“It’s like a big circle trap.”

Discussion paper on children and young people’s vulnerability

“It’s not better either way: living with our family, living with DCP, government homes… or living on the streets… it’s not good anywhere. It’s like a big trap… we end up getting in trouble by the law and then we just go to prison, and we just get trapped, it’s like a big circle trap. That’s how it’s been in my life personally. I think it’s like that for hundreds of kids out there. It’s just a big trap game. It’s never going to change unless they do something about it.”

17 year-old

Published 15 March 2018
Recognising Aboriginal and Torres Strait Islander People

The Commissioner for Children and Young People WA acknowledges the unique contribution of Aboriginal people’s culture and heritage to Western Australian society. For the purposes of this report, the term ‘Aboriginal’ encompasses Western Australia’s diverse language groups and also recognises those of Torres Strait Islander descent. The use of the term ‘Aboriginal’ in this way is not intended to imply equivalence between Aboriginal and Torres Strait Islander cultures, though similarities do exist.

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Message from the Commissioner

While most children and young people in Western Australia are faring well and are cared for in healthy, safe and nurturing environments, some children and young people experience significant disadvantage and adversity. These children and young people must be provided with the support, resources and opportunities to overcome the challenges they experience so they can thrive in their communities.

As Commissioner for Children and Young People, I am committed to promoting the voices of children and young people who are vulnerable, disadvantaged or marginalised for any reason, to ensure they receive effective services and supports. Over the years, this office has consulted widely with children and young people across the State about issues that affect their wellbeing. Some of these children and young people have shared deep insights on the causes and impact of their own and others’ experiences of adversity. It is essential we listen to them to effectively address the underlying causes of adversity and support all children and young people to reach their full potential.

This discussion paper presents a unique perspective on vulnerability, using the voices of children and young people who clearly articulate what helps and hinders their wellbeing. The paper is the catalyst for a program of events I will be hosting in 2018 focused on understanding what makes some children and young people vulnerable to poorer outcomes in life. These events will bring together a range of leaders across the government and non-government sectors and the broader community to explore new approaches to address the challenges facing WA children and young people identified as vulnerable to inform effective strategic responses.

I look forward to the discussions and hearing the ideas generated to achieve better outcomes for all children and young people in our State.

Colin Pettit
Commissioner for Children and Young People
About the Commissioner

The Commissioner for Children and Young People is the independent advocate for all children and young people in WA aged less than 18 years.

The role of the Commissioner is described in the Commissioner for Children and Young People Act 2006. The Act requires the Commissioner to give priority to, and have special regard for, Aboriginal and Torres Strait Islander children and young people, and children and young people who are vulnerable or disadvantaged for any reason.

The Commissioner talks to children and young people and others in the community about what children and young people need to be healthy and reach their potential, and considers research and evidence about children’s wellbeing.

From this information the Commissioner works with children and young people, their families and government to improve policies, legislation and services that support children and young people’s wellbeing.
Purpose

_I think it's good for someone to make sure we kids aren't forgotten about._

9 year-old (Aboriginal and Torres Strait Islander (ATSI) consultation)

Since its inception 10 years ago, the Commissioner for Children and Young People’s office has consulted Western Australian children and young people on a range of important issues that affect their lives and wellbeing.

While many of the children and young people who participated in these consultations were faring well and living in nurturing households and communities, a significant proportion had experienced adversity in their lives.

Through the consultations, these children and young people shared profound insights on issues such as violence, abuse and neglect in the home, challenges with mental health, disability or chronic health issues, disengagement from education, involvement in criminal activity and alcohol and drug use, both in terms of their own experiences and in their observations of peers and family members.

Despite this work and the significant effort of governments and communities, our failure to address these issues, particularly for Aboriginal children and young people, has highlighted an urgent need to improve current policies, services and strengthen our support for children and young people in WA. As a society, it must be our goal to ensure all children and young people are expected to reach their potential and have the opportunities, resources and support to participate socially, economically and civically in their communities.

With the current direction and efforts in WA to achieve greater collaboration when working with children, young people, families and communities, it is timely to convey the views of vulnerable children and young people to inform and challenge current thinking on factors that influence vulnerability.

Through the voices of children and young people, we can identify what helps or hinders their development and wellbeing, the cumulative effects of disadvantage and the complex interplay of factors that shape their lives.

This paper focuses on their views to advance the collective understanding of vulnerability and how to best address the causes of adversity and reduce the impact on children and young people.
Identifying children and young people who are vulnerable

“The children of [my town] are exposed to things that they should not be, such as drugs and alcohol, family abuse, sexual abuse, verbal and physical abuse. They need places where they can go and feel wanted and needed. They don’t like going to school because they know that there are people in the school that are just there to work and make money. They can tell when people don’t care about them. They need people that care about them, people that are willing to give them their own time to listen and help and be their friends.” 17 year-old (ATSI Consultation)

In order to reach their potential, children and young people need to grow up in healthy, safe and nurturing environments, with positive and supportive relationships, and opportunities to learn and participate socially, economically and civically in their communities.

In WA, some children and young people face significant adversity and lack adequate support to overcome the challenges they experience. The resulting outcomes for these children and young people are of grave concern and require immediate attention.
Children with disability are 3 times more likely to experience maltreatment than children without disability.

1/3 of children are developmentally vulnerable at the start of their first year of full-time school.

7% of children and young people are living in poverty.

727 children and young people are under youth justice supervision (community and detention) on an average day.

66% Aboriginal, 33% Non-Aboriginal

1 in 5 students is disengaged from school at some level.

Over 600 young people (15 to 24 years) presented to homelessness agencies in 2015-16.

4,795 children and young people are in out-of-home care.

54% Aboriginal, 46% Non-Aboriginal

LGBTI young people are 5 times more likely to attempt suicide than their peers of a similar age.

Aboriginal children and young people are 9 times more likely to die by suicide than non-Aboriginal children and young people.
Drivers and enablers of development and wellbeing

“To be mentally and physically healthy, you need to be healthy outside as well as having a lot of friends and being happy with what you are doing.”
Young person (Youth Health Consultation)

Advances in research have improved our ability to examine what drives development and influences wellbeing. The ‘nature vs nurture’ debate has been influenced by progress in epigenetics, which has increased understanding that no single driver alone determines the development or outcomes for children and young people; rather they are pieces of a complex jigsaw that interact and affect children’s development at different times and in response to certain circumstances. To build an understanding of how wellbeing is shaped, we need to first explore the key drivers of children’s development – their biology, the expectations others hold and they have of themselves, and the opportunities available to them.

Biology

Children’s physical, cognitive, social and emotional development is prompted by their biology. Although the genes a child inherits from their parents play a significant role, they do not determine the child’s development and future pathways. The environment in which a child develops, before and after birth, can alter the genes they have inherited. Environmental conditions such as stress, diet, behaviour, the sun and toxins activate chemical switches that turn genes ‘on and off’ and regulate how much and when genes are expressed.¹

These experiences in utero and early childhood are built into the architecture of the developing brain creating ‘biological memories’ that influence physical and mental health, learning capacity and behaviour.² These may be positive experiences such as a healthy diet and strong social-emotional support of children, or adverse
experiences such as malnutrition and exposure to chemical toxins and drugs, which then influence the likelihood of positive or negative modifications of gene expression and subsequently impact a child’s development.

“It’s a circle of life to us, for me... their mum or dad, smoke drugs... mum’s smoking and drinking when their baby was in their guts and changes their brain... damage their brain, I think.” 15 year-old (Youth Justice Consultation)

Temperament refers to biologically based differences between individuals, visible from birth, in how they typically behave and react to their social surroundings. Temperament impacts their capacity to manage or self-regulate their own feelings, attention and behaviour, and can influence later development, learning and adjustment. An easy, outgoing temperament and tolerance of new situations promotes positive adjustment and social functioning, while features of temperament such as being irritable, inflexible and inhibited can lead to behavioural and emotional adjustment problems, particularly if there are other risks in a child’s life. Significantly, current research indicates young children’s temperament traits can be modified by responsive and adaptive parenting and caring practices.

Children’s environments, experiences and relationships in their early years have such a significant impact on development and wellbeing due to the rapid brain development occurring in the first five years of life, particularly from conception to age two, and the brain’s high ‘plasticity’ (or flexibility) in this period. These early years therefore provide a key window of opportunity to positively influence children’s development by providing healthy, positive and nurturing environments in utero and through infancy and early childhood. However, brain development continues throughout adolescence into adulthood, and therefore interventions beyond early childhood are also vital as there are ongoing opportunities to learn, adapt and develop socially and emotionally.

**Expectations**

Children’s development is also prompted by carers’ expectations about the capability of their children to undertake tasks, achieve well and assume responsibility. These expectations may be shown in parents’ enthusiastic response to a child’s first steps or words, or their concern when there is delay in reaching these milestones, and through requests and rules around tasks such as completing homework or domestic tasks, or being home on time. Expectations of children also arise from other members of the child’s community such as teachers, peers and extended family. This includes connection to culture and expectations set in a cultural context.

Children and young people further develop social and emotional capabilities, including building their autonomy, making choices and learning from the consequences of their actions, by adults negotiating behavioural expectations, rules and boundaries together with children and young people.
Expectations can also be created by less direct means, such as growing up in households where achieving higher qualifications or unemployment are seen as ‘normal’.

When the environments in which children grow up set high expectations of them, they are encouraged and enabled to achieve development milestones. This in turn influences self-expectations and confidence. On the other hand, low expectations of individual children or particular groups of children can stifle their ability to grow, learn and achieve.

“You always need someone to support you so that they can be there to encourage you when you make mistakes and things like that. It’s like your parents are there to help you learn from what your mistakes would be and then how to make them better.” 13 year-old (Wellbeing Consultation)

“Probably to do with the parenting, whether you have rules set in place or not. I know a lot of my friends; their parents don’t have any rules in place, and they used to get into trouble quite a lot... we don’t want rules obviously, but rules are good to put in place, ‘cause when our parents set rules, they do work most of the time.” 18 year-old (Youth Justice Consultation)

“To me [culture] means that I have something to live up to.” 13 year-old (ATSI Consultation)

“[To have a healthy and happy life, I need] acceptance, inclusion, to be seen as a person with potential and for help to reach that potential.” 12 year-old (Disability Consultation)

“I think we should have to do our homework and get help if we need it.” 10 year-old (ATSI Consultation)

“A bit more positive role models... just to help the younger kids get back on track, tell ’em, sorta like, tell ’em what the consequences are really. And they need to do stuff with ’em a lot more – instead of being out on the streets. I think that could take their mind off of stealing, drinking, smoking, and that sort of stuff.” 18 year-old (Youth Justice Consultation)

Opportunities

The opportunities children have to engage in stimulating activities also prompts their development.11 Parents and carers talking, playing, interacting and reading, particularly for very young children, can have significant onward developmental benefits, in the form of improved educational achievement and improved social and emotional capabilities.12

Opportunities to facilitate learning and development continue throughout a child’s life in their interactions with caregivers (and other adults in their lives). This includes
activities such as explaining facts, talking about expectations, sharing cultural knowledge and encouraging skill-building, and the experiences they are exposed to, such as sport and recreational activities, meeting new people, and travel to new places.

There are also the opportunities provided through the systems children and young people encounter in their lives. For example, children who live in a high-income household with tertiary-educated parents in a high socioeconomic neighbourhood will commonly have opportunities to attend a school that provides high quality education, to have educational support provided at home, to participate in sport and other recreational activities and to travel on family holidays. These opportunities make it significantly more likely that they will achieve well at school, attend university and find stable employment in the future.

Opportunities also have the potential to counter vulnerability. For example, a child who grows up in a single-parent, low-income household with multiple siblings may have reduced education and employment prospects. However, if, for example, a primary school teacher identifies the child’s strengths and supports them to positively engage in learning and attend school, this one opportunity could interrupt their trajectory and increase their likelihood of completing school, which then generates further opportunities in their lives.

“I would include more opportunities and support for children who want to go to school but... have unsupportive families.” 17 year-old Jabirr Jabirr young person (ATSI Consultation)

“I would like to say there needs to be more programs or organisations where youth with disabilities can participate in activities within the community so they can reach their full potential.” 18 year-old (Disability Consultation)

“I really want to get a job but there are no jobs for people in the community. I want to do cleaning on a mine or something but I will have to leave my home and community to get work. I need help to get a job close to my community so I don’t have to move away from home by myself.” 16 year-old Kariyarra young person (ATSI Consultation)

“University should be open for everyone not just rich people.” 11 year-old Noongar young person (ATSI Consultation)

“[I] need help from teachers, homework centres, mentors, family and most of all a lot of role models that are showing a lot of young kids like me that’s they can be somebody.” 12 year-old (ATSI Consultation)

“...we don’t have big shops, we don’t get to do things people in big towns get to do.” 11 year-old (ATSI Consultation)
Constraints to development and wellbeing

There are a number of circumstances that can constrain the development of children and young people and have longer-term impacts on their wellbeing and life chances.

Stress and trauma

Some stress is a normal part of life. Learning how to cope with stress is an important part of healthy child development. Stress that is more serious, but buffered by supportive relationships with adults, is not of significant concern. However toxic stress, which can occur when children experience chronic or serious stressors and is heightened in the absence of caring stable relationships, is of much greater concern. It can arise from physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence and/or the accumulated burdens of family economic hardship. Toxic stress causes prolonged activation of the body’s stress response systems, and can be harmful to cognitive, social and emotional development.

“We are still working on it ‘cause I am trying to control my anger. It’s not really working so we’re gonna keep on trying. It’s a bit tricky. Because when people are being really rude to me and I get like frustrated, a signal comes to my head and says they are trying to push my buttons so I just can’t help it and then my head just takes over.” 10 year-old (Out-of-Home Care Consultation)

“We [kids] don’t like it when our family fights, especially when your mum and dad do because when your dad or your mum goes away you don’t see them for much, only on weekends and that.” 10 year-old (Wellbeing Consultation)

Experiences of trauma often cause long term harm to children and young people. If young people do not have adequate opportunities to receive support and manage their trauma, they may internalise their experiences and create their own means of coping. This can result in destructive behaviours such as high rates of drug and alcohol abuse, self-harm, suicide attempts, criminal behaviour and interaction with the justice system, detachment from culture and family support, and disengagement from school.

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a Trauma can include physical, emotional and sexual abuse, neglect, exposure to family violence, random violence and abandonment, as well as experiences such as severe illness and bullying, poverty and homelessness
“I don’t like people yelling at me. Every time someone yelled at me I would cry. I was a bit scared coming here because I couldn’t take it any more when people yelled at me because I’ve been yelled at so many times.” 15 year-old (Out-of-Home Care Consultation)

[On why he was smoking marijuana at 7 years old] “I didn’t have my dad then that was one reason. Always getting kicked out and bashed by my brother so I left. Maybe that’s the reason why people steal, being bashed by a family member so f**k it, I’d just go and to steal go get money yeah and you get into trouble.” 17 year-old (Youth Justice Consultation)

Dysfunction and chaos

Children’s exposure to dysfunction and chaos can be extremely damaging to their social and emotional development. Family dysfunction, which can include environments where violence, neglect and abuse, alcohol and drug use, mental health issues, harsh parenting and/or bullying are present, is particularly harmful for children. Chaos, which may occur in families, schools, peer groups and other settings is characterised by frenetic activity, lack of structure, unpredictability in everyday activities and high levels of ambient stimulation. It can disrupt attachment, emotional regulation and autonomy and have serious consequences for children’s development.19

“I think the biggest problem is caused at home and has a big impact on how children behave... I mean things such as family separation, violence... which causes depression and anger through us teenagers.” 14 year-old (Mental Health Consultation)

“I used to get hit, yeah like slapped by [carer] a lot so I complained about that, ‘cause I didn’t like it. ‘Cause sometimes I would do something little and she would just hit me... I just don’t really trust anyone since, through the past and everything, what’s happened, so I don’t really feel I can trust them.” 13 year-old (Out-of-Home Care Consultation)

“Yeah, especially and if you’re in a house where there’s a lot of drama and a lot of alcohol and drugs and yeah, a lot of things... and that’s what gets them in [Banksia Hill].” 17 year-old (Youth Justice Consultation)

Poverty

A large body of research has identified a powerful correlation between family poverty and a range of poorer outcomes in life, including limited school achievement and lifetime income, lifelong impairments in physical and mental health, and premature death.20
Early childhood is a particularly sensitive period in which economic deprivation may compromise children’s life chances. Poverty can affect the developing brain whereby significant stress from ongoing hardship disrupts the biological foundations of learning, behaviour, and health, which can have lifelong damaging consequences. Childhood poverty experienced in the first five years of life is understood to be a particularly strong predictor of poorer outcomes in later life (compared to economic deprivation experienced later in childhood or during adolescence).

Families in poverty are more likely to have limited capacity and resources to provide a safe and enriching home learning environment for their children. For example, low family income status, among other factors, has been identified as a barrier to parent-child book-reading that is crucial for young children’s literacy development and lifelong learning. However, it is not low income status in itself that is a barrier but the impact economic disadvantage can have on caregiver-child relationships. Caregivers in low income families may often work long hours which results in missing opportunities to interact with their children. This is amplified because families’ economic disadvantage often co-occurs with other risks such as low parental education level and limited social support.

“Both my parents work hard because dad says things are not cheap no more. I get scared because dad says it’s going to get harder to get a job because nobody wants to give Aboriginals work. He has two jobs and I hardly see him, which makes me sad…” 11 year-old Noongar young person (ATSI Consultation)

“A lot of family struggle about rent, food bills. So [kids] try and help their family like stealing… it’s not good, you know.” 16 year-old (Youth Justice Consultation)

“[If I were boss of this town] I would include more opportunities and support for children who want to go to school but can’t afford to buy basic school supplies….” 17 year-old Jabirr Jabirr young person, Kimberley (ATSI Consultation)

Disadvantage and social exclusion

Disadvantage encompasses more than just financial poverty; it relates to a lack of resources and opportunities that deprive people of access to essential items, activities and services. Factors that contribute to disadvantage may include family circumstances, community poverty, unemployment, lack of suitable and affordable housing, high crime, illness or disability, racism and other forms of discrimination such as religious and gender discrimination. These factors are mutually reinforcing and can manifest in social exclusion and inequality, which in
turn limits access to high quality health care, childcare, schooling and employment opportunities and the potential for full social and economic participation.31,32

“[We need] more houses for more people because [there’s] not enough houses for everyone.” Martu child younger than 10 years (ATSI Consultation)

“People don’t help them to get their basic needs and wants so they go out and do it themselves. But otherwise, they just be sleeping on the streets, with nothing, only their clothes. That’s why they just do crime in general, for survival, or the result of people, you know of racism, or family issues, family problems, you know, relationship problems between friends.” 18 year-old (Youth Justice Consultation)

“Schools are not helpful... the school doesn’t understand what goes on at home. They expect me to do assignments but sometimes I have to take care of my newborn sister or the other kids or try to stop dad from hurting himself or running away.” Young carer (Mental Health Consultation)

Social exclusion constrains child and adult development because it restricts access to opportunities and choices for individuals and groups to participate in social, economic and civic life.33 Exclusion can include racism and vilification, bullying, refusals of friendship and non-recognition, and can occur across multiple settings such as home, school, sport and daily social exchanges and transactions.34

“...even though I was very young, I went through enough misery to last a lifetime. First we didn’t have anywhere to live, after when I started school everybody teased me, I didn’t have any friends, my accent was different, I was an outsider. I didn’t belong.” 16 year-old, Yugoslavia (Culturally and Linguistically Diverse children and young people (CALD) Consultation)

“I was getting bullied... I was getting called ‘charcoal chicken’ and ‘you’re not an Aboriginal’... I was constantly telling teachers. One of the reasons why I left school was ‘cause I was getting bullied... I was getting bullied for my dark skin... it was also through my primary school to my high school and I dropped out in Year 9. I’m supposed to be in Year 12 today and I still haven’t gone back to school.” 17 year-old (Youth Justice Consultation)

“They’d tease us about not being able to hear and how we can’t understand them, and they’d mock us by giving facial expressions or imitate ridiculous made-up signs. Sometimes they would be behind us mumbling and calling names when we can’t hear until our hearing friends tell us what they did to us. It’s an embarrassment when people watch this happen and we have no idea until we’re told.” Young person (Disability Consultation)
“A large part of why I used to be so depressed is that I couldn’t accept that I was different. I was bullied for wanting to be a boy and didn’t understand why I couldn’t have a girlfriend.” 16 year-old (Mental Health Consultation)

“I would eradicate racism between black and white to build respect... It is a bit confusing growing up Aboriginal in this society because we are taught to be proud but lots of times we aren’t really accepted, even when we try to be like them.” 13 year-old Noongar young person (ATSI Consultation)

Two different trajectories

Julia is born with cerebral palsy and has impaired motor skills and speech. Her family have a stable income and provide a safe and loving environment; she attends a specialised school which provides high quality support to meet her needs. Julia’s parents and siblings treat her as an equal member of the family and community and expect her to participate fully in civic life. Due to the positive and resource-rich environment she is growing up in, Julia thrives and completes high school and enrolls in university.

Kate is born healthy with an easy temperament. However, during her infancy, Kate’s mother experiences significant mental health issues and begins using alcohol and drugs. Kate’s father leaves her mother and during Kate’s childhood, her mother is emotionally abusive towards her. Kate escapes her troubles at home by putting her energy into schoolwork; she achieves high marks and enjoys attending school. When Kate reaches high school her mother’s new partner physically abuses Kate; she begins using drugs, withdraws from her friends and becomes very isolated. Kate drops out of school, her drug taking escalates and, in a drug-induced state, she burgles a house and is placed on a community order.

These simplified examples of the trajectory of two different young people illustrates the multiple factors – including the expectations from their family and school, the opportunities provided to them due the resources of their families and the systems and supports they subsequently have access to, and experiences of abuse and alcohol and drug issues - influence their pathways at different stages of childhood and adolescence. Importantly, it highlights that biology alone does not determine wellbeing for children and young people; other factors in their lives significantly enable and constrain their development and wellbeing.
Vulnerability

Understanding how vulnerability arises

“There is no one to talk to; there is no one who will understand. I do not feel like anyone would see my point of view or even care, they haven’t before. I don’t have someone stable to build a relationship with, connect to.”

17 year-old Aboriginal young person (Out-of-Home Care Consultation)

The insights from children and young people who have participated in the Commissioner’s consultations highlight the multiple, interacting factors that shape their development and wellbeing, and constrain their capacity to reach their potential.

While there is no universal definition of the term ‘vulnerable’, at its most simple, vulnerability refers to the likelihood of harm from exposure to risk. Children and young people’s susceptibility to vulnerability is often understood as the interplay between multiple sources of risk (circumstances or events that increase the likelihood of poor outcomes) and multiple sources of protection (attributes or conditions that moderate risk and promote healthy development and wellbeing).

However, attempting to predict outcomes based on individual risks, is unreliable and limiting because no single risk factor on its own leads to poorer outcomes. Research shows that risks are cumulative and their impact on children and young people vary depending on the child’s age, type of risk and length of exposure: the younger children are the more vulnerable they are to environmental risk; the longer children are exposed to environmental effects and risks, the more additional risk exposures accumulate and the greater the likelihood of later adverse outcomes; and the more severe the adverse experiences, the more damaging they are.

For the purpose of the Commissioner’s work, children and young people’s vulnerability is identified as arising from multiple experiences of adversity and exposures to harm (biologically and/or in the environments in which they are being raised), and their limited access to and use of resources that support them to cope with and recover from this adversity. However, it is important to recognise that children and young people are active agents in how their life experiences play out. It is essential they are supported and given opportunities to make meaningful choices about their lives.

Furthermore, not all children exposed to adversity and harm experience detrimental consequences; understanding why some children and young people do well despite serious hardship can inform more effective policies and programs to support families and children who are vulnerable. Research in the field of resilience has identified a range of factors to explain why some children have a positive, adaptive response in the face of significant adversity. The common finding is that these children have at
least one stable, caring and supportive relationship with a parent, caregiver or other adult. These relationships provide the personalised responsiveness, support and protection that buffer children from developmental disruption. They also build key capacities, such as the ability to monitor and regulate behaviour, and adapt to changing circumstances, which enable children to respond to adversity and to thrive.

There are other environmental, social and biological factors that also support children’s positive, adaptive capacities in response to adversity. These include: having a sense of agency over their life circumstances (believing in their own capacity to overcome hardship), having strong executive function and self-regulation skills to manage their own behaviour and emotions, and being grounded in strong cultural traditions.

“I think… ’cause a lot of kids never got chances and that’s why when they grow up they never give someone a chance. It’s just what I see. People that never forgive and forget will never be happy. If they can overcome and see that and see who they really are then they can make a better future for themselves and for everyone else.” 17 year-old (Youth Justice Consultation)

When exposed to adversity, children and young people’s coping strategies may lead to positive responses that strengthen their wellbeing, or they may result in harmful behaviour and actions that lead to poorer outcomes and diminished life prospects. Understanding the elements that enable children’s positive, adaptive capacities in the face of adversity provides an opportunity to improve current policies, services and supports to reduce children’s exposure to adversity and to design more effective approaches to build their coping skills and the skills of people who support them.

**Trajectories of vulnerability**

“I hate my last name because of my Dad and I don’t want my Mum’s last name because I don’t want to have to carry on their name. But I just feel like that I have their last name and because they are my parents that I am going to turn out like them, that I am going to have a horrible life and that I am going to be as horrible as they are.” 13 year-old (Out-of-Home Care Consultation)

Vulnerable children and young people often experience significant disadvantage and trauma in their early years, which sets them on a pathway of cumulative harm. If home, school and community environments do not offer the stability, safety and support these children and young people need to overcome such challenges, they often seek a means of escape that can lead to drug and alcohol use, mental health problems, school exclusion, homelessness and criminal behaviour. As they accumulate new traumatic experiences along this trajectory, opportunities diminish, they become further marginalised and their disadvantage deepens.
In the absence of appropriate resources and opportunities at the right time to support vulnerable children and young people, the likely outcomes of these trajectories include: sustained homelessness; multiple placements in out-of-home care; repeat involvement with youth justice; suicide or permanent injury following risky behaviour; entrenched vulnerability to abuse and neglect; and early parenthood without adequate parenting capacity or preparedness for adult life (possibly resulting in the removal of the child). This ultimately perpetuates the cycles of disadvantage.

Experiences of poverty, disadvantage and social exclusion can form a cycle within families described as the intergenerational transmission of disadvantage. This occurs when the hardship faced by children early in their lives impacts their development and their carers have limited capacity to alleviate this, which further reduces children’s hopes and aspirations. This leads to poor outcomes and opportunities later in their life that, in turn, hinder their own capacity as parents to give their children the best start in life. It can therefore be a major challenge for children and young people to move beyond the social and economic circumstances they are born into.

“The whole reason why they took us off our family was because we feel unsafe, we don’t feel much protected, there’s no food, and we’re not getting clothes... we’re not getting anything. It’s not better either way: living with our family, living with DCP, government homes... or living on the streets... it’s not good anywhere. It’s like a big trap... we end up getting in trouble by the law and then we just go to prison, and we just get trapped, it’s like a big circle trap. That’s how it’s been in my life personally. I think it’s like that for hundreds of kids out there. It’s just a big trap game. It’s never going to change unless they do something about it.” 17 year-old Aboriginal young person (Out-of-Home Care Consultation)

“They seen it [criminal activity] all their life, like I did. Their whole family has been through it for years and years and it just gets passed on down and down so yeah. It’s pretty stuffed up. When you see it, well you want to try it in the future. And then you get hooked onto it.” 17 year-old (Youth Justice Consultation)

“How the hell are you supposed to get somewhere if you don’t have anything or anywhere to go? I feel trapped.” 13 year-old (Out-of-Home Care Consultation)
However, there are multiple points along these trajectories at which the right support and interventions can interrupt the cycle of disadvantage. This is where focus and investment must be prioritised to provide opportunities, nurturing environments and long-term support to enable vulnerable children and young people to break free from the cycle and lead healthy and productive lives.

**Cycle of disadvantage and opportunities for intervention**
The need for different approaches to address vulnerability

“Kids need more support. Lots of people want to change their life, but it’s really hard, you know?” 16 year-old (Youth Justice Consultation)

“But the people who are meant to be professional are not helping you. They are not helping you either way. They always claim that they are helping you but they are not helping you.” 17 year-old Aboriginal young person (Out-of-Home Care Consultation)

Despite significant public investment in support services for children and young people and their families, those who face significant adversity and disadvantage continue to experience poorer outcomes. Emerging research suggests a mismatch of resources to need whereby an estimated one in five (20%) of the most vulnerable children and young people in a society do not receive any help from intensive support services.\(^4^7\) Rather, the majority of children and young people who do receive intensive support services are not those in greatest need.\(^4^8\) Some children and young people identified as being most vulnerable receive help from civil society (including family, neighbours, mentors) however, an estimated one in 20 receive no support at all (from services or society).\(^4^9\)

This points to significant inefficiency in matching services to need, which is allowing children and young people who are most vulnerable to fall through the gaps. As a consequence, the community carries a high burden of providing the support these vulnerable children and young people need but are not receiving. In order to advance the discussion on how to most effectively focus policy and resources investment to create supportive environments and opportunities for vulnerable children and young people in WA, we need to identify why and for whom current efforts are not working and the approaches needed to maximise positive outcomes.

Current challenges in addressing vulnerability

There are key ongoing barriers and challenges hampering the delivery of effective prevention, support and intervention responses to meet the needs of vulnerable children and young people.

“I have ideas and dreams but I can’t do that on my own because I don’t have that support and I don’t have the help I need right now and it’s hard.”
15 year-old (Out-of-Home Care Consultation)

“There’s a lot of services out here to help people but I wasn’t really exposed to these services except for like the chaplain at school but I never really talked to them ‘cause I thought I could manage everything by myself but that didn’t turn out so good.” 16 year-old, Uganda (CALD Consultation)
Inequitable access to early childhood education and care

Attendance in high-quality early childhood education and care has a positive influence on young children's cognitive, social and emotional development, especially for children from disadvantaged backgrounds. Yet data from the Longitudinal Study of Australian Children identifies that children with multiple indicators of disadvantage are less likely to use preschool and use fewer hours of care than their more advantaged peers. Therefore many of the children and families for whom early childhood education and care could provide the greatest benefit are not accessing this important childhood development opportunity. Barriers to access can include availability of services and programs (for example, lack of infrastructure in regional remote areas), cost and cultural safety, to name a few. It is essential to develop strategies that not only minimise or remove these barriers, but to also ensure such strategies and interventions do not exacerbate inequities and instead address underlying causes of disadvantage and target families and communities most in need.

“Go to school, get a good education, get a good job and then you’ll be free.”
10 year-old (ATSI Consultation)

Missed opportunities for early identification

Early identification of vulnerability among children and young people and families is critical in order to target strategies that prevent risks from escalating and accumulating. Without early identification, children and young people may continue on trajectories of vulnerability where they are exposed to further harm to their wellbeing, and require the involvement of tertiary services.

“Nobody would confront me about how I’m feeling, ask, be there, just sit with me, let me have a chat. Nobody would reassure me that I’m not on my own.”
15 year-old (Out-of-Home Care Consultation)

“It was hard for me living with depression and not getting the regular support I needed because I didn’t know where to go or where to turn.” Young person (Mental Health Consultation)

“When I went to school it was mainly to get away from [home]. So when I was at school for any of the time, I would side track myself, I wasn’t actually learning. I wasn’t in class to learn. I was just sitting there in class or just hanging around the school. I was at school but I wasn’t actually there. When I did go to class I found the teachers weren’t supportive. I never had clean clothes or lunch. I couldn’t concentrate and was always crying a lot. They were just angry that I wouldn’t turn up at class or when I’d leave there was just a lot of anger towards me. Everything was presented as though I was being naughty. Looking back, it was presented as “you’re a naughty child” when really I think I just needed some help, some support.” 20 year-old (Out-of-Home Care Consultation)
Holistic responses to children and young people’s life circumstances

Supports and interventions that do not address the home, school and community environments in which children and young people live are unlikely to be effective or sustainable. Family, school, culture and peers exert significant influence on children and young people and therefore must be incorporated into responses to achieve better outcomes for children and young people.

“Well I used to live with my mum, say you are referred to an agency and then they send you to rehab, and you’re clean and then you still got to go back home where they are drinking and smoking that’s what I mean you just can’t go and say look he’s a kid on the radar, he’s the one that did the crimes, he’s the one you need locking up, but when he gets out the drinking and smoking are still there, egging you on to go steal, go steal a drink or go steal this come back with a list of things to do, so you gotta work with the whole family, not just the young people as well, you can’t expect to change them ‘cause it’s the family’s behaviour not just theirs.” 17 year-old (Youth Justice Consultation)

Services are not adequately resourced to address complex needs

Services may lack the resources or skillsets to provide the intensive therapeutic, relationship-based care required to meet the complex needs of vulnerable children and young people. They may have limited capacity to provide support for the underlying causes of vulnerability (such as trauma and family dysfunction), particularly if their scope can extend only to the presenting issues. This in turn can reduce the impact and effectiveness of the intervention provided.

“We need age-appropriate services. To provide safe places for kids to go so they are not bored and where support is available. In [my town] there is nowhere like this.” 15 year-old (Mental Health Consultation)

Poor collaboration and integration of support services

The structure and funding of support systems often creates fragmented, poorly coordinated delivery of prevention and intervention services to vulnerable children and young people. The multiplicity of intervention services that often do not communicate or collaborate with one another can be overwhelming for young people and their families, and they may disengage from services altogether from despair or genuine confusion about what service to access and when.
“You know how [my son] is involved with justice system, so you have Corrective Services or whatever generally for education, housing and DCP, that’s a bit confusing but there’s like 20 different people every day. Well maybe there could be a service that’s involved in that area, where they can get one person to deal with that family and their issues, and have one person allocated to that family… and communication can be done by that one person because it does get overwhelming.” Mother (Youth Justice Consultation)

These comments from a mother whose son is involved in the youth justice system is a compelling example of the way the current structure of the service system in WA can make it extremely difficult for vulnerable young people and their families to navigate and access the support they need.

**Cultural safety**

Programs and services must be culturally safe to be effective in improving outcomes for Aboriginal and CALD children and young people. Strong cultural identity is associated with increased self-esteem and resilience, and is recognised as an important determinant of wellbeing for Aboriginal children and young people.53,54 Strategies must incorporate opportunities to strengthen elements of Aboriginal identity such as culture, sense of self, language and family relationships55, and harness the strengths of Aboriginal communities to engage with and provide safe, nurturing environments and holistic care to their vulnerable children and families.56 CALD children and young people’s access to support could be improved through more culturally-sensitive services with bicultural and bilingual staff, provision of multilingual information and engaging CALD community leaders to mentor and support children and young people in their communities.57

“Allow more opportunities for different cultures to be learnt about and understood.” 17 year-old, India (CALD Consultation)

“Make schools for black kids ’cause we learn different to Wadjellas [non-Aboriginal people]. We think different, a school where Wadjella kids could come too, so we can share our ways and teach them... I would bring language and culture back first. We need that to be strong to feel important and then we can learn the other stuff. The other stuff will be easier for us to learn once we know our own way. Because we [are] always walking around lost like we missing something. And that’s what I think it is.” 13 year-old Noongar young person (ATSI Consultation)

“...like in Fitzroy Crossing you have got Elders, if you have got young people do[ing] something wrong, it’s the Elders that respond to that, the culture and the lore is really strong there. They need to practice more culture. They gotta be there for the kids and teach ‘em the right ways.” Mother (Youth Justice Consultation)
“Well I think if you’re going to have psychologists, they should probably teach them more on how to approach students from different backgrounds.”
18 year-old, Zimbabwe (CALD Consultation)

“Well, I think if you’re going to have psychologists, they should probably teach them more on how to approach students from different backgrounds.”
18 year-old, Zimbabwe (CALD Consultation)

“Culture is important, because I have a very spiritual connection with Aboriginal culture and it helps me as a person.” 16 year-old Koori young person (ATSI Consultation)

Identifying the barriers to effective responses to address vulnerability in children and young people highlights the opportunities for improvement and emphasises the importance of placing the needs of these children and young people and their families, and the role of cultural identity, front and centre in the discussion on achieving positive change.

Maximising effective responses to vulnerability

Early intervention and prevention

Evidence overwhelmingly shows the most effective approaches to optimise children and young people’s development and wellbeing are prevention (preventing problems and identifying needs through universal services) and early intervention (targeted, intensive support for those in need).58

As described earlier in the paper, children’s early experiences of adversity and stress can be detrimental to their development. In order to be most effective, programs and services must target the causes of this adversity, such as poverty, family dysfunction and mental health issues, to prevent harm to young children and the lifelong problems with learning, behaviour and health that can follow.

This requires proactive models of engagement that focus on the very young within families and define risk groupings based on multiple risk factors (rather than a single risk factor) to help target strategies that provide timely, cost-effective intervention services to children and families who are most vulnerable.59

“I need help to get everything in my life straight.” 10 year-old (ATSI consultation)

Intervention points

Understanding the most effective intervention points to positively impact children and young people’s development and wellbeing is valuable in directing resources for maximum benefit. Research evidence highlights three priority intervention points as: the antenatal period (through high quality antenatal care for mothers); infancy and early childhood (0-3 years); and preschool (4-5 years).60 After this early childhood period, there are also key transition points, or times of change, which provide opportunities to target interventions so they are most effective in supporting children
and young people away from risk towards positive pathways. These include the start of primary school, the start of secondary school and the period immediately after secondary school. At these key intervention and transition points, investing in cost-effective strategies shown to have the greatest impact on wellbeing outcomes, especially among vulnerable children and young people, is essential.

“Feeling alone and isolated can be a major contributor to ill-health in teens, especially queer teens. Proper education helps us feel less alone.” Young person (Youth Health Consultation)

“When I tell an adult about a problem I want them to understand and listen to what I say and believe me.” 10 year-old (Child Safe Organisations Consultation)

Building the capabilities of parents and families

The families children and young people grow up in are indisputably one of the most influential factors in their lives. Features including parental–child attachment, positive parenting, family stability, social support, parents’ knowledge about child development, family traits and practices, including cohesion, belief systems, cultural identity, coping strategies and communication patterns play a pivotal role in shaping children’s development.

“Family things are important as they give you good memories, role models, a safe home and support.” 15 year-old (ATSI Consultation)

“I think that every kid should be treated like other kids that have parents. They should be able to be like other normal kids. And they should not stop them from seeing their family no matter what. They are your family and sometimes they are the only family you have and so if they stop you from seeing them you are going to have some pretty pissed off kids because they are your family. You love them. You want to spend time with them ‘cause you don’t get to see them every day.” 13 year-old (Out-of-Home Care Consultation)

“My dad says, ‘oh yeah if you have any problems talk to me’ but you can’t talk to him because he has no useful information… he is so judgmental as well.” 15 year-old (Wellbeing Consultation)

Optimising the environment children grow up in is therefore critical in supporting them to reach their potential. This involves building the capacity and capabilities of caregivers and strengthening their resources, which requires more than giving them information and advice; it also requires active skill building through coaching, training and practice.

A critical early intervention strategy to support this is the provision of accessible, subsidised, high quality early childhood education and care. Strong parental and
community involvement in early childhood education and care is important and can be delivered alongside more intensive tailored support, with home visiting for families identified as vulnerable.65

"Before they go to the homes, to all the residential places, work with the kids and their families first to try and build them up before they, you know, look to other alternatives." 17 year-old Aboriginal young person (Out-of-Home Care Consultation)

"...like in Fitzroy Crossing you have got Elders, if you have got young people do[ing] something wrong, it’s the Elders that respond to that, the culture and the lore is really strong there. They need to practice more culture. They gotta be there for the kids and teach ‘em the right ways.” Mother (Youth Justice Consultation)

Intensive support, both informal and formal, for caregivers is needed to build this capacity, particularly among vulnerable families who must regularly cope with adversity. Supportive community attitudes, practical and social support from extended family, friends and community, timely information about child development and parenting issues, and access to quality programs, services and facilities are all crucial components.

Enabling supportive relationships

Relationships are crucial to mitigate the negative impact of experiences of harm and adversity.66 For children and young people who experience significant disadvantage and adversity, a purposeful, healthy, trusting and stable relationship with an adult can be the circuit breaker that disrupts their trajectory of vulnerability and creates a pathway for positive change.67,68

“Well first of all they should build relationships, bonding with the kids. They should take an interest in what the kids like and want to do and stuff like that. But after that they should help the kids you know, become independent people.” 17 year-old Aboriginal young person (Out-of-Home Care Consultation)

The characteristics of workers who engage with vulnerable children and young people (including teachers, support service staff and health professionals) are therefore pivotal and have been clearly described by young people in the Commissioner’s consultations. These include treating young people with respect, building trust, demonstrating they are genuinely interested and being responsive to young people’s needs. Their views can be used to inform efforts to build stronger relationships between workers and children and young people, and make support services more engaging and accessible, and ultimately achieve better outcomes for children and young people.
“[The youth crime intervention officer] is moorditj (good)... He just cares. He sees where we’re coming from. He sees how hard it is. He sees how life can be. He has eyes to see where we are coming from, like family issues and what not. So he has helped us out.” 16 year-old (Youth Justice Consultation)

“Having a peer mentor, someone you can form a relationship with, and who has been in care and you can get to know, build that relationship with and trust. And you can disclose to them and open up to them and they can be your support to go further, like to be in your corner, meeting with your case worker. Don’t necessarily have to have had the care experience, someone who is happy to step up and be a mentor for a young person and make them feel like they’re not alone and matter, and one-on-one, will see you and hang out with you.” 24 year-old (Out-of-Home Care Consultation)

“Good people just know how to get on the kids’ level, help them... but don’t pretend that you’re trying to get along with them, just do get along with them, you know? You don’t pretend it. [It’s] just respect.” 17 year-old (Youth Justice Consultation)

“First time I went to a psych, they said to me ‘this is the first week, we don’t even have to talk about what your mum wants us to talk about, let’s just talk about your week. Let me get to know you, let you get to know me.’ Often people need an initial breakdown of their barriers before they can let you in.” Young person (Youth Health Consultation)

Some young people who have experienced significant adversity and instability in their lives also describe the impact of lacking supportive relationships with adults, or the difficulty in establishing trust, which is essential to these relationships.

“It is not like you have a permanent case worker, they get changed all the time. It is hard to build a relationship with them, anyone really. If you can’t tell your case worker what is going on, who can you tell?” 17 year-old Aboriginal young person (Out-of-Home Care Consultation)

“The children... don’t like going to school because they know that there are people in the school that are just there to work and make money. They can tell when people don’t care about them.” 17 Year-old Banyjima young person (ATSI Consultation)

“A lot of the time they would say they were going to do something but they would never follow up and would make promises but never do them.” 24 year-old (Out-of-Home Care Consultation)
Workers often experience barriers to building consistent, supportive relationships with children and young people due to caseloads, lack of training, administrative tasks, time constraints and fear of accusation. Therefore, systems must include mechanisms that encourage and enable staff to develop the skills and allocate the time required to effectively engage with children and young people and build positive, constructive relationships. For example, in recruitment and selection processes, criteria could include personal characteristics that identify the value candidates place on developing positive, respectful relationships with children and young people and demonstrate their interpersonal skills to do so. Ongoing training and professional development, and strong and supportive leadership within organisations, can also enable workers to invest their time in further developing and maintaining relationships with the children and young people.

The outcomes children and young people deserve

It is evident we can and must do much better in addressing the causes of vulnerability and support children and young people to reach their potential. There is no stronger impetus for government, organisations and communities to stop and reflect on how to improve than hearing children and young people speak about their hopes and ambitions to create a positive future and articulate the support they need to achieve this.

“I want a life for myself and I want a job when I get out of [Banksia Hill] ‘cause I’m sick of it. Like, this life we live is not sustainable, if you get what I mean. Like, we can’t keep going the way we go. You can’t keep on doing crime, ‘cause this is the way we end up, in here... we’re all young still and got time. I have a lot of time.” 17 year-old (Youth Justice Consultation)

“Support from my family and mentors to help me get my AFL dream because I’m halfway there and I can’t stop now.” 15 year-old Unggarangi/Bardi young peson, Kimberley (ATSI Consultation)

“To be able to accept who I am with my [health problem] and I want people to not define me by it and I want them to see who I am, even though I am different, I want to be successful and have really good lifelong friendships and just a general happy life.” 14 year-old (Wellbeing Consultation)

“I feel like I’ve settled really well in Australia, even though my background was really different and I couldn’t really understand anything. Definitely I feel positive about my future. I’m an optimist. Every time I can think back to when I was in Iran it just makes me feel so lucky that I have the opportunity to go to uni, to pursue whatever study I want to do, to do what I want to do. So I definitely do feel positive about my future and I definitely would like to think that the future has really good things waiting for me.” 16 year-old, Iran (CALD Consultation)
Despite the adversity these children and young people experience, they demonstrate remarkable resilience to overcome barriers and pursue their goals. However, we must not expect their personal resilience alone to carry them forward; children and young people need effective systems of support, that draw on their individual strengths to meet their needs.

“The only way you’re going to change your future is by doing something about it now. Be positive about it. Or if something goes wrong, try smile about it. I just don’t pay attention to that stuff anymore. I’m just trying to be positive nowadays. Yeah I get mad but I just try to be positive, look on the bright side of things. It’s not like life is going to go bad for you all the way.”
15 year-old (Out-of-Home Care Consultation)

“You just learn to move on and be happy about life and not hold grudges, and it works. Life is good. Just continue being positive.” 21 year-old (Out-of-Home Care Consultation)

“I might get a job and that…I might go back to school when I get out and finish year 12…I just wanna be a good dad to my baby and get a job as a diesel mechanic. I don’t wanna come back here [in Banksia Hill] that’s for sure!” 16 year-old (Youth Justice Consultation)

“I reckon [going into care] was the best thing that’s ever happened to me because if I didn’t go through that I wouldn’t be here right now and be as brave as I am. I have got this saying and I say it to myself every single day “I am not a failure until I fail. We fail so very often but we are not a failure until we give up.” 12 year-old (Out-of-Home Care Consultation)

“Yeah at the moment it’s looking pretty bright…I’ve got my son who turns one in a week…yeah, he’s just started walking. I’ve got to finish up my order and then I’ll be right.” 16 year-old (Youth Justice Consultation)
Addressing the challenges

This paper seeks to challenge current thinking on vulnerability and highlights that the needs of the many children and young people who face adversity in our community are not being met and continue to experience poorer outcomes.

The Commissioner for Children and Young People will work with government agencies and community organisations during 2018 to advance the conversation on what must happen to address the complex causes and outcomes of vulnerability.

To support this work, the Commissioner proposes the following set of questions to encourage and facilitate reflection and discussion.

These questions can contribute to more effective responses to ensure all children and young people are expected to reach their potential and make meaningful choices about their lives, and are provided with the opportunities to participate socially, economically and civically.

Understanding vulnerability

- What does vulnerability mean?
- What are the multiple, complex issues that cause vulnerability and what is the cumulative impact of adversity?
- How is vulnerability measured?
- For whom are services working and not working, and why?

Delivery of support services

- What needs to happen to ensure children and young people have their views genuinely listened to and can meaningfully participate in the planning, design and evaluation of services and supports?
- How should services be designed and delivered to ensure they are addressing the underlying causes of adversity and vulnerability?
- How can families and communities be more involved in supports and services to enhance their effectiveness for children and young people?
- How can services operate at a more local level and be tailored to, and connect with, the physical, social, economic and geographic environment in which children and young people are living?
- What processes need to be in place to ensure the people who work with children and young people:
  o Have the skills and understanding to effectively support children and young people and help them reach their potential?
  o Are enabled to develop trusting, respectful and stable relationships with children and young people?
Aboriginal children and young people

- What needs to be done differently to prevent the significant adversity and poorer outcomes experienced by Aboriginal children and young people?
- How can Aboriginal-led solutions for the issues impacting Aboriginal children and young people be enabled?
  - How can this be resourced?
  - What governance is required to support this to operate effectively?

Taking action for change

- What change do we want to see for vulnerable children and young people in WA?
- How do government and non-government organisations need to work together to more effectively support vulnerable children and young people?
- How can community action be mobilised to more effectively support vulnerable children and young people?
- How can long-term outcomes of the impact of services and supports on children and young people be measured?

Conclusion

The voices of Western Australian children and young people consulted across ten years of the Commissioner’s office provides a compelling insight into what helps and hinders their development and wellbeing, the cumulative effects of disadvantage and the complex interplay of factors that shape their lives. This paper challenges current thinking on factors that influence vulnerability for children and young people and serves as a catalyst for further discussion on effective approaches to address the causes of adversity.

Creating safe, nurturing environments and providing the resources, support and opportunities for vulnerable children and young people to reach their potential is a collective responsibility of government, the non-government sector and communities. We must continue to work together to address the challenges facing children and young people identified as vulnerable and deliver effective strategic responses.
References


8 Center on the Developing Child at Harvard University 2016, From Best Practices to Breakthrough Impacts: A Science-Based Approach to Building a More Promising Future for Young Children and Families, Harvard University, Cambridge.


18 Harris A 2017, *Trauma, young people and juvenile justice*, Australian Child & Adolescent Trauma, Loss & Grief Network, Australian National University, Canberra.


29 Australian Government 2009, A Stronger, Fairer Australia, Social Inclusion Unit, Department of Prime Minister and Cabinet, Canberra.


32 Australian Government 2009, A Stronger, Fairer Australia, Social Inclusion Unit, Department of Prime Minister and Cabinet, Canberra.


36 Moore T 2006, Early childhood and long term development: the importance of the early years, Centre for Community Child Health, Murdoch Children’s Research


Community Child Health, Murdoch Children’s Research Institute / The Royal Children’s Hospital, Parkville.


52 Bambra C 2018, First do no harm: developing interventions that combat addiction without increasing inequalities, Addiction (Early View), DOI: 10.1111/add.14116.

53 Department of Aboriginal Affairs 2015, Discussion Paper: Culture and the design and delivery of programs and services for Aboriginal young people, Department of Aboriginal Affairs, Perth, Western Australia.


56 Secretariat National Aboriginal and Islander Child Care 2015, Pathways to safety and wellbeing for Aboriginal and Torres Strait Islander children, SNAICC.


Infographic references

Children with disability are 3 times more likely to experience maltreatment than children without disability


1/3 of children are developmentally vulnerable at the start of their first year of full-time school

This statistic is based on the 33,816 children in WA included in the 2015 Australian Early Development Census. Children included in the AEDC are at the start of their first year of full-time school. The median age of children included in the 2015 AEDC in WA was five years four months.
AEDC domains are: physical health and wellbeing; social competence; emotional maturity; language and cognitive skills (school-based); communication skills and general knowledge.


**7% of children and young people are living in poverty**

Approximately 43,985 (7.2 per cent) of all children and young people in WA under the age of 15 years are living below the 50 per cent poverty line (standard poverty measure), while approximately 18,574 (3 per cent) are living below 30 per cent of median income (severe or ‘deep’ poverty measure).


**1 in 5 students is disengaged from school at some level**


**727 children and young people are under youth justice supervision (community and detention) on an average day; 66% are Aboriginal and 33% are Non-Aboriginal**


**4,795 children and young people are in out-of-home care; 54% are Aboriginal and 46% are Non-Aboriginal**


**Over 600 young people (15 to 24 years) presented to homelessness agencies in 2015-16**


**LGBTI young people are 5 times more likely to attempt suicide than their peers of a similar age**
Aboriginal children and young people are 9 times more likely to die by suicide than non-Aboriginal children and young people

The suicide rate in WA for Aboriginal children and young people is 18.0 per 100,000. The rate for non-Aboriginal children and young people is 2.0 per 100,000.

Australian Bureau of Statistics 2017, *Table 11.12 Intentional self-harm, Number of deaths in children aged 5-17 years by Aboriginal and Torres Strait Islander status, NSW, Qld, SA, WA and NT, 2012-2016*, Cat. 3303.0, Causes of Death Australia 2016.