows that rates have been increasing in some areas.

In 2016, areas with the highest rates across the four regions were Goulburn, Mallee, Inner Gippsland and Central Highlands, and areas with the lowest rates were Inner Eastern Melbourne, Bayside Peninsula, North Eastern Melbourne and Western Melbourne.

Source: SEHQ, 2014-2016 According to the CSA, children are present at around one third of the family violence incidents reported to police in Victoria. In 2016, there were nearly 25,000 family violence incidents reported to police where a child was present. Higher numbers, and proportions of total family violence incidents where children were present that were reported to police, are generally in areas of Greater Melbourne.

The Family Violence Rolling Action Plan is the next step in the Victorian Government’s ten-year agenda to put an end to family violence. The Victorian Government will invest nearly $2 billion into implementing the recommendations of the Royal Commission into Family Violence. Key reforms include:

* $50.7 million to establish a new prevention agency, rolling out the state’s first gender equality strategy, and embedding respect and awareness in Victorian schools
* $130.3 million for five specialist Family Violence Courts across the state
* $133.2 million for increased and improved housing options for victim survivors
* $448.1 million for support and safety hubs - a new way for family violence victim survivors including women and children to access coordinated support from justice, health and social services.

Making Victoria’s communities safe and healthy, especially for vulnerable families, has been identified as a key action through Regional Partnership Assemblies. The implementation of the Great South Coast Strategy to prevent violence against women and children is an example of this.

**Respectful Relationships**

Respectful Relationships supports school leaders, educators and school communities to promote and model respect and equality - and to teach children how to build healthy relationships, resilience and confidence. The Royal Commission into Family Violence recommended that all Government schools adopt Respectful Relationships as a key element in preventing violence.

As part of a staged process, all Government schools, as well as Catholic and Independent schools that opt in, will be supported to implement a whole school approach to Respectful Relationships. This approach supports schools to look at their culture, practices and policies to drive meaningful change to build an enhanced culture of respect.

A Respectful Relationships training package for early childhood educators will also be developed and delivered to support professionals in early years settings.

**A closer look at Respectful Relationships in Barwon**

1000 Government, Catholic and independent schools have signed on as Respectful Relationships Leading Schools or Partner Schools across the state. Leading Schools are implementing their whole-school approach to Respectful Relationships and supporting their Partner Schools through a Community of Practice. Project staff have worked with school leaders and school staff including school councils to provide whole-school briefings and support engagement across the Barwon schools. Resilience, Rights and Respectful Relationships training has been delivered in primary and secondary schools in Geelong and Colac. All Barwon schools have received training to recognise and respond to family violence. Students have established Respectful Relationships teams in their schools and participated in Student Voice forums. Families have been engaged through school assemblies, open classroom sessions and community events such as the Respect walk.

The Barwon Area offers a unique setting for the Respectful Relationships initiative roll out due to the extensive work completed by both the community sector and DET’s Secondary School Nurse Team.

* Since 2011, Barwon’s Secondary School Nurse team has been encouraging schools to establish the Centre Against Sexual Assault’s (CASA) Sexual Assault Prevention Program for Secondary Schools, which provides content around how relationships work in terms of consent, respectful behaviour and the associated risks and benefits.
* The Barwon Month of Action committee consists of local service providers including City of Greater Geelong, CASA/Minerva Women’s Services, Women’s Health and Wellbeing Barwon South West, Barwon Health and private practitioners. The committee has existed for the past decade and raises awareness of Men’s Violence Against Women through a month long series of community events, including the Respect Cup, a sporting carnival to engage secondary schools in this message and promote respectful relationships, which has been running since 2013.
* Barwon’s identification as a Safety Hub pilot site has meant that the Regional Integration Coordinator and the Family Violence Alliance had already started work in building common language and understandings, as well as early work identifying referral pathways.

### Feelings of community safety are higher in Regional Victoria

Data collected for the 2013 VCHWS from a sample of 7000 Victorian households indicate that most parents of children aged 12 years and under (95.8 per cent) perceived their neighbourhood to be safe. Notably, however, perceptions of neighbourhood safety were lower than average for parents of children: in one-parent families, on a health care card, or living in disadvantaged areas. On average, neighbourhoods in Greater Melbourne (95.3 per cent) were perceived by parents to be less safe than those in Regional Victoria (97.1 per cent).

These perceptions are important because they affect a parent’s willingness to let their child play and travel independently. This has the potential to act as a barrier to children participating in important activities. For example, Victorian research has found that children aged between 11 and 13 years who were allowed greater independence were more likely than their less-independent peers to meet physical activity guidelines.67

In line with parental attitudes, higher proportions of young people in Regional Victoria (88.2 per cent of students in Years 5, 8 and 11) themselves reported positive perceptions of the safety of their neighbourhood than in Greater Melbourne (84 per cent), and this remains true across demographics (VSHAWS, 2016). **Figure 34: Proportion of Victorian young people who feel safe in their neighbourhood by area, 2016.**

This figure shows that the proportion of Victorian young people who feel safe in their neighbourhood varies across Victoria from 75.7% to 92.4%

Source: VSHAWS, 2016.

Some young people are less likely to report feeling safe in their neighbourhood than the general population. This includes young people who are Aboriginal and young people who have a language background other than English. Positive perceptions of neighbourhood safety are still higher for those living in areas of Regional Victoria.

**Figure 35: Proportion of Victorian young people who feel safe in their neighbourhood by selected cohort, 2016.**

|  | **Greater Melbourne** | **Regional Victoria** |
| --- | --- | --- |
| All young people | 84.0% | 88.2% |
| Aboriginal | 71.1% | 78.5% |
| Language background other than English | 78.7% | 84.2% |

Source: VSHAWS, 2016

### Bullying is more prevalent in some areas of Victoria for some students

Bullying is a common behaviour among children and young people worldwide, but can have severe consequences for victims, perpetrators and bystanders in terms of ongoing physical and psychosomatic health problems.68 Both victims and perpetrators of bullying have an increased risk of social maladjustment, and individuals who are both victims and perpetrators are at higher risk than those who are victims only.69

In addition to the immediate psychological and physical risks, bullying can have a pronounced negative affect on a range of long-term personal, social, and educational outcomes. Australia’s Murdoch Children’s Research Institute and the University of Melbourne recently completed a study of almost 1,000 eight- and nine-year olds across schools in Melbourne. The study, which focused on the prevalence of bullying,70 found that children who reported being bullied on a weekly basis were, on average, six to nine months behind their peers in their studies, as reflected by NAPLAN results in Year 3.71

The VSHAWS asks students in Victorian schools in Years 5, 8 and 11 about recent experiences of specific behaviours, including teasing and social exclusion, as well as physical threats and harm.72 This comprehensive definition of bullying behaviours tends to identify a higher proportion of students experiencing bullying than is identified by students’ own perceptions of whether they have been bullied.

Data from the 2016 VSHAWS show different prevalences of bullying across Victoria. Around 40 (41.6) to 50 (53.4) per cent of students experienced bullying across all areas, with proportions of students reporting being bullied lower in Year 11 (41.9 per cent) than in Years 8 and 5 (just under 48 per cent). There was a slight difference when looking at the overall prevalence of bullying between Greater Melbourne (46.3 per cent) and Regional Victoria (43.7 per cent), though slightly higher proportions of students reported experiencing cyber bullying in Greater Melbourne (33.6 per cent) than in Regional Victoria (30.7 per cent).73

Until August 2017, Victoria was the only educational jurisdiction with a dedicated bullying prevention website. Over $4 million has been invested in Victoria’s Bully Stoppers initiative. The Bully Stoppers online toolkit was developed in partnership with national and international experts and provides evidence based, practical advice and resources to empower school leaders, teachers, students and families to prevent and respond to all forms of bullying. Over $16 million has been invested in bullying prevention and cyber safety initiatives for all Victorian school communities.

Some students are more likely than others to report being the victims of bullying, and for these students, it is more likely in certain areas of Victoria:

* Aboriginal students experienced higher-than-average rates of bullying (56 per cent compared to the state average of 46 per cent), and dramatically higher rates in some areas (as high as 81 per cent in Outer Gippsland)74
* students speaking a language other than English at home were more likely to be bullied, with the largest gaps between English and non-English speakers at home in some areas of Regional Victoria (Mallee, Loddon, Outer Gippsland, and Central Highlands)75
* Overall, female students (48.3 per cent) were more likely than male students (44.6 per cent) to experience bullying. This gap varied across the state, and was widest in some areas of Regional Victoria (up to more than 10 percentage points difference in Outer Gippsland)
  + Male students were more likely to be physically threatened or harmed than female students in all areas of Victoria. The difference was smaller in some areas (less than two percentage points in Outer Gippsland and Western Melbourne).

LGBTI young people experience high rates of bullying and the vast majority of this abuse occurs at school. For example, an Australian study of 3,134 same sex attracted and gender-questioning young people found that:

* 61 per cent of LGBTI young people report experiencing verbal homophobic abuse
* 18 per cent report experiencing physical homophobic abuse
* 69 per cent report other types of homophobia including exclusion and rumours
* 80 per cent of respondents experienced the reported abuse at school.76

A 2015 nation-wide study of the prevalence of bullying across Australian schools found that teachers identified ‘being or seeming gay’ as one of the top four characteristics of Australian students who are bullied.77

**Safe Schools**

The Victorian Government established Safe Schools in 2010. It is now managed and delivered directly by the Victorian DET.

Safe Schools is a formal and public commitment that schools make to create an inclusive and safe environment for their school community, including for LGBTI students, families and teachers. This commitment recognises that creating a safe and inclusive environment is key to tackling bullying, discrimination and harassment at schools, particularly arising from homophobia and transphobia. How this commitment is implemented is at the school’s discretion and therefore looks different for each school. Schools can choose from a range of evidence-based and age-appropriate information, resources and professional learning to help them prevent, and respond to, bullying arising from homophobia or transphobia. This could involve a review of school policies and practice, professional development for school staff, or establishing a student-led group to organise inclusive events.

The Government has committed to expanding the program to all government secondary schools by the end of 2018. These schools are free to implement the program in a way that best suits their students and community. Other schools, including primary schools and non-government schools, are able to access the Safe Schools information and resources as they see fit and request support where they need it.

### Numbers of students reporting injuries are consistent across the state

Young people can be exposed to risk of injury in a range of circumstances including accidents, participation in sports, and physical fights, as well as situations resulting in burns or poisoning.

In 2016, rates of self-reported injuries by Year 5, 8, and 11 students completing the VSHAWS were relatively consistent across all areas of the state. Just over 22 per cent of students reported having one injury in the past 12 months, while about 33 per cent reported having two or more injuries.

**Figure 36: Proportion of Victorian students reporting injuries by area, 2016**

This figure shows that the proportion of Victorian students reporting injuries varies slightly across Victoria.

Source: VSHAWS, 2016 CHILD PROTECTION AND CHILDREN IN OUT-OF-HOME CARE

When parents or those with parental responsibility do not provide a safe environment for children, or are abusive or neglectful of children in their care, the Child Protection system is responsible for assessing reports concerning children who may be in need of protection, investigating reports and undertaking actions to protect children from harm where required. In some cases, this may require that children and young people are placed in OOHC for varying lengths of time consistent with the child’s permanency objective.

Research indicates that these children are at greater risk of poorer educational outcomes than those in the broader community. Students in OOHC are at greater risk of:

* poor school attendance and engagement and disengaging from school at an early age
* failing to develop foundational educational skills such as literacy and numeracy and not achieving any academic qualification.78

### Helping children and young people in out-of-home care

LOOKOUT Centres are staffed by a multidisciplinary team, led by a principal, whose sole focus is to improve educational outcomes for children and young people living in OOHC. They seek to boost the capacity of schools, carers, Child Protection practitioners and OOHC services to meet this shared goal.

The Centre staff provides professional development to school-based staff, Child Protection practitioners, community service organisations delivering OOHC services and carers to ensure that education is prioritised for children and young people in care, and that professionals are equipped to provide a trauma-informed approach to supporting children and young people to remain engaged in and achieving at school.

The LOOKOUT Centres do not enrol students or deliver curriculum, but they do monitor the enrolment and progress of students in care and work closely with government, Catholic and independent schools to ensure their students receive all the supports to which they are entitled.

LOOKOUT Centres also assist children and young people by providing advice to schools to support individual students and facilitating opportunities for students to participate fully in school life.

Demographics over-represented in the Child Protection system - place is a contributing factor

The AIHW report that some characteristics are more prevalent among children who are subjects of child protection orders. This includes children from areas of lower SES, and children from very remote areas, who are four times as likely to be the subject of a substantiation order as children from major cities.79

According to the 2017 Report on Government Services, there were more than 100,000 reports to Victoria’s Child Protection service in 2015-16. Those relating to Aboriginal children accounted for 8 per cent of all reports (8,722 of 107,062). About 14 per cent of all reports were substantiated; that is, there was sufficient indication to suggest that the child had been, was being, or was likely to be abused, neglected or otherwise harmed. This figure was slightly higher for Aboriginal children, with 20 per cent of all reports substantiated.

The number of Victorian child protection substantiations have increased steadily over the past five years, from just over 10,000 (10,102) in 2012, to 15,532 in 2016. Individual areas have seen more significant increases over this time than others, with these areas spread across the state.

Data for 2015-16 show that areas with the highest overall numbers of substantiations were concentrated in Greater Melbourne. This is somewhat reflective of the higher general population when compared to other areas. While many areas have seen increases in the number of substantiations over the last year, there have been decreases in some, many of which are western areas. These include Barwon, Central Highlands, Western Melbourne and Wimmera South West.

In 2015-16 there were nearly 2,000 child protection substantiations involving Aboriginal children. Numbers have grown at similar rates for all Victorian children over the last five years, however increased at a slightly higher rate between 2015 and 2016.

**Table 8: Number of child protection substantiations in Victoria, 2012 to 2016.**

|  | **2012** | **2013** | **2014** | **2015** | **2016** |
| --- | --- | --- | --- | --- | --- |
| All children | 10,102 | 11,222 | 13,177 | 14,695 | 15,532 |
| Aboriginal children | 1,236 | 1,385 | 1,528 | 1,706 | 1,925 |

Source: CRIS/CRISSP database; extracted 2nd August 2017.

Cultural safety and maintaining connection to culture is essential for all Aboriginal children and young people. This is particularly so for those who enter OOHC.

**Improving outcomes for Aboriginal children**

The Child Protection program has continued to focus on initiatives to improve outcomes for Aboriginal children and young people in need of protection so they can grow strong in their culture and have better opportunities for the future. Building on the work of Taskforce 1000 undertaken in preceding years, improvements have been made to cultural planning requirements to enhance Aboriginal children and young people’s connection to their Aboriginal family, culture and community when they are in OOHC.

Amendments to the Children, Youth and Families Act, that commenced on 1 March 2016 introduced a requirement for each Aboriginal child in OOHC to be provided with a cultural plan. A cultural plan aims to strengthen and build the child’s connection to their Aboriginal community and culture. It outlines the goals and tasks needed to do this. Under the amended legislation, a cultural plan is required to align with the case plan.

In recognition of the principle of self-determination for Aboriginal people, in 2016-17 DHHS engaged in a partnership with Aboriginal Community Controlled Organisations (ACCOs) and community service organisations to gradually transfer the care and case management of Aboriginal children and young people from child protection and non-Aboriginal organisations to ACCOs.

DHHS is also working alongside ACCOs to implement Section 18 of the Children, Youth and Families Act, which will enable the transfer of responsibility for specified Aboriginal children subject to protection orders to ACCOs. Section 18 of the Children, Youth and Families Act enables the Secretary of the Department to authorise the Principal Officer of an Aboriginal agency to perform specified functions and powers conferred on the Secretary in relation to an Aboriginal child subject to a protection order. Section 18 is a key provision supporting the principle of Aboriginal self-management and self-determination.

These initiatives represent a significant step towards self-management and self-determination for Aboriginal communities.

Out-of-Home-Care

Victoria’s rates for all children in OOHC have been consistently below the Australian average over the past five years, but a steep increase in the rate of Aboriginal and Torres Strait Islander children in OOHC over the same period has now placed Victoria significantly above the Australian average on this measure (108.3 per 1,000, as compared to 66.6 per 1,000, in 2015-16). In part this recent growth may be attributable to improved identification of Aboriginality by Child Protection.

**Figure 37: Children in at least one out-of-home care placement during the year, rate per 1000 children aged 0-17 in the population.**

This figure shows that, while the rate of out-of-home care placement (per 1000 children) since 2011-2012 for all Victorian children and all Australian children has remained low and steady (under 20 per 1000 children for the entire period), the rate for Aboriginal and Torres Strait Islander children is much higher. The Australian rate for Aboriginal and Torres Strait Islander children has remained around 60 per 1000 children since 2011-12, with a slight increase over time. The Victorian rate for Aboriginal and Torres Strait Islander children has increased more than the Australian rate over this time, from over 60 per 1000 children in 2011-12 to over 100 per 1000 children in 2015-16.

Source: Report on Government Services, 2017.

Data provided by DHHS show that as at 30 June 2016, there were over 8,000 (8,218) Victorian children in OOHC. The 2017 Report on Government Services reports that over the course of the 2015-16 year, 9.6 Victorian children of every 1,000 children aged 17 and under was in OOHC at least once over the year. While fewer Aboriginal and Torres Strait Islander children were in care, the rate per 1,000 was more than 10 times higher than for the general population.80

### Improving education for children aged 0-10 years in OOHC

The Southern Melbourne Children and Youth Area Partnership identified children aged 0-10 years in OOHC as one of three priority groups, and agreed to drive work to improve their health, education and social outcomes.

Through their work on education, a 10 per cent increase (from 2015) in school attendance among primary school aged children in OOHC in Southern Melbourne was achieved, as well as an increased rate of children with individual education plans that are supported via student support groups.

This is a result of ensuring that all children in OOHC are engaged with early childhood services or enrolled and engaged in school/participating in an alternative educational setting.

The work involved producing data dashboards providing OOHC numbers per area, school attendance, individual education plans, and suspension and expulsion numbers for school aged children and young people in OOHC. A communication protocol between Southern Melbourne DET and DHHS was also introduced that gives staff from both departments a clear process and contacts if they need to come together to support a student, especially for child protection matters. This protocol makes it easier for schools, child protection and community services to be more responsive to clients and students. Data collected by DHHS show that, for the 2015-16 year, numbers of children in OOHC were spread throughout Victorian areas. Higher percentage point increases in the numbers of children in OOHC from 2014-15 to 2015-16 were however mostly concentrated in Regional Victoria.

**Figure 38: Number of Victorian children (0-17) out-of-home care as at 30 June 2016, from lowest number to highest number, by Area.**

This figure shows that the number of children in OOHC varies across Victoria from 263 to 777.

Source: CRIS/CRISSP database; extracted 2nd August 2017.

For Aboriginal children, higher numbers in OOHC are spread across the state. Over the past five years there has been an increase in overall numbers for all areas of Victoria, however over the last year there was a drop in numbers in both Bayside Peninsula and Goulburn.

**Brighter Futures for young people transitioning from out-of-home care**

We know that young people leaving care need extra support at this vulnerable time as they transition to independent living.

Brighter Futures is a collective impact initiative of the Outer Eastern Children and Youth Area Partnership (OECYAP) supporting all young people transitioning from OOHC to dream and achieve their personal goals - whether that includes getting involved in a local sporting club, getting their first job, or finding suitable accommodation.

This is a genuinely collective effort, with state and local government, service providers, businesses, community members, carers and young people coming together to co-design new and innovative programs to support young people to access sustainable housing, build skills for employment, and connect to their local community.

* **Supporting Practice to Empower Carers and Kids:** This program aims to equip young people to make appropriate life decisions from an earlier age and to provide carers with additional peer-to-peer support, leading to increased placement stability for young people.
* **Bus to Move:** This program aims to connect young people in OOHC to community mentors beyond the service system, so that supports continue beyond 18 years.
* **The GAP Project:** This program aims to provide young people with opportunities to build a range of employment skills through a social enterprise model, including paid employment.
* **Dillon:** This program aims to streamline the process for young people to link with a pool of supportive employers through the provision of a mobile app.
* **A Place to Truly Call Home:** This program aims to provide young people in residential care with an opportunity to own their own home by participating in a volunteering program modelled on Habitat for Humanity.

These Brighter Futures programs have been rigorously tested with a remarkable group of young people who know what it is to ‘leave care’. These young people form the OOHC Youth Advisory Group in the Outer East, and consistently challenge thinking and provide inspiration.

The involvement of local governments, youth services and community members in the OOHC system is also translating to practical supports for young people, linking them with free gym memberships, apprenticeships, part-time work and community mentors.

Building on this early success, the OECYAP is now seeking to harness existing system and community assets to drive the implementation of the Brighter Futures programs and expand their impact so that every young person transitioning from OOHC is supported to realise a Brighter Future.

## YOUTH JUSTICE

The rate of crime among young offenders is low and the number of young offenders and proportion of all crime for which they are responsible is decreasing. The latest CSA data show that compared to the year ending June 2013, the proportion of unique offenders under 25 as at June 2017 decreased by more than 7 percentage points, and is at its lowest in five years.81

The CSA has identified, in a 2016 study following a group of young offenders over an eight year period, that 1.6 per cent of those young offenders were responsible for 23.6 per cent of incidents recorded over the period.82 This confirms the established trend that while the overall number of young offenders in Victoria has continued to decrease since 2010, there is a small proportion of young people who are responsible for a disproportionately high number of criminal incidents.

The most recent data show the majority of alleged offending incidents by 10 to 19 year olds involved property and deception offences (54 per cent), with crimes against the person accounting for 26 per cent. Public order and security offences are more common in males than females.

**Table 9: Alleged offender incidents of youth offenders by sex, age and principal offence (number and per cent of total) - July 2016 to June 2017.**

|  | **Crimes against the person** | **Property and deception offences** | **Drug offences** | **Public order and security offences** | **Justice procedures offences** | **Other offences** | **Total** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Male 10 to 19** | 6400 | 13289 | 1490 | 2323 | 1254 | 131 | 24889 |
| **Female 10 to 19** | 1854 | 3634 | 344 | 358 | 424 | 5 | 6639 |
| **All 10 to 19** | 8263 | 16938 | 1839 | 2691 | 1682 | 146 | 31563 |
| **Male 10 to 19** | 25.7% | 53.4% | 6.0% | 9.3% | 5.0% | 0.5% | 100% |
| **Female 10 to 19** | 27.9% | 54.7% | 5.2% | 5.4% | 6.4% | 0.1% | 100% |
| **All 10 to 19** | 26.2% | 53.7% | 5.8% | 8.5% | 5.3% | 0.5% | 100% |

Source: CSA.

According to analysis conducted by the AIHW, in Australia young people from the areas of most socio-economic disadvantage can be up to six times more likely to be under supervision. Aboriginal young people are disproportionately represented in the youth justice system; 2015-16 statistics show that Australian Aboriginal young people are up to 17 times more likely than non-Aboriginal young people to be under supervision (community-based or detention), with the ratio 13 times more likely for Victoria.83 These findings are also echoed in a report delivered to the Government by Ms Penny Armytage and Professor James Ogloff.84 As part of the initial investment of $50 million over four years to respond to the report, the Government has committed to developing a comprehensive strategy to reduce the overrepresentation of Aboriginal young people in Victoria’s youth justice system.

This will build on the Government’s previous investment to support Koorie young people that includes $1.5 million in grants designed to empower and re-engage Koorie young people through camps, sporting activities, workshops and education. Further, $2.25 million was provided in the 2016-17 Budget to increase the capacity of the Community-based Koorie Youth Justice Program, which employs Koorie Youth Justice Workers to support young Aboriginal people at risk of offending, as well as clients on community-based and custodial orders. The workers assist in providing access to appropriate role models, culturally sensitive support, advocacy and casework.

The most recent data also show that males are consistently more likely to offend than females, with nearly 25,000 alleged offender incidents in Victoria involving males aged 10 to 19 compared to 6,600 offender incidents involving females aged 10-19. Of these, there were 9,062 unique male offenders and 3,175 unique female offenders. Unique alleged offenders aged 10 to 19 accounted for 14.9 per cent of all unique alleged offenders.

**Figure 39: Alleged offender incidents by sex and age, year ending June 2017.**

| **Age** | **Male** | **Female** |
| --- | --- | --- |
| **65+** | 1847 | 360 |
| **60-64** | 1501 | 302 |
| **55-59** | 2618 | 647 |
| **50-54** | 5123 | 1303 |
| **45-49** | 9556 | 2319 |
| **40-44** | 13349 | 3352 |
| **35-39** | 17351 | 4160 |
| **30-34** | 20522 | 5183 |
| **25-29** | 22693 | 5754 |
| **20-24** | 22413 | 5499 |
| **15-19** | 20682 | 4871 |
| **10-14** | 4206 | 1768 |

Source: CSA

Research shows that diversion programs for young people have the potential to reduce reoffending as compared to cases determined in court that receive a custodial sentence. In Victoria, however, young people living in regional Victoria are less likely to be diverted from the criminal justice system than those living in Greater Melbourne.85 This may be due to a number of factors, including: limited access to resources, local community culture, levels of police take up of diversionary programs and a higher visibility of young offenders in a population generally smaller than that found in metropolitan areas.

Recent research has however shown that young people living in rural or regional Victoria are more than one-and-a-half times as likely to be cautioned when compared to young people from metropolitan areas.86

In the 2016-17 Budget the Victorian Government announced $5.6 million (over two years) to deliver a statewide youth diversion program. This follows the successful completion of an 18 month pilot.

In January 2017, the Children’s Court Youth Diversion service (CCYD) commenced statewide. The Victorian Parliament recently passed legislation to provide a legislative basis for the program.87

CCYD provides an opportunity for eligible children and young people appearing before the Children’s Court to:

* address harm caused by their offending by taking responsibility and completing a diversion activity
* address the underlying causes of their offending ï where required, receive assistance to engage with support services
* on the successful completion of the diversion activity have the charge/s dismissed, with a non-disclosable criminal record for the offence/s subject to the diversion order
* avoid the stigma associated with a criminal record and its impact on future life opportunities.

Other youth justice initiatives to reduce offending by young people and to facilitate their rehabilitation include:

* A new Youth Control Order (YCO) as an alternative to a custodial sentence. The YCO will involve more intensive and targeted supervision of young people and a requirement that they comply with an education, training or employment plan.
* Expansion of clinical mental health assessment and treatment responses for young people who are in, or at risk of entering, the criminal justice system to provide them with targeted and appropriate supports.

CONCLUSION

The 2016 State of Victoria’s Children Report explores the theme of place. Evidence tells us that the environment a child grows up in, including the physical, social and economic surroundings, can have an impact on their outcomes in life.

Victoria is a great place to grow up in. On the whole, our children and young people show positive signs in their development across the range of outcomes selected for this report. And yet, if we look at results for these outcomes at a more disaggregated level, the impact of place can be seen.

Place can be an enabling factor, with positive impacts from access to high quality services, safe and nurturing home and community environments, and unlimited employment pathways. Place can also act as a constraint, with young people in certain areas faced with poorer outcomes in their development, ongoing risks to positive health and wellbeing, lower levels of educational attainment and limited opportunities once they have completed school.

On balance, data presented against the themes of the 2016 State of Victoria’s Children Report show that children and young people living closer to major cities demonstrate better outcomes than those who live further away. This, of course, is not a pattern found only in Victoria.

Evidence provided throughout this report however highlights many benefits of life in a regional setting for children, young people and their families. It also shows that areas in similar locations or with similar characteristics across regional and metropolitan Victoria can also have quite different outcomes.

The idea that some communities face poorer outcomes because of their location, predominantly in regional or rural areas, has evolved over time. The debate over whether differences in outcomes are due to a tyranny of distance (distance from major cities) or a tyranny of disadvantage (concentrated levels of disadvantage) reflects the complexity of the issue, and has been a focus of public policy for many years. It is an issue for which there is no universal answer.

Place-based responses recognise the interdependencies of certain issues, and that interdependencies which are hidden at a macro level become visible on a local scale. At times, key drivers of complex problems are quite specific to their context. The success of interventions designed to address specific issues in specific places is in part due to the ability to consider and respond to these specific factors, from design through to implementation.

There are examples of place-based interventions in numerous locations across Victoria. Many of these are driven through formal structures such as the Children and Youth Area Partnerships and Regional and Metropolitan Partnerships. These partnerships are examples of communities and government working side by side to develop localised solutions to local problems in the local setting. Ownership of solutions at this level can support a consistent and integrated approach to problems, which all communities across Victoria can benefit from. ENDNOTES

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ABS Australian Bureau of Statistics

ACCO Aboriginal Community Controlled Organisation

AEDC Australian Early Development Census

AIHW Australian Institute of Health and Welfare

AToSS Student Attitude to School survey

CAMHS Child and Adolescent Mental Health Services

CASA Centres Against Sexual Assault

CCYD Children’s Court Youth Diversion

CSA Crime Statistics Agency

DET Department of Education and Training

DHHS Department of Health and Human Services

ECEC early childhood education and care (services)

ESK Early Start Kindergarten GP General Practitioner

KAS Key Ages and Stages

LGBTI Lesbian, gay, bi, trans and intersex

LGAs Local Government Areas

MCH Maternal Child Health

NAPLAN National Assessment Program - Literacy and Numeracy

NMS National Minimum Standard (for NAPLAN)

NQF National Quality Framework

NQS National Quality Standards

OECD Organisation for Economic Cooperation and Development

OECYAP Outer Eastern Children and Youth Area Partnership

OOHC Out-of-Home Care

SEHQ School Entrant Health Questionnaire

SES Socio-economic status

SOVC The State of Victoria’s Children

VCAMS Victorian Child and Adolescent Monitoring System

VCHWS Victorian Child Health and Wellbeing Survey

VSHAWS Victorian Student Health and Wellbeing Survey

YCO Youth Control Order