



LEGISLATIVE ASSEMBLY

FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON EDUCATION, TRAINING AND YOUTH AFFAIRS
 Ms Mary Porter AM MLA (Chair), Mr Steve Doszpot MLA (Deputy Chair), Ms Yvette Berry
 MLA, Ms Giulia Jones MLA

Inquiry into referred 2013–14 Annual and Financial Reports ANSWER TO QUESTION TAKEN ON NOTICE 14 November 2014

Asked by Ms Porter:

In relation to: Photos of early Canberra:

Ms Elvin: Perhaps I could mention it in a bit more detail. Yes, we do have a range of celebrations. I hope you may have seen our subscription season brochure for next year. That has on it our logo for the 50th year. It is our golden anniversary, so it is a golden logo. The Canberra Theatre Centre was actually the first government performing arts centre in Australia. It pre-dated the perhaps more famous ones like the Sydney Opera House, the Adelaide Festival Centre and the Victorian arts centre. We are actually older than they are.

It is a wonderful opportunity for us to recognise this golden anniversary. The whole season next year will help us with that celebration. Within that, there are particular shows that are really only part of the season because of the 50th year. For example, the Australian Ballet is bringing *Giselle* here in May next year; that will be a great delight to the many people in Canberra who are ballet lovers. We have just seen how many ballet schools there are, and that translates into a lot of ballet lovers. They will have an opportunity to see all-white ballet from the Australian Ballet. We also have that major production *Sweet Charity*, a big commercial musical. That will be a very big season. And there is a range of other works within that season.

We are doing a couple of special events. We have a dinner on stage to mark the actual birthday; we hope that people will get involved in that. And then, to spread it out more to the wider community, we will have an open day. We are conscious that the Canberra theatre has a very special place in the hearts of Canberrans. Many people attended there as children and have perhaps gone there on a first date. It is something that is very special, and we want to provide opportunities for everybody to celebrate. I notice that the minister is looking at some of the vintage photographs that we have included.

Ms Burch: These have all been performed at the theatre?

Ms Elvin: That is right, yes.

Ms Burch: Fats Domino has performed at Canberra theatre.

THE CHAIR: It is a bit hard for Hansard to record that, minister.

Ms Burch: I will make sure that the committee gets a copy of this.

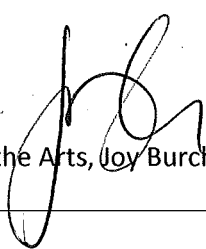


MINISTER BURCH: The answer to the Member's question is as follows:—

Please find at Attachment A, a copy of the 2015 Collected Works – Subscription Season Brochure for the Canberra Theatre Centre. The vintage photographs are located on the inside front and back covers of this brochure.

Approved for circulation to the Standing Committee on Education, Training and Youth Affairs

Signature:



By the Minister for the Arts, Joy Burch MLA

Date:

27.11.15



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STANDING COMMITTEE ON EDUCATION, TRAINING AND YOUTH AFFAIRS
ANNUAL AND FINANCIAL REPORTS 2013-2014

Ms Mary Porter (Chair), Mr Steve Doszpot (Deputy Chair), Ms Yvette Berry (Member), Mrs Giulia Jones (Member)

ANSWER TO QUESTION TAKEN ON NOTICE
DURING PUBLIC HEARINGS
QTON 24
QTON-14/62

Asked by Mr Andrew Wall on 13 November 2014: Minister Gentleman took on notice the following question(s):

[Ref: Ref: Hansard Transcript 13 November 2014 [PAGE #21]]

In relation to: Number of Young People in Bimberi

Can CSD provide a breakdown of how many young people were in Bimberi, including how many were sentenced and a peak and a low for each month for the last financial year?

MINISTER GENTLEMAN: The answer to the Member's question is as follows:-

The maximum number of young people detained at Bimberi Youth Justice Centre during 2013-2014 was 30 (September 2013) and the minimum was 9 (March 2014) young people.

On a specific date each month, the number of young people sentenced and on remand during the 2013-2014 period were:

31 July 2013 – 12 remanded and 4 sentenced
31 August 2013 – 8 remanded and 9 sentenced
30 September 2013 – 16 remanded and 11 sentenced
31 October 2013 – 9 remanded and 11 sentenced
30 November 2013 – 10 remanded and 10 sentenced
31 December 2013 – 5 remanded and 10 sentenced
31 January 2014 – 2 remanded and 9 sentenced
28 February 2014 – 4 remanded and 8 sentenced
31 March 2014 – 6 remanded and 6 sentenced
30 April 2014 – 12 remanded and 6 sentenced
31 May 2014 – 9 remanded and 7 sentenced
30 June 2014 – 7 remanded and 6 sentenced

Approved for circulation to the Standing Committee on Education, Training and Youth Affairs

Signature:

Date:

27/11/14

By the Minister for Children and Young People, Mick Gentleman MLA



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Ms Mary Porter (Chair), Mr Steve Doszpot (Deputy Chair), Ms Yvette Berry (Member), Mrs Giulia Jones (Member)

ANSWER TO QUESTION TAKEN ON NOTICE
DURING PUBLIC HEARINGS
QTON 26
QTON-14/64

Asked by Mrs Giulia Jones on 13 November 2014: Mr Hubbard took on notice the following question:

[Ref: Ref: Hansard Transcript 13 November 2014 [PAGE #.16]]

In relation to: Page 24, Volume 2 – Operating Statement for Output Class 2 – Early Intervention Services

What is the reason for the great increase to \$240,000?

MINISTER GENTLEMAN: The answer to the Member's question is as follows:–

As stated at the hearing on 13 November by Ian Hubbard – “That is a technical accounting treatment for the hire of rooms at the Child and Family Centres. The Child and Family Centres are providing those rooms free of charge, but we still account for the cost of providing the rooms.”

Approved for circulation to the Standing Committee on Education, Training and Youth Affairs

Signature:

A handwritten signature in black ink, appearing to be "MG", written over a horizontal line.

Date: 27/11/14

By the Minister for Children and Young People, Mick Gentleman MLA



LEGISLATIVE ASSEMBLY

FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON EDUCATION, TRAINING AND YOUTH AFFAIRS ANNUAL AND FINANCIAL REPORTS 2013-2014

Ms Mary Porter (Chair), Mr Steve Doszpot (Deputy Chair), Ms Yvette Berry (Member), Mrs Giulia Jones (Member)

ANSWER TO QUESTION TAKEN ON NOTICE DURING PUBLIC HEARINGS

QTON 22
QTON-14/60

Asked by Ms Giulia Jones on 13 November 2014: Minister Gentleman took on notice the following question(s):

[Ref: Ref: Hansard Transcript 13 November 2014 [PAGE #8-9]]

In relation to: Youth Service

Can CSD provide a map of what the substitute youth services are across Canberra (e.g YWCA and Northside Community Services)?

MINISTER GENTLEMAN: The answer to the Member's question is as follows:—

The Child, Youth and Family Services Program funds a range of Youth Engagement Services across the Canberra region.

The Program operates within four service networks which align with the Education and Training Directorate's school networks. These are Belconnen, North/Gungahlin, South/Weston and Tuggeranong. Five community organisations are funded to deliver Youth Engagement Services throughout the Canberra region:

- Gugan Gulwan Youth Aboriginal Corporation (ACT wide)
- The Young Women's Christian Association of Canberra (Tuggeranong network)
- Northside Community Service in partnership with Anglicare Canberra and Goulburn (North/Gungahlin network)
- Belconnen Community Service (Belconnen network)
- Woden Community Service (South/Weston network)

As per the funding agreement, services must be accessible to the target group, as demonstrated by the time and place services are provided.

Further to the above service providers, two community organisations are funded to deliver Culturally and Linguistically Diverse Youth Engagement Services across the Canberra region:

- Multicultural Youth Services
- Companion House Assisting Survivors of Torture and Trauma

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Signature:

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By the Minister for Children and Young People, Mick Gentleman MLA



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ANSWER TO QUESTION TAKEN ON NOTICE
DURING PUBLIC HEARINGS
QTON 25
QTON-14/63

Asked by Mrs Giulia Jones on 13 November 2014: Mr Paul Wyles took on notice the following question:

[Ref: Ref: Hansard Transcript 13 November 2014 [PAGE #14-15]]

In relation to: Australian Early Development Index

Of the five domains, physical health and wellbeing; social competence; emotional maturity; language and cognitive skills; and community skills/general knowledge, the ACT did not improve on the physical health and wellbeing domain.

- a) Has the Government instigated any academic study as to why we are not improving in this category or are we just relying on anecdotal responses?
- b) Mr Wyles agreed to provide the Committee with a copy of the 2012 AEDI Report.

MINISTER GENTLEMAN: The answer to the Member's question is as follows:-

- a) Has the Government instigated any academic study as to why we are not improving in this category or are we just relying on anecdotal responses?

The Community Services Directorate is a Partner Investigator of the Kids in Communities Study (KICS). KICS is a national investigation of community-level effects on children's developmental outcomes. KICS offers an opportunity for the ACT to identify modifiable factors that impact on early childhood development within local communities, thus allowing for more effective targeting of funding and program planning.

The KICS project is particularly interested in communities where early child development outcomes are significantly better or worse than would be expected given the socio-economic profile of the community. Communities were identified using the Australian Early Development Census (AEDC) results with data from the Socio-Economic Indexes for Areas (SEIFA).

- b) Mr Wyles agreed to provide the Committee with a copy of the 2012 AEDI Report.

Mr Wyles has provided a copy to the Committee Secretariat.

Approved for circulation to the Standing Committee on Education, Training and Youth Affairs

Signature:

Date:

27/11/14

By the Minister for Children and Young People, Mick Gentleman MLA

2012 Australian Early Development Index

Results for the ACT



ACT
Government

Acknowledgement of Country

The ACT Government acknowledges the traditional custodians of the ACT, the Ngunnawal people. The ACT Government acknowledges and respects their continuing culture and the contribution they make to the life of this city and this region.

Acknowledgements

The Australian Early Developmental Index (AEDI) acknowledges the Australian Government and state and territory governments who are working in partnership with The Royal Children's Hospital Centre for Community Child Health, the Murdoch Childrens Research Institute, and the Telethon Institute for Child Health Research to deliver the AEDI. The Social Research Centre is managing the AEDI.

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ACT
Government



Australian Early Development Index

Message from the Minister



The ACT Government is committed to helping all children reach their potential. The Australian Early Developmental Index (AEDI) provides a comprehensive picture of how children are developing in their early years. *The 2012 Australian Early Developmental Index Results for the ACT* summarises the results for ACT's children from both the 2009 and 2012 AEDI data collections.

All ACT schools participated in the 2012 AEDI data collection. This would not have been possible without the support of the Government, Catholic and Independent school sectors. The high response rate means that we have an accurate picture of what is working well and what needs to be improved to better support children and their families.

The report shows that the majority of children are doing well, although it highlights some areas for improvement. A child-friendly city keeps a constant check on the state of its children and this report represents a whole-of-government commitment to monitor and respond to the developmental needs of young children within our community.

The AEDI assists in creating a snapshot of early childhood health and development in communities across Australia.

The extensive information available highlights the value of the AEDI and confirms the vital role it plays in strengthening our early childhood evidence base. The AEDI also informs early childhood policy development, including education, health and community services.

The information in this report will play an important part in helping us prioritise the needs of children. By doing this, we can help ensure the ACT continues to promote the optimal health, wellbeing, learning and development of all children in the ACT.

A handwritten signature in black ink, appearing to read 'Joy Burch'.

Joy Burch MLA

Minister for Disability, Children and Young People

Executive summary

The Australian Early Development Index (AEDI) was completed nationwide for the first time in 2009. All schools in the ACT participated in the 2009 data collection. In 2012, the ACT once again had 100% of schools participate, capturing information on 5,106 (99.9%¹) children attending kindergarten in the ACT, 4,898 of which live in the ACT.

- The AEDI is a teacher-completed checklist based on the teacher's knowledge and observations of the children in their class.
- The AEDI examines early childhood development across the community; the results are reported at the community level based on where the child lives rather than on where they go to school.
- The AEDI results provide information across five domains of early childhood development: Physical Health and Wellbeing; Social Competence; Emotional Maturity; Language and Cognitive Skills; and Communication Skills and General Knowledge.



Profile and demographics of ACT children surveyed in 2012

■ Total number of kindergarten children living in the ACT: 4,898

■ Total number of Aboriginal and Torres Strait Islander children: 117 (2.4%)

■ Total number of children with a language background other than English: 962 (19.6%)

■ Average age of children: 5 years 8 months

¹ This figure represents the proportion of children in kindergarten as reported through the 2012 February school census.

Summary of key findings for the ACT



The majority of children are developmentally on track



Children are least likely to be developmentally vulnerable on the 'Language and Cognitive Skills' domain (3.9%)



Children are most likely to be developmentally vulnerable on the 'Physical Health and Wellbeing' domain (10.6%)



Overall, 22.0% of ACT children are vulnerable on one or more domain and 9.8% of children are vulnerable on two or more domains



Aboriginal and Torres Strait Islander children are more than twice as likely to be developmentally vulnerable than non-Aboriginal and Torres Strait Islander children



The proportion of male children (28.1%) in the ACT who are developmentally vulnerable on one or more domain is higher than that of females (15.5%)



The proportion of developmental vulnerability varies across the ACT communities. Localities with the highest proportions of children developmentally vulnerable on one or more domain are Tuggeranong (24.6%), Gungahlin (22.3%) and Weston Creek (22.0%)



Communities with the lowest proportion of children developmentally vulnerable on one or more domain are North Canberra (17.7%) and South Canberra (19.5%)



Between 2009 and 2012, the ACT experienced an improvement in four out of the five developmental domains: Social Competence; Emotional Maturity; Language and Cognitive Skills; and Communication and general knowledge. On each of these four domains, the ACT compares favourably to the rest of Australia

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Overview

It is understood that life success, health and emotional wellbeing have their roots in early childhood. Research shows that investing resources to support children in their early years of life brings long-term benefits to them and to the whole community. Early childhood development outcomes are therefore important markers of the welfare of children, and can predict future health and human capital.

It is within this context that the Council of Australian Governments (COAG) has recognised the need for all communities to have information about early childhood development, by endorsing the Australian Early Development Index (AEDI) as a national progress measure of early childhood development.

Population monitoring of early childhood development, with measures such as the AEDI, was recommended in the 2010 Status Report on the United Nations Convention on the Rights of the Child (UN General Assembly 2010). The ACT publishes information annually on children's health and wellbeing. Outcomes are measured using the *ACT Children and Young People Outcomes Framework* and are reported annually in *A Picture of ACT's Children and Young People*.

What is the AEDI?

The AEDI is a population-based measure of how young children are developing in different communities across Australia as they enter school. In the ACT, this first year of school is kindergarten. The purpose of the AEDI is to measure the health and development of populations of young children to assist communities and governments to plan and assess the effectiveness of their efforts in supporting young children and their families.

The results from the AEDI help communities, governments and policy-makers to pinpoint the types of services, resources and support that young children and their families need to give children their best possible start in life.

The AEDI is an adapted version of the Canadian Early Development Instrument (EDI), developed in response to communities' increasing interest in knowing how their children were developing. As a population measure, the AEDI focuses on all children in the community, providing a picture of early childhood development across the whole community. Moving the focus from the individual child to all children in the community can make a greater difference in supporting efforts to create optimal early childhood development.

How is the AEDI administered?

The AEDI began in 2009 and is administered once every three years. The AEDI is a teacher-completed checklist based on the teacher's knowledge and observations of the children in their class. It is completed for all children in Australia in their first year of school. In the ACT the first year of school is kindergarten.

The AEDI national implementation is an Australian Government initiative that works in collaboration with state and territory governments. The ACT government has responsibility for administering the AEDI in the ACT and working with communities within the ACT to understand and utilise the results.

What does the AEDI measure?

The AEDI measures five domains of early childhood development: Physical Health and Wellbeing; Social Competence; Emotional Maturity; Language and Cognitive Skills; and Communication and General Knowledge (refer to Figure 1). Information collected through a teacher-completed checklist. These domains are key areas of child development and are closely linked to the predictors of adult health, education and social outcomes.

The AEDI is a 'summary indicator' of children's progress, reported for the community where the children live, not where they go to school. The AEDI is most suited to mapping patterns of relative need, particularly geographical comparisons and providing communities with a picture of their strengths and vulnerabilities. It provides a valuable resource in planning service delivery for children and families.

Figure 1: The five domains of the AEDI



What can the AEDI tell us?

The AEDI examines early childhood development across the community and is a 'summary indicator' of children's progress. It is reported for the community where the children live, not by where they go to school. This enables the monitoring of early child development at a community level, provides an important evidence base for community initiatives that support healthy child development and contributes to understanding how local circumstances might be changed to improve children's life chances.

The AEDI is most suited to mapping patterns of relative need, particularly geographical comparisons and providing communities with a picture of their strengths and vulnerabilities. It provides a valuable resource in planning service delivery for children and families.

How is vulnerability defined and reported?

The AEDI results are reported for each domain as average scores, where zero is the lowest score and 10 is the highest. For each AEDI domain these scores are then used to define the proportions of children whose development is considered to be either 'on track', 'at risk', or 'vulnerable' (as described in Figure 2). To determine which children fall into these groupings, AEDI cut-offs have been set for each domain. The cut-offs have been created on the basis of the results of all children who participated in the AEDI nationally in 2012.

Figure 2: Children who are developmentally 'on track', 'at risk', or 'vulnerable'

 On track Above 25 th percentile	 At risk Between 10 th & 25 th percentile	 Vulnerable Below 10 th percentile
Children whose domain score is above the 25 th percentile of the AEDI national population.	Children whose domain score is between the 10 th and 25 th percentiles of the AEDI national population.	Children whose domain score is below the 10 th percentile of the AEDI national population.

Profile of ACT's children

The ACT is a regional centre and borders towns in New South Wales, thus several students attending school in the ACT may not be residents of the ACT. While 5,106 kindergarten children were surveyed in the ACT, 4,898 of these children actually live in the ACT.

There were 238 children in the ACT identified as having special needs. Children with special needs are those who have chronic medical, physical or intellectual disabilities that require special assistance. Teachers were asked to base their response on medical diagnosis. Information about children with special needs is not included in the AEDI results because of the already identified substantial developmental needs of this group.

Across domains, both nationally and within the ACT, the majority of children are developmentally on track according to the AEDI results. Overall, the 2012 results show that the ACT compares favourably to the 2012 national results, with only the domain of physical health and well being showing a higher percentage of children developmentally vulnerable compared to national percentages (See Table 2). However, 22% of ACT children are considered to be developmentally vulnerable on one or more of the five AEDI domains. Furthermore, 9.8% are considered to be developmentally vulnerable on two or more of the five AEDI domains.

Table 1: Characteristics of the children surveyed both in the ACT and Australia, 2012

Selected characteristic	ACT	Australia
Children surveyed living in the ACT	4,898*	289,973
Average age of children	5 years 8 months	5 years 7 months
Teachers involved in completing the checklist	284	16,425
Schools where checklists were completed	106	7,417
Children who are Aboriginal and Torres Strait Islander	117 (2.4%)	15,490 (5.3%)
Children with a language background other than English	962 (19.6%)	55,489 (19.1%)
Children born outside Australia	502	21,698
Children reported as having special needs	238	14,173
Children identified by teachers as requiring further assessment	394	29,628

* This figure represents the proportion of children attending kindergarten and residing in the ACT.

ACT children are least likely to be developmentally vulnerable on the Language and Cognitive Skills domain, and ACT children fare better than those in all other states and territories (refer to Table 3).

ACT children have similar levels of developmental vulnerability on the Social Competence, Emotional Maturity, and Communication Skills and General Knowledge domains as their Australian peers.

Table 2: Proportion of children developmentally vulnerable by each AEDI domain, on one or more and two or more domains, ACT and Australia, 2012

Domain	ACT	Australia
 Physical Health and Wellbeing	10.6%	9.3%
 Social Competence	8.6%	9.3%
 Emotional Maturity	7.2%	7.6%
 Language and Cognitive Skills	3.9%	6.8%
 Communication Skills and General Knowledge	8.1%	9.0%
 Developmentally vulnerable on 1 or more domain	22.0%	22.0%
 Developmentally vulnerable on 2 or more domains	9.8%	10.8%

Table 3: Proportion of children developmentally vulnerable on each AEDI domain, for each state and territory, 2012

	AUST	ACT	NSW	QLD	WA	SA	TAS	VIC	NT
 Physical Health and Wellbeing	9.3%	10.6%	8.3%	11.6%	9.8%	10.2%	9.9%	7.8%	15.0%
 Social Competence	9.3%	8.6%	8.5%	11.5%	8.4%	11.3%	8.2%	8.1%	14.9%
 Emotional Maturity	7.6%	7.2%	6.2%	9.3%	8.3%	9.3%	8.1%	7.2%	13.5%
 Language and Cognitive Skills	6.8%	3.9%	4.8%	9.1%	8.6%	6.8%	7.1%	6.1%	20.8%
 Communication Skills and General Knowledge	9.0%	8.1%	8.5%	10.7%	9.1%	8.9%	6.6%	8.0%	14.4%
 Developmentally vulnerable on 1 or more domain	22.0%	22.0%	19.9%	26.2%	23.0%	23.7%	21.5%	19.5%	35.5%
 Developmentally vulnerable on 2 or more domains	10.8%	9.8%	9.2%	13.8%	11.2%	12.2%	10.1%	9.5%	20.9%

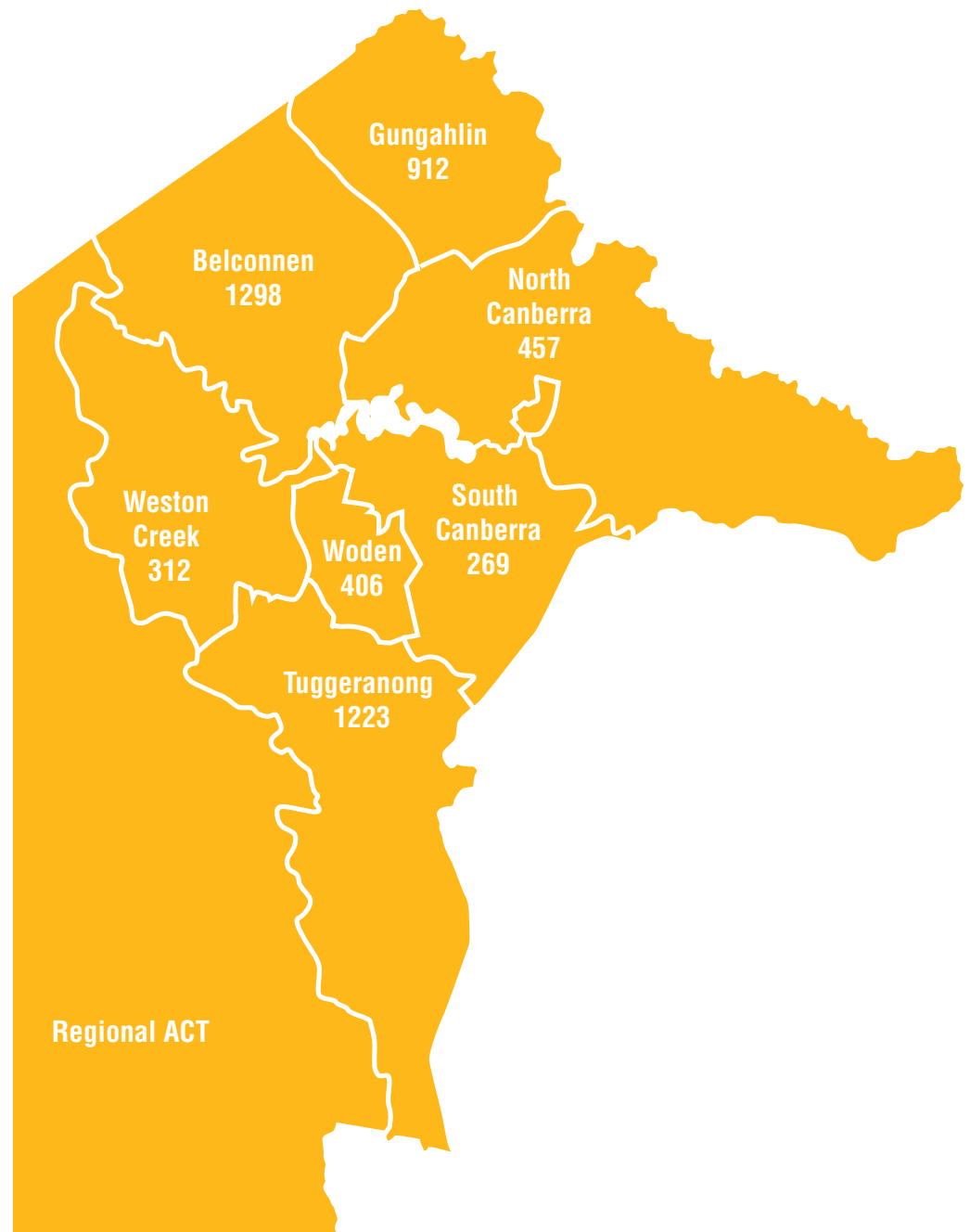


ACT regional overview

The ACT comprises of seven regions: Belconnen; Gungahlin; North Canberra; South Canberra; Tuggeranong; Weston Creek and Woden (refer to Figure 3). This report provides data for each of these seven regions.

Further information on the local communities (suburbs) within these regions can be found in community profiles and online maps from the AEDI website at www.aedi.org.au.

Figure 3: Number of children surveyed in each community within the ACT, 2012



Note that data is not reportable for Regional ACT due to the small number of children residing in this community.



Physical Health and Wellbeing

Whether a child is healthy, independent, ready for school each day

Belconnen, Gungahlin, North Canberra and Weston Creek all presented with higher proportions of developmental vulnerability in Physical Health and Wellbeing relative to the ACT average. South Canberra, Tuggeranong and Woden presented with higher proportions of children on track in Physical Health and Wellbeing relative to the ACT average (refer to Table 4).

Table 4: Physical Health and Wellbeing

Location	PERCENTAGE OF CHILDREN:		
	🟢 On track	🟡 At risk	🔴 Developmentally vulnerable
ACT	72.5%	16.9%	10.6%
Belconnen	71.4%	16.8%	11.7%
Gungahlin	68.9%	20.3%	10.9%
North Canberra	70.4%	18.9%	10.7%
South Canberra	84.2%	7.3%	8.5%
Tuggeranong	72.8%	16.9%	10.3%
Weston Creek	71.2%	16.0%	12.7%
Woden	79.9%	13.3%	6.8%



Social Competence

Whether a child is self-confident, gets along with others and shares, how a child plays

Gungahlin and Tuggeranong displayed higher proportions of developmental vulnerability in Social Competence relative to the ACT average. Results in Belconnen, North Canberra, South Canberra and Woden demonstrated higher proportions of children who were on track in Social Competence relative to the ACT average (refer to Table 5).

Table 5: Social Competence

Location	PERCENTAGE OF CHILDREN:		
	🟢 On track	🟡 At risk	🔴 Developmentally vulnerable
ACT	75.5%	15.9%	8.6%
Belconnen	77.2%	14.7%	8.1%
Gungahlin	74.1%	17.2%	8.7%
North Canberra	76.6%	16.1%	7.2%
South Canberra	80.7%	12.7%	6.6%
Tuggeranong	73.2%	16.1%	10.7%
Weston Creek	74.8%	16.7%	8.5%
Woden	77.3%	16.4%	6.3%



Emotional Maturity

Whether a child is able to concentrate, help others, is patient, not aggressive or angry

North Canberra and Tuggeranong showed higher proportions of developmental vulnerability in Emotional Maturity relative to the ACT average. Gungahlin, South Canberra, Weston Creek and Woden displayed higher proportions of children on track in Emotional Maturity relative to the ACT average (refer to Table 6).

Table 6: Emotional Maturity

PERCENTAGE OF CHILDREN:			
Location	🟢 On track	🟡 At risk	🔴 Developmentally vulnerable
ACT	79.0%	13.8%	7.2%
Belconnen	77.8%	15.1%	7.1%
Gungahlin	79.6%	13.3%	7.1%
North Canberra	78.8%	13.8%	7.5%
South Canberra	80.7%	13.5%	5.8%
Tuggeranong	78.2%	12.6%	9.2%
Weston Creek	82.0%	15.1%	3.0%
Woden	81.0%	13.0%	6.0%



Language and Cognitive Skills

Whether a child is interested in reading and writing, can count and recognise numbers and shapes

South Canberra, Tuggeranong and Weston Creek showed higher proportions of developmental vulnerability in Language and Cognitive Skills relative to the ACT average. Belconnen, Gungahlin, North Canberra and Woden had higher proportions of children on track in Language and Cognitive Skills relative to the ACT average (refer to Table 7).

Table 7: Language and Cognitive Skills

PERCENTAGE OF CHILDREN:			
Location	🟢 On track	🟡 At risk	🔴 Developmentally vulnerable
ACT	86.5%	9.5%	3.9%
Belconnen	87.1%	9.2%	3.7%
Gungahlin	87.6%	9.6%	2.8%
North Canberra	89.5%	7.9%	2.6%
South Canberra	85.5%	9.4%	5.1%
Tuggeranong	84.5%	9.9%	5.5%
Weston Creek	83.9%	11.2%	4.9%
Woden	87.1%	10.0%	2.9%



Communication Skills and General Knowledge

Whether a child can tell a story, communicate with adults and children, articulate themselves

Gungahlin, South Canberra, Tuggeranong and Woden displayed higher proportions of developmental vulnerability in Communication Skills and General Knowledge relative to the ACT average. Belconnen, South Canberra, Tuggeranong and Woden presented with higher proportions of children on track in Communication Skills and General Knowledge relative to the ACT average (refer to Table 8).

Table 8: Communication Skills and General Knowledge

PERCENTAGE OF CHILDREN:			
Location	🟢 On track	🟡 At risk	🔴 Developmentally vulnerable
ACT	73.5%	18.5%	8.1%
Belconnen	74.0%	19.6%	6.4%
Gungahlin	66.7%	22.8%	10.4%
North Canberra	71.7%	22.2%	6.1%
South Canberra	77.1%	12.0%	10.9%
Tuggeranong	76.0%	15.6%	8.5%
Weston Creek	73.2%	20.6%	6.2%
Woden	78.9%	11.7%	9.4%



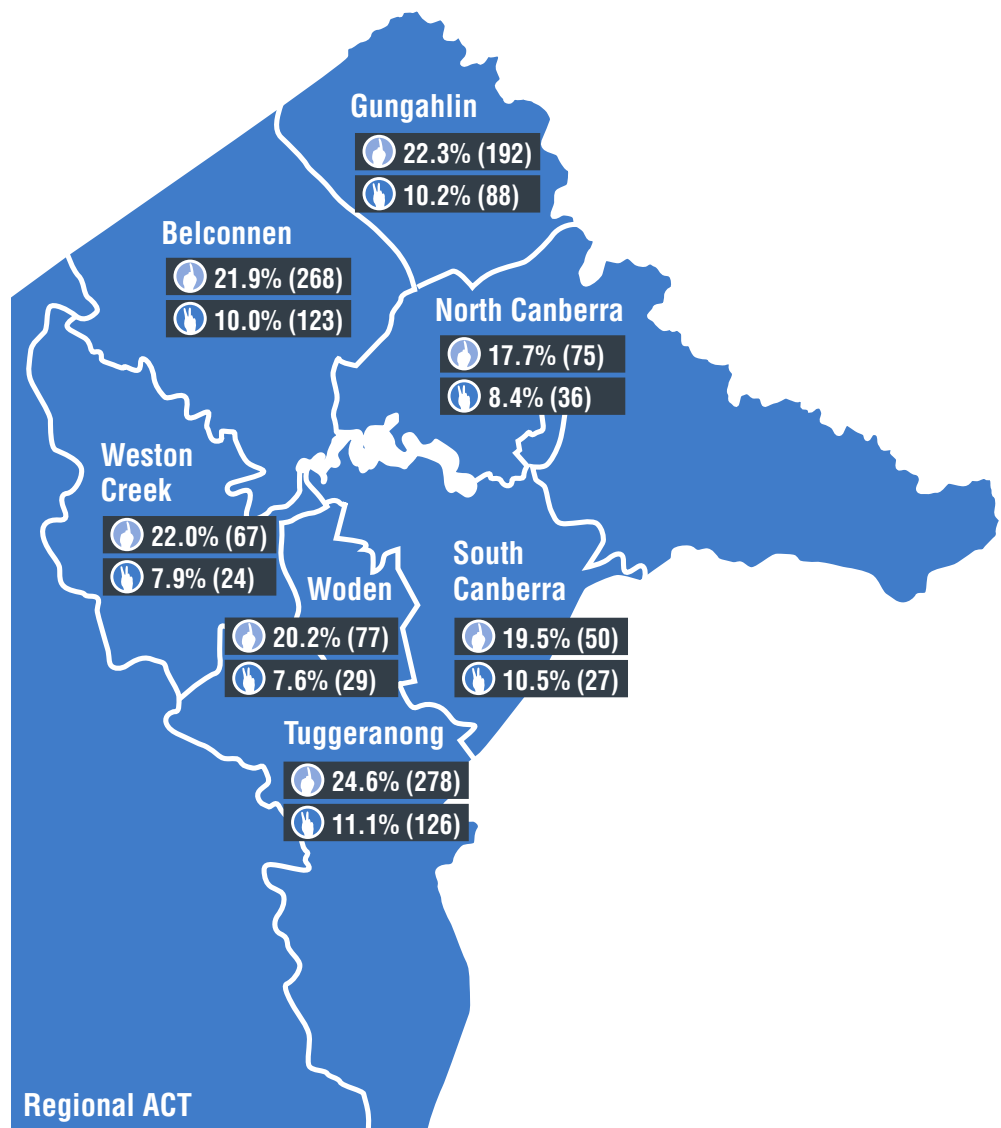
Developmental vulnerability

Whether a child is developmentally vulnerable on one or more domains

As shown in Figure 4, the proportion of developmental vulnerability varies across the ACT communities. Tuggeranong (24.6%), Gungahlin (22.3%) and Weston Creek (22.0%) have higher proportions of children developmentally vulnerable on one or more domain. When looking at proportions of children developmentally vulnerable on two or more domains, the communities with the highest levels are Tuggeranong (11.1%), South Canberra (10.5%), Gungahlin (10.2%) and Belconnen (10.0%).

Areas with the lowest proportion of children developmentally vulnerable on one or more domain are North Canberra (17.7%) and South Canberra (19.5%). Weston Creek (7.9%) and Woden (7.6%) have the lowest proportion of children developmentally vulnerable on two or more domains.

Figure 4: The proportion and numbers of children developmentally vulnerable on one or more and two or more domains of the AEDI in each community within the ACT (2012)



Key

% (number) of children developmentally vulnerable on one or more domains

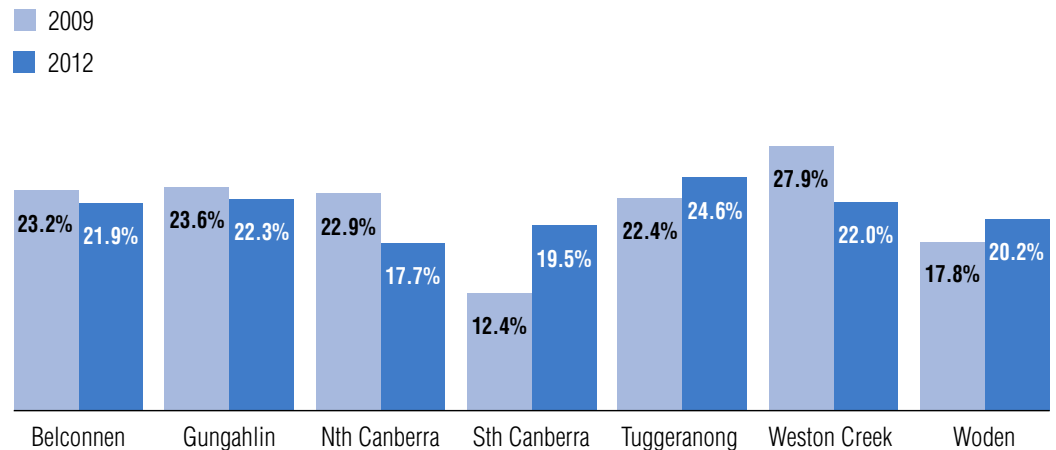
% (number) of children developmentally vulnerable on two or more domains

ACT comparisons between 2009 and 2012

Four of the seven regions within the ACT saw a drop in developmental vulnerability on one or more domain between 2009 and 2012 (refer to Figure 5). This was statistically significant in North Canberra and Weston Creek.

There has been an increase in vulnerability in South Canberra, Tuggeranong and Woden. This increase is statistically significant in South Canberra and Tuggeranong.

Figure 5: Proportion of children developmentally vulnerable on one or more domain, within the ACT regions, between 2009 and 2012



Between 2009 and 2012, there was a decrease in developmental vulnerability for all domains except Physical Health and Wellbeing (refer to Table 9). The Physical Health and Wellbeing domain displayed an increase in the proportion of ACT children developmentally vulnerable from 9.4% in 2009 to 10.6% in 2012. The percentage of ACT children developmentally vulnerable on one or more domain or two or more domains has remained fairly similar between 2009 and 2012.

Table 9: Proportion of children developmentally vulnerable by each AEDI domain, on one or more and two or more domains, ACT and Australia, 2009–2012

Domain	ACT		Australia	
	2009	2012	2009	2012
 Physical Health and Wellbeing	9.4%	10.6%	9.3%	9.3%
 Social Competence	8.9%	8.6%	9.5%	9.3%
 Emotional Maturity	9.0%	7.2%	8.9%	7.6%
 Language and Cognitive Skills	5.7%	3.9%	8.9%	6.8%
 Communication Skills and General Knowledge	8.9%	8.1%	9.2%	9.0%
 Developmentally vulnerable on 1 or more domain	22.2%	22.0%	23.6%	22.0%
 Developmentally vulnerable on 2 or more domains	10.9%	9.8%	11.8%	10.8%

ACT results for population groups

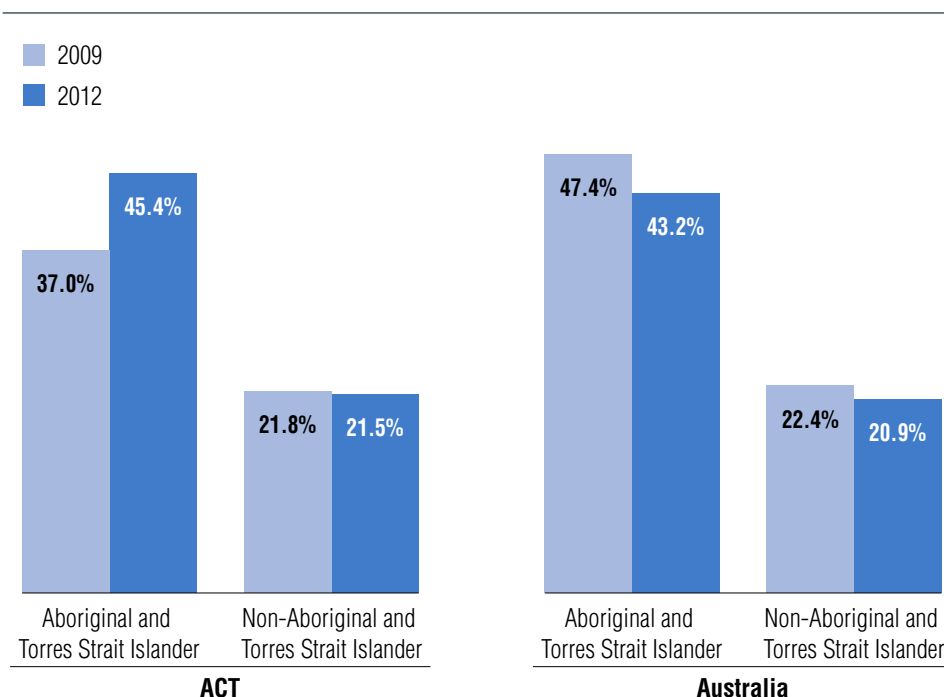
The following section examines AEDI results for population groups, including Aboriginal and Torres Strait Islander children, children with a language background other than English, males/females and socio-economic status. Breaking down the AEDI data in this way is a valuable resource to inform policy and service delivery for children and families.

Aboriginal and Torres Strait Islander children

There were 117 Aboriginal and Torres Strait Islander children surveyed in the ACT. This represents 2.4% of ACT children participating in the AEDI. For 33 children living and attending school in the ACT, the AEDI Checklist was completed collaboratively with an Indigenous Cultural Consultant.

The majority of Aboriginal and Torres Strait Islander children are developmentally on track on each of the five AEDI developmental domains. However, Aboriginal and Torres Strait Islander children are more than twice as likely to be developmentally vulnerable than non-Aboriginal and Torres Strait Islander children.

Figure 6: Comparison of Aboriginal and Torres Strait Islander children developmentally vulnerable on one or more domain, 2009–12



Aboriginal and Torres Strait Islander children in the ACT experienced an increase in developmental vulnerability between 2009 and 2012, from 37% in 2009 to 45.4% in 2012. Over this same time, there was a national decrease in the proportion of Aboriginal and Torres Strait Islander children developmentally vulnerable in Australia from 47.4% to 43.2%. The percentage of Aboriginal and Torres Strait Islander children developmentally vulnerable on one or more domain is higher in the ACT than nationally, with 45.4% of Aboriginal and Torres Strait Islander children vulnerable in the ACT compared to 43.2% in Australia.

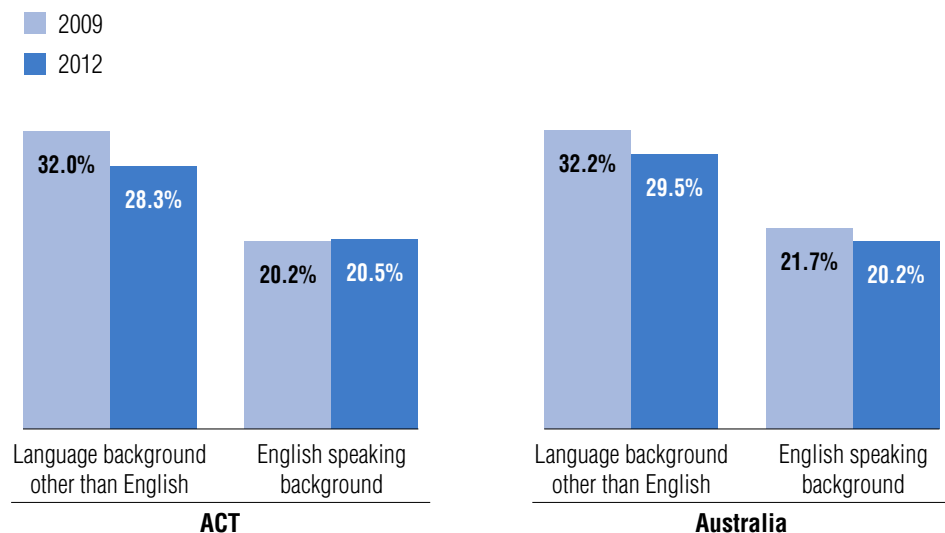
If a classroom teacher is non-Aboriginal or Torres Strait Islander and completing a checklist for an Aboriginal or Torres Strait Islander child it is recommended that the checklist be completed with an Indigenous Cultural Consultant. The Indigenous Cultural Consultant role is to support teachers in their rating of Aboriginal and Torres Strait Islander children because of their understanding of the ways Aboriginal and Torres Strait Islander children may learn and behave from a cultural point of view.

Language diversity

There were 962 children with a language background other than English (LBOTE) that were surveyed in the ACT. This represents approximately 1 in 5 (19.6%) ACT children surveyed.

The proportion of ACT children with a LBOTE that are developmentally vulnerable on one or more domain is higher than children with an English speaking background. The percentage of children with a LBOTE who are developmentally vulnerable has significantly decreased since 2009 in both the ACT and nationally.

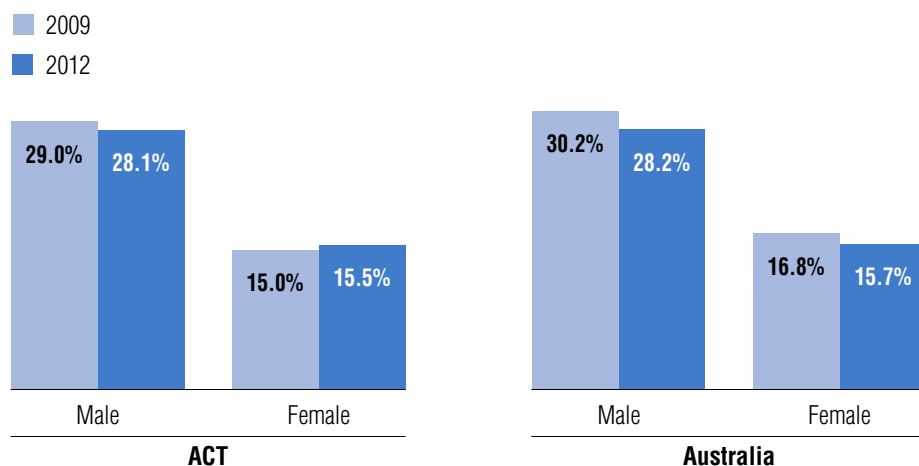
Figure 7: Comparison of children with a language background other than English, developmentally vulnerable on one or more domain, 2009–12



Gender

The proportion of male children both in the ACT and nationally who are developmentally vulnerable on one or more domain is higher relative to females. There has been a significant decrease in the number of males developmentally vulnerable in both the ACT and nationally between 2009 and 2012. Whilst there has been a significant decrease in the proportion of females developmentally vulnerable between 2009 and 2012 at a national level, the ACT has seen an increase in developmental vulnerability.

Figure 8: Comparison of female and male children, developmentally vulnerable on one or more domain, 2009–12



Socio-Economic Indexes for Areas (SEIFA) and developmental vulnerability

Using AEDI data together with Socio-Economic Indexes for Areas (SEIFA) information it is possible to examine the relationship between socio-economic disadvantage and developmental vulnerability. SEIFA was developed by the Australia Bureau of Statistics (ABS) to rank areas of Australia according to relative socio-economic disadvantage using Census data.

The SEIFA Index for Relative Socio-Economic Disadvantage summarises a range of information about the economic and social conditions of people and households within an area. Each geographic area in Australia is given a ranking according to its level of disadvantage and enables areas to be grouped into quintiles (a quintile is a 20 per cent range).

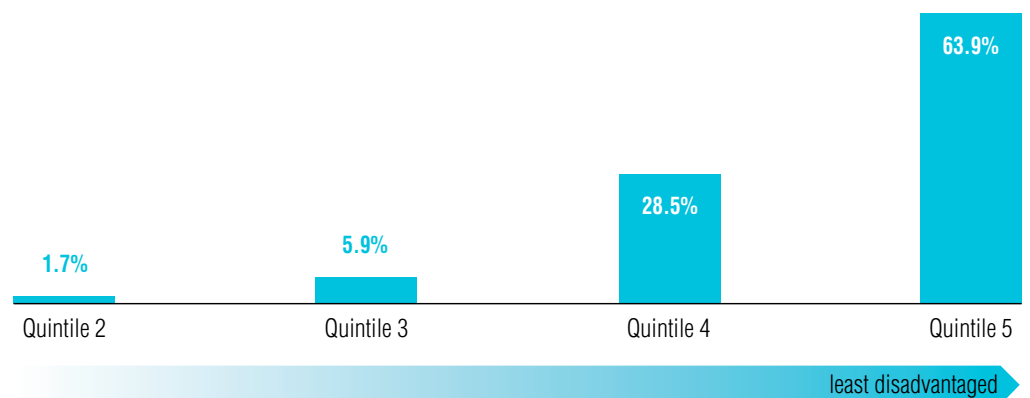
Quintile one represents areas with the greatest socio-economic disadvantage, while quintile five represents areas with the least socio-economic disadvantage. Note that due to small numbers in both 2009 and 2012, the figures for the most disadvantaged quintile (quintile 1) have been excluded to ensure confidentiality.

The following tables and figures display the number of children living in SEIFA quintiles and also the proportion of children developmentally vulnerable on one or more domain for 2009 and 2012 by quintile. Due to changes in how SEIFA was collected, the following results for 2009 and 2012 cannot be compared.

According to the 2009 and 2012 results, the majority of ACT children live in areas with the least level of disadvantage (quintiles four and five).

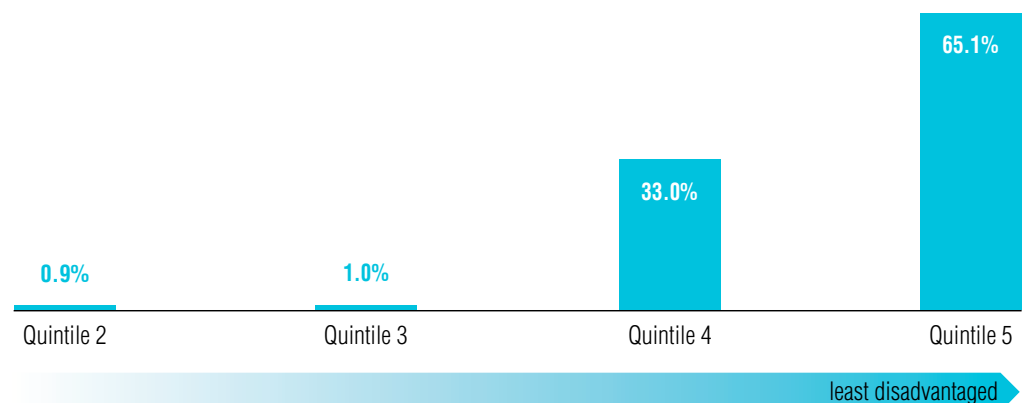
In 2009, 63.9% of children were living in the least disadvantaged quintile (quintile 5), 28.5% in the second least disadvantaged quintile (quintile 4), 5.9% in quintile 3 and only 1.7% in second most disadvantaged quintile (quintile 2).

Figure 9: Percentage of children across quintiles two to five for 2009



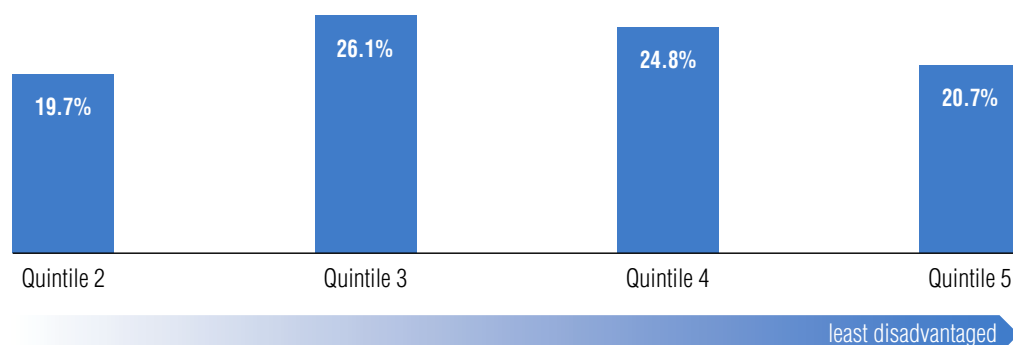
In 2012, 65.1% of children were living in the least disadvantaged quintile (quintile 5), 33.0% in the second least disadvantaged quintile (quintile 4), 1.0% in quintile 3 and only 0.9% in the second most disadvantaged quintile (quintile 2).

Figure 10: Percentage of children across quintiles two to five for 2012



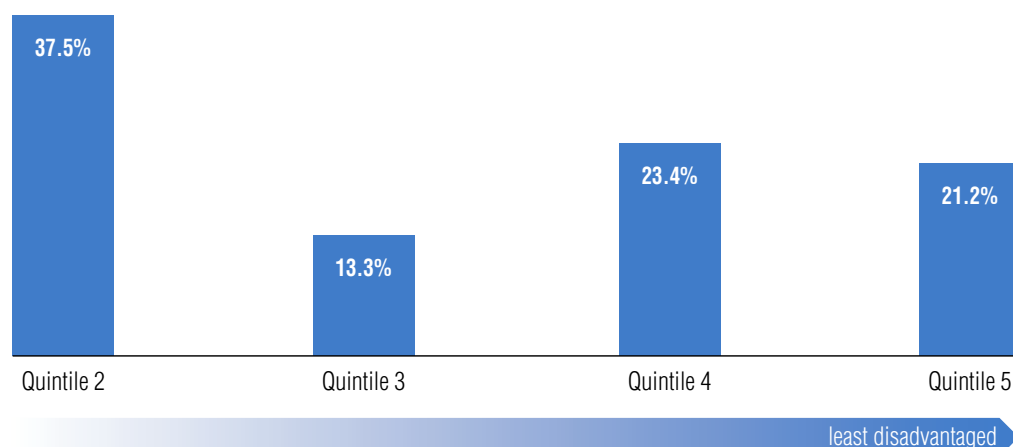
In 2009, the greatest percentage of children were developmentally vulnerable on one or more domains in the third quintile (26.1%), and the smallest percentage of children were developmentally vulnerable in the second quintile (19.7%).

Figure 11: Percentage of developmentally vulnerability across quintiles two to five for 2009



In 2012, the greatest percentages of children were developmentally vulnerable on one or more domain in the second quintile (37.5%) and the smallest percentage of children were developmentally vulnerable in the third quintile (13.3%).

Figure 12: Percentage of developmental vulnerability across quintiles two to five for 2012



Research suggests that generally there is an association between socio-economic disadvantage and developmental vulnerability. However, this pattern is not fully reflected in the ACT results. This may be partly related to the difficulty the ACT traditionally experiences in identifying and measuring disadvantage. ACT collection districts have socio-economically diverse populations as public housing in Canberra is generally 'salt and peppered' across suburbs. As a result of this co-location, disadvantage is underreported when the standard Census-based measure of socio-economic disadvantage is used (SEIFA). Therefore, it is important to note that disadvantage by area does not adequately paint a picture of socio-economic disadvantage experienced by children and families in the ACT relative to a child's developmental vulnerability.

When looking at the proportion of children living in each quintile in the ACT it is clear that the vast majority live in the least disadvantaged areas according to SEIFA. This accounts for a larger total number of children vulnerable on one or more domains in these areas. This highlights the need for a universal service and intervention base to reach all developmentally vulnerable children regardless of community level disadvantage, in addition to a targeted approach.

The AEDI in the future

The next AEDI data collection will occur nationally in 2015. This third data capture will provide an opportunity to review trends in early childhood development over time.

The ACT Government will continue to be responsible for the administration of the data collection in the ACT and use the 2015 results to promote the importance of early childhood and facilitate community development.

The Community Services Directorate will continue to assist community members, policy makers and stakeholders to understand the AEDI results and utilise them to encourage optimal development in the early years and good planning and policy around early childhood development.

This report is published
on the Community
Services Directorate
Children's website
www.children.act.gov.au

For further information

Fact sheets

There are a number of fact sheets and FAQs to help understand the AEDI, the results, how it is collected and stories about what communities and schools are doing in response to the results. Visit the AEDI website at www.aedi.org.au.

National Report

A Snapshot of Early Childhood Development in Australia 2012 – AEDI National Report provides a unique overview of the development of Australia's children.

Online community maps

Geographic maps show the proportion of children in the local community who are developmentally vulnerable on the AEDI domains. Online community profiles and maps can be found at <http://maps.aedi.org.au>.

Community profile

The AEDI community profile contains important information about early childhood development outcomes. The profile provides community-level AEDI results and contextual information for the whole community.

School profiles (available to schools with results for six or more children)

AEDI school profiles provide schools with results for children attending their school who had information collected about them for the AEDI data collection. School profiles are not publicly available. School profiles can be found at www.rch.org.au/aedi/Schools/AEDI_School_Profile.

AEDI Indigenous Adaptation Study

The AEDI Indigenous Adaptation Study responds to questions about the cultural equivalence of the AEDI for assessing the early childhood development outcomes of Aboriginal and Torres Strait Islander children.

The report is available at http://www.rch.org.au/uploadedFiles/Main/Content/aedi/ResearchReport_IndigenousAdaptation_0911.pdf



Australian Early Development Index



ACT
Government



LEGISLATIVE ASSEMBLY
FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON EDUCATION, TRAINING AND YOUTH AFFAIRS
ANNUAL AND FINANCIAL REPORTS 2013-2014

Ms Mary Porter (Chair), Mr Steve Doszpot (Deputy Chair), Ms Yvette Berry (Member), Mrs Giulia Jones (Member)

ANSWER TO QUESTION TAKEN ON NOTICE
DURING PUBLIC HEARINGS
QTON 25
QTON-14/63

Asked by Mrs Giulia Jones on 13 November 2014: Mr Paul Wyles took on notice the following question:

[Ref: Ref: Hansard Transcript 13 November 2014 [PAGE #14-15]]

In relation to: Australian Early Development Index

Of the five domains, physical health and wellbeing; social competence; emotional maturity; language and cognitive skills; and community skills/general knowledge, the ACT did not improve on the physical health and wellbeing domain.

- a) Has the Government instigated any academic study as to why we are not improving in this category or are we just relying on anecdotal responses?
- b) Mr Wyles agreed to provide the Committee with a copy of the 2012 AEDI Report.

MINISTER GENTLEMAN: The answer to the Member's question is as follows:-

- a) Has the Government instigated any academic study as to why we are not improving in this category or are we just relying on anecdotal responses?

The Community Services Directorate is a Partner Investigator of the Kids in Communities Study (KICS). KICS is a national investigation of community-level effects on children's developmental outcomes. KICS offers an opportunity for the ACT to identify modifiable factors that impact on early childhood development within local communities, thus allowing for more effective targeting of funding and program planning.

The KICS project is particularly interested in communities where early child development outcomes are significantly better or worse than would be expected given the socio-economic profile of the community. Communities were identified using the Australian Early Development Census (AEDC) results with data from the Socio-Economic Indexes for Areas (SEIFA).

- b) Mr Wyles agreed to provide the Committee with a copy of the 2012 AEDI Report.

Mr Wyles has provided a copy to the Committee Secretariat.

Approved for circulation to the Standing Committee on Education, Training and Youth Affairs

Signature:

Date:

27/11/14

By the Minister for Children and Young People, Mick Gentleman MLA



LEGISLATIVE ASSEMBLY
FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON EDUCATION, TRAINING AND YOUTH AFFAIRS
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Ms Mary Porter (Chair), Mr Steve Doszpot (Deputy Chair), Ms Yvette Berry (Member), Mrs Giulia Jones (Member)

ANSWER TO QUESTION TAKEN ON NOTICE
DURING PUBLIC HEARINGS
QTON 20
QTON-14/58

Asked by Ms Mary Porter on 13 November 2014: Minister Gentleman took on notice the following question(s):

[Ref: Ref: Hansard Transcript 13 November 2014 [PAGE #7]]

In relation to: West Belconnen Child and Family Centre

Can CSD provide a list of the services provided by the West Belconnen Child and Family Centre?

MINISTER GENTLEMAN: The answer to the Member's question is as follows:—

Engagement and Assessment

- Intake
- Psychosocial assessment

Clinical Work

- Behaviour and Emotional Wellbeing Clinic
- Clinical interventions for children with developmental needs
- Case co ordination for families with multiple and complex needs

Early Learning Programs

- Paint and Play
- Early Links to Learning
- Koori Playgroup

Parenting Programs

- Parents as Teachers (PAT)
- Learn, Giggle and Grow
- Tuning into Kids
- Circle of Security
- Young Parents Group
- POPPY (Parents Opportunity to Participate and Play with their Young)

Early Intervention Mental Health

- Cool Kids
- Cool Little Kids

Community Engagement/Community Development

- Koori Women's Group
- South Sudanese Group
- Koori Kids
- Koori Leadership program
- Koori preschool visits
- Cultural School Holiday Program
- Community events/activities

Refer to: [West Belconnen Child and Family Centre](#) and the 'Child and Family Centres ACT A Guide to Our Programs and Services' publication.

Mr Wyles provided a copy to the Committee Secretariat

Other Services Delivered from the WBCFC

External programs/services

- ACT Health Directorate
 - MACH Nurses
 - Midwives
 - Women's Health Nurse and Counsellor
 - Nutrition
- Therapy ACT (speech and physiotherapy)
- Relationships Australia
- ACT Playgroups (Playing Together)
- Calvary Public Midwifery Program
- UCan Read
- The Smith Family
- Dad's Playgroup
- Migrant and Refugee Settlement Service
- StreetLaw
- Marymead KAYAKS Program
- Mandarin for Fun Group
- DVCS
- WIRC
- Medicare Local: Health in Mind

Approved for circulation to the Standing Committee on Education, Training and Youth Affairs

Signature:



Date: 27/11/14

By the Minister for Children and Young People, Mick Gentleman MLA

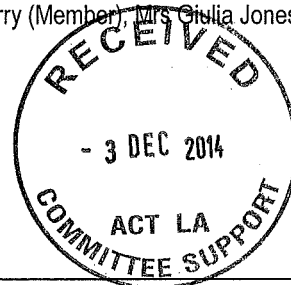


LEGISLATIVE ASSEMBLY
FOR THE AUSTRALIAN CAPITAL TERRITORY

STANDING COMMITTEE ON EDUCATION, TRAINING AND YOUTH AFFAIRS
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Ms Mary Porter (Chair), Mr Steve Doszpot (Deputy Chair), Ms Yvette Berry (Member), Mrs Giulia Jones (Member)

**ANSWER TO QUESTION TAKEN ON NOTICE
DURING PUBLIC HEARINGS
QTON 23
QTON-14/61**



Asked by Ms Giulia Jones on 13 November 2014: Ms Natalie Howson took on notice the following question(s):

[Ref: Ref: Hansard Transcript 13 November 2014 [PAGE #10-11]]

In relation to: Families accessing Early Intervention Prevention Services

Can CSD provide more detail regarding why the target numbers for families accessing Early Intervention Prevention Services have not been reached?

MINISTER GENTLEMAN: The answer to the Member's question is as follows:-

The Original Target for 2013-14 was 1,920 and the Actual Result for 2013-14 was 1,863. This equates to a 3% variance. Our target was increased from 1,720 in 2012-13 to 1,920 in 2013-14 as an estimate of future demand.

The result of 1,863 was an increase on the result for 2012-13 which was 1,830. The variation is a measure of accuracy of predicted service demand.

It should be noted that this demand does not include access of families to the broader service offer of the Child and Family Service system including services provided by the Health Directorate, through schools and by funded community service organisations.

Approved for circulation to the Standing Committee on Education, Training and Youth Affairs

Signature:

Date:

2/12/14

By the Minister for Children and Young People, Mick Gentleman MLA



LEGISLATIVE ASSEMBLY
FOR THE AUSTRALIAN CAPITAL TERRITORY

ANNUAL REPORT HEARINGS 2013-2014

STANDING COMMITTEE ON EDUCATION, TRAINING AND YOUTH AFFAIRS
MARY PORTER AM MLA (CHAIR), STEVE DOSZPOT MLA (DEPUTY CHAIR), YVETTE BERRY

**ANSWER TO QUESTION TAKEN ON NOTICE
DURING PUBLIC HEARINGS**

Asked by Mr Steve Doszpot on 14 November 2014: Ms Beth Mitchell took on notice the following question(s):

[Ref: Hansard Transcript 14 November 2014 [PAGE #91-92]]

In relation to: The Learning Difficulties Taskforce Implementation Report

Can you provide me with a copy of Learning Difficulties Taskforce report?



MINISTER BURCH: The answer to the Member's question is as follows:—

The Learning Difficulties Taskforce Final Report and Implementation Reports for February 2014 and June 2014 can be accessed from the Education and Training Directorate website. Link below.

http://www.det.act.gov.au/about_us/minister/taskforce_on_students_with_learning_difficulties

Approved for circulation to the Select Committee on Estimates 2014-2015

Signature:

Date: 3.12.14.

By the Minister for Education and Training, Ms Joy Burch MLA