

What is Alternative Education?

Alternative Education (AE) is for young people aged 13 ½ to 15 who become “lost” to or alienated from the mainstream education system, usually by being excluded, suspended or have left school for over 6 months. They may be unwilling to attend a regular school, or schools are unwilling to enrol them. AE offers these young people an opportunity to continue their education in a different learning environment.

The Ministry of Education, in conjunction with secondary schools, has set up a number of Alternative Education providers who offer education and social services for these young people. In the Counties Manukau District Health Board area there are 18 Alternative Education providers who have a total “placement” of 227 students at any time. This equates to approximately 500 alternative education students in any given year.

For a student to access an Alternative Education programme they need to meet strict criteria and the Ministry of Education verifies each student’s eligibility.

To be verified as eligible for Alternative Education the 13 – 15 year old has either:

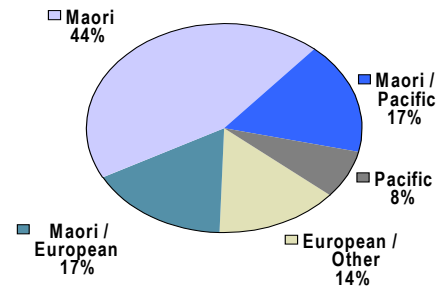
- Been out of school for two terms or more; or
- Had multiple exclusions (from more than one school); or
- A history of dropping out of mainstream school after being reintegrated; or
- Dropped out of The Correspondence School after enrolment as an “at risk” student; or
- Been referred by a school and verified for Alternative Education following a meeting of representatives from the school, the student and his/her parents or caregivers, representatives of other agencies involved with the student and the AE Coordinator.

The aims of the AE programmes are to:

- Give the students the opportunity to continue their education,
- To enable them to re-enter a regular school, or
- Enrol in a training or tertiary education programme or enter the workforce.

The majority of these students identify as Maori (78%) with the next highest ethnic group identified as Pacific (25%) – some identify with multiple cultures (Fig. 1). Many of these students are male.

Figure 1: Self reported ethnicity of Alternative Education Students, Northern Region.



Source: Adolescent Health Research Group Y2000. (2002)

AE Providers often demonstrate very high levels of commitment to their students and these young people are generally very positive about AE; often presenting as eager for opportunities to 'turn their lives around' or 'not make the mistakes' they have seen others make.



AE students learning the ways of the Patu

AE providers have operated on limited resources and with limited health sector support. Transition out of AE (to school, course or work) can be challenging as often students experience a lack of meaningful options to go on to.

Studies of students in Alternative Education show that students

- have significantly higher rates of socio-economic disadvantage (over half reported not enough money for families to buy food, overcrowded homes / houses lacking resources),
- negative life experiences (over 25% had made one or more suicide attempts in the previous 12 months, 70% had witnessed violence in their homes and almost 50% of females experienced sexual abuse)
- worrying health risk behaviours such as drug and alcohol abuse, risky sexual behaviours, risky motor vehicle use (possibly resulting in unintended pregnancies, STI's, and injuries/death from motor vehicle accidents) (Adolescent Health Research Group, 2002).

Alternative Education is seen as helping to reduce these negative statistics. There remains, however, a lack of data regarding young people in other 'non-mainstream' educational settings in New Zealand i.e. those in Teen Pregnancy Units, Residences (CYFS, Justice, Community Agencies), correspondence school, those who have exemption from school and those who are not enrolled and truant.

During 2004 students from selected AE facilities in Counties Manukau began full health assessments. In the first six months, more than 90% of students required follow-up for significant current health issues (Fig. 2). Several young people required particularly urgent assessment and treatment of current safety issues including suicide intent, significant substance abuse and serious chronic illnesses. Many students (approximately 80%) had multiple health needs (e.g. sexual health and mental health needs), did not have a General Practitioner that they regularly used and had needs across several sectors (e.g. health, education,

welfare and justice).

While there is no single, simple answer, youth-friendly health services that are: easy to access; address multiple issues; provide continuity of care; can be intensive and that are linked in with Education, other specialist services and families have been proven to make a real difference.

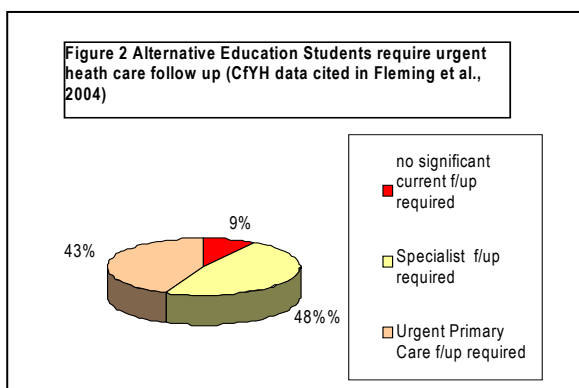


Presentation by AE Students

Health services to young people in Alternative Education settings need to be intensive and work closely with other sectors. The workers need to be skilled at working with Maori and Pacific young people and their families and be part of an overall comprehensive programme including health education and promotion, healthy school environments, education, disability services, welfare and justice services. Health, education and other sectors currently have opportunities to work with young people to reduce offending, early unplanned parenthood, early school leaving and chronic health problems.



AE Students in Class



Reference:
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