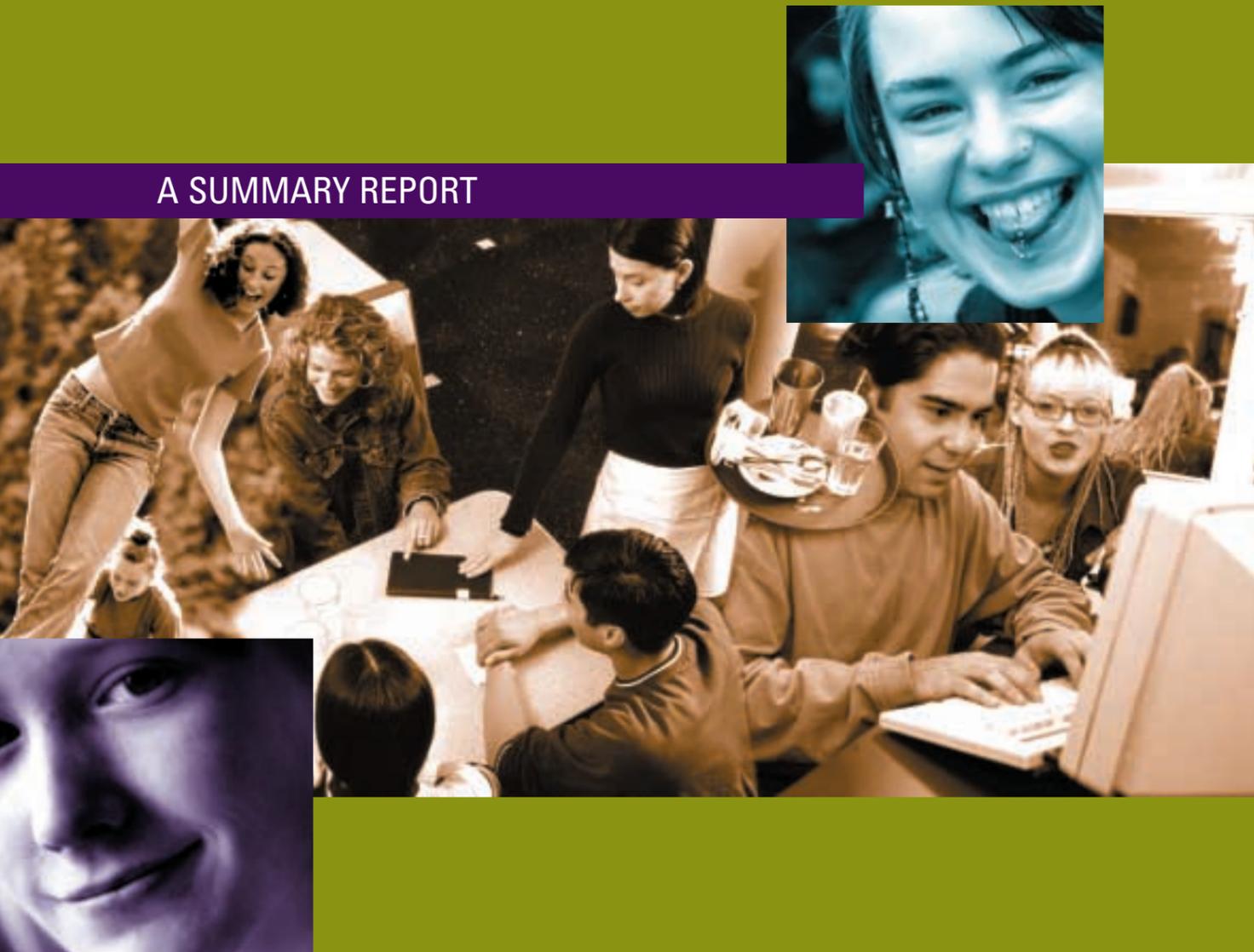


Improving the Lives of Young Victorians in Our Community



A SUMMARY REPORT



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Glossary of Terms

Risk Factor – a factor in a young person's environment which *increases* susceptibility to social, behavioural and health problems.

Protective Factor – a factor in a young person's environment which promotes positive social development and *decreases* susceptibility to social, behavioural and health problems.

Elevated – individuals scoring in the top third for a risk or protective factor or areas having significantly higher score than the State mean on a risk or protective factor.

Problem Behaviours – behaviours with the potential to harm the social development and health of young people.

Improving the Lives of Young Victorians in Our Community – A Summary Report

Minister's Foreword



The goal for all those working with young people in schools, community health services, and community youth programmes is to improve the wellbeing of Victoria's young people.

As a community we know about the barriers and difficulties that young people experience and we are concerned by the social problems of drug and alcohol use, depression and suicide. However, to intervene successfully, we need to know what leads some young people to take risks with their health and sometimes their lives.

The *Survey of Risk and Protective Factors* was conducted in 1999 by the Centre for Adolescent Health in Melbourne, Victoria.

The Survey documents the diverse and shared experiences of 9,000 young Victorians and is the first of its kind to offer evidence of the 'risk and protective factors' that affect young people in their schools, families, communities and peer groups.

The great value of this knowledge is that it gives us a framework to improve the lives of Victoria's young people.

The most important findings to emerge from the Survey are now summarised in this report.

I hope this summary report and this survey are read and discussed by those in government, professional organisations, voluntary associations, and by young people themselves and is used as a guide for 'thinking through' decisions. It is timely for us to be actively working together to strengthen local community prevention strategies for our young people.

Christine Campbell

The Hon. Christine Campbell MP
Minister for Community Services

Acknowledgements

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Victoria's Young People, Our Communities and Government

1.1

The findings from the Survey of Risk and Protective Factors (1999) suggest far-reaching implications for Victoria and its young people. This document is a summary of those findings.

An increase in problem behaviours such as substance use, depression and suicide, homelessness, school exclusion, violence and sexual activity in young people, has been well observed and documented over the past 20 years.

The majority of our young people will make the transition to adulthood easily. Research has shown, however, that between 10-20% of young people will engage in one or more serious problem behaviours between the ages of 12 and 18.

As Victoria moves into a new era, the need for effective partnerships across Government and communities that address the problems confronting young people is a priority.

The current focus of Government is to strengthen and build resilient communities by encouraging local government, non-government organisations and community groups to work together. Part of this approach is to develop services to promote early intervention and prevention strategies which may also help existing social problems from escalating within communities.

The development of innovative prevention and intervention strategies in recent years, such as drug education, suicide prevention, family mediation and child safety, is based on prevention research that allows us to better address the problems confronting our young people, families and children.

The Victorian *Survey of Risk and Protective Factors* is based on an innovative research framework that has been used successfully in countries such as the United States. Aspects of the approach have been successfully applied in Victorian school programmes such as the Gatehouse project and the School Focussed Youth Service. Consultations within Victoria suggest widespread acceptance for the framework.

Victoria is now leading the way in the development of this research, with the introduction of a more comprehensive framework that includes mental health and homelessness, and through the development of detailed Regional and Local Government Area (LGA) profiles.

The focus of this summary report, therefore, is to:

- highlight the level of risk-taking and problem behaviours displayed by our young people
- examine the relationship between risk and protective factors and these problem behaviours
- provide selected profiles of problem behaviours and risk and protective factors at local, regional and statewide levels.

Further information can be found in the published study entitled: *Improving the Lives of Young Victorians: A Survey of Risk and Protective Factors*.

Report focus

The Framework and Survey in Context

1.2

The risk and protective factor framework is based on more than 20 years of international research and identifies important 'risk' and 'protective' factors that influence our young people's behaviour. The research shows that the more 'risk' factors there are in a young person's life, the greater the likelihood of that person engaging in problem behaviours. 'Protective' factors, on the other hand, offset risk factors and promote social development, well-being and resilience.

When using this framework to survey young people, risk and protective factors are measured in four important areas of a young person's life: family, school, community and peer groups and themselves. This allows for the construction of a social profile. The profile can be used to target interventions, since research tells us that to reduce the degree or number of problem behaviours affecting a young person, we must change the risk and protective profile. In this way we can promote an environment for positive social development.

The *Survey of Risk and Protective Factors* (the Survey) was conducted on behalf of the Department of Human Services by the Centre for Adolescent Health, and questioned 9,000 of Victoria's young people in government, Catholic and independent schools across metropolitan and regional Victoria. The Survey provided information about young people and also their experiences of the communities in which they live.

The Survey used the risk and protective factor framework to understand the problem behaviours in which young people engage. Risk and protective profiles for each metropolitan Local Government Area and the four metropolitan and five non-metropolitan Department of Human Services regions were also developed.

The most important finding is that a strong link exists between the number of risk and protective factors to which our young people are exposed within their communities, families, schools and peer/individual groups, and their involvement in problem behaviours.

The findings from the Survey can be used to respond to young peoples' and communities' needs through a number of prevention efforts, for example community building planning and development across community services. This includes organisations such as schools, health services, police, community agencies and local government.

The Communities that Care strategy, which runs successfully in many communities in the United States (US) and United Kingdom (UK), is one such approach that uses the risk and protective framework. As a strategy, it endorses an integrative community planning approach with an emphasis on prevention and early intervention.

The Communities that Care strategy is referred to later in this report.

The Victorian Government endorses the focus on prevention and early intervention, which is founded on evidence-based research. Development of risk and protective factor profiles is an important part of that evidence and these can be used by diverse communities to develop strategies which will improve the live of young Victorians.

What the Survey Tells Us – Key Findings

1.3

The Survey of Risk and Protective Factors provides a wealth of information about Victoria's young people. Below is some of the information that the survey highlights.

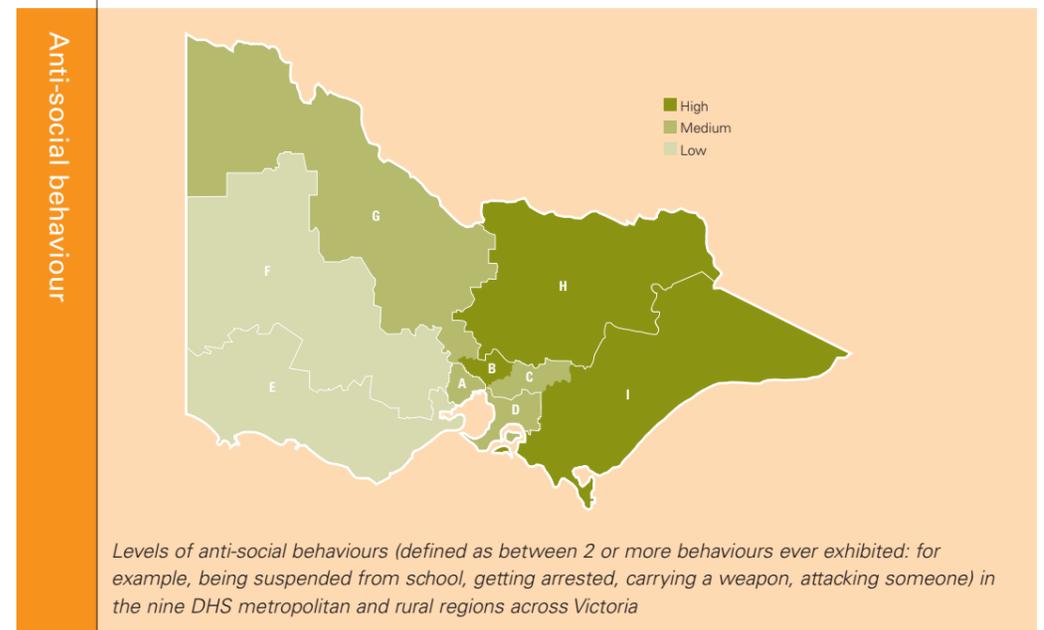
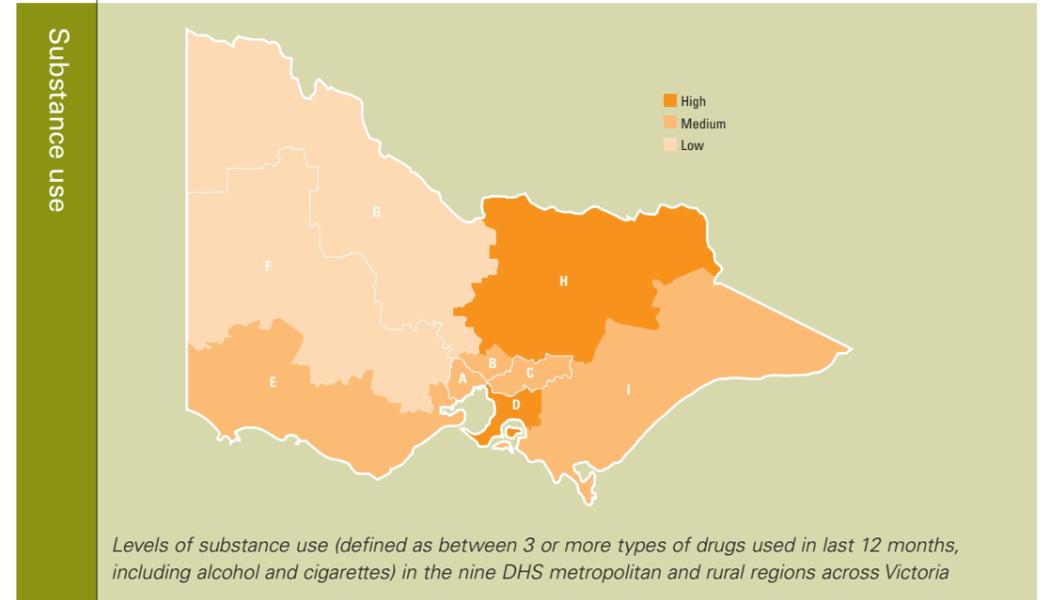
Risk & protective factors	<ul style="list-style-type: none"> a strong link exists between risk and protective factors in our community and the behaviour of Victoria's young people (see matrix on page 13) many problem behaviours share common risk and protective factors, indicating that effective intervention focussing on one factor may reduce a number of problem behaviours ranging from substance use to emotional problems
Problem behaviours	<ul style="list-style-type: none"> alcohol and tobacco continue to be the most prevalent drugs used by Victoria's young people one in five of Victoria's young people say they have emotional problems and females are twice as likely as males to report these problems by the age of 16, about one third of Victoria's young people have had sex and less than 50% of Victoria's sexually active young people use safe sex practices more girls than boys were found to be at risk of homelessness few differences exist between the problem behaviours exhibited by young people in metropolitan Victoria as compared with young people in rural Victoria however, some differences in problem behaviours exist between the 9 metropolitan and rural DHS regions and between the 31 metropolitan Local Government Areas
Local area profiles	<ul style="list-style-type: none"> this survey provides risk and protective factor profiles for each metropolitan LGA and for all DHS regions throughout Victoria
Comparisons for US	<ul style="list-style-type: none"> risk and protective profiles for young people in Victoria are similar to risk and protective profiles for young people in the US comparisons with US data show that more young Victorians drink alcohol than US teenagers, but fewer use solvents and illicit drugs compared with their US counterparts.

A Profile of Victoria

1.4

Problem behaviours in Victoria's regions

The following maps illustrate the level of substance use and anti-social behaviour in Victoria's regions.



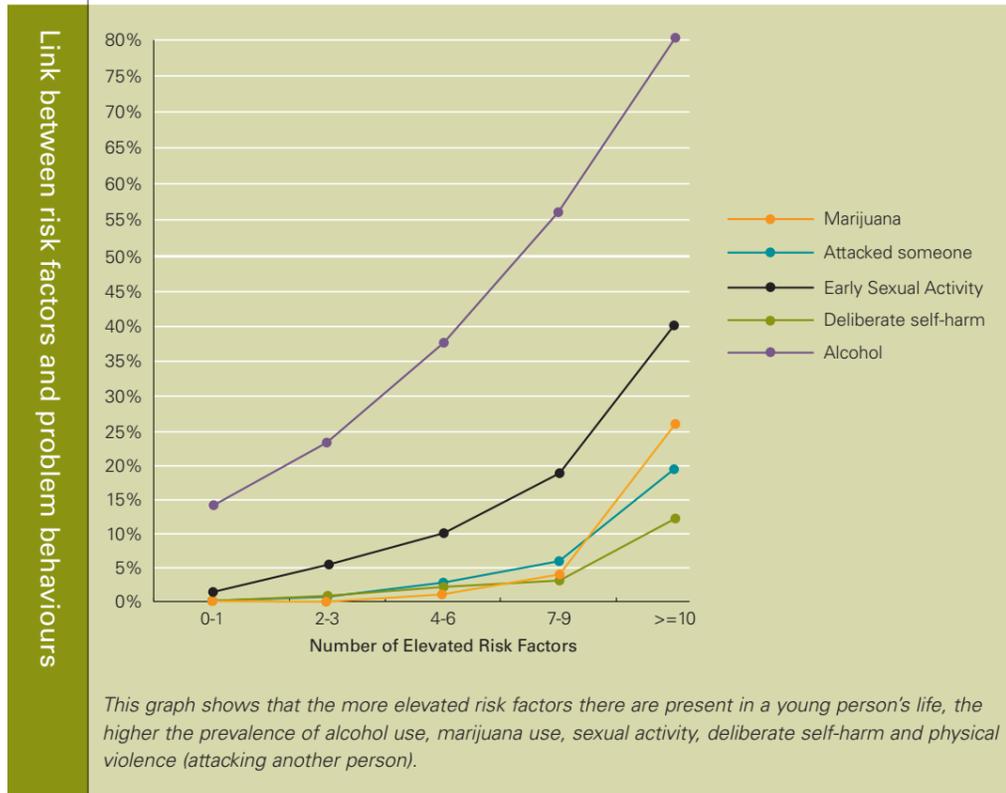
- | | | |
|--------------------------------|--------------------------------|-----------------|
| A Western Metropolitan Region | D Southern Metropolitan Region | G Loddon Mallee |
| B Northern Metropolitan Region | E Barwon South Western | H Hume |
| C Eastern Metropolitan Region | F Grampians | I Gippsland |

Problem behaviours and Victoria's young people

The following graphs show the prevalence of problem behaviours in Victoria's young people.



How risk factors are linked with problem behaviours



How risk factors are linked with problem behaviours

Risk & Protective Factors	Drug Abuse	Delinquency/ Crime	Depression
Community			
Low neighbourhood attachment	X	X	X
Community disorganisation	X	X	X
Personal transitions & mobility	X	X	
Community transitions & mobility	X	X	
Laws & norms favourable to drug use	X		
Perceived availability of drugs	X		X
• Opportunities for pro-social involvement	X	X	X
• Rewards for pro-social involvement	X	X	X
Family			
Poor family management	X	X	
Poor discipline	X	X	
Family conflict	X	X	X
Family history of anti-social behaviour		X	X
Parental attitudes favourable toward drug use	X		
Parental attitudes favourable to anti-social behaviour	X	X	X
• Attachment	X	X	X
• Opportunities for pro-social involvement	X	X	
• Rewards for pro-social involvement	X	X	X
School			
Academic failure	X	X	X
Low commitment to school	X	X	X
• Opportunities for pro-social involvement	X	X	
• Rewards for pro-social involvement	X	X	X
Peer /Individual			
Rebelliousness	X	X	X
Early initiation of problem behaviour	X	X	X
Impulsiveness	X	X	X
Anti-social behaviour	X	X	X
Favourable attitudes toward anti-social Behaviour		X	
Favourable attitudes toward drug use	X		
Perceived risks of drug use	X		X
Interaction with anti-social peers	X	X	X
Friends' use of drugs	X	X	X
Sensation seeking	X	X	X
Rewards for anti-social involvement		X	X
• Religiosity	X	X	
• Social skills	X	X	X
• Belief in the moral order	X	X	

• = protective factors

This table summarises findings from overseas longitudinal studies. It shows how risk and protective factors increase or decrease the probability that a young person will face problems. For example, it shows that a history of family conflict or low neighbourhood attachment, predict drug use, delinquency or crime or depression. A protective factor reduces the likelihood of these problems, even when there is exposure to the risk factors.

Source: Adapted from J.C. Howell, B.Krisberg, J.D. Hawkins and J.J Wilson. (1995) (eds.) A Sourcebook: Serious, Violent, & Chronic Juvenile Offenders. SAGE: International (p.25).

Risk and Protective Factors in Victoria

Risk factors

Prevalent risk factors

The three most prevalent risk factors identified by young people across Victoria are:

- poor family discipline (eg. would not be caught if wagged school, if drank without permission)
- family conflict (eg. people in my family often insult or yell at each other)
- availability of drugs in the community (eg. easy to get cigarettes, marijuana, heroin)

Elevated risk factors

Department of Human Services (DHS) regions with the highest number of elevated risk factors are:

- Hume
- Gippsland
- Southern Metropolitan

(Note: details for the elevated risk factors for these regions can be found in the main survey)

Protective factors

Prevalent protective factors

The three most prevalent protective factors identified across Victoria are:

- opportunities for positive community involvement (e.g. sports teams for people your age, youth groups are available)
- rewards for positive involvement in the family (eg. enjoy spending time with parents, parents notice when doing something well)
- belief in moral values (eg. it is not okay to cheat, it is important to be honest)

Elevated protective factors

DHS regions with the highest number of elevated protective factors are:

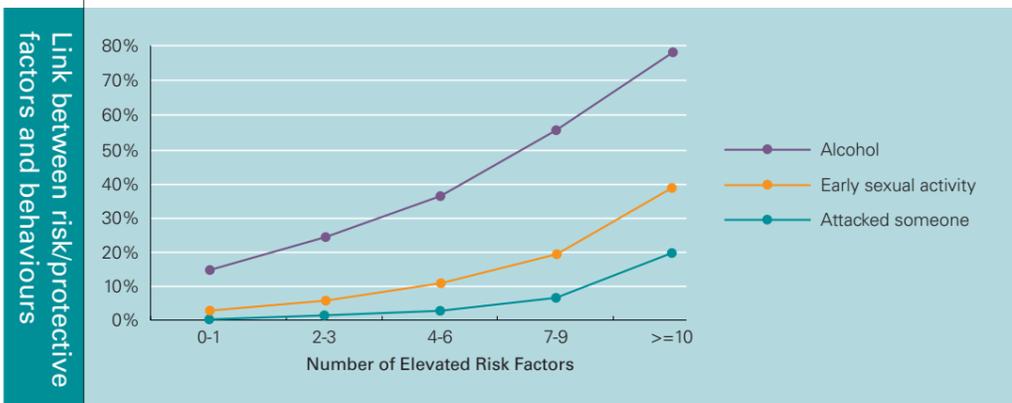
- Barwon South-Western
- Grampians
- Eastern metropolitan and Western metropolitan (equal)

The *Survey of Risk and Protective Factors* is the most comprehensive report to date about Victoria's young people. Based on the survey responses of 9,000 young people, the findings are broadly consistent with previous surveys of young people's behaviour.

This Survey is the first of its kind, however, to provide strong evidence that challenges, refutes or confirms a number of commonly held views and beliefs about young people. It is this evidence base that provides us with a clear starting point to begin to address the underlying causes and symptoms of the problems faced by young people.

The Survey highlights many salient findings about Victoria's young people, their families and their diverse communities with regard to metropolitan and rural similarities, and gender and age differences and comparisons. Covering the most problematic areas of substance use, anti-social behaviour, mental health and related social issues, the Survey provides us with pertinent and detailed information about our young people in the context of their everyday environments. This includes their families, peer groups, schools and the communities.

The most important finding to emerge from the survey is the strong link which exists between risk and protective factors in our community and the behaviour of Victoria's young people, as shown in the graph below.



Other important findings are that: the social responsibility for young people's well-being lies firmly within families, schools and communities and that there are fewer differences between metropolitan and non-metropolitan young people, compared with differences between age groups and gender.

The concept of risk and protective factors are derived from more than 20 years research into juvenile offence, pregnancy, school drop out and drug use by young people in the United States. They have been shown to predict these behaviours in North America and other countries, and are now confirmed as playing a major role in the behaviour of young Victorians. The Victorian Survey demonstrates that the factors are also relevant to other major health and social problems affecting young people. These include mental disorders such as depression and social concerns such as sexual risk-taking behaviour.

Survey Profiles

The *Survey of Risk and Protective Factors* provides detailed profiles of the 9 DHS regions of Victoria and the 31 Local Government Areas in metropolitan Melbourne.

A detailed chart, showing the incidence of problem behaviours and the percentage of elevated risk and protective factors present in each of the 31 Local Government Areas is presented at the end of this report. (Refer to Part 4 located on the inside back cover)

(The provision of detailed information for LGAs in rural regions was beyond the scope of this survey.)

This comprehensive information in the Survey will provide communities, and local, regional and State Government and non-government services, with a sound foundation for developing social policy in the areas of local needs assessment and prevention, and service planning and co-ordination.

One of the new approaches to the prevention of young people’s problem behaviours is the risk-focussed approach to prevention.

This approach is based on a simple premise:

To prevent a problem from occurring, and to enhance the resilience of young people, we need to find ways to identify the factors which *increase* the risk of that problem developing and identify the protective factors that *decrease* the risk of that problem developing.

We then need to look at prevention strategies, which minimise the risk factors and maximise the protective factors.

Pioneered by sociologists Professors Hawkins and Catalano at the University of Washington, Seattle, USA, the risk-focussed prevention approach has been found to successfully reduce juvenile delinquency offences and high levels of substance use.

In Victoria, this approach has now been reviewed and expanded to include the areas of emotional well-being and other social problems such as sexual risk-taking and the risk of homelessness.

Prevention Principles

Prevention Principles are a core part of the risk-focussed approach to prevention. They are:

- to focus on known risk factors
- to enhance protective factors
- to address risk factors at appropriate developmental stages
- to intervene early, before behaviour stabilises
- to include those at risk
- address multiple risks with multiple strategies
- address the racial, cultural and economic diversity of communities

What are risk factors?

Risk factors are factors in a young person’s environment which *increase* susceptibility to social, behavioural and health problems.

What are protective factors?

Protective factors are factors in a young person’s environment which promote positive social development and *decrease* susceptibility to social, behavioural and health problems.

Risk factors are identified in four important areas of daily life: the family, the school, the community, and within peer groups or individuals. One clear implication from the research is that if we can reduce the risk factors in young people’s lives, and/or increase the protective factors, we may reduce the occurrence of problem behaviours and/or minimise harm.

Most importantly, it has been found that many problems share risk and protective factors, for example high levels of substance use are often associated with difficulties in the family and at school. Therefore, there are good reasons to believe that effective intervention for one factor will have positive benefits for a number of problem behaviours.

In the Victorian study, 26 risk factors and 10 protective factors were examined.

	Community	School	Family	Peer – Individual
Risk factors	Low neighbourhood attachment Community disorganisation Personal transitions & mobility Laws & norms favourable to drug use Perceived availability of drugs	Academic failure Low commitment to school	Poor family management Poor discipline Family conflict Family history of anti-social behaviour Parental attitudes favourable toward drug use Parental attitudes favourable to anti-social behaviour	Rebelliousness Early initiation of problem behaviour Impulsiveness Anti-social behaviour Favourable attitudes toward anti-social behaviour Favourable attitudes toward drug use Interaction with anti-social peers Friends use of drugs Sensation seeking Rewards for anti-social involvement
Protective factors	Opportunities for pro-social involvement Rewards for pro-social involvement	Opportunities for pro-social involvement Rewards for pro-social involvement	Attachment Opportunities for pro-social involvement Rewards for pro-social involvement	Religiosity Social skills Belief in moral order

2.3

What are problem behaviours?

Problem behaviours are behaviours with the potential to harm the social development and health of young people.

Problem behaviours	Substance use	Anti-social behaviour	Mental health	Social factors
	consumption of: alcohol cigarettes marijuana solvents illicit drugs painkillers (for non-medical use)	violent behaviour theft problems with school (ie. truancy)	depressive symptoms or anxiety deliberate self-harm	risk of homelessness sexual activity having unprotected sex being bullied

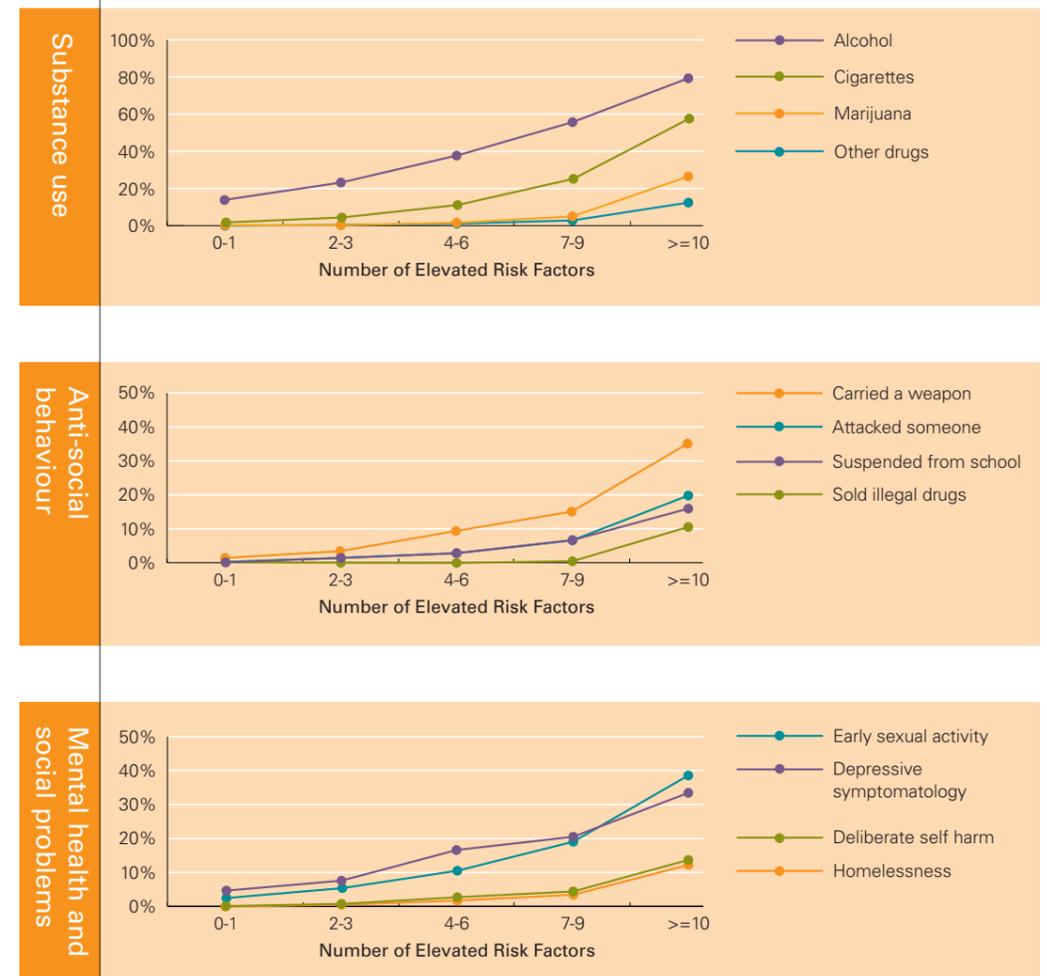
2.4

The Factors and their Relationship with Problem Behaviours

The *Survey of Risk and Protective Factors* shows a clear link between the extent to which young people engage in problem behaviours and the level of risk and protective factors to which those young people are exposed.

From their responses, young people were classified as 'elevated' on a risk or protective factor if they scored in the top third for that risk or protective factor. They were then classified as having 0-1, 2-3, 4-6, 7-9 and 10 or more elevated risk factors and 0-1, 2-3, 4-6 or 7-10 elevated protective factors.

Risk factors and problem behaviours

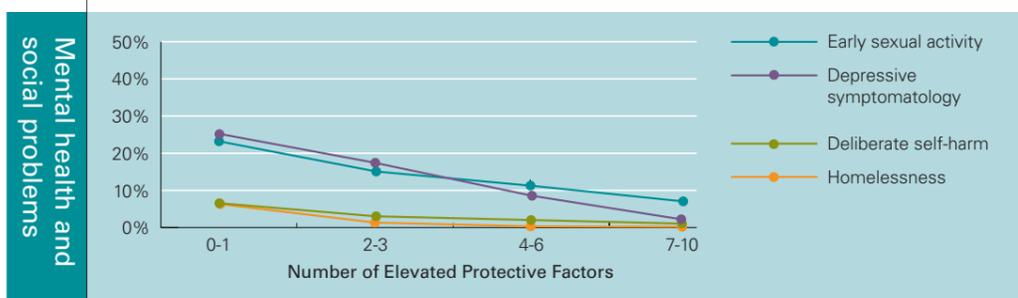
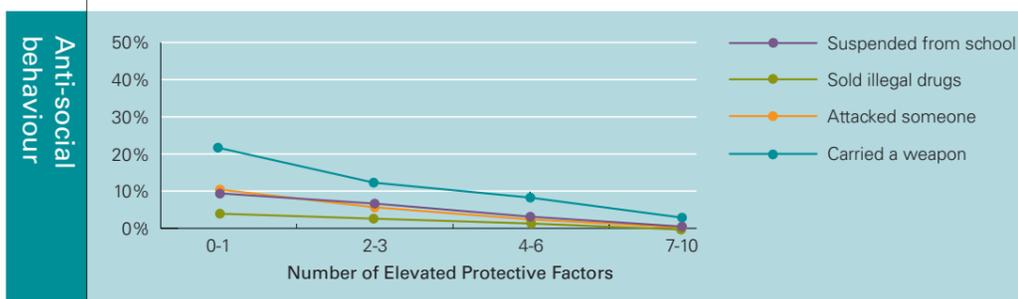
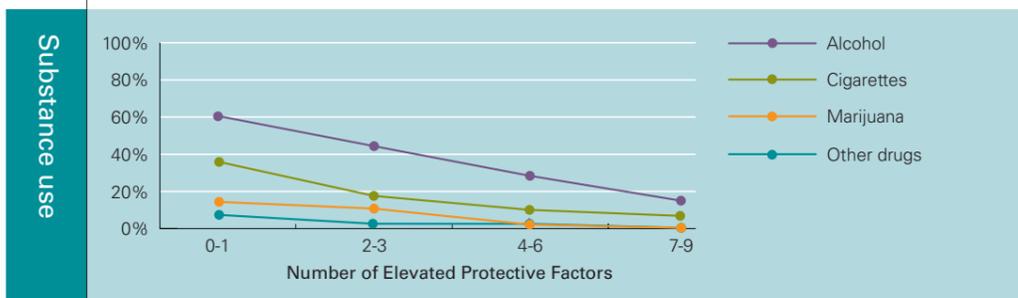


These figures show that increased levels of risk factors in a young person's environment are associated with increases in substance use, anti-social behaviour, mental health and social problems.

The Factors and their Relationship with Problem Behaviours

2.4

Protective factors and problem behaviours



These figures show that a higher number of elevated protective factors is associated with a reduction in problem behaviours for young people.

This is the first study to demonstrate the risk and protective factor relationship to social behaviours and mental health and emotional problems. The findings suggest that changing a young person's risk profile may have the potential to reduce the incidence of mental health and related emotional problems just as it does for substance use and anti-social behaviour.

Priority Areas for Intervention

2.5

The results from the Survey provide us with profiles of the risk/protective factors in Victorian communities and hence a framework with which we can begin to match these profiles to high-quality service planning and development.

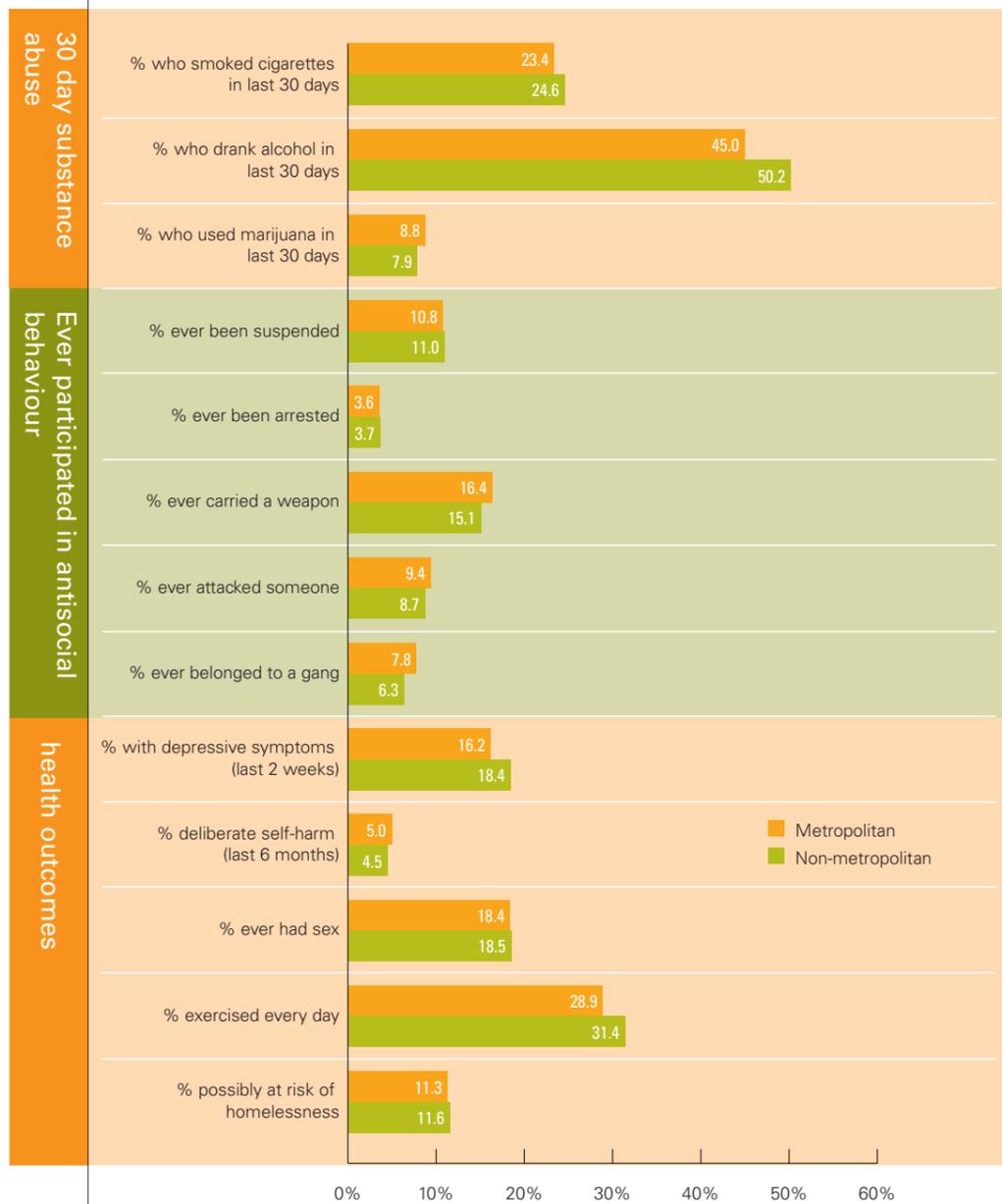
The following risk and protective factors emerged as priority areas for intervention and/or prevention in Victoria:

Priority Areas for Intervention	Risk	Protective	
	Community	perceived availability of drugs	rewards for positive involvement
		norms favourable to drug use	
		high levels of transience and mobility	
	Family	family conflict	family attachment
	poor discipline		
	family history of anti-social behaviour		
School	academic failure	opportunities and rewards for positive involvement	
	low commitment to school		
Peer/Individual	favourable attitudes to drug use	religious affiliation,	
	friend's or peer group drug use	social skills	

The Survey of Risk and Protective Factors documents regional, age and gender information with regard to the problem behaviours exhibited by Victoria's young people. Below are some important comparisons in these areas.

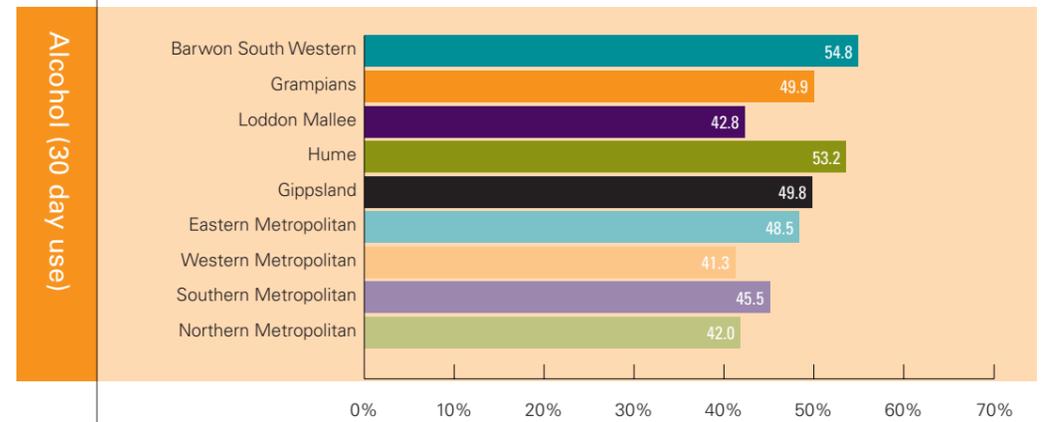
Regional Comparisons

Substance use, anti-social behaviour and mental health and social outcomes in metropolitan and non-metropolitan Victoria

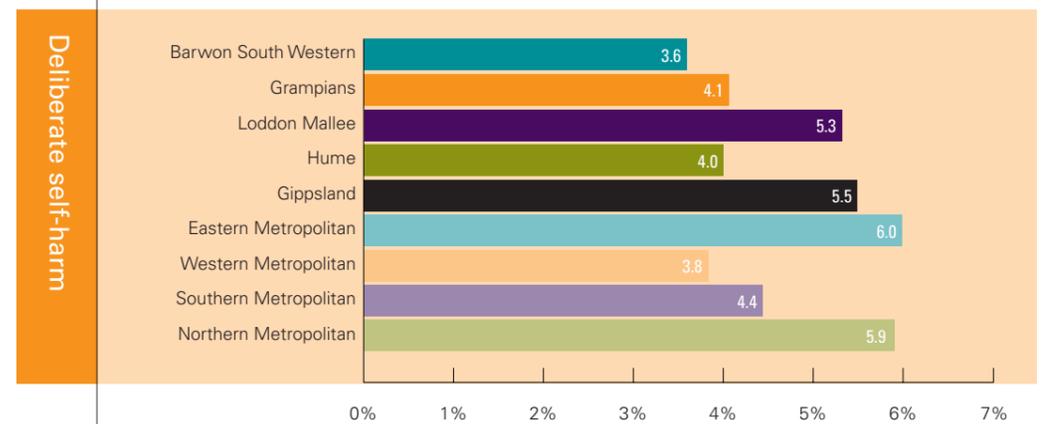


Regional Comparisons

Alcohol use by region

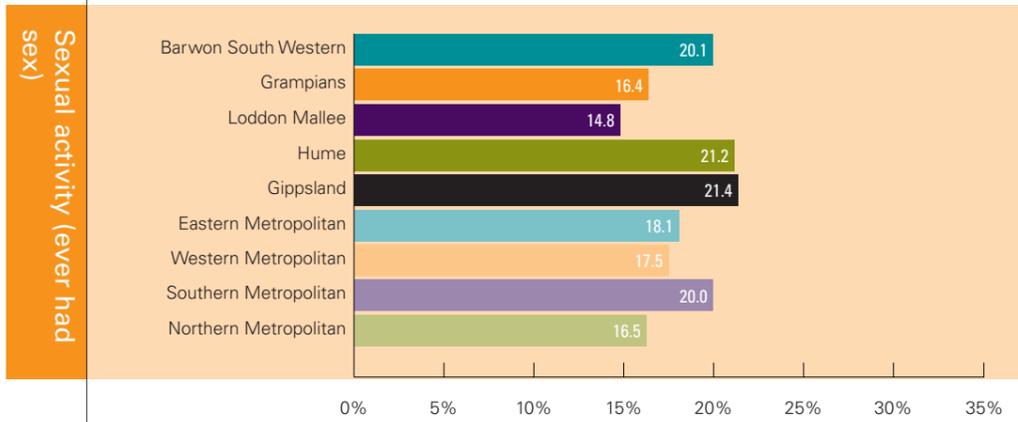


Deliberate self-harm by region

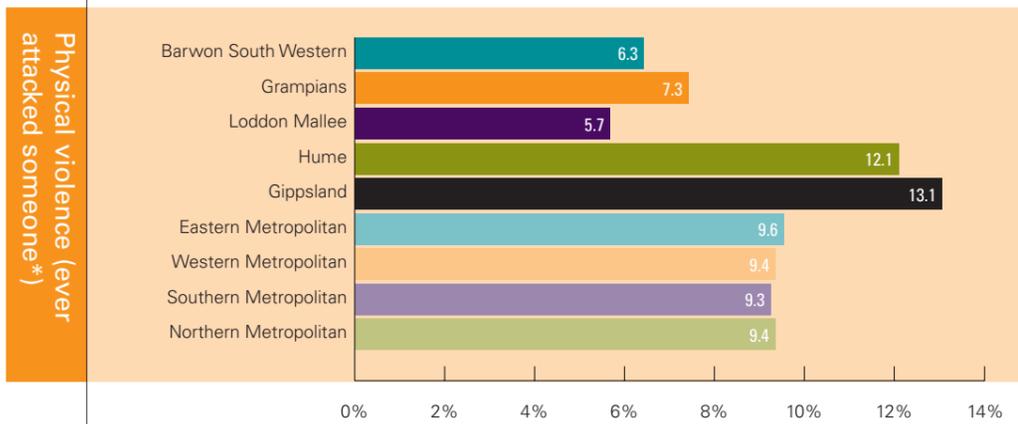


Regional Comparisons

Sexual activity by region



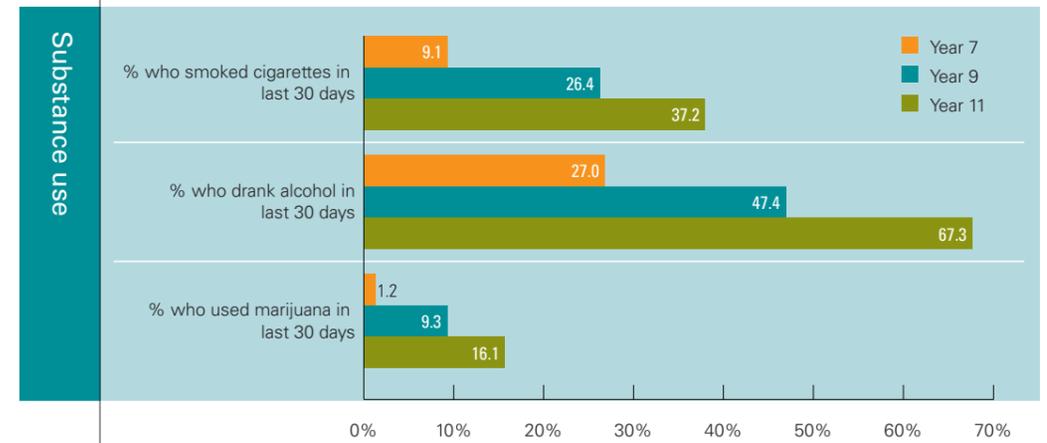
Physical violence by region



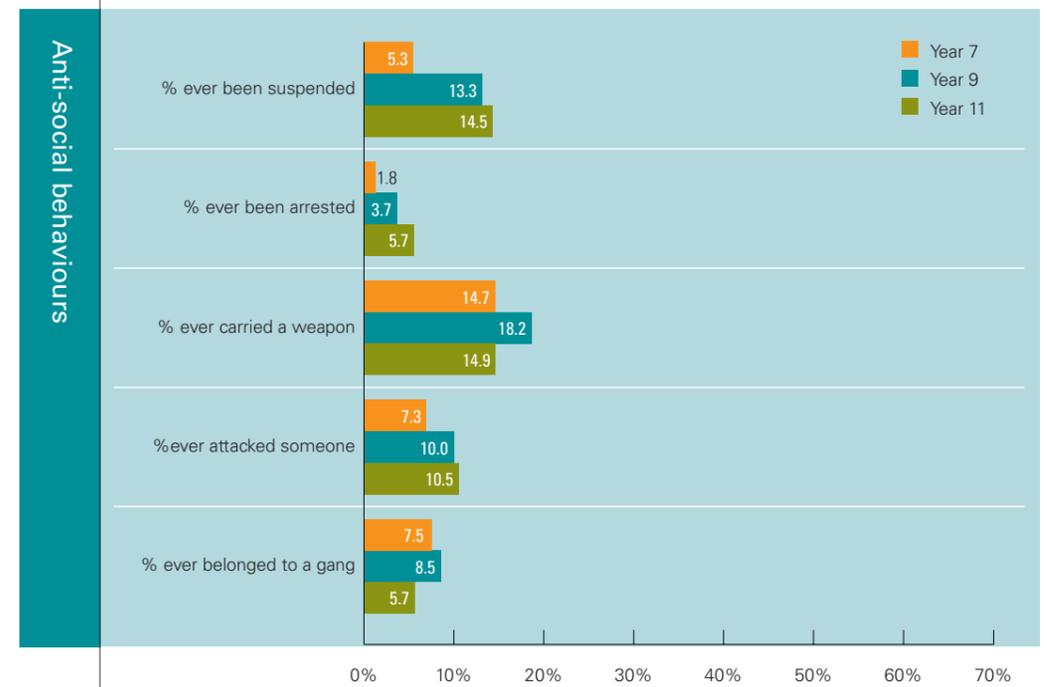
* Question was: have you ever attacked someone with the idea of seriously hurting them?

Age Comparisons

Substance use at year levels 7, 9 and 11



Anti-social behaviours at year levels 7, 9 and 11

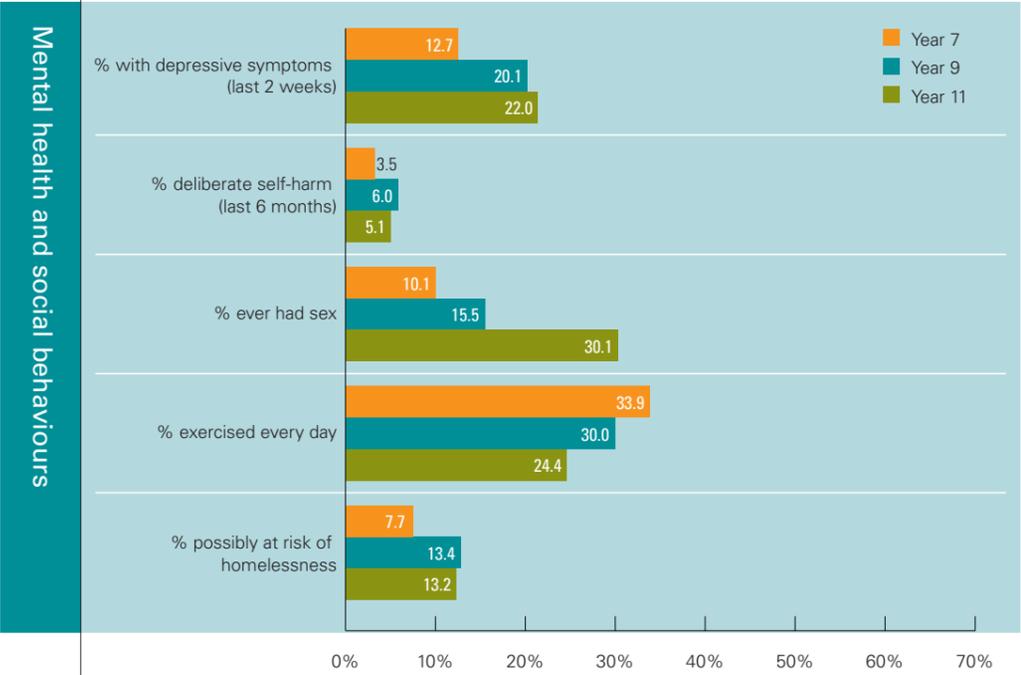


2.6

2.6

Age Comparisons

Mental health and social behaviours at year levels 7, 9 and 11

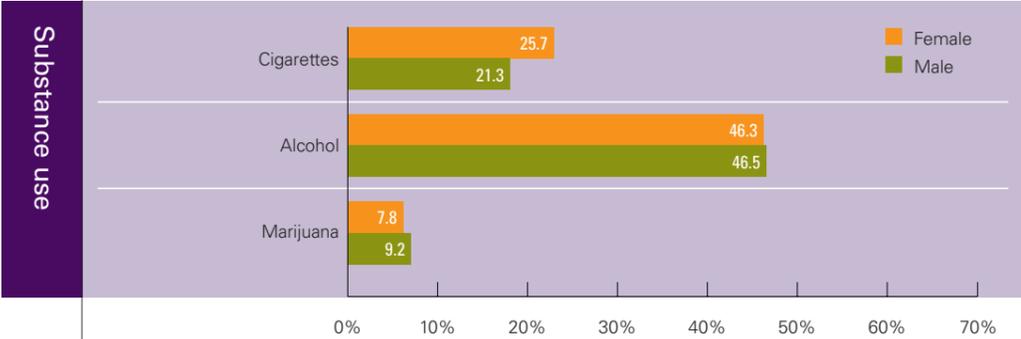


Note The above data is based on mean age range for the following year levels studied:

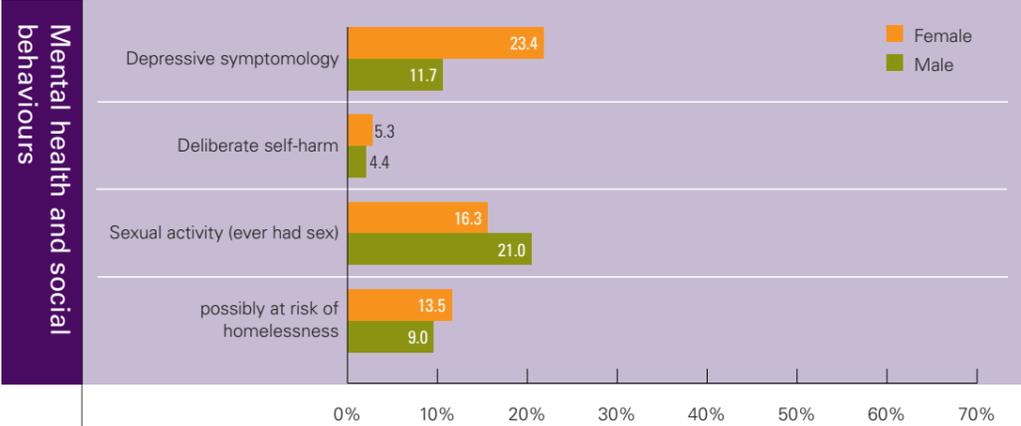
Year 7 – average age is 12 years
 Year 9 – average age is 14 years
 Year 11 – average age is 16 years

Gender Comparisons

Substance use for males and females

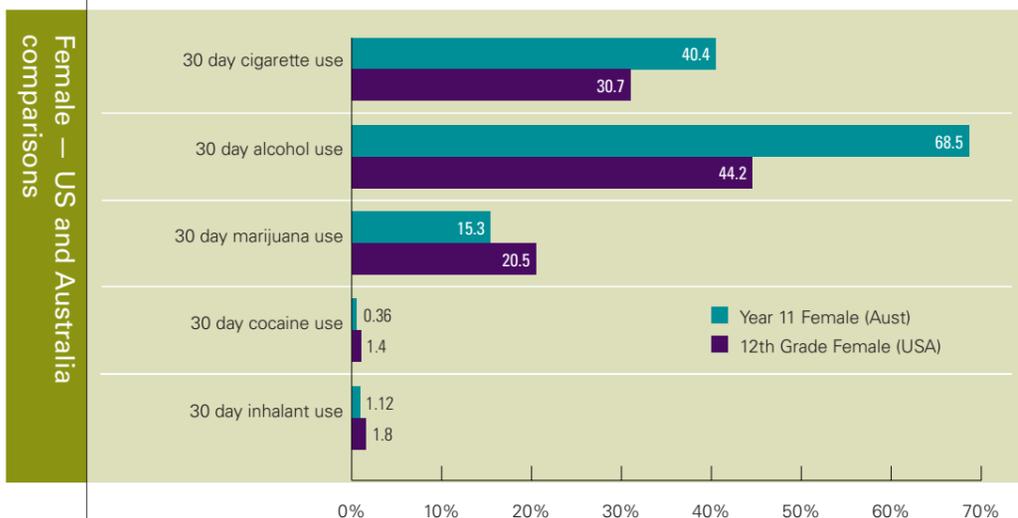
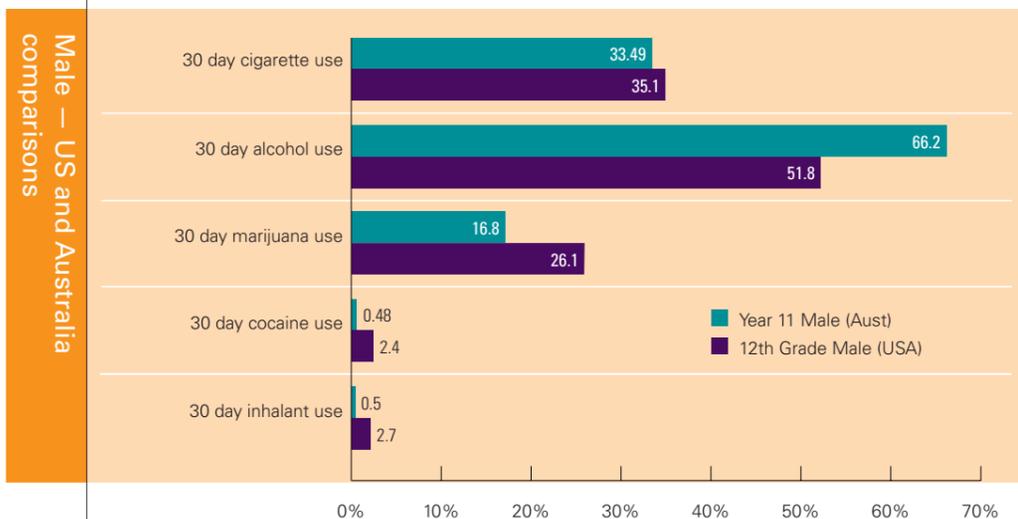


Mental health and social behaviours for males and females



United States and Australian comparisons

Substance use and anti-social behaviour in the US and Australia amongst 16-17 year olds



Related reports

Findings from the Survey regarding problem behaviours are broadly consistent with findings from previous studies.

Sexual behaviour was similar to those reported by Lindsay et al (1997).¹ Alcohol and tobacco use by young people appeared to be similar to the 1996 Victorian Schools Survey (VSS), although rates of marijuana and illicit drug use are lower.

¹ Lindsay, J, Smith, A & Rosenthal, D. (1997) Secondary students, HIV/AIDS and sexual health 1997, Monograph Series No.3. Carlton: La Trobe University, Centre for the Study of Sexually Transmissible Diseases

Following is a fictional example of an LGA, its risk and protective profiles and how these may be applied in a community setting.

Anytown

Anytown is an urban fringe community undergoing rapid population growth. Its profile demonstrates how the survey results can be used to assist local communities.

The risk profile (ie measurement of risk factors) for Anytown is high compared to the rest of the state and a number of protective factors are lower than the state mean.

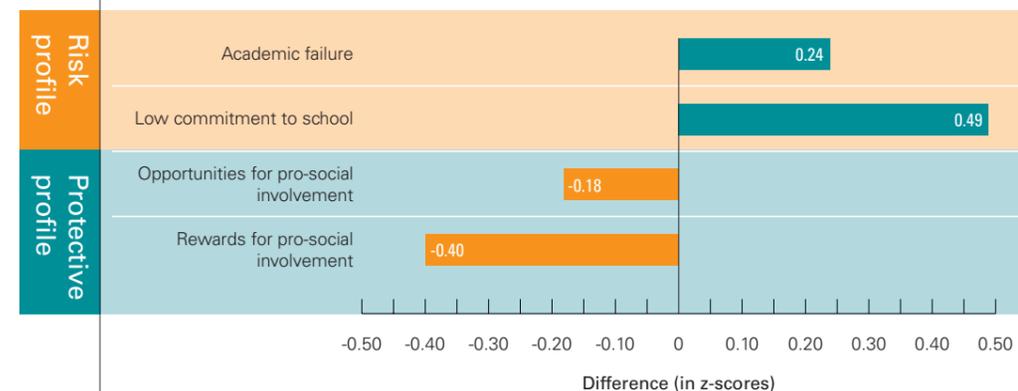
Note: all risk and protective factors are charted against a mean of zero for the state. Therefore, these graphs show how Anytown differs from the Victorian average.

School

Risk factors with the highest elevation within the school environment are low commitment to school and peer affirmation of anti-social behaviour. Academic failure is a further risk factor.

Importantly, the school protective factors profiles are low indicating that young people perceive that there are few rewards or opportunities for participating in school activities.

The problems tend to overshadow the elevated risk factors in other areas.

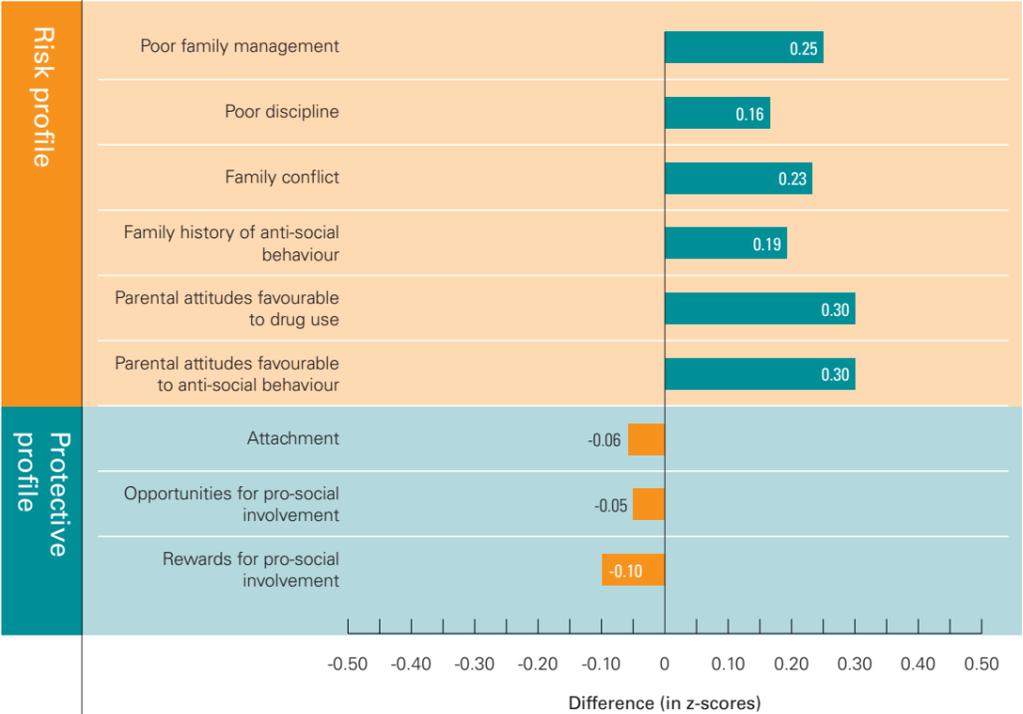


Community

The most prominent risk factor within the community is laws/norms favourable to drug use. While a number of risk and protective factors are close to the State average, the protective factor — rewards for positive involvement — is clearly lower than the state mean.

Family

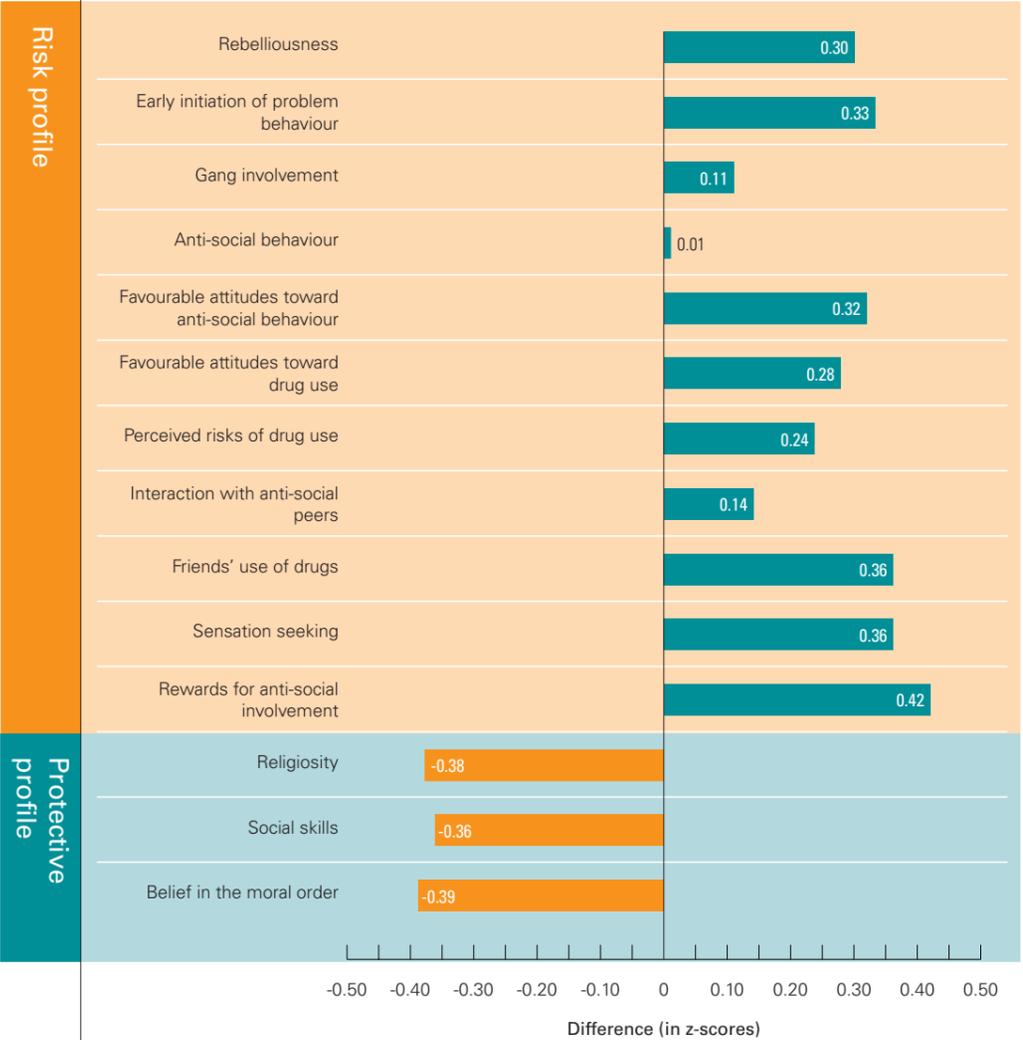
The high risk factors in the area of family are poor family management and discipline, family conflict, a family history of anti-social behaviour and favourable attitudes to drug use. However, many protective factors within the family are also high, which may offset some of the higher risk factors.



Peer/Individual

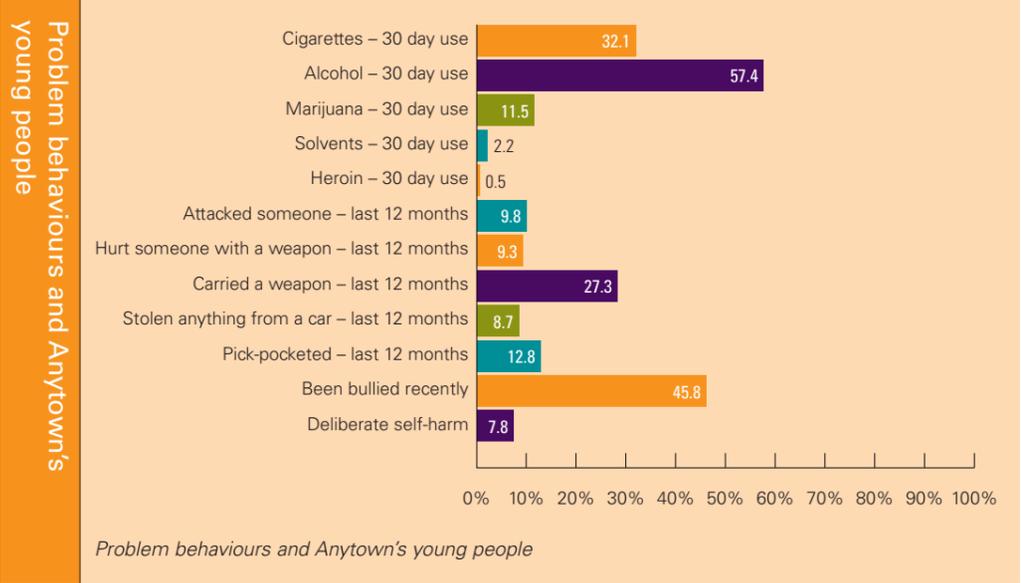
There is a similar pattern of factors in the risk profile here as for factors in the risk profiles for the school and family.

While rebelliousness and the incidence of thrill-seeking are high, social skills, moral beliefs and religious involvement are lower than the state mean.



Problem behaviours in Anytown

The Survey observed the following behaviours by young people in Anytown



The graph shows that:

- drug use (alcohol, cigarettes, marijuana, solvents) is higher than other areas although reported use of heroin is as rare as in other areas
- more young people are involved in physical violence (carrying a weapon) and theft than in other areas
- bullying is common
- rates of deliberate self-harm are higher than some areas

How should Anytown respond to the risk and protective factor profiles

Success in changing the community environment in Anytown is unlikely without the commitment and involvement of the local people.

The Victorian Government would wish to work in partnership with the local community, to strengthen community resilience through improved provision and co-ordination of prevention strategies.

A first step, therefore, for the Anytown community is to examine the information and consider an appropriate response. Local Government can take a facilitating role in this activity. Adopting the Communities that Care strategy might be considered. This may include more detailed surveys within the Local Government Area.

Alternatively, the community may have an existing framework that could be strengthened or it may even wish to explore a more innovative approach that has not been previously used.

Preventative services appropriate within schools could include intervention programmes which may change school organisation and behaviour-management programmes, school-based health education curricula, parent education, family intervention and peer education.

Programmes which focus on increasing school commitment and provide greater opportunities for student participation should be considered, thus impacting on a variety of problems including bullying.

Current services will need to be investigated before new programmes are introduced.

A Menu of Services

Improving the Lives of Young Victorians in Our Community — A Menu of Services is a companion report to the *Survey of Risk and Protective Factors*.

This report summarises services which have proved to be effective and serves as a guide for communities to choose the services that may be effective in responding to local risk and protective profiles.

One of the features of the *Menu of Services* is that the selection of services provided are applied with an evidence-based approach.

The *Survey of Risk and Protective Factors* was conducted in 1999 by the Centre for Adolescent Health in Melbourne, Victoria with funding from the Department of Human Services.

The aims of the survey were:

1. To test the relationship between risk and protective factors and problem behaviours
2. To provide estimates of the prevalence of risk and problem behaviours in a sample of Victorian secondary school students in Year 7 (age 12), Year 9 (age 14), and Year 11 (age 16)
3. To provide state, metropolitan and non-metropolitan averages of risk and protective factors against which individual metropolitan LGAs and DHS regions can be compared.

The Survey was conducted in a random sample of 150 metropolitan and 60 non-metropolitan Government, Catholic and independent schools. Just under 9,000 Year 7, Year 9, and Year 11 students completed the questionnaire. That is about 70% of students asked to participate.

A Research Project Advisory Committee comprising key stakeholders in the delivery of adolescent services and programmes provided guidance on the survey's development and implementation.

Approval for the study was given by: Royal Children's Hospital Research into Human Ethics Committee, Department of Education, Catholic Education Office, the principals of participating schools and individual parents and students.

Pilot Survey

Questions measuring risk and protective factors, substance use and anti-social behaviours were adapted from the US Communities that Care (CTC)[®] Youth Survey. Adaptations were made to ensure questions and wording were culturally appropriate for Australian young people. The questions were then piloted with 450 Year 9 students in 30 secondary schools in Melbourne. The pilot concluded that both questions and methodology used were sound and appropriate to the Australian context.

Given that 30% of students did not participate in the survey, a teacher's survey was conducted to examine possible differences between respondents and non-respondents in terms of some school behaviours. This survey concluded that, although there were some differences between those who completed the survey and those that who did not participate, these differences would not impact significantly on the outcomes of the main survey.

A third group of young people who do not attend school have not been surveyed. Their exclusion may impact on some Local Government Areas more than others.

The Research Team

The research team for the *Survey for Risk and Protective Factors* comprised of:

Professor George Patton, director of the Centre, a psychiatric epidemiologist with extensive experience in the epidemiology of mental health and health risk-behaviours in adolescence.

Associate Professor John Toumbourou, a psychology graduate working in public health with a focus on drug and alcohol prevention, treatment and evaluation.

Dr Lyndal Bond, head of the Research Unit at the Centre, and an epidemiologist with a background in psychometrics, research methodology and survey research.

Ms Lyndal Thomas, a statistician and the survey manager. Ms Thomas was involved in all aspects of the project from questionnaire design, co-ordination of research assistants and data collection and statistical analysis.

The Centre for Adolescent Health

The Centre for Adolescent Health is at the forefront of Australian prevention research and is the country's leading centre in adolescent health. Its mission is to improve the health of young people through research, health promotion, training, advocacy and clinical services. It is now leading the way in the integration of research with programme development and imparting this knowledge to those working with young people.

Over the past decade, the Centre has conducted extensive research into family, community and childhood influences on the health and development of young Australians. This research has included longitudinal studies of adolescents and looks at the effectiveness of intervention in schools, families and communities to promote the social development and well-being of young people.

The information provided by *The Survey of Risk and Protective Factors* is applicable to government and non-government services, community agencies and will be of broad interest to families in Victoria and its citizens.

It gives key decision-makers a strong evidence-based framework and helps to identify areas of need within the Victorian community. It provides a tool for integrated and co-ordinated planning between government agencies and community organisations for service development.

Changes in the trends of young people's behaviour, such as drug and alcohol use and homelessness have major implications for the future services for young people. The data show that the problem behaviours in which young people engage are not the sole responsibility of the young people themselves. These behaviours are influenced by a network of family, community, school, and peer-group factors, indicating that an integrated approach to community building will be needed.

The Victorian Government is aware of the need for an integrated approach to planning and community development. Through this approach, resources can be more appropriately directed and the programmes established for communities and young people are more likely to bring optimal results and strengthen the community infra-structure.

At the regional and local government level, the unique profiles of young people's attitudes, beliefs and behaviours that this survey provides will assist decision makers to direct attention toward priority areas. Local councils and non-government services will have a critical role to play, since many of the risk and protective factors identified in this survey highlight local issues.

At a state-wide level, the survey reinforces the Government's intention to direct increased resources towards early intervention and prevention programmes. It also supports the Government's plans to strengthen and build communities.

A recommended strategy: Communities that Care

International experience provides a guide to the effective use of this data.

One of the approaches being examined is Communities that Care, which provided the basis for this survey, with appropriate modifications for Australian conditions.

Communities that Care has been assessed as an effective strategy to address risk and protective factors. The Government is considering the establishment of Communities that Care in Victoria.

What is Communities that Care?

Communities that Care (CTC) is a local community based prevention strategy. The strategy aims to bring together community leaders and agencies to work on preventing social problems faced by young people and families. These problems include drug abuse, juvenile delinquency and crime, depression and homelessness.

The strategy is based on more than 10 years of research into the social factors which exist in the community that place young people at increased risk of developing problem behaviours during their adolescence. It has been applied successfully in more than 400 communities in the United States and is also being trialed in the United Kingdom.

The Communities that Care strategy uses local evidence, including the survey, of 'risk' and 'protective' factors to implement prevention strategies within communities. The system tailors proven programmes for early intervention for these local communities to address the causes of young people's problem behaviours.

The key features of CTC are:

- A systematic approach to prevention and early intervention which allows proactive planning
- A programme soundly based on research evidence of what makes young people resilient and what places them at risk of developing problem behaviours
- A tailored approach for each community which emphasises early intervention rather than crisis responses
- A programme that builds skills and expertise in communities for effective prevention and early intervention strategies
- Implementation of proven prevention programmes which impact on risk and protective factors

The CTC model

The CTC model is implemented in five stages:

- 1 Identification of key leaders within organisations and communities
- 2 Establishment of a community prevention board
- 3 Assessment of risk and protective factors using a school survey
- 4 Development of a list of evaluated interventions that target risk and protective factors
- 5 Implementation of approved and selected community interventions

After an extensive review of Victorian youth services and international approaches to problems affecting young people, Communities that Care has been identified as one of the appropriate strategies for development in Victoria.

With the information from this report and the Survey, the Government can now move toward a to achieving a better future for Victoria's young people.

Substance use in past 30 days (%)

Substance use in past 30 days

Metropolitan LGA	Alcohol		Cigarettes		Marijuana		Any other drugs	
	%	95% CI)*	%	(95% CI)	%	(95% CI)	%	(95% CI)
Eastern Metropolitan								
Boroondara (C)	49	(41 - 57)	22	(13 - 31)	12	(3 - 20)	7	(2 - 13)
Knox (C)	57	(48 - 65)	31	(20 - 42)	17	(2 - 33)	6	(0 - 11)
Manningham (C)	39	(29 - 48)	18	(11 - 26)	5	(1 - 9)	6	(5 - 6)
Maroondah (C)	50	(41 - 60)	24	(16 - 31)	8	(4 - 12)	5	(2 - 9)
Monash (C)	47	(44 - 51)	19	(15 - 22)	6	(2 - 10)	4	(2 - 6)
Whitehorse (C)	44	(35 - 53)	24	(14 - 33)	9	(7 - 11)	6	(4 - 8)
Yarra Ranges (S)	52	(41 - 63)	28	(18 - 38)	11	(1 - 21)	6	(2 - 9)
Northern Metropolitan								
Banyule (C)	46	(35 - 57)	26	(17 - 35)	5	(1 - 10)	4	(0 - 7)
Darebin (C)	38	(29 - 47)	24	(19 - 29)	10	(3 - 17)	5	(1 - 8)
Hume (C)	40	(30 - 49)	21	(14 - 27)	8	(5 - 12)	3	(0 - 5)
Moreland (C)	38	(29 - 46)	22	(16 - 28)	4	(1 - 7)	6	(1 - 10)
Nillumbik (S)	50	(38 - 62)	20	(12 - 28)	7	(1 - 12)	2	(0 - 5)
Whittlesea (C)	42	(33 - 51)	25	(20 - 31)	4	(1 - 7)	2	(1 - 4)
Yarra (C)	42	(31 - 52)	18	(13 - 22)	12	(1 - 22)	3	(0 - 5)
Southern Metropolitan								
Cardinia (S)	53	(47 - 59)	22	(10 - 33)	10	(3 - 17)	4	(2 - 5)
Casey (C)	41	(36 - 47)	24	(17 - 32)	8	(2 - 13)	5	(0 - 10)
Frankston (C)	49	(42 - 57)	31	(23 - 39)	12	(5 - 18)	5	(2 - 9)
Glen Eira (C)	50	(39 - 60)	26	(6 - 46)	13	(4 - 22)	5	(0 - 12)
Greater Dandenong (C)	29	(18 - 39)	18	(11 - 24)	5	(1 - 8)	3	(2 - 5)
Kingston (C)	49	(43 - 55)	22	(14 - 29)	10	(7 - 12)	6	(3 - 8)
Mornington Peninsula (S)	54	(41 - 66)	28	(18 - 38)	10	(6 - 13)	5	(1 - 9)
Port Phillip (C)	54	(43 - 64)	24	(12 - 36)	14	(12 - 16)	7	(4 - 11)
Stonnington (C)	44	(35 - 54)	21	(19 - 24)	10	(4 - 16)	2	(0 - 4)
Western Metropolitan								
Brimbank (C)	38	(33 - 43)	22	(14 - 29)	8	(1 - 15)	4	(0 - 8)
Hobsons Bay (C)	29	(17 - 40)	14	(7 - 21)	2	(0 - 6)	3	(0 - 5)
Maribyrnong (C)	33	(20 - 47)	23	(19 - 28)	7	(2 - 12)	6	(3 - 10)
Melbourne (C)	46	(33 - 60)	23	(10 - 36)	11	(2 - 19)	3	(2 - 5)
Melton (S)	59	(46 - 72)	31	(21 - 41)	11	(1 - 20)	7	(3 - 10)
Moonee Valley (C)	47	(38 - 55)	25	(19 - 30)	8	(3 - 12)	4	(2 - 6)
Wyndham (C)	39	(28 - 50)	23	(8 - 37)	8	(3 - 13)	4	(0 - 8)
Total Metropolitan	45	(43 - 47)	23	(22 - 25)	9	(8 - 10)	5	(4 - 5)

*95% Confidence Intervals (CIs) are reported for each percentage estimate. A confidence interval provides an indication of precision. If we were to do 100 similar surveys, we would be sure that the estimate of each percentage for 95 of these studies would lie within the confidence interval shown here.

Melbourne's 31 Local Government Areas in Profile

4.1

Anti-social behaviour (%)

Anti-social behaviour	Sold illegal drugs	Attacked someone	Shoplifting	Graffiti	Carried a weapon
	% (95% CI)	% (95% CI)	% (95% CI)	% (95% CI)	% (95% CI)
Metropolitan LGA					
Eastern Metropolitan					
Boroondara (C)	4 (0 - 8)	5 (1 - 9)	22 (13 - 31)	16 (10 - 21)	11 (5 - 18)
Knox (C)	5 (0 - 10)	13 (2 - 24)	40 (27 - 53)	22 (10 - 34)	24 (17 - 32)
Manningham (C)	2 (0 - 4)	9 (5 - 12)	18 (13 - 24)	15 (10 - 19)	15 (6 - 24)
Maroondah (C)	3 (2 - 4)	10 (6 - 14)	24 (19 - 29)	16 (13 - 19)	18 (12 - 23)
Monash (C)	3 (0 - 5)	12 (7 - 17)	27 (19 - 34)	13 (8 - 18)	21 (12 - 30)
Whitehorse (C)	2 (0 - 4)	5 (3 - 8)	22 (12 - 31)	14 (10 - 18)	16 (6 - 26)
Yarra Ranges (S)	3 (0 - 7)	7 (0 - 16)	31 (26 - 36)	19 (14 - 24)	21 (11 - 31)
Northern Metropolitan					
Banyule (C)	4 (1 - 6)	10 (5 - 14)	27 (21 - 33)	18 (12 - 24)	19 (15 - 24)
Darebin (C)	3 (0 - 7)	10 (0 - 21)	25 (11 - 39)	25 (21 - 28)	15 (5 - 25)
Hume (C)	4 (1 - 6)	10 (7 - 12)	24 (20 - 29)	22 (16 - 28)	17 (14 - 20)
Moreland (C)	3 (0 - 7)	12 (7 - 16)	24 (15 - 32)	20 (14 - 26)	27 (15 - 39)
Nillumbik (S)	3 (0 - 6)	5 (0 - 11)	20 (9 - 30)	16 (13 - 19)	13 (9 - 18)
Whittlesea (C)	3 (2 - 4)	5 (2 - 7)	17 (8 - 26)	19 (12 - 26)	15 (9 - 21)
Yarra (C)	3 (1 - 5)	8 (0 - 15)	20 (18 - 21)	18 (8 - 28)	11 (0 - 22)
Southern Metropolitan					
Bayside (C)	8 (0 - 17)	9 (3 - 6)	27 (16 - 38)	17 (5 - 29)	20 (7 - 32)
Cardinia (S)	5 (0 - 10)	7 (3 - 12)	28 (19 - 37)	17 (13 - 21)	16 (10 - 22)
Casey (C)	4 (0 - 7)	9 (7 - 11)	26 (19 - 33)	18 (13 - 22)	15 (13 - 17)
Frankston (C)	3 (0 - 5)	11 (7 - 15)	32 (23 - 41)	21 (13 - 30)	22 (15 - 29)
Glen Eira (C)	5 (1 - 8)	14 (2 - 26)	33 (16 - 49)	23 (4 - 42)	18 (10 - 25)
Greater Dandenong (C)	2 (0 - 5)	7 (2 - 12)	16 (12 - 21)	12 (10 - 13)	13 (9 - 17)
Kingston (C)	5 (2 - 7)	5 (1 - 10)	26 (21 - 30)	16 (14 - 18)	8 (3 - 13)
Mornington Peninsula (S)	3 (1 - 5)	6 (3 - 9)	28 (17 - 39)	15 (8 - 22)	18 (13 - 22)
Port Phillip (C)	7 (2 - 11)	9 (6 - 11)	30 (27 - 33)	23 (6 - 40)	13 (8 - 18)
Stonnington (C)	3 (0 - 8)	5 (1 - 8)	27 (22 - 32)	12 (8 - 15)	10 (0 - 20)
Western Metropolitan					
Brimbank (C)	1 (0 - 3)	8 (3 - 13)	21 (15 - 26)	18 (11 - 25)	8 (4 - 11)
Hobsons Bay (C)	2 (0 - 4)	5 (0 - 10)	12 (4 - 20)	8 (4 - 11)	8 (0 - 18)
Maribyrnong (C)	3 (1 - 5)	7 (5 - 9)	28 (16 - 41)	23 (17 - 28)	19 (11 - 26)
Melbourne (C)	4 (0 - 8)	10 (6 - 15)	20 (15 - 25)	17 (8 - 26)	17 (7 - 26)
Melton (S)	3 (0 - 6)	10 (6 - 14)	26 (9 - 41)	21 (15 - 26)	25 (20 - 30)
Moonee Valley (C)	4 (1 - 6)	8 (3 - 12)	21 (13 - 28)	21 (15 - 26)	13 (4 - 22)
Wyndham (C)	1 (0 - 3)	11 (7 - 15)	25 (19 - 31)	18 (12 - 25)	13 (8 - 19)
Total Metropolitan	3 (3 - 4)	8 (7 - 9)	25 (23 - 26)	17 (16 - 19)	16 (14 - 17)

Melbourne's 31 Local Government Areas in Profile

4.1

Mental health & social factors (%)

Mental health & social factors	Depressive symptoms	Deliberate self-harm	Sexually active	Possibly at risk of homelessness
	% (95% CI)	% (95% CI)	% (95% CI)	% (95% CI)
Metropolitan LGA				
Eastern Metropolitan				
Boroondara (C)	13 (8 - 19)	5 (2 - 8)	16 (9 - 24)	12 (7 - 16)
Knox (C)	15 (0 - 31)	8 (0 - 15)	28 (20 - 35)	15 (4 - 26)
Manningham (C)	12 (7 - 17)	4 (2 - 5)	19 (5 - 32)	9 (7 - 11)
Maroondah (C)	19 (10 - 27)	5 (1 - 9)	25 (16 - 35)	12 (7 - 17)
Monash (C)	12 (7 - 16)	6 (4 - 9)	8 (5 - 12)	8 (3 - 13)
Whitehorse (C)	20 (16 - 24)	7 (4 - 11)	13 (4 - 22)	10 (6 - 14)
Yarra Ranges (S)	23 (15 - 31)	7 (2 - 11)	26 (13 - 37)	17 (12 - 23)
Northern Metropolitan				
Banyule (C)	21 (15 - 27)	7 (4 - 9)	17 (6 - 28)	12 (8 - 16)
Darebin (C)	21 (12 - 30)	7 (4 - 9)	21 (13 - 28)	14 (7 - 21)
Hume (C)	12 (8 - 16)	6 (2 - 10)	17 (10 - 23)	11 (2 - 19)
Moreland (C)	21 (16 - 26)	6 (1 - 10)	27 (0 - 57)	14 (9 - 19)
Nillumbik (S)	16 (8 - 22)	7 (0 - 17)	12 (7 - 17)	8 (4 - 11)
Whittlesea (C)	20 (13 - 27)	5 (3 - 8)	12 (6 - 17)	11 (6 - 16)
Yarra (C)	14 (1 - 27)	2 (0 - 5)	16 (5 - 26)	6 (3 - 8)
Southern Metropolitan				
Bayside (C)	14 (5 - 23)	5 (1 - 10)	29 (11 - 47)	10 (3 - 17)
Cardinia (S)	17 (10 - 24)	5 (3 - 8)	14 (1 - 27)	4 (1 - 7)
Casey (C)	23 (19 - 26)	3 (0 - 6)	22 (11 - 33)	13 (9 - 16)
Frankston (C)	18 (9 - 27)	7 (3 - 12)	25 (15 - 34)	14 (8 - 20)
Glen Eira (C)	26 (12 - 41)	5 (0 - 16)	22 (7 - 38)	22 (6 - 38)
Greater Dandenong (C)	31 (23 - 38)	4 (1 - 6)	18 (12 - 25)	11 (7 - 16)
Kingston (C)	16 (11 - 20)	3 (2 - 4)	16 (9 - 22)	10 (9 - 11)
Mornington Peninsula (S)	18 (12 - 25)	7 (3 - 10)	25 (19 - 31)	15 (8 - 21)
Port Phillip (C)	22 (9 - 36)	4 (1 - 7)	17 (3 - 31)	11 (4 - 17)
Stonnington (C)	16 (14 - 19)	3 (0 - 5)	14 (7 - 21)	9 (2 - 16)
Western Metropolitan				
Brimbank (C)	14 (9 - 19)	2 (1 - 4)	15 (5 - 25)	8 (6 - 10)
Hobsons Bay (C)	19 (14 - 24)	5 (0 - 10)	20 (8 - 30)	5 (2 - 7)
Maribyrnong (C)	16 (12 - 21)	3 (0 - 6)	22 (12 - 32)	14 (3 - 24)
Melbourne (C)	15 (10 - 21)	2 (0 - 5)	17 (11 - 22)	7 (1 - 13)
Melton (S)	17 (9 - 26)	7 (4 - 11)	17 (0 - 37)	13 (4 - 21)
Moonee Valley (C)	18 (11 - 24)	3 (1 - 4)	19 (10 - 28)	11 (7 - 14)
Wyndham (C)	22 (14 - 29)	7 (0 - 14)	18 (5 - 30)	11 (5 - 16)
Total Metropolitan	18 (17 - 20)	5 (4 - 6)	18 (16 - 20)	11 (10 - 12)

Melbourne's 31 Local Government Areas in Profile

4.1

Title?

Title?

Metropolitan LGA	Risk factors % with >9 elevated risk factors		Protective factors % with 0-1 elevated protective factors	
	%	(95% CI)	%	(95% CI)
Eastern Metropolitan				
Boroondara (C)	28	(20 - 36)	42	(29 - 56)
Knox (C)	38	(24 - 52)	51	(35 - 68)
Manningham (C)	23	(15 - 31)	37	(25 - 48)
Maroondah (C)	27	(16 - 38)	55	(45 - 65)
Monash (C)	27	(20 - 34)	45	(37 - 52)
Whitehorse (C)	29	(23 - 34)	44	(32 - 55)
Yarra Ranges (S)	30	(20 - 41)	53	(41 - 65)
Northern Metropolitan				
Banyule (C)	28	(19 - 37)	53	(45 - 62)
Darebin (C)	24	(11 - 37)	45	(32 - 58)
Hume (C)	27	(21 - 32)	50	(45 - 55)
Moreland (C)	29	(21 - 37)	51	(43 - 59)
Nillumbik (S)	29	(15 - 43)	53	(29 - 76)
Whittlesea (C)	25	(15 - 34)	40	(32 - 48)
Yarra (C)	23	(15 - 31)	45	(40 - 50)
Southern Metropolitan				
Bayside (C)	35	(10 - 60)	53	(34 - 72)
Cardinia (S)	30	(21 - 39)	44	(41 - 47)
Casey (C)	32	(26 - 38)	45	(32 - 58)
Frankston (C)	41	(31 - 51)	54	(50 - 58)
Glen Eira (C)	41	(21 - 61)	54	(43 - 64)
Greater Dandenong (C)	22	(20 - 25)	44	(39 - 49)
Kingston (C)	25	(22 - 28)	42	(32 - 52)
Mornington Peninsula (S)	35	(29 - 42)	56	(45 - 67)
Port Phillip (C)	41	(28 - 54)	63	(52 - 73)
Stonnington (C)	26	(18 - 35)	35	(24 - 47)
Western Metropolitan				
Brimbank (C)	22	(13 - 30)	33	(25 - 41)
Hobsons Bay (C)	11	(5 - 18)	37	(28 - 46)
Maribyrnong (C)	26	(19 - 34)	48	(36 - 61)
Melbourne (C)	26	(19 - 34)	44	(31 - 57)
Melton (S)	46	(36 - 56)	60	(51 - 69)
Moonee Valley (C)	25	(17 - 33)	40	(32 - 49)
Wyndham (C)	26	(21 - 31)	51	(45 - 57)
Total Metropolitan	27	(23 - 31)	47	(45 - 49)

Acknowledgments

Access to the Survey of Risk and Protective Factors may be obtained at www.dhs.vic.gov.au/commcare and municipal libraries.

Acknowledgments

CENTRE FOR ADOLESCENT HEALTH, MELBOURNE, VICTORIA, AUSTRALIA

RISK AND PROTECTIVE FACTORS RESEARCH PROJECT ADVISORY COMMITTEE

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The Community Care Division of Human Services would like to thank the young people who participated in the survey, and the school principals, student welfare co-ordinators and classroom teachers for their assistance in the administration of the survey.

This document is a summary report of the most important findings to emerge from a Victoria-wide survey of 9,000 young people.

The survey confirms that risk factors, such as family conflict or community disorganisation and protective factors, such as community attachment or belief in moral values, play a significant role in the lives of Victoria's young people.

The most comprehensive of its kind in Australia, the survey details the problem behaviours which most affect our young people, and the risk and protective factors that influence these behaviours. Profiles of Local Government Areas and Regional areas are also provided.

The survey findings suggest far-reaching implications for Victorian communities and our young people. They form strong evidence for building government and community responses to assist young people, families, schools and communities.

With a move towards a prevention and an early intervention approach, the Victorian Labor Government endorses the framework outlined in this summary and plans to use the data as a basis for addressing the needs of young people.