Report on the findings from Salisbury Communities for Children Consultations with Primary School Children.

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Abstract

This study consulted children aged 5 to 12 years living in the eastern suburbs of Salisbury. It explored their awareness of sources of support available to children and families. It also sought information from them about the community resources they and their families currently use, and those they would like to have access to, as well as their ideas about what would facilitate access to these resources, and what would improve their lives and communities. Data was collected from 38 children at four schools via small group discussions. Findings reveal that children are generally aware of support systems at school, but have limited awareness of community support systems. Although children knew of many community sports resources, their access to these is limited by financial and transport constraints, and only one of the schools had regular out-of-class school sport teams. Although the children show an interest in the Arts, they knew of no out-of-class facilities or opportunities to support this. Results are discussed in relation to FaHCSIA *Guiding principles for Communities for Children service strategies* (2009), the research literature about promoting children's resilience in the face of adversity or stress and the factors that support or are deleterious to primary school-aged children's development, the *Report on the findings from Salisbury Communities for Children Primary Schools Consultations* (Swansson & MacKenzie 2009) and the study's own limitations. Finally recommendations are made for strategies to support the development of primary school-aged children in the eastern suburbs of Salisbury.

Background

What do we know about this cohort of 6 to 12 year-olds in the eastern suburbs of Salisbury?

The AEDI (Australian Early Developmental Index) measures young children's physical, social, emotional, language and cognitive development, their well-being, communication skills and general knowledge shortly after school entry. AEDI 2006 results for the Salisbury East area http://www.rch.org.au/australianedi/results.cfm?doc_id=10381, indicate that although about half of the 5-year-olds in the Salisbury East area were performing well in one or more developmental domains, 29% of were developmentally vulnerable in one or more domains. For example, as many as 13% were not doing well on measures of emotional maturity; that is they had trouble concentrating, managing their negative emotions and were not ready to help others. These children are now 8-year-olds. The AEDI was only conducted in 2006, but it seems reasonable to suppose that results for the years immediately before and after 2006 would have been similar. That is, the cohort of 6 to 12 year olds in the Salisbury East area would include a large proportion of children who entered school with developmental difficulties.

The importance of the years before school for later outcomes.

Several decades of strong research in both behavioural- and neuro-sciences now clearly show that development from conception to three years of age is critical to later physical and mental health, learning and behaviour. "Experience in the early years affects the development of the brain and related biological pathways that set trajectories…throughout the life-cycle" (Mustard 2008, p.12). For example Hart and Risely (2003) found that vocabulary use at age 3 predicted of measures of language skill (including reading comprehension scores) at age 9-10.

The field of epigenetics indicates that early in life, aspects of brain development are so sensitive to environmental input, or lack of it, that overcoming a poor start is at best difficult and expensive (Mustard 2008, p13).

What supports foundational development before school age?

To support the foundational brain development of children before school-age, research indicates the focus should be on all of the following:

1. reducing maternal stress and other environmental toxins such as alcohol, cigarettes and other drugs, during pregnancy,
2. improving the nutrition of pregnant women, infants and young children,
3. protecting infants and young children from injury,
4. reducing psychological trauma and chronic stress in infants and young children,
5. increasing opportunities for infants' and young children's learning through language interactions and opportunities for safe yet interesting exploration (Shonkoff 2009, http://www.podcastdirectory.com/podshows/4455002).

What is known about getting the best outcomes for primary school-aged children whose circumstances place them at risk of poor outcomes?

When considering factors that support or are deleterious to the development of 'vulnerable' primary school-aged children, research on resilience is most useful. Resilience is the ability to adapt effectively in the face of adversity or stress (Naglieri & LeBuffe 2005). Stressors arising from negative family interactions and parental divorce, familial poverty, neglect, violence, mental illness or drug abuse, and from war, neighbourhood violence, racism and discrimination are known to threaten development. Children who succeed in life despite such risks are considered "resilient".

"Resilience does not necessarily mean that one is unaffected or untouched by the trauma one has endured, nor does it mean that one always functions well. It is also possible that a child may show

resilience at one point in life and not at another" (O'Dougherty Wright & Masten 2005, p. 21). It is important to consider that the ways each of the protective factors interact with each other, and with the risks in a child's life will produce different outcomes (Werner 2006). Individual, familial, and socio-cultural resources which promote resilience strengthen other factors, which in turn further promote resilience. Conversely, the more adversity or negative stressors a child experiences, the less likely it is s/he will be able to adjust and adapt effectively. It is the interplay between the positive and negative factors that determines resilience in individual children (Kaplan 2006).

The protective factors that have been found to be associated resilience can be divided into three broad, interrelated categories. These are the child's individual characteristics, a strong bond with at least one competent, caring adult (whether within a warm familial relationship, or through social support outside the family), and community resources and opportunities.

The child's individual characteristics such as an easygoing temperament, socially valued talent, higher than average intelligence, being motivated to succeed, ability to self-regulate emotions and impulses (Conger & Conger 2002; Masten & Reed 2002; Seccombe 2002; O'Dougherty Wright & Masten 2005; Werner & Smith 2001) have all been associated with resilience. These increase the likelihood of rewarding experiences that develop positive self-esteem and an optimistic outlook which can offset stressors (Werner 2006). These personal qualities are attractive to adults and other children. Thus they promote friendship formation and allow the otherwise vulnerable child to form social networks to draw upon when facing familial or community challenges.

The above mentioned qualities depend in part on inherited characteristics. However the role of carers during the years before school is also crucial for their development. Temperament for example is present at birth. Infants who do not establish regular feeding and sleep patterns and toddlers who are particularly irritable can be difficult to care for. Parents need support so they can establish "goodness of fit", that is the alteration of parental practices to fit the temperamental needs of their children so that more desirable behavioural outcomes are achieved by school age (Thomas & Chess 1977).

Interpersonal factors associated with resilience are warm, supportive, stimulating, trusting relationships with a competent adult such as a parent, grandparent, mentor, elder or teacher (Masten & Reed 2002), or with siblings or competent peers (Werner 2006). A competent caring adult provides a healthy model of effective coping, acts as a knowledgeable guide by listening and assisting children to rise to challenges, solve problems, remain persistent, manage stress and succeed despite their life circumstances.

Peer acceptance in the primary-school years is powerfully related to psychological adjustment. Children who were rejected by peers in primary school are more likely to perform poorly or avoid

school; to drop out, become involved in substance abuse and delinquent behaviour in adolescence, and have mental health problems or criminal convictions in adulthood (Bagwell, Newcombe & Bukowski 1998, Kupersmidt & Coie 1990, Laird et al 2001, Parker & Asher 1987).

Authoritative childrearing where parents provide warmth, set behavioural limits and appropriately high expectations, and monitor their children's activities (Baumrind 1971) plays an important role in the development of resilience (Conger & Conger, 2002; Seccombe 2002; O'Dougherty Wright & Masten, 2005) because it helps children to understand that they are loved, supported and valued no matter what challenges life brings, and that they are expected to reach their personal and social potentials.

Community factors associated with resilience include a stable neighbourhood because violent, poverty stricken neighbourhoods are more stressful for families and reduce opportunities for children to play and socialise. Good schools, accessible health care and social services, libraries and recreation centres help develop resilience by fostering children's and families' physical health and social, emotional, academic, cultural and spiritual well-being. They also provide access to resilient role-models. Masten et al (2008) particularly highlight effective schools and teachers. They claim that "a school that functions well in a context of adversity can also be said to manifest resilience". Neighbourhood services can reduce parental stress, improve relationships between parents and children and thus increase resilience in middle childhood (Conger & Conger 2002; Seccombe 2002; Wright & Masten 2005).

Children's emotional wellbeing is promoted when their families' cultures are recognised and respected in wider society. By the end of the primary years, a secure cultural identity is associated with higher self-esteem, optimism, prosocial attitudes and a sense of personal efficacy (Smith et al 1999).

Research has found that children's access to prosocial community organisations and extra-curricular activities such as youth clubs, sporting, religious, cultural and arts groups supports resilience (McGee 2003 cited in Werner 2006; Werner & Smith 2001). These can promote social and emotional skills such as perspective-taking, cooperation, leadership, problem-solving, persistence and altruism. As a result self-esteem, community responsibility, cultural strength and meaningful relationships can also be developed (Seccombe 2002).

"It is essential that young children are consulted in matters that affect them… consultation may be specific to individual situations or may involve representative group to inform more general practices" (Early Childhood Australia 2009).

Aims

This research aimed to explore the views of children living in the eastern suburbs of Salisbury about sources of support generally available to children and families, the community resources they and their families currently use, those they would like to have access to, and what would facilitate access to them. The study also aimed to elicit their ideas how to improve their lives and their communities.

Methodology

Sample

The convenience sample consisted of thirty eight children aged 5 to 12 years, self selected by their parents' and own consent for participation, at four government primary schools in the eastern suburbs of the City of Salisbury   (Pooraka, Ingle Farm , Para Hills, Para Hills West, Salisbury East).

Measures

It was not seen as ethical for researchers who did not have existing supportive relationships with children to question them about their family circumstances, individual sources of support or peer relationships. Therefore children were asked to identify the activities they enjoy or would like to participate in, to identify local community support systems, services and facilities available to children and families, and to provide ideas for making children's lives happier, healthier and safer.

An interview proforma consisting of twelve main questions with sub-questions to identify children's reasons for their answers was used to guide the interviewer's data collection. To accommodate for the developmental levels of the children aged less than 8 years of age, the language was adjusted and a teddy was introduced and referred to.

Procedure

Ethics approval was obtained from the University of South Australia's Human Research Ethics Committee and the Department of Education and Children Services.

Five groups of between seven and eleven children were interviewed by means of conversations based on interview questions to generate qualitative data. Conversational interviews are perceived as the most effective method to acquire children's thoughts and understanding in a non-threatening atmosphere (Aubrey, David, Godfrey & Thompson 2000; Parkinson 2001). Parkinson (2001) suggests

that small group interviews capitalise on social interaction; children are comfortable talking to other children and they keep each other on track and truthful. Strategies and language used in interview questions varied to match the age of the children because researchers need to match interview strategies to children's developmental levels to collect valid data from children (Parkinson 2001), and be 'sensitive and adaptable' (Aubrey et al. 2000). Open ended questions were designed to allow for adaptation and flexibility, thus providing opportunities to elicit deeper thinking. This process optimised the quality of the children's responses.

Interviews were conducted by one researcher whilst children's responses were scribed by another on prepared sheets. The interview was conducted in their schools, a location that is familiar and comfortable for children to establish a sense of trust and security (Parkinson, 2001).

Data Analysis

The data was categorised *post hoc* using some of the key themes identified by previous research literature as supporting the development of resilience in children.

Results

Children's identification of sources of support to children and their families

Children identified teachers, student counsellors, principals and deputies, office staff, school support officers, a student teacher, friends and older children as sources of school-based support for children. Children identified places where families could go to get help included hospitals, police stations, fire services, the local council, a shelter and a school counsellor.

Community resources for children and their families

School based resources

When asked about the activities they enjoy at school outside of class time, children identified opportunities for active play such as football, hopscotch and skipping, using school sports equipment and play equipment (swings, slides, climbing etc) during breaks. One group mentioned arts, crafts and construction as available in their school library during recess and lunch, another mentioned preparation for a school concert, and a third mentioned a disco.

Children said that Out Of School Hours Care (OSHC) provided snacks and access to activities such as Fuse ball, play stations, computers and board games. One child said "My parents can't afford OSCH so I just go home and watch DVD movies."

Children from one school referred to school-based team sports such as rugby and soccer as available to the upper primary children.

Neighbourhood resources

The most frequently mentioned neighbourhood resources were parks and playgrounds. Others mentioned riding bikes, skate boards and scooters, flying kites, playing with friends and family and going to the shop.

Home and family based activities

Children spoke of indoor activities such as playing board and electronic games, using the computer and internet, playing with commercial collectable toys (Neopets), crafts, eating cookies, and watching TV and DVD's either alone or with friends and family. Back yard activities included bouncing on the trampoline, playing with pets and siblings, roller skating, riding a bike and ball games. Activities children enjoyed with their families included attending Paradise Community Church, Greek Church and Polish school, and visiting the library.

Learning facilities

Scouts and sporting clubs, work places and libraries were seen by children as places to learn new skills. Children stated languages could be learned through Polish School, Greek Church, watching movies and participating in martial arts. Children also recognised that they can learn from family members and others. Unsurprisingly university, TAFEs and schools were also cited as places of learning.

Recreational and sporting facilities and activities

Children identified many sporting facilities within their districts such as football, soccer, basketball, netball, tennis, gymnastics, swimming, and cricket. However many children said that they were unable to access these due to affordability. One child stated "would like to do swimming, mum hasn't got enough money, I can't swim". Only one school offers some after school sports. Two children commented that their sibling "should do gymnastics" because of their abilities.

Local recreational and sporting facilities children mentioned were Ingle Farm Recreation Centre, 'Bowland', Ingle Farm, 'Red Bull Football Club', Ingle Farm, Ingle Farm Tennis Club, State Swim and Para Hills Sporting Club. Children also mentioned that a boxing facility was being built at Para Hills.

Children told us the activities offered in these facilities included roller skating, bowling and pole dancing.

Other recreational facilities in the area include martial arts, "8 ball at the pub", DVD and electronic game hire, Tonnes-of-fun game arcade, a play café, bike track, and skate park, watching bike racing, and scouts.

Activities some children said they had enjoyed but had to travel considerable distance to access included movies, fishing, camping and going to the beach, mini golf and go-cart racing.

Reasons given about why sports and activities are not accessed by children and their families

The majority of children, who said they would like to participate in a sport (e.g. netball), club (e.g. Scouts) or activity (e.g. camping) but were unable to, identified cost as the major impediment. Other reasons mentioned were distance and age limitations.

Children's suggestions for improving accessibility

Their ideas for improving accessibility included providing more facilities, making facilities cheaper, "tell(ing) the Government to make it free", finding "kids to teach you so you don't have to pay", "sneaking into the club", fundraising, transporting children to the facility in a bus, "borrowing or buying a car", and providing activities through schools.

What children would like in their area

Children said they would like to have access to the arts; ideas included low cost/free concerts for kids, drama club and after school visual arts clubs "including painting".

Children expressed disappointment in the playgrounds they currently have access to. Ideas for improvement were more interesting and challenging equipment such as four-seater see-saws designed with safe handles "so you don't knock your head" and seats that don't get too hot or wet, climbing/rock walls, flying foxes, tunnels, "a gym bar that I can spin around on", bridges, tyre swings, sandpits, swinging rope, ladders for climbing, trampolines, cubby houses, monkey bars, "a big slide like at Broken Hill", whirly gigs, trees to climb and tree houses, nets in tennis courts and in soccer goals, an adjoining skate park and "ponds for ducks" and "creeks to us swim in". Children also expressed that they would like their playgrounds and parks to be attractive and well maintained with regular mowing, painting, splinter free surfaces and better soft fall.

Some children wanted a "Kids Entertainment Centre" with computers, play stations and electronic games. Versions of this idea include a games arcade, a computer games shop, a games shed and more computers and computer games at local libraries.

Other ideas for local facilities included a public swimming pool, a cinema or drive-in, a "fitness club for kids", "an animal park where you can go to look at animals", "a dog park where you can let your dog off the lead", and an aquarium, a chocolate factory, more take-away outlets such as KFC and Chinese, snow, a roller-coaster, an ice-cream machine, a time machine, a play café, another fence between Walkley Heights and the jail, indoor go-carts, laser skirmish, more sports clubs such as football and karate, and a baseball pitch.

Children's ideas about what would make them healthier, safer and happier

Healthier

Children contributed the following ideas for more nutritional intake: more fruit and vegetables, "a fruit stand – all free", "Get Woollies people to bring fruit to school so we can be healthier", longer fruit times at school, soup, healthy lunch provided by school, salad from McDonalds and Hungry Jacks, "knock down junk food outlets and build more Subways", a healthy canteen at school, plates of healthy snacks such as sultanas on kids desks or tables at school, "water machines that you put money in and it squirts water out so you can drink it". They identified the importance of activity suggesting: "play more with the children", more PE, lots of running, football and sports. Children also mentioned the importance of sleep; children should "go to bed earlier", and there should be "less barking dogs that keep you awake".

Safer

Children identified the importance of adult supervision to keep them safe. They wanted "parents (to) watch you", for adults to "look after children" and "teach children how to be safe". Children thought crime prevention would help. Some wanted "more police", to "kill the robbers – no robbers that steal kids" and "cameras", although one child voiced concern about over-surveillance. Other safety promoting ideas included "more safety houses", providing safety equipment such as knee pads and helmets, and a "fence around the playground",

Happier

Some children referred to school as a place that should be more fun by having better teachers "ones that don't yell", a better oval, more play time, "more maths", "no work", art, PE and excursions (e.g. to

the aquarium). Access to computers and the arts after school, and more help from teachers to play, learn and socialise were also mentioned.

Children wanted parental attention and support, "parents to catch me when I am climbing and playing". One child recognised that parental attention requires parental health, "help your mum to get rid of sciatica so she can play with you". Other wishes or comments indicate that children might see their parents as time restrained. For example some children wanted a restaurant at home or a special cook, and one child said he loved playing football when his father "has got enough energy and is not at band practice".

Some children believed that more money could bring happiness through the ability to purchase things such as a play station, books and access to sports and activities.

Discussion

Children's awareness of sources of potential support to children and their families

The children appear to have clear knowledge about support systems within schools but have limited knowledge of community or government services such as Anglicare or Families SA. It may be that the families of the interviewed children have not required these services, or their families may have needed the services but not been aware of the assistance offered by them, or the adults but not children in families are aware of services.

Community resources for children and their families

It is widely accepted that familial poverty is an indicator of stress which can be detrimental to healthy development. The children in this study clearly understood the restrictions that families' financial limitations place on access to facilities as almost every response mentioned money as a barrier.

The Australian Government Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) state that supporting children beyond 5 years of age provides an opportunity to reach a broader range of vulnerable families (2009). This suggests that providing community resources for children could be a means to connect with vulnerable or hard-to-reach families and enable more whole-of-family services.

In relation to school based resources for children findings from the *Report on the findings from Salisbury Communities for Children Primary Schools Consultations* (Swansson & MacKenzie 2009) suggest there is a range of school-based programs to support children's wellbeing and learning. However from our consultations with children school-based recreational opportunities were limited. Three of the four schools consulted did not offer after-school sports, or access to computers or art

activities outside of school instruction. Our findings reveal that many children are interested in the arts, craft, sports, activities using information technology, and electronic games. Furthermore some children recognised talents in siblings that were not being pursued.

To participate in sport, many children in the eastern suburbs of Salisbury would therefore have to seek community sport, which is often more expensive and requires more travel than school-based sport. Although children were able to identify many community learning, sporting and recreational venues and opportunities including out of school hours care (OSHC), many were not able to access these due to in-affordability, lack of transport and age limitations. Swansson and MacKenzie (2009) also found that children in the eastern suburbs of Salisbury are excluded from participation because their families cannot afford costs or do not have access to a means of transport. Although high parental demands for sporting excellence, and frequent intense practice is linked to children's emotional problems (Wall & Cote 2007), engagement in sports is for most children associated with increased self-esteem and social competence by adolescence (Daniels & Leaper 2006).

Although many schools have a public library within walking distance, computer access is limited due to limited numbers of computers in public libraries. Children in this region are disadvantaged because of the limited facilities offering computer activities and no community-based arts opportunities.

Children expressed disappointment in current playground and park facilities. Playgrounds potentially support the development of gross-motor and social-emotional skills, bone density, and healthy exercise habits, as well as connections between children and families in communities. Primary school-aged children have higher rates of playground injuries than any other age group with most injuries involving falls from climbing equipment or swings (Phelan, Khoury, Kalkwarf & Lanphear 2001). Active, physically challenging play can be supported and injuries reduced through adequate provision of soft-fall. Run-down and uninteresting playgrounds send powerful messages to children about the unimportance of children in their communities.

Children revealed that they are aware of what they should be doing to support physically healthy development. However children were also aware that these behaviours (increased consumption of fruits and vegetables and increased participation in sports) involve costs that their parents may not be able to meet. This awareness is reflected in suggestions for free fruit and healthy salads (through school supply or sponsorships), and an increase in school 'PE' (physical education).

Although some children indicated that they believed more money would improve happiness, it was interesting that many children identified that more time with parents would keep them safer and make them happier. Inadequate time with parents could be attributed to poor parental health, lack of parental prioritisation, parental time restraints, or the "requirement for sole parents to go to work when the youngest child turns five" (Swansson & MacKenzie 2009). The Australian Bureau of Statistics

(2009) also indicates that most two-parent families in Australia have both parents working. In 80% of these working families, at least one of the parents said they were often or always pressed for time. The main reason parents gave for feeling time pressured was trying to achieve a balance between work and family. Fifty-eight percent of all working couple families had at least one parent who usually worked extra hours and a similar proportion regularly worked in the evenings.

Limitations of this study

Children chosen for this study cannot be seen as a representative of primary school aged children in the Salisbury Community region as due to time restraints not all school in the area were contacted for involvement. Signed parental consent for children's participation was required which may have excluded the children with poor literacy.

The study did not obtain data about the supports utilised by children and their families, because ethical considerations prevented asking children questions that risked children disclosing sensitive or personal information in a group setting. Nor was it ethical for researchers who did not have existing supportive relationships with children to question them about sources of support.

Interviewing children in small groups decreases anonymity because information shared can be repeated by other children. For this reason individual children may have withheld information or included information in an effort to meet perceived peer or researcher expectations.

Conclusion

This research has revealed children's views and ideas about what they have and what they need to support their healthy development in their community. FaHCSIA (2009) states that "child focused and/or child inclusive services (need) to enable children's voices to be heard". This is echoed by Early Childhood Australia (2009). The following recommendations are therefore based predominantly on the expressed views and ideas of children in the eastern suburbs of Salisbury.

Recommendations

FaHCSIA (2009) states that early intervention enables entrenched dysfunction to be avoided and should rely on the use of a strengths-based approach to effect positive change. It further states that developing long term community resilience begins with developing children's strengths. Developing children's strengths logically requires the provision of strength-building opportunities.

Continue to support development before school

Because it is arduous and costly to overcome poor outcomes arising from the years before school (Mustard 2008, p13) a continuing strong focus on improving environments for young children is

important for preventing later developmental problems for children in the eastern suburbs of Salisbury.

Connect families and children with community services

Because local community services can reduce parental stress, improve relationships between parents and children and thus increase resilience in middle childhood (Conger & Conger 2002; Seccombe 2002; Wright & Masten 2005), the following is recommended.

1. Inform primary school children that a range of support services are available. Each school could have designated people that children can approach for take-home information, and advice and support in negotiating access to services. This is particularly important for children from families where English is not spoken at home, or where parental violence, drug and alcohol abuse or mental illness leave children vulnerable. Several, but not all schools have school counsellors or Aboriginal liaison staff who fill this role. Potential for the provision of school chaplains could also be explored.

2. Create networks between the agencies and inform them of the roles of other agencies in supporting children and families. Opportunities for networking and awareness raising between school staff and community support services should be provided. This may be a matter of allowing staff time to attend existing networking opportunities such as the Northern Children and Families Forum meetings.

3. Ensure agencies mentioned by the children (hospitals, police stations, fire services, the local council, shelters and counsellors) are included in the networking as these are the ones that children identify as available to help, and so most likely to approach when need arises.

4. Inform the community of agency roles.

These strategies reflect the FaHCSIA (2009) principle of "enabling community services to work together flexibly to meet the different needs of families and children; encouraging innovation in responding to the diversity of families and community needs; and participate in determining the specific services that need to be delivered in individual locations".

Build informal community connections to strengthen families and provide children with supportive relationships with competent adults.

Children are resilient when they have warm, supportive, stimulating, trusting relationships with a competent adult such as a parent, grandparent, coach, scout leader, mentor, elder or teacher (Masten & Reed 2002) strategies should be developed to ensure that each child can has at least one such relationship. Potential strategies include:

1. Finding ways to strengthen extended family ties, for example through intergenerational arts projects.

2. Foster community, parental and child involvement in matters that affect them.

3. Support the creation of neighbourhood connections and friendships, for example through family fun days at local parks, or community action projects.

4. Recruit, train, support and retain emotionally, socially and culturally competent adult leaders for children's activities. Competent caring adults provide healthy models of effective coping, act as knowledgeable guides by listening and assisting children to rise to challenges, solve problems, remain persistent, manage stress and succeed despite their life circumstances. Parents often have skills, culture or areas of expertise to share and can be supported and trained as coaches or leaders which facilitates and builds on the role of parents and carers (FaHCSIA 2009) in the community. Swansson and MacKenzie (2009) found that parental involvement in schools built strong relationships; connected parents; and was seen by school personnel as a key element in supporting families in the eastern suburbs of Salisbury.

Support talent development

Children with socially valued talents are more resilient (Conger O'Dougherty Wright & Masten 2005) because talents increase the likelihood of rewarding experiences that develop positive self-esteem and an optimistic outlook which can offset stressors (Werner 2006) and are attractive to adults and other children. This promotes friendship formation and allows the otherwise vulnerable child to form social networks to draw upon when facing family or community challenges. For his reason ways to support the development of talents in vulnerable children should be sought.

Because poverty is so frequently associated with vulnerability, ways to make engagement in the arts and sport more accessible to those with low incomes should be pursued. The establishment and provision of scholarships for participation in sport or the arts based on talent may allow gifted, disadvantaged children to play sport for a local team by paying membership fees, provide for gymnastics or art lessons, or provide the cost of transport to weekend competitions. These might be brokered with various charitable organisations such as the Smith Family. 'Come & try' days at recreation/sporting centres and school nominations could be organised to help identify talent. A consideration of scholarships to support children's talents and interests would "ensure relevant services are available to the broad population to assist children [...] to strengthen their abilities" (FaHCSIA 2009) which would contribute to children's success; and foster their self-esteem and resilience.

Salisbury Communities for Children might also engage in partnerships with organizations such as schools, Scouts, arts and sporting groups to provide low cost activities for primary school-aged

children and their families. The acquisition of sponsorships from local businesses would help to reduce costs. These would present opportunities to further children's interests and strengths and can facilitate greater social engagement for families and children and increase community capacity to help build family resilience. There is a wealth of research identifying that when children's individual characteristics, interpersonal and community relationships are supported resilience is more likely to be attained.

Provide opportunities for children's participation in the arts

Participation in the Arts can increase the likelihood that children will learn how to self-regulate emotions and impulses, develop positive self esteem, improve interpersonal relationships, foster cultural and spiritual well-being, promote social and emotional skills such as perspective taking, cooperation, leadership, problem solving, persistence and altruism. However facilities for engagement in the arts appear limited in the eastern suburbs of Salisbury. Strategies to support skills development in the arts include providing opportunities for children to attend performances for children, and to engage in drama, visual arts and dance in school holiday programs and after school.

Because children's emotional wellbeing is promoted when their families' cultures are recognised and respected in wider society, and because a secure cultural identity is statistically associated with higher self-esteem, optimism, helpful attitudes and, a sense they can achieve (Smith et al 1999) artists from Aboriginal and other cultural backgrounds should be engaged to provide some of these opportunities.

Provide opportunities for children's participation in Sport

Participation in sports can improve children's mental and physical health outcomes. There are many sports facilities in the eastern suburbs of Salisbury, but many children do not have access to them. Strategies to support access include:

1. informing families of cheap opportunities to develop sports skills (e.g. VacSwim),

2. negotiating with the clubs and facilities for cheaper access for children.

School sports team participation with socially competent coaches can help break racial/cultural barriers & prejudice, strengthen peer relationships reducing isolation and bullying, develop children's conflict resolution skills, strengthen community networks, build talent (of particular importance for vulnerable children), provide an opportunity for parental involvement and volunteer training (to encourage community capacity, connections and resilience). Because few schools in the eastern suburbs of Salisbury offer any after school sports skill development or opportunities to regularly play

in school teams, strategies to support the development of school sport teams and skill development (e.g. Kanga Cricket) should be implemented. Potential strategies include:

1. Seek local business sponsorship of uniforms, equipment or transport to games.

2. Seek scholarships to provide uniforms or transport to games for economically disadvantaged children.

3. Seek sponsorships from local businesses to provide uniforms and equipment for teams.

4. Seek engagement with the University of South Australia via UniSA Northern Adelaide Partnerships to help with initial development.

5. Support parents to develop coaching confidence and skills development. This could be through providing training (e.g. First Aid; Child-safe environments: Reporting abuse and neglect), covering the cost of Criminal Record Checks, and local hosting of coaching courses provided by the Australian Government Office for Recreation & Sport.

This is in keeping with the FaHCSIA (2009) principle to "provide services that facilitate greater social engagement of families and children; and support the role of communities in working with families and children by increasing community capacity to help build family resilience".

Support children's nutritional intake

FaHCSIA (2009) state that to work in the best interests of children, Facilitating Partners need to enhance family capacity to improve the well being and safety of children; and deliver well targeted services to reduce intergenerational disadvantage. Making nutritional foods more available for children is one way to improve children's current and future health. In relation to supporting primary school children's healthy nutritional intake, potential strategies include:

1. Negotiating sponsorships with large companies such as "Woolworths, McDonalds and Hungry Jacks" to provide free healthy choice foods such as fruit, salads or chicken wraps,

2. Negotiating with a healthy food outlets to deliver school lunch orders,

3. Introduction of after-school activities such as cooking.

Consult children when providing or upgrading playgrounds

It is important to consult with children about matters of importance to them as this contributes to children's self-esteem and sense of worth, introduces them to democratic processes, their role as a

citizen and strengthens negotiation and conflict resolution skills. Consulting with children about playground development is also more likely to ensure play areas that are more likely to be utilised because they are stimulating and developmentally appropriate for children.

There are many potential strategies for involving children in playground design. These must be carefully selected to ensure that children are not misled. The Early Childhood Australia's position statement for Consulting with Young Children http://www.earlychildhoodaustralia.org.au/position_statements/guidelines_for_consulting_with_young_children.html and the NSW Commission for Children and Young People's information on involving children in creating child-friendly built environments http://www.kids.nsw.gov.au/kids/resources/publications.cfm?itemID=0665D537F09D577164DEE83D91C57AAC are both useful.

In consideration of this, children need to be consulted about design and construction of playgrounds in their area and facilities they would like to have access to.

Implementation and management of strategies

It is also recommended that a primary school children's project officer is employed. Responsibilities of the Project Officer would include:

1. Negotiating and accessing scholarships, sponsorships, partnerships and funding for primary school-aged children's access to healthy food, sport, arts, and other recreational activities,
2. Facilitating networking between organisations and community businesses to support the families of primary school-aged children,
3. Provide ongoing consultations and evaluations with children about matters that concern them.

Future Research

It is recommended that further research identifies how best to enlist parental and community involvement in sporting and recreational activities. Ongoing consultation with children and evaluation of strategies and of their outcomes is also recommended.

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