

# **TRANSCRIPT OF PROCEEDINGS**

**REPORT OF PROCEEDINGS BEFORE**

## **COMMITTEE ON CHILDREN AND YOUNG PEOPLE**

**REVIEW OF THE 2005-2006 ANNUAL REPORT OF THE  
COMMISSION FOR CHILDREN AND YOUNG PEOPLE**

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**At Sydney on Wednesday 10 October 2007**

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**The Committee met at 2.00 p.m.**

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### **PRESENT**

Ms C. M. Tebbutt (Chair)

#### **Legislative Council**

The Hon. C. E. Cusack  
The Hon. K. F. Griffin  
Reverend the Hon. F. J. Nile

#### **Legislative Assembly**

Ms M. T. Andrews  
Mr S. R. Cansdell  
Dr A. D. McDonald

**CHAIR:** I declare the meeting open. I thank Commissioner Calvert for attending the hearing today. I also thank all the committee members who are here. I note there are no apologies. I acknowledge that we have two young people in the audience, Emma Kenworthy and Brent Leary. They are members of the Young People's Reference Group. Thank you for coming along and seeing the parliamentary process in action. I understand that Felicity Mailins will also be joining us. Felicity is the daughter of a member who works at the Commission.

**GILLIAN ELIZABETH CALVERT**, Commissioner, Commission for Children and Young People, Level 2, 407 Elizabeth Street, Surry Hills, New South Wales, affirmed and examined:

**CHAIR:** In what capacity are you appearing before the Committee today?

**Ms CALVERT:** I am appearing in the capacity as Commissioner for Children and Young People.

**CHAIR:** Commissioner Calvert, I understand that you have been issued with a copy of the committee's terms of reference and also a copy of the Legislative Assembly Standing orders 332, 333 and 334 that relate to the examination of witnesses, is that the case?

**Ms CALVERT:** Yes.

**CHAIR:** Committee members have received the commissioner's response to our written questions on notice. I thank you, commissioner, for your comprehensive response, which means we will be able to get into some of the issues in more detail today at the hearing. Do you want to table the responses to the questions we have asked?

**Ms CALVERT:** I am more than happy to table the responses.

**CHAIR:** We will take the responses as tabled. There has already been a comprehensive response provided by the commissioner to our written questions. Commissioner, do you want to make an opening statement to the annual report of the Office for Children?

**Ms CALVERT:** I thought it might be helpful to recap some of the highlights of the year. In 2005-06 we consolidated our role as the peak advocate for children and young people in New South Wales. We also began the task of implementing the amendments arising from our five-year legislative review, which Parliament passed in November 2005. I would like to highlight some of the ways in which we have been working to make New South Wales a better place for children and young people. By researching and educating on children's issues, the commission helps opinion leaders, organisations and the wider community to support children and young people's wellbeing and development. One of the major things we did was around children in the built environment. We made a submission to your Committee's inquiry and as part of that we spoke with more than 125 children and young people. Three

themes emerged from those conversations with the children. One was the importance to children of an inclusive and safe environment and a strong sense of community. That was one of the things that came through really clearly. Another thing which came through from our conversations with the children was the importance of having easily accessible and affordable facilities, including reliable public transport. The final thing that most children valued was the opportunity to contribute to planning decisions. That helped us form our advice and our submission to this Committee.

The report was tabled in 2006 and contained a number of recommendations, which we have already started to implement. We are developing indicators for child-friendly communities so local councils can use that to help them assess their community's friendliness to children. We are finalising a partnership arrangement with a local council to come up with some practical examples of how children can be included in planning and we also have returned to some of the other agencies mentioned in the report to begin discussions with them about their response. We also built on our knowledge from our groundbreaking 2005 Children at Work report. That report really just analysed the results of the survey of 11,000 children. Once that was published in the public domain, we then established a task force, which met throughout the year, to provide advice on how to make work more satisfying and safer for children and also how to improve children's access to employment opportunities. I tabled a report based on the advice from the task force in December 2006, which again outlined a number of recommendations.

Another important thing we did in 2005-2006 was to publish a document called *What About the Kids? Improving the Experiences of Infants and Children in a Changing World*. We did that with the Queensland Commission for Children and Young People and the National Investment for the Early Years [NIFTY]. That was important for two reasons. One, it reflected our objective of working together to promote children's wellbeing. Secondly, it really argued that we as a country needed to look at the way in which we support parents, and through them children, in the early years.

When we have debates about child care and parental leave and family work arrangements we need to place children's development at the centre of that debate. Paid maternity leave, parental leave, child care, while they may facilitate parent's ability to balance their work-family relationships, they absolutely impact on a critical part of children's development, which is the early years. In talking about child care and parental leave we need to be looking at the impact and needs of children first. Publishing *What About the Kids* in a sense enables us to try to put that issue on public debate a little bit more than it had been.

As part of our commitment to focusing on the early years we also sponsored our Nobel laureate, Professor James Heckman's, participation in the NIFTY 2006 conference. That was when we met with over 200 children and young people. We also negotiated a meeting between Treasury officials and Professor Heckman, both at a State and Commonwealth level.

Another important project that we undertook was our involvement in the health futures project. The Department of Health wanted to develop a strategy for health in

New South Wales for the next 20 years. Our contribution to that was to facilitate children's voices being heard in the discussion. We met with over 200 children and young people and based on their views we made a submission to New South Wales Health.

What we found was at times in some fairly important ways children's ideas of health were different to adults ideas of health. Children tended to think about health, whereas adults tended to talk about illness and sickness. So we described children's view of health as being about feeling good, which is how the kids themselves described it. If they felt good then they were healthy. They also saw that the main providers of health care were in fact the parents. Whereas adults tended to see the health services system as the main provider of health care; children saw their parents as being providers of health care. They also recognised the wide range of institutions and people who contributed to their health. They would talk about the media or they would talk about the community. They have a broader view, if you like, than adults did.

Finally they spoke about the importance of health services, when they did come in contact with them, as being kid friendly. They would talk about how the health professional might talk to their parent but not to them, even though they were in the room. At times they did not like that. They also talked a lot about the need to respect their privacy. Even younger kids talked about privacy as an issue. They also wanted health care to reflect kids culture in the way they operated in the world, which meant Internet and SMS and those sorts of things. What was good about that consultation and our submission was that some of those views have now been reflected in the health futures plan for the Department of Health, which I think is a win-win for everybody.

We also did some other interesting things with kids. We did our first videoconference for Youth Week called *You Tell It Like It Is*. We contacted 80 young people from smaller towns in regional New South Wales and we held the videoconference for a half-day. I certainly enjoyed using the technology and reaching kids that I might not otherwise have been able to reach as easily. The kids themselves talked about how they enjoyed being able to swap stories with kids from other towns and that for them it was an opportunity to meet kids in similar situations who they might not otherwise have had the opportunity to meet. Following that we wrote to the relevant local councils to pass on the sorts of things that kids had raised in the conversation.

We also encouraged other organisations to be more participatory, focusing on the Department of Community Services, the Department of Juvenile Justice and the Department of Ageing, Disability and Home Care, using our module from "TAKING PART seriously-Meeting Together, Deciding Together", and we have had some good outcomes with that. The Department of Ageing, Disability and Home Care service standards now include standards about participation for children and young people. The Interagency Guidelines on Child Protection, for the first time, refer practitioners to "TAKING PART seriously" and the importance of involving children in case planning and the decisions around their care, and the participation principles have been included in Juvenile Justice's philosophy of intervention with young people, and also the revised youth justice conferencing system guidelines.

We finished our "TAKING PART seriously" package in 2005-06, a new resource called "Sharing the Journey" which covers our experience with participation and the experiences of 50 children and young people who worked with us over that time. I recently returned from a working trip to Europe, and I spent the day with the English Children's Commissioner, Sir Al Aynsley-Green, and his staff and Al himself spoke glowingly about our "TAKING Part seriously". They had purchased bulk copies; they made reference to it the number of times in our conversations. So it was gratifying to see that it is being used in other places. Of course, our Young People's Reference Group provided advice on 34 of our projects.

Turning to safety, the other part of the work that we do, we continue to promote our three-pronged approach to child protection, which is excluding inappropriate people, the people that Parliament has determined inappropriate, background checking and encouraging child-related organisations to be child-safe and child-friendly. In relation to excluding inappropriate people, there were 59 applications to the Commission out of a total of 91; the others were to the Administrative Decisions Tribunal or the Industrial Relations Commission. Of the 59 that we received, 29 were granted because they had shown they were no longer a risk to children and 16 were refused because they were unable to show that they were no longer a risk to children. Changes in our legislation that commenced in January 2007 mean that some people with more serious convictions are now no longer able to apply for a review of their prohibited status.

In relation to background checking, there were 238,400 checks statewide, and the commission conducted 82,043 of those background checks. There were 608 risk assessments conducted, and 211 of those were done by the Commission, and the annual report details outcomes of those risk assessments. We continue to provide our child-safe, child-friendly resources on line. We conducted eight workshops, including workshops in Wollongong, Forster and Griffith, to help organisations manage risk. That meant we trained 147 people, and we also had over 5,000 visits to our Getting Started resource on the web, which is the starting place for becoming a child-safe, child-friendly organisation, so again showing strong interest in that area.

The Child Death Review Team continued its important task of researching and analysing data about deaths of children and young people, and I understand we will deal with that later. I would just mention here that importantly we held the inaugural meeting, at our instigation, of the Australia and New Zealand Child Death Review Teams, taking the lead on information exchange, cross-border issues and how we might get agreement on what is reported to enable better comparisons between States and also between Australian States and New Zealand. In conclusion, I acknowledge the important role of children and young people themselves in the work of the Commission for Children and Young People by giving us their time, energy, insights and guidance in helping make New South Wales a better place for children and young people. I thank the Committee for its interest in our work because it gives us an opportunity to explore ways that we can do this work even more effectively.

**CHAIR:** I am interested in your response to question 2, which is about the strategic plan. You talk about the wellbeing research that the commission is

undertaking. Can you tell us a little more about what this research involves and what you hope to gain from this research?

**Ms CALVERT:** We did ask children about their understanding of wellbeing, and from that we identified that there were three main themes or lenses through which children see the world and then six other themes that are important to them. If I could perhaps take a step back and ask why we did the wellbeing research. Most of the work on wellbeing or that monitors children's wellbeing is from an adult's perspective. There is very little information about how children understand their wellbeing, so it is adults' views about what is important to children. Understandably, a lot of that is about what we do not want for our children, rather than what we do want for our children. So it is about the problems. We measured the problems that children are experiencing, which is important.

We wanted to try to bring children's perspective into that debate and discussion and the development of those indicators, so we undertook quite an extensive research project where we worked with children, the same group of children, over a period of time, going back to them up to three times and working with them on projects that they identified they wanted to undertake to try to understand and form a view about what they identified as important for wellbeing. It is quite groundbreaking in terms of its approach, but it is also groundbreaking in that we went to children and asked them. We have released "Ask the Children" which sets out our analysis of what those children told us. We are now looking at how we monitor children's wellbeing, which we are required to do under the Act, and which we do through our Kids Stats section of the web site, and we are looking at what we originally thought against what the kids told us we learnt from this wellbeing research.

We will refine and reshape our Kids Stats area based on what children told us. We are now in the process of looking at that indicators framework, looking at our own, looking at others, trying to work out what we might change, then also looking at whether we have access to data that would help us to understand and report on those aspects of wellbeing that are important to children.

**Mr STEVE CANSDELL:** The response to question 2 states that the commission's strategic plan is due to finish in 2007. What process is the commission undertaking to develop a new strategic plan? Is there a timeline for that development? To what extent are the views of children and young people, as well as other stakeholders, included in the development of the strategic plan? Does the commission have any proposals or any new strategic developments? On top of that, when we are talking about children here, is the input of youth in detention centres and State wards included in this strategic plan? I ask that because I think they are more vulnerable and the ones we need to look at helping, probably more so than the mainstream.

**Ms CALVERT:** We are in the process of setting our strategic directions document, and between now and I guess March or April of next year I will go and talk with kids about what we are proposing. When we talk with kids we try to get the full range of kids' views so we will think about juvenile detention centres or kids in hospitals or kids who are in out-of-home care, kids who are poor, kids who are in inaccessible areas. We will look at all ways in which we can try to reach them. We

have not yet decided how we will consult with kids about our strategic directions. We just know that we will be doing that, so we are thinking through how we might do that now.

**Mr STEVE CANSDELL:** It would be good if they could be included.

**Ms CALVERT:** Yes, and certainly in all our other work, when we consult with kids we do not announce that we are consulting with kids who are in detention centres or vulnerable kids because they feel labelled and stigmatised. As far as they are concerned they are kids that we are consulting but we always make sure that we reach out to kids who are vulnerable and seek their views. Certainly, when we conduct research we are looking at it from a vulnerable point of view so we will look at socioeconomic status. We will analyse socioeconomic status. We will analyse whether they are rural, regional or metropolitan. We will analyse Aboriginality and so on. The reason we do not promote it like that is because kids find it stigmatising.

**Ms MARIE ANDREWS:** At question 2 when you are talking about children's views and voices in the wellbeing research, can you give the Committee some indication of what age group we are talking about?

**Ms CALVERT:** The age group we are talking about with the wellbeing research was eight to 15. So it was primary school and secondary school. We have been thinking about what that tells us about little kids. If the research was done using the voices of eight to 15-year-olds, what does it tell us about little kids? We have been thinking about that.

**Reverend the Hon. FRED NILE:** Commissioner, you mentioned in your answer to question two that you have an expert advisory group made up of eight stakeholders. What do those eight stakeholders represent—which organisations?

**Ms CALVERT:** Under the legislation, they come from certain areas that are listed in the legislation. They are there for themselves, for their own individual expertise. It might be that they are expert in child development or experts in employment. I have to say that I have found that people who are retired or people who are academics, or people who are not members of an organisation, really offer great value to me because they do not have to have a conflict of interest between their own organisation and looking after the interests of the Commission. They are there to give advice and to look after the interests of the Commission. I have tended to pick people or recommend to the Minister people who are either retired or are academics. That is not always the case, but overall they tend to be from that grouping. They are there because of their expertise or their experience over a number of years. They are a very useful group for me.

**CHAIR:** Are there further questions on the first section, questions one to six? If not, we will move on. The year in review covers a broad range of issues, basically responses to questions seven to 20. People should not feel limited by this. Obviously you can ask about anything that is in the annual report, but I just thought that, for ease of the meeting flowing in a more coherent way, it would be better to try to stick to the groupings. Are there any questions of the year in review?

**Dr ANDREW McDONALD:** I have a question on the e-check. Can you tell us more about the e-check and how it will work?

**Ms CALVERT:** Yes, I can. Essentially it transfers our paper-based processes to the computer, to the website. Rather than faxing a paper through and saying, "I want to register as an employer", you will be able to go to a special place on a website and enter the data electronically. It will then be assessed and you will get a reply. If you want to get checks done on some of your staff, at the moment you have to fax or email your request. Now what you will do is go onto the website and enter the data. It will be electronically processed and you will then get a reply electronically as well. You will also be able to go in and check where your request is up to, whether it is completed or whether it is pending.

Really what we are doing is transferring our paper-based processes or phone-based processes at the moment over to the website. We think that will have a number of advantages. I think it will certainly be much easier for employers because they will not have to fit into our timetable; they can fit into their own timetable. They also will be able to check where their requests for a background check are up to. We also will be able to send them off to places or electronically refer them, if you like, if they need more information on something. We also will probably reduce human error because there will be fewer people handling that information and that data. We are quite excited about the project. We think it will be of benefit to employers.

**Mr STEVE CANSDELL:** In response to question nine, you refer to self-employed people in a child-related industry. That would probably include family day care at home, more than likely?

**Ms CALVERT:** No, they are considered to be employees, generally, because they are employed by a family day care scheme. An example of a self-employed person might be a piano teacher.

**Mr STEVE CANSDELL:** Getting back to this in some way anyway, when you have a family day care centre at home, are the partners and family of principals of that business at home checked?

**Ms CALVERT:** No, they are not. It is in fact the person who is the employee who is checked. If the partner is also an employee and it is being offered jointly, then, yes, both of them would be checked. But it is the employee of the family day care centre who is checked.

**Mr STEVE CANSDELL:** I have some concerns, if a partner is running a centre from home and her partner comes home and is in contact with the children, whether there should be any checks on that person's partner.

**Ms CALVERT:** What this highlights from my point of view is the importance of understanding the limits of checking in relation to child-safe, child-friendly. Checking is only as good as the records that we hold and most people do not have records. Most harm to children comes from people who we would not necessarily pick up, which is why, based on research and experience, in a sense, and our own thinking, we are saying we need to very much focus now on how we help to create a safe



environment for children. People already have the skills, or not the skills, but they have the ability to create a safe environment.

If I was a family day care, one of the things I could do is say that, if my partner worked at home, they did not interact with the children. That might be one of the ways in which I could create a safe environment for the children and in which I, as a family day care provider, could manage any possible risks I might have. You might want to say that that is a bit artificial, that there are certain times when my partner will come and join us for lunch, little lunch, afternoon tea, or whatever it is that the kids are involved in. People already have the capacity to do that.

**Mr STEVE CANSDELL:** Those guidelines really need to be transferred to the family day care, do they not?

**Ms CALVERT:** Yes. In fact, family day care is one of the child-safe, child-friendly sectors that we are focusing on and targeting this year. We have started discussion with them about how we can do that and how we can support them as family day carers and make the area safe. Equally, people coming to a family day care environment—it may not be a partner but it may be someone else who comes in to fix something in your house or whatever—you do not know their background. You need to look at how you as a family day carer can make sure your kids safe.

**CHAIR:** Are there further questions on that section which relates to questions seven to 20?

**Reverend the Hon. FRED NILE:** The mention of a piano teacher reminded me of a case in which a particular person changed their identity. How do you keep track of someone who—

**Ms CALVERT:** Changes their identity?

**Reverend the Hon. FRED NILE:** Deliberately, to avoid being identified in the future.

**Ms CALVERT:** If they have a conviction, it does not matter under what name they were convicted: they are prohibited and banned from working with children. If we are doing a background check, we would hire them to give us all of their known aliases and so we check against the aliases as well as the name. We are in discussion with CrimTrac about how they can improve on their IT so that there are better automatic linkages between person A who then becomes person B. The New South Wales Police Force already has that in their system so we have been discussing with CrimTrac whether they could think about a similar adjustment to their system. I think they are the sorts of continuous improvements that we are trying to put in place and are trying to get others on whom we rely for information to put in place as well.

**Reverend the Hon. FRED NILE:** The onus would be on them to tell you the truth.

**Ms CALVERT:** Yes, which is why we are wanting to discuss with CrimTrac whether they could do it automatically when they conduct their searches against names.

**Reverend the Hon. FRED NILE:** You mentioned in answer to a question that implementation of some of this procedure is pending a legislative amendment.

**Ms CALVERT:** Yes, that is right.

**Reverend the Hon. FRED NILE:** Is that in the pipeline?

**Ms CALVERT:** Yes.

**Reverend the Hon. FRED NILE:** Will that be next week, six months time, or in a year's time?

**Ms CALVERT:** That is entirely up to the Government, as you would appreciate.

**Reverend the Hon. FRED NILE:** It is in the pipeline?

**Ms CALVERT:** Yes. We have certainly raised it and action is underway.

**The Hon. CATHERINE CUSACK:** In relation to the databases, can you update us where things are up to in terms of accessing interstate databases?

**Ms CALVERT:** In relation to the criminal records, we go through CrimTrac, which is the national database that was set up by all of the police jurisdictions and which is managed by a board under the auspices of the Commonwealth Government. They have access to all the jurisdictions. Of course, jurisdictions have different spent conviction legislation. For example, something that we might be able to access in New South Wales we may not be able to access if it is in Victoria. For that reason the Council of Australian Governments [COAG] set up a subcommittee or a working group to look at ways in which we can improve the exchange of information between States.

I represent New South Wales on the working party and we have given a contract to an agent or a consultant to scope how that exchange of information might occur, what is the best way we can exchange that information and what are the ways that we can improve it. We will always have the problem of different jurisdictions having different legislation, and I can get only what I am entitled to have in that jurisdiction. They in fact might get more from New South Wales than we get from them.

**The Hon. CATHERINE CUSACK:** Are you looking at a new database, or just a new way of accessing an existing database via CrimTrac?

**Ms CALVERT:** Not a new database, but just improvements to procedures and processes. There may well be improvements to the CrimTrac database but we will have to await the result of the report.

**The Hon. CATHERINE CUSACK:** Is there such a thing as a national register of paedophiles?

**Ms CALVERT:** There is a national sex offender register.

**The Hon. CATHERINE CUSACK:** Can you update us on the status of that and how effective that is?

**Ms CALVERT:** I would have to take that on notice because it is not my area. In going through CrimTrac and seeking people's criminal histories, we would get people's histories, which would include the criminal history, and means that they have had to register or become part of the sex offender register. We do not actually deal a lot with the register because we get that data anyway through CrimTrac.

**The Hon. CATHERINE CUSACK:** That is not actually of direct relevance to your area?

**Ms CALVERT:** No, the national sex offender register is not.

**The Hon. CATHERINE CUSACK:** Do you know what it is for?

**Ms CALVERT:** It is for operational policing. What that in effect means is that it is a risk management strategy that the police have put in place to actively, or less actively, depending on the status of the person in a sense, be able to manage the risk that that person poses. They know where they can find them, because they know their place of employment and their place of address—they have to let the police know when they change address and they change employment—and they have powers to conduct surveillance and so on. It is a way of actively policing people who we know are a risk because they have already been convicted.

**Dr ANDREW McDONALD:** In relation to question 13, the commission has expressed a view on the fairness and accuracy of media coverage. In your second paragraph you state, "However, the Commission is not aware of any program, legislation or activity that can guarantee children's safety." You have touched on that already.

**Ms CALVERT:** Like any person, I would like to be able to guarantee safety to children. I think that is a natural thing that you want to do, but the reality is that we cannot guarantee children's safety. I think all we can do is try to minimise the risk. I think in doing that, what we have to balance is whether in minimising the risk to children we restrict their movement to such an extent that in a sense we defeat the purpose of having involvement with them in the first place.

When I was on a recent European trip, I had quite an interesting discussion with the Scottish Children's Commissioner, Kathleen Marshall. She has been conducting some research and talking with people and has a similar concern. She has raised a similar issue where, in trying to manage risks to children, we are starting to really restrict or exclude adults' involvement with children. In looking after their safety, we have thrown out the baby with the bathwater, if you like. We have been so

concerned with their safety that we are actually now stopping adults, or adults are feeling as if they cannot get involved with children.

We had a really interesting discussion about that, how we might respond to that and what ideas they have and what ideas we have. I guess that is why we talk about child-safe, child-friendly; it has got to be safe, but it has also got to be friendly to children. I guess in talking about guaranteeing children's safety, we could, probably if we locked them away, but the cost of that is so great that it becomes meaningless. But it also does not mean that people do not have an expectation that we can guarantee children's safety. I think everybody wants to guarantee children's safety. It is not until you go down that path a bit that you start to think there are some negative and unintended consequences and we need to have a new discussion now. So it is just catching up. People need to catch up with that discussion.

**Dr ANDREW McDONALD:** In response to question 15 you say there appear to be more effective ways in preventing harm to children than compulsory background checking. This is enlarging on that, by the sound of it.

**Ms CALVERT:** It is, yes. It is saying that background checking has a place but it is a limited place and if we want to look after our children—which means making them safe but also allowing them opportunities and interaction with adults because that is what grows them up and makes them feel good—then there are a whole lot of other things we need to do. Those things most people already have at their disposal. We already design job descriptions and offer training to our workers, for example. So if we can get better at doing job descriptions and skilling and get better at training then those sorts of things are more effective in preventing harm to children than in trying to predict an individual's risk in the future.

**Reverend the Hon. FRED NILE:** Commissioner, background checks may not be adequate but the behaviour of a person may indicate some risk. Like stranger danger, should staff or employers need to know potential risks they should look for?

**Ms CALVERT:** That is one of the things that we talk with people and organisations about when we go and do child safe-child friendly training. We work with them to try to minimise risk in their organisation. For example, the organisation could have clear rules about what is acceptable behaviour around children. If everybody knows that and then see somebody not following or breaking those rules, that might be an alert. If someone saw me being inappropriate to children, breaking the rules that the Commission has around children, they could go and talk to their supervisor or someone else about their concerns. You can then start to manage that person's rule-breaking behaviour and put some limits on it. They are the sorts of things that we think are important in creating a safe and friendly environment for children that organisations can do. They are already doing it. We are just helping them doing it a bit more focused on children.

**Reverend the Hon. FRED NILE:** Another matter that comes up is when a person creates friendliness with the child and then wants to take the child away, even to the person's home.

**Ms CALVERT:** Again, that might be one of the rules about what is acceptable behaviour with children. For example, an organisation may have a policy or rule that says you do not take children home overnight or if you are doing overnight stays with children here are the things that you have to go through in order for that to be approved.

**CHAIR:** You talk about some of the child friendly training courses that you have been doing with employers and organisations. In your experience, do you think there is a good level of understanding by employers and organisations about the types of things they can do to make their organisations more child safe and child friendly?

**Ms CALVERT:** I think some organisations have a good understanding and I think some organisations do not. Probably the larger organisations do better at it because they have more resources and are much more focused on risk management anyway in terms of, say, occupational health and safety. Having said that, I still think this is a very new area and I would expect that our knowledge and tools and so on to develop over the next 10 to 15 years. This is a growth area, if you like.

**Mr STEVE CANSDELL:** Out of this report, will childcare centres have a code of conduct?

**Ms CALVERT:** They may or may not have a code of conduct. That is one of the things that we say is available for organisations. In a sense, a code of conduct can be like rules for acceptable behaviour around children, or you can go into much more detail. The Commission has a code of conduct, but we also have a whole series of policies and rules about how we interact with children.

**Ms MARIE ANDREWS:** Commissioner, in relation to question 19, which talks about the child safe-child friendly workshops, you say that locations were chosen to reflect a spread across urban and regional New South Wales. Are there statistics that influence the commission to hold workshops in those areas?

**Ms CALVERT:** No, there are not. As people become more and more aware of the importance of child-safe, child-friendly programs we are getting more people contacting us and requesting workshops. If an area has an interest and it also fits with the targeted groups that we are interested in, then we would be more likely to take that up than an area that is outside our targeted groups. Also, we might do it if we think there are no other opportunities for them or they are a needy area, if you like. In that case we might be more interested. But it is generally based on the groups that we have identified as targeting for child safe-child friendly organisations. Those groups this year, not 2005-06 but in 2006-07, are family day care, disability services and local government.

**Ms MARIE ANDREWS:** Would it be possible for a local government area to ask the commission to hold a workshop in that area?

**Ms CALVERT:** Yes. In fact, we have done that already using our local councils because we think they are a good starting point to influence more broadly. Madam Chair, if I could make reference to Mr Cansdell's question, the Department of

Community Services' regulations on child care require them to have codes of conduct.

**CHAIR:** The next group of questions relating to children's issues are questions 20 through to 34. Do Committee members have further questions about the commission's responses?

**The Hon. KAYEE GRIFFIN:** Question 31 relates to children and the built environment report. In your opening address you said you were working on three projects in response to the recommendations. Also, in response to question 32, I note your last comment about the submissions the inquiry received, which I think are very appropriate. How would you envisage an inquiry or another forum obtaining submissions from children and young people? A lot of agencies sent in submissions but it was difficult to get information from young people. How do you envisage that could occur in the future?

**Ms CALVERT:** I would think probably the most effective way would be for the Commission to support the Committee to do that and to work with the Committee to look at ways in which we could involve children and young people. It probably is challenging for a parliamentary committee to reach out directly to children. You might need to borrow our connections, if you like, and use our support to help you do that.

**The Hon. KAYEE GRIFFIN:** I appreciate those comments because it was difficult. In relation to question 31, you say you are looking at a partnership with local council being finalised to explore ways that local government can use its powers and processes. A number of councils have youth councils, which in most cases probably do not feed into the recommendation process about the local environment. How do you see such a partnership working in terms of getting accessibility to young people and local government, or whatever agency or group it may be, and allowing young people to be a part of the recommendation process?

**Ms CALVERT:** Part of the reason for the project is to explore how we might do that. We will be working with the local council to look at ways in which we can do that. Again, on my recent trip to Europe I met with the Norwegian children's ombudsman. They have a standard process in Norway where before any planning is undertaken they go to the children and young people with a map of the area. They have mapped the whole of Norway—and I guess with Google Earth probably all of us now have access to it. They say to the children and young people, whom they might access through schools, childcare centres or youth centres, "Show us how you use this area. Where do you play? How do you get from home to school? How do you travel?" They will map on this big map the children's use of space. That then goes into the planning process and is taken into account by council—or whomever the planning authority is—when making its decisions about planning. I thought that was a possibility we could explore as part of a pilot. It is a very easy thing to do. He said it is very simple and does not take a lot of time and it gives an idea of how children use space. You can then take that into account. I think a lot of the time decisions are made because we do not know the importance of a particular area to children or how children use it.

**Ms MARIE ANDREWS:** Commissioner, I refer to question 22. In your response you say that you routinely run consultations and you list migrants, communities in remote areas and the homeless. How do you get access to homeless children?

**Ms CALVERT:** We get access to children who are living in refuges. They are homeless. Also at times we have gone to organisations that work with kids who are sleeping rough. We will ask those organisations to help us try to reach some children as well. Generally, with kids who are homeless you have to go to other organisations that have access to those kids and loan their relationship with those kids so that we can get access to them.

**The Hon. KAYEE GRIFFIN:** I refer to question 34, which relates to the young people's reference group. I note your comments that organisations saw it as a model. Now you have two groups starting—one of 10 and 11-year-olds and another of 14 to 17-year-olds. It became apparent to me that there was a lot of literature and information about preschools, long day care centres and child-care centres, more than there was about the teenage years, for want of a better term. However, there was a group in the middle that there was not so much information about. Is that one of the reasons you are segmenting it?

**Ms CALVERT:** It is one of the reasons why we moved away from the Young People's Reference Group. We had shown that the Young People's Reference Group could work and worked well and effectively, but that was kids aged 12 and over. We wanted to try to explore or model or pilot ideas that involved primary school children and preschoolers as well. That is one of the reasons why we are exploring different models. Even since we looked at setting up the advisory panels, we have got further ideas that we want to explore about involving children and making it a bit more dynamic. Certainly trying to reach primary school kids is one of the reasons why we are branching out.

**The Hon. CATHERINE CUSACK:** Firstly, in relation to the 'No-one to Turn To' report, is it possible to get a copy of the 2005 valuation? Secondly, has there been an update since 2005 of that evaluation?

**Ms CALVERT:** Yes, we are in the process of following up on the outstanding 11 recommendations.

**The Hon. CATHERINE CUSACK:** Still outstanding, are they?

**Ms CALVERT:** No, we do not know that they are outstanding, we are following up to see whether they are outstanding. They were outstanding at the time of the work we did earlier and we are now following up on those 11 recommendations to see whether we can deal with them. I would be happy to provide detailed advice on the evaluation. It was not really a report as such; it was advice to me from the staff who got the responses. I would be happy to put something together that outlined that in more detail.

**The Hon. CATHERINE CUSACK:** You had an evaluation officer who was employed for the evaluation?

**Ms CALVERT:** Yes, who then provided advice to me. It was not a report as such.

**The Hon. CATHERINE CUSACK:** What I am interested in is what were the recommendations that were progressed and were not progressed, and given that it is a 2002 report and the status as at 2005 was that 11 had commenced, I would be concerned about the progress of the 11 that had commenced as well as the others that were still being thought about.

**Ms CALVERT:** One of the reasons that we did the evaluation was not necessarily so much to focus on the implementation of the exact recommendations, but rather to look at what we could learn about how we made recommendations. Recommendations are a way of influencing and getting certain outcomes and what we are interested in is how do you influence; how do you use recommendations to influence effectively. The evaluation was really about how effective were they in beginning to influence and change. If I could just pass on a comment about that report, one of the biggest and most critical things about that report from my point of view was the children's voice about how important relationships were to them and to their wellbeing and that what made them vulnerable was when those relationships were non-existent. There was not really a recommendation about that, but that was the most important thing and I think we have been really quite successful and influential in getting people to think about the importance of relationships to children.

My observation is that in hearing people talk, say, those who provide welfare services or community services or juvenile justice—a range of services—you will hear much more in the conversation reference to relationships, the importance of relationships to children, and the importance of adults supporting and maintaining those relationships. I guess I am raising that because I think it highlights one of the problems that we have found about recommendations: You can make a recommendation; it may not be followed to the letter, but it is followed in spirit, and that is far more effective. I think that is an example of that. On the other hand, I think there are times when you do want the recommendation implemented.

**The Hon. CATHERINE CUSACK:** I take the point of what you are saying that there are a lot of intangible, immeasurable benefits that you see anecdotally, which kind of makes you feel good. Research is a very important part of the commission's role and it is hoped that that would be making a big difference and being as influential as possible. We all recognise that, if you are an agent for change, which is the point of having a commission—if we were all perfect, we would not need a commission—there are barriers to change and things like that. Looking through the report, which is an earlier report, on the take-up of the recommendations the Committee can look at it in two ways: Maybe, in the way you would approach recommendations, you have learned something from that, and you can only learn that by going back and re-examining what happened with the benefit of hindsight.

**Ms CALVERT:** Reviewing it, yes.

**The Hon. CATHERINE CUSACK:** Secondly, maybe the recommendations were great and take-up was a problem, so what did we learn from that? Where are



the barriers and how can we assist in dismantling those barriers? I guess that is why I am keen to follow this through.

**Ms CALVERT:** Yes, so I can perhaps look at those issues, those two aspects, in terms of the recommendations and provide something.

**CHAIR:** Some further advice back to the Committee?

**Ms CALVERT:** Some further advice back to the Committee on those.

**The Hon. CATHERINE CUSACK:** Particularly detailing the recommendations.

**Ms CALVERT:** Sure.

**Dr ANDREW McDONALD:** Question 25 is about brokerage. I have no idea what "brokerage" is.

**CHAIR:** We asked the question.

**Dr ANDREW McDONALD:** Could you give your definition of "brokerage" because it is used in a variety of contexts.

**CHAIR:** The word came out of the 2004 review I think.

**Ms CALVERT:** Yes. I think it is probably being used in a couple of senses. One is as a bit of an introduction agency, if you like, introducing this person to this person, bringing them together and then being able to progress an issue, which we do quite a lot. The other aspect of brokerage is probably a negotiation or mediation role where somebody might come with an issue and the Commission can then broker perhaps a resolution to that issue or problem, whatever it is that the person or the group has brought to us. I think it is probably in both those senses that it is being referred to, both of which we do.

**Reverend the Hon. FRED NILE:** You addressed a moment ago the importance of relationships. Could you briefly tell us relationships with whom—parents, friends, teachers?

**Ms CALVERT:** What the kids told me was that by far and beyond the most critical thing that protects children from vulnerability is their relationship with their parents and their family, and that if they have a strong relationship, if they have a good relationship—even just a good enough relationship—with their parents and their family then they are protected from being vulnerable, and so that is the most important thing. Almost every child I spoke with talked about that, and in particular the children who did not have it spoke about how important it was. Then there were friends who were very important to children, and right across the board and across the ages, they were important to children, so friendships were also very important to kids and protected them from vulnerability. If kids had problems they would often talk about it with their friends before they went and spoke to an adult about it. Kids would often try and do problem-solving amongst themselves before they went to an adult. Significantly further down from that there were the relationships with schools and

child care centres as being places to turn to and places that stopped you being vulnerable, and then the community and services way down. Services did not really feature for kids except for Kids Helpline, which almost all kids knew about.

So it is those relationships within family, with friends, and then schools and child care centres that kids identified as protecting them and as reducing their vulnerability. If kids had strong relationships with family, friends, child care centres and school then they felt they were doing really well. If kids had strong relationships with at least one of those groups, if things were not so good at home, but they had good connections with schools, that would protect them from vulnerability as well. It was the kids who had none of those—no connections—or had very weak connections with family, weak connections with school, weak connections with friends, who were the vulnerable kids and that was identified by kids who were themselves exceedingly vulnerable, so when we talked to kids in detention centres or kids on the streets or we talked to kids who were incredibly well resourced, all of them spoke in those terms.

**Reverend the Hon. FRED NILE:** The people who molest children have the ability to work out if a child is vulnerable.

**Ms CALVERT:** That is certainly one of the things that makes children vulnerable. I think the Wood Royal Commission showed that.

**Ms MARIE ANDREWS:** With children at work research, question 30, the answer refers to other recommendations of the children at work report directed to the Australian Government, and I assume some of those would be in relation to WorkChoices and individual contracts signed by minors?

**Ms CALVERT:** No, they are not because the work report came out before WorkChoices was fully operational. Under WorkChoices legislation, I think section 7[c]—nothing in WorkChoices can override State-based legislation in relation to minors, and so there is a complicated relationship between State-based legislation and WorkChoices.

**Ms MARIE ANDREWS:** Has a response from the Australian Government to the other recommendations been received?

**Ms CALVERT:** We are requesting responses by mid-October. We have done some work with some Australian government departments. The Workplace Authority approached us to see if we would get some kids to work with them around the website for advice to young workers and so we got a group of young people together and they provided advice on the website, and I think it was very valuable advice.

**The Hon. CATHERINE CUSACK:** Would you like to update us about the website, because I know you put a lot of effort into the website, and just how used it is?

**Ms CALVERT:** It is used a lot. I would be happy to provide statistics. I will say something interesting about the website: We have updated the website and we have had a lot of compliments about it now being even better than it was. Recently, with

the assistance and support of the Department of Education and Training, we sent out little postcards to all kids in New South Wales secondary schools telling them about the website and I think the month that the postcard went out we had a 1,000 per cent increase on hits to the kids zone.

**The Hon. CATHERINE CUSACK:** What were they hitting?

**Ms CALVERT:** They were hitting the games, which are of course designed and we have some games on there that give information. That is the one that stands out from memory, but I would be happy to provide further advice to you on that if you would like it. The 1,000 per cent does stick in my mind.

**(Short adjournment)**

**CHAIR:** We will move on to the Child Death Review Team annual report. I said before we broke for afternoon tea that we have not dealt with questions 34, 35 and 36. Does anyone have any questions for the commissioner regarding those issues covered by those final three questions?

**Reverend the Hon. FRED NILE:** I notice on page 22 you talk about the various groups, the Ellison Primary School at Springwood. Is there an attempt to have children from the government sector at the non-government sector schools—particularly from Catholic schools?

**Ms CALVERT:** In relation to the kids advisory groups, we have just gone with the Ellison Primary School, but in most of our other work we do not differentiate between school sectors. Sometimes, for convenience, for example, it might be easier to pilot something through the Catholic education system rather than through the State education system, so we will do that then, and then we might conduct a survey in the public school system. We take advantage of all three school systems.

**Reverend the Hon. FRED NILE:** I wonder whether the survey results may vary between the two systems? They may not?

**Ms CALVERT:** No. We take that into account in how we structure the sample.

**The Hon. CATHERINE CUSACK:** In relation to Helen L'Orange's review of the legislation, are there any outstanding matters or recommendations or is the response to that complete?

**Ms CALVERT:** I think the response to the report, from our perspective, is complete. But, if I could take that on notice and refresh my memory of each of the recommendations and get back to you, that would be helpful.

**Dr ANDREW McDONALD:** You talked about your visit to the European childrens' commissioners and you said the Norwegian Ombudsman looked into the childrens' input into urban design. Were there any other things you learned that you think we should be bringing up?

**Ms CALVERT:** Certainly a visit to the United Kingdom would be interesting.

**Dr ANDREW McDONALD:** I do not want to go, I have been there.

**Ms CALVERT:** There were some very interesting things. I think one of the interesting things was the European Network of Children's Ombudsman. There were some similarities in that they have divisions within the groups. Some focus on complaints handling only; some have a much broader role just like the New South Wales commissioner. I came away pleased that we have a broader role rather than focusing only on individual complaints. I think that the support that UNICEF and the United Nations and the European Council have given the European Network of Children's Ombudsman is valuable, and I have started talks with UNICEF in the Asia-Pacific region to see whether it can support more actively the Asia-Pacific Children's Commissioners Forum. That was worthwhile looking at.

There were a number of instances of good practice. The mapping program in Norway. In France there is the young ambassadors program where they got kids aged 18 to 26, and they have a specific role in relation to the Convention on the Rights of the Child, so they train those young people to be ambassadors and to go into schools and do a one-hour class on the Convention of the Rights of the Child. The kids then identify an issue and they went back for a second time and worked with those kids on that issue. That was evaluated and they presented on that and that looked effective, so we are thinking about that.

Just the way you organise your work was interesting. Scotland has done a great piece of work on moving and handling, where they consulted with young people who have disabilities about moving and handling, the way they are moved and the way they are handled. That was a fascinating piece of research and made me think about what it is like for those children and young people to be moved and handled. There were great instances like that that I am going to share with other people in New South Wales and, more broadly, in Australia. Probably one of the best things was it just re-energised me because I was with people who were doing similar work to me with a similar mandate and commitment, and that was really refreshing.

**Reverend the Hon. FRED NILE:** You mentioned about producing a certificate that states that a person is not a prohibited person. Is it possible to have it the other way around, that this is an approved person?

**Ms CALVERT:** No.

**Reverend the Hon. FRED NILE:** There are legal problems, are there?

**Ms CALVERT:** There is, but there is also a wider issue in that we do not want to say you are safe to work with children, because we do not know they are. All we know is that they do not have a conviction. So we need to say you do not have a conviction, not you are safe to work with children. You do not have the negative; you may not necessarily have the positive. That is one of the problems with the card system, because people interpret the card as meaning you are safe to work with children.

**Reverend the Hon. FRED NILE:** Like a blank cheque

**Ms CALVERT:** It ain't a blank cheque.

**CHAIR:** If there are no more questions on the Commission for Children and Young People Report we'll move on to the Child Death Review Team annual report for 2005. There were a series of written questions on notice to which the commissioner has provided a written response. I will not read them for this part of the Committee's inquiry because there are not that many and members may wish to cover other issues that came up in the annual report. So, I will open it up to Committee members for questions with regard to the New South Wales Child Death Review Team annual report.

**The Hon. CATHERINE CUSACK:** Nowra-Bomaderry figures, which we have talked about for many years since they first came out, can you tell us the bottom line of the Chief Health Officer's report?

**Ms CALVERT:** There are probably confidentiality issues I need to take advice on, because we have not yet tabled that report in Parliament. The results will be tabled in the 2006 annual report in about two weeks. I am subject to confidentiality provisions and I do not know how those provisions interact with my obligation to the parliamentary committee.

**The Hon. CATHERINE CUSACK:** Can you advise yes or no whether matters of substance were identified or was it just treated as a statistical blip?

**Ms CALVERT:** That would be to answer the question and I really probably have to take advice on my responsibility, but I will be tabling the report in two weeks, which will give you the answer to that.

**CHAIR:** Also, I understand it is an issue covered in the 2005 report but not in the sense of what the Chief Health Officer has found in the work they have done. We will cover it in our review of the 2006 annual report—we will go into far more detail than—but I think we probably need to wait two weeks for the report to be tabled in the House and then it can form part of our review of the 2006 annual report which we will undertake to do earlier than we have with this report because the election got in the way.

**The Hon. CATHERINE CUSACK:** I understand. The figures in relation to this matter are in every annual report. That is why it is of particular interest.

**CHAIR:** Yes, I understand.

**The Hon. CATHERINE CUSACK:** Can I ask about the cross-border matters? I felt depressed with the response to that question. I thought there was hope on the horizon that we were going to solve this cross-border problem. Is there more you can do in capturing the information and involving, as I understand it, privacy issues?

**Ms CALVERT:** We will, in the 2006 report, be reporting on children who are usually resident in New South Wales but who died in other States that border New South Wales. So, they will be included in our statistics and in our figures.

**The Hon. CATHERINE CUSACK:** So they will be integrated, for example, into New South Wales statistics or is it going to be reported as a separate matter, which is the impression I had?

**Ms CALVERT:** They are reported separately but you can add it yourself. It is not difficult.

**The Hon. CATHERINE CUSACK:** Why would you not put them into the New South Wales list?

**Ms CALVERT:** Because the legislation requires us to report on children who die in New South Wales and these children did not die in New South Wales.

**The Hon. CATHERINE CUSACK:** Would it not be more useful to capture that data?

**Ms CALVERT:** Yes.

**The Hon. CATHERINE CUSACK:** The Tweed shows that there have been no drownings of any children and, in fact, they go for years with no child deaths at all, but we know children are drowning in the Tweed yet the deaths remain in Brisbane. Why should those not be captured? Then when you publish the colour maps in your report it looks like we do not have any problems—in fact, that it is one of the safest places for children in the State?

**Ms CALVERT:** I understand your concerns. It requires a change of legislation and we are in discussion about that. It requires us to change the legislation so that we report on children in New South Wales and who are usually resident in New South Wales but who may die in another place. At the moment the legislation requires me to report only on children who die in New South Wales. In recognition, I guess, of the issues that you have advocated for some time, we have gone to the other States and at least collected that data. We have been able to do that through our work on the Australia and New Zealand Child Death Review Teams. They have now given us that data, so we will be able at least to report on those children who normally are resident in New South Wales but who died outside New South Wales. I understand that it is not completely satisfactory from your point of view, but it is the best we can do at the moment, and at least we now have that data available.

**Mr STEVE CANSDELL:** If a child drowns in the Tweed, for example, and is resuscitated and taken to Brisbane and declared dead at Brisbane, he or she, the child, has not died in New South Wales?

**Ms CALVERT:** That is right.

**Mr STEVE CANSDELL:** It has died in another State?

**Ms CALVERT:** That is right, because we define "died in New South Wales" meaning declared dead.

**The Hon. CATHERINE CUSACK:** They may have died in New South Wales but the death certificate was issued in Brisbane?

**Ms CALVERT:** In Brisbane, yes.

**The Hon. CATHERINE CUSACK:** That is really what happens?

**Ms CALVERT:** Yes.

**The Hon. CATHERINE CUSACK:** I notice too that you are talking to Queensland and Victoria. Why not South Australia, given that any chronically ill child or a victim of an accident in Broken Hill would be transported to that State? Again this affects data relating to Aboriginal children as well as rural and regional communities?

**Ms CALVERT:** One of the issues has been that South Australia's Child Death Review Team has only just got up and running. It has been a question also of our resources. So, to start with we went to the States that were most likely to have the biggest numbers, which was Queensland, Victoria and the Australian Capital Territory, which is the other State. But we are continuing to pursue this and to try to resolve it.

**Mr STEVE CANSDELL:** You have this year's data. Will it be made retrospective to make a comparison?

**Ms CALVERT:** Can I take that on notice and give it some thought?

**The Hon. CATHERINE CUSACK:** To knit the two issues together, Nowra-Bomaderry, the teaching hospital for that area, of course, is Canberra Hospital?

**Ms CALVERT:** Yes.

**The Hon. CATHERINE CUSACK:** So the statistics in relation to Nowra-Bomaderry could well be understated as to what is occurring there? I will wait for two weeks and see if that data has been captured.

**Reverend the Hon. FRED NILE:** You talk about risk-taking behaviour. Is there any way or has anyone ever tried to identify whether there is sometimes a desire to actually suicide?

**Ms CALVERT:** When we conducted the special report into suicide and risk-taking behaviour we consciously joined the two together because we thought there probably were some deaths that fell into the risk-taking behaviour that may well have been with intent. So, that is why we joined the two. It is one of the few times that risk-taking behaviour and suicide have been linked and a study done on those two things as a group. However, there were some differences between the risk-taking group and the suicide group. So, when you looked at the population of children or young people who had in fact either suicided or died from risk-taking behaviour, there were some differences between the two groups.

**Reverend the Hon. FRED NILE:** I appreciate that it is hard to anticipate or ascertain that they intended to suicide, but were you able to separate the numbers and say that some were?

**Ms CALVERT:** We were able to say these ones fell into the suicide group and these ones fell into the risk-taking group, but that is not to say that there were not people in the risk-taking group who did not also intend to die, which is why the study has them as sub-groups but looks overall at both groups together.

**Dr ANDREW McDONALD:** The suicide rate does not appear to me to have changed from 1998. Do you have any comment on that despite all the intervention over the past eight years?

**Ms CALVERT:** Could you reference that for me?

**Dr ANDREW McDONALD:** Page 58, figure 6.1 "Trends in Suicide Fatalities 12 to 17 years, 1996 to 2005: sex"?

**Ms CALVERT:** It has remained fairly constant. There has been a variation, but for 1998 to 2005 it does remain the same. In a sense I guess that highlights one of the problems about just picking two years and saying let us compare the difference between those two years.

**Dr ANDREW McDONALD:** No, the trend does not seem to change much either.

**Ms CALVERT:** Well, males went up in 2002 and then have gone down again.

**Dr ANDREW McDONALD:** But as the numbers are small—

**Ms CALVERT:** Yes, they are.

**Dr ANDREW McDONALD:** —I think statistically it does not compare?

**Ms CALVERT:** Statistically you cannot make any comment about it.

**Dr ANDREW McDONALD:** So, you have done eight years' work and not much has changed on that?

**CHAIR:** Or you could say that, given everything that is happening, positively it has not gone up?

**Dr ANDREW McDONALD:** Yes, one could easily say that.

**Ms CALVERT:** Can I say, one of the challenges, as you would be aware, Dr McDonald, of looking at child deaths is that they are small numbers. Certainly when you look at deaths from external causes they are small numbers, and that presents challenges when you are conducting statistical analysis. They are some of the challenges we have been grappling with as we look at our 10-year data study, which has required us really to deal with statistical analysis and small numbers.



**The Hon. CATHERINE CUSACK:** In relation to question eight, which again is about recommendations being implemented, have you any suggestions as to how we could strengthen the uptake of recommendations?

**Ms CALVERT:** I have certainly outlined what I do to try to get uptake with the recommendations. Anecdotally, people do tell me that the fact the team reports to Parliament on progress in implementing does help focus agencies' minds on the recommendations—I hear that from a number of different sources. So, I think it probably does help focus agencies' minds, the fact that every year the team is going to make a comment on how well the recommendation has been implemented or what progress there has been. In terms of what the committee could do, I think your oversight is probably part of that reporting back to Parliament. So, I think the fact that there is a committee that oversees probably is part of what helps focus people's minds on the recommendations.

**The Hon. CATHERINE CUSACK:** Are there any outstanding recommendations that you could draw to our attention that would be significant matters that should be championed?

**Ms CALVERT:** For the 2005 report I could probably really talk only about what the team has said because it is not me as the Commissioner speaking; it is me as the convenor of the team.

**CHAIR:** Would you like to take that on notice and come back to us?

**Ms CALVERT:** Yes. My hesitation is that I am conscious of the 2006 report coming out as well and, in a sense, it is looking at both of those that is probably important. So, that was my hesitation, not that I am hesitating to answer. It is more that I know there is another report coming out.

**The Hon. CATHERINE CUSACK:** That would be more effective?

**Ms CALVERT:** It would be more effective to wait for the 2006 report.

**The Hon. CATHERINE CUSACK:** I do not have the report in front of me at the moment, but I am thinking gender issues. It does not seem to matter which way you look at it, there are more disproportionate rural boys than girls. I wonder whether that is a matter the team has looked at and whether there is scope for further inquiry into that? We commonly talk about boys taking more risks, but I am actually interested also in adults' attitudes towards boys. Are they benefiting from the same supervision? For example, is recalcitrant behaviour being treated differently in boys to girls?

**Ms CALVERT:** Yes, it is certainly something that is noticeable about the statistics and is one of the things that will be looked at in the 10-year trends. I will pass on your comments to the team when they are talking about the 10 years worth of data and what the statistics show us about gender in relation to the 10 years worth of data.

**The Hon. CATHERINE CUSACK:** My understanding is there is no physiological reason why there should be a different death rate but, of course, there is and it is substantial. If we could reduce the male death rate to the female death rate you would be saving thousands over a 10-year period.

**Mr STEVE CANSDELL:** It is called testosterone. They all take risks.

**CHAIR:** I think there is something in what you are saying about the attitudes we have to boys and girls and how we supervise, monitor and keep children safe.

**The Hon. CATHERINE CUSACK:** For example, boys are murdered at a massively higher rate than girls. That is not something they can control; they are the victims—often very young boys. I am wondering is there an attitude there?

**CHAIR:** It is interesting.

**Ms CALVERT:** Certainly there are some external causes of death where the gender difference is noticeable. Interestingly there are some natural causes of death where the gender difference is noticeable as well. In the figures originating for the 2005 perinatal period there were 90 girls who died and 128 boys. That has probably nothing to do with how we manage boys or girls. So it is an interesting issue.

**The Hon. CATHERINE CUSACK:** I know why and you would know I am sure—the Y chromosome is shorter than the X chromosome. Perhaps Dr McDonald—

**Ms CALVERT:** —there is countervailing information. So boys suffer more birth defects, as I understand it.

**Dr ANDREW McDONALD:** Yes. Basically it is due to evolution; boys have a higher death rate, except after wars.

**Mr STEVE CANSDELL:** If I could bring up the sudden unexpected deaths in infancy figures: 49 unexpected deaths in infancy, of which 33 were due to SIDS. You talked about smoking and you said 22 of the 30 infants who were known to have died of SIDS had parents who smoked. That is extraordinary.

**Ms CALVERT:** That is why one of the recommendations of the Sudden Unexpected Death of Infants report highlights the need for trying to focus on modifying the risk factors of SIDS and why we have made recommendations in that area. I do think smoking is certainly associated with SIDS and the advice we would give, and we would recommend people give, is do not smoke around babies.

**Reverend the Hon. FRED NILE:** Have you had any comments on smoking in cars, with babies in cars?

**Ms CALVERT:** It is certainly one of the places where you would be saying do not smoke around babies. Whether it is a car, a house or whatever, do not smoke around babies. I guess that is the message we need to get out and do not smoke in pregnancy.

**Reverend the Hon. FRED NILE:** Is there any way in which legislation could be used?

**Ms CALVERT:** Certainly it has been one of the things that people have raised as a possible option— not in the Team but generally in the community it has been one of the things raised as an option.

**Mr STEVE CANSDELL:** Considering the high rate, the ratio and the fact that there are not that many smokers out there, it is incredible—high statistics.

**Ms MARIE ANDREWS:** Question 9, the reduction in the number of traffic fatalities amongst children, which is a positive outcome. You gave a number of reasons as to why that could be. I was wondering if the Government's introduction of the 40 kilometres per hour speed limit around schools zones has made a difference?

**Ms CALVERT:** I would have to get the statistics as to before and after. It is not something that immediately springs to mind as one of the things that have reduced deaths. I should probably take that on notice.

**CHAIR:** I think there is a timeframe issue, in terms of your report and when that was introduced. You will take that on notice.

**Ms CALVERT:** I will take that on notice. We may be able to find other studies that give us a clearer summary on the question of the effectiveness of schools zones.

**CHAIR:** Any other questions?

**Reverend the Hon. FRED NILE:** Just a quick one. Has there been any analysis of the problem we have been seeing lately, and there is one very major case that just occurred, where the father in a divorce situation has decided to take the life of the children to punish the mother and so on? Is that picked up in the survey?

**Ms CALVERT:** We did a study of six year's worth of data or information where children had died from fatal assault. We looked at the population of children who had died from fatal assault in New South Wales over a six-year period. We found that the fatal assaults fell into four different clusters. One cluster was what you might think of as traditional child abuse and that was four under four's. There was another group of teenage murders that were mostly committed by strangers or each other. The third was a group where the assault, the murder or fatality was triggered by a mental health issue. The fourth group were those children who were murdered in the context of family separation. We talk about that in the study and have made certain recommendations around that. It is a pattern that occurs in child fatality. It is one of the four patterns that we observed happening with child fatalities.

**CHAIR:** With regard to the 10-year study that you are undertaking, in Question 1 you talk about various methodological issues that have been resolved. The issue of vulnerability, the children identified as vulnerable, will you use the same definition that the Ombudsman uses with regard to reviews he undertakes or have you come up with your own definition of who are vulnerable children for this 10-year study?

**Ms CALVERT:** Traditionally the team have defined vulnerable as children who have had a report to the Department of Community Services. We have done that because the Department of Community Services is set up to look after and respond to vulnerable children. That is the measure we have used, if you like, of vulnerability.

**CHAIR:** It is similar to the Ombudsman?

**Ms CALVERT:** Yes. That is not to say we have not had a lot of discussions about whether we can develop a better definition of vulnerability. I guess what we are trying to look at in our reports—we look at the indigenous status, at our socioeconomic status and at disability where we can. We look at vulnerability being, I guess, measured by a report to the Department of Community Services.

**The Hon. CATHERINE CUSACK:** I wondered if you could comment—and you might want to take it on notice—about coronial enquiries into child deaths. They are not always held. Have you ever looked at the Coroner's pattern of whether he decides to investigate or not investigate? Secondly, the Coroner will often go in depth into matters when he makes recommendations. Are the recommendations being captured, understood and worked through by the Government and the community or are they just evaporating into the ether until the next accident repeats the same mistakes?

**Ms CALVERT:** I probably want to take that on notice because I do not want to say something that is incorrect.

**CHAIR:** I do understand that also some of it falls outside the terms of reference. You will take it on notice.

**The Hon. CATHERINE CUSACK:** The team might, for example, rely on information from the Coroner, as I understand it, in terms of cause of death.

**Ms CALVERT:** It is one of the sources we rely on. I think one of the things we have learned is to rely on a number of sources of information.

**The Hon. CATHERINE CUSACK:** Well, that is interesting in itself and the timeliness of information. I noticed the Ombudsman's report, and I am not going to burden you with a question about that, but two years later we still have to adjust the statistics based on changes to official findings in relation to matters that occurred three years earlier. So I am just wondering—

**Ms CALVERT:** We also have to make those adjustments but I think one of the things about the Child Death Review Team is we do our own coding of causes of death. The Coroner might say we think it is this but we will make an independent decision using ICD 10 and an experienced and competent code will determine and code the cause of death. So we are a little bit different in that way.

**(The witness withdrew)**

**(The Committee adjourned at 4.00 p.m.)**