

# The Council for the Care of Children



**Look out for young South Australians**  
A framework for improving the lives of young South Australians



**Government of  
South Australia**

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**National Library of Australia Cataloguing-in-Publication entry**

Author: Hetzel, Diana.

Title: Look out for young South Australians : a framework for improving the lives of young South Australians / Diana Hetzel.

**ISBN: 9781920983864**

Subjects: Youth--South Australia.

Children--South Australia.

Youth--Services for--South Australia.

Children--Services for--South Australia.

Child welfare.

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Dewey Number: 362.7099423

**Acknowledgements:**

The Council for the Care of Children wishes to acknowledge the UK Government's Every Child Matters (UK Govt. 2003), from which this framework has been developed.

# A Framework for Improving the Lives of Young South Australians

As part of its responsibility to report to government on the wellbeing of South Australian children, the Council for the Care of Children has developed a monitoring framework, *Look out for young South Australians*, in keeping with the Council's vision that; 'South Australian children are cherished, nurtured, respected and encouraged to be all that they can be, by their families, communities and government, and by all members of society'.

*Look out for young South Australians* is guided by the concept of 'child wellbeing', underpinned by the *United Nations Convention on the Rights of the Child*, to which Australia is a signatory. The Convention includes developmental, participatory and protective obligations to fulfil, respect and protect children at different stages in their lives.

Outcomes for our youngest citizens are not static. They result from the continuing interplay of resources and risk and protective factors, and relate to the individual and social situations of children and their families, friends, the communities where they live and learn, and the wider society. Children – with their considerable evolving capacities – are also active in their own wellbeing.

Why monitor the wellbeing of young South Australians? Assessing how well our youngest members are doing can help us set priorities, and, into the future, serve as a guiding rail for keeping our efforts on track, giving early warning of failure or success and making us accountable for how well they are doing. In short, it allows us to celebrate successes and look to areas where further effort may be needed.

This first report outlines the framework and sets a baseline. The Council will monitor children's wellbeing through the use of the framework, and aims to report on progress in improving the lives of young South Australians every three years.

Above all, *Look out for young South Australians* is about making sure that our children and young people have the opportunities for a good life, wherever they are, and no matter what problems they may face. Our aim is to make everyone aware of the things children and young people need to help them to be happy, successful, healthy and safe.

**Diana Hetzel**

Chair

The Council for the Care of Children

## What does the framework cover?

*Look out for Young South Australians* examines the wellbeing of South Australians aged less than 18 years across five dimensions of children's lives: health; safety; achievement and enjoyment of life; relationships with family, peers, community, culture and society; and preparedness for adulthood. Each dimension contains a number of areas of focus or 'indicators', and each indicator has at least one measure.

Children's present life and development, and their future life chances are brought together, by looking both at the conditions under which children are doing well and not as well and the actual outcomes that are achieved, using these indicators.

While the focus aims to be on the outcomes for children, there are areas where information is lacking; where possible, indicators reflecting service use have been substituted until there are better measures. The Council sees the framework as an evolving tool, which will be adapted as important issues emerge or new information becomes available.

The framework takes into account current work to improve the lives of children, such as *South Australia's Strategic Plan*; and the Closing the Gap, Child Protection and Early Childhood areas of the Council of Australian Governments (COAG). Both include a focus on the substantial disadvantage experienced by Aboriginal and Torres Strait Islander peoples compared with other Australians.

With the framework, we have a common basis for setting goals and monitoring South Australian children's progress. This will allow us to reflect upon the success of the efforts of children themselves, families, communities, organisations and governments in improving their lives.

Full details of all measures and data sources can be found in the companion technical report, which is available from the Council's website at <http://www.childrensa.sa.gov.au>.

**"To improve something, first measure it"**  
(UNICEF 2007).

## The five dimensions of young South Australians' lives

Young South Australians ...

- are healthy (enjoying good physical and emotional health and living healthy lives)
- stay safe and are nurtured (being cared for and nurtured and protected from harm and neglect)
- enjoy and achieve (getting the most out of life and developing skills for life, according to their capabilities)
- make a positive contribution (being actively involved with their peers, families, culture, community and society, according to their capabilities)
- are prepared for adult life (gaining knowledge and skills to participate as adults and not being prevented by economic disadvantage from achieving in life)

		Dimensions	
		ARE HEALTHY	STAY SAFE AND ARE NURTURED
Achievable Outcomes		Optimal development before birth	Children are safe from injury
		Children have a healthy start to life	Children are safe from abuse, neglect and violence
		Children have health-promoting behaviours	Children are safe from crime and anti-social behaviour
		Children are physically and emotionally healthy	Children have security, stability and are cared for

## Young South Australians at a glance:

In 2006, children aged 0-19 years made up 25.0% of the SA population (392,051 children):

- Those aged 0-4 years were 5.7% of the SA population
- Those aged 5-9 years were 6.1% of the SA population
- Those aged 10-14 years were 6.5% of the SA population
- Those aged 15-19 years were 6.7% of the SA population

## Dimensions

### ENJOY AND ACHIEVE

### MAKE A POSITIVE CONTRIBUTION

### ARE PREPARED FOR ADULT LIFE

Children's developmental experience of early childhood is enriched

Children engage in decision-making

Children's material needs are met

Children's experience of learning is positive

Children identify and participate with their kinship group and/or culture

Children live in sustainable communities

Children learn effectively and develop life skills according to their capabilities

Children are involved in community activities

Children are ready to engage in further education, employment or training according to their capabilities

Children play and participate in recreational activities according to their capabilities

Children engage in positive behaviour

In 2006, Aboriginal children aged 0-19 years represented 47.4% of the SA Aboriginal population (12,115 children).

In 2003, it was estimated that there were 38,100 children aged 0-14 years who had a disability, but there are no accurate data on the prevalence of disability in children.

In 2006, there were an estimated 171,000 families with children aged under 15 years; and 23.1% of children under 15 years were living in a one-parent family.

## Young South Australians are healthy enjoying good physical and emotional health and living healthy lives

The foundations for health and wellbeing are established early in life. Along with the genes inherited from parents and their own biology, children grow, develop, experience and learn. These factors act in different ways on their physical and emotional health, their behaviours and their abilities to learn. They also help to set the pattern for health in adulthood.

Children who have special needs and disabilities, Aboriginal children, children who have experienced deprivation and trauma, and children with existing long-term illnesses are among those young South Australians most likely to experience the poorest health and wellbeing.

### Achievable outcomes

- **Optimal development before birth**
  - Low birthweight is a predictor of future health. A birthweight of less than 2.5 kilograms may leave a child susceptible to a range of health problems.
  - A child's risk of dying is greatest around the time of birth and in the first year of life. Infant mortality rate is a key measure of a nation's population and child health.
- **A healthy start to life**
  - Immunisation is an effective means of preventing childhood death and illness, and reflects the capacity of health services.
  - Breastfeeding increases immunity, protects against illness and strengthens infant development.
- **Develop health-promoting behaviours**
  - Attitudes and behaviours that are risky to health start when we are young; tobacco smoking and high-risk alcohol use are examples.
- **Children are physically, mentally and emotionally healthy**
  - Good physical, mental and emotional health is essential to wellbeing throughout life.



## Key indicators in SA

In 2006, South Australia had the lowest overall Infant Mortality Rate (IMR) in Australia (3.2 infant deaths per 1,000 live births). The Aboriginal IMR for 2002-06 was 6.7, compared to 2.8 (non-Aboriginal population).

In 2006, 6.4 per 1,000 live births (total population.) were of low birthweight, with 13.4 per 1,000 live births for the Aboriginal population.

In September 2008, 92.4% of children on the Australian Childhood Immunisation Register were fully immunised at 2 years.

In Jan-Mar 2008, 56% of mothers were breastfeeding at their infant's six month check.

In 2005, 7.5% of students aged 12-17 years reported smoking tobacco in the previous week, and 27.3% reported potentially unsafe or binge-drinking behaviour.

In 2002, 38% of 12 year-olds had experienced some decay in their permanent teeth.

For 2002-07, 16.9% of children aged 2-15 years were reported as having asthma.

In June 2006, 38,289 children aged 4-17 years were estimated to have a mental health problem.

In 2007, 13.8% of pre-school (4 years) children were reported as overweight, and 5.0% as obese.

## Young South Australians stay safe and are nurtured being well cared for and protected from harm and neglect

Children have to rely on others to keep them safe and provide enriching social experiences. These are important for emotional wellbeing, healthy development, resilience to life stresses and the ability to form good relationships. Families need supportive environments so that they can nurture and protect their children. When families are unable to do so, alternative caring arrangements are required which can provide for children's needs.

Children who are more vulnerable to injury, abuse, neglect or trauma include those who have special needs or a disability; those who are disadvantaged by poverty, poor parental health and education, or social isolation; those who have already experienced trauma and dislocation from kin and country (such as Aboriginal, refugee and homeless children).

### Achievable outcomes

- **Children are safe from injury**
  - Although injuries are largely preventable, they remain a major cause of suffering and disability for children.
- **Children are safe from abuse, neglect and violence**
  - Abuse, neglect and violence in all their forms can have long-lasting consequences for children's physical and emotional wellbeing.
- **Children are safe from anti-social behaviour and crime**
  - Children are vulnerable as victims of anti-social behaviour and crime because of their relative powerlessness and evolving development.
- **Children have stability, security and are cared for**
  - Children need consistent, warm and responsive care in a stable, secure environment where they can develop and thrive.

## Key indicators in SA

For 2004-06, the injury death rate for children aged 0-14 years was 7.0 deaths per 100,000 children.

In 2007-08, the rate of children aged 0-16 years who were the subjects of child protection substantiations was 5.5 per 1,000 children (for Aboriginal children, the rate was 48.4 per 1,000 children, compared to a rate of 4.0 for other children).

In 2006-07, 4.5% of children who were the subject of a decision not to substantiate during the year were also the subject of a subsequent substantiation within 3 months and 13.4% of children within 12 months.

In 2007-08, there were 284 children aged less than 5 years admitted to out-of-home care.

At 30 June 2008, there were 1,817 children aged 0-14 years on care and protection orders. For all children 0-17 years, the rate of being on care and protection orders was 6.2 per 1,000 children (for Aboriginal children, the rate was 45.2 per 1,000 children compared to 4.9 for other children).

At 30 June 2008, 63.6% of children in out-of-home care had been in continuous placement for 5 years or more.

In 2006, 2,626 children under 18 years were victims of an offence reported to police (excluding sexual offences), and 784 children were victims of a sexual offence reported to police.

In 2007, 1,977 mothers and fathers commenced a first-time parents' course.

In 2006, there were an estimated 14,800 children less than 18 years providing a caring role for a family member - of these, an estimated 10,200 were under 15 years, and over 600 were less than 9 years.

## Young South Australians enjoy and achieve getting the most out of life and developing skills for life, according to their capabilities

Children develop physical abilities, complex emotions and essential social skills from the first years of life. Early childhood is a key period for brain development, and a time of both potential and vulnerability. Learning opportunities, from pre-school through to secondary education and then to employment, influence future life chances as adults. Children are also active partners in their own learning.

Children who have special needs and disabilities, Aboriginal children, children in the care and protection system, and children who are disadvantaged by low family income, caring responsibilities, geographic or social isolation are those who benefit most from effective early intervention services and increased family support.

### Achievable outcomes

- **Children’s developmental experience of early childhood is enriched**
  - Enriched experiences of the infant and young child provide an important foundation for their development.
- **Children’s experience of learning is positive**
  - Children who are encouraged and supported are more likely to enjoy learning, and less likely to leave school early.
- **Children learn effectively and develop life skills according to their capabilities**
  - Children who are able to learn effectively are more likely to gain confidence and skills that will equip them for later life.
- **Children play and participate in recreational activities, according to their capabilities**
  - Play and recreational activities are important for children to develop skills, learn how to interact with others and enjoy life.

## Key indicators in SA

In 2007, 87.6% of all 4 year old children were enrolled in DECS-funded Preschools, Integrated Centres and Children's Centres. At term 2 of 2007, 65% of three year old Aboriginal children were enrolled in preschool (1,097 children).

In 2007-08, proportions of special needs children aged 3-5 years attending government-funded (govt) or community (cty) provided preschool services were: children with a disability 15.5% (govt) & 8.3% (cty); from non-English speaking backgrounds 10.5% (govt) & 13.5% (cty), from regional areas 29.0% (govt) & 26.2% (cty), and remote areas 5.8% (govt) & 5.8% (cty);%, from Aboriginal and Torres Strait Islander backgrounds, 6.2% (govt) and 3.5% (cty).

In 2006, proportions of special needs children aged 0-5 years attending approved child care services were: children with a disability 3.2%, from non-English speaking backgrounds 9.2%, from low income families 27.8%, from regional areas 20.8%, and remote areas 2.6%, from Aboriginal and Torres Strait Islander backgrounds, 2.3%.

In 2006, 27.4% of children aged 5-14 years participated in an organised cultural activity outside of school hours (playing a musical instrument, singing, dancing or drama); 72.6% of children of these ages reported reading for pleasure, and 64.1% participated in organised sport outside of school hours.

In 2006, 30.1% of children aged 5-14 years used a computer (excluding use of the Internet) and 65.0% accessed the Internet.

In 2007, 67.9% of Year 1 students were reading at an age-appropriate level or better, as were 29.7% of Aboriginal Year 1 students.

In 2006, 93% of Year 3 students achieved national benchmarks in reading, 92% in writing and 92% in numeracy (73% of Aboriginal students); 88% of Year 5 students achieved national benchmarks in reading (59% of Aboriginal students), 93% (76%) in writing and 88% in numeracy (63%); 93% of Year 7 students achieved national benchmarks in reading (71% of Aboriginal students), 88% (59%) in writing and 87% in numeracy (55%).

In 2007, 64.2% of 19 year olds had completed the SA Certificate of Education or equivalent; and 35% of students received a Tertiary Entrance Rank (TER) or equivalent with at least one of the following subjects: mathematics, physics or chemistry.

## **Young South Australians make a positive contribution by being actively involved with their peers, families, culture, community and society, according to their capabilities**

Children contribute much to our society: they actively produce knowledge as they learn; they offer their labour in the form of part-time employment, volunteering, and housework, caring and other roles for their families; and they enhance communities, through their artistic, sporting and cultural efforts; and by being children.

Children form relationships with those who are important to them. They also understand and act to change their social environments; however, they may be constrained by gender, ethnicity and culture, age, experiences, socioeconomic status and other factors. Opportunities for all children to be active participants in society can reduce the negative effects of social exclusion and discrimination, and enrich our understanding and valuing of childhood.

### **Achievable outcomes**

- **Children engage in decision-making**
  - An ability to make decisions independently is essential to the development of life skills. Children have the right and usually the ability to make choices about their daily experiences and activities. Children learn to see themselves as capable and competent when they are treated this way by others.
- **Children are involved in community activities**
  - Children are active participants in their communities, and their voices and actions need more acknowledgement.
- **Children engage in positive behaviour**
  - Children learn from others around them and need supportive and appropriate role models with which to identify.
- **Children identify and participate with their kinship group and/or culture**
  - A sense of belonging to and knowledge of culture, kinship, tradition and history enhance child wellbeing and resilience for life, and ensures the intergenerational transmission of such knowledge.

## Key indicators in SA

In September 2008, there were 64 young people aged 12 -17 years on the Youth Participation Register.

In 2006, 9,010 children aged 0-14 years were identified as being of Aboriginal and/or Torres Strait origin.

In 2006, 2.3% of all children aged 0-14 years also spoke a language at home other than English.

In 2006, 76.6% of children aged 5-14 years attended cultural venues i.e., visited a public library, art gallery or museum, and/or attended a performing arts event. Those who did not participate were more likely to be in families with unemployed parents or in a single parent family with an unemployed parent; born overseas or having a parent born in an overseas non-English speaking country; and from households with a lower overall socioeconomic status.

In 2006, the three most popular leisure activities for children aged 5–14 years in the previous two weeks were watching TV, videos or DVDs (98%), reading for pleasure (73%) and playing electronic or computer games (67%).

In 2006, there were 4,381 children aged 10-17 years who received a formal police caution, or attended a family conference or the Youth Court.

In 2006-07, there were 1,135 children aged 10-17 years under juvenile justice supervision, of whom 498 were in juvenile detention and 973 were under community supervision (and some young people experienced both).

In June 2006, 6.4% of children aged 5-14 years had worked at some time in the previous 12 months.

## **Young South Australians are prepared for adult life** **gaining knowledge and skills to participate as adults, and not being** **prevented by economic and other disadvantage from achieving in life**

The life conditions of children are determined by the economic, political and social forces which also create the framework of adults' lives. They have a profound effect on children's current lives and opportunities. As our youngest citizens, they rely on their families and their communities to fulfil their basic needs.

Children are active agents for change, and they shape the structures and processes around them. Their social relationships are important now and into the future, as they prepare for adult life.

### **Achievable outcomes**

- **Children's material needs are met**
  - Children need to live in environments that provide some order and meet their basic physical, emotional and material needs, as well as their developmental and learning requirements.
- **Children live in sustainable communities**
  - Sustainable communities build local capacity and trust, through working together on specific goals and plans. They engage their members, are inclusive, consult on issues and invest in lifelong learning and their local physical environments.
- **Children are ready to engage in further education, employment or training, according to their capabilities**
  - Childhood is a time of rapid development, as children are constantly evolving and adapting to their environments. Those who are able need skills and knowledge to take them forward into further education or training and employment as adults.



## Key indicators in SA

In 2006, 15.9% of children aged less than 15 years were living in jobless families.

In June 2006, 23.3% of children under the age of 16 years were living in welfare-dependent or other low income households.

In 2006-07, 76% of accompanying children 0-15 years were turned away on an average day from the Supported Accommodation Assistance Program (SAAP) because their need for accommodation could not be met.

In 2006, the rate of homelessness was estimated to be 53 per 10,000 population; and there were an estimated 2,129 young people aged 12-18 years who were homeless.

In 2006, 64% of children aged 5-14 years reported going bike-riding outside of school hours.

In April 2008, 85.5% of 15-19 year olds were engaged fulltime in school, work or further education and training.

## We do not yet have good information about...

It has been challenging bringing information from many diverse sources together to develop a picture of young South Australians. We have chosen sources that are reliable, and already collected and published on a regular basis. This means that there is no additional expense required for data collection.

However, there are a number of areas where we do not have reliable information at the present time, and other areas where our measures could be better.

### These include:

- More detailed information about children with disabilities and their families; children in the care and protection system; Aboriginal children; refugee children; children who live in rural and remote areas; and children who are socioeconomically disadvantaged;
- The views of young South Australians about the issues that affect them;
- Information about young South Australians involved in volunteering;
- Information about young South Australians and their relationships with their families, friends, carers, peer groups and others in their lives.

The Council for the Care of Children hopes to encourage the collection of this information over the next three years, so that we can have a fuller picture of young South Australians and how they are faring into the future.

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