

The State of Gannawarra's **Children and Young People** Report 2023



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## Acknowledgement of Country

Gannawarra Shire acknowledges the Barapa Barapa, Yorta Yorta and Wamba Wamba people as the traditional owners of the land now known as Gannawarra.

We pay our respects to Elders past, present and emerging and acknowledge their rich culture and connection to Country.

'When we invest wisely in children and young people, the next generation will pay that back through a lifetime of productivity and responsible citizenship'.

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(Centre on the Developing Child, Harvard University, 2007)

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## **Executive Summary**

The Gannawarra Shire Council commissioned The State of Gannawarra's Children and Young People Report 2022 to gain a better understanding of how children, young people and families are faring. The report captures seventy-two data indicators related to the health and wellbeing, learning and participation of children and young people aged 0-24 years.

The State of Gannawarra's Children and Young People Report 2022 report highlights positive gains over time and areas of decline where greater focus, partnership and advocacy is required for Gannawarra's children and young people to reach their full potential and thrive.

It is hoped that this report will inform all those working with children, young people and families across the Gannawarra Shire; guiding efforts to improve health and wellbeing outcomes.

### WHERE WE ARE DOING WELL

## Compared to the Victorian average, fewer children/young people in the Gannawarra Shire are:

- being bullied in years 5-6
- living in homes experiencing rental and mortgage stress
- developmentally vulnerable on two or more AEDC domains
- born at a low birth weight
- reported to have a long term health condition (0-14 years)
- reported to have a mental health condition (0-14 years)
- experiencing high levels of family stress in the month before entering school
- absent from school in year 6

'Wicked problems (e.g. poverty, obesity, child abuse and social exclusion) cross departmental boundaries and resist the solutions that are readily available through the action of one agency'.

## Also positively, more children/ young people in the Gannawarra Shire compared to Victoria are:

- · living in homes with a motor vehicle
- developmentally on track with social competence
- developmentally on track with emotional maturity
- developmentally on track with language and cognitive skills
- developmentally on track with communication skills and general knowledge
- born to a mother who attended antenatal care in the first 10 weeks of pregnancy
- reported to be in excellent or very good health at school entry
- seen by an optometrist prior to school entry
- making good progress in adapting to their learning environment at school
- actively supported by their parent(s)/caregiver(s) to support their learning at school
- actively read to/encouraged in their reading at home
- achieving national standards in numeracy in years 3, 5, 7, 9
- achieving national standards in literacy in years 3, 5, 7

(Bradford, N. 2005)

### **AREAS FOR IMPROVEMENT**

## Compared to the Victorian average, more children/young people in the Gannawarra Shire are:

- living in single parent homes (children aged under 15 years)
- living in jobless families
- living in families where the mother has low educational attainment
- living in low income, welfare dependant families (children aged under 16 years)
- born to teenage mothers
- experiencing family violence
- are present during a family violence incident (0-17 years)
- experiencing alcohol or drug related problems in their family at school entry
- experiencing their mother smoking during pregnancy
- being bullied in years 7-9
- absent from school in years prep, 3, 7, 9, 11, 12
- reported to have speech and language difficulties on school entry
- reported to have emotional or behavioural difficulties at school entry
- reported to have oral health concerns at school entry
- leaving school at year 10 or below, or not going to school (per 100 people aged 15 and older)
- receiving an unemployment benefit (16-24 years)

## Also, compared to the Victorian average fewer children/young people in the Gannawarra Shire are:

- participating in kindergarten
- developmentally on track with their physical health and wellbeing
- reaching national minimum standards of literacy in year 9
- seen by a dentist in the year before they enter school
- seen by a GP in the year before they enter school
- seen by a paediatrician in the year before they enter school
- participating in higher education after leaving secondary school
- learning or earning at ages 15-24
- engaged full time in secondary school at age 16

In presenting these indicators we acknowledge that numbers are just one part of the complex story of our community, and examples and anecdotal data should be considered in these incredibly important planning conversations too. However, the data contained in this report is a key starting point to these planning conversations, laying a baseline from which to scrutinise and evolve.

## What are the Time Trends Saying?

Time trend data has highlighted areas where the Gannawarra Shire is faring better, or worse compared to Victoria, and the data is improving over time and areas where Gannawarra Shire is faring better or worse than Victoria, and the data is worsening over time.

## Gannawarra Shire is faring better than Victoria and time trends are improving:

- proportion of children being bullied between years 5-6 (2014-2018)
- dwellings with no motor vehicle (2006-2021)
- social competence, developmentally on track-AEDC (2012-2021)
- emotional maturity, developmentally on track-AEDC (2012-2021)
- language and cognitive skills, developmentally on track-AEDC (2012-2021)
- communication skills and general knowledge, developmentally on track-AEDC (2012-2021)
- vulnerable on two or more domains-AEDC (2012-2021)
- proportion of children at school entry reported to be in excellent or very good health (2016-2020)
- proportion of children at school entry reported to have been seen by an optometrist in the year before entry to school (2016-2020)
- proportion of children at school entry whose parents report high levels of stress in the past month (2016-2020)
- child is making good progress in adapting to the structure and learning environment of the school (2012-2021)
- children whose parent(s)/caregiver(s) are actively engaged with the school in supporting their child's learning (2012-2021)
- proportion of students who achieve national minimum standards in literacy-year 3 (2015-2019)
- proportion of students who achieve national minimum standards in literacy-year 5 (2015-2019)
- proportion of students who achieve national minimum standards in literacy-year 7 (2015-2019)
- proportion of students who achieve national minimum standards in numeracy-year 3, 5, 9 (2015-2019)

## Gannawarra Shire is faring less favourably than Victoria, but time trends are improving:

- family violence incident rate per 100,000 population (2016-2021)
- health care card holders (2006-2021)
- teenage births-per 1000 (2015-2019)
- physical health and wellbeing-AEDC (2012-2021)
- smoking during pregnancy (2012-2018)
- proportion of children at school entry reported to have been seen by a dentist in the past year (2016-2020)
- people who left school at year 10 or below, or did not go (2011-2021)
- young people aged 16-24 receiving an unemployment benefit (2016-2021)
- school leaver participation in higher education (2013-2021)
- full-time participation in secondary school education at age 16 (2006-2021)

'Where we are born and where we live, work and play all affect our overall health and wellbeing'.

> (World Health Organisation (WHO), 2008)

### Gannawarra Shire is faring better than Victoria, but time trends are worsening:

- low birth weight babies (2012-2018)
- children who are regularly read to/encouraged in their reading at home (2012-2021)
- average number of days absent per FTE student -year 6 (2015-2019)
- proportion of students who achieve national minimum standards in numeracy-year 7 (2015-2019)

'Given the wide range of environmental risk factors that can influence family functioning and therefore child development, a multi-service and whole-of-government approach to policy and planning is needed, crossing the health, education and community sectors'. .

(Moore, 2009)

## Gannawarra Shire is faring less favourably than Victoria, and time trends are worsening:

- family violence, female child present aged 0-17 years (2018-2020)
- family violence, male child present aged 0-17 years (2018-2020)
- proportion of children at school entry whose parents report an alcohol or drug related problem in the family (2018-2020)
- proportion of children being bullied between years 7-9 (2014-2018)
- single parent families with children less than 15 years (2006-2021)
- jobless families with children aged less than 15 years (2006-2021)
- children in families where the mother has low educational attainment (2006-2021)
- percentage of children (aged under 16 years) in low income, welfare-dependant families (2006-2021)
- proportion of children whose parents report one or more concerns with child speech and language on entry to school (2016-2020)
- proportion of children at school whose parents are concerned about their oral health (2016-2020)
- proportion of children at school entry with emotional or behavioural difficulties (2016-2020)
- kindergarten participation rate (2016-2019)
- Learning or Earning at ages 15 to 24 (2016-2021)
- average number of days absent per FTE student-prep (2015-2019)
- average number of days absent per FTE student -year 3 (2015-2019)
- average number of days absent per FTE student -year 7 (2015-2019)
- average number of days absent per FTE student -year 9 (2015-2019)
- average number of days absent per FTE student -year 11 (2015-2019)
- average number of days absent per FTE student -year 12 (2015-2019)
- proportion of students who achieve national minimum standards in literacy-year 9 (2015-2019)

## **Data Gaps**

Data for the Gannawarra Shire could not be sourced for some domains of this report. The data limitations were experienced for a range of reasons:

• data unavailable at a local level

- data not current
- data unavailable due to confidentiality/small numbers recorded; and data is not systematically collected.

Data gaps noted that would have been useful to feature in the State of Gannawarra's Children and Young People Report are listed on the following page.

'Children born in the early years of this millennium are growing up in an Australian society different to that experienced by any previous generation. To ensure that each child has every chance to experience a happy and healthy start to life, it is essential that policy makers and researchers have access to quality data about children's development in contemporary society'.

(Australian Institute of Family Studies (AIFS) Growing Up in Australia Longitudinal Report, 2018)

### Domain 1: Safe & Secure

Child protection substantiation and children in out of home care data was shared at a regional level only (Mallee). Protecting children is a whole of community responsibility and this data at a local level would help communities to better understand the safety needs of children and young people living in the Gannawarra Shire.

A number of data indicators highlighting children/young people's experiences of safety and security were also unavailable:

- Proportion of young people who experience cyber bullying (not available at LGA level)
- Proportion of young people who report experiencing bullying recently (not available at LGA level)
- Proportion of young people who are bullied most days (not available at LGA level)
- Proportion of young people who report having a trusted adult in their lives (not available at LGA level)

Data on the community safety experiences of children and young people was largely unavailable.

### Domain 2: Resourced

Data highlighting children/ young people's experiences of their families available resources was not available.

Additionally, the teenage birth rate was only available up until 2019.

### **Domain 3: Healthy**

Currently there are a range of data gaps related to the health and wellbeing of children, such as data relating to:

- Young people's use of drugs and alcohol
- Children and young people's consumption of fruit and vegetables (not available at LGA level)
- Young people who do the recommended amount of physical activity every day (not available at LGA level)
- Children and young people who use electronic media for more than two hours a day (not available at LGA level)
- Young people with positive psychological development (not available at LGA level)
- Young people who have ever smoked cigarettes (not available at LGA level)
- Sexually active young people who always us a condom (not available at LGA level)
- Sexually transmissible infections in young people (data not current)
- Young people can access mental health services when needed (not available at LGA level)
- Children living in neighbourhoods with good parks, playgrounds and play spaces (data not current)

LGA level data on families accessing family and community support services is unavailable and there is limited local data available on child and youth mental health. Data relating to attendance at parenting programs and playgroups is not systematically collected.

## Domain 4: Learning & Participating

Local level data related to children and young people's connection with peers and sense of belonging at school was unavailable.

Additionally, specific data on youth volunteering and children and young people's participation in community activities e.g. sport, community clubs and activities etc is not systematically collected.

## Introduction

The State of Gannawarra's Children and Young People Report pulls together a total of seventy-two data indicators relating to the health and wellbeing of children and young people aged 0-24 years.

Long-term and high quality data, that is reliably collected and prepared is critical for communities as they plan for the best possible future for their residents. This data provides a window into our community which allows us to monitor trends over time and also against our Statewide peers. With this data we can make informed decisions about where to partner, focus and spend our limited time and resources to achieve the highest possible gains for as many of our children and young people as possible, and critically for our most vulnerable.

The four key domain areas of this report have been drawn on from Australian Research Alliance for Children and Youth Wellbeing Nest Wellbeing Framework:

- 1. Safe and Secure
- 2. Resourced
- 3. Healthy
- 4. Learning and Participating

'The Nest is ARACY's wellbeing framework for children and young people aged 0 to 24 years. It's a way of thinking about the whole child in the context of their daily lives, viewing wellbeing in a way that brings together the different elements a child or young person needs in order to thrive'.

- Australian Research Alliance for Children and Youth Wellbeing

### **Report Format**

Data is provided for each indicator for the Gannawarra Shire Local Government Area (LGA) level and at a Victorian level (where available).

The most recent Gannawarra Shire data available is provided alongside the Victorian rate (where available) with shading:

**RED** (doing less favourably compared to Victoria)

YELLOW (doing the same compared to Victoria)

**GREEN** (doing better compared to Victoria)

Wherever possible a time trend for Gannawarra Shire data has been provided to assist with understanding what is happening for children and young people and their families over time. The words 'time trend' shaded either green (doing better over time), yellow (largely no change) or red (doing less favourably over time) to present the nature of the trend.

All data that is available in this report is either available publicly, or permission has been sought for its use.

## **Our Community**

Gannawarra Shire is located on the Murray River, just 1.25 hours from Bendigo, 40 minutes from Swan Hill and 3 hours from Melbourne. It encompasses a number of towns with an evolving agriculture sector and a growing tourism industry.

According to the 2021 ABS Census the Gannawarra Shire population 10,683 this is up from the 2016 population of 10,549.



### Aboriginal and/or Torres Strait Islander Peoples

The 2021 Census revealed that Aboriginal and Torres Strait Islander peoples made up 2.5% of the population, this has increased since the 2016 Census (1.9%). This is higher than the Victorian average (1%). At the time of the 2021 Census the median age for Aboriginal and/or Torres Strait Islander peoples living in Gannawarra was 25 years of age, significantly lower than the median age for the whole population (51 years of age).

### **Country of Birth**

At the time of the 2021 Census the country of birth of parents for Gannawarra (S) (Local Government Area) was:

- 77.6% of people had both parents born in Australia (78.4% in 2016)
- 7.7% of people had both parents born overseas (6.8% in 2016)
- 3.7% had their father only born overseas and (3.7% in 2016)
- 2.5% had their mother only born overseas (2.8% in 2016)

Compared to 2016 there are more residents who had both parents born overseas, showing a slight growth in cultural diversity. The Victorian average for both parents born overseas was 41.3% (2021 ABS Census).

### **Family Composition**

The ABS Census captured that in 2021 the composition of families in Gannawarra were:

- 33.3% couple families with children (Vic 37.6%)
- 13.3% one parent families (Vic 15.2%)
- 1.5% 'other' families (Vic 1.7%)
- 52% couple family without children (Vic 37.6%)
- 22.5% of lone parents were male (Vic 19.1%)
- 78.8% of lone parents were females (Vic 80.9%)

Compared to the 2016 Census the number of couple families with children have decreased; there are more couple families without children and more lone male parents.

Family Type	2011	2016	2021
Number of one parent families with children under 15 years	197	158	200
Number of couple families with children	1023	1004	947

## Disadvantage

According to the ABS Census, 'Socio-economic advantage and disadvantage can be defined as people's access to material and social resources, and their ability to participate in society'.

The ABS captures the features of people living in the most advantaged and disadvantaged areas of Australia. It found that, on average, people in the most advantaged areas were middle aged with high levels of education, had high incomes and worked in skilled occupations. People living in the most disadvantaged LGA's on average were young, had high levels of housing rentals, had low rental costs and lower incomes (Source: ABS, SEIFA 2016).

The evidence shows that the economic wellbeing of households plays a critical role in the health, education and self-esteem of children. Economic disadvantage in the form of inadequate resources can adversely affect children's social and educational opportunities, as well as health outcomes in the short and long term (PC 2018; Ryan et al. 2012).

### Socio-Economic Indexes for Areas (SEIFA)

Socio-Economic Indexes for Areas (SEIFA) provides summary measures derived from the ABS Census of Population and Housing to gauge different aspects of socio-economic conditions by geographic area. Within SEIFA the ABS has developed four indexes to allow ranking of regions and areas, providing a method of determining the level of social and economic well-being in each region. Each of these indexes summarises different aspects of the socio-economic conditions of people living in an area and each is based upon a different set of social and economic information from the Census. The indexes are:

#### 1. Index of Relative Socio-Economic Disadvantage (IRSD)

#### 3. Index of Economic Resources (IER)

2. Index of Relative Socio-Economic Advantage and Disadvantage (IRSAD)

4. Index of Education and Occupation (IEO).

The first of these, the IRSD (sometimes noted as the IRSED), is one of the most commonly used SEIFA measures, and is the measure applied in this report. The IRSD focuses primarily on disadvantage, and is derived from Census variables, including low income, low educational attainment, unemployment, and dwellings without motor vehicles.

A lower score indicates that an area is relatively disadvantaged compared to an area with a higher score. All areas are then ordered from the lowest to highest score, then the area with the lowest score is given a rank of 1, the area with the second lowest score is given a rank of 2 and so on. For example, for the 79 Victorian LGAs there are 79 'ranks'. Review of the 2016 Census data indicates Gannawarra Shire is ranked 18, i.e. is the 18th most disadvantaged LGA within Victoria.

Index of Relative Socio-Economic Disadvantage (IRSD)									
Local Government Area	LGA Measure 2006	Rank among LGAs	LGA Measure 2011	Rank among LGAs	LGA Measure 2016	Rank among LGAs			
Gannawarra	971	23	959	18	957	18			

Analysis of the SEIFA IRSD table (above) demonstrates, through both the IRSD measure and LGA rank, that the Gannawarra Shire area has experienced increasing levels of disadvantage across the data collection periods of 2006, 20011 and 2016. Anecdotal data alongside other evidence presented in this reports suggests that this trend will continue, and 2021 Census data analysis (once released) will confirm this trajectory.

It is important to acknowledge that particular population groups are at risk of poorer health and wellbeing outcomes. Most of the negative outcomes presented in The State of Gannawarra's Children and Young People Report have a disproportionate impact on disadvantaged populations, with certain population groups consistently over-represented in disadvantage statistics. For example, in 2011 the School Health Entrant Questionnaire was analysed, and participating children and families were catalogued, according to their demographic profile, across ABS Census Index of Relative Socio-Economic Disadvantage (IRSD) quintiles (categories of 20%). The groups most identified in the first Quintile of Disadvantage (highest level of disadvantage) were ATSI children (41.4%), LBOTE children (39.3%), one parent family children (31.1%) and children from rural / regional areas (29.3%) (SEHQ 2015, p8).

Source: Department of Education and Training, (2015). State findings from the School Entrant Health Questionnaire 2012 to 2014.

https://www.education.vic.gov.au/Documents/about/research/SEHQ2014/SEHQ\_2014\_Statewide.docx

## **Our Children & Young People**

At the time of the 2021 Census children and young people aged 0-24 years made up 24.4% of the Gannawarra Shire population, the same age cohort represented 29.9% of the Victoria population.

### Population

When comparing Census data from 2006-2021 the Gannawarra Shire shows a declining 0-24 year population over time. Victoria in Future 2019 predict continued decline across all under 25 age groups into 2036.

Age	2006	2011	2016	2021	2036
0-4 years	597	568	509	486	454
5-9 years	780	567	598	565	496
10-14 years	844	756	573	617	510
15-19 years	710	663	620	494	504
20-24 years	464	350	446	438	407

(Source: ABS Census 2006, 2011, 2016, 2021 and Victoria in future 2019)

The under 25 age group has shown a decline in numbers in 2021 except for the 10-14 year age group which has shown an increase in 2021 compared to the 2016 Census.

Total Number of Birth Notifications								
2017-2018	2018-2019	2019-2020	2020-2021	2021-2022				
95	106	79	99	93				

Source: Gannawarra Shire Council Maternal and Child Health Data

## Domain 1: Safe & Secure

Parents play a key role in the overall functioning of a family. Parenting considered to be high quality and/or effective, tends to include elements of support (including presence of warmth and lack of hostility), consistency and interest in a child's life (Zubrick et al. 2008).

Supporting parents to provide quality and effective parenting is considered important for improving the wellbeing of children and reducing social disadvantage (Department of Health 2019; Parenting Research Centre 2017, Parker & McDonald 2010).

## Evidence shows that the six key domains of positive family functioning are:

- Emotional: Closeness of relationships, warmth, responsiveness, sensitivity, support, community, and security/safety
- **Governance:** Age-appropriate rules, expectations and consistency in parenting
- Engagement and cognitive development: Family cohesion and quality time spent fostering various skills and interests
- Physical health: Access to services, products and activities aimed at improving or maintaining good physical health
- Intra-familial relationships: Quality of relationships between family members and their overall ability to get along with one another; and
- Social connectivity: Involvement in, and support of, activities and relationships outside the household (Pezzullo et al. 2010)

When a child is exposed to family violence along with multiple risk factors, such as socioeconomic disadvantage, parental mental ill health, and parental substance abuse, more extreme negative outcomes are likely (Casey et al. 2009; Campo 2015; Fergusson et al. 2006; Fulu et al. 2013).

Exposure to family violence alone does not mean a child will necessarily experience negative outcomes. With the right support, children exposed to family violence may have increased resilience later in life (Alaggia & Donohue 2018; Campo 2015; Jaffe et al. 2012).

Evidence shows building parenting knowledge and skills and strengthening family functioning helps to improve child safety and wellbeing (Mullan, K., & Higgins, D. 2014; Sanders, M. R., Higgins, D. J., & Prinz, R. J. 2018).

### Child protection substantiations\* per 1,000 eligible population, aged 0-17 years

A substantiation means there is sufficient reason (after an investigation) to believe the child has been, is being, or is likely to be abused, neglected or otherwise harmed.

Time Tren	d						
	2016/ 2017	2017/ 2018	2018/ 2019	2019/ 2020	2020/ 2021	<b>12</b> Per 1,000	<b>21</b> Per 1,000
Mallee	24	23	23	22	21	eligible population	eligible population
						Victoria 2020/2021	Mallee 2020/2021

(Source: DHHS CRIS (Client Relationship Information System), ABS 2016 Census-Estimated Resident Population \*as at May 2020, Australian Institute of Health and Welfare 2021. Child Protection Australia 2019–20)

### Time Trend: Mallee- decreasing rates of child protection substantiations between 2016-2021.

### Children in out of home care\* per 1000 children aged 0-17 years

Out-of-home care is overnight care for children aged under 18 who are unable to live with their families due to child safety concerns.

Time Trend								
	30 June 2017	30 June 2018	30 June 2019	30 June 2020	30 June 2021	<b>7</b> Per 1,000	<b>14</b> Per 1000	
Mallee	10	12	12	14	14	children aged 0-17 years	children aged 0-17 years	
						Victoria 30 June 2021	Mallee 30 June 2021	
(Source: DHHS CRIS (Client Relationship Information System), ABS 2016 Census-Estimated Resident Population								

\*as at May 2020, Australian Institute of Health and Welfare 2021. Child protection Australia 2019–20)

### Time Trend: Mallee - increasing rates of children in out of home care between 2017-2021.

Recorded family violence incidents in the Gannawarra LGA										
	2016/2017	2017/2018	2018/2019	2019/2020	2020/2021	190				
Gannawarra	229	177	273	202	190	recorded incidents Gannawarra LGA (2020/2021)				
	- Statistics Ago	\ <i>(</i> , , , , )								

(Source: Crime Statistics Agency, Victoria)

Time Trend: Gannawarra LGA -decreasing rates of recorded family violence incidents between 2016-2021.

Family violence incident rate per 100,000 population									
	2016/ 2017	2017/ 2018	2018/ 2019	2019/ 2020	2020/ 2021	<b>1,399.3</b> Per 100,000	<b>1,804.1</b> Per 100,000		
Gannawarra	2,166.7	1,678.4	2,607.7	1,942.3	1,804.1	Victoria 2020/2021	Gannawarra LGA 2020/ 2021		
(Source: Crime	(Source: Crime Statistics Agency, ABS Census 2016)								

Time Trend: Gannawarra LGA -decreasing rates of family violence incidents per 100,000 people between 2016-2021.

,	2018	2019	2020	ars-rate (per 10,000) <b>48.6</b>	57.8			
Gannawarra	52.2	61.6	57.8	Per 10,000 FEMALE Child Present Victoria 2020	Per 10,000 FEMALE Child Present Gannawarra LGA 2020			
(Source: Crime Statistics Agency, ABS Census 2016)								

## **Time Trend:** Gannawarra LGA -increasing number of family violence incidents where FEMALE children aged 0-17 years were present between 2018-2020.

Family violence, MALE child present aged 0-17 years-rate (per 10,000)								
	2018	2019	2020	<b>14.5</b> Per 10,000	<b>16.1</b> Per 10,000			
Gannawarra	13.3	14.2	16.1	MALE Child Present Victoria 2020	MALE Child Present Gannawarra LGA 2020			
(Source: Crime Statistics Agency, ABS Census 2016)								

**Time Trend:** Gannawarra LGA -increasing number of family violence incidents where MALE children aged 0-17 years were present between 2018-2020.

Proportion o	f childre	en at sch	nool en	try who	ose pare	ents report an alcohol or drug re	lated problem in the family		
	2016	2017	2018	2019	2020	<b>3.6%</b> Victoria	<b>8.8%</b> Gannawarra LGA		
Gannawarra	2.5%	3.7%	7.2%	4.1%	8.8%	2020	2020		
(Source: Scho	(Source: School Entrant Health Questionnaire (SEHQ), Department of Education and Training)								

**Time Trend:** Gannawarra LGA -increasing rates between 2016 and 2020 of proportion of children at school entry whose parents report a family history of alcohol or drug related problems.

## CHILDREN AND YOUNG PEOPLE ARE SAFE IN THEIR COMMUNITY

High neighbourhood quality is associated with a wide range of positive child outcomes, including positive physical and mental health, higher educational attainment, and lower rates of child maltreatment and youth justice involvement (Dupere et al. 2010; Edwards & Bromfield 2010; Mingh et al. 2017; Webb et al. 2017; White & Cunneen 2015).

The evidence has shown that children who have had contact with the youth justice system experience more mental health disorders and substance use disorders than the general population (Usker, Douglas and Jackson, 2019).

Both household experiences with crime and parental perception of neighbourhood safety have been found to impact a child's daily life by shaping the activities parents allow children to be involved in outside the home (Glaster & Santiago 2006; Goldfeld et al. 2017; Molnar et al. 2004). For example, negatively perceived neighbourhood safety is associated with increased sedentary behaviour among adolescents and increased risk of poor future health outcomes such as cardiovascular disease and obesity (Lenhart et al. 2017).

Children's personal perceptions of safety and their behaviour can also be influenced by neighbourhood safety (Goldfeld et al. 2017; Queensland Child and Family Commission 2018).

### Crime\* reported incidents where the victim was a child or young person aged between 0-24 years

	2017	2018	2019	2020	2021	<b>36</b> Reported incidents
Gannawarra	35	51	36	39	36	Gannawarra LGA 2021

(Source: Crime Statistics Agency, Victoria)

**Time Trend:** Gannawarra LGA -increasing incidents of children or young people as victims of crime between 2017-2021.

#### Crime\* reported incidents where the alleged offender was a child or young person aged between 0-17 years

	2017	2018	2019	2020	2021	24
Gannawarra	9	16	39	30	24	alleged offender incidents Gannawarra LGA 2021

(Source: Crime Statistics Agency, Victoria)

**Time Trend:** Gannawarra LGA -increasing incidents of children or young people aged 0-17 years as alleged criminal offenders between 2017-2021.

Crime\* reported incidents where the alleged offender was a young person aged between 18-24 years

	2017	2018	2019	2020	2021	<b>35</b> alleged offender incidents
Gannawarra	41	52	57	55	35	Gannawarra LGA 2021

(Source: Crime Statistics Agency, Victoria)

**Time Trend:** Gannawarra LGA -increasing incidents of young people aged 18-24 years as alleged criminal offenders between 2017-2021.

## CHILDREN AND YOUNG PEOPLE ARE SECURE AT SCHOOL

Bullying is a complex issue. It comes in many forms, occurs in various settings, and affects many population groups (Australian Education Authorities 2019; ReachOut Australia 2017).

Bullying can have substantial impacts on victims, perpetrators and witnesses, as well as the broader social environment (ReachOut Australia 2017; Rigby & Johnson 2016).

The evidence has shown that bullying is more common among children:

- with disability
- from culturally and linguistically diverse backgrounds
- who identify as lesbian, gay, bisexual, trans and gender diverse, or children who have intersex variations (Australian Education Authorities 2019; Rigby & Johnson 2016).

Research indicates that children's social engagement and wellbeing in the primary grades can establish patterns of school engagement and motivation that have long-term consequences for students' learning (Hamre & Pianta 2001).

	2014	2015	2016	2017	2018	15.9% Victoria	<b>12.5%</b> Gannawarra LGA
Gannawarra	12.8%	4.8%	13.5%	11.9%	12.5%	2018	2018

(Source: Student Attitudes to School Survey, Department of Education and Training)

### Time Trend: Gannawarra LGA -decreasing rates of children who report being bullied in years 5 & 6 from 2014-2018.

Proportion o	Proportion of children who report being bullied between years 7 to 9										
	2014	2015	2016	2017	2018	17.5% Victoria	<b>24.6%</b> Gannawarra LGA				
Gannawarra	17.5%	19.6%	19.3%	24.9%	24.6%	2018	2018				
(Sourco: Stude	nt Attitue	(Source: Student Attitudes to School Survey, Department of Education and Training)									

(Source: Student Attitudes to School Survey, Department of Education and Training)

**Time Trend:** Gannawarra LGA -increasing rates of children who report being bullied between years 7-9 from 2014-2018.

## Domain 2: Resourced

Family disadvantage is defined as a lack of access to resources enabling a minimum style of living and participation in the society within which one belongs (Capellari & Jenkins, 2007). Growing up in a family receiving social assistance is a marker for compromised long-term development (Weitoft et al. 2008).

Low-income households differ from higher income households in many ways. They are more likely to be headed by a single parent; a parent with low educational attainment; an unemployed parent; a parent in the low-wage market; a divorced parent or a young parent (Brooks-Gunn, Duncan, & Maritato 1997; Waldfogel & Washbrook 2011).

Low income can impact the safety of a child's environment, the quality and stability of their care, and the provision of appropriate housing, heating and clothing (AIHW 2012; Warren 2017). Low income can also make a family vulnerable to food insecurity and affect a child's diet and access to medical care (AIHW 2012; Rosier 2011).

AIFS research has shown that children who experienced family, neighbourhood or school disadvantage, or a combination of the three, are likely to have poorer cognitive and social outcomes; and that this effect is stronger the longer that children experience these forms of disadvantage (Warren and Edwards, 2017).



### FAMILIES ARE FINANCIALLY SECURE

Single parent families with children less than 15 years*									
	2006	2011	2016	2021	18.2% Victoria	<b>24.3%</b> Gannawarra LGA			
Gannawarra	6.5%	21.1%	19.1%	24.3%	2021	2021			
(Source: Com	(Source: Compiled by PHIDU from ABS Census 2011, 2016 and 2021)								

## **Time Trend:** Gannawarra LGA -increasing rates of single parent families with children less than 15 years from 2006-2021.

Jobless famil	Jobless families* with children aged less than 15 years								
	2006	2011	2016	2021	9.9% Victoria	<b>14%</b> Gannawarra LGA			
Gannawarra	12.8%	15.7%	13.3%	14%	2021	2021			
(Source: Comp	(Source: Compiled by PHIDU from ABS Census 2011, 2016, 2021)								

**Time Trend:** Gannawarra LGA -increasing rates of jobless families with children less than 15 years from 2006-2021.

Children* in	Children* in families where the mother has low educational attainment									
	2006	2011	2016	2021	10.8%	<b>17.6%</b> Gannawarra LGA				
Gannawarra	11.6%	14.7%	17.7%	17.6%	2021	2021				
(Source: Com	(Source: Compiled by PHIDU from ABS Census 2011, 2016, 2021)									

**Time Trend:** Gannawarra LGA -increasing rates of children in families where the mother has low educational attainment between 2006-2021.

*Percentage	*Percentage of children (aged under 16 years) in low income, welfare-dependent families								
	2006 2011 2016 2021 9.3% 14.7% Victoria Gannawarra LGA								
Gannawarra	18.4%	25.1%	26.4%	14.7%	2021	2021			
(Source: Comp	(Source: Compiled by PHIDU from ABS Census 2011, 2016 and 2021)								

### Time Trend: Increasing numbers of children in low income, welfare-dependant families between 2006-2021.

- \* Families included are those with children under 16 years
- \* From 2016– with incomes under \$37,378 p.a. in receipt of the Family Tax Benefit (A) (whether receiving income support payments or not).
- \* From 2021 Families included are those with children under 16 years of age, with the household head not in the workforce, and with incomes under \$28,485 p.a. in receipt of the Family Tax Benefit (A) (whether receiving income support payments or not).

	2006	2011	2016	2021	7.7%	9.1%
annawarra	13.9%	11.3%	10.4%	9.1%	Victoria 2021	Gannawarra LGA 2021

### Time Trend: Gannawarra LGA decreasing proportions of Health Care Card Holders between 2006-2021.

\* As a percentage of all people aged 0-64 years

2006       2011       2016       2021       7.5%       4.6%         Gannawarra       5.7%       5.8%       5%       4.6%       Solution	Dwellings wi	th no m	otor veh	icle		
2021 2021		2006	2011	2016	2021	
	Gannawarra	5.7%	5.8%	5%	4.6%	

(Source: Compiled by PHIDU from ABS Census 2006, 2011, 2016 & 2021)

**Time Trend:** Gannawarra LGA decreasing proportions of dwellings with no motor vehicle between 2006-2021.

Teenage Birt	h - Aggre	egate 2 y	ear rate	* (per 1,0			
	2015	2016	2017	2018	2019	9.1 Victoria	14.25 Gannawarra LGA
Gannawarra	24.61	26.13	14.25	14.25	14.25	2019	2019

(Source/s: (1) Victoria. Department of Health. Consultative Council on Obstetric & Paediatric Mortality & Morbidity (CCOPMM). Deidentified custom report via Safer Care Victoria; (2) ABS Census 2016)

\*The rate equals the number of live births to women younger than 20 years in the two-year period Jan 2018-Dec 2019, by LGA, per 1,000 women aged 13-19 residing in that LGA.

## Time Trend: Gannawarra LGA decreasing rates of live births to women aged under 20 years between 2015-2019.



## CHILDREN AND YOUNG PEOPLE ARE SECURELY HOUSED

Access to safe, stable and adequate housing is important for the health and wellbeing of children. Homeless children can experience schooling disruptions, food insecurity and an increased risk of being homeless as adolescents and adults (Crawford et al. 2015; Fantuzzo et al. 2012; Flatau et al. 2012).

Increased housing stress may compromise parental mental health and reduce the money available to spend on children's food, healthcare and education (Robinson & Adams 2008; Taylor & Edwards 2012).

Early evidence has shown widespread impact resulting from the Covid-19 pandemic on the experiences of Australian renters in the private rental market indicating that peoples employment, ability to pay rent, living environment and risk of eviction were affected (Baker et al., 2020a).

Improved housing affordability is often associated with better health, academic achievement and school engagement for children (Clair 2018).

### Percentage of low-income households (households in bottom 40% of income distribution) with rental stress\*

	2006	2011	2016	2021	30.9%	23.6%
Gannawarra	19.3%	21.8%	25.3%	23.6%	Victoria 2021	Gannawarra LGA 2021

(Source: Compiled by PHIDU from ABS Census 2006, 2011, 2016 & 2021)

### Time Trend: no trending available as new mortgage affordability variable used for 2021.

\* This data comprises households in the bottom 40% of the income distribution (those with less than 80% of median income), spending more than 30% of their income on rent.

Percentage of low-income households (households in bottom 40% of income distribution) with mortgage stress*						
	2006	2011	2016	2021	15.5% Victoria	<b>9.6%</b> Gannawarra LGA
Gannawarra	10.5%	14.1%	11.9%	9.6%	2021	2021
(Source: Compiled by PHIDU from ABS Census 2006, 2011, 2016 & 2021)						

Time Trend: no trending available as new rental affordability variable used for 2021.

\* This data comprises households in the bottom 40% of income distribution (those with less than 80% of median equivalised income), spending more than 30% of income on mortgage repayments.

## Domain 3: Healthy

### CHILDREN ARE DEVELOPING WELL BY AGE SIX

A large and growing body of research emphasises the importance of the prenatal and early years for health and developmental outcomes throughout the life course (Goldfeld et al, 2015).

The years from birth to age 5 have been identified as the most important developmental period during childhood (Shonkoff & Phillips, 2000).

Research has shown that brain development in the first years of life lays the foundation for language development, literacy acquisition, cognitive processes, emotional development, self-regulation and problem-solving skills and has a lasting impact on health, future learning and life success (McCain & Mustard 1999; Shonkoff & Phillips 2000).

## Over the past decade, the Gannawarra Shire has consistently maintained extremely high immunisation coverage rates for children aged up to 5.25 years.

Physical heal	Physical health and wellbeing, developmentally on track							
	2012	2015	2018	2021	81.1%	80%		
Gannawarra	71.4%	63.8%	81.3%	80%	Victoria 2021	Gannawarra LGA 2021		
(Source: AEDC 2012-2021)								
Time Trend:	Gannaw	arra LGA	improv	ing betw	een 2012-2021.			

80.9%
Gannawarra LGA 2021

Time Trend: Gannawarra LGA improving between 2012-2021.

Emotional m	Emotional maturity, developmentally on track							
	2012	2015	2018	2021	78.4%	83.5%		
Gannawarra	83%	70.2%	84.4%	83.5%	Victoria 2021	Gannawarra LGA 2021		
(Source: AEDC	(Source: AEDC 2012-2021)							
Time Trend:	Gannaw	varra LGA	improv	ing betw	een 2012-2021.			

'Families differ in their ability to provide children with all the experiences and learning opportunities they need in the early years, which contributes to different levels of school readiness at school entry. Variations in school readiness show a clear socioeconomic gradient: the more disadvantaged children's backgrounds, the more likely they are to show vulnerabilities on the AEDC'.

(Moore, T.G and Arefabid, N, 2022)

Language and	d cogniti	ive skills,	, develop	omentally	y on track		
	2012 2015 2018 2021				82.6%	88.7%	
Gannawarra	84.8%	63.8%	79.2%	88.7%	Victoria 2021	Gannawarra LGA 2021	
(Source: AEDC	2012-20	21)					
Time Trend:	Time Trend: Gannawarra LGA improving between 2012-2021.						
Communicat	ion skills	and ger	neral kno	owledge,	developmentally on track		
Communicat	ion skills 2012	and ger 2015	neral kno 2018	owledge, 2021	developmentally on track	80%	
		-	2018			<b>80%</b> Gannawarra LGA 2021	
Gannawarra	<b>2012</b> 69.6%	<b>2015</b> 68.1%	2018	2021	79% Victoria	Gannawarra LGA	
<b>Gannawarra</b> (Source: AEDC	<b>2012</b> 69.6% 2012-20	<b>2015</b> 68.1% 21)	<b>2018</b> 82.3%	<b>2021</b> 80%	79% Victoria	Gannawarra LGA	

vaniciasic o	11 1000 0	i more u	omanis			
	2012	2015	2018	2021	10.2%	8.7%
Gannawarra	9.8%	12.8%	7.3%	8.7%	Victoria 2021	Gannawarra LGA 2021
(Source: AEDC	2012-20	)21)				

Time Trend: Gannawarra LGA improving between 2012-2021.

Vulnerable on two or more domains

Proportion of children whose parents report one or more concerns with child speech and language on entry to school

	2016	2017	2018	2019	2020	16.0%	24.6%
Gannawarra	22.0%	25.0%	21.6%	21.5%	24.6%	Victoria 2020	Gannawarra LGA 2020

(Source: School Entrant Health Questionnaire (SEHQ), Department of Education and Training)

Time Trend: Gannawarra LGA -increasing rates between 2016 and 2020 of children reported to have difficulties with speech and/or language on entry to school.

### CHILDREN VISIT A MATERNAL AND CHILD HEALTH NURSE

The Maternal and Child Health (MCH) Service is a free universal service available to all families with children from birth to school age.

The MCH Service provides a comprehensive and focused approach for the promotion, prevention and early identification of the physical, emotional and social factors affecting young children and their families. The MCH Service supports child and family health, wellbeing and safety, focusing on maternal health and father-inclusive practice as a key enabler to optimise child learning and development (Maternal and Child Health Service Guidelines, 2021).

Proportion of infants receiving a maternal and health service home consultation						
	2017- 2018	2018- 2019	2019- 2020	2020- 2021	2021- 2022	<b>102.1%</b> Gannawarra LGA
Gannawarra	114.7%	100%	101.2%	98.9%	102.1%	2021-2022
(Source: Gann	awarra Shire	Council)				

Time Trend: Gannawarra LGA – consistent number of infants receiving a maternal and child health home consultation from 2017-2022.

Proportion o	f children a	attending th	e 3.5 year	ages and st	ages visit	
	2017- 2018	2018- 2019	2019- 2020	2020- 2021	2021- 2022	<b>84.9%</b> Gannawarra LGA
Gannawarra	87.3%	54.7%	98.7%	83.8%	84.9%	2021-2022

(Source: Gannawarra Shire Council)

Time Trend: Gannawarra LGA – decrease in the number of children attending 3.5-year ages and stages visit from 2017-2022.

It is important to note that the pandemic impacted on the ability of families to attend appointments in 2020 and 2021.



### CHILDREN AND YOUNG PEOPLE ARE HEALTHY

Health is related to an individual's environment and circumstances such as where they live, their education level, income and living conditions along with their access to and use of health services (WHO 2017).

For Aboriginal and Torres Strait Islander peoples, factors such as cultural identity, family and kinship, Country and caring for Country, knowledge and beliefs, language and participation in cultural activities and access to traditional lands are also key determinants of health and wellbeing (AIHW and NIAA 2020).

Early childhood offers a crucial 'window of opportunity' for investment and early intervention, not only to prevent or reduce adverse outcomes but to maximise the life chances of children and young people so that they can thrive (Emerson, Fox and Smith, 2015).

Adolescence also represents a vital period for development, in which biological and psychosocial changes present a 'window of vulnerability' through which pathways can be set – positively or negatively – towards lifelong health outcomes (Viner, Ross, Hardy et al, 2015).

The weight of a baby at delivery (birthweight) is widely accepted as a key indicator of infant health and can be affected by a number of factors, including the age, size, health and nutritional status of the mother, pre-term birth, and tobacco smoking during pregnancy (Laws PJ, Grayson N, Sullivan EA, 2004).

A baby is defined as having a low birthweight if they are born weighing less than 2,500 grams. Low birthweight is generally associated with poorer health outcomes, including increased risk of illness and death, longer periods of hospitalisation after birth, and increased risk of developing significant disabilities (AIHW, 2012).

# Low birth weight babies 2012-2014 2016-2018 6.7% 6.5% Gannawarra 4.9% 6.5% Source: Compiled by PHIDU based on data from the Australian Institute of Health and Welfare)

### Time Trend: Gannawarra LGA – increase in the number of low-birth-weight babies between 2012-2018.

Antenatal care is associated with positive child and maternal health outcomes, with regular antenatal care visits in the first trimester (before 14 weeks' gestational age), leading to fewer interventions in late pregnancy and positive outcomes for child health (AIHW, 2018).

Proportion of women who did not attend antenatal care within the first 10 weeks							
2016-2018 56.8% 41.4%							
Gannawarra 41.4%	annawarra 41.4% Victoria Gannawarra LGA 2016-2018 2016-2018						
(Source: Compiled by PHIDU based on data from the Australian Institute of Health and Welfare)							
Time Trend Unavailable							

### **Time Trend Unavailable**

Women who smoke tobacco during pregnancy are more likely to experience pre-term birth, placental complications and perinatal death of their baby (WHO 2013).

Smoking cessation during pregnancy is key in reducing the risk of complications during pregnancy and birth as well as reducing adverse health outcomes for the baby. Cessation at later stages of pregnancy will still improve health outcomes for the baby, including improved fetal growth (AIHW 2021; Miyazaki et al. 2015).

Smoking during pregnancy								
	2012-2014	2016-2018	8.4%	14%				
Gannawarra	26.7%	14.0%	Victoria 2016-2018	Gannawarra LGA 2016-2018				
(Source: Compiled by PHIDU based on data from the Australian Institute of Health and Welfare)								

**Time Trend:** Gannawarra LGA – decrease in the number of mothers smoking during pregnancy between 2012-2018.

Breast milk contains all the requirements necessary for a baby's development for the first 6 months and remains the most important part of the baby's diet, with the addition of appropriate solid foods, until around 12 months. Breast milk continues to provide a valuable source of nutrition and immunological protection for 2 years and beyond (ABA 2013).

Exclusive breastfeeding is recommended as evidence suggests it has health, nutritional and developmental benefits for infants, including:

- reduced risk of sudden infant death
- reduced risk of necrotising enterocolitis (a condition with high risk of fatality)
- protection against infectious diseases, including gastrointestinal illness, respiratory tract infections and middle ear infections
- protection against overweight and obesity
- reduced risk of type 1 and type 2 diabetes
- reduction in malocclusion (misalignment) in baby teeth
- improved cognitive development (Victora et al. 2016).

Proportion of children fully breast fed on discharge from hospital								
	2019-2020	2020-2021	2021-2022	74.1%				
Gannawarra	92.4%	51.5%	74.1%	Gannawarra LGA 2021-2022				
(Source: Maternal and Child Health Service, Gannawarra Shire Council)								

Time Trend: Gannawarra LGA – decreasing rates of children fully breastfed on discharge from hospital.

Proportion of children fully breast fed at 3 months of age								
	2019-2020	2020-2021	2021-2022	36.5%				
Gannawarra	64.5%	33.3%	36.5%	Gannawarra LGA 2021-2022				
(Source: Maternal and Child Health Service, Gannawarra Shire Council)								

Time Trend: Gannawarra LGA – decreasing rates of children fully breastfed at 3 months of age.

Proportion of children fully breast fed at 6 months of age								
	2019-2020	2020-2021	2021-2022	13.9%				
Gannawarra	32.9%	7%	13.9%	Gannawarra LGA 2021-2022				
(Source: Maternal and Child Health Service, Gannawarra Shire Council)								

Time Trend: Gannawarra LGA – decreasing rates of children fully breastfed at 6 months of age.

Proportion of children at school entry reported to be in excellent or very good health								
	2016	2017	2018	2019	2020	85.3%	86.9%	
Gannawarra	83.9%	84.2%	79.2%	82.6%	86.9%	Victoria 2020	Gannawarra LGA 2020	
(Source: School Entrant Health Questionnaire (SEHQ), Department of Education and Training)								

Time Trend: Gannawarra LGA -increasing rates between 2016 and 2020 of children reported to be in excellent or very good health on entry to school.

Proportion of children at school er	stry reported to have been con	n hy a CD in the nact year
Proportion of children at school er	illy repuiled to have been see	I by a GF III the past year

	2016	2017	78.4%	69.5%
Gannawarra	70.3%	69.5%	Victoria 2017	Gannawarra LGA 2017

(Source: School Entrant Health Questionnaire (SEHQ), Department of Education and Training)

### Time Trend Unavailable

### Proportion of children at school entry reported to have been seen by a paediatrician in the past year

	2016	2017	2018	2019	2020	12.3%	7.9%
Gannawarra	5.1%	8.3%	16.0%	11.2%	7.9%	Victoria 2020	Gannawarra LGA 2020

(Source: School Entrant Health Questionnaire (SEHQ), Department of Education and Training)

Time Trend: Gannawarra LGA -increasing rates between 2016 and 2020 of children reported to have been seen by a paediatrician in the year before entry to school.

Proportion of children at school entry reported to have been seen by an optometrist in the past year	Proportion of children at school entry	y reported to have been seen by	an optometrist in the past year
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	2016	2017	2018	2019	2020	16.2%	18.4%
Gannawarra	15.3%	13.0%	17.5%	16.3%	18.4%	Victoria 2020	Gannawarra LGA 2020

(Source: School Entrant Health Questionnaire (SEHQ), Department of Education and Training)

## Time Trend: Gannawarra LGA -increasing rates between 2016 and 2020 of children reported to have been seen by an optometrist in the year before entry to school.

Most dental diseases are largely preventable. Early preventive strategies include:

- parental counselling about diet
- establishing sound oral hygiene practice, including the appropriate use of fluorides
- regular oral health check-ups (COAG 2015).

#### Proportion of children at school entry whose parents are concerned about their oral health 2016 2017 2018 2020 2019 17.6% 16.2% Victoria Gannawarra LGA Gannawarra 12.7% 19.4% 15.2% 15.3% 17.6% 2020 2020 (Source: School Entrant Health Questionnaire (SEHQ), Department of Education and Training)

Time Trend: Gannawarra LGA -increasing rates between 2016 and 2020 of parents concerned about their child's oral health on entry to school.

Proportion of children at school entry reported to have been seen by a dentist in the past year								
	2016	2017	2018	2019	2020	49.9%	46.5%	
Gannawarra	61.9%	66.7%	63.2%	66.3%	46.5%	Victoria 2020	Gannawarra LGA 2020	
(Source: Schor	(Source: School Entrant Health Questionnaire (SEHQ), Department of Education and Training)							

(Source: School Entrant Health Questionnaire (SEHQ), Department of Education and Training)

Time Trend: Gannawarra LGA -increasing rates between 2016 and 2020 of children reported to have been seen by a dentist in the year before entry to school.

People aged 0 to 14 years who reported they had asthma *ASR per 100								
	2021	6.4	9.4					
Gannawarra	9.4	Victoria 2021	Gannawarra LGA 2021					
(Source: Comp	(Source: Compiled by PHIDU based on the ABS Census of Population and Housing)							
Time Trend Unavailable- new question in the 2021 ABS Census.								

\*Indicator detail: This variable describes whether a person aged 0 to 14 years has been told by a doctor or nurse that they have asthma.

This variable is derived from responses to the long-term health conditions question. It counts the number of people who marked 'Asthma' on the Census form.

The data are comprised of people aged 0 to 14 years who reported that they have had asthma, expressed as an indirectly standardised rate per 100 people aged 0 to 14 years (URP, 2021), based on the Australian Standard.

People aged 0 to 14 years who reported they had any other long term health conditions *ASR per 100								
<sup>2021</sup> <b>3.8 3.6</b>								
Gannawarra	3.6	Victoria Gannawarra LGA 2021 2021						
(Source: Compiled by PHIDU based on the ABS Census of Population and Housing)								
Time Trend Unavailable- new question in the 2021 ABS Census.								

\*Indicator detail: This variable describes whether a person has been told by a doctor or nurse that they have a long- term health condition that is not:

- arthritis
- asthma
- cancer (including remission)
- dementia (including Alzheimer's)
- diabetes (excluding gestational diabetes)

- heart disease (including heart attack or angina)
- kidney disease
- lung condition (including COPD) or emphysema)
- mental health condition (including depression or anxiety)
- stroke.

This variable does not indicate whether a person has multiple long-term health conditions. This variable is derived from responses to the long-term health conditions question. It counts the number of people who marked 'Any other long-term health condition(s)'.

The data are comprised of people 0 to 14 years who reported that they have a long-term health condition, expressed as an indirectly standardised rate per 100 people aged 0 to 14 years (URP, 2021), based on the Australian Standard.

Proportion of NDIS Participants aged 0-24 years						
Age Group	June 2020	June 2020				
	Victoria	Gannawarra LGA				
0 to 6 years	17%	13%				
7 to 14 years	24%	23%				
15-24 years	14%	16%				

(Source: Southern Mallee Primary Care Partnership Indigenous Health and Wellbeing Profile, 2020)

Time Trend unavailable \*\*The National Disability Insurance Scheme (NDIS)' rolled out in the Gannawarra Shire in January 2019



### CHILDREN & YOUNG PEOPLE HAVE GOOD MENTAL HEALTH AND WELLBEING

The middle years are a time when many students experience new and sometimes difficult emotions. The prevalence of anxiety and depression increase (The Centre for Adolescent Health, 2018), and half of all mental health problems are apparent by age fourteen (Kessler et al, 2005).

The evidence shows that a higher proportion of children who experience mental health problems in childhood also experience these difficulties in adolescence (O'Connor, Romaniuk, Gray, & Daraganova, forthcoming).

Mental health disorders experienced in adolescence may have a range of significant detrimental effects on an individual's wellbeing, functioning and development, both in the short and long term.

Without strong wellbeing, students are at greater risk of adopting anti-school roles and disengaging from learning (Bonell C, Blakemore S-J, Fletcher A, Patton G, 2019).

### Proportion of children at school entry with emotional or behavioural difficulties

	2016	2017	2018	2019	2020	7.4%	8.8%
Gannawarra	6.8%	Data not available	8.8%	8.2%	8.8%	Victoria 2020	Gannawarra LGA 2020

(Source: School Entrant Health Questionnaire (SEHQ), Department of Education and Training)

**Time Trend:** Gannawarra LGA-increasing rates between 2016 and 2020 of children reported to have emotional and behavioural difficulties at entry to school.

### Proportion of children at school entry whose parents report high levels\* of family stress in the past month

	2016	2017	2018	2019	2020	10%	8.7%
Gannawarra	11%	10.2%	12%	9.2%	8.7%	Victoria 2020	Gannawarra LGA 2020

(Source: School Entrant Health Questionnaire (SEHQ), Department of Education and Training)

## Time Trend: Gannawarra LGA -decreasing rates between 2016 and 2020 of proportion of children at school entry whose parents report high levels of family stress in the past month.

- \* Number of children at school entry whose parents report high levels of family stress in the past month (based on the question 'Sometimes, families have times when there is more stress/pressure than usual. Overall, how would you rate your own family's stress level over the last month?' Answers are on a 5 point scale and this indicator counts responses in the highest two categories). Examples of 'stressors' include: separation and divorce of parents, death of friend or relative, move to new house, parent(s) change of job, parents loss of job, new baby in house, remarriage of parent(s), serious illness of parent(s), serious illness of sibling(s), history of abuse to parent, history of abuse to child(ren), alcohol or drug related problem in family, history of mental illness of parent, child witness to violence, parent witness to violence, gambling problem in family.
- \*\* The SEHQ is a critical source of information relating to the types of stressors experienced by children in the 12 months prior to the questionnaire being completed. Children were more likely to have been affected by a stressful event or family issue in the twelve months prior to the SEHQ if they were from a one parent family, Aboriginal family, from the most socioeconomically disadvantaged areas or from a rural/regional area.

### People aged 0 to 14 years who reported they had a mental health condition

(including depression or anxiety) \*ASR per 100

2021	2.0	1.7						
Gannawarra 1.7	Victoria 2021	Gannawarra LGA 2021						
(Source: Compiled by PHIDU based on the ABS Census of Population and Housing)								

### Time Trend Unavailable- new question in the 2021 ABS Census.

\*Indicator detail: This variable describes whether a person aged 0 to 14 years has been told by a doctor or nurse that they had a mental health condition (including depression and anxiety).

This variable is derived from responses to the long-term health conditions question. It counts the number of people who marked 'Mental health condition (including depression and anxiety)' on the Census form.

The data are comprised of people aged 0 to 14 years who reported that they have had a mental health condition (including depression and anxiety), expressed as an indirectly standardised rate per 100 people aged 0 to 14 years (URP, 2021), based on the Australian standard.



## Domain 4: Learning & Participating

### FAMILIES ARE SUPPORTIVE OF THEIR CHILDREN'S LEARNING

Parents are critical for a student's academic engagement and performance (Wang M-T, Eccles J, 2012, Borgonovi F, Montt G. 2012).

Research has shown that higher grades and scores, improved school retention, completion and graduation rates, lower drop-out figures and an upward trend in postsecondary enrolments are associated with parent engagement in formal education (Emerson et al, 2012).

When parents engage with their children's learning, particularly out of school, attendance increases, behaviour in school improves, homework return rates go up and, overall, children's achievement tends to improve (Goodall, 2018).



## "The level of respect the family has for education is seen as a role model for students" – Demir & Karabeyoglu, 2016

	2012	2015	2018	2021	96.8%	98.3%
Gannawarra	96.4%	98.0%	96.1%	98.3%	Victoria 2021	Gannawarra LGA 2021
(0						

(Source: AEDC 2012-2021)

Time Trend: Gannawarra LGA-increase in number of children making good progress in adapting to the structure and learning environment of the school.

Children whose parent(s)/caregiver(s) are actively engaged with the school in supporting their child's learning

	2012	2015	2018	2021	94.4%	97.5%
Gannawarra	94.6%	89.9%	93.1%	97.5%	Victoria 2021	Gannawarra LGA 2021

(Source: AEDC 2012-2021)

Time Trend: Gannawarra LGA-increase in number of children whose parent(s)/caregiver(s) are actively engaged with the school in supporting their child's learning.

Children who are regularly read to/encouraged in their reading at home								
	2012	2015	2018	2021	90.7%	93.3%		
Gannawarra	95.5%	91.9%	90.2%	93.3%	Victoria 2021	Gannawarra LGA 2021		
(Source: AEDC 2012-2021)								

Time Trend: Gannawarra LGA-decrease in number of children who are regularly read to/encouraged in their reading at home.

## **CHILDREN AND YOUNG PEOPLE ATTEND SCHOOL**

Parental attitudes can shape a child's attitudes to attendance (Demir & Karabeyoglu, 2016; Thornton et al., 2013).

Research has shown that students who develop stable patterns of engagement in the primary grades are likely to traverse the different stages of secondary school, and any educational challenges that confront them, more successfully (Ladd and Dinella 2009).

Students in the early years of compulsory schooling, students transitioning through secondary school, students in remote locations or socio-economically disadvantaged areas and Indigenous students are most at risk for absences of at least a month or more over the schooling year (ACARA, 2018; Hancock, Shepherd, Lawrence, & Zubrick, 2013).

Children in care are less likely to continue their education beyond the minimum age requirement and are more likely to attend numerous different schools with lower attendance rates overall (Osborn and Bromfield 2007).

"The major opportunity for preventing poor attendance is at the point of entry to preschool, pre-primary and Year 1...setting the expectation and pattern about attendance early may offer the best long-term sustainable approach to addressing poor attendance...Beyond this, individual treatment and targeting will need to be tailored to circumstances" – Zubrick, 2014

### CHILDREN ATTEND KINDERGARTEN

The research has shown that high quality kindergarten is a proven strategy for lifting children's outcomes across all learning domains (OECD, 2017). Two years of kindergarten has an even stronger positive effect on children from disadvantaged backgrounds (NICHD Early Child Care Research Network & Duncan, G.J. 2003).

Kindergarten participation rate										
	2016	2017	2018	2019	91.8%	84.6%				
Gannawarra	105.6%	93.8%	75.2%	84.6%	Victoria 2019	Gannawarra LGA 2019				
(Source: Children's Services On Line (CHISOL) accessed on Victorian Child and Adolescent Monitoring System (VCAMS))										

Time Trend: Gannawarra LGA -decrease in the kindergarten participation rate between 20016-2019.

\*Data provided is for the average number of days absent per full-time equivalent (FTE) student government primary and secondary schools (including Special).

Average number of days absent per FTE Student-PREP										
	2015	2016	2017	2018	2019	16.4	19.6			
Gannawarra	16.1	14.9	15.1	16.8	19.6	Victoria 2019	Gannawarra LGA 2019			
(Source: Cases	s21, DET)									

Time Trend: Gannawarra LGA -increase in average number of days prep students were absent between 2015-2019.

Average num	Average number of days absent per FTE Student-YEAR 3										
	2015	2016	2017	2018	2019	15.7	16.5				
Gannawarra	12.8	13.9	13.2	19.6	16.5	Victoria 2019	Gannawarra LGA 2019				
(Source: Cases21, DET)											

**Time Trend:** Gannawarra LGA -increase in average number of days year three students were absent between 2015-2019.

2015         2016         2017         2018         2019         17.3         16.9           Gannawarra         15.5         12.8         17.9         14.9         16.9         Victoria 2019         Gannawarra LGA 2019	Average number of days absent per FTE Student-YEAR 6										
		2015	2016	2017	2018	2019	_	16.9			
	Gannawarra	15.5	12.8	17.9	14.9	16.9					

(Source: Cases21, DET)

Time Trend: Gannawarra LGA -increase in average number of days year six students were absent between 2015-2019.

Average number of days absent per FTE Student-YEAR 7									
2015 2016 2017 2018 2019 <b>18.4 19.1</b>									
Gannawarra	14.5	13.3	17.4	22.7	19.1	Victoria 2019	Gannawarra LGA 2019		
(Source: Cases21, DET)									

**Time Trend:** Gannawarra LGA -increase in average number of days year seven students were absent between 2015-2019.

Average num	Average number of days absent per FTE Student-YEAR 9											
	2015	2016	2017	2018	2019	23.8	30.6					
Gannawarra	18.0	19.4	24.3	26.3	30.6	Victoria 2019	Gannawarra LGA 2019					
(Source: Cases21, DET)												

**Time Trend:** Gannawarra LGA -increase in average number of days year nine students were absent between 2015-2019.

Average num	Average number of days absent per FTE Student-YEAR 11										
	2015	2016	2017	2018	2019	18.3	24.0				
Gannawarra	16.0	18.5	17.7	22.1	24.0	Victoria 2019	Gannawarra LGA 2019				
(Source: Cases	s21. DET)										

Time Trend: Gannawarra LGA -increase in average number of days year eleven students were absent between 2015-2019.

Average number of days absent per FTE Student-YEAR 12									
	2015	2016	2017	2018	2019	15.9	23.5		
Gannawarra	13.6	10.9	12.9	15.0	23.5	Victoria 2019	Gannawarra LGA 2019		
(Source: Cases21, DET)									

Time Trend: Gannawarra LGA -increase in average number of days year twelve students were absent between 2015-2019.



#### STUDENTS ACHIEVE NATIONAL MINIMUM STANDARDS IN LITERACY AND NUMERACY

Literacy involves 'students listening to, reading, viewing, speaking, writing and creating oral, print, visual and digital texts, and using and modifying language for different purposes in a range of contexts' (ACARA 2019a).

Numeracy encompasses 'the knowledge, skills, behaviours and dispositions that students need to use mathematics in a wide range of situations' (ACARA 2019a).

Children whose parents read to them every day at 2–3 year olds had on average higher Year 3 NAPLAN reading scores, than children whose parents read to them less frequently (Yu & Daraganova 2015).

School factors that affect literacy and numeracy outcomes can include:

- quality of schooling
- availability of interventions and support
- student commitment
- proximity of the school and other educational facilities to students' homes (ACARA 2015).

	2015	2016	2017	2018	2019	96.6%	97.4%
Gannawarra	94.8%	96.5%	95.0%	92.1%	97.4%	Victoria 2019	Gannawarra LGA 2019

(Source: NAPLAN, VCAMS)

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Time Trend: Gannawarra LGA -increasing rates of year three students who achieved national minimum standards in literacy between 2015-2019.

Proportion o	Proportion of students who achieve national minimum standards in literacy (YEAR 5)											
	2015	2016	2017	2018	2019	95.9%	96.9%					
Gannawarra	93.8%	94.6%	95.9%	97.2%	96.9%	Victoria 2019	Gannawarra LGA 2019					

(Source: NAPLAN, VCAMS)

Time Trend: Gannawarra LGA -increasing rates of year five students who achieved national minimum standards in literacy between 2015-2019.

Proportion of students who achieve national minimum standards in literacy (YEAR 7)

	2015	2016	2017	2018	2019	95.7%	96.4%
Gannawarra	94.9%	94.9%	97.6%	90.6%	96.4%	Victoria 2019	Gannawarra LGA 2019

(Source: NAPLAN, VCAMS)

Time Trend: Gannawarra LGA -increasing rates of year seven students who achieved national minimum standards in literacy between 2015-2019.

Proportion of students who achieve national minimum standards in literacy (YEAR 9)										
	2015	2016	2017	2018	2019	92.4%	91.0%			
Gannawarra	98.2%	93.2%	93.5%	82.1%	91.0%	Victoria 2019	Gannawarra LGA 2019			
(Source: NAPI	(Source: NAPLAN, VCAMS)									

Time Trend: Gannawarra LGA -decreasing rates of year nine students who achieved national minimum standards in literacy between 2015-2019.

Proportion of students who achieve national minimum standards in numeracy (YEAR 3)							
	2015	2016	2017	2018	2019	96.4%	98.2%
Gannawarra	94.9%	96.5%	95.1%	97.0%	98.2%	Victoria 2019	Gannawarra LGA 2019
(2)							

(Source: NAPLAN, VCAMS)

Time Trend: Gannawarra LGA -increasing rates of year three students who achieved national minimum standards in numeracy between 2015-2019.

Proportion of students who achieve national minimum standards in numeracy (YEAR 5)								
		2015	2017	2018	2019	96.4%	99.0%	

99.0%

Victoria

2019

Gannawarra LGA

2019

(Source: NAPLAN, VCAMS)

99.0%

97.3%

Gannawarra 96.9%

Time Trend: Gannawarra LGA -increasing rates of year five students who achieved national minimum standards in numeracy between 2015-2019.

Proportion of students who achieve national minimum standards in numeracy (YEAR 7)							
	2015	2016	2017	2018	2019	95.7%	98.8%
Gannawarra	98.9%	96.3%	95.3%	97.6%	98.8%	Victoria 2019	Gannawarra LGA 2019
(Source: NAPLAN, VCAMS)							

Time Trend: Gannawarra LGA -decreasing rates of year seven students who achieved national minimum standards in numeracy between 2015-2019.

#### Proportion of students who achieve national minimum standards in numeracy (YEAR 9)

	2015	2017	2018	2019	96.2%	98.5%
Gannawarra	98.2%	98.9%	96.9%	98.5%	Victoria 2019	Gannawarra LGA 2019
(Source: NAPL	AN, VCAM	S)				

Time Trend: Gannawarra LGA -increasing rates of year nine students who achieved national minimum standards in numeracy between 2015-2019.



# YOUNG PEOPLE COMPLETE SECONDARY SCHOOL

Research has shown poorer outcomes for young people who do not complete Year 12. For example, non-completion of Year 12 has been shown to be correlated with their having longer periods not participating in education, employment or training (Stanwick, Forrest & Skujins 2017).

Those who have completed Year 12 are more likely to continue with further education or training and have a more successful transition into the workforce (ABS 2011).

Full-time participation in secondary	y school education at age 16
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	2006	2011	2016	2021	88.5%	82.6%			
Gannawarra	76.1%	80.1%	87.9%	82.6%	Victoria 2021	Gannawarra LGA 2021			
(Source: Com	(Source: Compiled by PHIDU from ABS Census 2006, 2011, 2016, 2021)								

**Time Trend:** Gannawarra LGA-increase in full time participation in secondary school at age 16 between 2006-2021.

People who left school at Year 10 or below, or did not go to school							
	2011	2016	2021	21.0	32.5		
Gannawarra	41.3	37.4	32.5	(ASR per 100) Victoria 2021	(ASR per 100) Gannawarra LGA 2021		
(Source: Com	(Source: Compiled by PHIDU from ABS Census 2011, 2016 & 2021)						

# Time Trend: Gannawarra LGA-decreasing rates per 100 people aged 15 years and over who left school at year 10, or below, or did not go to school.

\*The data comprise people who left school at Year 10 or below, or did not go to school, expressed as an indirectly standardised rate per 100 people aged 15 years and over (usual resident population, 2021), based on the Australian standard. Five-year age groups were available for age-standardisation.



#### YOUNG PEOPLE HAVE SUCCESSFUL TRANSITION FROM SECONDARY SCHOOL

Young people are particularly vulnerable in making the transition from school to further education or work. Some factors that can make this transition more difficult include:

- low educational outcomes
- the use of drugs and alcohol
- a dysfunctional family life
- health issues
- insufficient secure housing or homelessness
- welfare dependency
- and a lack of understanding of education and career pathways (Briggs et al. 2012; State Training Board of Western Australia 2013).

Not participating in either employment or education can contribute to future unemployment, lower incomes and employment insecurity (de Fontenay et al. 2020; Pech et al. 2009).

Young people aged 16-24 receiving an unemployment benefit						
	2016	2021	4.2%	6.1%		
Gannawarra	6.3%	6.1%	Victoria 2021	Gannawarra LGA 2021		
10 0			2016 0 2021)			

(Source: Compiled by PHIDU from ABS Census 2016 & 2021)

## Time Trend: Gannawarra LGA -decreasing rates of young people aged 16-24 receiving an unemployment benefit between 2016-2021.

School leaver participation in higher education						
	2013	2016	2021	57.5%	33.1%	
Gannawarra	27.2%	25.2%	33.1%	Victoria 2021	Gannawarra LGA 2021	
16				1 2016 2024		

(Source: Compiled by PHIDU from ABS Census 2011, 2016, 2021)

#### Time Trend: Gannawarra LGA- increase in school leaver participation in higher education between 2013-2021.

<sup>2016</sup> <sup>2021</sup> <b>87.5%</b>	79.6%
Gannawarra 83.8% 79.6% Victoria Ga	nnawarra LGA 2021

(Source: Compiled by PHIDU from ABS Census 2016, 2021)

## **Time Trend:** Gannawarra LGA -decreasing rates of young people aged 15-24 who are learning or earning between 2016-2021.

In 2006 and 2011 Census the age range was 15-19 so comparisons could not be made across these years.

\*This data comprise the number of 15 to 24-year-old people who were engaged in school, work or further education/ training, expressed as a proportion of all those aged 15 to 24 years.

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