



*Address
by*

*Robin Sullivan
Commissioner for Children and Young People*

*At the
QCOSS Conference*

at

Ballymore Rugby Union Club, Brisbane

on

Saturday 27th March 2004

Firstly, I would like to acknowledge the traditional owners of this land. Let us not forget that we stand on the land on which they once walked.

Thank you for inviting me here today as part of your workshop. I have to say that I am most impressed by your commitment in giving up your precious weekend to participate in this very important training.

I would also like to take this opportunity to thank Angela Fenton and commend her on the work she has done in developing the *Building Blocks Kit*. Angela recently presented the Kit to Commission staff and the feedback was that it was an inspiring presentation. I believe that you will be hearing from her shortly.

The protection of children is a serious issue.

We have all been moved in recent times by media accounts of children whose lives have been damaged or even destroyed by abuse and neglect. These stories have given cause to us as individuals and a society to reflect more deeply on how we can act to protect children. The title of this workshop is thus very apt “re-focusing on protecting children in the early years”.

As professionals working with children and families, you hold a unique and vital role in protecting children.

The theme of my address “Putting Theory into Practice” is both very appropriate and a timely reminder of the importance of evidence informing our practice. And there has been clear evidence in relation to the importance of the early years, and of prevention and early intervention, themes I will return to shortly.

Let me turn first to some relevant data.

The statistics regarding physical, emotional and sexual abuse and neglect of our children are a matter of concern.

For the period 2002-2003 (and these figures are almost straight off the press), the number of notifications of harm or risk of harm to a child or young person in Queensland was 31,068. This is an increase of almost 3,500 from the previous yearⁱⁱ! However I have to point out that this increase may be attributed to changes in legislation, policies and practices.

For the same period the number of substantiations in Queensland was 12,203ⁱⁱⁱ, up from 10,036 in 2001-2002 and 8,395 in 1999-2000^{iv}. These figures tell a very grim story.

If we look at the nature of substantiated abuse, we see that neglect rates highest with 4,652 cases; next emotional abuse with 4,135; physical abuse 2,806 and sexual abuse 610^v. As you all know these figures are never clear cut as a child will often be the victim of more than one type of abuse.

The age break-down is also of interest.

The rate per 1,000 Queensland children is 18.7 for those under one year; 11.4 for children 1-4 years; 10.5 for those 5-9 years; 9.5 for those 10-14 years, and 4.2 for young people 15-16 years^{vi}. Clearly our youngest citizens are the most at risk.

Indigenous children are also over-represented in the child abuse statistics. In Queensland, there were 15.9 substantiations per 1,000 Indigenous children compared to 9.7 per 1,000 non-Indigenous children^{vii}.

Communities are becoming aware that reluctance to get involved in 'private family business' acts to protect abusers of children, making it more difficult for victims to receive help.

Without a whole of community commitment to address child abuse, it remains 'hidden away'; a family secret, but one that permeates every aspect of the child's life. The catch cry "*nothing is so awful that we can't talk to someone about it*" is an important challenge to the walls of silence.

Children, by the very nature of their vulnerable and often powerless status, have the right to feel safe all the time, not just some times, but always.

And while we all share the responsibility to ensure that this is the case, I would argue that this is particularly important for those of us who come into contact with young children.

Importance of the Early Years

I would like to now move on to the body of research on the importance of the early years of a child's development.

The US National Research Council and the Institute of Medicine report *From Neurons to Neighbourhoods* tells us^{xiii}:

"We now know that what happens during the first months and years of life matters a lot, not because this period of development provides an indelible blueprint for adult wellbeing, but because it sets either a sturdy or fragile stage for what follows"

There has been a growing recognition that what happens for children while they are young is critical – "that the experiences of early childhood can have a profound lifelong impact on a child's health, wellbeing and competence."^{xv}

Furthermore, Professor Clyde Hertzman, a key Canadian researcher in the field of early child development, states that:

"Studies in neurobiology, neurodevelopment and early intervention show that conception to school age is a critically important time in brain development."^{xvii}

This is the time when the most powerful 'wiring' is set down – and if we can get it right in the early years, individuals will benefit for life.

Techniques such as the

- electro encephalogram, or EEG
- Position emission tomography scans, PET scans

- Computerised axial tomography scans, or CAT scans, and
- Magnetic resonance images, or MRIs originally developed to help people with neurological disorders, have allowed us to investigate brain development in children.

So what do these show us?

We know that all brain cells are present at birth; but the infant's brain is undeveloped. The neurons of a newborn are not connected together the way they are in an adult brain, but are a kind of random mass^{xxi}.

At birth, $\frac{3}{4}$ of the billion neurons we have are not connected in networks^{xxiii}, so most of the links are formed after birth^{xxiv}. The brain development that takes place in the first year of life is extremely rapid and extensive.

Complex neural pathways are formed in a child's early development – each neuron may be connected to as many as 15,000 others. What is most significant about early brain development is the theory that as infants and children encounter repeated experiences, specific neural connections and brain circuitry become stronger.

Conversely, if connections are not used, they become weak and eventually die away.

It appears that the nature/nurture debate has now been resolved, with the suggestion that nature (that is predispositions) and nurture (experiences), interact in a complex way to affect development.^{xxvii}

Children's early nurturing relationships have been shown to stimulate the brain's endocrine and immune pathways, affecting the ability to regulate emotional states and cope with stress^{xxix}. This implies that children's early brain development is affected by the quality of their care relationships^{xxx}.

Poor early nurturing has been aligned with anxiety, depression, aggression and anti social behaviours throughout life^{xxxi}. Children's early relationships are therefore believed to form the basis of their life long emotional and social competence.

The Director of the New South Wales Institute of Psychiatry, Dr Louise Newman argues that children's first love relationship with their parent or carer sets a template for their future relationships^{xxxvi}.

If children experience insecure, disorganised attachments, live in environments in which their needs are not responded to and are not viewed as individuals in their own right, their own capacity for intimacy and empathy in future relationships may be seriously affected.

The most important aspect of these care relationships is secure attachments between children and their parents or carers. The responsiveness and attunement of parents and carers to the experiences of children is believed to be critical in promoting such attachments^{xiii}.

The research discussed today reinforces the "importance of promoting optimum family and community experiences for young children in the earliest years of childhood."^{xliii}

This then leads me to the practice section of “Putting theory into practice”.

What does all this research mean? Where should initiatives be targeted?

One level is obviously at the policy level in order to be able to target the wider structural, systemic, environmental and political issues.

In 2001 Professor Fiona Stanley was involved in a think tank with a range of key Australian researchers where the discussion centred on how to ensure better outcomes for children, families, and our society as a whole^{xiv}. Importantly, they emphasised that on many indicators of developmental health and wellbeing, children and adolescents were faring poorly and Aboriginal and Torres Strait Islanders children and young people were faring even worse with no improvement in these indicators with age^{xv}.

At this point I'd like to share some of these issues in relation to Indigenous children and young people through some of the data soon to be published in the Commission's latest *Snapshot* report^{xvi}.

- In 2001 Indigenous perinatal and infant mortality rates were at least twice the Queensland average
- The suicide rate for Indigenous young men aged 15-19 was several times higher than the Queensland average
- 12% of Indigenous babies were born with a low birth weight compared to the Queensland average of 7%
- In 2002, the proportion of Indigenous students in Year 5 able to meet the national benchmarks in literacy and numeracy was below the state average
- The Indigenous youth detention rate was around ten times the Queensland average.

Other issues for the whole population include the increasing chasm between the wealthy and the poor and the increased number of individuals and families living in poverty. The implications of this on health and wellbeing are dramatic.

Prevention and Early Intervention

Recent national early intervention and prevention strategies have broadened the focus of intervention from individual families to whole communities.

Governments are now developing universal measures designed to identify potential difficulties early, inject 'preventative welfare' into the lives of 'at risk' children and families^{xvii} and promote the functionality of all families.

These universal measures demonstrate the realisation that positive outcomes for children depend on the “social and economic circumstances operating in families, communities and the wider society.”^{xviii}

No one program can provide a 'one-off inoculation' ensuring a child's healthy development^{xlix}. What has been clearly found is the importance of an integrated approach that incorporates a broad environmental or ecological framework to address the wider social and economic issues^l.

Early Years Framework

A recent initiative of the Commission in conjunction with the NSW Commission for Children and Young People and the National Investment for the Early Years (NIFTeY) has been the development of a draft policy framework to inform public debate.

The document *A Head Start for Australia: An Early Years Framework*^{li} was launched early this month. The Framework aims to provide a sustained and sustainable tool for both government and non government stakeholders and community members to use.

It identifies nine priority outcome areas.

These are^{lii}:

1. Supporting the wellbeing of women of child-bearing age
2. Promoting child wellbeing
3. Supporting the choices of families in their parental and working roles
4. Enriching, safe and supportive environments for children
5. Improving economic security for families and reducing child poverty
6. Achieving success in learning and social development
7. Protecting the safety of children
8. Promoting connections across generations, families, cultures and communities
9. Increasing children's participation; policy, action, awareness raising and advocacy.

The document is a 'living document' and it will be refined by ongoing research and consultation.

You may have heard about or read the *Pathways to Prevention* Report, published in 1999. This is a significant Australian evidence based document which highlights the ways in which early intervention can enhance positive experiences or protective factors for children.

Early intervention strategies can reduce risk factors, reducing the likelihood of children progressing down 'vulnerable pathways'. Early intervention strategies are also necessary to break the pathways that can lead to crime^{liii}.

As can be seen on this slide, critical points for intervention have been identified to help ensure that children progress along positive pathways.

Vulnerable family situations, or times of change or transition, are key turning points for children. Periods of transition, for example starting school, have been recognised as "sensitive periods"^{liiv}, with adjustments during these times setting pathways for positive or negative outcomes.

There is growing government recognition of the need to provide support and intervention services as early as possible in a child's life and at points of transition. This is when the greatest difference can be made^{iv}.

This is supported by the 2001 International OECD report *Starting Strong*^{vi}, which identifies early childhood services as a key component of successful educational, social and family policy agendas.

Interventions that support the attachment between children and their parents or carers are believed to promote their capacity to regulate their emotional states and to adapt to stress.

Critically, this approach promotes a sense of security and belonging, an issue which underpins the building of resiliency in children.

The concept of resiliency^{vii}, or the ability to rise above adversity and continue to function in a healthy way is particularly important for families and children who are disadvantaged. However, it is also important for all children as they face the increasing challenges that reflect our current society - social, economic, political and technological.

An implication for practice is the need to support parents to "create... environments in which babies and young children can thrive"^{viii}. An important area of research has identified the importance of social networks and connections in the quality of life, and the wellbeing of children and families^{lix}.

Such networks of social relations are a means of creating social capital, and are believed to act as a resource and support for the mutual benefit of people^{lx}.

To summarise then, for prevention and early intervention programmes to be successful, research shows us that the following can be useful^{lxii}:

- A broad environmental or ecological framework, to include wider social and economic issues
- A developmental perspective which focuses on promotion and building resilience
- Programmes which are culturally relevant
- Programmes which encompass a whole of community perspective so that collaboration and communication between service providers and families is enhanced, whilst also enabling greater use of limited resources
- Programmes which meet the needs of both the child and family, with the safety of the child being paramount
- Programmes which are empowering of families through provision of knowledge, information and skills
- Programmes and services which involve a strong participatory element for the child and family in terms of identifying their needs and tailoring services more specifically to these

- Evaluation of the success of programmes based on measurable outcomes

Besides formal programs, however, I am strongly of the opinion that any actions that we take at a professional, policy, community or individual level, that strengthen communities or impact on the functioning and resilience of families, will have a beneficial effect on children in that family or community.

It is here that I would sincerely like to recognise the role of people like yourselves who work in the early childhood area as being in a unique position to help both children and parents from a number of perspectives.

You are able to provide children with care that is warm, understanding and supportive, being mindful that, for some children, the care you provide is the most consistent they receive from anybody.

Studies that examine cases where adults with a childhood history of maltreatment have broken the inter-generational cycle of abuse frequently find, that at some point in their childhood, the person had somebody, somewhere, who provided them with love and support, facilitated a personal sense of self worth and the courage for the person to redefine themselves beyond their abuse experience.

You are able to provide a level of acceptance and respect that can go a long way to improving children's sense of their own worth and belief in themselves.

And you are able to employ a range of strategies and provide an environment rich with opportunities and experiences that promote a child's development and understanding.

Besides being in a position to help children directly, you are also able to help them indirectly. Your behaviour and manner of communicating with children provides parent with an appropriate role model.

Each time you discuss an issue with a parent, you increase their bank of parenting knowledge and skills. Each time you validate their parenting behaviour, you increase their confidence and sense of self-efficacy; and each time you make them feel welcome or seek their opinion or support, you draw them a little more into the community of your workplace.

By working and consulting with families, both individually and through parent groups, you are better able to design programs tailored to meet the needs of the child and their family, rather than tailoring the child to fit the program.

As families are a part of the local community, working with family and parent groups means that you are, in essence, working with the local community. Working with the community allows for a greater understanding of local issues and pressures that families in that community face.

This understanding can facilitate the development of more responsive programs and allow the needs of children to lead where we are going, not trail behind where we are leading.

I know that much of the extra involvement with parents and families is time consuming and can be demanding. I further recognise that you are not remunerated for these additional services that you provide to families, and consequently children. But I also know that each time somebody goes out of their way to strengthen a family, the children ultimately benefit.

For this reason, I both thank you for what you do, and implore that you continue to

- Provide that extra care and attention
- The extra information and support, and
- That extra sense of community you give to both children and their families, particularly the most vulnerable.

Role of the Commission for Children and Young People

I'd like to briefly talk about the role of the Commission for Children and Young People, an independent statutory body, attached to the Premier's portfolio.

Our functions include:

- advocating for the rights, interests and wellbeing of all Queenslanders under 18
- receiving and investigating complaints about government services to children
- providing state-wide Community Visitors to support children living in out-of-home care
- establishing youth and other expert advisory committees to advise the Commission on specific issues
- monitoring and reviewing laws, policies and practices affecting children and young people
- researching issues affecting children and young people, and disseminating information about these understandings, and
- administering the 'Working with Children Check' which screens people working with children and young people to ensure they are suitable.

The Commission is committed to advancing the notion of a 'child friendly community' - one which values and respects children and caters for diverse cultural backgrounds. We are dedicated to protecting children and young people in their daily lives.

The Act clearly states the priorities of the Commission in relation to children and young people:

- Who are in, or may enter, out of home care or detention in a detention centre
- Who have no appropriate person to act on their behalf
- Who are not able to protect their rights, interests or wellbeing
- Who are disadvantaged because of disability, geographic isolation, homelessness or poverty
- Who are of an Aboriginal and Torres Strait Islander or non English speaking background.
-

As many of you know, the scope of our powers has increased following the recent Commission and Misconduct Inquiry's recommendations.

Some of these additional responsibilities include:

- new role of Child Guardian
- new systemic monitoring powers
- Community Visitor program expansion to include children in foster care
- Chair Child Death Review Committee and keep register of and research child deaths
- Report annually on child deaths and child protection issues

Let me now talk about one of the Commission's prevention initiatives - our *Working with Children* strategies.

The objectives of these initiatives are to ensure government and non-government organisations working with children and young people have information, resources and strategies to help them implement child and youth-friendly policies and practices, enabling them to:

- provide greater protection for children and young people from harm or the risk of harm
- manage risk associated with children and young people
- provide strategic direction and guidance to paid and volunteer staff regarding child and youth safe practices; and
- promote a positive public image as a child and youth friendly organisation.

Since May 2001, the Commission has been conducting the *Working with Children Check*, which assesses a person's suitability to work with children. Individuals who work in certain categories of child-related employment as employees, as well as those who are self-employed or working as volunteers are required to undergo a criminal history check.

The working with children check is "the most stringent employment screening process in Australia"¹⁰⁰.

Paid and unpaid employees engaged in regulated employment or people carrying out a regulated business must apply. Those deemed suitable to work with children are issued with a Blue card, valid for two years.

A key strength of employment screening is in its deterrence value. To date, 188 applicants have decided not to proceed with their application following requests for further information relating to their criminal history. 37 applicants have been prohibited from working with children and young people after receiving negative notices.

Another strength is that it raises awareness among the community and sends a clear message – that as a society we value our children and young people and will not tolerate their abuse.

From 1 May 2001, until 29 February 2004, a total of 193,342 Blue Cards have been issued, each containing a key message: "child protection is everyone's business".

Evaluating the effectiveness of our service is integral to what we do. A review of Part 6 of the *Commission for Children and Young People Act 2000* commenced in May 2003 and has involved extensive consultation with targeted stakeholders and the community.

The aim is to gauge the effectiveness of the service and to review whether the current categories of regulated employment are adequate.

On 1 September 2003, the Commission commenced screening child care services.

This includes screening of adjunct care for services provided in clubs, hotels and shopping centres, together with services provided by nannies and babysitting agencies. This covers the licencees and related persons, staff members in centre based services, carers in home based services and adult occupants in the carer's home.

From 27 January 2004 we also commenced the screening of providers of alternative education programs and flexible arrangements, their employees and volunteers. Alternative education programs are for young people who have been suspended from school for more than five days. Flexible arrangements enable students to take part in activities outside the school's usual educational programs.

Clearly, a criminal history check is not the only strategy which will protect children.

The Commission became aware that many organisations were keen to ensure that children and young people were safe and protected, but were unsure of how to achieve this.

Our response was the development of additional resources to support and expand our Working with Children Check in the form of a kit and a training package. The Kit advises organisations, which parents entrust to their children to, on adequate policies and procedures to protect children and young people.

The Kit helps to build capacity within organisations to help them meet their duty of care.

It adopts a positive language approach, with a strengths based, solution oriented and child friendly format to cultivate the most favourable environment for organisations to develop the framework necessary to interact with children and young people.

The Kit consists of six information booklets covering the following topics:

- Your policies and code of conduct
- Your organisations
- Recruitment, selection and screening
- Your people and your clients
- Your activities
- Dealing with issues

It is sold by the Commission at a cost recovery basis for \$35 and has been available since June 2003.

To expand on the information provided by the Kit, the Commission also offers *Working With Children Training*. The objective of the training is to support organisations in creating safe and appropriate services for children and young people.

Using an interactive problem solving approach, the aim is to build capacity within individuals and organisations to address issues and develop practical solutions.

Training is provided in a number of locations over Queensland, either over a full day or two half days or evenings. The cost is \$135 per person.

Conclusion

These are just some of the ways the Commission works to promote and protect the rights, interests and wellbeing of Queensland's children.

I am here talking with you this morning because I take very seriously my legislative function of promoting relevant research and informed public discussion.

What the research I discussed earlier indicates is the urgency of prevention of and early intervention in child abuse and neglect if we are to circumvent the long term repercussions for children as they become adults, and for our society.

Research shows how a history of child abuse and neglect and violence can impact on an individual's life, including physical and mental health, homelessness, employment, substance abuse and potential criminal pathways^{lxxvi}. The social and economic costs of this are massive. But let us not forget the cost to the individual.

The urgency of our collective mission has been well put by the Chilean poet, Gabriela Mistral:

“Many things we need can wait, the child[ren] cannot.
Now is the time [their] bones are being formed,
[their] blood is being made,
[their] minds are being developed.
To [them] we cannot say tomorrow, [their] name is today.^{lxxvii}”

ⁱⁱ Australian Institute of Health and Welfare. (AIHW) (2004). *Child protection Australia 2002-03*. Cat. No. CWS 22. Canberra: Author. p. 14.

ⁱⁱⁱ Australian Institute of Health and Welfare. (AIHW) (2004). *Child protection Australia 2002-03*. Cat. No. CWS 22. Canberra: Author. p.15.

^{iv} Australian Institute of Health and Welfare. (AIHW) (2003). *Child protection Australia 2001-02*. Cat. No. CWS 20. Canberra: Author

^v Australian Institute of Health and Welfare. (AIHW) (2004). *Child protection Australia 2002-03*. Cat. No. CWS 22. Canberra: Author. p.16.

^{vi} Australian Institute of Health and Welfare. (AIHW) (2004). *Child protection Australia 2002-03*. Cat. No. CWS 22. Canberra: Author. p.19.

^{vii} Australian Institute of Health and Welfare. (AIHW) (2004). *Child protection Australia 2002-03*. Cat. No. CWS 22. Canberra: Author. p. 20.

^{xiii} Shonkoff, J. P., & Adams, D. A. (eds). (2000). *From Neurons to Neighbourhoods: The Science of Early Childhood Development*. Washington D.C.: National Academy Press :National Research Council and Institute of Medicine.

^{xv} Hetzman, C. (2002). *An early child development strategy for Australia? Lessons from Canada. Issues Paper 1*. Brisbane: Commission for Children and Young People. p.1.

^{xvii} Hetzman, C. (2002). *An early child development strategy for Australia? Lessons from Canada. Issues Paper 1*. Brisbane: Commission for Children and Young People. p.6.

^{xxi} Hetzman, C. (2002). *An early child development strategy for Australia? Lessons from Canada. Issues Paper 1*. Brisbane: Commission for Children and Young People. p.6.

^{xxiii} Stephens, K. (1999). Primed for learning: The young child's mind. *Child Care Information Exchange*, 3. 44-48.

- ^{xxiv} Catherwood, D. (1999). New views on the young brain: Offerings from developmental psychology to early childhood education. *Contemporary Issues in Early Childhood*, 1(1). 23-35.
- ^{xxvii} Hepworth Berger, E. (1999). Supporting parents with two essential understandings: Attachment and brain development. *Early Childhood Education Journal*. 26(4). 267-270.
- ^{xxix} McCain, M. N. & Mustard, F. (1999). Early ears study final report: Reversing the real brain drain. Toronto: The Study.
- ^{xxx} Newman, L. (2002). *Infant development and trauma. Lecture presented at the Third Annual Gold Coast Infant Mental Health Conference* 29 August 2002.
- ^{xxxii} Maughan & McCarthy. (1997).; Terr, L.C. (1991). Childhood Traumas: An outline and overview. *American Journal of Psychiatry*, 148(1).
- ^{xxxvi} Newman, L. (2002). *Infant development and trauma. Lecture presented at the Third Annual Gold Coast Infant Mental Health Conference* 29 August 2002.
- ^{xlii} Thorpe, K. (2002). *Current Challenges in Early Childhood Education and Care*. Presentation QUT Kelvin Grove. Friday 18 October 2002.
- ^{xliii} Good Beginnings Australia. (December 2000). Newsletter. Available www.goodbeginnings.net.au/newsletters_00-12c.html. Retrieved October 15, 2002.
- ^{xliv} Stanley, F. (2001) A unique new way of working. Towards a National Partnership for Developmental Health and Wellbeing. *Family Matters*, 58(Autumn). pp. 64-67.
- ^{xlv} Stanley, F. (2001) A unique new way of working. Towards a National Partnership for Developmental Health and Wellbeing. *Family Matters*, 58(Autumn). p.64.
- ^{xlvi} Commission for Children and Young People. (2004). *Children and Young People in Queensland: A Snapshot 2003*. Queensland: Author. p. 11.
- ^{xlvii} Kearney, S. & Akerman, P. (2001, December 23). Howard plans a children's charter. *Sunday Telegraph*, 9.
- ^{xlviii} Stanley, F. (2003). *The real brain drain: Why putting children first is so important for Australia*. National Press Club Address, 6 August 2003. Retrieved August 25, 2003 at http://www.aracy.org.au/pdf/media/20030806_PressClubAddress.pdf
- ^{xlix} Brooks-Gunn 2003 cited in Tomison, A. (2002). Preventing child abuse: Changes to family support in the 21st century. *Child Abuse Prevention Issues*. 17(Summer). p. 12.
- ⁱ Belsky, 1995; Tomison, A. (2002). Preventing child abuse: Changes to family support in the 21st century. *Child Abuse Prevention Issues*. 17(Summer).1-24; Pecora et al., 2000..
- ⁱⁱ NSW Commission for Children & Young People. & Commission for Children & Young People (Qld). 2004. A Head Start for Australia: An early years framework.
- ⁱⁱⁱ NSW Commission for Children & Young People. & Commission for Children & Young People (Qld). 2004. A Head Start for Australia: An early years framework p. 29.
- ⁱⁱⁱⁱ National Crime Prevention. (1999). Pathways to prevention: Developmental and early intervention approaches to crime in Australia. Canberra: Author.
- ^{liv} Rimm-Kaufmann, S. E. & Pianta, R.C. (2000). An ecological perspective on the transition to kindergarten. *Journal of Applied Developmental Psychology*. 21(5). 491-511.
- ^{lv} Bagnall, D. (2002, January 15). Kid stakes. *The Bulletin*. 18-21.
- ^{lvi} OECD. (2001). *Starting strong: Thematic review of early childhood education and care policy in 12 countries*. www.oecd.org/publications/e-book/9101011e.pdf.
- ^{lvii} Fuller, A. (2002). *Building resilience in children and young people: From surviving to thriving*. Seminar presentation. Queensland Health Promoting Schools Association, Monday 30th September.
- ^{lviii} Good Beginnings Australia. *What we do*. www.goodbeginnings.net.au. (Retrieved October 3, 2002).
- ^{lix} Stone, W. & Hughes, J. (2000). What role for social capital in family policy? *Family Matters*. 56. 20-27.
- ^{lx} Bubolz, M. M. (2001). Family as a source, user, and builder of social capital. *Journal of Socio-Economics*. 30(2). 129-131.
- ^{lxii} Kaufmann, S. & Poulin, J.(1994). Citizen Participation in Prevention Activities: A path model. *Journal of Community Psychology*.22. 359-374; Pecora, P. .J., Whittaker, J. K., Maluccio, A. N. & Barth, R.P. (2000). *The Child Welfare Challenge, Policy, Practice and Research*. New York: Aldine De Gruyter.; Thoburn, J., Lewis, A. & Shemmings, D. (1995). *Paternalism or Partnership? Family Involvement in the Child Protection Process*. London: HMSO.; Wekerle, C. & Wolfe, D. A. (1993). Prevention of Child Physical Abuse and Neglect: Promising New Directions. *Clinical Psychology Review*. 13. 501-540.
- ^{lxx} Queensland Department of the Premier and Cabinet. (2003). *The Working with Children Check: A discussion paper. Review of part 6 of the Commission for Children and Young People Act 2000*. Brisbane: Department of the Premier and Cabinet. Retrieved 5 November 2003, from www.premiers.qld.gov.au/library/pdf/discussion_paper.pdf. p.3
- ^{lxxvi} Kaufam, J., & Henrich, C. (2000). Exposure to violence and early childhood trauma in G.H Zeanah, (ED.). Handbook of Infant Mental Health, 2nd Edition., pp. 196-197, Guilford Press.; Kids First Foundation (2003). *Report into the cost of child abuse and neglect in Australia*. Kestdale Pty Ltd. Qld.; Part 2 Rationale for a focus on the Early Years 0-8; Vimpani, G., Patton, G., & Hayes, A. (2002). Chapter 2, The relevance of child and adolescent development for outcomes in education, health and life services. In .A. Sanson, (ed.). *Children's Health and development: new research directions for Australia*. p. 28. Research Report no.8 AIFS, Canberra.
- ^{lxxvii} [URL:http://www.connectforkids.org/con](http://www.connectforkids.org/con) {Accessed 26 October 1999}