[Stuart Malcher] Importantly, can I start also by acknowledging we're in DCJ central office, which is in Ashfield, which is located on the lands of the First Nations people, being the Wangal people of the Eora nation and I acknowledge and pay my deepest respects to all First Nations elders past and present and to new and emerging future emerging leaders, and obviously, extend that respect to our Aboriginal colleagues joining us on the line today. So again, just by way of a small amount of background for anyone who's not signed up for day three. Obviously on Monday, we spoke about Child Development, Wellbeing and Children with a Disability. On Tuesday, we had Cultural Connections and Family Time. Today, the focus is Education, Youth Justice and tomorrow will bring it home with Casework and Support, and so, these Roundtables have been organised instead of last year's annual Advisory Group. Now that we've got the 16 research papers from our national and international leading academics, this is our opportunity with our Evidence to Action Working Group to really unpack and discuss those key findings and implications for policy, for practice and for our service system. So in a moment I will introduce, we've got three speakers today. So, you know, small win, we get a little bit of time back in our calendar. Then we have the first two meetings. We'll hear from our leading academics. I'll introduce them and then they'll provide us with the key findings from their research, and then at the end of that, we will have a discussion where we can hopefully tease out some concrete actions for further consideration. So the problem statement that we've posed to frame today's discussion is that education is key to breaking the cycle of disadvantage. How do multiple agencies work effectively in partnership to achieve a child's case plan goal, and to help us give full consideration to that question, I'll introduce our three presenters. So first we're going to hear from Dr. Kath McFarlane. Kath is going talk to us on Offending. Kath's the Director of Kath McFarlane Consulting and is a leading expert in the involvement of children in out of home care in the criminal justice system, drawing on her wealth of industry and academic experience, she provides consultancy independent research services to government, non-government and community organisations. After Kath, we will hear from Dr. Michelle Townsend on Educational Outcomes and just a bit of background. Michelle is a Senior Research Fellow in the School of Psychology at the University of Wollongong. Her research focus is on supporting children, young people with childhood adversity and mental health issues to obtain effective support within the school, health and child protection services and therefore achieve better outcomes, and then finally, we have Dr. Miriam Maclean, again, talking to us about educational outcomes. Miriam works with the Australian Centre for Child Protection, the University of South Australia and Miriam's research is focused to understand and improve wellbeing, outcomes for young people involved in the child protection system. So massive thank you to our three presenters which is more than enough for me. I will hand over to Dr. Kath McFarlane, thank you.

[Kath McFarlane] Thank you and good morning to everybody. I've only got 10 minutes, so I'll launch right into it and I look forward to your questions at the end. Basically the question here is around what do we do with young people who are at risk of offending before they come into FACS care, once they're into that care system and once they leave. So this research was to try and understand the role or the influence of the care system cohort within the justice system and in order to do that, we had access to a dataset that comprised material from the Bureau of Crime Statistics and Research and Corrective Services, Juvenile Justice, etc, and of course, material administrative data that was collected from Family and Community Services. So what we did is we had a look at the POCLS cohort who were aged 10 years to 18 years at some point during our follow up period, and what we found was that unlike the representation of children in the general community, in the criminal justice system, that over 21% of the young people in the POCLS cohort had a recorded offence within the timeframe, and almost 7% of those had a custodial episode. Bearing in mind, these are only the children who were at the age of criminal responsibility, age 10 and into adulthood at which we cut off at 18. So what we know from the international and national literature is that there is an association between out of home care and offending but is a very vexed question as to what leads to that. Whether the offending occurs before a young person comes into care, whether the care system itself has a role and if so, how does it contribute to offending by young people, and obviously importantly, what can be done to assist those young people who are caught up in that crossover between the care system and offending. So we looked at a range of factors and the first thing I'd just like to point out is the limitations of the data and the way the study is designed is difficult when addressing issues around offending because we didn't have access to the personal circumstances of the individual children and particularly the factors that give rise to the immediate proceeding issues that happen before they offend. So for example, we didn't know if we didn't have access to a fact sheet that might indicate that an individual young person was responding to provocation from another child or a worker, whether they had been subject to over policing within a particular care institution, whether they had committed a whole range of offences beforehand or the fact circumstances that might lead you to go, ah, I see what's happening in that individual young person's life. However, from the de-identified administrative data and the crossover with the FACS data, we were able to compare some things and to understand what was happening. So, as I said, we found that over 21% of the group in the age range had a recorded offence. To give you some comparison, just 5%, according to the Australian Bureau of Statistics, that about 5% of young people aged 14 to 18 are actually involved in the criminal justice system from the Australian population. So there's an over-representation there. It's really hard to compare like with like because there aren't any consistent studies or definitions and it basically means you're kind of grabbing for the closest analogy or what you can find, there's limitations with every study that's been done, and that highlights a key policy problem which is, but there is no consistent identification of young people who have care experience and their crossover into offending. It varies from study to study, State to State. This is a very serious policy problem that is the first thing that needs to be addressed. What we found when we looked at the crossover experiences is that we found that there were some key factors and points of concern that might give rise to interest for policy makers. The first of those was the association between removal into care and the immediate aftermath of placement into the care system, and what we found was that in the six months before a child entered the care system formally and the six months after was the highest rate of offending of the young people that did offend. Now, again, there's a lot of discussion and literature around why this may be. It may be that and problematically, that the care system is being used as a defacto net in response to offending. So essentially, because care is regarded as less intrusive or a safer option or a better option than being involved with the justice system, it's often a point at which out of home care comes into play and children who offend are removed at that point and taken into care. However, there's an alternate view, the alternate view which we put out there for consideration but which we were unable to ascertain, which it was in this study, is that the process of child protection or care involvement, care proceedings actually facilitate circumstances that give rise to young people's offending. So it's a cry for help from young people or it is a resentment or a reaction to the removal process. Another related factor is that once they are in care, that things like particularly that's been recognised by the protocol to reduce the re-offending in residential care is that circumstances of the care system itself make it more likely that young people are going to be exposed to the criminal justice system, and that's through the over-reliance by the care system on Police to resolve what is regarded as challenging behaviour or behavioural disturbances that the surveillance and the mere presence of supervision and attention within the care system means that breaches or minor offending or behaviour is likely to come to attention to Police in a way that it might not in a family home, and another reaction is that there's a lower tolerance for behaviour and so, rather than families absorbing that offending, it basically becomes something that the Police are involved within young people can get into the justice system in that way. Whatever the reason is, they are all incredibly important from a policy perspective and they need to be unpicked because there are things that can be done by the care system and the justice system that could reduce that likelihood or risk factor situation six months before and six months after the formal care proceedings commenced and finished. Another big issue that we found that was of great concern was the association between maltreatment and offending. Now that's nothing new, everybody knows that there is quite an association between ROSH, reports of serious harm and offending. However, what we did in our study was that we distinguished between ROSH reports that were made pre-care, so the one that you would anticipate of course, helped lead to the care proceedings and those that happened in the care system, once the child had been removed from a supposedly unsafe or unsuitable environment and placed under the protection of the State or an NGO agencies, and what we found was that this specificity was really needed and is something that should be looked at from a policy perspective because we found that maltreatment in care was actually associated with higher offending rates than maltreatment before care, and it needs to be looked at as what is happening within the care system, whether that is abuse or maltreatment at the hands of carers, other children, family members who have access to children within the care system, how are we reacting to those young people and providing them with the support they need such that offending becomes something that they're not doing in reaction, perhaps to being abused within a system that purports to hold them safe. We, again, unfortunately, do not have enough specific data to tell you what was happening in individual children's lives but it is a factor I strongly urge people to have a look at and for the policy section to look at distinguishing between ROSH reports that happen within the care system, once someone's there, and those that happen beforehand and lead to a child being removed. Another issue that we found was that the custodial episodes, although it was a relatively small cohort, 7% of the group that had some association with crime had a custodial episode. What was really significant about this is that, it didn't happen as a sentence. It wasn't the court system reacting to an established offending by young people. This was bail. So 99% of the matters that got a child to custody were remand episodes. It was where the Police or the Court had determined that a young person was not able to be returned to their care placement for however long or to their own home, and what that meant was that we then looked at it in further detail and decide, is it the Court that's making this decision, and is it Court refused bail or is it Police, and what we found is that 80% of the bail refusals were done by Police. Now, these periods of custodial episodes were usually relatively brief. Often they were less than a day but they still a period of coming into custody or one day, like they're not long periods of time but nonetheless, what we know from the research is that even brief periods of custodial involvement have potentially long term adverse impacts on young people, and what we found was that young people who were going to custody didn't have on the whole extensive or really problematic records. We looked at the kind of offences that they were alleged to have committed. We looked at the offence history in terms of whether this was the first time they come in contact with the justice system or not, and we looked at as best we could, the circumstances and the offence histories of these young people, ad what we found was the offences relatively speaking on the whole were not serious offences, such that if the young person was found guilty, they would end up going to jail for or detention for those offences. So they're being remanded in custody, mostly by Police and again, that raises the question of why is this happening? So what needs to look at it because this has been highlighted in prior research, is anyone from Family and Community Services or the NGO representing these children? Do they have a caseworker, are they there with them at the Police station when the Police are making a determination as for bail? Are they being reliant upon things like the bail assistance line or legal representation they may not actually have, such that the Police are erring on the side of caution and making a decision to send a young person into custody until the court makes a decision with more information to hand. This is what's been shown in the international literature and what's also been shown is that if a FACS worker is there who has information, not just anyone, but someone who knows the child and is able to provide information about that young person's personal circumstances, both the Police and the Court are likely to provide bail, which gets them out of that custodial environment and into what is supposedly their care protection environment where they can be provided with assistance. We also found really problematically that a lot of young people who went to custody, there was a cohort amongst them who had no prior offences, and we couldn't conclusively link you know, if they're committing serious offences, even without a prior history, you would think, okay, detention may be an appropriate response but that wasn't the case for the majority of kids. So custody is being used as a holding mechanism as a conservative decision by Police, rather than the risk that the young people pose which raises a whole lot of policy questions around, is this the best we can do for young people that we know are vulnerable? They were the main factors that we found that were perhaps new additions to Australian or New South Wales literature but there were other things which confirmed findings that had been made in previous reports, and that was the danger, if I may say it in that way, of the association between residential care and offending. So we found that young people in their first care placement were predominantly placed in residential care rather than with relatives or with foster care or in some other form of placement had a twenty-fold likelihood of offending. Now this raises issues again, around the appropriateness of residential care for particularly young children, and that is why the relevance, the implementation, the effectiveness of the protocol to which Police, Family and Community Services, and DCJ have signed up needs to be examined. A protocol exists to stop the systemic factors by which young people become in residential care in particular become embroiled in the justice system, however, there have been no published studies and some criticism as I'm sure members that are here today could testify to about the lack of published data around whether the protocol is working. One of the major flaws or limitations of the POCLS study, I'm sorry, rather than a flaw, is that we couldn't tell what policy initiatives the individual young people had received. So some of them may have received a whole lot of policy interventions that were beneficial but we couldn't pick those up in the study. All we could show was this is what's happening, this is the group that's going into offending and these are the factors that are captured by administrative data that give us some information around what's happening in their lives. So I'd urge, it's natural for a Researcher to always urge more research but I would urge more research be done to commission a greater understanding of the individual pathways of young people who offend, who are in out of home care, particularly because the offending rates of young people, once they entered care were actually problematic more so than the offending rates before they came in. So if the argument or the concern is that the care system is taking those kids who are already offending, that's not the case. It takes them but it is either failing to prevent subsequent offending or it is creating the circumstances by which young people who are either too young to offend or who simply did not offend before they came into care, nonetheless went on to offend within the care system or once they were out of the care system again, and I'll end on that note because that raises issues around the responsibility and support provided to young people, whether they have aged out of care or whether they have been restored to family or worryingly, whether they have left the care system through some other means such as going AWOL, being absent, whether they are technically no longer in care and offend while not in a placement but still within the responsibility of the agency. So I look forward to your questions and yeah, I will leave that there, thank you very much.

[Stuart Malcher] Thank you very much, Kath. I think I'm still going to chew over that last finding for a little while longer, so thanks, we've got a bit of time before we jump to questions. Can I now please invite Dr. Michelle Townsend to talk to us on educational outcomes?

[Michelle Townsend] Hi everyone. Firstly, I'd like to start by acknowledging the traditional lands on which each of us meet and pay my respects to original elders past, present and emerging and extend my respects to any Aboriginal people in the audience today. So I'm just going to touch on some of the key findings through the Pathways of Care Longitudinal Study but I will make mention that I've previously done research around this area as part of my PhD that did do interviews with children as they transitioned to high school with carers, with teachers and with caseworkers, so I will draw on some of that as well, but within the Pathways of Care Longitudinal Study, we had the opportunity to examine children at the start of their schooling and what was happening as they were entering the school system in kindergarten through the Australian Early Development Census, and this is a standardised assessment that is given by kindergarten teachers, and what it showed was that children in the POCLS longitudinal study were three times more likely to have at least two developmental vulnerabilities when compared with all Australian children. Boys were slightly higher at about 35%, which is in line with Australian evidence which young boys do tend to come in with a little bit more developmental vulnerabilities early at the start of school, and about a quarter of all girls came in with two or more developmental vulnerabilities. At this point, at kindergarten, there is no differences in terms of developmental vulnerabilities between Aboriginal and non Aboriginal children that are in this study, but we did find that those children that were developmentally vulnerable were more likely to spend time away from school, and this is certainly an issue that we also saw with us, a proportion of the children that we were interviewing there and their caseworkers over time, that children in the care system spend time far more than other children, and some of it is about meetings that are related to being in out of home care but there's other reasons around illness, mental health that contribute to that, and as we know, spending time away from school has a significant impact on their learning, and if this is starting right back in kindergarten, it can make them very difficult for these students to progress. We also looked at the NAPLAN results and consistent with the research that I've done previously. All children, in terms of that NAPLAN reading and numeracy results across the board is substantially lower than other New South Wales children, but where we see the greatest difference is by year nine, which suggests that there is some building of educational disadvantage that gets compounded over the years where the gap overall continues to grow. I know that Miriam will talk a bit more about the high achieving young people, and there are some young people within the cohort that are doing well and need extra support to continue to do well, but there's also a large proportion of children that really are struggling and that this gap in performance does tend to grow over their schooling. The other area that I think is just really important to be aware of is that by the year nine, we are getting far fewer children that are taking part in NAPLAN, and so there was less than 70% of the cohort were participating in NAPLAN and for Aboriginal children, this lower participation was also in year seven, as well as year nine, and we found that for children that had more developmental vulnerabilities at the start of school, they were more likely to have lower NAPLAN scores in numeracy and literacy over time. So I guess the key message that comes from looking at these standardised assessments is that we can't wait to intervene, we have to intervene early. We have these tools and whether it's like the AEDC, Australian Early Development Census isn't offered every year, but we do have Best Start, which is a kindergarten assessment that all children will participate in, so there is points in their schooling where we can actually have a look at their, how they're going in comparison with their peers that we can start to plan from the start of schooling to go, okay, there are some issues that may have been emerging here and we know that's likely and how can we respond to those? I'm a huge believer in their value of individual education plans and if they're done well, I think they can be such an important tool for both outcomes for students but also bringing together the professionals to get the support in place that individual children need. I do know that the Pathways of Care Long Children Study suggest that not all children have an individual education plan. Certainly only about a third of carers were aware that they was a plan in place, and even with the caseworkers, it was only just over 50%. It certainly wasn't close to 100% that this is in place, and I would argue that not only do we do it, we just have to think about having one in place, this needs to be a living document that gets reviewed regularly and there is some key points, particularly around NAPLAN, particularly around the kindergarten assessments on change of school and placement, because we know these are all important points that have an effect on children's education, and I'd also argue that the children that are even just either meeting the NAPLAN standards or certainly achieving below those, this is a point where we need to be assessing them in terms of an educational assessment to be looking at the potential of learning disorders so that we can put that really targeted support in place and we need to do that early. The other key message that came through the research that we did is the importance of student wellbeing, educational outcomes and student wellbeing go hand in hand, and we know that internationally, the research is very strong on that higher levels of student wellbeing, is more likely that students are going to complete their education, obtain the qualifications at the end of year 12 and go on to have a more pro-social and better outcomes later in life. So it's really important that we just acknowledge that part of the disadvantage that children can experience from education is associated with their wellbeing. We know the children come into care system, having experienced childhood maltreatment and trauma, and if we can have a focus on that, which I assume you have in the groups earlier in the week, but if we can really address that and put in the support that these children need, that will flow on to their education, whether it's behaviour in the classroom, their engagement with their peers, engagement in either being bullied or bullying, all those sorts of things really stems from wellbeing, and so the more focus I think that we can put on wellbeing, we will see the benefits through to their education as well. We did find in our cohort that the Risk Of Significant Harm reports did have a direct relationship with NAPLAN scores. So those children that did have increased reports before they came into school were more likely to have lower literacy and numeracy NAPLAN scores, and they were also more likely to be scoring higher on the child behaviour checklist around internalising externalising behaviours, overall problem behaviours, and they were reported to have increased negative reactivity which you can see that all of this will also play out within the classroom as well as in the placement. So the other point that I just think that it's worth us thinking about like for a policy and practice approach, is that we know that homework and doing assessments becomes more and more important throughout the schooling and certainly by the time they are in year 11 and 12, the individual assessments is critical, having those done is critical to them actually obtaining their HSC, and our POCLS cohort shows about a quarter of them either rarely or never or occasionally completed their homework and assessments on time. So there's a real need for that level of support there, and we know that many of our carers don't have that educational background and haven't continued on to year 12. So we have to think about tutoring as a really important initiative to get kids through year 11 and 12. You know, having that access to someone that can help them with those assessments is really critical. We also know that about like of the children that have come into the Pathways of Care Longitudinal Study, so at the time when I was doing this analysis, they're about six years into that time in out of home care, that experience about 3.7 schools. So there's been a lot of changes and that's where I think that really is shown is not only in their relationships with their teachers and with their peers but it's a school not knowing them that well and not having those significant relationships with schools and with someone that, whether it's the Deputy or the Year Advisor that can be watching over and supporting and getting the things that is needed for the child is really important, and that's why I think that caseworkers really play that important role and have to be involved in children's schooling because they don't have those consistent relationships sometimes with carers and they don't have them within the schools either, and I just would like to say to finish up is one of the things we don't have a lot of evidence here in Australia is really about what works for intervening in children's education, but there's three things that there is an evidence base for. The first one is that internationally, we know that early childhood education and certainly for children that are prior to coming to school, high quality preschool education is really important, and does prepare them far more for school than in the absence of that. So that's one thing that I think we really should prioritise. The second is the tutoring and not just in year 11 and 12, I think if we have children that are placed with carers that are not confident in terms of education that we really need to make the most of being able to tap into there is great tutoring out there that we can really support these children to be able to catch up and extend themselves, and thirdly, we do need to make more use of educational assessment for these children and be able to pick up where there are issues very early and work out a plan about how to respond to them. I am fortunate at the moment that I'm starting to look with some of the team at Pathways of Care at some of the impacts of COVID and I just want to say like, we have to be really holding in our mind that this group, as in all children are disadvantaged but there are proportions of this group that I think are even further disadvantaged in their educational learning because they've been spending that time away from school, and we do know there's a proportion of children that had no access to internet and had no access to computers and a quiet space to learn while they were doing online learning. So they missed quite a bit, and so, that's important that we think about how we can support them to catch up, and my sort of questions that I would really like to be answered a bit more from research is just about the number of children that have had experience in terms of the out of home care system and even the Pathways cohort that complete their schooling and obtain their HSC and take further pathways to education, because when I did my PhD, which is like 13 years ago now, it was about 25% of the group that was in our study, but out of that group, not all of them finished with a HSC qualification, some of them didn't complete enough of their individual assessment so that they just received the qualification that they'd finished school, a certificate, but not the actual qualification, and there was a larger portion obviously, that had left school from year 10 onwards, and so, we still know very little about that group, and finally, I think we need to try a new initiative that look at how we can support children with their education and their wellbeing. Thank you.

[Stuart Malcher] Thank you Michelle for your presentation and for those insights. I can see a need for a growth industry in tutoring for our out of home care kids and that's what i might have a talk to the Finance Department. Can I please now invite Dr. Miriam Maclean to speak to us also about Educational Outcomes.

[Miriam Maclean] Thank you and good morning everyone. In looking at this, one of the reasons we really wanted to look at Education is because it is so important for this group of young people in particular, as for all people but for the young people who have been in out of home care, it can give them opportunities and stability into adulthood which otherwise can be sorely lacking, and in the short term, school provides another setting where children spend a lot of time when they're away from home, and it's a place where they not only develop their skills, but also a sense of themselves as capable or as the ones who never do as well as other children. So it's a really important place for their development in so many different ways. We know from previous research that children who experience out of home care often have low achievement and they're more likely to have declining achievement than improvements over time, and often these kids have many risk factors even before entering out of home care, not least their history of maltreatment in many cases. Nonetheless, some children who experience out of home care achieve well in school. There is less research on these children who are doing well in school, and we wanted to explore this group to see what we could learn from the children who are doing better to find out what are the characteristics, what proportion of children are in this situation where they are achieving more highly, and what can we learn about the circumstances and supports associated with that. We also wanted to see how these children go over time with their reading development and in particular where the children who do better early on in school are protected from the declines we've seen in other groups overall or whether they also showed declines. We used the Pathways of Care Longitudinal Study data, so we had administrative data from Education and also the child protection and out of home care data and the assessments of the children behaviour and cognition and also the Carer Survey. So for the first study, we looked at higher achievement, which we defined as those scoring in the top three NAPLAN bands which is quite a broad and inclusive measure of higher achievement. So in the year 3 group, we also wanted to look at the range of factors related to the child, their child protection and out of home care history, the carer, and also services and supports reported in the Carer Surveys that might be associated with higher achievement. We found overall that 46% of the children in our sample scored in the higher achieving levels. This is markedly lower than the general population where it's more like three quarters of students but nonetheless it shows that at the year 3 level, almost half of the students were doing quite comfortably at school. We found that the higher achieving students were a diverse group and they shared many of the same adversities found amongst children in the care population more generally, and I think this is important to remember because sometimes it's easy to dismiss and assume that they must just be children who were fortunate to be born with a high IQ or happened to come from a more socio economically advantaged situation but many of them share the same adversities as the other children. The logistic regression showed that amongst the year threes, there were several factors that were significantly associated with higher achievement. These included having average or above average cognitive test scores and also having better socio emotional wellbeing on the child behaviour checklist in particular, the externalising behaviours which is acting out. We also found having a highly educated carer was significantly associated with better achievement, and non Aboriginal students were more likely to be in the higher achieving group than Aboriginal students. The achievement gap between Aboriginal and non Aboriginal children is well established, and we wanted to look rather than just at how big the gap is, we wanted to focus more on what are the characteristics within the Aboriginal children that were associated with higher achievement. What was there in their circumstances that may be associated with this? So for the Aboriginal children, again, it was a diverse group of children who were among the higher achieving Aboriginal children, and they shared many of the same characteristics and adversities as other lower achievers in the POCLS. When we did the logistic regression, we found that carer age in particular, carers aged over 60 was negatively associated with higher achievement. We looked at this more closely and found that among the Aboriginal children and relative or kinship care, with older carers higher achievement was less common. Now these families often have a range of characteristics which were associated with lower reading achievement. Living in more disadvantaged areas, a higher proportion of boys, lower care educational levels, and also the carers were less likely to have had carer training in the last year, but on the other hand, these children were rated by their carers as having better behavioural wellbeing. So these will often be grandparent carers who have taken on a huge commitment of looking after another generation of children. So it's important to think about how we can tailor what is provided in order to best meet the needs of these families. We know that cognitive ability and behavioural wellbeing was linked to their achievement for the whole group overall, and so, there's a need to promote children's early development, as Michelle said, covering cognitive emotional and behavioural domains, and to continue to do assessments, monitoring and provide services and support so that these needs can be met early and also be met as they arise, if problems and issues arise over time for these kids, and also these need to be conducted obviously in a timely fashion and in a culturally appropriate way. So we also know that carer factors can be associated with reading achievement, so we need to think about how to best support carers where possible and also in some cases it might be a case of providing supports to carers, it might be a case of providing additional supports to children where the carers perhaps don't have the educational background themselves. So some researchers has been proposed recruiting highly educated carers and others have developed programs to help develop the skills and confidence in carers who don't have that higher educational background themselves and might be intimidated or uncomfortable with the school setting. In the second part of our study, we looked at children's trajectories as they moved from year 3 to year 7 of their schooling, and we used Latent class growth modelling, which identifies groups of children who are following similar trajectories of reading achievement over time. So we found that amongst the non Aboriginal students, there were three trajectories identified in the modelling. So one of these was the higher achieving trajectory, which 12% of the students were categorised into. This was characterised by above average levels of reading achievement in year three, so there were actually a couple of years ahead of their typical average student at the year three level and they maintained higher achievement because they had typical levels of reading development over time. There was also a lower and a middle trajectory found for the non Aboriginal students, and in both cases, these had lower achievement and slower growth over time. When we looked at the Aboriginal students, the analysis showed a high trajectory, and this included 15% of the Aboriginal students, and this was characterised by high achievement in year three but it had slower growth over time, so by year 7, they were only performing a little above average, and if the trajectory continues, which just that it may well crossover so that they were soon showing below the average achievement. So it's really important with kids who may be doing well early on to not assume that they're fine and not give the support, if they're showing declines, even if they haven't hit a threshold such as below minimum standard to intervene early so that they don't keep declining relative to what they're capable of. For the Aboriginal students it was also a low trajectory group and this was characterised by low levels of achievement in year 3 and then particularly slow growth over time. So they were falling further behind their peers. The majority of students who experienced out of home care did not keep pace with their peers over time, regardless of their starting levels of achievement, so we recommend it really needs to be a focus on targeting one year's reading growth for each year of school. For the high achieving Aboriginal students, there's a clear need for more supports in place if they are to maintain that achievement rather than decline towards an average and potentially below average level of achievement. Overall, we found that around one in eight of the children were in one of the higher trajectory groups, and so it's important not to forget these kids, a lot of the children are struggling and need extra support but we shouldn't take for granted the children who are doing well and have the potential to go on to higher education, and we need to make sure that the supports are in place so that they have every support and opportunity to continue to fulfil their potential. As Michelle said tutoring is a very important, it has a lot of potential for improving student outcomes, has been shown in previous research, and we found that only around one in four students were reported to have received tutoring in the past six months despite the fact that most of the students had low scores and most of the students, even the ones who were doing quite well, weren't keeping pace with the other students. With our other supports and services that we looked at in our study, we found that some of them were significant but the results were inconsistent, so we are cautious in drawing too many conclusions from that but there were things such as positive family connections with birth siblings and birth fathers that may be associated with higher educational outcomes, and say, again, this just highlights the importance to keep in mind for everyone involved with the child to keep in mind the children's relationships, their emotional and behavioural needs, as well as their cognitive and academic development because we need all those things in place for the children to have every chance to develop to their full potential despite the early life events they may have experienced. Thank you.

[Stuart Malcher] Thank you, Miriam. Yeah, sort of I think that we'll start writing that treasury submission now for our tutoring proposal for all our kids in out of home care. So can I just take a moment again, really to thank our three presenters today. I mean, obviously incredibly interesting research and findings, so yeah, massive thank you to Dr. Kath McFarlane, Dr. Michelle Townsend and Dr. Miriam Maclean yet again.