

Australian Research Alliance For Children and Youth

# **Establishing Alliance Action and Research Priorities:**

**Phase Two Consultations and Analysis  
with Practitioners, Indigenous  
Practitioners, and Children and Youths**

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# 1 Executive Summary

## 1.1.1 Introduction

The Australian Research Alliance of Children and Youth (the Alliance) seeks to identify research priorities for its strategic policy by consulting with a range of stakeholders. The present summary represents the results of the second phase of consultations with child and youth practitioners, Indigenous workers, and with a small sample of children and youth.

## 1.2 Methods

### 1.2.1 Practitioners

In total, 116 practitioners were consulted throughout Australia via face-to-face and telephone interviews, and a series of twelve group interviews in three states and the Northern Territory. The practitioners were sampled to ensure not only wide geographical distribution, but also a wide variety of services. The results were further complemented by several written submissions received by the Alliance from member organisations.

### 1.2.2 Indigenous Workers

To reduce unnecessary replication of previous research efforts and to ensure cultural sensitivities were observed, the Secretariat of National Aboriginal and Islander Child Care (SNAICC) was appointed to undertake consultations with Indigenous child and youth workers. SNAICC identified research priorities for children and young people through the following methods:

- ▶ a practitioner/stakeholder postal survey;
- ▶ a review of the findings from the 2004 SNAICC *Parenting Information* project (which included family and practitioner focus groups);
- ▶ a review of SNAICC Annual General Meeting and National Executive minutes from 1999 to 2003;

- ▶ a brief review of national published data reports on Indigenous children and families including Australian Bureau of Statistics and Australian Institute for Health and Welfare reports; and
- ▶ consultation with SNAICC National Executive members representing all States and Territories.

### **1.2.3 Children and Youth**

Ten pilot interviews were conducted with youth in Western Australia to explore the issue of ‘research priorities’. The results were compared to other youth consultation outcomes from around Australia. It was decided that further direct consultation with children and youths was unlikely to yield new information and hence was not necessary.

## **1.3 Results**

### **1.3.1 Practitioners**

The practitioners reasoned that all children have the same core needs and that any research agenda developed by the Alliance should first and foremost reflect such priorities. These needs, as expressed by the practitioners, were to ensure that children and youth have:

- ▶ a safe home environment;
- ▶ a feeling of inclusiveness within their community; and
- ▶ equitable access to public services that are holistic and flexible in nature.

Other than these priorities, practitioners held few opinions of what specific future research priorities the Alliance should aim for. Practitioners only appeared to have a basic appreciation of the research literature within their fields. Their usual exposure to research was through professional development activities, or while attempting to find specific information on a case-by-case basis. The practitioners tended to associate research literature with terms such as “esoteric” and “academic jargon” and felt that research needs to be written in “plain English”. There was also a feeling that research needed to be “more grounded in actual practice” thereby calling on researchers to concentrate upon applied research. The main barriers that practitioners suggested limited their access to current research included:

- ▶ their having little time to conduct literature searches;

- ▶ the “loads of information” they were forced to “wade through”, if and when they did search the literature; and

- ▶ their limited capacity to judge the merits of competing information.

Few practitioners were aware of existing initiatives such as the Australian Clearinghouse for Youth Studies. Nonetheless there was enthusiasm from practitioners for the Alliance to establish a centralised clearinghouse of existing child and youth research information, couched in lay terms and readily accessible via the Internet. The practitioners also felt that there is a “wealth” of “intuitive knowledge” and “insight” within their professions, gained via experience, that currently is neither well articulated nor exploited. The practitioners highlighted this belief by commenting that government policy rarely reflected the collective wisdom of child and youth agencies. The practitioners felt that it would be invaluable to capture “what is already known” by experienced practitioners and to disseminate this knowledge to other practitioners, researchers and policy makers.

### **1.3.2 Indigenous Workers**

There was much overlap between the results of the SNAICC consultations and those with the practitioners. For example there were calls for greater Indigenous practitioner consultation in the devising of research goals, and for there to be a centralised clearinghouse of Indigenous research and best practice. However the Indigenous practitioners felt it was important for Indigenous families, elders and communities to also be involved in the consultation process of devising research goals. The importance of a safe home environment and strong links with the community were identified as core needs of Indigenous children and youths, just as suggested by non-Indigenous practitioners. Thus the results reflected the fact that Indigenous children and youths have the same basic psychological needs as all other children. However it was felt that the physical needs of Indigenous children and youths, such as housing, nutrition and healthcare are far less likely to have been satisfied, introducing a much greater level of deprivation and urgency than experienced by most non-Indigenous Australian children and youths. The Indigenous practitioners suggested that lack of participation in mainstream early childhood education appears to predict poorer participation and retention rates in later schooling, contributing to subsequent economic exclusion and ultimately poverty. Thus they suggested that research

investigating the effects of early childhood education on young Indigenous people should be a priority. Education leading to improvements in the cultural health of young Indigenous people was also considered a means by which the cycle of poverty and abuse might be disrupted so Indigenous researchers also viewed this theme as a priority.

### **1.3.3 Children and Youth**

Interviews conducted with youth revealed that they had limited capacity to appreciate the concept of ‘research priorities’ for the Alliance. Suggestions were largely consistent with youth concerns mentioned by practitioners and those raised during other youth consultations instigated by national and state youth advisory councils and offices for youth affairs: promoting positive images of youth; involvement in decision-making (empowerment); substance abuse; homelessness; access to public spaces; employment; the environment; mental health; and provision of youth-specific recreational facilities.

## **1.4 Conclusions**

Non-indigenous and Indigenous child and youth practitioners suggested that the Alliance should prioritise its efforts on applied research emphasising the maintenance of safe and inclusive environments for children and youth, and the provision of holistic and flexible child and youth services. Existing research should be made more accessible by translating it into easily understood and actionable recommendations and making it available in a centralised location on the Internet. Emphasis should also be placed upon capturing and disseminating the depth of intuitive knowledge possessed by experienced non-Indigenous and Indigenous practitioners. The practitioners also demonstrated a reliable familiarity with the concerns raised during the youth interviews, validating them as a useful source of information. The pilot interviews with youth suggest a similar, but more surface appreciation of youth priorities. There appears to be little value in additional youth consultation on top of those activities already undertaken by other youth agencies and available in the literature. Overall, the present consultation activities suggest that while research should remain the domain of researchers, non-Indigenous and Indigenous

practitioners should be viewed as invaluable sources of information in their own right. It was also felt that researchers should routinely work in close partnership with non-Indigenous and Indigenous practitioners, as well as the children and youth, their families and the broader community, to ensure that the research is valid, relevant, intelligible and ultimately useful.

### **Research Infrastructure Priorities**

- 1. The Alliance facilitate greater cooperation between researchers and practitioners to produce research outcomes of practical relevance**
- 2. The Alliance assist child and youth agencies to incorporate robust evaluation strategies into their project proposals, either via networking with experienced researchers or through the distribution of generic evaluation guidelines**
- 3. The Alliance foster practitioner-driven policy advocacy through partnerships with researchers such that robust data collection methods can allow for more authoritative position statements**

### **Research Priorities**

- 1. The Alliance facilitate research to capture the intuitive wisdom of practitioners and create an accessible pool of practitioner knowledge**
- 2. The Alliance facilitate research into the efficacy of family preservation and reunification in the Australian context**
- 3. The Alliance facilitate research on ways to foster greater social capital and community connectedness for children and youth, and explore the potential for schools to serve as a major avenue for such**
- 4. The Alliance facilitate and disseminate existing and further research into the efficacy of early intervention strategies in the Australian context**
- 5. The Alliance research the efficacy of holistic and flexible care in the Australian context**



# 2 Introduction

**T**he Australian Research Alliance for Children and Youth (the Alliance) was established in 2002 to facilitate collaborative research to address problems affecting the health and wellbeing of young Australians. The Alliance has initially sought to identify research priorities that will achieve maximal impact upon child and youth wellbeing. To develop a corresponding research agenda, the Alliance instigated consultations with a wide variety of government and non-government organisations responsible for delivering services to young Australians. The first phase of this consultation strategy was undertaken by Professors Ross Homel and Jan Carter who conducted a large number of focus groups around Australia during October to December 2003 with academics, research officers, policy analysts and managers working in fields promoting the health and wellbeing of young Australians.

The Alliance designated a second phase of the consultation strategy to gain input from:

- ▶ practitioners directly involved in service delivery to young Australians;
- ▶ Indigenous people involved in research, policy and/or practice associated with the wellbeing of young Indigenous Australians; and
- ▶ young Australians themselves.

Professor Rob Donovan and Dr Owen Carter were appointed by the Alliance in May 2004 to execute this second phase of the consultation process. The Alliance requested a two-month turnaround dictating the use of efficient methodologies. Consultations were subsequently conducted in May and June 2004 using straightforward ‘walk-in/walk-out’ techniques to elicit points of view from the target groups with only limited exploration of the reasoning behind these opinions.

The following report is divided into separate chapters for the target groups, where the consultation methodology and results are outlined for each. This is followed by a final chapter that attempts to draw together the conclusions from each group to arrive at a final set of research priority recommendations.



# 3 Practitioners

## 3.1 Methodology

A qualitative approach was selected for consultations with practitioners, using a combination of individual in-depth and group interviews. The aim of the sampling method was to ensure systematic representation of a range of the potential points of view within the child and youth service industry. As such a broad variety of practitioners working towards the health and wellbeing of young Australians was sampled, including approximately equal numbers of practitioners who either deliver universal-type services to young Australians (e.g. education, health, sports, arts, etc.) and services to young Australians in particular need (e.g. foster care, juvenile justice, homelessness, etc.).

To gain an initial overview of the topic, pilot interviews were conducted with a selection of practitioners representing a broad cross-section of child and youth service delivery fields. These unstructured, face-to-face and in-depth interviews were conducted with ten practitioners from Western Australia and their concepts of ‘research priorities’ were explored. Each interview took approximately 1½ hours to complete. This sample of practitioners included a child health care nurse, a day-care centre worker, a pre-primary school teacher, a suburban primary school teacher, a rural school psychologist, a foster care worker, an Industrial Arts teacher, a youth worker, a priest working with the homeless, and an unemployment case manager. A number of themes emerged from these exploratory interviews regarding how practitioners viewed the concept of ‘research priorities’. The themes were used to establish a series of consultation protocols for a larger sample of practitioners from all regions of Australia.

Twelve group consultations were conducted: four in Western Australia; four in New South Wales; two in Victoria; and two in the Northern Territory. Participants were recruited to ensure representation of client age groups, with four groups being arranged with practitioners working in early childhood (zero to five years), four groups with practitioners working in late childhood (six to twelve years), and four

with practitioners primarily working with teenagers (13+ years). Half of the workshops involved practitioners working in universal-type services and half involved practitioners working with children in need. The stratification of workshops by age group, services and location is outlined in Table 1.

| <b>Table 1: Distribution of Practitioner Workshops by Age Group, Services and Location</b> |   |  |                                  |
|--|---|--|----------------------------------|
|  | <i>Early Childhood<br/>(0 to 5 years)</i> | <i>Later Childhood<br/>(6 to 12 years)</i> | <i>Teenagers<br/>(13+ years)</i> |
| <b>Universal Youth Services</b>  | Perth, Sydney                             | Perth, Darwin                              | Sydney, Melbourne                |
| <b>Services for Youth In Need</b>  | Sydney, Melbourne                         | Perth, Sydney                              | Perth, Alice Springs             |

Participants for the twelve groups were recruited by organisational members of the Alliance. Between May and June 2004, a total of 86 practitioners from 55 separate organisations participated in the twelve groups, averaging just over seven participants per workshop. Approximately equal numbers of participants worked for government agencies (54%) and non-government agencies (46%). The participants represented an experienced group of practitioners, on average having worked directly with children and youths for 17 years, ranging from one to 50 years.

At the beginning of each group, participants were asked to complete a brief questionnaire to identify the issues they felt most urgently needed addressing within their field. This served as a ‘warm-up’ exercise but also enabled participants’ views to be captured prior to contamination by subsequent group discussions. Responses to the questionnaire items were then used as a starting point for group discussion. In order to supplement the views of practitioners who participated in the groups with practitioners from states where groups did not occur, an additional twenty interviews were conducted via telephone with practitioners from Queensland, South Australia, Tasmania and the Australian Capital Territory. A teleconference was also conducted with practitioners in Alice Springs and a written contribution was received from the Australian Confederation of Paediatric and Child Health Nurses Incorporated (ACPCH). In keeping with our study objectives, the overall thrust of the consultations

was to identify and describe issues of concern rather than probing *why* these issues were of concern.

## 3.2 Results

The present sample of practitioners was concerned with the many and varied difficulties encountered in the day-to-day implementation of their responsibilities and were keen to discuss these at length. The practitioners represented an earnest group of individuals trying their best to provide quality services to young Australians, whilst facing large case loads, limited resources and imperfect systems. They generally felt overworked, undervalued, stressed, and to be delivering less than ideal services. This was coupled with an urgent sense that the services they were providing were of crucial importance to the future lives of those they served.

***“I want to do something different but I don’t know what to do”***

They expressed particular frustration at witnessing children and youths *“falling through the gaps of the system”* but lacking either the necessary resources or capacity to make a significant difference.

### 3.2.1 Priorities

Based upon the protocols developed during the pilot interviews, practitioners in the groups were asked to complete a questionnaire at the beginning of each workshop and to nominate those issues that they felt most urgently needed addressing in children and youth services. This was achieved via the question “what is the single most important issue that you think currently needs addressing within your field?” Responses were clustered into recurring themes, as outlined in Table 2.

From Table 2 it appears that research, reflected in its pragmatic form of evidence-based practice, is of relatively low salience to practitioners. Less than one-in-twenty practitioners mentioned it as their primary concern, and less than one-fifth mentioned it as one of their top three concerns. Nonetheless, further group discussion suggested that virtually all practitioners were supportive of the doctrine of evidence-based practice and recognised its potential to improve the efficacy of service delivery to children and youths. The few practitioners who had misgivings about the concept

**Table 2: Major Issues of Concern Raised by Practitioners (n=106)**

| <b>Issue</b>                                      | <b>Single Most Important</b> | <b>Mentioned in Top Three</b> |
|---|------------------------------|-------------------------------|
| 1. Social justice for all children and youths     | 22%                          | 33%                           |
| 2. Strengthening the family unit                  | 21%                          | 41%                           |
| 3. Service integration/holistic/flexible care     | 13%                          | 51%                           |
| 4. Societal engagement with young people          | 11%                          | 24%                           |
| 5. Early interventions                            | 8%                           | 15%                           |
| 6. Strengthening youth ties with community        | 5%                           | 22%                           |
| 7. Youth homelessness                             | 5%                           | 9%                            |
| <b>8. Evidence-based practice</b>                 | <b>4%</b>                    | <b>18%</b>                    |
| 9. Youth mental health                            | 4%                           | 17%                           |
| 10. Adequate funding for child and youth services | 3%                           | 12%                           |

were more dubious about the nature of the ‘evidence’ rather than the overarching concept itself; this will be discussed later. Practitioners from all fields and specialties were keen for more research to be undertaken to inform evidence-based practice as all felt their services had plenty of room for improvement. Evidence-based practice was also recognised as the best way to ensure that limited funding could be most efficacious.

***“evidence-based practice should be the basis for how further funding is used”***

The concept of evidence-based practice was therefore widely embraced by practitioners and this augurs well for their support for future research. It comes as no surprise that from the practitioners’ point of view, the usefulness of research was judged purely by its ability to inform better practice.

### **3.2.2 Research**

Having established a wide practitioner support base for evidence-based practice, the practitioners were asked to identify what kinds of specific research they thought was most needed within their field. Few practitioners had given the topic previous thought and at best were only able to offer very general suggestions. The practitioners gave an impression that their knowledge of current research was insufficient to be able to

authoritatively comment on the need for further research in specific areas. The practitioners were aware that a wide body of literature was available. However the immediate demands of their jobs, which usually involved high case loads, stressful conditions and time constraints, meant that they found it extremely difficult to find time enough to keep abreast of the research literature.

***“it’s hard enough keeping up with current knowledge to need even more research!”***

That is not to suggest that the practitioners felt entirely ignorant of research developments, just that their awareness was *“patchy”*.

***“we try and use current research but it’s really hit and miss as to what we come into contact with”***

Practitioners were keen to be *“brought up to speed”* with the latest child and youth research, however they appeared somewhat overwhelmed by the large body of research constantly being produced and reported within the literature.

***“we have a huge amount of info to wade through already”***

Other than limited time, the practitioners described a number of other barriers detailed below that restricted their access to current research.

***“there’s plenty of knowledge available but it isn’t easily accessible”***

Most practitioners reported attending professional development sessions as the chief method of maintaining their awareness of current research. However most practitioners had few opportunities to attend such sessions; perhaps a couple of times per year. Few thought that using libraries to gather research information was practicable due to the time consuming nature of such an activity. Most had Internet access and viewed this as a preferable and expedient method for obtaining information.

***“I think the Internet will provide many answers to information access”***

However, the varied quality of information available on the Internet was a cause for at least some concern.

***“there is a great deal of misinformation on the Internet”***

When asked what kind of information they currently sought from professional development days, research literature and the Internet, the practitioners emphasised that it was very much on a case-by-case basis depending on the immediate needs of their clientele. Although there was a responsibility felt to maintain familiarity with the current research literature as part of continuous professional development, few reported having the luxury to be able to do so to their complete satisfaction, due to other priorities.

The practitioners also complained about the interpretability of the available research literature. As most practitioners had no research background, the technical language used in research literature was felt to be a large impediment.

***“we need the research in plain English”***

Most practitioners viewed academic research as “*esoteric*” and far removed from the practicalities of their jobs. The term ‘ivory tower’ was mentioned in many groups.

***“researchers need to be more grounded in actual practice, rather than academic jargon”***

Much academic research was regarded as lacking face validity and not credible in “*real world*” settings, allowing practitioners to filter information to suit their own beliefs. This fuelled a common call by practitioners for researchers to work hand-in-hand with practitioners at “*grass roots level*” in order to produce relevant and practicable research. The practitioners also called for research to be routinely converted into guidelines that are “*easy to digest*” and were enthusiastic about the idea of a trustworthy “*one-stop shop*” website containing summarised information, couched in practical lay terms, resulting from the latest in child and youth research. They felt such would save them considerable time searching out, interpreting and judging the merit of the available research, and greatly facilitate evidence-based practice. The practitioners were asked why they did not use existing initiatives such as the *Australian Clearinghouse for Youth Studies* to achieve these ends, but few were even aware of such. Some practitioners said they would also like to see the information disseminated in “*good, practical, hands-on workshops*”.



Discussions surrounding the scientific method sparked comments by practitioners that academic rigour was often limiting to the type of information they were interested in. They held great store in intuitive knowledge gained through years of experience, but speculated that this was rarely captured in academic research.

***“lots of practitioners have huge intuitive knowledge but can’t articulate it”***

They felt that being able to capture and disseminate what practitioners “already know” would be just as useful as generating new research.

***“there is a wealth of understanding and insight that isn’t being exploited”***

The practitioners commented that a great deal of practice knowledge existed amongst the staff of different agencies and it was important that attempts be made to pool such knowledge. It was suggested that very little of this wisdom was communicated between agencies and that this had led to much replication of efforts in an industry that can ill-afford inefficiencies. There was also concern that practice wisdom not be lost over time.

***“reinventing of the wheel must stop”***

The practitioners were extremely keen to learn from other agencies about good local practices, what local resources they are making use of and what programs had been successful. Furthermore, it was thought extremely important that information not be lost over time. The practitioners viewed the Alliance as a natural receptacle for the pooling of such knowledge.

In summary, practitioners were largely preoccupied with coping with the day-to-day grind of their work and viewed a lack of resources a far more pressing problem than generating new research. Nonetheless, they were keen to learn what the latest research suggested in terms of evidence-based practice and would be appreciative of any efforts to expedite access to this knowledge. They generally viewed the realm of academia as esoteric, often limiting and somewhat out of touch with the realities of their jobs. This was juxtaposed against practitioner wisdom gained from many years of on-the-job experience, which they felt in itself would be a valuable resource to exploit and disseminate.

### **Research Priority 1**

The Alliance facilitate greater cooperation between researchers and practitioners to produce research outcomes of practical relevance

### **Research Priority 2**

The Alliance facilitate research to capture the intuitive wisdom of practitioners and create an accessible pool of practitioner knowledge

The practitioners had great difficulty disassociating the concept of research priorities from more general service gap priorities within the child and youth field. As this was the case, an attempt was made to derive further research priorities from the other issues of concern that the practitioners felt the need to express.

#### **3.2.3 Funding**

Nearly all practitioners stated that their services needed more funding than currently provided from government sources. This theme was expressed in various ways, such as “high case loads”, “large class sizes”, “lack of proper equipment”, “long waiting lists”, “lack of accomodation for the homeless”, etc. The consistent theme expressed by practitioners was that services currently sit as a “band-aid” measure, providing sub optimal care to children and youths as a result of high demand and limited funding.

***“We are agencies of last resort and nothing else”***

In addition to only being able to provide ‘band-aid’ solutions to child and youth problems, practitioners felt that lack of funding also was largely responsible for difficulties encountered trying to attract and retain quality staff.

***“There’s a worrying lack of qualified and experienced professionals within the field”***

This was a cause for concern for the practitioners because it was felt to compound the substandard care that children and youths were receiving. There was little optimism for change so long as the practitioners continued to be overstretched with high caseloads and poor remuneration.

While the practitioners tended to give the impression that increased resources would serve as a panacea to their professional woes, there were several aspects of funding

that attracted particular comment. For instance practitioners from non-government organisations (NGOs) were particularly demoralised by the competitive funding process, which forced them to compete for funding with other NGOs. This was felt to foster unnecessary and counterproductive rivalry between organisations aiming for the same goals.

***“the competitive funding process is killing camaraderie”***

Practitioners considered it paradoxical that greater efficiencies could be achieved by fostering inter-agency collaboration yet the system of competitive funding worked very much against such efforts. There was also discontent surrounding the “silos of funding” for specific program delivery. Piecemeal funding was considered ineffectual, inefficient and lacking in long-term strategic vision.

***“project funding is so ad hoc”***

The practitioners appeared entirely disillusioned with sporadic project funding, which they claimed would often be cancelled just as a project was firmly established and starting to produce positive outcomes for children and youth. It was pointed out that grants for projects were routinely inadequate to provide the service in the first place and left even less scope for proper evaluation. This was recognised as a ‘catch-22’ because it is difficult to argue to government agencies for the continued funding of projects without robust evidence that they are producing tangible benefits, which can only be produced via well designed and executed evaluations.

**Research Priority 3**

**The Alliance assist child and youth agencies to incorporate robust evaluation strategies into their project proposals, either via networking with experienced researchers or through the distribution of generic evaluation guidelines**

**3.2.4 Policy**

Most practitioners recognised a direct link between funding and government policy. However they appeared largely disillusioned by the process of advocating for policy change. There was a general mistrust of policy makers, with the practitioners holding an impression that policy makers are misinformed and misguided about the realities at

the ‘coal face’. The practitioners highlighted this fact by commenting that government policy so rarely reflected the collective wisdom of child and youth agencies.

***“policy makers don’t know what’s going on”***

Many practitioners related experiences of being engaged in ostensible consultation activities with government authorities, only to feel that the whole process had been rather tokenistic.

***“it already seemed liked they had made up their minds”***

The practitioners also claimed their organisations received “loads” of questionnaires from government departments, again ostensibly for policy consultation purposes. The practitioners held the opinion that in order to do justice to such questionnaires, serious consideration and time was required to respond to them properly. However, as time and resources are always scarce, the questionnaires were rarely filled out well, or at all. The practitioners also commented that there was often an unrealistically short response time allowed for such consultations.

***“it must be an extremely important issue for NGOs to commit resources to commenting on policy”***

The practitioners were also critical of government policy makers who embarked upon “international fact-finding junkets” to look for overseas solutions to local problems. The practitioners felt strongly that local solutions to local problems were always the best policy and that practitioners are the best placed people to provide input into policies regarding children and youths.

***“you wouldn’t ask an engineer to comment on health matters...”***

The practitioners therefore felt it was extremely important that they have greater representation in policy decision making regarding children and youth at both the policy development and board level.

**Research Priority 4**

**The Alliance foster practitioner-driven policy advocacy through partnerships with researchers such that robust data collection methods can allow for more authoritative positioning statements**

### **3.2.5 Interagency Collaboration**

It was frequently commented that there is very little in the way of cooperation between major service providers within the youth field, or at best there is a “gap” in collaboration between agencies. Some practitioners believed that there is no current capacity amongst service providers to supply integrated service delivery. Nonetheless there remained a widely held desire among the practitioners for greater interagency collaboration.

***“Interventions need to be effective collaborative efforts”***

***“homogeneity does not work but collaboration does”***

Collaboration was variously considered “tantamount” and “an essential ingredient” by practitioners with the main benefits envisaged as a reduction in duplication of efforts, a more holistic approach to young people’s needs, a pooling of knowledge, and ultimately better outcomes for young Australians. It was reasoned that the limited capacity various agencies had for research would be bolstered greatly by inter-agency collaboration.

### **3.2.6 Youth Consultation**

Youth consultation was taken very seriously by the practitioners. In their experience young Australians often have no say in decisions made about themselves, even in things as significant as family contact. It was felt that failing to confirm children’s and youths’ own feelings and desires risked ignoring important information and increasing alienation.

***“We can’t always assume we know best for the kids”***

For these reasons, child inclusive practice was considered an essential ingredient of good practice. However it was commented that children and youths cannot always articulate their emotions.

***“Children sometimes find it difficult to express what they are feeling”***

The practitioners also pointed out that due to their lack of articulation, young Australians were very easy to discredit as spokespeople. As such, the practitioners held high regard for efforts towards eliciting the emotions, thoughts and feelings of children and youth.

### **3.2.7 Working with Families**

Although child inclusive practice was deemed essential, there was also a great deal of emphasis placed upon family centred service delivery.

***“We need to engage with parents as much as with kids”***

A caring family environment was considered to be one of the fundamental needs of young people. In the experience of the practitioners, family, friends and a secure home environment were the biggest priorities for children and youths. Similarly, disconnection from family networks was viewed as one of the biggest problems young people encountered. The practitioners suggested children and youths who experienced family breakdown were at risk of rejection and attachment problems and to suffer due to a lack of good role-modelling. For these reasons, the practitioners valued efforts towards family preservation and reunification. Some practitioners suggested there is a “paucity” of knowledge about the efficacy of family reunification, while others were aware of American and British research on the topic but no corresponding Australian data. The practitioners were therefore keen to see Australian research conducted on the benefits of family reunification.

#### **Research Priority 5**

**The Alliance facilitate research into the efficacy of family preservation and reunification in the Australian context**

### **3.2.8 Social Capital**

Many practitioners made comments about the importance of social capital for children and youths. The practitioners credited community connectedness with empowerment, a sense of belonging and pride. Alternatively, community exclusion was considered to be highly damaging and likely to lead to a sense of isolation, rejection, and encourage delinquency. The practitioners perceived that social capital within communities had greatly diminished, not only for children and youths, but for their parents also.

***“the village has disappeared”***

Symptomatic of this trend, the practitioners noted that there appeared to be a lowered sense of reciprocity, with lower community ownership of child and youth outcomes.

In recognition, the practitioners were keen to see greater investment in social capital research and development, but speculated that it was not valued highly by policy makers.

***“social capital research doesn’t seem to be particularly valued”***

Many practitioners thought that the community could be “rediscovered” through the school, having remained one of the few institutions still consistently used within a community.

***“schools are in the midst of the community”***

This led to further discussion amongst practitioners about schools needing to “throw off the old model” whereby the sole focus upon education could shift towards a much more holistic range of child and family services.

***“we need to become more flexible about the definition of a school”***

One practitioner made the following quote from Andrew Buller which was widely endorsed by other practitioners as encapsulating the need for change within the school system.

***“we have schools based upon a 19<sup>th</sup> Century model being run by 20<sup>th</sup> Century teachers for 21<sup>st</sup> Century children”***

### **Research Priority 6**

The Alliance facilitate research on ways to foster greater social capital and community connectedness for children and youth, and explore the potential for schools to serve as a major avenue for such

### **3.2.9 Early Intervention**

The practitioners frequently mentioned the concept of early intervention as an area of importance. Many noted a shift towards early intervention strategies, and they were largely supportive of the rationale and stated that it made good intuitive sense.

***“early intervention has been the big catch-cry for the past few years”***

However some practitioners pointed out that extending early intervention to its logical conclusion would mean that to be most cost-effective, interventions should be targeted at the parents even before a child is born. Others pointed out that tests in early childhood were not particularly useful and therefore early detection was not a straight forward endeavour. Practitioners working in early childhood suggested that they were forced to rely much more heavily upon intuition than objective tests in their determinations of early detection. Other practitioners were concerned that the shifting focus towards early intervention should not come at the expense of children and youths whose problems are missed by early detection. Finally, some practitioners commented that for all the energies being devoted to early intervention strategies, there has been very little Australian research on the benefits of such.

### **Research Priority 7**

**The Alliance facilitate and disseminate existing and further research into the efficacy of early intervention strategies in the Australian context**

#### **3.2.10 Holistic and Flexible Care**

The practitioners suggested that the current play of fragmented services and silo funding models was inefficient, short-term in outlook and ineffective.

***“The system is superficial - we need to foster a sense of belonging, inclusion and welcome”***

The practitioners held the common desire for longer-term and “multi-strategic” planning of child and youth service provision, most commonly encapsulated by the term ‘holistic care’.

***“Let’s be holistic”    “Care needs to be holistic”    “Holistic care is essential”***

The need for holistic care was felt strongly amongst the practitioners. They were intuitively confident that holistic care would provide much better outcomes for children and youths, but they were unaware of hard data to back such claims. It was therefore proposed that evaluating the efficacy of holistic care for children and youths should be a priority.



The concept of holistic care was closely related to another theme that practitioners felt strongly about: flexibility in care provision. Many practitioners related examples of children and youths missing out on services because their circumstances did not fit within policy guidelines dictated by funding bodies.

***“some people who don’t neatly fit into a funding category miss out altogether”***

***“the service only works well for those who fit the model”***

Allowing flexibility within child and youth services was deemed to be of key importance to achieving positive outcomes. The practitioners recognized the need for sufficient flexibility to be able to fit a service around the needs of their clientele, rather than their clientele having to meet the agency’s criteria. Thus it was deemed essential by practitioners that sufficient flexibility be available to allow service provision to be adapted to each unique set of circumstances.

***“We need to start with the child and apply resources as necessary”***

It was reflected that all children have the same needs and must be treated with the same expectations. Thus the ultimate goals for children and youths should always be the same, but there should be flexibility in how these are achieved.

### **Research Priority 8**

**The Alliance research the efficacy of holistic and flexible care in the Australian context**

### 3.3 Conclusions

From the results of the present consultations, it appears that the practitioners hold few opinions about specific research priorities for the Alliance. Their usual exposure to research is through professional development activities or while attempting to find specific information for their clientele on a case-by-case basis. The practitioners tend to associate research literature with terms such as “*esoteric*” and “*academic jargon*” and feel that more research needs to be written in “*plain English*”. They also think that research needs to be “*more grounded in actual practice*”. While practitioners accede that research should remain the domain of researchers, they feel they should be viewed as an invaluable source of data in their own right. They feel that their “*wealth*” of “*intuitive knowledge*” and “*insight*” of child and youth matters, gained via many years of practical experience, is currently neither well articulated nor exploited. Thus the practitioners feel that it would be invaluable to capture “*what is already known*” by practitioners and to share this knowledge with other practitioners, researchers and policy makers. Researchers should also routinely work in close partnership with practitioners to ensure that research becomes more valid, relevant, intelligible and ultimately useful.

Despite a lack of specific research priorities, several global themes arising from these consultations suggest that practitioners feel that all children have the same core needs and that any research agenda developed by the Alliance should first and foremost reflect such priorities. These needs, as expressed by the practitioners, are to ensure that children and youth have:

- ▶ a safe and nurturing home environment;
- ▶ social connectedness; and
- ▶ equitable access to public services that are holistic and flexible in nature.

# 4 Indigenous Practitioners

In October 2002 the National Health and Medical Research Council (NHMRC) endorsed a strategic framework for improving Aboriginal and Torres Strait Islander health and wellbeing through research.<sup>1</sup> This document was the result of consultation with 250 health professionals and is relevant to the goals of the present research project in a number of ways. First, the document stressed that many Indigenous populations had been ‘over researched’ without a coordinated attempt to pragmatically harness the information already gathered. Second, it highlighted the importance of being culturally sensitive in order to gather valid and reliable research data. Third, the document stressed the importance of building the pool and skill base of Indigenous researchers. With these factors in mind, consultation with Indigenous practitioners for the present project was considered most appropriately carried out by an Indigenous organisation and Indigenous workers themselves.

The Secretariat of National Aboriginal and Islander Child Care (SNAICC) was approached to undertake Indigenous practitioner consultations for the present project. SNAICC is an organisation representing the interests of young Indigenous people from birth to 18 years of age, and undertakes research projects to improve the health and wellbeing of this age group on an ongoing basis. When approached, the organisation expressed support for the goals of the present project and was keen to see pragmatic recommendations produced without the necessity of ‘reinventing the wheel’. As such SNAICC was appointed to review the current research and undertake consultations with Indigenous researchers for the present project.

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<sup>1</sup> The Aboriginal and Torres Strait Islander Research Agenda Working Group of the NHMRC (2003) *The NHMRC Roadmap: A strategic framework for improving Aboriginal and Torres Strait Islander Health Through Research*. National Health and Medical Research Council URL: <http://www.nhmrc.gov.au/publications/pdf/r28.pdf> [accessed 17 May 2004]

## 4.1 Methodology

SNAICC identified research priorities for young Indigenous people through the methods outlined in Table 3.

**Table 3: Data collection methods for the Indigenous practitioner consultations**

- A practitioner survey;
- A review of the findings from the 2004 SNAICC Parenting Information project (which included parent/family and practitioner focus groups);
- A review of SNAICC Annual General Meeting and National Executive minutes from 1999 to 2003;
- A brief review of national published data reports on Indigenous children and families including ABS and AIHW reports; and
- Consultation with SNAICC National Executive members representing all States and Territories.

The methodology adopted by SNAICC asked Indigenous practitioners to comment on research priorities under the following predetermined headings:

- ▶ Health;
- ▶ Child care development;
- ▶ Protection;
- ▶ Family income;
- ▶ Education;
- ▶ Employment;
- ▶ Housing;
- ▶ Recreation and the arts; and
- ▶ Juvenile justice and crime.

As such, the issues raised by respondents cannot be considered strictly unprompted, thereby reducing the ability to infer faithful Indigenous practitioner priorities from the data. Nonetheless a wealth of wisdom and insight was yielded by the consultation process enabling SNAICC to recommend 56 research priorities. The full SNAICC report forms a separate document of 134 pages. Hereafter is a brief distillation of that report.

## **4.2 Results**

### **4.2.1 Research**

Similar to the non-Indigenous practitioner consultations, the Indigenous practitioners consulted by SNAICC had difficulties differentiating between service gap priorities and research priorities; developing strategic research questions was largely unfamiliar territory to them. The chief interest of Indigenous practitioners was program and service delivery, and they were interested in research insofar as it could suggest improvements in these areas. Thus, similar to the non-Indigenous practitioners, they were most interested in: evidence-based practice; documenting services that were engaging well with young Indigenous people; pooling Indigenous practitioner knowledge; and creating a centralised database of Indigenous research findings. Like non-Indigenous practitioners, they felt that it was important for researchers to collaborate with them in order to produce relevant research outcomes, but it was also felt that this collaboration should be extended to Indigenous family members, Elders and the larger community.

### **4.2.2 Historical factors**

SNAICC emphasized that historical factors of forced removal from traditional lands and cultural assimilation permeated all other issues of concern to young Indigenous people. Historical factors were credited with a loss of identity and breakdown of community kinship systems and Indigenous lore, a lack of educational and employment opportunities leading to economic exclusion and associated entrenched poverty, inadequate housing, poor nutrition and poor health. Interestingly, the concerns highlighted by SNAICC of Indigenous community disintegration resonated with similar concerns raised by participants in the non-Indigenous practitioner consultations regarding a lack of social capital and community exclusion of children and youths.

### **4.2.3 Safe Home Environment**

Within the confines of the prompted themes, Indigenous practitioners suggested that the single area of most urgent priority was promoting a safe, healthy and supportive family environment for young Indigenous people. Discussion surrounding this theme

encompassed a number of factors: nurturing; parenting education; security; parental substance abuse; and family violence issues. Similarly to the non-Indigenous practitioner consultations, it was recognised that a safe home environment is one of the core needs of children and youths. However within Indigenous cultures it was noted that the concept of ‘the family’ is a central aspect of cultural identity with extended family members, such as grandparents, uncles, aunts and cousins being equally as important as immediate family members (parents and siblings). The Indigenous practitioners therefore viewed as a priority the conducting of research that would facilitate safe, healthy and supportive family environments for Indigenous children and youths, but encompassing the extended family as well as the immediate.

#### **4.2.4 Nutrition**

The area next most frequently cited as high priority by the Indigenous practitioners was nutrition. Those consulted appeared mainly concerned with the impact of inadequate nutrition on the behaviours and ability of Indigenous children to concentrate at school, as well as the impact on their general health and development and ability to resist disease and infections, particularly Otitis Media. Thus another priority for Indigenous practitioners was for research to be conducted that might facilitate greater nutrition in Indigenous children and youths.

#### **4.2.5 Education**

Early childhood education was named as the third most important research priority area. It was suggested by the Indigenous practitioners that Indigenous participation in child care and early childhood education is likely to be predictive of later participation and retention rates at school. The Indigenous practitioners associate education in turn with greater economic participation and empowerment. Thus the Indigenous practitioners called for the instigation and/or dissemination of research regarding the value of Indigenous participation in early childhood education on later school participation and retention rates.

Indigenous practitioners also felt that young Indigenous people sorely needed education to restore “cultural health” so as to strengthen their sense of cultural identity, pride and ties to their communities. It was felt that the restoration of cultural health would serve as a means of breaking the multi-generational cycle of poverty

encompassing a large proportion of Indigenous Australians. Thus the Indigenous practitioners saw research to test the efficacy of cultural education as another priority.

#### **4.2.6 Juvenile Justice**

Juvenile justice was identified as a major issue for Indigenous children and youths due to their vast over-representation within this system. The Indigenous practitioners were chiefly concerned that criminal behaviour was being modelled by older family members, leading to learned behaviours and a belief that criminal behaviour is acceptable. However Indigenous youth participation in petty crime was largely considered to be symptomatic of issues already mentioned and the Indigenous practitioners therefore did not consider juvenile justice to be a higher research priority than any of these.

### **4.3 Conclusions**

The Indigenous practitioners felt it was important for not only them, but families, elders and communities to all be involved in the devising of research objectives. This would seem particularly appropriate given that the importance of a safe home environment and strong links with the community were identified as core needs of Indigenous children and youths. This overlapped to a great degree with the core needs identified by non-Indigenous practitioners. However, Indigenous practitioners also suggested that the physical needs of Indigenous children and youths, such as housing, nutrition and healthcare are far less likely to have been satisfied, introducing a much greater level of deprivation than experienced by the average non-Indigenous child or youth. A lack of Indigenous participation in mainstream early childhood education was thought to predict poorer participation and retention rates in later schooling, contributing to subsequent economic exclusion and ultimately to poverty. Research investigating the follow-on effects of early childhood education on young Indigenous people may therefore be profitable. Research investigating ways to improve the cultural health of young Indigenous people was also considered a means by which the cycle of poverty might be disrupted and may also warrant investigation. Although juvenile justice was considered an area of major concern for young Indigenous people, it was not considered to be an area of greater research priority than those

fostering a safe home environment, a supportive family network, nutrition, physical health and cultural health.



# 5 Children & Youth

A great deal of activity has occurred over the past decade with various government and non-government organisations consulting with young Australians about issues directly affecting them. There appears to be a genuine commitment from these organisations to incorporate young Australians' perspectives into policy decisions that affect the age group. Evidence of government agencies undertaking youth consultation strategies include those with an obvious mandate, such as the Commonwealth Department of Family and Youth Services (the National Youth Roundtable), the Youth Advisory Council of the NSW Office of Children and Young People, the Victorian Government's Office for Youth Round Tables, the Queensland State Youth Advisory Council, the Western Australian Office for Youth Affairs, the Youth Affairs Council of South Australia, the Tasmanian Office for Youth Affairs, the Northern Territory Office for Youth Affairs, and the ACT Department of Education, Youth and Family Services. In addition to the youth agencies, a diverse range of other agencies report undertaking youth consultations, for example the NSW Department for Local Government, the Business Council of Australia, the Australian Broadcasting Commission, the Tasmanian Bicentenary Office, and the Australian Divisions of General Practice, to name a few. There is also an abundance of information available from various youth organisations on protocols for organisations to set up further youth consultations, such as from the Australian Youth Foundation.<sup>2</sup> The consensus from such guidelines appears to be that consulting with children 12 years and older is appropriate for matters relating to policy. The literature also notes that participation in such programs is often by those youth who actually need it least. The most vulnerable, those living in the riskiest conditions, may be preoccupied with more immediate life issues: housing, security, money, and simply reducing harm in their environments. This is particularly true for youth on the streets.

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<sup>2</sup> Australian Youth Foundation (1998) *Youth Partnership and Participation* URL: [http://www.youngaustralians.org/resources\\_links/Publications/youthpart.pdf](http://www.youngaustralians.org/resources_links/Publications/youthpart.pdf) [accessed 29 June 2004]

## 5.1 Methodology

Pilot interviews were conducted with ten Western Australian youths aged between 12 and 19 years of age (average age 16 years). The youths included a mixture of male and females from regional and metropolitan settings, multicultural backgrounds, and included high school students, TAFE and university students, (former) street kids, and unemployed youth. The pilot interviews with youths were conducted face-to-face and in an unstructured format. Each interview ranged in duration from twenty to forty minutes.

## 5.2 Results

As with practitioners and Indigenous child and youth workers, the consultations with youths suggested they had conceptual difficulty differentiating between research priorities for the Alliance and more general issues of concern to youths. As such it was the concerns that were noted, as outlined hereafter.

### 5.2.1 Empowerment

Being listened to and taken seriously was consistently the highest priority of the young people. They appeared keen to be participatory members of the community and contribute their opinions as to how their community is run. Their wish to contribute opinions to community decision making processes included, but was not restricted to, matters directly related to youth. For instance, topical issues such as the Environment were matters that the youths were keen to give opinions on, as well as issues directly affecting them, such as the availability of recreational facilities. However, the young people felt largely marginalised by society and felt that they had neither opportunities to voice their opinions nor a receptive adult audience. In this respect it appeared that the youths generally felt undervalued by society.

***“we’re meant to be ‘the future’ but everything’s always about helping old people and families”***

### 5.2.2 Negative Youth Images

Some youths complained that young people are frequently portrayed in a negative manner, especially in the media. They thought youths are stereotyped and unfairly associated with delinquency, antisocial behaviour and acts of violence.

***“old ladies always seem scared of me”***

The youths described this negative stereotype manifesting itself not only in the distrustful reactions of the adult public, but also those of authority figures, who disliked youth congregations in public places, such as parks, car parks and shopping centres.

***“we just want to be able to hang out with our mates and not be hassled”***

Several youths described being discriminated against by security guards at shopping centres who forced the youths to leave under the assumption they were shop lifting. This raised the issue of a lack of recreational facilities specifically catering to young people, with the youths complaining of having “no where else to go”. Although not articulated by the youths during the pilot interviews, their comments were symptomatic of the broader concept raised by practitioners of youths being made to feel excluded from society.

### 5.2.3 Schooling

The youths described feeling a large amount of societal pressure placed upon them to achieve well academically.

***“there’s heaps of pressure to do well at school and if you don’t then you’re not good enough”***

With such a premium placed upon education, scholastically unsuccessful youths were made to feel like failures and lesser members of society. However these youths rightly felt that they were entitled to just as much support as those who did well at school, but did not feel that this support was as forthcoming. The youths expressed some dissatisfaction with the limited pathways available to them in terms of school and vocational training and it was suggested that ‘the system’ needed to become more

flexible so as to provide more options for the youths. This mirrored the call from practitioners for more holistic and flexible service provision to children and youth.

#### **5.2.4 Employment**

Gaining future employment was a large preoccupation with the youths. Most of the young people reported seeking some form of part-time or full-time work. Getting their “*foot in the door*” was viewed as one of the major challenges.

***“to get a job you need experience but how can you get experience without a job in the first place?”***

Some of the youths were weary of employers taking advantage of them by paying less than award wages. The youths felt vulnerable insomuch as they lacked the confidence to ‘stick up’ for themselves. Some of the older youths in part-time and casual employment also described problems encountered with the award wages system whereby it was required that their wages increase for each year they grew older but their employers would react by giving them steadily less hours in preference to newer, younger and cheaper employees.

#### **5.2.5 Substance Abuse**

Alcohol and other drug use was frequently mentioned by the youths as an area of concern. However the youths appeared to have difficulty articulating the nature of the actual ‘problem’ other than a general awareness of an association between substance abuse, health issues and a propensity for delinquent behaviours. Although many of those interviewed had drunk alcohol and experimented with other intoxicating substances, none viewed their own behaviour as a particular problem; their stated concern about substance abuse and youths did not appear to stem from personal experiences, but rather what they had heard from the negative media reports (as described previously). Thus the present sample had only a limited capacity to comment upon this issue.

#### **5.2.6 Homelessness**

Some of the youths sampled were former street kids who had run away from home on previous occasions. These youths suggested that their reasons for running away were due to domestic conflict and violence.

***“Mum’s new boyfriend moved in and started trying to tell me what to do”***

More than anything else, the youths emphasised the lack of safety and people to trust whilst being on the streets, coupled with the immediate concern of where to sleep each night.

***“one night when I was trying to sleep in a shop front this other homeless guy just kept staring at me for hours and I didn’t want to go to sleep because he was creeping me out”***

Thus these themes stemmed back to the need for a safe, inclusive and nurturing home environment, as discussed previously.

### **5.2.7 Social Networks**

It was evident that networks of friends were highly important to the youths and gaining and maintaining the acceptance of these peers was generally more important to them than gaining the acceptance of adult society, aside from their own families. The youths described various conformist pressures being imposed upon them by their families, peers and society. Youth norms involving fashions in clothing, music, pastimes and behaviours served as powerful conformist pressures. In a paradoxical twist, many of the youths also appeared to be conforming to peer demand for non-conformity to societal norms. From discussions it appeared that the youths identified themselves as a distinct sub-culture separate from the adult community, fostering a sense of disengagement from broader society. Societal pressures described by the youths included a large emphasis on academic and/or vocational success as previously discussed. Where the demands of peers and society conflicted, peer demands appeared to be more important to the youths. However when the demands of family and peers conflicted, this appeared to be a cause of great tension and stress for the youths. Likewise, when familial and societal demands coincided but these conflicted with peer demands, the tensions and stress levels for the youths was increased. This theme as raised by the youths overlapped greatly with the themes raised by the practitioners who suggested that: family and friends were extremely important to children and youths; and children and youths were largely disengaged from the community.

## 5.3 Conclusions

The issues of concern raised by the youths were largely consistent with the themes mentioned by practitioners in the present consultation. There was also a large degree of overlap with issues previously identified from youth consultations instigated by various government and non-government child and youth agencies and made available in the literature: promoting positive images of youth; involvement in decision-making (empowerment); substance abuse; homelessness; access to public spaces; employment; the environment; mental health; and provision of youth-specific recreational facilities. To illustrate this overlap, Table 4 highlights the results of the *National Youth Survey 2004* conducted by Mission Australia with youths aged 11 to 24 years.

**Table 4: National Youth Survey 2004 results (n=8,500)<sup>3</sup>**

| <b>What young people value</b> | <b>(%)</b> | <b>Issues of importance to young people</b> | <b>(%)</b> |
|--------------------------------|------------|---|------------|
| Friendships/Relationships      | 80.2       | Alcohol & other drug issues                 | 43.5       |
| Independence                   | 46.0       | Bullying/emotional abuse                    | 36.3       |
| Being valued                   | 45.1       | Stress                                      | 35.1       |
| Peer acceptance                | 38.3       | Suicide/self harm                           | 33.7       |
| Employment                     | 33.0       | Family conflict                             | 32.2       |
| School satisfaction            | 31.5       | Depression                                  | 29.9       |
| Financial security             | 19.3       | Physical / sexual abuse                     | 29.7       |
| Environmental issues           | 8.6        | School problems                             | 28.2       |
|                                |            | Sexuality                                   | 19.2       |
|                                |            | Discrimination                              | 15.9       |

It is therefore evident that the pilot interviews from the present consultation yielded similar themes of concern to those from much larger samples of Australian youths. As such it was determined that replication of direct youth consultation was unnecessary as it would be unlikely to yield specific new information useful to the Alliance consultation directives.

<sup>3</sup> Source: Mission Australian (2004) *National Youth Survey 2004: Key and Emerging Issues*. Research and Social Policy, Mission Australia, Sydney. URL: <http://www.missionaustralia.com.au>

# 6 Global Conclusions

It was difficult for all three target groups in the present consultation to separate research priorities and general issues of concern relating to young Australians. However the areas of main concern suggested by the target groups allowed an inference to be made about of how themes of concern should be prioritised. The concerns of the non-Indigenous practitioners, Indigenous practitioners and youths themselves suggested that the Alliance should prioritise its research efforts on the maintenance of: safe home environments for children and youths; and the strengthening of child and youth ties with the community. In an environment of fragmented service delivery and sporadic project funding, non-Indigenous practitioners indicated that research efforts promoting holistic and flexible child and youth service provision should also be a priority. In comparison, Indigenous practitioners were concerned that research be conducted on ways to improve young Indigenous peoples' nutrition and health, and cultural and vocationally related education levels.

Both non-Indigenous and Indigenous practitioners felt that priority should also be given to disseminating existing research by translating it into easily understood and actionable recommendations and making it available in a centralised location, preferably on the Internet. Thus Alliance efforts towards providing a clearinghouse for child and youth research are likely to be well appreciated by non-Indigenous and Indigenous practitioners alike.

It was also felt that priority should be given to capturing and disseminating the depth of intuitive knowledge already possessed by experienced practitioners. Likewise it was felt that information about particularly successful existing programs engaging young Australians should be documented and disseminated.

The practitioners appear to be well placed to appreciate both the concerns raised by children and youths and the major issues contributing to their problems. That practitioners in the present consultation process demonstrated a reliable familiarity with the concerns raised during the youth interviews, validates them as a useful source of information. The pilot interviews with youth suggest an overlapping, but more

surface appreciation of youth problems, largely dictated by personal experience. There appears to be little value in additional youth consultation on top of those activities already undertaken by other youth agencies and available in the literature. To a certain extent, this seems to contradict the emphasis that the practitioners themselves placed upon the importance of youth consultation. It is therefore likely that value remains in consulting with children and youths, but this might be most usefully directed at consulting with those young Australians specifically affected by the research topics under investigation.

Overall, the present consultation activities suggest that while research should remain the domain of researchers, non-Indigenous and Indigenous practitioners should be viewed as invaluable sources of information in their own right. It was also felt that researchers should routinely work in close partnership with non-Indigenous and Indigenous practitioners, as well as the children and youth, their families and the broader community, to ensure that research is valid, relevant, intelligible and ultimately useful.