The Mental Health and Wellbeing of Children and Young People in Western Australia

A Submission from

The Smith Family

to

Commissioner for Children and Young People, Western Australia

November 2010

About The Smith Family

The Smith Family, a national, independent children's charity, works in partnership with other caring Australians to help disadvantaged Australian children and their families.

At the centre of our work, and the heart of our organisation, is our belief in the power and possibilities of relationships. For disadvantaged children to thrive, many of whom are growing up in lone parent and jobless households, they need to be connected to, and supported by, an extended family. Our work in 95 communities is extended and enhanced by the more than 21,000 members of VIEW Clubs of Australia together with 6,500 volunteers from the community and our corporate partners, who volunteer their time and energy to ensure we reach children in need.

As research has shown supporting children's education and learning is one of the most effective means of breaking the cycle of disadvantage and ensuring all children have an equal opportunity to realise their potential. That's why we focus on linking disadvantaged children with education opportunities and support, and connecting them with those Australians who have the capacity, skills and resources to help.

Our literacy and mentoring programs, under the banner of *Learning for Life*, are informed by research and made possible through our network of strong partnerships with other organisations and individuals working towards our vision of a more caring and cohesive Australia. The programs are based on the ethos that providing support through education gives disadvantaged children the step up they need to go on and achieve their goals as adults. *Learning for Life* supports not only children but also their families and communities, who provide the crucial nurturing relationships and supportive learning environments a child needs, particularly during their important first five years of life.

Today more than 65,000 disadvantaged children and young people are receiving our support through the vulnerable transition points in their development, such as moving from home to primary school and from school to further study or workforce entry. Our nationwide network of *Learning for Life* workers link children with emergent literacy and numeracy programs in their early years, and as they grow up, with comprehension, digital, financial, health and emotional literacy programs, so that they can develop the skills and capacities they need for their journey through life. The programs are enabled through mentoring and tutoring and students also receive financial assistance for essential school expenses such as uniforms, books and excursions.

Parents, too, have access to The Smith Family's ever-expanding set of resources, which include parenting education and skills development opportunities to help them raise their children and participate more fully in society themselves.

For more information on The Smith Family, please visit www.thesmithfamily.com.au

The Smith Family's Submission

The Smith Family welcomes the opportunity to respond to the Western Australian Commissioner for Children and Young People's Inquiry into the mental health and wellbeing of children and young people.

The Smith Family would like to applaud the Commissioner for raising community awareness of the mental health and wellbeing of children through this inquiry and notes other positive steps recently taken in Western Australia in this area. These include:

- The recent *Economic Audit Report* highlighting three critical areas to address (Early Childhood, Mental Health and Homelessness). The Smith Family supports the proposal to develop three collaborative projects to address each area and in particular the inclusion of the non-government sector contributing to the project outcomes. The Smith Family has representation on the Early Childhood Collaborative Project.; and

- The recent appointment of the first Western Australian Mental Health Commissioner (Mr Eddie Bartnik) in August 2010.

This submission will outline key points arising from The Smith Family's experience of working with disadvantaged children and young people in over 95 communities across Australia including 9 in Western Australia[1].

At present, we have 2,620 students participating in The Smith Family's suite of *Learning for Life* programs across Western Australia. Today, Mirrabooka and Kwinana *Communities for Children* sites collectively support the participation of over 6,000 children aged between 0-5 years and their parents, with these numbers now increasing as the *Communities for Children* model has expanded to encompass the 6-12 age group under the Australian Government's new 'Family Support Program'.

It is through our experience in working with disadvantaged families and communities that The Smith Family wishes to contribute to a discussion about the mental health and wellbeing of children and young people in Western Australia.

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[1] Including Kwinana; Altone; Midland; Mirrabooka; Collie; Hedland; Karratha; Albany; Gosnells; and Esperance

1. The Importance of a Prevention Focus

It is well recognised that the more favoured people are economically and socially, the better their health and similarly, people living with disadvantage are more likely to experience poor physical and mental health[2]. These socio-economic inequalities in health can be explained by people's access – or lack of access - to resources starting from birth, as they develop as young children, grow into teenage years and adulthood and live into old age.

The unequal distribution of money, power and resources shape the material and social circumstances in which we live – such as our access to healthcare, schools, higher education, conditions of work and leisure and housing and community resources. As such, the mental health and wellbeing of young people should not be considered in isolation from the impacts of social and financial disadvantage. An example of this connection is highlighted in a recent which shows, that living in a jobless family increases the probability that a child will have behavioural problems by 13.0 percentage points, conduct problems by 13.4 percentage points, peer problems by 7.6 percentage points, emotional problems by 7.5 percentage points and hyperactivity by 7.2 percentage points[3].

Furthermore, the risk factors for perpetuating disadvantage begin in a child's first years, when poor early childhood experiences lead to a difficult transition from home to school (where most disadvantaged children start their formal education up to two years behind their peers); a lack of motivation / skills to learn that in turn hinders their literacy and numeracy development, reduces their likelihood of attaining relevant qualifications and increases their risk of dropping out early. Without being able to compete for jobs on an equal footing to their more advantaged peers, early school leavers are more likely to join the ranks of the long-term unemployed, which then completes the cycle in reducing their later capacity as parents to provide supportive home environments for their kids.

Kids need to grow up in an environment that is loving, learning and nurturing; however, many parents have not themselves had these parenting behaviours role modelled for them by their own parents. This means that despite best intentions, the lack of opportunity to learn these behaviours can result in a perpetuating cycle of disadvantage and poor health and wellbeing outcomes.

Case Study: Promoting mental health and wellbeing through family fun days – Kwinana, WA

On 30 October 2010, The Smith Family facilitated a community event in partnership with the Town of Kwinana targeting young people and their families in the Kwinana area. The event provided activities for families such as sports, arts and music. The activities were combined with displays and a Chill-Out tent to support young people and their families in Kwinana to have a greater understanding of mental health issues and promote positive life style choices regarding education, health and community participation. This event aimed to address some of the local issues directly relating to young people in Kwinana including mental health, truancy, low education levels and a higher than state average unemployment rate.

The Smith Family also handed out 2000 Music Feedback CD's produced by the Department for communities and Mental Health Commission at the event, along with other promotional material donated by 'Beyond Blue' and other mental health providers to encourage young people to talk about mental health issues.

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[2] Brown L. and Nepal B. (2010) *CHA – NATSEM Report on Health Inequalities*, Canberra, Australia
[3] Taylor M., Edwards B. and Grey M. (2010) *Unemployment and the wellbeing of children aged 5 to 10 years*, prepared by the Australian Institute of Family Studies for The Benevolent Society, Sydney Australia.

In Western Australia currently, many children have difficulty accessing mental health services and in particular the services of clinical psychologists. Anecdotal evidence suggests that there is a 12 month waiting period for clinical psychologists in some areas. Also the stigma attached to mental health means that parents are often unwilling to ask for help. Research also demonstrates that the key protective factors against mental health issues are individual competence and social skills, social support and relationships and involvement in community and school cultural and recreational activities[4] - it is key that a preventative approach to the mental health and wellbeing of children and young people should be given primary consideration. For although not all children will need tertiary services, it is important that children and families have access to the right support at the right time in the right place.

Furthermore, this approach should acknowledge that:

1. Mental health and wellbeing is formed by early childhood experiences and adequate attention to the early years can have a substantial impact;

2. The mental health and wellbeing of children and young people can be reinforced by providing them with the skills and capacities to 'bounce back' from adversity; and

3. The need for an integrated and coordinated service system.

These points will be explored below and followed by a discussion of positive approaches that have the potential to strengthen the mental health and wellbeing of children and young people.

2. The importance of the early years

The first few years of a child's life are absolutely critical in providing the developmental foundations for their health and wellbeing as adults. Longitudinal studies such as the Adverse Childhood Experiences Study[5] have found strong associations between the experience of multiple instances of traumatic or abusive childhood events and an extensive array of conditions that develop later in life that don't just include physical health issues such as cardiovascular disease, chronic lung disease, and cancer but also depression, alcoholism and drug abuse. We also know that people who have had more adverse childhood experiences have substantially greater risks for developing life threatening psychiatric disorders, overlapping mental health problems, teen pregnancies, obesity, physical inactivity and smoking.

To quote from from the Centre on the Developing Child at Harvard University report, *The Foundations of Lifelong Health Are Built in Early Childhood*[6]:

> *'Experiences are built into our bodies (for better or for worse) and significant adversity early in life can produce physiological disruptions or embedded biological "memories" that persist into adulthood and lead to lifelong impairments in both physical and mental health.'*

The quality of relationships that a child enjoys with their parents/caregivers within the context of their family and environment as promoted through the ecological model, impacts on the development of

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[4] National Children's Alliance. (2005). Middle Childhood Matters: Towards an agenda for 6-12.
[5] Center on the Developing Child at Harvard University (2010). *The Foundations of Lifelong Health Are Built in Early Childhood*. http://www.developingchild.harvard.edu
[6] Ibid

children during the early years. The *sooner* a child receives access to healthcare, intellectual and social stimulation and guidance from loving and attentive adults, the more likely that child will grow up to be happy, healthy and productive. As such, the first and most influential role models of future generations are parents who can sow the seeds of positive healthy behaviours and attitudes from the pre-natal period well into their children's teenage and adult lives.

Children who are not ready to learn tend not to do as well in school and are more likely to have mental health problems, become teenage parents and engage in criminal activities. Ultimately, they tend to have lower educational levels on leaving school and are more likely to have poor employment records in adulthood which perpetuates a cycle of disadvantage. The quality of the home environment is particularly important for the development of emergent literacy, language and social/emotional skills. Without these skills, children can find the transition from home to school very difficult. Today, large numbers of disadvantaged children begin their first day of school developmentally some years behind their more advantaged peers for precisely this reason, and research has shown that in many instances these gaps widen as they progress through primary and secondary education.

Parents require targeted support to utilise effective parenting techniques as well as to engage with their children in local educational and social activities. Clearly, building the capacity of parents to understand and respond to their children's developmental needs during the formative early years is absolutely critical to the nurturing of pro-social skills in their infants.

The mental health and wellbeing of children and young people must also be considered within the context of providing comprehensive and consistent support in a number of settings. A 'whole of community' approach where parents and carers, teachers, and the myriad of professionals in the wider community provide 'wrap around' support for children and their parents can assist in building their capacity to 'bounce back' from adversity. Policies and interventions that provide opportunities for closer links between families, schools and local communities to promote healthy relationships are important. Integrated service delivery models can provide the opportunity to improve the mental health and wellbeing outcomes for children and young people through fostering stronger connections between these community supports.

Two examples of evidence based practice approaches in the early years include Communities for Children and The Smith Family's proposed model, *Families Learning Together.*

❖ **Building stronger families through *Communities for Children***

In 2004, The Smith Family was invited to be a facilitating partner for the Mirrabooka *Communities for Children site* and competed for other sites, as part of the Australian Government's 'Stronger Families and Communities Strategy'. *Communities for Children* (C4C) is an innovative approach to improving the coordination and delivery of existing services for communities and families with a focus on children aged 0-5 years at that time and now working with the 0-12 age group.

The C4C model represented a significant change in policy direction, moving from an historical crisis intervention model to a preventive 'community development' model, and from a focus on outputs (in terms of resources deployed) to outcomes (in terms of the wellbeing of targeted families and their children). In sum, the C4C model demonstrates what is arguably one of the most important social innovations of recent times, in that it brings together the following path-breaking characteristics:

- It is **place-based** in the sense of working to enhance support for children and their families within particular disadvantaged communities around Australia, and building on the strengths and assets already present in the community.

- It is **outcomes-focused**, working towards universal goals and based around a systems-wide approach that merges educational, developmental and health-related service provision.

- It is an **empowerment** model in that the whole community works together to first prioritise the issues and then select from the range of evidence-based interventions suited to their particular context. In others words, the residents/families are the co-producers of the programs that will be delivered.

- It encourages **culture-change** within the non-profit sector by connecting the strengths and capabilities of a variety of organisations, institutions and individuals. A key part of the model's success lies in bringing together large community organisations (which have expertise in 'back-room' capabilities such as research, policy design and facilitation) with grassroots service delivery agencies (which have the local knowledge and relationships to work with the community). The former act as banker, broker and leverage agent to ensure that the service delivery provided by the latter is well coordinated, resource-efficient (avoiding duplication of effort and funding so as to maximise the benefits), and is embedded in the community for sustainability.

- It can provide **dual generational learning opportunities**, empowering parents with a range of parenting skills education while supporting the development of their children aged 0-12 through quality early childhood education and care initiatives.

The Smith Family is now the Facilitating Partner for seven Communities for Children sites in Australia, two of these sites are in Western Australia (Kwinana and Mirrabooka). These seven *Communities for Children* sites are very different in terms of the local communities that they support. While they are based around the same model, each community is unique in its profile and assets, and this affects the planning and implementation of services. These factors mean that extensive planning and consultation with community stakeholders is essential to developing a tailored and sustainable approach in each site. This research is then used to collaboratively develop initiatives that are also based on national and international best practice. In this way, *Communities for Children* is able to encompass a range of activities for children 0 to 12 years and their families within any particular site, including:

- early learning, literacy and numeracy programs;
- social and communication skills development;
- parenting and family support programs;
- child health and nutrition;
- professional network and community development strategies; and
- community events to celebrate the importance of children, families and the early years.

Changes in Ministers and then governments did not change the policy imperative because of the empirical evidence pointing to the success of this model when faithfully followed.

❖ **Towards dual generational learning – '*Families Learning Together'***

Engaging disadvantaged parents in parenting and/or adult education opportunities is typically a challenging task due to barriers of motivation, time and access. However, The Smith Family's experience in facilitating early childhood programs such as *Communities for Children* has found that parents' desire to secure support for their children leads in most cases to an interest in furthering their own learning, if the right opportunities are offered.

Traditional models of child care do not provide many opportunities to leverage this motivation in parents, being focused primarily on responding to the needs of their children. In fact, in many instances, the involvement of parents is minimised to dropping their child off in the morning and then collecting them later in the day.

Therefore, if we are to build stronger families and communities, enhance the skills facilitating the workforce participation of marginalised parents and contribute to Australia's productivity more broadly, we need to move beyond child care *per se* to embrace more innovative *dual generational learning* models such as The Smith Family's *Families Learning Together* model.

Drawing on international best practice, this model is designed to build the capacity of families most in need to manage the competing demands of raising children and obtaining positive employment. This will be achieved through three integrated streams of learning:

1. Quality early learning and development opportunities for disadvantaged children aged 0-5 years to support the cognitive and non-cognitive skills they need to make smooth home to school transitions.

2. Parenting skills development opportunities designed to improve the capacity of disadvantaged parents to provide a supportive home environment for their children in the early years.

3. Adult education opportunities to facilitate the entry (or re-entry) of disadvantaged parents into the workforce with the skills reflective of contemporary market needs, including basic literacy/numeracy as well as financial and digital literacies.

The model is structured to then allow for the learning that takes place in the first three components to flow into and be reinforced through parent and child together time (see

Figure 1). In practical terms, this might operate through parents and children attending concurrent adult education, ECEC and parenting education sessions in the morning, followed by a PACT session in the afternoon during which parents and children come together to put the morning's learning into practice (e.g. through shared reading or playtime).

Figure 1: Integrated learning streams through the *Families Learning Together* model
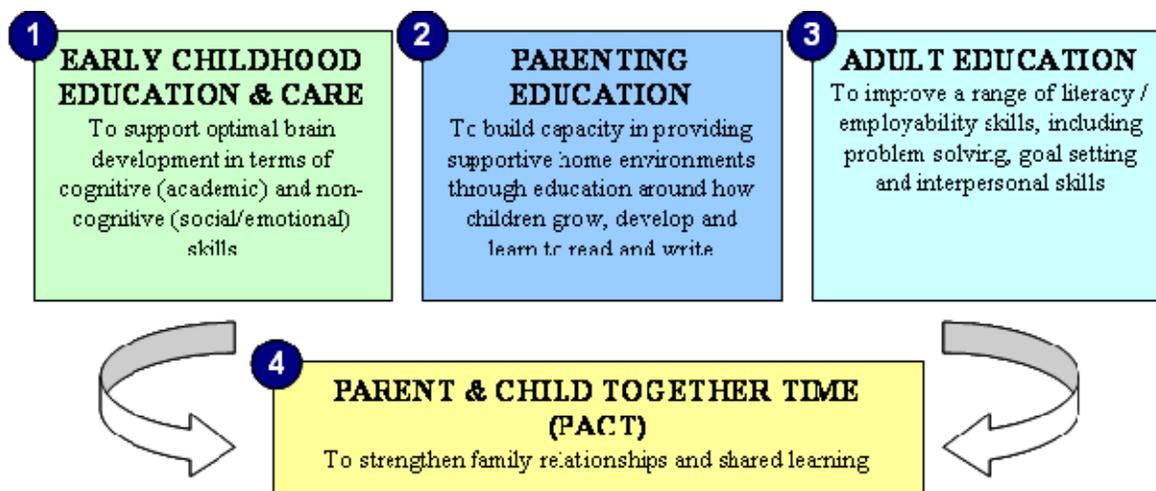
As

Figure 1 above indicates, this dual generational program is structured to allow for the learning from the first three components to flow into and be reinforced through parent and child together time (PACT). In practical terms, parents and children could attend concurrent adult education, early learning/care and parenting education sessions in the morning, followed by an afternoon PACT session where they can put the morning's learning into practice (eg through shared reading or playtime). Encouraging parents to see daily activities as opportunities for PACT in their own home environment is a key part of this strategy.

Through activities such as these, parents are able to more actively participate in and support their child's early development and increase their level of involvement in their child's educational career as a whole, which the evidence suggests is associated with higher levels of educational achievement across the family.

3. Strengthening the Skills and Capacities for Mental Health and Wellbeing

The mental health and wellbeing of children is impacted upon by a myriad of stresses and strains today including family breakdown (and the rise of single parent and blended families), bullying and peer pressure. While it is important that children and young people have the ability to access professional health services as required, it is also important that we offer the best opportunity for them to develop the foundations for mental health, wellbeing and emotional resilience from a young age.

Together, our Vision and Mission lay the foundation for the two strands of what we call the 'DNA' of The Smith Family; on the one hand increasing the human capital of disadvantaged children and their families, which we call our **Participation** agenda and speaks to our Mission; and on the other strengthening the social capital and receptivity of the wider community, working with caring Australians who have the time, talent and dollars to give through our **Engagement** agenda, which responds to our Vision. Through this strategy, we can effect **societal change** for the benefit of all.

Opportunities to connect the two strands have come through the development of a comprehensive suite of programs known as *Learning for Life,* through which we have been able to build a multi-layered network of supportive educational relationships connecting different people in different ways to address different issues or barriers they may be facing. For example, at the basic level, it connects sponsors with students to provide financial support for meet basic schooling costs; it connects mentors with youth looking to make the difficult transition from school to work/further studies; it connects refugees with new arrivals with English language tutors in their new communities etc.

Importantly, as our Participation framework shows, *Learning for Life* enables these relationships to build the **skills and capacities** of individuals across the **life course**, from birth all the way through schooling to tertiary studies and adult learning. We also focus on ensuring the key environments or **settings** they pass through during this time – the **family (home); community; educational institutions and the workplace** – are all as supportive as they can be of their learning and development, such as ensuring kids have access to books in the home to promote shared reading with their parents.

This approach makes **The Smith Family unique in the Australian context**. We are focused for impact over the long haul of student years, helping disadvantaged kids have the same opportunities for gaining life skills that their peers from more affluent backgrounds achieve to set them up for life.

Today, we know that education needs to do much more than just prepare kids for employment. Instead, we need to help them develop the ability to recognise, nurture and express their talents in a globalised, fast-paced world; help them learn how to make and keep friends; help them develop the confidence to change the way they see the world (or the way the world appears to them) so that those who struggle early on do not see themselves as destined for failure in the long term. This is where The Smith Family's emotional literacy programs play an important role.

❖ **Strengthening Emotional Literacy**

While traditional definitions of literacy emphasise cognitive (academic) skills (e.g. problem solving), research has shown that they represent only one side of the skills that explain performance outcomes. Equally as important is an individual's emotional literacy (non-cognitive skills), which relates to their ability to (a) recognise and understand their emotions; (b) manage these effectively through self-discipline; (c) recognise emotions in others through empathy; and (d) draw on all of these to successfully develop and manage relationships with others for different purposes in different contexts[7].

Emotional literacy and social skills play a vital role in helping children and young people engage constructively in education, training and learning. They are also essential in enabling individuals to take control over their lives and mitigate the impact of their immediate circumstances on the pathways they wish to follow. Without adequate confidence in their own capacity and ability to succeed, many individuals will avoid rather than embrace the challenges that lie before them, and in so doing exacerbate their social and economic marginalisation. Emotional literacy is therefore critical not just for the individual concerned, but for the wellbeing of their family, community and indeed the productivity of the nation as a whole. Increasing rates of mental health problems among adolescents, and high-profile instances of youth resorting to desperate and often violent actions against themselves or others have provided a stark warning of the consequences of further neglecting emotional literacy.

The evidence has shown that children and young people have distinct emotional literacy needs at different stages in their development, with the early years being a particularly important time for developing the building blocks of self-esteem and self-awareness (for example). Building emotional literacy is therefore a cumulative process of nurturing and reinforcing appropriate emotional and social skills across the life course (Figure 2).

Figure 2. Emotional literacy skills and capacities across the life course

Early Years (0-5 yrs)	Primary Years (6-12 yrs)	Middle Years (12-16 yrs)	Young Adult Years (16-24)	Adult Years (25+ yrs)
DEVELOPMENT • Parent/carer-child bonds • Emotional vocabulary • Emotional control • Self-awareness • Awareness of others	DEVELOPMENT • Emotional control • Peer group bonds • Social skills • Self-esteem STRENGTHENING • Emotional vocabulary • Parent/carer-child bonds • Self-awareness	DEVELOPMENT • Social skills STRENGTHENING • Emotional vocabulary • Emotional control • Self-awareness • Self-confidence • Self esteem • Peer group bonds	REINFORCEMENT • Self-control • Self-confidence • Peer group bonds • Social skills STRENGTHENING • Emotional vocabulary	REINFORCEMENT • Self-control • Self-confidence • Peer group bonds • Social skills STRENGTHENING • Emotional vocabulary

Darker orange areas indicate areas of greatest impact for emotional literacy interventions

Source: The Smith Family (2009) *Emotional Literacy: Building strong relationships for lifelong learning*. **Available at** www.thesmithfamily.com.au

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[7] The Smith Family (2009) *Emotional Literacy: Building strong relationships for lifelong learning*. Available at www.thesmithfamily.com.au

In addition to their life stage, the relationships and attributes of the various settings or environments in which children and young people learn and develop have also been found to play a crucial role in supporting their emotional literacy (Figure 3).

Figure 3. Emotional literacy relationships and attributes across the settings

Darker orange areas indicate areas of greatest impact for emotional literacy interventions

Source: The Smith Family (2009) *Emotional Literacy: Building strong relationships for lifelong learning.* **Available at** www.thesmithfamily.com.au

However, organised opportunities for the development of emotional literacy and social skills remain unevenly distributed. Young people in lower income families are less likely to have participated in organised activities with a focus on sports, music, arts and social activity clubs, than those in the higher income families. It is likely that these personal development opportunities are seen as 'extra-curricular' and therefore associated with a financial cost beyond the reach of many disadvantaged families.

We already know that disadvantaged children and young people are particularly at risk of having low emotional literacy levels. Research has shown that financial and material disadvantage can have a negative lifelong impact on an individual's self-esteem, competence, autonomy and relatedness and can deeply affect their sense of identity, belonging and wellbeing. Financial disadvantage in particular can significantly reduce a young child's readiness for school. Parents/carers carrying greater levels of stress and have access to fewer material resources to support them, ultimately affecting the way they interact and care for their children. In these instances, where families are experiencing stress and hardship, it is especially important to ensure children are able to acquire support and encouragement from other sources where possible such as educational institutions.

4. Promoting an Integrated Service System

New approaches to traditional 'silo' service delivery models that are multi-sector, multi-disciplinary, systems-building initiatives are seen as one way of addressing the mental health and wellbeing needs of individual children and youth in the context of their families and communities. These integrated models bring together a range of professionals to provide health, education and family support services and are seen to be a more efficient way of promoting

optimal child development, ameliorating family risk factors and enhancing child and family wellbeing[8].

Integrated models can strengthen the links between service systems through seamless referral pathways, by ensuring staff across sectors are aware of the local service system, where to refer to and risk factors for children and young people. This provides an enhanced ability for children, young people and their families to access the services they need without having to navigate the service system themselves. Because integrated services are universal they have the capacity to address multiple risk and protective factors across multiple settings such as home, community and school[9].

While children learn across a range of settings such as in the home and in their communities, the school remains a focal point at this age and can therefore play an important role in supporting the mental health and wellbeing of children and young people. Schools can be considered some of the most influential institutions in our society as nearly all communities have at least one local school and most families come in contact with them at one time or another in their lives.

Validated evidence (including international examples such as the Harlem Children's Zone and Children's Aid society) demonstrates that there are benefits that accrue to parents, teachers and the community through coordinating community resources with the school as a hub. Known as a *Community School*, this model has the potential to galvanise resources around the mental health and wellbeing needs of children and young people as well as their families.

❖ **The Community Schools Model**

A community school is an integrated service that provides the opportunity for children with mental health issues to be more easily identified and referred; for families to have a safe place to go where emerging issues can be addressed; and a safe environment for them to access programs that strengthen their parenting skills.

Community Schools promote a range of new collaborations and integrated relationships that enable the school to act as the catalyst for cultural change within their community - bringing students, their families, school staff and the local community together to adopt shared responsibility for improved outcomes.

New 'connections' and strategies are identified and implemented on the premise that in order for children and young people to improve educational outcomes it is necessary to not only deliver a high quality school curriculum; but also educational and cultural enrichment; and most importantly, to remove the barriers to learning and development[10] which for many children may be related to mental health and general health needs.

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[8] Valentine, K., Katz, I., Griffiths, M. (2007). Early childhood services: Models of integration and collaboration. Australian Research Alliance for Children and Youth. Social Policy and Research Centre University of New South Wales. Retrieved November, 18, 2008 from http://www.geelongaustralia.com.au/library/pdf/5293137/pdf
[9] Valentine, K., Katz, I., Griffiths, M. (2007). Early childhood services: Models of integration and collaboration. Australian Research Alliance for Children and Youth. Social Policy and Research
[10] This might include English as a second language and or access to social, dental, health and mental health services

Figure 2 below provides an illustration of the model with examples of the broader relationships that are facilitated by The Smith Family.

Figure 4. The Community Schools Model
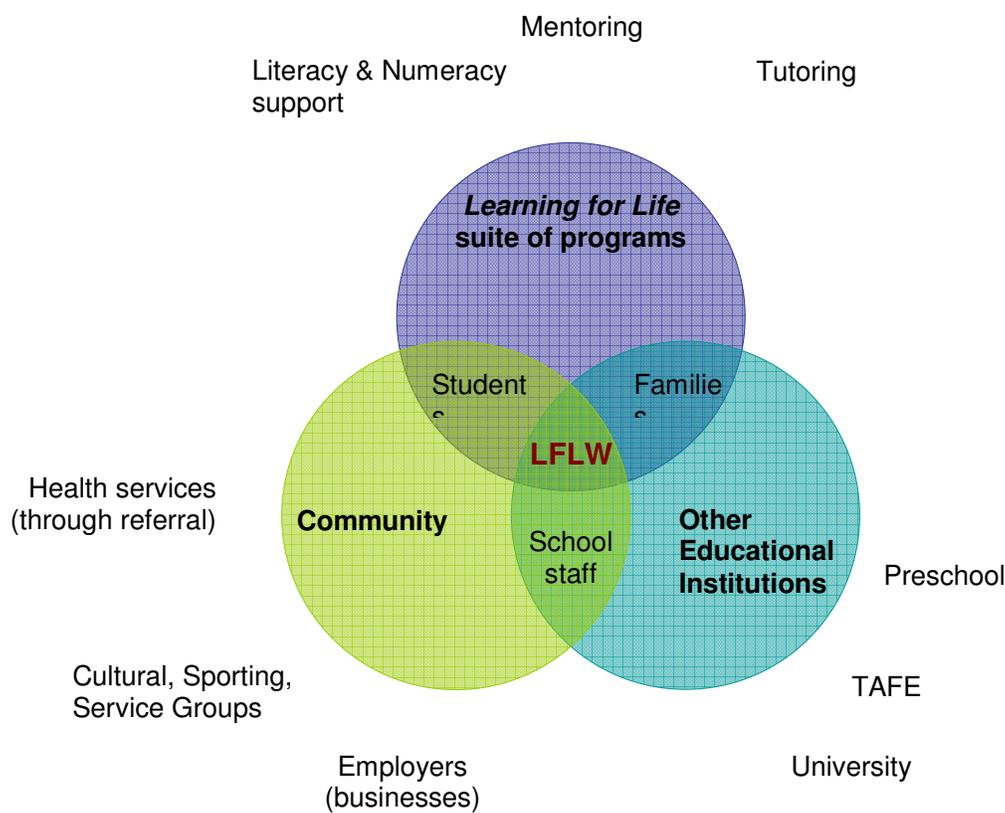
In 2000, The Smith Family identified that the most effective and sustainable approach to responding to the needs of disadvantaged children in rural, regional and remote Australia was through a focus on *place*, or a particular community, providing an intensity of interventions over a longer time-frame.

As the evidence revealed, such an approach required an empowerment model that would move away from doing things 'to' or 'for' communities to increasingly acting 'with' community and eventually working 'as' community. To this end, we adopted an implementation strategy of 'place management' in late 2000, and took the significant decision to move our community staff (known today as *Learning for Life* Workers) from The Smith Family offices to collocating within schools, enabling them to proactively work as the bridges connecting the student and teacher population and the local community.

This collocation is the foundation of The Smith Family's model for *community schools*, and reflects our understanding that a school is both a place and a set of partnerships between the school and other community resources. As Charles Leadbeater, a world renowned authority on innovation, concluded:

> *"Instead of seeing schooling as a system of years and grades, with key stages and examinations, targets and regulators, it should be seen as a set of relationships between teachers, pupils, parents and the wider community. Children need to be able to rely on 'relationships for learning' at school, home and in the community.*[11]

The primary role of The Smith Family in this model is as a *Lead Agency* or *intermediary (*similar to our role in Communities for Children*)* facilitating these multiple relationships to encourage a larger and more integrated systems approach to education within a shared outcomes based framework.

There are several advantages to organisations such as The Smith Family acting as an intermediary on behalf of a school to foster partnerships. These include:

1. **A holistic approach**

   At a larger scale, an intermediary can deploy the resources of businesses across schools in a planned and holistic way, by identifying areas of greatest need and brokering school-business connections that will provide mutual benefit. At a local level, intermediaries can contribute their understanding of what might work for a particular school and seek out or broker a business partnership for one school or a cluster of schools.

2. **School engagement**

   Despite the initial reluctance of schools to take on a business partnership, an intermediary can work to encourage their participation through the facilitation of relationships. Schools and businesses need avenues to develop relationships and to build confidence in each other.

3. **Business engagement**

   Often intermediaries have a particular value proposition that they can offer businesses to engage them in school partnerships by building on a 'knowledge bank' of what works in relationship building and having the opportunity to invest time in the relationships. The best way to encourage partnering in business is to build a solid business case based on '*what's in it for me*?' (e.g. by leveraging workforce planning issues such as skills shortages and corporate social responsibility) as well as the creation of regional 'champions' and promotion of best practice.

4. **Risk management and conflict resolution**

   An intermediary can assist in developing the protocols and processes that mitigate risk and conflict between partners setting the partnership on a solid footing at establishment. It is important that as a first principle a project or initiative 'do no harm'.

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[11] Leadbeater, C. (2008) *What's Next? 21 Ideas for 21st Century Learning,* p9.

5. **Sustainability**
   Having allocated responsibility for external partnerships allocated to a school member of staff or intermediary, helps to overcome the issue of constant staff changes and loss of champions. It also helps to reinforce a partnership culture in the school environment.

At the heart of our work are our skilled *Learning for Life* Workers who facilitate networks of relationships to achieve a number of interconnected goals within the school environment. These include:

- **Enhanced communication and understanding**.
  Learning for Life Workers are able to help parents better understand how they can support what is taught in the classroom through activities in the home as well as help teachers understand how they might better communicate with or attract greater involvement of parents within the school.

- **Aligned interests and opportunities**.
  Learning for Life Workers break down barriers between business, community organisations and educational institutions in the local community and attract financial, in kind and volunteering support to a school. For example, community groups such as Rotary might be enlisted by the Learning for Life Worker to support school activities or students linked with a local employer offering apprenticeships or work experience opportunities.

- **Facilitate extra-curricular learning.**
  Learning for Life Workers build up a detailed understanding of community and student needs, and then match these up with opportunities available through the community or through The Smith Family's *Learning for Life* suite of programs. Ensuring young people get access is a key task of the workers.

  For example : A student who is struggling with their reading in Year 3 may be matched through the Learning for Life Worker with an older student mentor specially trained by The Smith Family to help develop reading literacy skills in others through our *student2student* program. Alternatively, the Learning for Life Worker might facilitate the participation of students in Years 10 and 11 in our *iTrack* online mentoring program or a community program such as The Beacon Foundation's *Polish* which provides the opportunity to learn from professionals already engaged in the workforce to assist with their school to work transition.

- **Support smoother learning transitions.**
  Learning for Life Workers build up relationships with institutions across the educational spectrum, including preschools, TAFE, universities and the first learning environment, the home. They use these relationships to help facilitate smoother student transitions..

- **Extended assistance through referral.**

Learning for Life Workers can be presented with issues that lie outside the parameters of 'education' (e.g. domestic violence, drug addiction) and are equipped to link the individual or family to an appropriate service within the wider community for more targeted support.

In this way Learning for Life Workers help create a community school environment that leverages a wide range of local assets and opportunities to support all of the needs of children as they develop – physically, socially and emotionally as well as academically.

Conclusion

This submission has sought to emphasise the importance of taking a preventative approach to the mental health and wellbeing of children and young people in Western Australia and Australia. This means ensuring that children and their families can access support in the early years; that children and young people are equipped with the skills and capacities to build resilience and 'bounce back from adversity; and it means ensuring an integrated service system is in place that allows children and families to easily access the right support at the right time and in the right place.

The mental health and wellbeing of children and young people is a community's responsibility and as such requires a community response. This must stretch beyond discussions of increased primary health services – although these are clearly needed – to supporting families where they are from settings such as early childhood centres, to schools and communities.

Education has an important role to play in promoting health and wellbeing whether through addressing the fundamental social inequalities of health through breaking the cycle of disadvantage; ensuring that children and young people have the emotional intelligence to navigate the challenges that they face in an increasingly complex world; by promoting parenting skills in order to reduce adverse childhood experiences; or even equipping parents and professionals with an enhanced understanding of risk factors and available services. In these ways, education is fundamental to achieving better mental health and wellbeing outcomes for the children and youth of Western Australia.