Education and Health Standing Committee

Report on key learnings from the Committee research trip 11-17 March 2012
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Report No. 14

Presented by

Dr Janet Woollard, MLA

Laid on the Table of the Legislative Assembly on 21 June 2012
Chair’s Foreword

This Report is the third of six reports relating to the inquiry into improving educational outcomes. It reports on the key learnings from the Committee’s trip to the North West in the context of the Inquiry.

The Committee met with 60 representatives of thirteen education facilities, including schools, three government health services, seven non-government organisations, seven government community service agencies, and one resource company. In doing so the Committee believes that it came away with a balanced understanding of the issues faced by many of the communities in the North West.

The Committee was pleased to hear that the impact of the alcohol restrictions in the North West continues to be positive.

As detailed in this Committee’s previous Reports, it was found that many services across the Pilbara and Kimberley remain underfunded, including drug and alcohol rehabilitation, child protection and health and mental health services. In addition the lack of adequate housing for government and non-government workers, and for community members affects the provision of services.

The Committee was made aware of the problems associated with children who have low literacy and numeracy abilities. Health and disability issues such as chronic middle ear infections and the number of children, sometimes third generation, with Foetal Alcohol Syndrome (FAS) or Foetal Alcohol Spectrum Disorder (FASD) were repeatedly highlighted by many witnesses throughout the trip. Sadly these issues are not new and highlight the need for a greater investment in prevention and service delivery in the context of the North West.

We found that many Aboriginal children are suffering from repeated middle ear infections. These infections can lead to ruptured ear drums and hearing loss. In one community over 94% of children in grade 1 to 3 had some form of hearing loss.

Ear infections can influence absenteeism rates and have an effect on a child’s educational, behavioural and social development. School classrooms have been provided with sound systems to enable students to hear better in the classroom. However, hearing loss affects a child at school, at home and at play.

Funding is urgently required to identify and treat middle ear infections prior to a child developing hearing loss. Protocols to allow school health nurses, community health nurses, or allied health professionals to assess, diagnose and treat middle ear infections could mean the difference between school success or school failure. This in turn may influence success or failure in life and/or employment after school.
This report briefly discusses some of the factors which lead to poor educational outcomes including school attendance, family support, and a child’s self esteem. We hope to present a more detailed report on FAS and FASD later this year.

I would like to thank my fellow Committee members Peter Watson MLA (Deputy Chair), Graham Jacobs MLA, Peter Abetz MLA and Lisa Baker MLA. My thanks for their individual and collective interest and contributions to the ongoing inquiry.

I would like to thank the individuals and groups who gave evidence to the Committee.

I would particularly like to thank Dr Brian Gordon, our Principal Research Officer, and Lucy Roberts our Research Officer who worked hard in sourcing the research evidence, planning the hearings and compiling this Report. Your ongoing support, professionalism and enthusiasm is greatly valued and appreciated.

Janet Woollard

DR JANET WOOLLARD MLA
CHAIR
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  Accommodation for School Students – an AWAY PLACE
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Executive Summary

In 1971, Sir Charles Court wrote:

_We seek to do more than just develop a number of iron ore deposits. Our objective is to develop a great region with all the complex infrastructure and associated developments that are necessary to have a permanent, contented, well housed, well-educated and well cared for community._

In the year 2012, this Report finds that the prevailing situation falls significantly short of Sir Charles Court’s aspirational intentions for the Pilbara and Kimberley.

As this report outlines, there are a range of factors that contribute to the gap between Sir Charles Court’s vision and the current reality. Housing continues to be at a premium and the lack of adequate housing is affecting the provision of services, not least in the arena of health. Health services rely in part on a fly-in-fly-out allied health workforce to service an indigenous population whose culture hinges on a continuity of relationship.

This report focuses on health and educational issues. In particular, the Committee was struck by the prevalence of two major, preventable health conditions that have significantly impacted educational outcomes in the region. The first of these is Foetal Alcohol Syndrome (FAS) and Foetal Alcohol Spectrum Disorder (FASD). The intergenerational impact of high alcohol consumption by pregnant women in many communities has seen FAS and FASD emerge as a significant issue, with lifelong consequences for the affected child as well as the community. Foetal Alcohol Syndrome (FAS) is regarded as the leading cause of preventable intellectual and developmental disability in the Western world.

The second area of health that is causing significant problems in the Pilbara and Kimberley is middle ear infections. Nationally, more than 80 per cent of Aboriginal children suffer from middle ear infections before they are 12 months old, one of the highest rates in the world.

Repeated infections, which cause fluid to build up behind the ear drum, have led to 20 per cent of Aboriginal children suffering ruptured ear drums. Such chronic ear infection contributes to the prevailing low levels of literacy and numeracy as an inability to hear equates to an inability to learn. There is a substantial body of evidence which links poor

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1 Charles Court to J.E. Parker 26 February 1971, p1.
hearing with lowered educational outcomes and a greater risk of involvement with the justice system.²

Several additional issues contributing to poor educational outcomes were identified during the research trip including school non-attendance, lack of support at home, and low self-esteem amongst students. These and other factors influence the poor literacy and numeracy skills in the Pilbara and Kimberley.

School non-attendance is recognised as a significant problem across the Pilbara and the Kimberley. Non-attendance was stated to be a visible symptom of a broader social problem, including substance abuse and poor living environments related to overcrowding and substandard housing or homelessness.

Children in Aboriginal families in the Pilbara are advised as being absent from school, on average, 26 days a year with a significant minority being absent for between 60-79% of the time. There was agreement by witnesses to the Committee that 90% attendance rates are needed to achieve good literacy levels.

The Committee was told that in the Pilbara, where both parents are working in the resource sector or at two jobs, ‘shift worker syndrome’ can have a detrimental effect on children’s education.

The Committee is of the opinion that funding to extend essential services, housing, education and health is required if the vision of Sir Charles Court is to be realised and the prevailing disadvantages in these communities are to be overcome.

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Ministerial Response

In accordance with Standing Order 277(1) of the Standing Orders of the Legislative Assembly, the Education and Health Standing Committee directs that the Minister for Health and the Minister for Education report to the Assembly as to the action, if any, proposed to be taken by the Government with respect to the recommendations of the Committee.
Findings and Recommendations

**Finding 1**
Throughout the North West, Foetal Alcohol Syndrome (FAS), and the associated disability, Foetal Alcohol Spectrum Disorder (FASD), both commonly grouped under Alcohol-Related Neurodevelopmental Disorder (ARND), are seen as a moral issue, a public health issue and an education issue.

Foetal alcohol spectrum disorder is thought to be widespread and intergenerational in some communities. There is currently a lack of support services for affected children and their families, at home, at school and in the community.

**Finding 2**
With ear infections a major issue throughout the region for Aboriginal children, the Committee was informed that there are no clear processes for effectively responding to the infections, resulting in long term damage to hearing, significantly impacting educational and post educational outcomes.

**Recommendation 1**
The Committee strongly recommends that the Minister for Health and the Minister for Education develop a Memorandum of Understanding with the purpose of preventing, identifying and ensuring prompt treatment for middle ear infections in children.

This Memorandum will facilitate the examination of all children in primary school by an appropriately qualified school or community nurse. Such examinations should be more frequent during the wet season.

A protocol should be developed to allow the school or community health nurse to examine a child at the beginning of the week and where a middle ear infection is present, to treat ear infections during school hours with antibiotics either kept at school or purchased from the local pharmacy.

Telemetry linked to a medical specialist can be used where there is any doubt as to the presence of an ear infection.

When a child misses school who is being treated for an ear infection, the school health nurse is to notify child development services and the local community health services to ensure another appropriately qualified person is able to visit the child at home to administer the antibiotics.

When the school nurse has treated a child on two consecutive occasions for an ear infection the child is to be referred to the Ear Nose and Throat Specialist.
Finding 3  Page 8
In the Pilbara, where both parents are working in the resource sector or at two jobs, ‘shift worker syndrome’ can develop and have a detrimental effect on children’s education. This can lead to lower levels of literacy, numeracy and school engagement.

Finding 4  Page 9
Overcrowded housing, use and abuse of drugs and alcohol and a culture that holds that non-attendance is normal are significant contributors to non-attendance.

Finding 5  Page 9
The Committee was told that the Aboriginal community functional illiteracy rate may be as high as 80% in many communities in the North West. Positive education outcomes cannot be effectively achieved until the issue of absenteeism is better addressed.

Finding 6  Page 11
In some schools a negative identity in Aboriginal students was associated with poor performance and under achievement. School based strategies are being introduced to support the creation of a positive identity.

Finding 7  Page 12
Allied health services, the Department of Child Protection, and the Department of Education and the Department of Health, all experience significant difficulty in attracting and retaining experienced staff to the Pilbara and Kimberley.

Finding 8  Page 14
While the Department of Education is investing in ICT and the future of e-learning, there remain many issues affecting uptake. These include funding and resources for hardware and software, poor connectivity in some areas, servicing issues, compatibility and accessibility issues.

Finding 9  Page 15
There is a strong demand throughout the North West for a significant increase in parent education and support strategies, and programs to help address the current deficits within fractured communities.

Finding 10  Page 16
The corporate sector in the North West has invested heavily in a broad and expanding range of educational and social initiatives. The State and Federal Government should prepare a framework and strategy for future population growth and development to assist initiatives for future funding in this area.
Chapter 1

Key learnings

Introduction

This report sets out the key issues identified during the Committee’s meetings with a broad range of government agencies, professionals, community groups and individuals in the Pilbara and Kimberley in March 2012.

The research trip was made in the context of the Education and Health Standing Committee’s current *inquiry into improving educational outcomes for Western Australians of all ages*.

Recent NAPLAN results highlight the fact that nearly 30% of Indigenous students did not achieve the reading and numeracy benchmarks and there has been virtually no change in these proportions since 2008. Eighteen per cent of remote area (Pilbara/Kimberley) students did not achieve the reading benchmark in 2011 and 16% did not achieve the numeracy benchmark. These aggregated statistics mask the fact that there is also a very large gap between the proportions of disadvantaged and advantaged students achieving in the top band of results.

In 2011, in Western Australia, only one per cent of Year 9 students from less educated families achieved in the top band for reading and 2% in numeracy.\(^3\) This is a concern to the Committee as it is widely acknowledged that children and adults with poor literacy skills have more difficulties in life.\(^4\) Poor literacy and numeracy levels are also barriers to further education.

There are significant similarities and differences between the Pilbara and the Kimberley that bear on the issues faced by those respective communities and subsequent educational outcomes.

In the Pilbara, the Aboriginal people make up less than one fifth of the population. In the Kimberley, Aboriginal people make up approximately 50% of the population. Consequently, the educational issues faced by the Pilbara community, while similar on the surface to those in the Kimberley, reflect the different demographics of the two regions.

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Figure 1.1 Demographics in the North West

<table>
<thead>
<tr>
<th>Region</th>
<th>Population</th>
<th>Area in square kilometres</th>
<th>% of population that is Aboriginal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pilbara</td>
<td>48,610 5</td>
<td>502,000</td>
<td>16.9%</td>
</tr>
<tr>
<td>Kimberley</td>
<td>35,706 6</td>
<td>421,451</td>
<td>47.4% 7</td>
</tr>
</tbody>
</table>

FASD and behavioural, developmental and learning problems

The problem of excessive alcohol consumption across the region was raised by many witnesses. In particular, alcohol abuse in the Aboriginal communities was highlighted by both Aboriginal and non-Aboriginal witnesses. They commented on the impact of drinking on children, including severe negative impacts on health, education and family life. Extended family members are often heavily involved in bringing up children.

The Committee became more aware of the prevalence and intergenerational outcome of alcohol abuse leading to Foetal Alcohol Syndrome (FAS) and Foetal Alcohol Spectrum Disorders (FASD).

The Committee was advised that significant proportions of children in both the Pilbara and the Kimberley may be affected by FASD with estimates given ranging between 30 to 60% in some communities.8

Throughout the region, both FAS and FASD were described as a moral issue, a public health issue and an educational issue.

Foetal Alcohol Spectrum Disorders (FASD) is an umbrella term describing the range of effects that can occur in an individual whose mother drank alcohol heavily during pregnancy.

The effects of FASD, including alcohol-related birth defects, can vary from mild to severe and may include a range of physical, central nervous system disabilities, as well as cognitive, behavioural and emotional issues.

There is currently no formal diagnostic tool for FASD in Western Australia. A tool is currently being developed which will assist health professionals to diagnose this condition.

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8 Witness, Briefing Broome 14 March 2012.
Chapter 1

The currently acknowledged prevailing diagnosed rate of FAS for the Aboriginal population is 2.76 per 1,000. This is more than twice the prevalence of Down Syndrome which has a prevalence in Australia of 1 in 660 live births. Down Syndrome is the beneficiary of higher levels of funding and support than that applied for children with FAS.

A briefing to the US Senate in 2004 identified FAS as the leading known cause of ‘mental retardation in the United States and [that it] can cause facial deformities, growth deficiency and permanent learning disabilities’ which were entirely preventable.

The concern expressed by many health and education witnesses in the North West was that the Federal and State Governments may delay responding to the true extent of FAS and FASD because of the cost of providing the necessary resources required to adequately address this condition.

There is a significant level of research currently being undertaken around Australia and in the Kimberley into the diagnosis, prevalence and management of FAS and FASD. The Committee was told that the inevitable recognition of the dimensions of the issue will bring potential dislocation of services unless there is good forward planning.

*We have all seen how the changes in practice and policy create real changes in work pressures. For this reason we need to plan in advance.*

The Committee was also advised that the diagnostic criteria of Intellectual Developmental Disorder are being reviewed under Diagnostic and Statistical Manual of Mental Disorders (DSM-5) to be published in May 2013.

The issue of FASD will be the subject of a separate Report due to be tabled later this year (2012) by the Education and Health Standing Committee.

**Finding 1**

Throughout the North West, Foetal Alcohol Syndrome (FAS), and the associated disability, Foetal Alcohol Spectrum Disorder (FASD), both commonly grouped under Alcohol-Related Neurodevelopmental Disorder (ARND), are seen as a moral issue, a public health issue and an education issue.

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12 Witness, Briefing Broome 14 March 2012.
Chapter 1: Key learnings

Foetal alcohol spectrum disorder is thought to be widespread and intergenerational in some communities. There is currently a lack of support services for affected children and their families, at home, at school and in the community.

Hearing loss

A widespread health issue for Aboriginal children is that of chronic middle ear infections.

In Halls Creek, the Committee was told by the Red Hill Catholic Primary School that the problem is so pervasive that the school simply assumes that the children will have some form of hearing issue when they arrive.\(^\text{13}\)

The issue is a national one:

> More than 80 per cent of Aboriginal children suffer from middle-ear infections before they are 12 months old, according to research published in the Medical Journal of Australia. It is one of the highest rates in the world.

> Repeated infections, which cause fluid to build up behind the ear drum, have led to 20 per cent of Aboriginal children suffering ruptured ear drums.\(^\text{14}\)

Figure 1.2 Normal ear ‘v’ one with middle ear infection\(^\text{15}\)

In the North West, repeated ear infections are resulting in lifelong hearing loss. Many schools have sound field systems in classrooms to assist students to hear teachers.

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13 Witness Briefing Halls Creek 15 March 2012.
15 Briefing by Telethon Speech and Hearing May 2012.
Chapter 1

Notre Dame (Broome campus) reported that middle ear infections are a major problem in the region. It is thought that as many as 40% of Aboriginal people in the region have scarred ears, with resultant hearing impairment. Notre Dame reported that when they visited the high school in Broome to provide briefings on their courses, the school was using Auslan interpreters for the children with hearing loss.16

Mawarnkarra Health Service, in Roebourne, reported that hearing issues are a major problem affecting children’s education. They advised that the Western Australian Country Health Service did hearing screening with an audiologist and found that 96% of children in Roebourne in year 1 and 2 had some form of hearing loss and that the rate in year 3 was similar.

The Committee was told that there is a lack of compliance by families in treating their children with antibiotics for middle ear infections. As a consequence, children may need supervision by a school health nurse or to have a hospital stay to ensure that there is compliance with the required 5 days of antibiotics. However, School Health Nurses are currently restricted in what they are allowed to do. It was strongly recommended that the existing Memorandum of Understanding (MOU) between the Department of Education and the Department of Health be modified to allow school health nurses to check, treat and refer children for ear health issues.

The Kimberley Education Region Department of Education WA noted that:

- There is no clear process for dealing with children with middle ear infections; and
- It is the individual principal’s responsibility to have clear referral processes in place.

The issue of hearing loss, as it impacts educational outcomes, will also form part of a separate Report due to be tabled later this year (2012).

Finding 2

With ear infections a major issue throughout the region for Aboriginal children, the Committee was informed that there are no clear processes for effectively responding to the infections, resulting in long term damage to hearing, significantly impacting educational and post educational outcomes.

Recommendation 1

The Committee strongly recommends that the Minister for Health and the Minister for Education develop a Memorandum of Understanding with the purpose of preventing, identifying and ensuring prompt treatment for middle ear infections in children.

16 Witness, Briefing Broome, 14 March 2102.
Chapter 1 \textbf{Key learnings}

This Memorandum will facilitate the examination of all children in primary school by an appropriately qualified school or community nurse. Such examinations should be more frequent during the wet season.

A protocol should be developed to allow the school or community health nurse to examine a child at the beginning of the week and where a middle ear infection is present, to treat ear infections during school hours with antibiotics either kept at school or purchased from the local pharmacy.

Telemetry linked to a medical specialist can be used where there is any doubt as to the presence of an ear infection.

When a child misses school who is being treated for an ear infection, the school health nurse is to notify child development services and the local community health services to ensure another appropriately qualified person is able to visit the child at home to administer the antibiotics.

When the school nurse has treated a child on two consecutive occasions for an ear infection the child is to be referred to the Ear Nose and Throat Specialist.

\textbf{The National Assessment Program - Literacy and Numeracy (NAPLAN)}

NAPLAN is an annual assessment for all students in Years 3, 5, 7 and 9. It tests the types of skills that are essential for every child to progress through school and life, in reading, writing, spelling, grammar and punctuation, and numeracy. The assessments are undertaken nationwide, every year in the second full week in May.\(^\text{17}\)

Formal educational outcomes in remote Indigenous education in Australia are consistently poor; for example, 2008, 2009 [and 2010] National Assessment in Literacy and Numeracy (NAPLAN) results reflect that Indigenous students in remote areas are performing markedly worse against these benchmarks than their non-Indigenous peers in the rest of Australia.\(^\text{18}\) In 2011 Robert Somerville, Department of Education, commented ‘It is interesting that around 50 to 60 per cent of Aboriginal children are not ready for high school—year 8—as we see through the NAPLAN results.’\(^\text{19}\)

\begin{itemize}
\item \textbf{19} Robert Somerville, Department of Education Western Australia, Committee Hansard, Sydney, 28 January 2011, p. 77.
\end{itemize}
Chapter 1

The many witnesses in the Committee’s briefings on this trip to the North West consistently drew attention to the fact that children in the region have poor literacy and numeracy skills as identified by recent NAPLAN results. The Committee is concerned that such poor literacy and numeracy skills will often lead to children falling behind in the school curriculum. Many who fall behind may never catch up with their peers. The long term consequence of educational failure includes poor behaviour at school, possibly unemployment after school and repeated contact with the juvenile and/or criminal justice system. The causes of functional illiteracy are many and some are outlined below.

**Family and community dysfunction leading to low literacy**

One of the distinctive features of the Pilbara that was brought to the Committee’s attention during the visit was that of family dysfunction. Where both parents are working in the resource sector or at two jobs, the long working hours can mean that there is significantly less capacity to give adequate attention to children. One school principal noted that older children were sometimes found to have been kept home to look after their younger siblings. As another witness put it:

*There is emotional neglect by parents when they work twelve hour shifts on the mines. The family may have material resources, but there is no parental time for their kids.*

This situation was described by several witnesses as ‘shift worker syndrome’. The consequence of which was summed up by another witness who noted that:

*Anyone brought up in this mining town has low literacy, low work-skills and high expectations.*

In a corollary to this, a related study by the ‘Program for International Student Assessment’(PISA) team from the Organization for Economic Cooperation and Development, has recently been published that looks at performance on the PISA exam — which every two years tests maths, science and reading comprehension skills of 15-year-olds in 65 countries:

*What the PISA team is revealing is that societies that get addicted to their natural resources seem to develop parents and young people who lose some of the instincts, habits and incentives for doing homework and honing skills.*

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20 Witness, Briefing in Karratha/Roebourne 12 March 2012.
Chapter 1 Key learnings

Finding 3
In the Pilbara, where both parents are working in the resource sector or at two jobs, ‘shift worker syndrome’ can develop and have a detrimental effect on children’s education. This can lead to lower levels of literacy, numeracy and school engagement.

Poor School Attendance

Literature and research emphasise the great importance of regular attendance at school if educational outcomes are to be improved. Yet, school attendance is recognised as a significant problem across the Pilbara and the Kimberley. The reasons given for poor attendance included:

- Education is not valued highly enough. The non-Aboriginal population often reportedly take their children on cheap holidays to places like Bali during school terms.

- Non-attendance is a visible symptom of a broader social problem including factors such as:
  - Inadequate supervision of children;
  - Alcohol misuse and associated family and domestic violence;
  - Health related issues due to lack of treatment or alcohol misuse (FASD in particular, but also medical neglect for some children);
  - Poor living environments – homelessness, overcrowding or sub-standard housing. In some towns and communities there are reportedly only intermittent municipal services;
  - Community dysfunction with a lack of community governance or leadership within some communities; and
  - Lack of community safety.

Children in Aboriginal families in the Pilbara are advised as being absent from school, on average, 26 days a year with a significant minority being absent for between 60–79% of the time. There was agreement by witnesses to the Committee that 90% attendance rates are needed to achieve good literacy levels.

One witness noted that around 80% of Aboriginal students are functionally illiterate when they leave school.23

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Family and community circumstances that are significant contributors to non-attendance and subsequent failure in the education system are:

- Overcrowded housing;
- Drugs and alcohol; and
- The concept that non-attendance is normal.

**Finding 4**

Overcrowded housing, use and abuse of drugs and alcohol and a culture that holds that non-attendance is normal are significant contributors to non-attendance.

The Committee was told by many witnesses that the Department for Child Protection (DCP) does not consider a lack of school attendance to be an ‘a priori’ reason for DCP to become involved with a family. However, schools felt that repeated non-attendance should be a trigger for DCP involvement.

Non-aboriginal children in the Kimberley were said to be less at risk from a lack of parental support at home. Aboriginal children in the Kimberley, it was suggested, suffered from malnutrition and general neglect in some communities.

**Finding 5**

The Committee was told that the Aboriginal community functional illiteracy rate may be as high as 80% in many communities in the North West. Positive education outcomes cannot be effectively achieved until the issue of absenteeism is better addressed.

**The need to support a positive Aboriginal identity**

Youth are constrained by social paradigms but they can be more than that.24

**Employing Aboriginal staff in schools**

Identities can be formed through negative situations and role models leading to failure. Several witnesses noted that there is a need to challenge the negative identity in many, if not most, Aboriginal students which can collude with poor performance and underachievement.

Such negative identities need to be replaced with a positive mindset. One way this is achieved is seen to be through the engagement of Aboriginal staff, who provide a positive role model.

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24 Witness, Briefing Broome 14 March 2012.
Chapter 1

Key learnings

One school, as a matter of policy, employs aboriginal people to work in and around the school. In doing so these staff ‘role model’ achievement and, in the process, their own self-esteem is raised. The committee were told that historically, these staff have moved through higher levels of responsibility within the school. This has assisted them to move on and work in other organisations. This is a service the school can provide to the community as part of a community development effort. The school is the biggest employer in the town, so it can be a training institute for adults as well, to add value to the community.25

Dr Chris Sarra who is a renowned Aboriginal principal and educator sees this approach as one that changes, positively, a student’s sense of what it means to be Aboriginal. It prompts Aboriginal children to reconsider the way they see themselves, and encourages their formal engagement in the education process.26

One of the greatest challenges was taking on the children’s own negative perception of who they were as Aboriginal children.27

The Kimberley Education Region office highlighted that when looking at the home life of Aboriginal children, it is important to recognise that the school has a sphere of influence regardless of the dysfunction existing at home.

The Department of Education has a partnership with Dr Chris Sarra to undertake (using his staff) professional development for teachers in the Kimberley. The program works to bring about transformational change in schools, and to stop the ‘collusion of low expectations around aboriginal children.’ 28

Dr Sarra overcame low expectations for his future to become an educator who has sought to change the tide of low expectations for other Indigenous students by:

- Addressing low expectations in the students, the teaching community as well as in the broader community both Aboriginal and non-Aboriginal;
- Setting high standards; and
- Engaging the community.

One strategy that is seen to support a student’s positive identity is the requirement of school uniforms.

25 Witness, Briefing Halls Creek 15 March 2012.
28 Witness, Briefing Halls Creek 15 March 2012.
Chapter 1

School uniforms

In terms of uniforms, for some schools hooks are provided to ensure children have some part of a uniform e.g. a shirt that they can dress with on arrival and so mark the transition from home.

The Department felt that it is incumbent on the school to address school culture in a way that benefits the students. This may be supplying a uniform or through other mechanisms such as the provision of breakfasts or lunches. Students at each school have different needs and schools are encouraged to address those needs appropriately.

Finding 6

In some schools a negative identity in Aboriginal students was associated with poor performance and under achievement. School based strategies are being introduced to support the creation of a positive identity.

Education and Aboriginal culture

The Committee recognised that Aboriginal culture permeates the life of Kimberley communities. In one example, two witnesses separately told how cultural traditions live on in the form of initiation of young boys at the age of 13 or 14. Prior to initiation they were ‘boys’ in the school system. However, subsequent to initiation they saw themselves as men and resented being told what to do in the manner that had been acceptable in the past. One teacher dealt with the issue by using the initiated ‘men’ to help keep order in the class.

In many parts of the Kimberley, English is a second language. People speak their traditional Aboriginal language and Kriol (pronounced Creole) which is a distinct Aboriginal language and then English. ‘The effective teaching of English to Kriol speaking children must first acknowledge and value the children’s first language.’

To assist in addressing the cultural based issues, Notre Dame (Broome) provides a cultural training course in Broome. The rationale is that if teachers, and others, know the cultural context of their students’ lives, then it is far more likely that they will be effective in teaching and imparting knowledge.

Attracting and retaining staff

The inability to attract and retain staff was a major concern for most agencies with whom the Committee met. For instance:

- Karratha Senior High School saw 40 Deputy Principals over 8 years and six Principals over 4 years;

29 A Karrayili Adult Education Centre Project, A cultural awareness book designed for non Aboriginal people working in the Fitzroy Valley Karrayili Adult Education Centre, Fitzroy Crossing, p13.
Chapter 1

Key learnings

- ‘In Derby [hospital] there were 50 different locums in the last year’;\(^{30}\)
- One of the reported issues in the Kimberley is the high turnover of principals and staff. Parents see the turnover and it reduces the level of parental engagement in the schools.

A contributing factor to the inability to attract and retain staff is the issue of the lack of accommodation. As one senior manager put it, ‘the first question we get asked is ‘is there accommodation and what is it like?’’ The scarcity of accommodation and the cost of renting were highlighted by many witnesses, in both the Kimberley and the Pilbara. Some examples of the way a lack of suitable accommodation impacts staffing are:

- 14% of DCP positions in the Kimberley are unfilled;
- Notre Dame Broome has three Aboriginal staff who will need to resign as their incomes take them above the Department of Housing thresh-hold, which does not recognise regional rental costs;
- One witness reported that: ‘There is a dearth in Allied Health Services in the Kimberley because a real lack in available accommodation’;\(^{31}\)
- Fitzroy Valley Health Services have as many as 30 locums come through in a year.
- The hospital in Fitzroy Crossing should have 16 FTE nurses but is currently short 3 FTE. A major problem is housing, as some nurses have to share and shift around between houses to accommodate changes in the staffing profile. Some nurses have moved 5 times in a year, to make way for staff with differing accommodation requirements;

Finding 7

Allied health services, the Department of Child Protection, and the Department of Education and the Department of Health, all experience significant difficulty in attracting and retaining experienced staff to the Pilbara and Kimberley.

e-Learning and Information and Communications Technology (ICT)

The Department of Education advised the Committee that:

*For several years the Department has invested in technical infrastructure and centralised ICT systems to improve the quality and flow of information to and from schools and to enhance the effectiveness and impact of online learning systems. The return on this*

\(^{30}\) Witness, Briefing Broome 14 March 2012.
\(^{31}\) Witness, Briefing Broome 14 March 2012.
investment has been mixed, with huge improvements in student information, digital resource access, reporting and interschool communication and less than expected uptake and retention of technologically-enhanced teaching and learning approaches.\(^{32}\)

Throughout the Pilbara and Kimberley, the Department’s investment in the area of ICT was acknowledged. The future of e-learning is seen ‘as a big thing’ in the regions both for students and teachers.\(^{33}\) In particular, it has the potential to enable access to professional development which would otherwise be prohibitively costly, with a ticket to Perth costing $600 - $1,000.

Professional development is seen as especially important because there are many inexperienced teachers in the region, as well as many ‘who have been there for years and who tend to get ‘tunnel vision’’.\(^{34}\) E-learning is seen as a very important conduit for new ideas, mentoring and professional dialogue.

Digital education changes education from teacher centred learning to a student centred world. However along with the promise that e-learning holds for the future are a number of current difficulties affecting uptake. Witness perceptions and comments included:

- In IT things move quickly. While individuals have the capacity to keep up, the systems are slow. ‘We have a narrow band of supported software and cannot download any programs that are outside of these’.

- The Department of Education needs to improve access to Skype, online forums, video conferencing etc. ‘In educational terms, e-learning is one of our greatest challenges’.

- Connection issues – We need good bandwidth, stable connections and consistent platforms, so that schools have the same systems and can form linkages. We need compatible software and hardware.

- There are issues with getting things repaired. ‘At the moment, there is a mishmash with each school doing ICT themselves’.

- Teachers have to take tablets home to use their own iTunes accounts to load apps etc., because schools aren’t supported through Wi-Fi and other systems such as iTunes.

\(^{32}\) Submission No. 15 from The Department of Education, November 2011, p2.

\(^{33}\) Briefing Karratha 12 March 2012.

\(^{34}\) Briefing Karratha 12 March 2012.
Chapter 1 Key learnings

- While recognising that in the digital age there is less need for proximity to the central office in Perth, there is a need for a regional ICT coordinator in both the Pilbara and the Kimberley.

- Many new applications such as iPad do not conform to standards and in terms of monitoring/filtering use we do not have any software like ‘network nanny’.

- Servicing is a major issue as we are under a contract imposed through central office and that means that there is a reliance on their flying in a technician for major issues.

- Internet connections can be unreliable.

Finding 8
While the Department of Education is investing in ICT and the future of e-learning, there remain many issues affecting uptake. These include funding and resources for hardware and software, poor connectivity in some areas, servicing issues, compatibility and accessibility issues.

Parenting Classes
The need for parenting education and support was highlighted by many witnesses, in different locations. There were requests for programs such as Best Beginnings and Strong Families to be extended. It was felt that the level of social dysfunction in the two regions was not adequately recognised.

The Committee was told that in the Pilbara, a combination of ‘shift worker syndrome’ and high levels of post-natal depression amongst the broader community place children at risk.

In Aboriginal communities, the breakdown of traditional social structures, intergenerational trauma and family dysfunction are seen as significant risk factors for children. Some suggestions made to address these issues included:

- That parenting classes should be included in school curricula, as there are many very young parents in the Pilbara and the Kimberley.

- An independent parenting class needs to target parents of all ages in the region, and to focus on both parents, not just the mother.

- Classes should cover issues such as the role and responsibilities of parents; the need for the father to support the mother; the need for discipline and boundaries; how to discipline a child; sexual health issues; communication skills; and that a parent is a parent and not a friend.’
• Urgent training for men and fathers in communication, emotional management and anger management.

Finding 9
There is a strong demand throughout the North West for a significant increase in parent education and support strategies, and programs to help address the current deficits within fractured communities.

Corporate engagement in the Pilbara
The Committee was struck by the high level of corporate support for the education system in the Pilbara including:

• The support of Karratha Senior High School by the North West Shelf Venture, worth approximately $600,000.

• The facilitation of partnerships between schools. For instance, Newman and Hedland schools have been funded by BHP to develop partnerships with Shenton College and Mt Lawley Senior High School. The funding from BHP covers things like releasing teachers from their workload to attend professional development, travel costs, etc.

• Roebourne TAFE has been working with Rio Tinto to provide education for disengaged students.

• Woodside and the North West Shelf Venture fund a program called the Karratha Education Initiative, which works with Karratha Senior High School and St Luke’s College. The program started 5 years ago as the Karratha Education Program. It has $1 million a year, split between the two high schools. The partnership program funds activities aimed at:
  • Improved teacher retention,
  • Improving quality of teaching;
  • Provision of professional development and motivational programs for teachers.
  • Encouraging community work by students through reward programs such as the Leeuwin program. It is open to all students, and includes the sponsorship of 2 scholarships for indigenous students to attend St Luke’s College.

Woodside is hoping to start expanding the program into primary schools.
Chapter 1 Key learnings

Finding 10
The corporate sector in the North West has invested heavily in a broad and expanding range of educational and social initiatives. The State and Federal Government should prepare a framework and strategy for future population growth and development to assist initiatives for future funding in this area.
Appendix One

A summary of the trip to North West

Pilbara Education Office - Karratha

Administrative issues

- In the Pilbara, there are approximately 30 schools, which have 8,500 students, of which 2,300 are Aboriginal students. There are approximately 500 teaching staff, and many of the schools are remote community schools.

- There are vast differences in the availability of resources to schools in the Pilbara area. Some have access to significant dollars from partnerships with mining companies, and some do not. Other challenges for schools in the area include a lack of access to affordable and quality professional development for staff, and significant numbers of less experienced teachers in the area.

- Some schools in the region have developed partnerships with metropolitan and other schools in the state, to improve educational and relational opportunities for students and staff. Partnerships are built based on local needs and on mutual benefit. Some schools are funded by mining companies to develop their partnerships.

- The Pilbara Education Regional Office is working to develop collaborative networks between schools in the region, to encourage better information exchange and support for schools. Such networks help to provide support for teachers working in smaller, more isolated environments, for example by allowing them to share work samples, content etc. There is a dedicated network ‘collaborative coordinator’ funded at 1.0FTE.

- The system of education administration in the Pilbara has recently been restructured away from a centralised model to move resources and decision-making closer to schools. The new approach has only been in place for 9 months so it is too early yet to assess the effectiveness of the new model.

Attendance and participation

- As a general rule, students need to attend school 90% of the time to keep up with the class. An attendance rate below 90% is usually considered to place the child ‘at-risk’. Unfortunately attendance rates are often below 90%.

- The cumulative disadvantage to a student of regularly missing school can be difficult to overcome. In addition, the challenges for the teacher in managing the
learning needs of all the students in the class when there is significant absenteeism can impact on all the students in the classroom.

- The Pilbara has a range of attendance staff. There are school based attendance officers (SBAO), attendance coordinators, and an attendance manager. Generally, attendance isn’t much of an issue in years 1 to 3. From year 4 to 10, the attendance staff work with the students, and then a ‘Participation Team’, which is funded by DEEWR, focusses on year 11 and 12.

- Principals have funding to employ School Based Attendance Officers (SBAO), who work with parents and the family to address attendance issues.

- While SBAOs can’t address social issues or mend family crises, they can and do work on providing assistance to families and to build the value and importance that families place on education for their children. SBAOs particularly focus on the attendance of Aboriginal children. ‘Where communities are disrupted, schools are an important way to build up solidarity.’

- Schools run a variety of attendance strategies including breakfast programs, provision of uniforms, bus services, and reward programs. Each attendance strategy must be tailored to the local circumstances, to address the needs of particular families and students.

- Representatives from various schools reported on the range of initiatives that they run to improve attendance in their area. Some commented that sometimes parents simply refuse to open the door to school officials, and refuse to engage on the issue of attendance.

- In the view of one Principal, there should be greater cooperation and linkage between schools, the Department for Child Protection (DCP) and Police. If parents are simply unwilling to send their child to school, it should become a police issue. If they are unable to send the child to school on a regular basis, it should become a DCP issue.

- It was reported that the Department for Child Protection is reluctant to become involved with school attendance issues, and that attendance is not considered a significant enough issue for DCP involvement. ‘School attendance is not on DCP’s radar.’ This is thought to reflect a lack of resources.

- It was noted that the Department of Education has the power to take parents to court over the issue of attendance. The penalties that can be applied for non-attendance are fines. It was noted that schools and the Department of Education do not currently use to the full extent the powers.
One Principal remarked that his school tends not to use negative, punitive approaches such as involving the police or going down the legal avenue, because they have found that a ‘supportive’ approach tends to be more effective.

For schools for which attendance is an issue in the Pilbara, it is hoped that the new ‘networked’ way of working will assist with attendance, as they will be able to pool resources. It was felt that the entire region would benefit from more resources for attendance staff.

School participation and attendance programs based on sport have been shown to have some success. The Clontarf Foundation operates in the region, as does the VSwans football program. However, the experience that schools reported was that these programs, while useful, are not the sole answer to attendance. Clontarf is particularly useful because their staff are co-located on the school grounds and are there all the time. They are not fly in, fly out, which means that they become integrated into the community. Clontarf is now operating in primary schools from year 5 to try to address attendance as students begin to disengage, and to ease the transition into high school.

A similar program is needed for girls. Clontarf has the money to provide programs for boys, but the schools do not have funding to provide a similar program for girls.

E-learning

E-learning and ICT are big issues in the Pilbara. ICT innovation happens so quickly that it is difficult for the system to keep up. While individuals can respond quickly to changes in technology, large bureaucratic systems find it much harder.

E-learning will have significant benefits for both students and teachers in the Pilbara.

For teachers, it is currently difficult and expensive to access professional development and training, due to the costs involved with travelling to a centre (usually Perth), to access training (fares of $600 to $1000 per person). There are many inexperienced teachers in the region, along with many who have been there for long periods; some of whom, it was suggested, may have developed ‘tunnel vision and need support to engage technology. Engagement with new ideas, mentoring programs and training programs delivered electronically are therefore very important for the region.

For students, e-learning will open up a broad range of opportunities that would not otherwise be available to them. The local community has historically not had a great deal of faith in the education opportunities in the Pilbara. Many parents plan to move back to Perth to enable their children to complete year 11 and 12 in Perth,
believe they will have better opportunities if they do. To address this issue, both Karratha and South Hedland will have brand new, state of the art schools, opening in 2013 and 2014.

- There are a range of issues that prevent the full utilisation of e-learning at the moment. These include:
  - Connection issues – schools need good bandwidth and stable connections.
  - Compatibility issues – there is no coordinated approach to ICT in the Pilbara, meaning that each school develops its own approach. In order to maximise compatibility and opportunities for linkages, the region needs a coordinator.
  - Service and support issues – schools face challenges in getting repairs and services done in a timely manner. There are also gaps in the support provided for various systems and software applications.

**Foetal Alcohol Spectrum Disorder (FASD)**

There are concerns throughout the region regarding the perceived under-diagnosis of FASD. The visible, diagnosed cases of Foetal Alcohol Syndrome (FAS), are considered to be just the tip of the iceberg. There are difficulties in distinguishing FASD (as opposed to FAS) from the other neuro-developmental problems that manifest in schools. It is thought that while the diagnosed rate in some schools is around 6-7%, the reality may prove to be closer to 20-30% once an adequate diagnostic tool is developed.

The difficulties in distinguishing FASD from other disorders, along with the subjective nature of ‘guesstimates’, highlights the fact that a clear diagnostic tool is desperately needed. A consistent measure needs to be applied.

In the Pilbara, under the health learning area, students are educated about the dangers of drinking during pregnancy. School nurses have an educative role to play in this respect but are often not available. All schools need more time with their school nurse, as it was reported that time constraints mean they are only really able to provide screening.

**Facilitating opportunities to engage students in year 11 and 12**

It was reported that there are difficulties in the Pilbara area around providing alternative forms of training for students in year 11 and 12. There is a lack of community-based training for students who refuse to go to the school site. It was suggested that TAFE doesn’t really cater for disadvantaged, low socio-economic status students who require dedicated, face-to-face education. The registered training organisations (RTOs) tend to cater to industry, and the Department of Education can’t compete with industry in terms of payment. There are reportedly many 15 to 17 year
olds in Karratha (and surrounds) who are waiting for a place on a ‘work ready’ program, but the Department of Education Participation Team is unable to get them a place. There are only a few private trainers who provide that sort of course. This is in part due to a shortage of people available to run that form of training.

**General points raised during the forum**

Participants were given the opportunity to raise issues they felt were important, these included:

- The region as a whole has issues with emotional neglect. Families may have sufficient material resources, but if both parents are working 12 hour shifts on the mines, the children may be suffering from a lack of parental support.

- There is quite a lot of transiency in the region with families moving between Karratha, Roebourne, Onslow etc. Schools need to manage transiency better, with better information sharing and co-operation.

- ESL is becoming an issue as the mining companies bring in workers from overseas who have families that don’t speak English. For the Aboriginal population, ESL is often an issue compounding existing difficulties.

- The focus of education needs to be from birth to year 12. Some children, particularly Aboriginal children, need to have 2 years of kindergarten so that they are ready to start school. The earlier they are engaged in an educational environment, the better.

- Hostel facilities are needed in the Pilbara. Parents of children who use the school of the air would like to be able to access hostels. Aboriginal parents also want hostels to enable their children to be educated without needing to leave the region.

- Local decision-making needs to engage local indigenous representatives.

**Pilbara Regional Development Authority Forum - Karratha**

A range of agencies operating in and around Karratha attended the forum organised by the Pilbara Regional Development Authority. A range of points and issues were raised:

- The Smith Family is looking at establishing an Aboriginal playgroup in Karratha, which will try to build linkages with the community. The community has stated that they would like the playgroup to be situated away from the school site, so that parents who are scared of the school will be able to access it. The Smith Family feels this is an important first step to engaging those who would otherwise not be prepared to engage.
There is a big problem with continuity of staff, particularly in places like Roebourne. Most of the service sector people come and go within 12 months.

Action on FASD has to come from the community to be effective. Men’s and women’s groups are the key to this.

The Karratha Family Centre runs a school readiness program, which is aimed at 3 year old children. It takes a maximum of 15 students per class, and runs 4 classes a year. The current cost to parents is $180 a term. The organisation is seeking funding so that the program can be delivered without a fee to parents.

Woodside and the North West Shelf Venture fund a program called the Karratha Education Initiative, which works with Karratha Senior High School and St Luke’s College. The partnership program funds activities aimed at:
- Improved teacher retention,
- Improving quality of teaching;
- Provision of professional development and motivational programs for teachers.
- Encouraging community work by students through reward programs such as the Leeuwin program.

The program has $1 million a year, split between the two schools. It is open to all students and includes scholarships for Aboriginal students to attend St Luke’s College. It is hoped that the program can be expanded into primary schools in the area.

UWA is conducting a feasibility study to look at establishing a campus in Karratha. While the population of the area is too small to sustain an undergraduate campus, a facility could provide post-graduate study opportunities, and possibly also individual modules for mining companies on a demand basis. A campus would also provide the means to facilitate the study of other subject areas such as rock art and health.

‘Shift worker syndrome’ was identified as a problem in the region: where one or both parents are frequently absent due to working long shifts in the mines.

For Pindan College, which provides trade-training to young men, one of the big challenges is getting the student to complete the course. It costs the big companies about $250,000 to put an apprentice through an apprenticeship, but many of the students ‘chop and change’ and fall out of the course. One challenge for the college is therefore to assist the students to make better choices at the start.
• Many of the big companies have transition and ‘work ready’ programs and have a zero tolerance policy towards drugs and alcohol. Pindan College does a drug/alcohol test on entry to the college, and then random testing once a quarter and standard testing once a semester. The students involved in an industry placement have to participate in the testing regime carried out by the company providing the placement. Despite this, with the prevalence of drug use in the community, Pindan College finds it difficult to get the students to dry out enough to make it through the random drug testing processes.

• There are vacancies in both child health nursing and school health nursing in the Pilbara.

• Post natal depression is a big issue in the area. It is less of a problem for Aboriginal mothers, but is a significant problem for other mothers in the community.

• There are not many support services to which people can be referred to in the Pilbara. The services that do exist have limited capacity.

• The YMCA highlighted that a lack of time with parents is an issue that has been identified through a survey of the region’s youth.

Mawarnkarra Health Service Aboriginal Corporation - Roebourne

• A major issue impacting on educational outcomes in the area is hearing. The school has sound field systems to amplify the teacher’s voice to improve students’ ability to follow the class. Hearing testing and intervention should be occurring from a very early age.

• The WA Country Health Service recently did some screening in Roebourne and found that 96% of children in year 1 had some form of hearing loss. In year 2, it was 96% and in year 3 it was 94%. There is now an ‘Ear-bus’, sponsored by Chevron, which visits the area and conducts screening, but there is a clear need for a coordinated mechanism to ensure that children receive medication for the required period (5 days), and/or surgery for grommets if that is required.

• At the moment, surgery must occur in Karratha as the Roebourne hospital is not equipped to manage it. This raises a range of logistical problems and limits the extent to which surgery can be carried out.

• The child health nurses at Mawarnkarra provide a flexible service in both the pre- and post-natal periods. Every baby is seen within the first 10 days, and then home/clinic visits occur as frequently as needed or required by the parents.
• The effectiveness of the Mawarnkarra child health nurses has been negatively impacted by a directive from WACHS that they are not to immunise children without first contacting a GP. This makes it harder to access families and reduces their effectiveness in the eyes of the family.

• It was noted that there is ‘the potential for community uproar’ once children are diagnosed with FASD.

• Parenting programs are desperately needed in the area. They could be run in the schools, as there are many very young parents. It needs to be an independent program, and aimed at all parents within the community. It could target both parents, not just the mother, and cover issues such as: the roles and responsibilities of parents; the need for the father to support the mother; the need for discipline and boundaries; how to discipline a child; sexual health; communication skills; and that a parent needs to be a parent, not a friend.

Yaandina Family Centre – Roebourne

• Yaandina started in 1975 providing a single service to the Roebourne community. It now has an annual turnover of $8 million and runs more than 10 community services. These include early child care, literacy programs in the year before, and the first year of school, a school attendance strategy, aged care services, youth services, a patrol bus linked to the sobering up shelter, and a Parents and Learning (PAL) book loan program.

• Yaandina has been built around community need. It works on a model of community development and capacity building. It has a staff of 60, half of which are Aboriginal. Only a small proportion of the total staff could be described as functionally literate. Most of the staff are clients of Yaandina services. The work is about mentoring and providing role models for people. In many ways, Yaandina has to fill the place of absent parents. It employs 3 family support officers.

• An anecdotal estimate from a previous school principal suggested that as many as 40% of the children in the school may have FASD.

• Many of the children in town have absent families, either because they are working or because they are drinking. The children have to be taught how to care for themselves, and many of them have very poor health.

• There has been discussion within the town about the need for an ‘away place’, or hostel. This would be a place where children could go to get away from overcrowded houses where people are drinking and/or fighting during the night. It
could either be an emergency centre, or a regular accommodation option for children to attend during the school week.

- A further suggestion for improving educational outcomes was to extend the hours of school, so that children attend early in the morning for breakfast, have lunch, and then stay after school for homework, activities and dinner. Another possibility would be to establish a ‘year 13’ of schooling, as is done in Melbourne for homeless youth.

**Karratha Senior High School (KSHS)**

KSHS is going through a process of renewal. It was in very poor condition and is being rebuilt. There is now a new approach to teaching and learning at KSHS. The NAPLAN results for year 9 in 2011 showed some significant improvements, and the school had 100% graduation that year. The new school buildings will be available from mid-2013.

One of the issues the school faces is the difficulty of finding VET programs that are suitable for its students. The Pilbara Institute (TAFE) is nominally the provider for VET for the school, but we were advised that it primarily services the resource industry. It does not see 15 to 17 year olds as its client group. The school is forced to go to private RTOs to source courses for its students, and the options in the area are very limited.

**Gumala Mirnuwarni**

Gumala Mirnuwarni is a program for indigenous students which encourages them to work towards fulfilling their aspirations. It is a homework and tuition program which runs after school, and which provides a bus service to take students home afterwards. It takes 40 students a year, who are invited in year 8 to participate. Students are invited based on recommendations and achievement data from the primary schools. The program has won awards and is funded by the Department of Education and Rio Tinto, Woodside, and the Polly Farmer Foundation.

**Education issues**

Some of the issues relating to education that were identified included:

- Adult learning in the area is not adequately catered for at the lower level.

- Retaining quality teachers, particularly in the TAFE, is difficult, as they are often able to obtain better wages working for a mining company.

- There is a need for advocacy within the community so that education is valued and seen as important.
• Transiency is a significant problem in Karratha, with up to 12% of the school moving on each year. Karratha is seen as a town where ‘you make your money and then you get out’.

• Absenteeism is a significant problem, with many parents willing to remove their children from school in order to go on cheaper holidays outside the school holiday period.

• Increasing multiculturalism within the school, and greater numbers of ESL students.

Kimberley Education Region, Department of Education WA

The Kimberley Education Region has 24 government schools, including one senior high school in Broome, a district high school in Kununurra, four other district high schools, three primary schools in Broome, 13 remote community schools, the Kimberley Camp School, and the Kimberley School of the Air.

Alternative education pathway for disengaged youth

The Kimberley Education Region has an alternative pathway for disengaged youth who don’t want to attend school, run as an alternative site with the Broome PCYC. The Broome PCYC Learning Centre is designed to accommodate up to 15 young people who have become disengaged from traditional schooling. The centre targets young people who don’t attend school on a regular basis, or not at all in some cases. The youth are initially engaged by the PCYC Police Officer and guided into programs with the aim of promoting healthier lifestyle choices, positive attitudes and giving these young people a second chance at life. The Learning Centre employs a full time teacher and is run in partnership with Broome Senior High School and Clontarf Football Academy. It is sponsored by Woodside. The Department of Education calls the facility an ‘offsite classroom’. The Learning Centre delivers the same curriculum as the school but in a different environment. It is funded by the SSEP - Senior School Engagement Program. The Learning Centre also includes other programs such as Youth Connections.

Aboriginal Tutorial Assistance Scheme (ATAS)

All schools are able to access ATAS. The funding provides supplementary tutorial assistance to Aboriginal students to improve their literacy and numeracy skills from year 4 to 12. There are four ATAS elements in WA public schools: Primary ATAS, Lower Secondary ATAS, Upper Secondary ATAS, and ATAS Specialised Programs, which can be accessed for tuition assistance by students in the ‘Follow the Dream’ program. The funding is provided to schools to assist students to meet the targets for literary and numeracy as outlined in the Aboriginal and Torres Strait Islander Education Action Plan 2010 – 2014, and the Aboriginal Education Plan for WA Public Schools 2011 – 2014.
Accommodation for School Students – an AWAY PLACE

An issue that was raised with the Committee on several occasions during the research trip was the lack of accommodation options for school students. These are students who either need to move some distance from their family to complete their schooling, or for whom need a form of refuge accommodation during the school week to facilitate their ability to gain an education.

This could involve attending a hostel-style facility from Sunday night to Thursday night. As one representative of the Education Office stated, ‘I would have a large hostel in every large town for week stays and the children would go home at weekends.’ Such a facility could provide a secure environment with support for homework, extra tuition, and good nutrition and out of school activities, while still enabling the students to return to their families over the weekend.

It was acknowledged that there would be some sensitivity around the idea given concerns about the Stolen Generation. However, if it were handled well, created in consultation with the local Aboriginal community and staffed by Aboriginal workers, it could be possible.

Different communities have discussed such an initiative, including the Fitzroy Valley. As an example of what could be done, the Committee was told of the current residential college in Broome, which has a 40 bed capacity and was opened in 2008. The college caters to students at Broome Senior High School and St Mary’s College. The design and establishment of the facility involved much consultation with the Broome community and has paid close attention to ensuring consultation with Rubibi Traditional Owners. There is always a waiting list to get into the college, so building will start on an extension to double the size of it in mid-2012.

Another example is the hostel in Kununurra.

It was also felt that any hostel should be linked to family support services and that it should provide opportunities for activities to be run to strengthen families. Many people want programs that are designed to strengthen parents and family functioning as a whole.

Issues in the Kimberley

Staffing: one of the issues throughout the Kimberley is the high turnover of principals and teachers. This impacts on parental engagement, as parents are less likely to engage with the school if there is constant turnover. Building the capacity of staff also becomes an issue when there is frequent turnover.

Allied Health Services: There is a lack of allied health services in the Kimberley, due in part to a lack of available accommodation and to difficulties in recruiting and retaining
staff. An additional problem is that many communities are serviced on a hub and spoke model, which is often inadequate. Wherever possible services, along with the staff, need to be based in the town in which they work.

**Hearing problems**, particularly in Aboriginal children: there is no clear referral policy across schools or the region for managing hearing issues. It is the individual responsibility of each Principal to have a referral process in place. All schools have a ‘sound field’ system installed which amplifies the teacher’s voice evenly throughout the classroom.

DEEWR has provided funding under the ‘Closing the Gap’ program to ensure that every classroom in the Kimberley has a sound field system. While there is some access in the larger towns to school health nurses to do hearing screening, much greater capacity is needed.

The Education office is trying to establish a process for following through with children who have been identified with hearing issues, to ensure that they receive the treatment they need. A consistent referral process is needed, along with a region-wide policy on hearing. At the moment, the process is described as ‘hit and miss’.

**FASD**: The Committee was given an estimate of 33% of children being affected by FASD, although far fewer are currently diagnosed.

**Attendance**: is an issue throughout the Kimberley. There are 18 school based attendance officers (SBAO) throughout the region, funded by the Aboriginal Education Attendance Grant.

The SBAO target the students falling into the 60-80% attendance band. The SBAO money and officers are managed by Principals.

- Broome has three officers spread between 3 schools.
- Kununurra has more, in part because Kununurra had an attendance rate of 56% for its Aboriginal students.

It was stressed to the Committee that SBAOs need to be local aboriginals who will be better equipped to engage with families.

The Committee was told that the *Parental Support and Responsibility Act 2008* is cumbersome and unwieldy, and is being rewritten. Under the Act, an application for a responsible parenting order may be made by the CEO of Child Protection, the CEO of Education or the CEO of Corrective Services, but in practice the mechanism has not been used. The Education Office reported that the Department for Child Protection did not view school attendance as an issue for intervention, only violence, abuse and neglect. Attendance is not seen as DCP’s concern.
**ICT:** servicing of ICT equipment in the Kimberley is a major problem, as the contract is centrally administered through the Department of Education’s central office in Perth. This means that the service technician is not usually locally based, and schools have to wait for a technician to be flown in to solve problems.

**Ms Maureen Carter, Dr John Boulton, Mr Tim O’Brien – Broome**

This briefing focused on FASD.

General points about health services in the Kimberley:

- ‘We do well in hospital saving lives, but badly in the community where children are malnourished and there are rampant ear infections.’

- There is a need for formal co-operation between government agencies and within agencies, (especially Health), to achieve a properly integrated family-focussed service to provide support and medical intervention for children with chronic serious illness.

- Some Aboriginal medical services do not feel that the Department of Health can deliver a culturally sensitive service. At the same time there are concerns around probity and the quality of clinical governance in some Aboriginal medical services.

- As many as 10% of children in the Kimberley have early renal disease.

**Housing:** Outside of Broome, there is very little housing available on the rental market in the Kimberley. Rents in Broome start at $700 a week, and in Kununurra, $1,000 a week. This makes providing housing for health workers very difficult. The Department of Health (DoH) has worked separately on housing to the Government Regional Officers’ Housing (GROH) program, but is moving to operate within the GROH scheme.

DoH stated that it is 15 houses short in Fitzroy Crossing, and 15 houses short in Halls Creek. ‘We need a quick build mechanism – you can build a flat pack in less than three months and while they might have a shorter life span, they would relieve the log jam and allow housing to catch up.’ The cost of a flat pack was estimated at $250,000 fully erected.

Housing is an issue not only for people moving into the Kimberley from elsewhere, but also for local Aboriginal staff. Many people who could be hired locally are living in overcrowded conditions that are not conducive to sustaining employment.

**FASD:** According to an expert witness, ‘there is an enormous amount of FASD’ in the Kimberley. The extent of morbidity could be as high as 60%. For every child that has FAS, there are another six who have pre-frontal cortex issues, evidenced by children who literally cannot sit still.
A diagnostic tool is being developed that is a hybrid of that in use in Canada and one developed by the University of Washington, USA.

It was suggested that there is minimal awareness of FASD at a Ministerial/executive government level. Such awareness predominantly views FASD as a remote North West indigenous issue. There is much concern that once the diagnostic tool is in place and evidence becomes available of the prevalence of FASD, the government may delay responding to the issue because of the magnitude of the problem. The committee were told that the funding for the Liliwan project, currently underway in the Fitzroy Valley, did not come from the state government, but from the Commonwealth government and NGO sponsors.

Once the prevalence of FASD becomes known, it has the potential to overburden medical and allied health services as they experience a significant increase in demand.

An area that needs further research is a cost benefit analysis of family support and intervention for a child with FASD.

Any response to FASD should include the following:

- A high level of formal co-operation across agencies to deliver a family focussed service;
- An interdisciplinary team approach to working with families;
- The recognition that FASD is not just a health issue, it is also an education issue, due to the impact that FASD has on a child’s ability to learn, and the impact that child may have in the classroom.

Some recommended areas of action included:

- An external review of the way that resources are used for child health across all agencies, to encourage and develop interagency cooperation and an interdisciplinary team approach to service delivery.
- A matrix management model for interdisciplinary teams so that the focus in on the case management of the individual within the family group.
- The automatic referral of a child to an audiologist after 2 ear infections.
- That regulations be amended to allow School Health Nurses to assess and provide care for children with identified ear infections, such as syringing, prescribing medication and referral to an Ear Nose and Throat specialist. This would entail the alteration of the MOU between the Department of Health and the Department of Education that governs the School Health Nurse’s role.
• That research is funded for a health economist to carry out a study assessing the costs of FASD to the Western Australian community.

• Greater investment in health promotion and funding, not just clinical care.

• Aboriginal medical services to be utilised for the cultural entrée they are able to provide to aboriginal communities, particularly for health promotion work.

The University of Notre Dame – Broome Campus

Notre Dame Broome is unusual in that it runs as a dual sector university with both academic and VET pathways of education. The campus is very focussed on promoting linkages with the community, and holds a monthly open day for ‘friends of Notre Dame’.

VET and transitions

The structures of the courses run by Notre Dame aim to encourage students to move between the VET and the university pathways. The completion of a course of study at Certificate IV or Diploma level will generally allow entry into an undergraduate course.

While the completion rates for VET courses are not as good as Notre Dame would like, they are better than the figure provided to the Committee by NCVER (average completion rate of 27%). Notre Dame focuses on the following areas to promote completion:

• Family support and mentoring

• One to one back up on literacy and numeracy

• Cohort support groups.

The university runs various initiatives designed to encourage the transition from school into higher learning. For example, they run a 5 week health program for 16 to 17 year old students, which focuses on health issues identified by the students. The course is run on the Notre Dame campus, by university staff, and helps to build confidence in the students.

Notre Dame has a ‘foundation year’ course, which is a 12 month course teaching the methods of study. It is designed to develop the skills that are needed to start studying.

Aboriginal Studies

All students who go to the Broome campus are required to complete a core unit in Aboriginal Studies. Notre Dame promotes its Graduate Certificate in Aboriginal Studies, particularly for people who are going to work in the Kimberley and who have little
experience in working in an aboriginal environment. Notre Dame provides a cultural training course for industry in the area. The rationale is that if teachers, and others, know the cultural context of their students’ lives, then it is far more likely that they will be effective in teaching and imparting knowledge.

Notre Dame is considering starting a new course in cultural and natural resource management, aimed at people working as rangers often Aboriginal men. This would create an education pathway for these workers and help build up a bank of educated male role models in the community. Planning is underway for the course but funding is still required.

**Mental Health**

Mental Health is a significant issue in the Kimberley region. Notre Dame is investigating opportunities and pathways to increase training options in this area.

Suicide remains a significant problem in the region. One innovative program addressing the issue that has won an award but received no government funding is run by the Gelganyem Trust. The Trust is run by traditional owners around the Argyle Diamond Mine, and is funded by the mine. The program is being run in Wyndham, Kununurra, Warmun and the East Kimberley. The model has been adopted by other countries and is being used with the Inuit and First Peoples of Canada.

**FASD**

It was felt that a research project that attempted to identify what proportion of the prison population had FASD would be a very useful exercise.

**Ear Health**

Ear infections are a major problem in the region, and 40% of Aboriginal people have scarred eardrums and resultant hearing loss. Notre Dame and the Broome Senior High School have had to use Auslan interpreters due to hearing problems. While there are ear buses which conduct screening and refer children to the local hospital, hearing loss is still a major problem.

**E-learning**

Notre Dame works on a blended delivery model, with a mix of face to face and virtual delivery of classes. This mix is considered to be optimal as it allows students to be part of a lecture regardless of location, and it can bring overseas and interstate lecturers into the lecture room. Students can be allowed to work at their own pace and unit design can be individualised to a greater extent. Regardless of the technology that is used, the focus must be on the standards of educational outcomes. E-learning assists in ensuring equity and justice in the access to education.
Child Protection Forum - Halls Creek

Within the East Kimberley District there are 7,971 residents in the Shire of Wyndham East Kimberley, and a further 3,345 residents in the Shire of Halls Creek. Census data from the 2006 census shows that 46% of the Kimberley population is less than 19 years of age. This means that a very large proportion of the population comes within the remit of the Department for Child Protection (DCP)

School attendance

‘Working in Partnership Forums’ have identified the issue of non-school attendance as the priority for the Kununurra, Wyndham and Halls Creek towns. Contributing factors include:

- Inadequate supervision of children;
- Alcohol misuse and associated family and domestic violence;
- Health related issues due to lack of treatment or alcohol misuse (FASD);
- Poor living environments – homelessness, overcrowding or sub-standard housing. In some towns and communities there are reportedly only intermittent municipal services;
- Community dysfunction with a lack of community governance or leadership within some communities; and
- Lack of community safety.

School capacity issues

- Limited number of school attendance officers to follow up on attendance;
- Mainstream classrooms are not suitable for students who have poor non-school attendance histories – transitional class(es) required
- Behavioural problems within the classroom can be extreme with some children, especially children who have FASD and trauma related behaviours.

Some of the solutions that have been identified and implemented in the region include:

- No shop service to school aged children in school hours or after 9pm;
- Reestablishment of Community Response to Our Children (CROC) – case management focus on high risk young people;
- Organised night patrols in Kununurra and Wyndham, under discussion in Halls Creek;
- Community BBQs, youth activities, school holiday programs; and
- Youth Justice alternative education program

There is an overlap between Health, Education and DCP roles. DCP is trying to build parental capacity around getting kids off to school. DCP has a system of parent helpers, who do home visits and work on developing routines, promoting pro-school attitudes, school uniforms etc.

DCP is concerned about the number of children who are not enrolled in school and never have been. There is a very high level of transiency around the town of Halls Creek. DCP is trying to work with Centrelink to get an idea of who is responsible for these children, and is receiving the Centrelink payments for them.

DCP is trying to income manage families where children are at risk, as it has the capacity to place families on compulsory income management (CIM). However, income management is viewed as a tool – not a cure-all. People are bypassing CIM by bartering and trading.

There have been suggestions that some Centrelink payments should be allocated directly to the school to pay for uniforms, lunches etc. While it is currently the case that parents can arrange this on a voluntary basis, it is suggested that it may need to be compulsory in some areas if it is to have any impact.

There needs to be a mechanism for DCP intervention where the lack of school attendance is constant.

The education system should have different funding mechanisms to cater for those children not attending regular schooling.

Liquor restrictions are in place in Halls Creek, and according to DCP, there have been significant benefits.

DCP runs a 20 bed hostel in Halls Creek, which caters for children taken into care due to child protection concerns. DCP is also able to do ‘negotiated placements’ when they can’t place a child in a residential facility. These are usually with extended family members. DCP workers develop ‘safety plans’ with individual children, so that they know where to go when things get bad at home. Often these will involve going to a safe auntie or uncle.

DCP workers did not advocate having a direct, after-hours service. Workers considered the hotline to Crisis Care to be a useful mechanism because Crisis Care has access to all
the records regarding a child and will call the local worker, who will then‘ get out of bed to go and respond’. The Committee was told that DCP covers the Kimberley very well, and that there is always a response when it is needed.

DCP funds a youth patrol in Kununurra, which collects children off the street. It is run by Save the Children. There are weekly meetings with all the agencies involved to develop plans for the children who are regularly picked up by the patrol.

The Kimberley is a difficult place for DCP to staff. If DCP had the full quota of staff in Halls Creek, they would have an accommodation problem. Halls Creek should have 9 FTE positions, but only 5 are filled. There are 87.5 FTE DCP positions in the East Kimberley. A total of 14% of all DCP positions across the Kimberley are vacant.

The issues for attracting and retaining staff include a lack of suitable accommodation and the lack of lifestyle options in the area.

DCP tries in the first instance to recruit people with degrees in psychology, social work, youth work, youth justice etc. If the position can’t be filled with someone with a degree, DCP is then able to advertise for people without the degree qualification. DCP considers that this is a good mechanism as it enables them to hire someone local, train them up, and then retain someone who is local, more likely to stay, and who has networks within the community. The committee were told that metropolitan districts of DCP also have vacancies.

The ‘issue of children with FASD is huge’ in the area. Children with general trauma-related behaviour issues are also very common. It is currently difficult to distinguish between children with behaviour issues because of FASD and children with behaviour issues caused by other problems.

DCP works closely with the Health Department. DCP estimates that most of the children with whom they work have FASD. It was felt that the best way forward is for communities to work together to develop alcohol management plans that suit each community. DCP has a difficulty in that its legislation does not cover the unborn child, so there is nothing that can be done within DCP powers in relation to a pregnant woman drinking.

**Education Forum – Halls Creek**

It is important to remember that there is not a ‘one-size-fits-all’ blanket scenario regarding education in Halls Creek. Some children come to school well prepared, ready to learn, and are supported by their families to do so. At the other end of the spectrum, the Catholic School Principal drives a bus service around in the morning to collect children. Sometime he has to get children out of bed, wait for them to get dressed and
ready to go and then take them to school. That school then has an early lunch break in order to feed the children who have breakfast before they come to school.

Half the population of Halls Creek is below 18 years of age.

Transiency is a huge issue in Halls Creek. At the Halls Creek District High School, 55% of the school population transitions in or out of the school each year. The school screens each child on arrival and creates an individual education plan, which will focus on literacy as needed. A total of 15% of the school population is from the Northern Territory. This is because under the Northern Territory intervention, if a child does not go to school, the benefits to the family are cut. This is reason, the Committee were told, the families move to WA.

By year 4, students in Halls Creek are probably 2 years behind students in other places. This is in part because they live in an environment that is not print-rich. There is no reinforcement of what they learn at school in the home environment or anywhere else.

COAG has decided that a hostel should be built in Halls Creek for secondary schooling. It was felt that Halls Creek District High School will not be able to cope as students from outlying areas come to town for their schooling. The current school is a converted primary school which doesn’t have enough room at the moment.

Halls Creek needs a dedicated senior campus, to provide both an academic and a VET stream. This would significantly improve educational outcomes in the area and avoid the necessity for students to move elsewhere to finish their schooling.

There will be two mines opening near Halls Creek in the next 2 years. This could significantly increase the population of Halls Creek, putting further pressure on the school. However, it should also provide a range of opportunities for students, including pre-apprenticeship programs.

The Committee was told that the community had originally identified a residential facility for school students as a priority. The community envisaged that this would be a place where students could stay during the week that would encourage school attendance, provide assistance with homework, and be a safe and secure place. It would be voluntary and students would be able to go home to their families at the weekends.

Instead the committee were told the community was given a DCP hostel for children who are removed from their family.

The schools in Halls Creek work on the assumption that all children have some form of hearing issue when they arrive at school. Ears are checked every day and they do ‘ear spears’. The school tells the parents if the child is identified as having hearing
difficulties, and if there is no action, they are referred to the hospital. The school focuses on hygiene and the prevention of hearing difficulties.

It was reported that the pool program, which was developed to assist with ear health in remote communities has not really worked. The pools aren’t open long enough, have insufficient supervision and free entry could be used as an incentive to school attendance.

It was highlighted to the Committee that Halls Creek does not have a school bus service within the town, and to its surrounds. A bus service is desperately needed. As it was expressed to the Committee:

*Would you want to go to school if you were 6, had no breakfast, no shoes, and had to walk 4 kms in 45 degree heat to get there?*

Anti-social behaviour in the home prevents children from concentrating even if they do get to school. Every school needs some form of counsellor to provide support to traumatised children.

Specialised services in Halls Creek are very poor. The town needs occupational therapists, physiotherapists etc. who are based in the town. A fly-in fly-out service that comes once every 2 weeks is insufficient and inadequate.

**Youth Services Officer – Fitzroy Crossing**

English is a second language in Fitzroy Crossing. People speak their traditional Aboriginal language, Kriol (which is a distinct Aboriginal language) and then English. The traditional culture has disintegrated to some extent, but is still strong in patches.

It was suggested that there should be alternatives to the current post year 10 education courses. This could include:

- more assistance for children below the level of certificate 1, to get through the processes to start at the certificate 1 level; and

- confidence building programs for children as ‘they need skills to handle the trauma of violence and alcohol, and skills for coping with it all.’

One witness questioned whether education can be successful if it is just applied like a layer of paint over the surface, without attempting to deal with the underlying issues.

It was felt that many children would be keen to go to a school hostel. It would give them stability, safety, access to programs, and the ability to study. Children from the outlying communities could also use it.
The committee were told that ‘The smaller communities are crying out for teenage education programs’. In particular that youth have difficulties in screening/filtering the information that they see on the internet.

It was suggested that the following initiatives are needed to improve educational outcomes including:

- ‘A huge push in counselling and mental health services.’ Fitzroy Crossing has 2 mental health workers who are on site, and a further 2 who fly in and out.
- Lower pre-vocational training. Courses need to build self-esteem, build confidence, and help people through areas like the processes of government, assist with drivers licence applications, filling out forms, etc.
- Assisting with communication and social skills, and skills to negotiate conflict;
- Finding a way to give children aspirations and dreams;
- Providing different programs for different sections of society, ie youth, adults, old people to help people feel that they can achieve.

**Fitzroy Valley Health Service**

Fitzroy Crossing is focussed on identifying and treating FASD. The health service now asks about pregnancy every time a woman is treated. They are referred to counsellors if they are drinking. There are some estimates that up to 50% of the children in Fitzroy Valley have FASD. It was felt that some of these children may need partial separation at school, to assist with their learning.

The question that everyone is worrying about is:

- What will happen once the full extent of FASD has been realised?
- What can be done with these children, who could otherwise as teenagers and adults, find themselves in trouble with the law?
- Who will provide the necessary services?

Children with FASD need activities, sports, involvement in teams, as well as OT, physiotherapy, etc.

There are families in town where older women care for their grandchildren who have FASD. There has not been any research into the families that have intergenerational FASD, and this research needs to be done.
There is currently nothing in the DCP legislation that covers heavy drinking while pregnant. It was felt that if there is mandatory reporting of child abuse, there should be mandatory reporting of heavy drinking in pregnancy.

All children who attend the health service are screened for juvenile diabetes from the age of 5. Hearing problems are very bad in Fitzroy Crossing. The pool hasn’t helped as much as expected as it is not used a great deal. Parents have to be at the pool to supervise their children, and many are unable to. Many children are said to have tooth decay and the rate of STIs are said to be increasing.

Fitzroy Valley Health Services get a lot of locums that come through, as many as 30 in a year. It makes continuity of care impossibility.

The hospital is currently short 3 of 16 FTE nurses. The problem is housing, as some nurses have to share and shift around between houses to accommodate changes in the staffing profile. Some nurses have moved 5 times in a year.

There is a need for many more occupational therapists to work with children. A once a fortnight FIFO occupational therapy service is not enough.

There is one child health nurse in Fitzroy Crossing, who is not qualified. There are about 300 children aged 0 to 5 in the valley and 500 aged 0 to 12. They need 5 or 6 child health nurses and 3 midwives with many of the pregnancies are described as ‘high risk’.

The constant change in health care workers leads to poorer service delivery and no succession planning.

**Karrayilli Adult Education Centre**

Karrayilli is an Aboriginal Community directed and linked organisation that has been established 30 years ago. It is an RTO. It was started because a group of people who had come in from the desert wanted to read and write in English to be able to interact with the government. The organisation was started by community demand. ‘Karrayilli’ means ‘middle aged people’.

The organisation now provides training:

- For employment with the mines;
- In life skills;
- In literacy and numeracy;
- For driver education programs;
- In computing and enterprise development programs; and
• In assistance with writing submissions to government.

They also provide cultural training for those working in retail and tourism, as well as a general education course.

Karrayilli has a large role in helping people to develop everyday life skills for example, in helping people to make doctor’s appointments. A large part of Karrayilli’s role is assisting people to negotiate with mainstream society. They work holistically with people to develop trust and relationships.

The Committee was reminded that for Aboriginal people in Fitzroy Crossing, English is a second language. Most people use Kriol, and there are 27 Aboriginal languages across the Kimberley. Kriol is a distinct language which developed to allow communication across the traditional language groups.

A lack of recognition that Kriol is a distinct language leads to significant communication problems, and can lead to a lack of self-esteem when people have trouble communicating.
### Appendix Two

#### Abbreviations

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<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>ATAS</td>
<td>Aboriginal Tutorial Assistance Scheme</td>
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<tr>
<td>CEO</td>
<td>Chief Executive Officer</td>
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<td>CIM</td>
<td>Compulsory Income Management</td>
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<td>DCP</td>
<td>Department for Child Protection</td>
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<tr>
<td>DEEWR</td>
<td>Department of Education, Employment and Workplace Relations</td>
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<tr>
<td>DOH</td>
<td>Department of Health</td>
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<td>ESL</td>
<td>English as a Second Language</td>
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<td>FAS</td>
<td>Foetal Alcohol Syndrome</td>
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<td>FASD</td>
<td>Foetal Alcohol Spectrum Disorder</td>
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<td>FIFO</td>
<td>Fly In Fly Out</td>
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<tr>
<td>FTE</td>
<td>Full Time Equivalent</td>
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<td>GP</td>
<td>General Practitioner</td>
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<td>GROH</td>
<td>Government Regional Officers’ Housing</td>
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<td>ICT</td>
<td>Information and Communications Technology</td>
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<td>IT</td>
<td>Information Technology</td>
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<td>KSHS</td>
<td>Karratha Senior High School</td>
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<td>MOU</td>
<td>Memorandum of Understanding</td>
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<tr>
<td>NAPLAN</td>
<td>National Assessment Program Literacy and Numeracy</td>
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<td>NCVER</td>
<td>National Centre for Vocational Education Research</td>
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<tr>
<td>NGO</td>
<td>Non-Government Organisation</td>
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<td>OT</td>
<td>Occupational Therapy</td>
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<td>Abbreviation</td>
<td>Full Form</td>
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<tr>
<td>PAL Program</td>
<td>Parents and Learning Program</td>
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<td>PISA</td>
<td>Program for International Student Assessment</td>
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<tr>
<td>RTO</td>
<td>Registered Training Organisation</td>
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<tr>
<td>SBAO</td>
<td>School Based Attendance Officer</td>
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<td>SSEP</td>
<td>Senior School Engagement Program</td>
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<td>VET</td>
<td>Vocational Education and Training</td>
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<tr>
<td>WACHS</td>
<td>Western Australian Country Health Service</td>
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Appendix Three

Inquiry Terms of Reference

An inquiry into improving educational outcomes for Western Australians of all ages.

1. Current and future resourcing of new methods and activities to improve educational outcomes such as e-learning and school partnerships;

2. Factors influencing positive or negative childhood development from birth to year 12;

3. Facilitating greater opportunities to engage all students in year 11 and 12;

4. Improving access and opportunities for adult learning in regional and remote WA; and

5. Foetal Alcohol Syndrome: prevalence, prevention, identification, funding and treatment to improve education, social and economic outcomes.

The Committee will report by 30 November 2012.
Appendix Four

Committee’s functions and powers

The functions of the Committee are to review and report to the Assembly on:

a) the outcomes and administration of the departments within the Committee’s portfolio responsibilities;

b) annual reports of government departments laid on the Table of the House;

c) the adequacy of legislation and regulations within its jurisdiction; and

d) any matters referred to it by the Assembly including a bill, motion, petition, vote or expenditure, other financial matter, report or paper.

At the commencement of each Parliament and as often thereafter as the Speaker considers necessary, the Speaker will determine and table a schedule showing the portfolio responsibilities for each committee. Annual reports of government departments and authorities tabled in the Assembly will stand referred to the relevant committee for any inquiry the committee may make.

Whenever a committee receives or determines for itself fresh or amended terms of reference, the committee will forward them to each standing and select committee of the Assembly and Joint Committee of the Assembly and Council. The Speaker will announce them in the Assembly at the next opportunity and arrange for them to be placed on the notice boards of the Assembly.
## Appendix Five

### Briefings held for this report

<table>
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<th>Date</th>
<th>Name</th>
<th>Position</th>
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<tr>
<td><strong>KARRATHA</strong></td>
<td><strong>Pilbara Education</strong></td>
<td><strong>Regional Office</strong></td>
<td><strong>Forum</strong></td>
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<tr>
<td>12 March 2012</td>
<td>Sue Cuneo</td>
<td>Regional Executive Director</td>
<td>Pilbara Education Region</td>
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<tr>
<td></td>
<td>Nicole Davey</td>
<td>School Psychologist</td>
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<td>Jane Gartland</td>
<td>Senior School Psychologist</td>
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<td>Bruce McCauley</td>
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<td></td>
<td>Valerie McPherson</td>
<td>Coordinator Regional Operations</td>
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<td>Felicity Watt</td>
<td>School Psychologist</td>
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<td>Amelia Hulin</td>
<td>Coordinator Regional Services</td>
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<td></td>
<td>Ray McMillan</td>
<td>Principal, Roebourne District High School</td>
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<td></td>
<td>Lauren Nardone</td>
<td>Participation Coordinator, Karratha</td>
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<td>Hayley Sture</td>
<td>A/Engagement and Transitions Manager, Participation Team</td>
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<td></td>
<td>Tracy Cowie</td>
<td>Deputy Principal, Peg’s Creek Primary School</td>
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<td>Niel Smithl</td>
<td>Principal Tambrey Primary School</td>
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<td>12 March 2012</td>
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<td><strong>Authority Forum</strong></td>
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<td></td>
<td>Kathy Holt</td>
<td>Children’s Services Officer</td>
<td>Department for Communities</td>
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<td>Joanne Abbott</td>
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<td>Lynsey Wellings</td>
<td>Co-ordinator</td>
<td>Karratha Family Centre</td>
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<td>Susan Shirtliff</td>
<td>CEO</td>
<td>Ngarliyarndu Bindirri Aboriginal Corporation</td>
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<td>Michael Nikakis</td>
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<td>PCYC</td>
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<tr>
<td>Lisa Taylor</td>
<td>Manager Community Projects and</td>
<td>Pilbarra Cities Office</td>
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<td>Kelly Strange</td>
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**ROEBOURNE**

12 March 2012 Daniel Brown CEO Mawarnkarra Health Service Aboriginal Corporation
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<tr>
<th>Name</th>
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<td>Sharon Deshow</td>
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<tr>
<td>Elaine Laraia</td>
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<td>Greg Kelly</td>
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<td>Nindilingarri Cultural Health Services, Fitzroy Crossing</td>
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<td>Dr John Boulton</td>
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<td>Tim O’Brien</td>
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<td>Tracey Gillett</td>
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<tr>
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<td>Clare Gray</td>
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<td>Carolyn Davey</td>
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