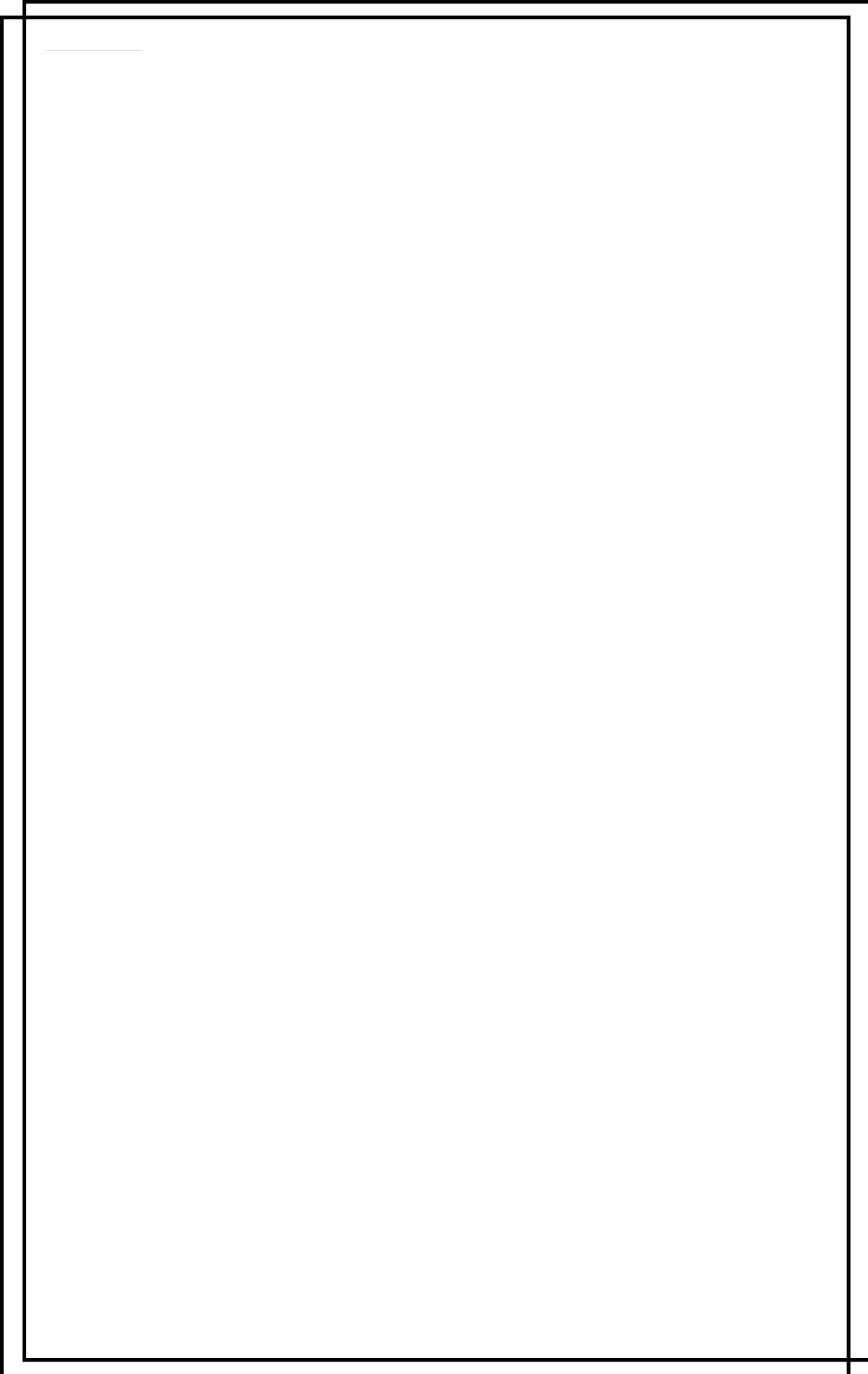

Child
&
Youth
Safety Strategy
Alice Springs





ALICE
IN TEN



The Child and Youth Safety Strategy was developed by the Child and Youth Safety Sub-Committee of the Central Australian Safer Communities Committee in conjunction with the Alice in Ten Quality of Life Project.

The development of the Strategy was assisted by funding received from the Department of Health and Community Services, the Office of Crime Prevention and the Department of the Chief Minister for the employment of a Crime Prevention Project Officer.

The development of the Strategy was possible because of the strong commitment of those agencies involved to achieving the best possible outcomes for the children and young people of Alice Springs through interagency collaboration and partnerships. These agencies are mentioned in the Acknowledgements.



Children and youth safety strategy Commission
 Artist: Margaret Kamarre Turner

The three circles in the middle of the painting carry the lives of people.

In the circle at the top left is 'when people have healthy lives. When they share and everything, together. That's how people gather- every skin group, every family.' The circle is surrounded by a necklace made of seeds, the necklace is strong.

The circle to the top right is 'when the kids drift away, they are lost. They see things thrown around, thrown at them. They feel like bits of everything, walking around in circles, like they are not wanted.' The necklace of seeds around this circle are broken and disjointed

The circle beneath these is 'when the kids get out, they get out and heal. When the family gets them, sing them, they go hunting. There is a coolamon smoking those people- get those people strong. They get back to hunting and walking together. They learn back.' The circle of seeds on the necklace is growing strong again.

Between all the circles are the footsteps of people who are going through all this, they are watched, when they turn back to strength. The people watching them are shown in 'U' Shapes along the pathways between the circles.

In the background are 'all the flowers and tracks of animals. All the flowers are what the animals eat.' Just to the right of the lower circle are 'Branches waving over them as they go past.' In the middle of all the circles are four sets of three wavy lines, these signify the smoking ceremony when people are coming back and growing strong again.

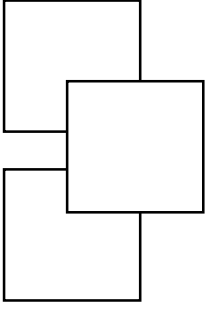
The wavy large brown line is the 'family line- how the family line runs, we can't see it, we just know it. It cuts onto this creek and then its another family's, and it cuts into another creek and another family.'

All around the background are different bush foods 'Arrutnenge (passionfruit) and bush foods are what people eat. The footprints are where everyone goes.' 'The footprints are while people are hunting.' Other bush foods shown are Atwakeye (Bush Orange), Alangkwe (Bush Banana) and Katyerre (Bush Sultana).

Please note: Plain text indicates Margaret's explanation, with Italics being used when she is not directly quoted.

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Foreword

Our children and young people pose the greatest challenge to our community. Do we have the skills to embrace them and support them to be the best persons they can be, and to have available to them opportunities to play and learn and develop and grow?

They will inherit the roles of policemen and women, artists, doctors, teachers, politicians, sports people and parents. They will develop as strongly as we allow them to develop.

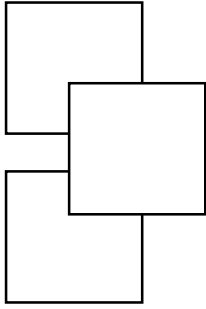
We must enjoy our children and young people and celebrate their strengths. They offer hope, inspiration, and energy, and challenge us with new ideas and new ways.

As children grow they explore their environment and learn from those around them. The role models and opportunities presented to them are beyond their control. It is from these early experiences that they learn how to respond and behave. They learn how to develop resilience and they learn in what to believe. Young people coming out of a childhood with poor role models and few opportunities are presented with a very difficult path ahead. As many of these children enter adolescence, the reality of their world dawns on them. Their future possibilities appear hopeless and the spark of life in their eyes diminishes. Sadness and anger and confusion arise from poverty, pain, grief and loneliness.

The social contexts faced by disadvantaged children and young people are often complex and multi faceted requiring a concentrated and collaborative partnership response by families, the community and services providers. This social contexts place vulnerable children and young people at high risk of becoming habituated into lifestyles, which limits their opportunity to participate in and access the wealth, success and healthy life that most young Australians accept as an inalienable right.

This Strategy recognises children and young people in the context of our community. It challenges us to work together to create a real future for these children and young people. Whilst this strategy recognises the community's concern when these children and young people inflict harm on others, it also recognises that disadvantage and despair often drive these events. It is a Strategy for the whole of our community and requires all of us to participate.

As a community we are responsible for the care and protection of our children and young people. It is our responsibility to keep the spark alive in their eyes and to offer them the greatest and fullest future that we can deliver, free from prejudice, judgement and barriers. This Strategy works towards this goal.



Introduction

The Child and Youth Safety Strategy is a plan for how the Alice Springs community will respond to issues facing the children and young people of our community. The Strategy will inform government planning for services and programs for our children and young people. The emphasis will be on improving outcomes for children and young people by diverting them away from anti-social or criminal behaviour, supporting their families to care for them, enhancing their feelings of acceptance and belonging within the community, increasing their employment and education opportunities and providing appropriate and safe leisure activities. The Strategy will complement Northern Territory Government initiatives and policies including Building a Better Future for Young Territorians, the foreshadowed Youth at Risk Strategy, the Domestic Violence and Aboriginal Family Violence Strategies, Building a Safer Territory Together, the Department of Employment, Education and Training's Enrolment, Attendance and Retention Strategy, the Itinerants Strategy, initiatives under Alice in Ten such as Footprints Forward and the foreshadowed Northern Territory Crime Prevention Strategy .

The Chief Minister's Youth at Risk Taskforce is a major initiative for planning services for youth at risk and will have a significant impact on the implementation of this Strategy. The Strategy will provide a local framework for the planning and development of services arising from Territory-wide initiatives such as the Youth at Risk Taskforce and national initiatives such as the National Agenda for Early Childhood.

The development of the Strategy was in part initiated by concern about the presence of a group of approximately 20-30 children and young people on the streets at night that appeared to be without adequate adult supervision and by a spate of juvenile crime and anti-social behaviour incidents in 2001/2002. The need to respond to these issues in a timely and comprehensive manner was central to the development of this strategy.

Child and Youth Safety Committee

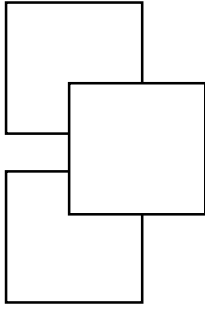
The Child and Youth Safety Committee was established as a sub-committee of the Central Australian Safer Communities Committee (one of the regional crime prevention councils established by the Northern Territory Government) in order to facilitate the development of the Strategy and to develop a response to concerns about children on the street at night. The Child and Youth Safety Committee has been acknowledged by the Alice in Ten Quality of Life Committee and the Central Australian Safer Communities Committee as a key forum for consultation and planning in relation to services for children and young people who are at risk.

Children and young people in Alice Springs

Alice Springs has a relatively young population with 8067 (29%) people aged under 19 years. These are spread roughly equally across the age range. In the Indigenous population 1766 (42%) are under the age of 19. Indigenous people make up about a 22% of the population under the age of 19 whereas they make up 15% of the total population. In the Alice Springs *region*, Indigenous children and young people comprise 45% of the population under the age of 19.

Whilst young people are often identified as the perpetrators of crime and anti-social behaviour they are also victims of crime and community neglect. The community profile (Appendix A) for the Central Australian Region indicates that children and young people in our community are being exposed to a number of factors that place them at high risk both of engaging in crime but also of being assaulted, abused and neglected¹. Some of these primary risk factors are school failure, socio-economic disadvantage, poor housing conditions, family violence and social isolation (Appendix B). A comparison of Appendix A and Appendix B indicates that Indigenous children and young people in Alice Springs are at high risk. This comparison has been used to identify priorities for action within the Alice Springs community

¹ All statistics cited in the report are referenced in Appendix A.



The Strategy

Scope

The Strategy will address the needs of children and young people in the Alice Springs who are 'at risk' in an attempt to ensure their safety and engagement with the community. Its primary focus will be on Secondary and Tertiary Interventions. Emphasis will be given to the needs of Indigenous children and young people because of their over-representation in the criminal justice and welfare systems. Over 70% of children and families who are clients of Family and Children's Services (the Northern Territory statutory child protection service) are Indigenous.

Definition

In order to maintain consistency with other key strategic planning documents, the definition of 'at risk' used by the Youth at Risk Taskforce is adopted here.

"Children¹ or young people are regarded as being "at risk" if their behaviour and circumstances jeopardises their physical, emotional or social development. It includes circumstances where they are at risk of being involved in or impacted upon by crime or anti-social behaviour or becoming disconnected from mainstream settings such as families, schools and the community."

1. Development of a strategic framework and action plans that will contribute to a reduction in the numbers of children and young people considered at risk within Alice Springs.
2. A plan for children and young people to be engaged within our community.
3. Establishment of local structures that inform potential funding providers about community priorities to ensure improved local coordination and appropriate development of infrastructure.
4. Improved agency coordination and information sharing, data collection and management for use in planning and delivering child and youth services.
5. Strengths and assets within the community to respond to community issues are built upon.
6. Improved whole of government and community planning for children and young people.
7. Mapping of community services for children and young people

¹ For the purposes of this Action Plan, a reference to a child or young person means that the person is between the ages of 0-17 years inclusive, as is commensurate with the *Community Welfare Act (0-17 years)* and the *Juvenile Justice Act (10-17 years)*.

Guiding Principles

There are seven principles informing the development of the Child and Youth Safety Strategy.

- **Recognition of the impact of risk and protective factors**

The identification of specific risk and protective factors will inform and prioritise strategies for targeting interventions (see Appendix B). The Strategy will promote protective factors for children and young people and reduce risk factors in order to ensure the safety of children and young people, increase their engagement in community life and reduce their involvement in anti-social and criminal behaviour.

- **Prevention and Early Intervention**

Effort needs to be directed at addressing the causes of young people's disconnection from our community before they manifest into criminal and anti-social behaviour. Failing this policies and services will be encouraged to take an early intervention approach where possible.

- **Community focus**

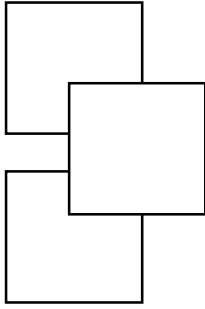
Policies and services will be responsive to local interests and needs. The Strategy highlights the need to use the existing strengths of individuals, families and communities in responding to the needs of their children and young people. It also recognises that the community are often the experts in these areas and should be involved in devising and managing programs to ensure that they are meaningful and effective.

- **Evidence-based response**

To maximise the efficiency of policies, strategies and services their selection should be based on current research and evidence of their effectiveness – what works, for whom and where. Responses should not only be based on concrete data but also on client expectations and satisfaction with a service and local factors that influence the delivery of services. Statistics regarding juvenile crime and young people as victims of crime will be collected and reported along with other statistics gathered by the Office of Crime Prevention in order to better inform and target interventions.

- **Service delivery is to be inclusive**

Flexibility of policies and services is required in order to be able to respond to the diverse needs of all children and young people. This in turn will enhance children and young peoples' ability and willingness to participate in the community.



- **Whole-of-Community and Whole-of-Government approach**

It is the responsibility of both the Government and the community to respond and support children and young people. Government cannot work alone to tackle anti-social and criminal behaviour. Government and community organisations need to work together to ensure that a comprehensive response can be made to children and young people. Partnership between non-government and government agencies will:

- reduce duplication and overlap between services, resulting in improved and more effective service delivery
- ensure greater efficiency in the use of existing resources
- clarify agency roles and responsibilities

- **Indigenous systems of Knowledge and cultural safety**

There is a body of knowledge that exists within the indigenous cultures regarding Child and Youth safety. This includes a family approach to the care and responsibility of children and young people and their care and behaviour. This strategy recognises that these systems of knowledge exist independently to Western expertise and are equally relevant. The Strategy supports the promotion and inclusion of this expertise in any initiatives that involve indigenous children and young people. There are many social and cultural protocols practiced by indigenous communities that need to be respected for the Strategy to be effective. This Strategy recognises the importance of cultural safety in any policy development, actions, programs, research or evaluation.

Mechanisms supporting development

Co-ordination through collaboration, consultation and formal partnerships are the mechanisms which will underpin the development of the Strategy. Consultations undertaken in the course of the development of the Strategy are listed in Appendix E.

Peak organisations will be identified and consulted in the development of the Strategy. The Central Australian Young People’s Information Network (CAYPIN) will be supported as the peak body for youth issues in the Central Australian region and consulted accordingly. Other peak organisations will be identified and consulted in the ongoing development of the Strategy.

Interagency protocols will formalise partnerships and ensure that partnerships are based on:

- a clear understanding of roles and responsibilities
- sharing a clear and common purpose
- effective interagency coordination and communication through the purposeful dissemination of information between organisations

the maintenance of relevant data collection systems to support evidence based practice

Framework for the Strategy

The framework for the Strategy is diagrammatically represented in Appendix C. It focuses on four aspects of the lives of children and young people:

- Education and Employment
- Safe Family Life
- Health and Wellbeing
- Social Connection within a Safe Community

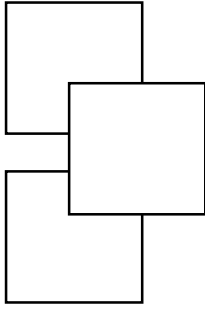
Key Areas for Action and key issues are identified. Action Plans which address the key issues are described. The Action Plans have several common elements which reflect the Principles underpinning the Strategy. Action Plans articulate the evidence base that supports the need to respond to a particular issue including research and consultation processes informing the development of the Action Plan. They identify mechanisms for partnership between agencies. They map existing services against the resources required and they describe mechanisms for the evaluation and monitoring of interventions.

The Action Plans are contained in a separate document. This allows for greater accessibility, flexibility and easier reference. It is anticipated that the Action Plans will be the subject of ongoing consultation and review and that they will develop and change in line with changes in the community.

Development and review

The Child and Youth Safety Subcommittee of the Central Australian Safer Communities Committee will be responsible for the ongoing review and monitoring of the Child and Youth Safety Strategy for Alice Springs. The Subcommittee has worked closely with the agencies responsible for the provision of services to children and young people. The Subcommittee will continue to consult widely with relevant agencies and the community. They will be cognisant of emerging research and trends in the area of crime prevention. This information will be used to inform the ongoing development of the Child and Youth Safety Strategy Action Plans to ensure that the Strategy is responsive and relevant to community needs. Key government agencies with responsibility for planning and funding services for children and young people in Key Action Areas are identified in the Action Plans.

The Office of Crime Prevention will support the Subcommittee in the further development of the Child and Youth Safety Strategy. The Project Officer employed by the Office of Crime Prevention in Alice Springs will be responsible, in conjunction with the Subcommittee, for reviewing the Strategy in the context of the evolving needs of the Alice Springs community.



Endorsement and Implementation of Strategy

The Child and Youth Safety Committee (through the Central Australian Safer Communities Committee) will present the draft Action Plans to the Minister for Justice who also holds the post of Minister for Central Australia. They will request that he approach the Ministerial Standing Committee on Crime Prevention and key government agencies who hold responsibility for planning services for children and youth to contribute to the review and further development of the Action Plans. Following review by these agencies the Child and Youth Safety Committee will present the finalised Action Plans to the Minister for endorsement. They will request that he present the Action Plans to those government agencies for their endorsement and implementation. The Child and Youth Safety Committee will review the implementation of the Strategy in the first year of its operation and yearly thereafter. The Child and Youth Safety Committee will be a key forum with whom government agencies

Safe Family Life

Many of the factors which correlate with the involvement of children and young people in crime and other at risk behaviours are also significant indicators for risk of abuse and neglect. In other words, children and young people who are involved in criminal activities often come from families and communities where abuse and neglect is occurring. Family risk factors include:

- Parents - young, single parents, parental depression, mental health issues, substance use, anti-social behaviour, violence, unemployment, imprisonment, trauma
- Poor parenting - poor supervision and discipline, abuse/neglect, rejecting/unaffectionate, abusive
- Family environment - large family, overcrowding, poor housing, premature death of parents/adults, poverty

There is a high prevalence of all these risk factors for families in Alice Springs. Alice Springs has a high rate of teenage pregnancy. Substance use, anti-social behaviour and violence are significant factors in the lives of many families. Data on these factors is provided in the other focus areas. The lack of supervision of children and young people was a significant factor in the development of this Strategy.

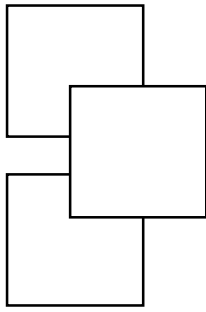
Household Income

In 2001 the median weekly household income for the NT was between \$800 to \$899. The mean household size was three. 54% of Indigenous households in the Central Region earned less than \$200 per week.

Child Protection

There has been a steadily increasing demand for Family and Children's Services in both the urban and remote areas of Central Australia. Across program areas cases have increased by 72% over a one year period. In addition to this the number of children in out of home care has also increased. In 1997 the average was between 30-40 children, in 2002 this number was between 50-60 children. At 30 June 2002 in the Northern Territory there were 226 children in the Care of the Minister, of these 59% were of Aboriginal or Torres Strait Islander descent.

Territory children are more likely to live in a rural or remote area, speak English as a second language, have high mobility both within and outside of the Territory and be a member of a blended family or a single family with no acknowledged father. Indigenous children are more likely to be growing up in larger families, with lower incomes, more crowded homes and poorer health outcomes.



Housing

In January 2003, the wait time for a 3 bedroom home was 34 months. Indigenous tenants made up 35% of public housing tenants in June 2002. In 2001 the NT home ownership was 42% compared to a National average of 66%. As at March 2003 the minimum rent for a 3 bedroom privately rented house in Alice Springs was \$260.

Approximately 1500 Indigenous people in Alice Springs live on 18 special purpose leases otherwise known as town camps. Much of the housing stock on town camps would be considered below average by most sections of the community. 13% of Indigenous households were living in improvised dwellings, such as tents compared to 5% of non-Indigenous households. For the NT Indigenous population there was 5.4 people living in a house compared to 2.7 for the NT non-Indigenous population. In 1999 30% of Indigenous housing stock needed repair or replacement; 35% of the Indigenous population live in communities affected by water restrictions and 50% of Indigenous communities were affected by sewerage overflows or leakages.

In 2001 the Northern Territory had the highest rate of youth homelessness (69 per 1,000) amongst 12 to 18 year olds as well as the highest rate nationally of youth homelessness among secondary students. Of these 49% were aged 14 years or younger, 44% were 15-16 years, 6% were 17-18 years and 1% were 19 years or older.

Key Areas for Action

Early Identification & Intervention of children and young people who are at risk

Action Plan – Children and young people on streets at night

Action Plan – Interagency case management to address the needs of children and young people at risk

Action Plan – Mechanisms which facilitate community involvement in the planning and delivery of services for children and young people at risk

Programs for Families of children and young people who are at risk

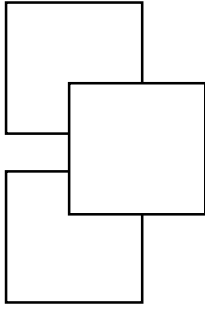
Action plan – Support for families of children and young people who are at risk

Action plan – Support for parenting

Action plan – Domestic and Family Violence

Housing

Action plan – Housing for young people



Social Connection within a Safe Community

Risk factors related to a lack of social capital, social cohesion and community capacity are prevalent in Alice Springs. These include socio-economic disadvantage, over crowded and poor housing, lack of services, discrimination, lack of community pride, social fragmentation, neighbourhood violence and crime, cultural norms accepting violence and abuse and limited recreational opportunities.

Community Safety

In 2002 there were 3765 property offences and 1043 offences against the person recorded by Police. During the last quarter of 2002 Police recorded 231 assaults, 19 sexual assaults, 61 house break-ins, 49 commercial break-ins, 73 motor vehicle theft and related offences, 317 offences of property damage.

In 2002 Alice Springs Police recorded 1532 offences committed in Alice Springs that were attributed to juvenile offenders. These offences were committed by 325 juveniles with an estimated core group of 50 responsible for the majority of these.

In comparison to the rest of Australia the Northern Territory has over twice the rate of assaults, 1.7 times the rate of sexual assaults, higher rates of unlawful entry and theft and lower rates of motor vehicle theft. In the NT Indigenous young people aged 15 –24 years are over 8 times more likely than other young Australians to die from homicide.

The Alice Springs Juvenile Holding Centre was established in 1998. If juveniles are remanded or sentenced for longer than 4 days, they are transferred to the Don Dale Juvenile Detention Centre in Darwin. Between September 2002 and December 2002 the daily average number of juveniles held in detention in the NT was 27. Indigenous juveniles represented 89% of that population. Based on a sample of the last day of each quarter, on an average day there were two to six juveniles detained in the Don Dale Juvenile Detention Centre from the Central Australian region in 2002. This represented between 12% to 24% of total juvenile detainees in the Northern Territory.

The Northern Territory has the highest rate nationally for fatalities per 100 000 population. The Indigenous road fatality rate within the NT is 5 times higher than that for non-Indigenous. Central Australia accounted for 60% of Indigenous fatalities in the NT in 2002.

Representation of Young People

How we represent young people within our community is critical to forming their social connectedness and sense of community responsibility.

Negative representations of young people in the media, and public arenas, including the political arena, can contribute to their social disconnectedness. It is important that we communicate positive images of young people in our community and encourage them to participate fully in the life of the Territory.

While it is important that we act strongly to address youth related crime, it is equally important that we do not demonise young people as a whole. The language that we use must be well considered, so that we do not contribute to their social disconnectedness, and in turn risk an increase in crime.

Celebrating Youth

Young people contribute greatly to the life and the future of the Territory. Celebration of youth culture is critical in bridging the generational differences in our community, and developing a platform of respect. By recognising the unique contribution young people make to our community, we will decrease their disengagement and in turn reduce the risk of crime

Key Areas for Action

Diversion from the Criminal Justice System

Action plan – Pre-court Diversion

Action plan – Court diversion

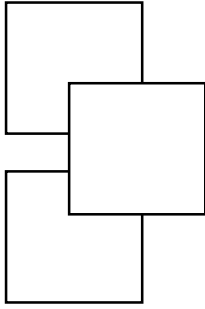
Building community cohesion

Action plan – Community Engagement through Recreational and entertainment activities

Action plan – Participation in decision making

Action plan – Participation in decision making

Action Plan – Positive representation of young people in our community



Education and Employment

Many risk factors for children and young people are associated with poor outcomes in education and employment. Educational risk factors include low parental education levels, poor preparation for school, school failure, non-attendance, poor attachment to school, bullying, peer rejection, anti-social peer group. Risk factors related to employment include poor transition to work, poor work skills, lack of opportunities for employment and unemployment (intergenerational).

Education

In 1999 the attendance rate at secondary school within the Central Region was 73.5%, lower than the NT average of 78.8%. Retention rates to Year 12 for students are the lowest nationally, 42% NT compared to 71% nationally. In 1998, 26% of the total clients in vocational education and training were from the Central Region. Across the NT in 1998 14% of Indigenous students progressed to Year 12, compared with 80% of non-Indigenous students. Eleven to sixteen-year-old students in remote Indigenous school were averaging around Year 2-3. The impact of these low levels of literacy on Indigenous people securing employment is evident. In 1996 10% of the NT Indigenous population reported they had never attended school.

Employment

In 2000 unemployment among 15-19 year olds was 19% and among 20-25 year olds was 13%. Half of Indigenous income is from welfare (non-employment) sources, this rises to 66% if CDEP income is included. The National Indigenous unemployment rate has dropped from 19% to 15%, but if CDEP is included as unemployment then this rises from 55% to 61%. Indigenous people account for 25% of all adults in the NT, but the Indigenous share of total income is only 11%. The Indigenous share of income from employment (excluding CDEP) is only 4%.

Indigenous unemployment in Alice Springs is 16.3% (compared to 2.9% in the non-Indigenous population). The labour force participation rate for Indigenous people (including CDEP as unemployed) is only 28.4% of their population, compared to 75.6% of the non-Indigenous population.

Key Areas for Action

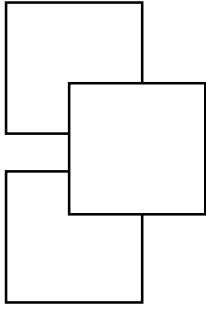
Increasing participation and success in education

Action plan - Preparation for school

Action plan - School non-attendance

Increasing access to employment

Action plan – Transition to Work



Health and well-being

The health outcomes for Indigenous children and young people in Alice Springs are recognised both nationally and internationally as deplorable. Many of the basic services and environmental requirements for good health are absent in Indigenous communities. As a result Indigenous children and young people are at greater risk than non-Indigenous children and young people by virtue of living in an Indigenous community. This Strategy cannot address the primary intervention strategies required to significantly impact on the health and well-being of Indigenous children and young people. It seeks instead to address the issues facing those most at risk. Risk factors related to physical health include low birth weight, prenatal brain damage, malnutrition, disability, chronic illness and substance misuse. Those related to mental health include poor social skills, low self-esteem, lack of empathy/poor attachment, hyperactivity/impulsivity, low intelligence and aggression/depression.

Health

Alice Springs Hospital is a 164-bed teaching hospital that services the Central Australian region. During 2001-2002 the average length of stay increased from 3.48 to 3.86 days. Indigenous patients occupied 77% of the available beds. Indigenous patients also tended to have relatively longer hospital stays than do non-Indigenous patients. The need for renal dialysis treatments continues to grow, the rate of growth for 2001/2002 was 19% with the number of Indigenous clients escalating at a disproportionate rate. The five primary reasons for non-Indigenous hospital stays were pregnancy and childbirth, musculoskeletal system, digestive system, circulatory system and respiratory system – in that order. For Indigenous patients the primary reasons were respiratory system, pregnancy and childbirth, digestive system, newborns and other neonates, musculoskeletal system – in that order.

Mortality and morbidity

The overall death rate for the Indigenous population is more than twice that for the total Australian population. At 16.9% the Indigenous infant mortality rate is still almost 4 times the non Indigenous rate. An NT Indigenous post neonate (4 weeks to 12 months) is about seven times more likely to be admitted to hospital than an NT non-Indigenous post neonate. NT Indigenous post neonates had an average of 2.7 conditions associated with each episode of hospital admission compared to 1.7 for NT non-indigenous neonates.

The death rate for NT Indigenous children aged 1 to 14 years is 5.6 times the national rate while the death rate for NT Indigenous young people aged 15 – 24 years is 2.3 times the national rate.

The rates of suicide for young people in the Northern Territory aged 15 - 24 are 45 per 1,000 compared with 29 per 1,000 for other young Australians

Sexual Health and fertility

Indigenous young people aged 15 to 24 years are 15 times more likely to have an STI compared with non-Indigenous young people. The incidence of STI's in the NT is significantly higher than in the rest of Australia. Non-Indigenous Territorians in this age range are twice as likely to have an STI and Indigenous Territorians in this age range are 33 times more likely to have an STI as other Australians in this age range.

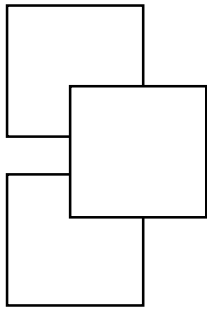
The fertility rate for NT Indigenous women is highest amongst the 15-24 year age group, compared to the 25-34 year age group for NT non-Indigenous women. NT Indigenous females aged less than 15 years were 32 times more likely to give birth than non-Indigenous females of the same age.

Alcohol

In 1998-1999 the Central Region with 19.7% of the total NT population had 24.5% of the liquor outlets in the NT. In the 5 years to 1998-99 the number of litres purchased per capita in the Central Region was 19 litres, the second highest of the regions after Katherine. Almost one-third (32) of the restricted areas in the NT are in Central region, with 17 of these in the Tanami.

Alcohol Restrictions were implemented within Alice Springs on 1st April 2002. Preliminary results from the Alcohol Restrictions Evaluation Reference Group are positive in respect to reducing harm associated with alcohol misuse. Results indicate that during this period there has been; a 10% reduction in alcohol related assaults; 28% fewer Protective Custodies; a 15% reduction in alcohol related ambulance call outs; 16% fewer alcohol related presentations to the ASH Emergency Department and 7% fewer at Congress Medical Clinic.

Whilst alcohol misuse by children and young people and their families remains one of the most significant risk factors, the misuse of other substances such as inhalants by children and young people is also a significant issue.



Disability

Disability is a key risk factor for child abuse. High morbidity rates, high levels of substance misuse and high levels of violence significantly increase the likelihood of higher rates of disability. The lack of demographic data on the incidence of disability in Central Australia is a key factor impeding the development and planning for services in this area.

Key Areas for Action

Key Area for Action - Healthy and resilient individuals

Action plan - Substance Misuse

Action plan - Sexual Health

Action plan - Mental Health

Action plan - Disability

Appendices

Appendix A – Central Australia Region Community Profile

The Central Australian Region covers an area of 546 572 square kilometres, this encompasses the regions of Petermann, Sandover – Balance and Tanami.

Population Data

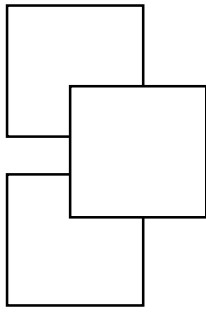
Alice Springs has a relatively young population with 8067 (29%) people aged under 19 years. These are spread roughly equally across the age range. In the Indigenous population 1766 (42%) are under the age of 19. Indigenous people make up about a 22% of the population under the age of 19 whereas they make up 15% of the total population. (ABS 2001)

As at June 2001 the Central Region had 19.7% (39 577) of the NT population. The Central Region has experienced a 1.8% growth rate between 1996 and 2001. Alice Springs is the main centre for the region and is the second largest centre in the NT. Alice Springs accommodates 66% of the Central Region's population. Across the Central Region 26% of the population were in the 0-14 age group and 4% were 65 years and over (ABS 1362.7 Regional Statistics).

In the 2001 Census there were 13 015 Indigenous people in the Central Region, a growth of 8.7% since the 1996 Census. Of these approximately 36% were aged 0-14 years, indicating a relatively young Indigenous population. The Indigenous population in the Central Region represents 25.6% of the total NT Indigenous population. Within the Central Region approximately 14 different Indigenous languages are spoken (ATSIC Alice Springs Regional Council Annual Report 2001-2002).

Household Income

In 2001 the median weekly household income for the NT was between \$800 to \$899, with a mean household size of 3. Within the Central Region these figures ranged between a median income of \$1000-1199 and a mean household size of 2.7 in Ross, to a median income of \$600-699 and a mean household size of 4.5 in Sandover-Balance (ABS 2001). At the household level 54% of Indigenous households earned less than \$200 per week (ATSIC Alice Springs Regional Council Annual Report 2001-2002).



Employment

The Alice Springs Town Council reported in 2000 that unemployment among 15-19 year olds was 19% and among 20-25 year olds was 13% (Alice Springs Town Council *The Quality of Life in Alice Springs* 2000).

At the 2003 Indigenous Economic Forum the following figures were released; half of Indigenous income is now from welfare (non-employment) sources, this rises to 66% if CDEP income is included. The National Indigenous unemployment rate has dropped from 19% to 15%, but if CDEP is included as unemployment then this rises from 55% to 61%. Indigenous people account for 25% of all adults in the NT, but the Indigenous share of total income is only 11%. The Indigenous share of income from employment (excluding CDEP) is only 4% (John Taylor ANU, *Indigenous Economic Forum* March 2003).

Indigenous unemployment in Alice Springs is 16.3% (compared to 2.9% in the non-Indigenous population). The labour force participation rate for Indigenous people (including CDEP as unemployed) is only 28.4% of their population, compared to 75.6% of the non-Indigenous population. (Indigenous Employment and Training at the Alice Springs Desert Park: G Phelps and T. Linn 2003)

Education

In 1999 the attendance rate at secondary school within the Central Region was 73.5%, lower than the NT average of 78.8% (ABS 2000). Retention rates to Year 12 for students are the lowest nationally, 42% NT compared to 71% nationally (ASTC 2000). In 1998, 26% of the total clients in vocational education and training were from the Central Region (ABS 2000). Across the NT in 1998 14% of Indigenous students had progressed from Year 8 to Year 12, compared with 80% of non-indigenous students (Learning Lessons 1999). The Learning Lessons (1999) review states that Year 7 level English literacy and numeracy are a necessary minimum for effective functioning in the wider Australian society, however they found that eleven – sixteen-year-old students in remote Indigenous school were averaging around Year 2-3. The impact of these low levels of literacy on Indigenous people securing employment are evident.

In the 1996 Census 10% of the NT Indigenous population reported they had never attended school (d'Espaignet et al 1998).

Health

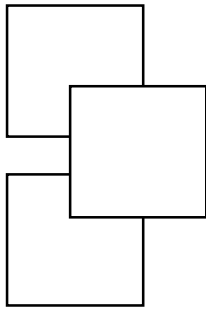
Alice Springs Hospital is a 164 bed teaching hospital that services the Central Australian region. During 2001-2002 the average length of stay increased from 3.48 to 3.86 days. Indigenous patients occupied 77% of the available beds. Indigenous patients also tended to have relatively longer hospital stays than do non-Indigenous patients. The need for renal dialysis treatments continues to grow, the rate of growth for 2001/2002 was 19% with the number of Indigenous clients escalating at a disproportionate rate. The five primary reasons for non-Indigenous hospital stays were pregnancy and childbirth, musculoskeletal system, digestive system, circulatory system and respiratory system – in that order. For Indigenous patients the primary reasons were respiratory system, pregnancy and childbirth, digestive system, newborns and other neonates, musculoskeletal system – in that order (Territory Health Services Annual Report 2001/2002).

The overall death rate for the Indigenous population is more than twice that for the total Australian population. There has been an improvement in life expectancy of both Indigenous and non-Indigenous Territorians over the last 15 years. The difference between the two groups reduced from 19.1 to 16.3 years for males and from 26.1 to 16.7 years for females. In the NT, Indigenous infant mortality has declined, in 1981 to 1983 there were 31.3 infant deaths per 1000 live births and in 1997 to 2000 the rate reduced to 16.9. However the Indigenous infant mortality rate is still almost 4 times the non Indigenous rate (THS Annual Report 2001/2002).

The death rate for NT Indigenous children aged 1 to 14 years is 5.6 times the national rate while the death rate for NT Indigenous young people aged 15 – 24 years is 2.3 times the national rate. (d'Espaignet, et al. 1998).

An NT Indigenous postneonate (4 weeks to 12 months) is about seven times more likely to be admitted to hospital than an NT non-Indigenous postneonate. NT Indigenous postneonates had an average of 2.7 conditions associated with each episode of hospital admission compared to 1.7 for NT non-indigenous neonates (d'Espaignet, et al. 1998).

The fertility rate for NT Indigenous women is highest amongst the 15-24 year age group, compared to the 25-34 year age group for NT non-Indigenous women. NT Indigenous females aged less than 15 years were 32 times more likely to give birth than non-Indigenous females of the same age (d'Espaignet, et al. 1998).



Indigenous young people aged 15 to 24 years are 15 times more likely to have an STI compared with non-Indigenous young people. The incidence of STI's in the NT is significantly higher than in the rest of Australia. Non-Indigenous Territorians in this age range are twice as likely to have an STI and Indigenous Territorians in this age range are 33 times more likely to have an STI as other Australians in this age range (d'Espaignet, et al. 1998).

Remote areas are serviced by 31 health clinics, with funding coming from a variety of sources. Not all of these clinics are permanently staffed, with DHCS providing a mobile service to some. Approximately five of these clinics have a resident General Practitioner (THS Annual report 2001/2002).

Child Protection

There has been a steadily increasing demand for Family and Children's Services in both the urban and remote areas of Central Australia. Across program areas cases have increased by 72% over a one year period. In addition to this the number of children in out of home care has also increased, in 1997 the average was between 30-40 children, in 2002 this number was between 50-60 children (FACS Annual Report June 2002). At 30 June 2002 there were 226 children in the Care of the Minister, of these 59% were of Aboriginal or Torres Strait Islander descent (THS Annual Report 2001-2002).

Territory children in general are more likely to live in a rural or remote area, speak English as a second language, have high mobility both within and outside of the Territory and be a member of a blended family or a single family with no acknowledged father. Indigenous children are more likely to be growing up in larger families, with lower incomes, more crowded homes and poorer health outcomes. (DHCS Caring for Territory Children 2002).

Housing

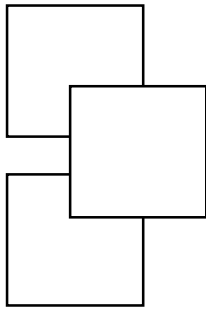
The wait times for all public housing have steadily increased over the past two years while at the same time the number of dwellings being vacated has reduced significantly. In January 2003, the wait time for a 3 bedroom home was 34 months, for a 2 bedroom was 19 months and for a 1 bedroom (pensioner) 20 months. Indigenous tenants made up 35% of public housing tenants in June 2002. At the same time Seniors made up 38.74%. (Information supplied by Territory Housing April 2003).

In 2001 the NT home ownership was 42% compared to a National average of 66%. As at January 2003 the average sale price of a single detached dwelling in Alice Springs was \$205 359 (increase of 21% over 2.5 years) for the same period a home unit's average sale price was \$118 937 (decrease of 8% over 2.5 years). (Information supplied by Territory Housing April 2003). As at March 2003 the minimum rent for a 3 bedroom privately rented house in Alice Springs was \$260.00 (Real Estate Agent Alice Springs).

A large proportion of Indigenous people living in Alice Springs, approximately 1500, live on 18 special purpose leases otherwise known as town camps. These leases are serviced by Tangentyere Council. Much of the housing stock on town camps would be considered below average by most sections of the community (ATSIC Alice Springs Regional Council Annual Report 2001-2002 and Tangentyere Council Annual Report 2001-2002).

According to the Indigenous Housing Association Northern Territory (IHANT) 13% of Indigenous households were living in improvised dwellings, such as tents compared to 5% of non-Indigenous households. For the NT Indigenous population there was 5.4 people living in a house compared to 2.7 for the NT non-Indigenous population. The Community Housing and Infrastructure Needs Survey conducted in 1999 determined that; 30% of Indigenous housing stock needed repair or replacement; 35% of the Indigenous population live in communities affected by water restrictions and 50% of Indigenous communities were affected by sewerage overflows or leakages.

According to a national Youth Homelessness study conducted in 2001 the Northern Territory has the highest rate of youth homelessness (69 per 1,000) amongst 12 to 18 year olds as well as the highest rate nationally of youth homelessness among secondary students. The NT had a rate of 37 per 1000 secondary students, compared to 15 for QLD and 14 for Tasmania and ACT. Of these 49% were aged 14 years or younger, 44% were 15-16 years, 6% were 17-18 years and 1% were 19 years or older. If those not attending secondary school are included then the rate of youth homelessness can be expected to rise. (Youth Homelessness 2001 RMIT University)



Community Safety

In 1999 there were 39 police officers for every 10 000 people in the Central Region (ABS 2000). Alice Springs houses the main Southern Region Police Station. Remote areas are serviced by 8 police stations located in the following strategic areas, Harts Range, Hermannsburg, Kulgera, Papunya, Santa Teresa, Ti Tree, Yuendumu, Yulara.

During 2002 there were 3765 property offences and 1043 offences against the person recorded by Police. During the quarter September 2002 to end of December 2002 the following crimes were recorded:

- 231 recorded assault offences, up 15% on the previous quarter (201), down year to date on previous year by 21% (544 compared to 432)
- 19 recorded sexual assaults, (this number included multiple offences against the same victim and involving the same perpetrator), up 375% on the previous quarter (14), down year to date on previous year by 18% (28 compared to 23)
- 61 recorded house break-ins, up 61% on previous quarter, down year to date on previous year by 42% (171 compared to 99)
- 49 recorded commercial break ins, up 40% on previous quarter, down year to date on previous year (115 compared to 84)
- 73 recorded motor vehicle theft and related offences, no change on the previous quarter, down year to date on previous year by 9% (160 compared to 146)
- 317 recorded offences of property damage, down 6% on previous quarter, down year to date on previous year by 25% (872 compared to 653)

(Office of Crime Prevention NT Quarterly Crime and Justice Statistics Issue 2: December Quarter 2002)

In comparison to the rest of Australia the Northern Territory has over twice the rate of assaults, 1.7 times the rate of sexual assaults, higher rates of unlawful entry and theft and lower rates of motor vehicle theft (ABS Catalogue 4510). In the NT Indigenous young people aged 15 –24 years are over 8 times more likely than other young Australians to die from homicide. The rates of suicide for young people in the Northern Territory aged 15 – 24 are 45 per 1,000 compared with 29 per 1,000 for other young Australians (Shifting the Balance - Services for People with Mental Illness in Central Australia, 1999).

During 2002 Alice Springs Police recorded 1532 offences committed in Alice Springs that were attributed to juvenile offenders. These offences were committed by 325 juveniles with an estimated core group of 50 responsible for the majority of these (Alice Springs Police).

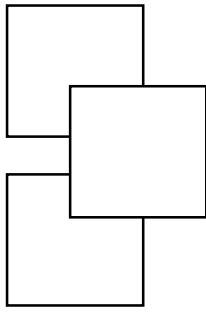
Alice Springs has the principal maximum security facility for the NT. The Alice Springs Correctional Centre (ASCC) houses a maximum of 400 prisoners, 316 in the main facility and 84 in the low/open security cottage facility. The ASCC is able to house both male and female prisoners, remand and sentenced (NTCS Annual report 2000/2001). From September 2002 to December 2002 the daily average of prisoners in the NT was 715, Indigenous prisoners represented 73% of that population. The daily average number of female prisoners is 3% of the total population (Office of Crime Prevention NT Quarterly Crime and Justice Statistics Issue 2: December Quarter 2002).

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Alice Springs also has a short term Juvenile Holding Centre. The capacity of this centre is 10 detainees of both sexes, with a maximum 4 days holding. The Alice Springs Juvenile Holding Centre was established in 1998 as an alternate juvenile detention centre to the Police cells or ASCC. If juveniles are remanded or sentenced for longer than 4 days, they are transferred to the Don Dale Juvenile Detention Centre in Darwin (Northern Territory Correctional Services Annual Report 2000/2001). Between September 2002 and December 2002 the daily average number



Alcohol

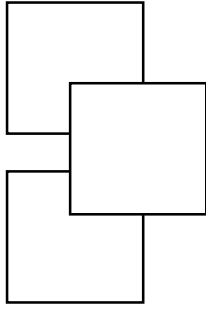
In 1998-1999 the Central Region had 105 (24.5%) of the 429 liquor outlets in the NT (ABS 2000) compared to approx 19.7% of the total NT population. In the 5 years to 1998-99 the number of litres purchased per capita in the Central Region was 19 litres, the second highest of the regions after Katherine. Almost one-third (32) of the restricted areas in the NT are in Central region, with 17 of these in the Tanami (ABS 2000).

Alcohol Restrictions were implemented within Alice Springs on 1st April 2002. Preliminary results from the Alcohol Restrictions Evaluation Reference Group are positive in respect to reducing harm associated with alcohol misuse. Results indicate that during this period there has been; a 10% reduction in alcohol related assaults; 28% fewer Protective Custodies; a 15% reduction in alcohol related ambulance call outs; 16% fewer alcohol related presentations to the ASH Emergency Department and 7% fewer at Congress Medical Clinic.

Appendix B

RISK FACTORS

Child Factors	Family Factors	School Context	Life Events	Community and Cultural Factors
<ul style="list-style-type: none"> -prematurity -low birth weight -disability -prenatal brain damage -low intelligence -difficult temperament -chronic illness -insecure attachment -poor problem solving -beliefs about aggression attributions -poor social skills -low self esteem -lack of empathy -alienation -hyperactivity / disruptive behaviour -impulsivity 	<p>Parental Characteristics:</p> <ul style="list-style-type: none"> -teenage mothers -single parents -psychiatric disorder, especially depression -substance abuse -criminality -antisocial models <p>Family Environment:</p> <ul style="list-style-type: none"> -family violence -marital discord -disorganised -negative interaction / social isolation -large family size -family disharmony -father absence -long term parental unemployment <p>Parenting Style</p> <ul style="list-style-type: none"> -poor supervision and monitoring of child -discipline style (harsh or inconsistent) -rejection of child -abuse -lack of warmth and affection -low involvement in child's activities -neglect 	<ul style="list-style-type: none"> -school failure -normative beliefs about aggression -deviant peer group -bullying -peer rejection -poor attachment to school -inadequate behaviour management 	<ul style="list-style-type: none"> -divorce and family break up -war or natural disasters -death of a family member 	<ul style="list-style-type: none"> -socioeconomic disadvantage -population density and housing conditions -urban area -neighbourhood violence and crime -cultural norms concerning violence as acceptable -media portrayal of violence -lack of support services -social or cultural discrimination



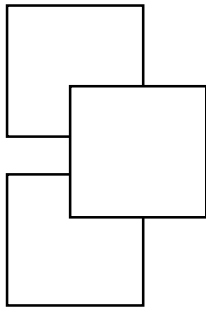
PROTECTIVE FACTORS

Child Factors	Family Factors	School Context	Life Events	Community and Cultural Factors
<ul style="list-style-type: none"> -social competence -social skills -above average intelligence -attachment to family -empathy -problem solving -optimism -school achievement -easy temperament -internal locus of control -moral beliefs -values -self related cognition -good coping style 	<ul style="list-style-type: none"> -supportive caring parents -family harmony -more than two years between siblings -responsibility for chores or required helpfulness -secure and stable family -supportive relationship with other adult -small family size -strong family norms and morality 	<ul style="list-style-type: none"> -positive school climate -prosocial peer group -responsibility and required helpfulness -sense of belonging/ bonding -opportunities for some success at school and recognition of achievement -school norms concerning violence 	<ul style="list-style-type: none"> -meeting significant person -moving to new area -opportunities at critical turning points or major life transitions 	<ul style="list-style-type: none"> -access to support services -community networking -attachment to the community -participation in a church or other community group -community / cultural norms against violence -a strong cultural identity and ethnic pride



Appendix C

	Identified Risks	Related Strategies	Areas for Action
Education and Employment	<p>Pre-school: low parental education levels, poor preparation for school</p> <p>School: failure, non-attendance, poor attachment, bullying, peer rejection, anti-social per group</p> <p>Employment: poor transition to work, poor work skills, lack of opportunities for employment, unemployment</p>	<p>Secondary Education Review (DEET) Employment and Training Strategy (DEET)</p> <p>NT Indigenous Education Strategic Plan (DEET)</p> <p>Student Enrolment, Attendance and Retention Strategy (DEET)</p>	<p>Increasing participation and success in education</p> <p>Increasing access to employment</p>
Family Life	<p>Parents: young, single parents, parental depression, substance use, anti-social behaviour, violence, unemployment</p> <p>Poor parenting: poor supervision and discipline, abuse/neglect, rejecting/unaffectionate</p> <p>Family environment: large family, overcrowding, poor housing, premature death of parents/adults</p>	<p>Domestic and Aboriginal Family Violence Strategies (DCM)</p> <p>Review of the Housing Act and housing policies (DCDSCA)</p>	<p>Early Identification & Intervention of children and young people who are at risk</p> <p>Programs for Families of children and young people who are at risk</p> <p>Housing</p>



<p>Health and Well Being</p>	<p>Physical health: low birth weight, prenatal brain damage, malnutrition, disability, chronic illness, substance misuse</p> <p>Psychological functioning: poor social skills, low self-esteem, lack of empathy/poor attachment, hyperactivity/impulsivity, low intelligence, aggression/depression</p>	<p>NT Children and Young People’s Health Policy (DHCS)</p> <p>The Illicit Drugs Taskforce Report (DHCS)</p> <p>Mental Health Services System Development Strategy (DHCS)</p>	<p>Functioning and resilient individuals</p>
<p>Social Connection within a Safe Community</p>	<p>Socio-economic disadvantage: over crowded & poor housing, lack of services, discrimination, lack of community pride</p> <p>Social fragmentation: neighbourhood violence and crime, cultural norms accepting violence and abuse, limited recreational opportunities</p>	<p>NT Junior Sports Plan (DCDSCA)</p> <p>Whole of Government Crime Prevention Strategy (DoJ)</p> <p>Youth at Risk Strategy (DoJ, DHCS, DEET)</p>	<p>Diversion from the Criminal Justice System</p> <p>Building community cohesion</p>

Appendix D

Consultations undertaken and related strategies and reports

Some of the major consultations undertaken:

NT Police Youth at Risk Workshop, Alice Springs, June 2003
Youth At Risk Task Force, Alice Springs, 2003
Australian Institute of Criminology, Crime Prevention Forum, Alice Springs, July 2003
Central Australian Young People's Information Network, ongoing
AICCA Funding Workshop, Alice Springs, November 2003

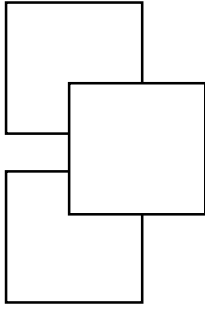
Related Northern Territory Government Strategies

The existing strategies/reports include:

Building a Better Future for Young Territorians (DCM)
The Illicit Drugs Taskforce Report (DHCS)
Domestic and Aboriginal Family Violence Strategies (DCM)
NT Indigenous Education Strategic Plan (DEET)
Student Enrolment, Attendance and Retention Strategy (DEET)

Strategies currently being developed:

NT Children and Young People's Health Policy (DHCS)
Secondary Education Review (DEET)
Employment and Training Strategy (DEET)
NT Junior Sports Plan (DCDSCA)
Major review of Public Transport (DIPE)
Whole of Government Crime Prevention Strategy (DoJ)
Review of the Housing Act and housing policies (DCDSCA)
Youth at Risk Strategy (DoJ, DHCS, DEET)
Children's and Young People's Health Policy (DHCS)
Mental Health Services System Development Strategy (DHCS)
Caring for Our Children – reform of the Child Protection system and review of the Community Welfare Act (DHCS)
Review of the Juvenile Justice Act (DoJ)



Acknowledgments

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The Central Australian Safer Communities Committee would like to thank all those who participated in the Child and Youth Safety Strategy consultation.

The Central Australian Safer Communities Committee would like to acknowledge the contribution of the following individuals and agencies:

Alice Outcomes

Alice Springs Correctional Centre

Alice Springs Town Council

Alice Springs Youth Accommodation and Support Service Inc

Central Australian Aboriginal Child Care Agency Inc

Central Australian Aboriginal Congress Youth Services Team

Family and Children's Services

Department of Health and Community Services

Northern Territory Police

Office of Crime Prevention, Department of Justice

Reconnect Gap Youth Centre

Tangentyere Council Youth Services Team

Annie Zon, Department of Health and Community Services

Erin Murrell

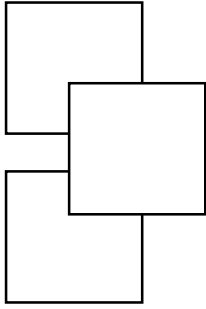
Marcia Russell, Project Officer, Office of Crime Prevention, Department of Justice
and Larissa Ellis for her contribution in the role of Project Officer

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Mayor Fran Kilgariff
David Ross
Karen Walshaw
Colleen Devlin
Tim Hampton
Pastor Colin Griffiths
Peter Hanson
Amanda Bowen
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John Gaynor
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Membership of the Child and Youth Safety Subcommittee

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Supt Colleen Gwynne
Susan O’Leary
John Gaynor
Charlie Larkins
Tim Hampton
Lyn Buckley
Cynthia Lang
Ronald Satour



References

Australian Bureau of Statistics (2001) *Census of Population and Housing*

Alice Springs Town Council (2000), *The Quality of Life in Alice Springs*

ATSIC Alice Springs Regional Council Annual Report 2001-2002

Central Australian Aboriginal Congress Inc (2001), *Central Australian Indigenous Youth Summit 2001 Ross River: Today's Youth Tomorrow's Leaders (Alice Springs)*

Commonwealth Attorney-General's Department (1999), *National Crime Prevention, Pathways to prevention: developmental and early intervention approaches to crime in Australia*

Department of the Chief Minister (2002), *Building a Better Future for Young Territorians*

Department of Health and Community Services (unpublished), *Aboriginal – Young, Strong and Proud*

Department of Health and Community Services (2002), *Caring for Territory Children: from the 70s to the new millennium*

d'Espaignet, Kennedy, Paterson & Measey (1998) *From Infancy to Young Adulthood: Health Status in the Northern Territory*, Territory Health Services

Ministry of Social Development NZ (2002), *New Zealand's Agenda for Children: Making life better for children*

Northern Territory Department of Education (2000), *Indigenous Education Strategic Plan 2000-2004*

Northern Territory Department of Education (1999), *Learning Lessons: An independent review of Indigenous Education in the Northern Territory*

Northern Territory Police Youth at Risk Workshop (2003), Action Plans

Shifting the Balance - Services for People with Mental Illness in Central Australia, 1999

Tangentyere Council *Annual Report 2001-2002*

Territory Health Services (2002), *Annual Report 2001/2002*

RMIT University (2002), *Youth Homelessness 2001*