

Strong Youth

STRONG COMMUNITIES

Buloke, Loddon & Gannawarra

a community-based initiative that promotes wellbeing and school engagement in the formative years to prevent long term social and economic impacts.

November 2021



Executive Summary

Strong Youth, Strong Communities (SYSC) is a community-based initiative that promotes wellbeing and school engagement in the formative years to prevent long term social and economic impacts.

It connects community-based resources to develop and implement a model of wellbeing services in schools and communities that is preventative; cost effective; and strengthens partnerships to build the capacity of schools and community.

Strong Youth Strong Communities will ensure every young person can be connected and supported to build their internal resources to thrive. It will facilitate the support they need when they need it and improve wellbeing, school attendance and engagement.

With investment from the Buloke, Loddon and Gannawarra Shires, and additional support from Swan Hill Rural City Council, we have commenced shaping a model in 2021 through extensive consultations.

The research found that current systems are failing rural children and young people and that strong 'in-place' advocacy, facilitation and resourcing is required.

Strong Youth Strong Communities will:

Provide direct support to children, young people and families: by mapping their needs and building their aspiration, capacity and confidence to co-construct action

Strengthen the service system: using learnings and working with partners to re-shape the service system to make it more responsive to identified local needs

Involve the community: to share their resources to benefit children across our communities – child development is a community responsibility. We know it takes a village to raise a child.

The priority is to support children, young people and their families experiencing rural, social or economic disadvantage.

We will focus on key areas such as physical health, mental wellbeing, connectedness, and social & emotional development. Without addressing these critical elements, children and young people are significantly less likely to engage successfully with education and therefore reduce their opportunities into the future.

Schools report four investments would make the difference:

- 1** **Resourced Capacity** to navigate and help schools engage with and utilise available community assets, and identify and engage with local/regional resources and partnerships
- 2** **Affordable, accessible general wellbeing support:** (psychologists, allied health, social work, Headspace, etc)
- 3** **Earlier specialist support for mental health services in primary schools:** including an investment in the Navigator Program in primary school and removal of the 30% absenteeism trigger for the program.
- 4** **'Long service leave' for Year 9:** an alternative program of education to re-engage young people.

Project Overview

Strong Youth, Strong Communities is a partnership between the Shires of Loddon, Buloke, and Gannawarra, Northern Districts Community Health and the North Central LLEN to improve the wellbeing of young people aged 9 to 19 in schools in our region. Our objectives are to:

- develop and implement a model of wellbeing services in schools and communities that is: preventative, cost effective, and improves partnerships to build the capacity of schools and community, and
- ensure every young person is connected and supported to build their internal resources to thrive, get the support they need when they need it, and improve wellbeing and engagement.

Over 2021 we ran local consultations to identify the challenges, create the networks, and developed the model.

This paper outlines our proposed facilitator model to link schools to local community wellbeing resources, assets and services, and advocate for systems change in rural and regional areas, to ensure every young person is healthy, happy and engaged.

Our challenge

Our young people are disengaging from school and lack optimism

The COVID-19 pandemic is having an enormous impact on the wellbeing of young people in Buloke, Loddon and Gannawarra. Young people are disengaging from school and lack optimism for their futures, which costs governments now, and will impact on the strength of our rural communities in the future. Recent research shows:

- Students surveyed in Year 4 through to Year 9 pre COVID-19, had **low wellbeing**, with lower-than-average scores on optimism, self-esteem, happiness and absence of sadness (Buloke and Loddon).¹ This will have worsened over 2020/21.
- Our consultation found 65% of Principals in Buloke, Loddon and Gannawarra Shires reported students were disengaging even while *attending* (logging in, but checking out indicating that the attendance data does not represent the experiences of students and schools during this time).

Additionally, Principals across Victoria's secondary schools have reported **impacts on student's mental health and wellbeing** including grief, loss, isolation, sadness about missing 'rites of passage', fears about completing schooling, and doubts about their future; and **decreased morale and motivation** leading to disengagement, dropping subjects, studying only minimum subjects, or moving to unscored VCE, all of which affect tertiary options.²

- Nearly a third (28%) of Australian households with children and young people have experienced **job loss or reduced income during the pandemic**, delaying payments for essential household costs, such as mortgage, rent or utility bills (22%), health care and prescription medicines (16%) and even food their family needed (28%).³

¹ Unpublished data for the pilot of the *Australian Early Development Census Extension Pilot* to middle years (students in grades 3, 6, 9 & 12), Buloke and Loddon. All schools across the region, including Gannawarra, have signed up to a Comprehensive Monitoring System and data will be available at the end of 2021.

² VicLLENs (2020) State-wide consultation with Principals of Secondary Schools. Unpublished.

³ Royal Children's Hospital Melbourne (2020) *Child Health Poll. COVID-19 pandemic: Effects on the lives of Australian children and families*. <https://www.rchpoll.org.au/wp-content/uploads/2020/07/nchp-poll18-report-covid.pdf>

- Prior to COVID-19 our region already had high rates of **early school leaving** (38% of 20-24-year-olds), which impacts on their income and life chances (Buloke, Loddon and Gannawarra). This compares to the Victorian state average of 17%.
- Anecdotal reports of an increase in **risk taking behaviours** including drugs and alcohol, exacerbated by boredom, unsure futures, and an emerging culture of nihilism.

Poor wellbeing outcomes are more acutely felt in already disadvantaged communities. Data shows that our region has higher than State average levels of disadvantage, with 674 families, with over 1000 children, earning less than \$650 per week.

These families face a double disadvantage. They have fewer resources to support them, and rural areas in turn have fewer resources to compensate, due to an acute lack of access to services including:

- **the internet/digital connectivity and digital literacy**, which is low in disadvantaged rural households ⁴, and the number one issue reported by the region's young people⁵
- **primary health, mental health, sexual and women's health, specialist health, and disability services** ⁶
- **education services** (inability to provide full curriculum, worse facilities, etc) ⁸
- **recreation activities** (including to suit different young people's needs), the second biggest issue reported by the region's young people ³
- **absence of a holistic youth work model**, with a agencies consultation in Loddon suggesting a deficit of specific youth services, youth workers, counselling, youth spaces, ways for young people to have a voice, alternative school programs, school holiday events, public transport, and crisis accommodation.

The costs of disadvantaged young people in rural areas are high

Research has shown that the costs of servicing highly disadvantaged children and young people are high, for example:

- A NSW study of costs of **servicing children and young people** has shown the cost to State and Federal government (mainly in welfare support and health care) of the 1 000 most vulnerable children and young people to the age of 40 (\$2.5M) is 15.9 times higher than that for the total under 25-year-old population (\$143k).⁷
- Any given yearly cohort of **students leaving early** contribute to a lifetime social loss of \$23.2 billion, mostly related to lower earnings, but also costs of crime and marginal tax burden (Lamb et al 2017). The lifetime economic cost to Australian governments or the taxpayer is \$12.6 billion (Lamb et al 2017).⁸

⁴ Thomas J, Wilson CK & Park S (2018) Australia's digital divide is not going away. *The Conversation*. March 29, 2018

⁵ Conversation Caravan (2019) *Loddon Shire Youth Strategy 2019. Engagement Summary*. August 2019.

⁶ Pope J (2019) The role of infrastructure in addressing regional disadvantage in Victoria. https://www.infrastructurevictoria.com.au/wp-content/uploads/2019/11/Background-paper_The-role-of-infrastructure-in-addressing-regional-disadvantage.pdf

⁷ Using linked service data across child protection, housing, justice, health, education, mental health, alcohol and other drug, and commonwealth (welfare MBS and PBS) services (Taylor Fry 2019).

⁸ Lamb S, Jackson J, Walstab A & Huo S (2105) *Educational opportunity in Australia 2015: Who succeeds and who misses out*. Mitchell Institute: Melbourne

Our schools want to improve young people's wellbeing but do not have the capacity

Over 2021 we interviewed Principals and school leadership in 30 of the 31 schools in our region (11 are P-12, 1 P-10 and 18 are primary schools) about how they are dealing with the above challenge. We found:

- There are too **few resources available to effectively support wellbeing in our small rural schools**. Even when resources are available, **small rural schools have limited capacity (or professional expertise) to deliver services** and programs dedicated to wellbeing.

The amount of staff time focused solely on wellbeing varies greatly across schools in the region. In some small schools it's just the Principal, while most of the larger schools had a wellbeing officer at 0.2-0.4 FTE. Only one has a full time Wellbeing Officer.

- Around two thirds of schools' fund wellbeing support through their global budget⁹, with a few receiving resources through the National Schools Chaplaincy Program, although several were not re-funded in 2021.

Since 2020, the Victorian Government has been rolling out Mental Health Practitioners in schools, which in rural secondary schools equate to 0.2 FTE and there have been many challenges with recruitment and retention.¹⁰

- Many Principals identified that **they may be unaware of or unable to engage** with program supports and services in their local communities.

The administrative and education provision demands on small schools can limit or prohibit the time available to build relationships with local service providers, explore the availability, appropriateness, efficacy, and resourcing to engage programs in their entirety and as they were designed, that could support improved health outcomes for their students.

- **Schools need more mental health support**, especially primary schools. Primary schools reported mental health practitioners and other supports in the mental health system are missing in the region.

A recent announcement of mental health support in Primary school (from 2022) will help with this, but is only part of the solution.

- Half of all mental health problems are apparent by age 14, with symptoms beginning in primary school.¹¹

- **While DET has the *Student Support Service* for students in need, the referral requires significant paperwork, and the system is often oversubscribed and only able to service students in crisis (not prevention).**

The suite of DET interventions (best practice programs and on-line resources- now known as the 'Mental health Menu') available to schools, require investment of time, training, and professional experiences that many schools report lacking capacity to deliver.¹²

⁹ Funding provided through the Department of Education and Training

¹⁰ DET Mental Health Practitioners in schools. <https://www.education.vic.gov.au/school/teachers/health/mentalhealth/Pages/mental-health-practitioners-secondary.aspx>

¹¹ Murdoch children's Research Institute. Edition 1, 2020 Policy Brief – Promoting Wellbeing and learning in the middle years: an opportune time for intervention

¹² <https://www.education.vic.gov.au/Documents/school/teachers/studentmanagement/Interventions-and-supports.pdf>

Half the schools were not aware of many of the suite of interventions. Schools reported that the Department is stretched and they generally only get assistance at a crisis stage for a young person, and not for prevention.

- **Many schools deliver parts of programs rather than in their entirety and as designed.** While all schools were delivering the *Respectful Relationships* program in its entirety and as designed, only two schools they had done so with other intervention resources in the DET suite in the last two years.

Most schools did not have the capacity, with many just using 'bits and pieces' from different initiatives.

Schools reported they would use more resources with 'integrity' (as designed and evaluated) if they had the capacity.

- **More than half of schools are not linked to community resources** that could provide extra capacity and support. The other 40% are very linked, though it requires considerable time, effort and money and they indicate that this may not be sustainable in the long term.

For the remaining 60%, a facilitator would help them to get connected outside the school gate (within the wider community and local assets).

- More than 50% of schools acknowledged that there is important data being collected in a variety of ways, and that if they had the capacity and additional support they could use both current and new data to drive better decision-making and investment to support improved outcomes for young people.

Youth and community consultation in the Buloke, Loddon and Gannawarra Shires confirmed the findings of the recent Royal Commission into Victoria's Mental Health System 2021 that "at least 63% of young people living in rural and regional areas trying to access a mental health service are unable to" and that "one in four young people will experience a mental health illness within a 12-month period".¹³

Broader community support is needed to ensure that our young people are able to access mental health services.

¹³ <http://rcvmhs.archive.royalcommission.vic.gov.au/>

Our solution

Prevention is key

Prevention will reduce the costs of negative outcomes now and protect our community's strength (including school engagement, participation in the labour market, community, and leadership) in the future.

We need to guarantee the supports are in place to ensure young people have the four foundations for healthy and successful lives. Supports include

- **connection to broader community mentors, services and organisations** that help provide additional resources, mentoring, information, and emotional support
- **quality education services** that give them the skills and aspiration to set up pathways for financial independence and successful careers
- **financial and practical support for their families (of any make-up)** including income, employment, health, human, justice, emergency services) that ensure they can provide support and opportunities at the time of need
- **supportive and engaged families (of any make-up) and close networks** that help develop the lifelong healthy habits, skills and resilience that provide the springboard for moving confidently out into the world ¹⁴.

Schools report four investments would make the difference

When Principals were asked what is the single biggest investment that could make a difference four things were raised (in order of mentions):

- **Capacity (resourced) to navigate:** helping schools engage with and utilise available community assets and identify and engage with local/regional resources and partnerships to ensure maximum learning and engagement opportunities for young people. (23/31 schools)
- **Affordable, accessible general wellbeing support** (psychologists, allied health, social work, Headspace, etc) to provide a wholistic approach that brings together a range of specialists with a focus on student health and wellbeing as a premise to being able to learn. (17/31 schools)
- **Earlier specialist support for mental health services in primary schools:** including an investment in the *Navigator Program* in primary school and removal of the 30% absenteeism trigger for the program. Currently Navigator its only for those aged over 12 by which time absenteeism is entrenched. (7/17 primary schools)
- **'Long service leave' for Year 9:** an alternative program of education to re-engage young people like the 'Alpine school' or 'The Catch', that assist students to develop skills that support them in finding relevance and engagement in their final years of schooling.

¹⁴ Modified from The Health Foundation (2018) A place to Grow: Exploring the future health of young people in five sites across the UK. <https://www.health.org.uk/publications/a-place-to-grow>

Our objectives

Strong Youth, Strong Communities will create a community-based response that promotes wellbeing and engagement in the formative years to prevent long term social and economic impacts. Our objectives are:

- To develop and implement a model of wellbeing services in schools and communities that is:
 - Preventative
 - Cost effective
 - Improves partnerships to build the capacity of schools and community.
- To ensure every young person is connected and supported to
 - Build their internal resources to thrive
 - Get the support they need when they need it
 - Improve wellbeing, school attendance and engagement.

The model

Our model for a place-based youth support system has been designed around five characteristics of successful partnerships identified in an evaluation of Victoria's biggest partnership initiatives focused on disadvantage.¹⁵

A model of our governance can be seen in the next section, but the key components of our model are:

- **A good Broker/Facilitator** to build and maintain relationships, connect schools to resources in communities, and consider how resources could be better organised.

There is no direct service in our model – the facilitator helps others provide service. The role of our facilitator is to:

- Develop and maintain commitment from the partnership, schools and community networks
 - Work with the schools, regions and local government to identify need and resources and build capacity
 - Identify community resources and facilitate links/engagement for mutual benefit
 - Advocate for system change to address gaps.
- **The right decision-makers at the table with a commitment to contribute.**

See our governance structure on page 9 for a summary of the network involved in the project and how they will be involved. It includes:

 - An authorising arrangement in the State government
 - The local partnership between local government, the Northern District Community Health Service and the North Central LLEN (and other LLENs)
 - A 'Bench' of our broader government and community networks who we can keep informed and can be pulled in as needed.

¹⁵ Pope J & Lewis JM (2008) Improving Partnership Governance: Using a Network Approach to Evaluate Partnerships in Victoria. In *The Australian Journal of Public Administration*, vol. 67, no. 4, pp. 443–456.

- **A clear purpose, as outlined in this paper,** so there is a feeling of consensus around the vision. A clearly defined vision and objectives will keep people focused and clarifying roles and responsibilities, so everyone is clear about what is expected of them.

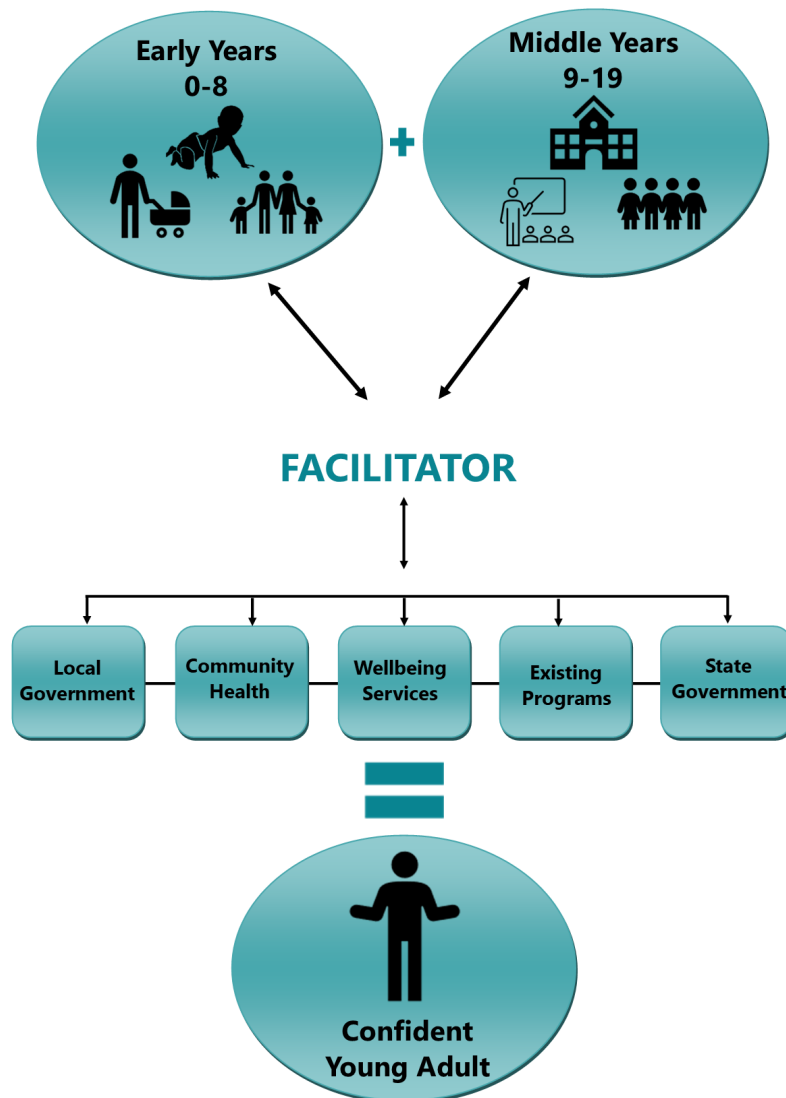
This is important because decision-making processes in partnerships are more complex than for **ongoing motivation champions and achievement reports**.

We have entered a partnership with the Australian Early Development Census Extension - Comprehensive Monitoring System (Deakin University) ¹⁶ to be the earliest adopter of its monitoring of the wellbeing of young people across their schooling.

The first data for our region will be available at the end of 2021 (trial data for the middle years for 2017 and 2019 is currently available)¹⁷ and will continue to be collected across the life of this project.

This will help the partnership to plan and evaluate its activity, and ultimately gauge impact as part of a broader achievement auditing process.

The Facilitator model has been in place for the *early years' programs* for three years across Loddon and Buloke Shires. The findings have demonstrated that it works well in rural communities with small populations and can be scaled to any area (flexible).



¹⁶ Deakin – SEED <https://www.deakin.edu.au/seed>

¹⁷ Buloke and Loddon MDI <http://www.ncllen.org.au/publications.html>

Proposed Governance Model

Authorising environment in State Government

(Removing the barriers, systems change)

Department of Families, Fairness & Housing (DFFH), Department of Education & Training (DET),
Department of Justice (DOJ), Department of Jobs, Precincts & Regions (DJPR)

Area Director

The governing partnership

(Oversight, strategy and resourcing)

Led by Local Government:

Shires of Buloke, Loddon & Gannawarra (Swan Hill Rural City Council – associate)

North Central LLEN, Northern District Community Health

Area Director (under Regional Director) Department of Education & Training

The Facilitator

1. Working with the schools, local government and service providers to build capacity
2. Identifying community resources and linking schools to them
3. Advocating for barriers to be addressed

Action

Critical friends network for identifying and mobilising community resources

(Building capacity)

- Schools – Principals, wellbeing networks
- DET programs (SFYS, SWL, Navigator, etc)
- Funded schools (Neighbourhood Houses, YTO)
- BLG Health service network
- Community organisations with youth, health and wellbeing in their remit, inc. Neighbourhood houses, etc

Working groups for place-based service reform on identified issues

(Drawn from “the Bench” below)

For example:

- Mental health in primary schools
- Year 9 Gap year
- Youth voice- LGA and State program investments
- other - to be determined

‘The Bench’

(Interested parties: Inform until needed)

Department of Families, Fairness & Housing, Regional Development Victoria, YACVIC, Youth Council, SRC Schools Council, Anglicare, Other LLENs, etc

Evaluation – Baseline data from Comprehensive Monitoring System. DET and LGA data will underpin the ongoing development of the place-based strategy and community response

Achievements to date

During 2021 the Shires of Buloke, Loddon and Gannawarra funded a facilitator in partnership with the North Central LLEN and Northern District Community Health to:

- **Build a network of stakeholders** across the region and have:
 - Undertaken consultations with 55 key groups, >80 individuals, 27 young people (focused on the more vulnerable cohort); 9 families; and 30 schools
 - Established a 'Wellbeing Network' portal to support the current school Wellbeing Networks to communicate with each other and post their work, resources, advice, programs.
- **Formalise arrangements with partners** including:
 - Embedding *Strong Youth, Strong Communities* into:
 - o the Municipal Health and Wellbeing Plans of our Local Governments partners
 - o Buloke, Loddon, Gannawarra Health Services Network's draft Terms of Reference (BLG) including current consideration of formal membership
 - Collaborated with *Navigator* and *Reconnect* programs to align the *Strong Youth, Strong Communities* program to them
 - Facilitate a strategic alignment with other internal and external programs/service supports including the DET SWL program ¹⁸ *Strong Families Strong Children* ¹⁹ *Youth Take Over (Loddon Campaspe)* initiative ²⁰, Job Services Advocate and Mentors, and *MATES Mentoring*
- **Leveraged resources** including:
 - Collaboration with the *Australian Early Development Census Extension program / Comprehensive Monitoring System* ²¹ to be the earliest adopter of its monitoring of the wellbeing of young people across their schooling. The first data for our region will be available at the end of 2021 and will continue to be collected across this project to help the partnership to plan and evaluate its activity.
 - VicHealth is piloting a three-year project in Buloke Shire to support action on mental health and strong communities to align with shared objectives of *Strong Youth, Strong Communities* partnership and the Comprehensive Monitoring surveys.
 - Buloke, Loddon and Gannawarra) Shires, Northern District Community Health and North Central LLEN working collaboratively to fund and oversight the Strong Youth Strong Communities for the first year, to develop a framework that builds community resilience.
 - A range of funding opportunities are currently being explored to enable the framework to be enacted over the next three years and beyond.
- **Facilitated improved community services:**
 - Provided input and connections for the re-design of the of the KIT - *Keeping in Touch* Youth Mental Health rural resource ²²
 - Contributed to the Loddon Campaspe Regional DET Youth Engagement and Attendance Partnership Working Group
 - Facilitated co-designed Engage! funding applications across 3 LGAs

¹⁸ <https://workplacements.education.vic.gov.au/>

¹⁹ <http://www.ncllen.org.au/sfsc-loddon.html>

²⁰ <http://www.ncllen.org.au/yto.html>

²¹ Deakin – SEED <https://www.deakin.edu.au/seed>

²² <https://djpr.vic.gov.au/about-us/news/kit-van-to-boost-youth-mental-health-in-loddon-campaspe>

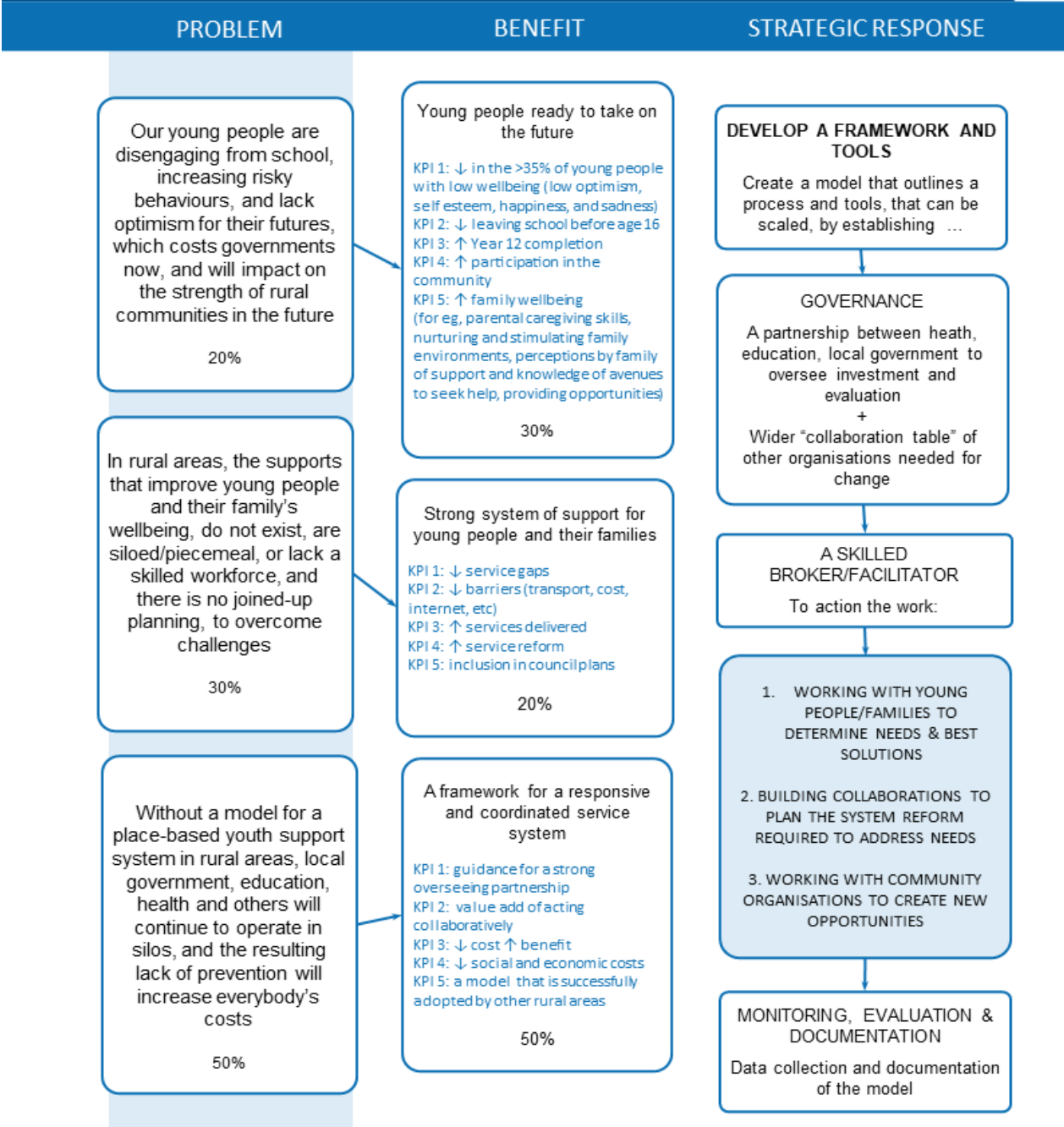
Investment Logic Map

Underpinning this project has been an investment logic map to ensure we create meaningful outcomes for young people.

Loddon, Buloke, Gannawarra, Swan Hill (investor) Partnership

Strong youth, strong communities (young people 9-18)

INVESTMENT LOGIC MAP
Program



Facilitator: Jeanette Pope

Version no: 1
Initial Workshop: 12 October 2020
Template version: 5.0