Primary school children's perspectives of community support systems

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Abstract

This study consulted 38 children aged 5 to 12 years at four schools in disadvantaged eastern suburbs of Salisbury, South Australia. It explored children's awareness of resources and supports available to them and their families. It sought information from them about the community resources they and their families currently use, those they would like to have access to, and their ideas about what would facilitate access to these resources, and what would improve their lives and communities.

Data was collected via conversational interviews with children in groups of four to seven. Twelve open-ended questions were used to promote open discussions, placing children's voices at the forefront.

Findings reveal children's perspectives about what resources they need to support their own and their community's development. Children were generally aware of support systems within schools, but had limited knowledge of community support systems or government services. Although children knew of community sport resources, access is limited by financial and transport constraints. Only one school had regular out-of-class sport teams. Children showed an interest in the arts, but knew of no out-of-class arts facilities or opportunities. Children's ideas for improving accessibility to sport and the arts included providing more facilities, making facilities cheaper or free, and providing activities through schools.

Results are discussed in relation to two key themes identified by research literature as supporting development of children's resilience in the face of adversity or stress; namely interpersonal and community factors. Recommendations are made for strategies to address some issues of regional disadvantage to support development of primary school-aged children. In particular, provision of community resources and whole-of-family services to better support vulnerable children or hard-to-reach families, could be achieved by cutting across the boundaries of community and school, creating networks and relationships, informing and connecting communities, and encouraging inter-agency and intergenerational participation.

Key Words

children's voice, community, disadvantage,

Paper

This study was commissioned to explore perspectives of children aged 5 to 12 years living in the socio-economically disadvantaged area of Salisbury East, South Australia. It sought information about their awareness of resources and community supports, resources they wish to access, what would facilitate access, and what they thought would improve their lives and communities.

Children aged 5-12 years in Salisbury East

The AEDI (Australian Early Developmental Index) measures young children's physical, social, emotional, language and cognitive development, their well-being, communication skills and general knowledge shortly after school entry. AEDI (2006) results for Salisbury East local communities template_2011.docxindicated that although about half of the 5-year-olds were performing well, 29% of were 'developmentally vulnerable in one or more developmental domains'. For example, 13% were not doing well on measures of emotional maturity; that is they had trouble concentrating, managing their negative emotions and were not ready to help others. Although the AEDI has been criticised as assuming "a universal developmental approach to child development that considers all children as developing in the same way and through specific stages" (Agbenyega, 2009, p. 34), if school readiness is seen as the match between children and institutions that serve them (Scott-Little et al., 2006), 2006 AEDI results indicate the cohort of 6 to 12 year olds in Salisbury East includes a large proportion of children who entered school without the skills and knowledge expected by many mainstream schools. Moss and Woodhead (2011, p.21) suggest that school readiness be seen "as a condition of families, of schools, and of communities". As a population measure rather than one that identifies individual children, the AEDI can allow an ecological approach involving recognition and response to structural and systemic social problems.

With Index of Relative Socio-Economic Advantage/Disadvantage (SEIFA) scores between 935 and 996 (AEDI, 2010), the four suburbs of Salisbury East are more educationally and economically disadvantaged than average Australian suburbs.

Attaining best outcomes for at risk children

When considering factors that support or undermine development of vulnerable primary school-aged children, research on resilience is most useful. Resilience is the ability to adapt effectively in the face of adversity or stress (Naglieri & LeBuffe, 2005). Stressors arising from negative family interactions and parental divorce, familial poverty, neglect, violence, mental illness or drug abuse, war, neighbourhood violence, racism and discrimination are known to threaten development (Seccombe, 2002). Children who succeed in life despite such risks are considered "resilient".

Resilience is supported by promoting protective factors. Individual, familial, and socio-cultural resources can foster resilience, strengthening other factors, which in turn further foster

resilience. Conversely, the more adversity or negative stressors a child experiences, the less likely it is s/he will be able to adjust and adapt effectively. Protective factors interact with each other, and with risks in a child's life, determining resilience in individual children (Kaplan, 2005; Werner, 2006).).

Protective factors associated with resilience can be divided into three broad, dynamic, interdependent categories; the child's individual characteristics, interpersonal factors, and community resources and opportunities.

Individual characteristics

Personal qualities such as socially valued talent and ability to self-regulate emotions and impulses are attractive to adults and other children. Thus they promote friendship formation, allow otherwise vulnerable children to form social networks to draw upon when facing familial or community challenges, and increase likelihood of rewarding experiences that develop positive self-esteem and an optimistic outlook which can offset stressors (Werner, 2006).

Interpersonal factors

Interpersonal factors associated with resilience are warm, supportive, stimulating and trusting relationships with at least one competent adult such as a parent, grandparent, mentor, elder or teacher (Masten & Reed, 2002), or with siblings or competent peers (Werner, 2006).

Peer acceptance in the primary-school years is positively related to psychological adjustment in adolescence and adulthood (Bagwell, Newcombe & Bukowski, 1998, Laird et al., 2001). A competent caring adult provides a healthy model of effective coping, acts as a knowledgeable guide by listening and assisting children to rise to challenges, solve problems, remain persistent, manage stress and succeed despite life circumstances. Authoritative childrearing plays an important role in development of resilience (Conger & Conger, 2002; Seccombe, 2002; O'Dougherty Wright & Masten, 2005) Authoritative parents provide warmth, set behavioural limits and appropriately high expectations, monitor children's activities and encourage children's expression of ideas feelings and wishes, thus helping children to understand that they are loved, supported and valued, and that they are expected to reach their personal and social potentials (Amato & Fowler, 2002).

Community factors

Recently, the important role of communities for supporting children's and their families' functioning centres on the notion of 'authoritative communities' (The Commission on Children at Risk, 2008) which include the same characteristics as authoritative parenting.

Community factors associated with resilience include a stable neighbourhood. Violent, poverty stricken neighbourhoods are more stressful for families and reduce opportunities for children to play and socialise. Strong communities provide access to resilient role-models. Neighbourhood services can reduce parental stress, improving relationships between parents and

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children and thus increase resilience in middle childhood. High-quality schools, accessible health care, social services, libraries and recreation centres help develop resilience by fostering children's and families' physical, social, emotional, intellectual, cultural and spiritual well-being (Conger & Conger, 2002; Seccombe, 2002; O'Dougherty Wright & Masten, 2005). Masten et al. (2008, p.76) particularly highlight effective schools and teachers, claiming that "a school that functions well in a context of adversity can also be said to manifest resilience".

Children's emotional wellbeing is promoted when family cultures are recognised and respected in wider society. By the end of the primary years, a secure cultural identity is associated with higher self-esteem, optimism, prosocial attitudes and a sense of personal efficacy (Smith, Walker, Fields, Brookins & Seay, 1999).

Children's access to prosocial community organisations and extra-curricular activities such as youth clubs, and sporting, religious, cultural and arts groups supports resilience (McGee, 2003 cited in Werner, 2006; Werner & Smith, 2001). These can foster social and emotional skills such as perspective-taking, cooperation, leadership, problem-solving, persistence and altruism; thus boosting self-esteem, community responsibility, cultural strength and meaningful relationships (Seccombe, 2002).

Children's voices at the forefront

It is imperative that children's voices be at the forefront of research seeking to understand children's knowledge or perspectives. "It is essential that young children are consulted in matters that affect them. Consultation with children may be specific to individual situations or may involve a representative group to inform more general practices" (Early Childhood Australia, 2009). Graham and Fitzgerald (2010, p. 136) argue that "children's participation in research contexts, particularly in qualitative research that invites children to dialogue, is … crucial in that it allows the views and experiences of children to be considered in policy debates, and thus to potentially influence policy outcomes".

This research was commissioned by Salisbury Communities for Children (SC4C) in response to the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) requirements that they extend their remit to include children up to twelve years of age (2009). The development of the SC4C Strategic Plan 2010-12 submitted to FaHCSIA, involved consultations with senior and other key school staff, parents and carers, and local family service providers. Guiding principles for the Family Support Program (FaHCSIA, 2009) state that "child focused and/or child inclusive services (need) to enable children's voices to be heard". Accordingly this consultation sought perspectives of local school children, and was submitted to guide the Strategic Plan.

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Aims of this study

The study aimed to inform development of strategies to better support primary school-aged children's development in Salisbury East. It sought to explore local children's views about sources of support generally available to children and families, community resources they and their families' access, those they would like to access, and what would facilitate access to them. It also sought to elicit children's ideas about how to improve their lives and communities.

METHODOLOGY

Sample

The convenience sample consisted of thirty eight children aged 5 to 12 years, selected by their parents' and own consent for participation, at four government primary schools in eastern suburbs of the City of Salisbury.

Measures

An interview proforma consisted of twelve questions to identify activities children enjoy or would like to participate in, their knowledge of local community support systems, services and facilities, and ideas for making children's lives happier, healthier and safer (See Appendix A). Probe questions sought to clarify responses and elicit more detailed reasoning. Strategies and language used in interview questions varied to match age and developmental levels, as this allows data collection to be sensitive, adaptable (Aubrey et al., 2000) and more valid (Parkinson, 2001). To accommodate for developmental levels of children aged less than eight years, complex sentences and words were simplified to assist with comprehension (e.g., changing the term "community organisation" to "grown-ups"), and a teddy ('Dash') was introduced. Using props such as puppets or dolls capitalises on play-based activities and are useful when conducting research with young children (Jager & Ryan, 2007). Reference to 'Dash' sought to maintain children's interest and to empower children by giving them a sense of authority by answering questions relating to what supports or activities were available for 'Dash' in their community.

Procedure

Approval was obtained from the University of South Australia's Human Research Ethics Committee and the Department of Education and Children Services. To establish trust and security, interviews were conducted in schools, familiar locations for children (Parkinson, 2001). Five groups of seven to eleven children participated in conversational interviews of up to 25 minutes in quiet areas away from classrooms. Conversational interviews are semi-structured, using open ended questions and allow participants to lead discussion direction. They are perceived as the most effective method to acquire children's thoughts and understanding in a non-threatening atmosphere (Aubrey, David, Godfrey & Thompson, 2000; Parkinson, 2001), encouraging discussion and generating a greater range of responses which may trigger additional ideas amongst peers (Lewis, 1992). Open ended

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questions allow for adaptation and flexibility, providing opportunities to elicit deeper thinking (Parkinson, 2001). Because children are comfortable talking with other children, group interviews capitalise on social interaction and allow children to have more control over the discussion (Hatch 1995, cited in Parkinson 2001).One author asked questions, whilst the other scribed children's responses verbatim on prepared sheets.

Limitations and ethical considerations

This study was limited in how far the sample can be seen as representative, and in the scope and depth of information collected. Children in this study cannot be seen as representative of primary school aged children in disadvantaged areas as local facilities and amenities vary. Signed parental consent for children's participation may have excluded children with poor familial literacy.

Interviewing children in groups decreases anonymity because information shared can be repeated by other children. For this reason individual children may have withheld information or included information in an effort to meet perceived peer or researcher expectations. The study did not obtain data about supports utilised by children and their families, because ethical considerations prevented asking questions that risked children disclosing sensitive or personal information in a group setting.

Data Analysis

Data was analysed qualitatively by relating the children's responses to two key themes identified in the literature review as supporting development of resilience in children, namely community and interpersonal factors (e.g., O'Dougherty Wright & Masten 2005). Qualitative analysis of responses allows for all ideas to be presented (Burns, 2000).

RESULTS

Results are presented as summaries of children's responses to interview questions.

Children's identification of sources of support to children and their families

Children identified teachers, student counsellors, principals and deputies, office staff, school support officers, a student teacher, friends and older children as sources of school-based support for children. Children identified places where families could get help, including hospitals, police stations, fire services, the local council, a shelter and a school counsellor.

School and neighbourhood resources

When asked about activities they enjoy at school outside class time, children identified opportunities for active play such as football, hopscotch and skipping, using sports equipment and play equipment (swings, slides, climbing, etc.) during breaks. One group mentioned arts, crafts and

construction as available in their school library during recess and lunch, another mentioned preparation for a school concert, and a third mentioned a disco.

Children said that Out Of School Hours Care (OSHC) provided snacks and access to activities such as Fuse ball, play stations, computers and board games. One child said "My parents can't afford OSCH so I just go home and watch DVD movies." Children from one school referred to school-based team sports such as rugby and soccer as available to upper primary children. Most frequently mentioned neighbourhood resources were parks and playgrounds, with riding bikes, skate boards and scooters, flying kites, playing with friends and family, and going to the shop also mentioned.

Home- and family-based activities

Children spoke of indoor activities such as playing board and electronic games, using the computer and internet, playing with commercial collectable toys, crafts, eating cookies, and watching TV and DVD's either alone or with friends and family. Backyard activities included trampoline play, playing with pets and siblings, roller-skating, bike-riding and ball games. Activities children enjoyed with families included attending Paradise Community Church, Greek Church, Polish school, and visiting the library.

Learning facilities

Scouts and sporting clubs, work places and libraries were seen by children as places to learn new skills. Children stated languages could be learned through Polish School, Greek Church, watching movies and participating in martial arts. Children also recognised that they can learn from family members and others in the community. University, 'TAFE' and schools were also cited as places of learning.

Recreational and sporting facilities and activities

Children identified many sporting facilities within their districts such as football, soccer, basketball, netball, martial arts, tennis, gymnastics, swimming, skating and cricket. However many children said that they were unable to access these due to cost. One child stated "I would like to do swimming; mum hasn't got enough money; I can't swim". Only one school offered some after school sports. Two children commented that their siblings "should do gymnastics" because of their abilities.

Local recreational activities mentioned included, "8 ball at the pub", DVD and electronic game hire, a game arcade, a play café, bike track and skate park, watching bike racing, and Scouts. Activities some children said they enjoyed but had to travel considerable distance to access included movies, fishing, camping and going to the beach, mini golf and go-cart racing.

Children who said they would like to participate in a sport (e.g., netball), club (e.g., Scouts) or activity (e.g., camping) but were unable to, identified cost and lack of transport as major

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impediments. Children's ideas for improving accessibility included providing more facilities, making facilities cheaper, "tell(ing) the Government to make it free", finding "kids to teach you so you don't have to pay", "sneaking into the club", and fund-raising, transporting children to the facility in a bus, "borrowing or buying a car", and providing activities through schools.

What children would like in their area

Children said they would like to have access to the arts; ideas included low cost/free concerts for kids, drama club and after school visual arts clubs "including painting". Some children wanted a "Kids Entertainment Centre" with computers, play stations and electronic games. Versions of this idea include a games arcade, a computer games shop, a games shed and more computers and computer games at local libraries. Other ideas for facilities included a public swimming pool, a cinema or drive-in, a "fitness club for kids", "an animal park where you can go to look at animals", "a dog park where you can let your dog off the lead", an aquarium, a chocolate factory, more take-away outlets such as KFC and Chinese, snow, a roller-coaster, an ice-cream machine, a time machine, a play café, another fence between their suburb and the jail, indoor go-carts, laser skirmish, more sports clubs such as football and karate, and a baseball pitch.

Children expressed disappointment in playgrounds they currently have access to. Ideas for improvement included more interesting and challenging equipment such as four-seater see-saws designed with safe handles "so you don't knock your head" and seats that "don't get too hot or wet", climbing rock walls, flying foxes, tunnels, "a gym bar that I can spin around on", bridges, tyre swings, sandpits, swinging rope, ladders for climbing, trampolines, cubby houses, monkey bars, "a big slide like at Broken Hill", whirly gigs, trees to climb and tree houses, nets in tennis courts and in soccer goals, an adjoining skate park, "ponds for ducks" and "creeks to us swim in". Children also said they would like playgrounds and parks to be attractive and well maintained with regular mowing, painting, splinter free surfaces and better soft fall.

Children's ideas about what would make them healthier, safer and happier
Healthier

To support their health, children contributed the following ideas for more nutritional intake: more fruit and vegetables, "a fruit stand – all free", "Get Woollies people to bring fruit to school so we can be healthier", longer fruit times at school, soup, healthy lunch provided by school, salad from McDonalds and Hungry Jacks, "knock down junk food outlets and build more Subways", healthy canteen at school, plates of healthy snacks such as sultanas on kids desks, "water machines that you put money in and it squirts water out so you can drink it".

They identified the importance of activity, suggesting: "play more with the children", more PE, lots of running, football and sports. Children also mentioned the importance of sleep, saying children should "go to bed earlier", and there should be "less barking dogs that keep you awake".

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Safer

Children identified importance of adult supervision to keep them safe. They wanted "parents (to) watch you", for adults to "look after children" and "teach children how to be safe". Children thought crime prevention would help. Some wanted "more police", to "kill the robbers – no robbers that steal kids" and "cameras"; although one child voiced concern about over-surveillance. Other safety-promoting ideas included "more safety houses", providing safety equipment such as knee pads and helmets, and a "fence around the playground".

Happier

Some children referred to school as a place that should be more fun by having better teachers "ones that don't yell", a better oval, "no work", "more maths", and more play time, art, PE and excursions (e.g., to the aquarium). Access to computers and the arts after school, and more help from teachers to play, learn and socialise were mentioned.

Children wanted parental attention and support: "parents to catch me when I am climbing and playing". One child recognised that parental attention requires parental health by saying: "help your mum to get rid of sciatica so she can play with you". Other wishes or comments indicate that children might see their parents as time constrained. For example some children wanted a restaurant at home or a special cook, and one child said he loved playing football when his father "has got enough energy and is not at band practice". Some believed more money could bring happiness through the ability to purchase things such as a play station, books and access to sports and activities.

DISCUSSION

This research reveals children's views and ideas about what they have and what they need to support their development in the Salisbury East community. The following discussion relates what the children said to research literature on the value of community facilities and interpersonal relationships for supporting children's development and resilience, and includes recommendations arising from the consultation. It briefly addresses the value of collecting data on children's views and perspectives.

Community facilities and interpersonal relationships

The children in this study appear to know about support systems within schools but have limited knowledge of community or government support services such as Anglicare or FamiliesSA. It may be that families of the interviewed children have not required these services, or their families may have needed services but had not been aware of the assistance offered by them, or that adults but not children in families are aware of services. Because local community services can assist parents in their role in supporting their children's development (The Commission on Children at Risk 2008), it was recommended that SC4C support schools to ensure that children and families can access

advice, take-home information, and support in negotiating entry to services. This is particularly important for families where English is not spoken, or where parental violence, drug and alcohol abuse or mental illness leave children vulnerable. Following this study, SC4C has employed a Children and Families Support Coordinator to work with counsellors, chaplains, Aboriginal liaison and other school staff to create networks between agencies that support children and their families, and inform the community of agency roles. This supports the principle of "enabling community services to work together flexibly to meet the different needs of families and children; encouraging innovation in responding to the diversity of families and community needs; and participate in determining the specific services that need to be delivered in individual locations" (FaHCSIA, 2009).

Findings reveal that many children are interested in the arts, craft, sports, using information technology, and electronic games, and that school-based recreational opportunities are limited. Three of the four schools did not offer sports, computer access or art activities outside of school instruction. Some children referred to talents in siblings that were not being pursued. Facilities for engagement in the arts appear limited or unpublicised in Salisbury East, as none were mentioned by the children. Although children were able to identify many other community learning, sporting and recreational venues and opportunities including out of school hours care (OSHC), many were not able to access these due to cost, lack of transport and age limitations. This suggests that children in this region are disadvantaged because of limited community-based arts opportunities, facilities offering computer activities, and affordable sporting opportunities.

Participation in the arts provides children with opportunities to practice focussing attention, setting goals, planning, making choices, and managing their emotions and impulses, supporting synapse development in their prefrontal cortex which strengthens these important abilities (National Scientific Council on the Developing Child, 2011). Engagement in the arts allows learners (particularly those from less advantaged circumstances), to attain higher levels of achievement, than learners without such opportunities (Catterall, Chapleau & Iwanaga, 1999). The arts also supports the development of positive self-esteem, interpersonal relationships, cultural and spiritual well-being, and perspective taking, cooperation, leadership, problem solving, persistence and altruism (Fiske, 1999). It was therefore recommended that SC4C consider strategies to support skills development in the arts, including provision of opportunities for attendance at children's performances, participation in drama, visual arts and dance in school holiday programs and after school, and engagement of artists from Aboriginal and other cultural backgrounds to encourage cultural identity, emotional wellbeing and extended family ties (e.g., through intergenerational arts projects).

To participate in organized sport, many children in Salisbury East would have to join one of the many community sports facilities. However because these are more expensive and require

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more travel than school-based sport, they are inaccessible for some children. Participation in sports, particularly in low income neighbourhoods can improve children's mental and physical health outcomes and school performance (Posner & Vandell 1999), and is associated with increased self-esteem and social competence by adolescence (Daniels & Leaper, 2006). School sports team participation with socially competent coaches may help break racial/cultural barriers & prejudice, strengthen peer relationships reducing isolation and bullying, develop children's conflict resolution skills and build resilience in vulnerable children. Furthermore, through opportunities for parental involvement and provision of volunteer training, school sports may strengthen community capacity, connections and resilience (The Commission for Children at Risk, 2008). It was therefore recommended that SC4C initiate socially inclusive access to sport through strategies to support development of school sport teams and skill development (e.g., Kanga Cricket).

Children in this study clearly understood restrictions that families' financial limitations place on access to sporting and recreational opportunities, as almost every response mentioned money as a barrier. Because familial poverty is so frequently associated with developmental vulnerability (e.g., Seccombe, 2002), ways to make engagement in the arts, sport and other activities (such as maths clubs and Scouts) more accessible to children from low income families (e.g., through establishment of grants and scholarships for participation or to cover transport costs) could be pursued through partnerships with charitable organisations and local businesses. Such support for children's talents and interests would "ensure relevant services are available to the broad population to assist children […] to strengthen their abilities" (FaHCSIA, 2009) which would contribute to children's success; and foster their self-esteem and resilience (Conger O'Dougherty Wright & Masten, 2005; Werner, 2006). Partnerships can also facilitate greater social engagement for families and children, building family capacity and functioning through access to informal sources of support (The Commission on Children at Risk, 2008).

Children were knowledgeable about what they should be doing to support healthy physical development. However they were also aware that these behaviours (increased consumption of fruits and vegetables and participation in sports) involve costs that parents may not be able to meet. This awareness is reflected in suggestions for free fruit and healthy salads (through school supply or sponsorships), and an increase in school 'PE' (physical education). It was therefore recommended that SC4C facilitate the development of community partnerships to support children's access to nutritional foods and participation in sports and recreational activities to strengthen healthy growth and development.

Although some children indicated that they believed more money would improve happiness, children also said that more time with parents would keep them safer and make them happier. Children's resilience is fostered when they have caring responses from at least one mature competent adult (Masten & Reed, 2002). Inadequate time with parents could be attributed to poor

parental health, lack of parental prioritisation or parental time restraints. The Australian Bureau of Statistics (2009) indicates that most two-parent families in Australia have both parents working. In 80% of these working families, at least one parent said they were often or always pressed for time. The main reason parents gave for feeling time pressured was trying to achieve a balance between work and family. Community support and changes in work cultures could relieve such pressures. Following this study a Children and Family Support Coordinator was employed by SC4C to support parenting through facilitating a network of key school and agency staff which aims to better integrate services for families, and through provision of holistic support of complex cases affecting children aged 5 to 12 years.

Children's dissatisfaction with current playground and park facilities should be taken seriously. Run-down and uninteresting playgrounds send powerful messages to children about the unimportance of children in their communities. Playgrounds can contribute to development of gross-motor and social-emotional skills, bone density, and healthy exercise habits (Department of Health, Physical Activity, Health Improvement and Prevention, 2004), as well as connections between children and families in communities (Kuo, Sullivan, Coley & Brunson, 1998). Under-maintained playgrounds can place children at physical risk. Primary school-aged children have higher rates of playground injuries than any other age group with most injuries involving falls from climbing equipment or swings (Phelan, Khoury, Kalkwarf & Lanphear, 2001). It was recommended that SC4C facilitate partnerships between stakeholders (including local children) to design, build or renovate current playgrounds. Consultation with children about playground development may contribute to their self-esteem and sense of worth, strengthen negotiation and conflict resolution skills, introduce them to democratic processes and their roles as citizens, and are more likely to ensure stimulating play areas that are utilised by children (National Children's Bureau, 2004). As yet there are no plans to enable such consultations.

Value of collecting data on the views and perspectives of children in Salisbury East
The study has positioned children's views as a key informant for the development of SC4C's Strategic planning for 2010-2012. Results from this study supplemented data collected through consultations with adults (local parents and service providers), and from community statistics and service mapping. Children's views can be used by SC4C Committee and FaHCSIA to make important decisions about matters central to children's lives and well-being.

The consultation with Salisbury East children has identified that they want more access to community and interpersonal supports and facilities. Follow up consultations with SC4C have seen the early stages of planning of implementations that will support children and their families within this community. Thus despite limitations of this study, it is clear that collecting children's views was

valuable. Ongoing consultation with children and evaluation of strategies and their outcomes is recommended.

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Appendix A

Interview proforma

Upper Primary Children

"We are researchers and have been asked by an organisation in your community to ask you a few questions about what you have and what you might want in your neighbourhood.   Our goal is to support kids to be safer, happier and healthier in their community. So, we are interested in finding out what you think would be good for kids in this area. So I've come to ask you all some important questions. Ally here will be writing down your answers."

1. Does your school have any activities that are not in class time that you really like? What are they?

2. If a child needs adult help with anything, is there anyone they could go to at school? If responded "teacher": Are there any other people who they can go to also? What sort of help would that child get?

3. What are some activities you can do in your neighbourhood when you are not in school? Who is in charge of (whatever the mentioned activity is)? How did you know about (the activity)?

4. Are there any special activities you do after school or on the weekends?

5. Are there any special activities you do a lot with your family?

6. If a family needed some help, do you know of somewhere they could go to get it? What do you think (named organisation) could do to help a family?

7. Do you know of where people can go to learn new things in your area/suburb/neighbourhood? How do you know about it? Do you know what is it like?

8. Has there ever been some kind of sport or club or activity near here that interested you but you didn't do it? Why didn't you do it?

9. What do you suggest could make it easier for children to do (the activity) in the future?

10. Is there something you would like to have in your area that you don't have now? What is it?

11. Is there something you have in your area, but you think could be improved? What is it?

12. Is there anything you think needs to be done to help children near here to have more fun and be safer, happier and healthier?

Junior/Middle Primary Children

"Some grown-ups want to help children to be safer, happier and healthier. They need to know what children think would help. So I've come to ask you all some important questions. Dash is my class teddy, he's a little bit shy and he has written down some questions he wants to know about just in case he comes to your school. This is Ally, she will be writing down your answers."

1. Does your school have any activities that are not in class time that you really like? What are they?

2. Dash wants to know, if he was at your school and needed adult help, who could he go to? *If responded "teacher":* Are there any other people he could go to? What things do you think they could do to help Dash?

3. What are some activities Dash could do in your neighbourhood when he was not in school? Who is in charge of (whatever the mentioned activity is)? How did you know about (the activity)?

   4/5 Dash sometimes likes to go to children's houses - sometimes during the week and sometimes on the weekends so he can do what they do……If he went to your house, what things would Dash be doing with you?

6. If a family needed some help, do you know of somewhere they could go to get it? What do you think (named organisation) could do to help a family?

7. If Dash lived in this area, do you know where he could go other than school to learn new things? How do you know about it? Do you know what it is like?

8. Has there ever been some kind of sport or club or activity near here that you think you might have liked but you didn't do it? Why didn't you do it?

9. What could the people who run the activity do to make it super easy for children to do their activity?

10. Is there something you would like to have in your neighbourhood that you don't have now? What is it?

11. Is there something you have in your neighbourhood but is not as good as it could be? What is it? How could it be better?

12. Is there anything you think grown-ups could do to help children near here to have more fun, and be safer, healthier and happier.