



Australian Government  
Australian Institute of  
Family Studies



# Early Years Strategy

Submission to the Discussion Paper

Australian Institute of Family Studies

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## Introduction

The Australian Institute of Family Studies (AIFS or the Institute) is a Melbourne-based Australian Government research agency, established in 1980 under the *Family Law Act 1975*. AIFS' mission is to conduct rigorous research into the determinants of wellbeing in Australian families in order to inform government policy and promote evidence-based practice in the family services sector. AIFS includes the Australian Gambling Research Centre.

AIFS undertakes primary research, evaluation and synthesises evidence on a broad range of issues affecting Australian families. This includes three longitudinal studies. Of most direct relevance to this submission are the Longitudinal Study of Australian Children (LSAC) and Building a New Life in Australia: The Longitudinal Study of Humanitarian Migrants (BNLA). In addition, AIFS has led a number of key evaluation and research activities relating to the early childhood education and care (ECEC) sector, taking account of the views of families, services and other stakeholders. AIFS also undertakes extensive knowledge transmission via its Child, Family Community Australia (CFCA) team. This circulates evidence to service providers and conducts evidence synthesis for Emerging Minds. Much of this activity focusses on children aged 0 – 5 and their families. AIFS consequently welcomes the national focus on the Early Years given it has a wide evidence-based understanding of early childhood development, education, and care.<sup>1</sup>

This submission first highlights some key points relating to the influences on child development based on insights from LSAC. It then draws on findings from evaluation and research activities relating to ECEC. It then provides some key links to publications that are relevant to the development of the Early Years Strategy. The Submission does not synthesise all relevant findings from AIFS work; we have provided links to the relevant reports that will be of assistance in the development of the Early Years Strategy. It also outlines some broad points in relation to the need to build the evidence base for the Early Years Strategy, including ensuring that the impact of the Strategy is monitored, measured, and evaluated.

## Insights from LSAC

LSAC provides a critical part of the evidence base on child wellbeing in Australia and the influence of a range of factors, including socio-economic status, familial factors, such as parenting style and parental mental health and engagement in early childhood education. These insights are central to understanding policy directions that will support the realisation of the vision that 'no child is held back, or left behind' (Rishworth, 2023). They are particularly important in supporting the development of a public health approach to promoting child wellbeing based on the principles of prevention and early intervention.

The following summary highlights some key points about outcomes for children aged 0-5 from the LSAC evidence base, highlighting some particularly important policy priorities, responding to the questions:

“What mix of outcomes are the most important to include in the strategy?” (Question 3)

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<sup>1</sup> Also, our “Child and Family Evidence” team produces resources that are drawn upon across the child and family sector. This includes [Child Family Community Australia | Australian Institute of Family Studies \(aifs.gov.au\)](#) and our contribution to [Emerging Minds | Australian Institute of Family Studies \(aifs.gov.au\)](#).

“What specific areas/policy priorities should be included in the Strategy and why? (Question 4) (Discussion Paper).

## Health

Insights from LSAC demonstrate the influence of socio-economic disadvantage, sleep issues, parental health (including mental health) and parenting style. These issues should have a policy focus in the Early Years Strategy.

### Risk factors

- From as early as two years of age and persisting through to the school years, children from low-income families and/or of Indigenous status are most at risk of poor oral health and dental cavities (Goldfield et al., 2022; Kilpatrick et al., 2012).
- Sleep problems in early childhood have been identified as a significant risk factor for mental ill-health in early adolescence (Quach et al., 2018).
  - Compared to children with no sleep problems, children that experience early and persistent sleep problems are more likely to have poor quality of life, behaviour difficulties, low language abilities and poor learning outcomes (Quach et al., 2009).
  - Children that experience escalating sleep problems from the early years are more likely to have emotional, self-regulation, and hyperactivity difficulties, as well as poorer prosocial skills during their school years (Williams et al., 2016).
- In general, Australian children aren't at a high risk of ill-mental health, with around 73% to 75% of 4–14-year-olds experiencing low levels of mental health difficulties. Early mental health intervention is most important for the 3% to 6 % of children that do experience consistently high mental health problems from early to late childhood (Lewis et al., 2020; Vella et al., 2018).
- From the start of life, risk factors for adult mental illness are prevalent in half of the population with 52% of infants in the LSAC data having multiple risks at birth (Guy et al., 2016).
- Children at risk of social and emotional problems have higher rates of contact with paediatricians, GPs, psychologists, and psychiatric and behavioural therapy services than those not at risk. However, there is still a high proportion of children with an elevated risk that do not access health services (Warren et al., 2020).

### Parent and family influences

- Internalising problems increase in prevalence across childhood.
  - Prominent risk factors for experiencing internalising problems in early childhood include peer problems and maternal mental ill-health (Wang et al., 2018).
  - Having a reactive temperament and a mother with depression at ages 4 and 6 predicts high and increasing patterns of depression over childhood (Lewis et al., 2020)



- High maternal separation anxiety is linked with overprotective parenting practices and lower social and emotional skills in children aged 2-3 years (Cooklin et al., 2013).
- Children have greater mental health distress if their father or mother experience mental ill-health. For children aged 4-5, mental ill-health in paternal grandfather is also associated with higher mental health distress (Hancock, et al., 2013).
- Fathers' postnatal mental health is associated with hostile parenting behaviours, and in turn greater emotional and behavioural difficulties in early childhood (Giallo et al., 2013).
- Infants and toddlers exposed to hostile parenting with low warmth, as well as high hostility in parent-relationships are at an increased risk of emotional symptoms in the early school years (Farrant, 2014).
  - Maladaptive parenting is also associated with an increased severity of ADHD symptoms (Demmer et al., 2017).
  - Parenting hostility, low self-efficacy, and socioeconomic disadvantage during the toddler years are risk factors for internalising symptoms across childhood (Kemmis-Riggs et al., 2020).
  - Negative parenting behaviours are the most prevalent risk factors for adult mental illness, irrespective of the presence of other risk factors (Guy et al., 2016).
- High parental conflict in the early years is associated with more emotional and behavioural difficulties (Giallo et al., 2022).
- Children who spend more time in one-parent or reconstituted families experience more social, emotional, and behavioural problems. The difficulties reduce when families have greater socio-economic capital and maternal mental health is higher (Perales et al., 2016).

## Socio-economic factors

- Within Australia, income has a smaller protective effect on child health than in other countries, thanks in part to the Australian public healthcare system (Khanam et al., 2009). However, the LSAC data has shown that socioeconomic inequities are core to health-related disadvantage.
  - Children born into poverty have less access to material basics and participate less frequently in their community over the span of childhood than their more socially advantaged peers (Sollis & Edwards, 2022).
  - Children from families with a lower socio-economic position from very early childhood have poorer physical health, social-emotional competence, vocabulary, communication, and emergent literacy (Nicholson et al., 2010).
  - Young children from households with lower income and maternal education have an increased risk of chronic health conditions later in childhood (Spencer et al., 2022a). Young children from households with higher income and maternal education are less likely to be diagnosed with Attention-Deficit Hyperactivity Disorder at ages 9-11 years (Spencer et al., 2022b).
  - Total government Medicare spending over the course of childhood favours those with a higher socioeconomic position, particularly for specialist care,

diagnostics, and imaging. The greatest disparity is observed in very early childhood, with infants from poorer families the least likely to have access to specialist care (Dalziel et al., 2018).

- Socioeconomic disadvantage at infancy and school entry is associated with poorer academic achievement and self-regulation skills in later childhood (10-12 years old; O'Connor et al., 2019).
- Children from less advantaged families are twice as likely to be in the lowest quintile for math and literacy scores compared to their more advantaged peers. Early cognitive ability plays a key role in explaining this relationship (Pearce et al., 2016).
- Compared to the US and UK, in Australia, disparities in young children's cognitive and behavioural development due to the equity gap is less severe. However, children from more financially advantaged backgrounds still outperform children from financially disadvantaged outcomes (Bradbury et al., 2011).
- Living in social housing, parental unemployment, and food insecurity early in life is predictive of poor NAPLAN scores at ages 10-11 years (Walls et al., 2022).
- Young children from socially and financially disadvantaged backgrounds have a seven times higher risk of poor social and emotional adjustment, physical abilities, and learning competence (Goldfield et al., 2018).
- Australian parents that experience persistent poverty is more likely to come from financially and socially disadvantaged backgrounds. These families require additional support to break the cycle of disadvantage as their children are more likely to experience social, emotional, or academic difficulties compared to children who have never been poor (Lee, 2011).

## Protective factors which promote wellbeing

LSAC findings establish that physical activity and play are integral to promoting positive wellbeing and outcomes, indicating the importance of access to settings that support these activities such as parks, playgrounds, playgroups, and early childhood education. They also reinforce the importance of a home environment that provides support for the development of language and literacy skills.

### Physical activity and play

- Widespread benefits of physical activity are evident across childhood, including improved health and better social and emotional adjustment. Further, children that engage in more physical activity have lower health expenditure (Nguyen et al., 2022).
- Neighbourhoods with the optimal amount of green space (21% - 40% of residential-land) promote child well-being (Feng & Astreel-Burt, 2017).
  - For example, safe neighbourhoods, with low traffic and quality green spaces are protective against unhealthy weight increase from early to late childhood (Putra et al., 2022b).
  - Importantly, younger children compared with older children or adolescents benefit more by the presence of green space (Putra et al., 2020).



- Further, quality green space supports the development of prosocial behaviour (behaviour intended to benefit others, such as sharing, helping, kindness, or compassion), and in turn increases children's' enjoyment of physical activity, as well as improves their quality of life and mental health (Putra et al., 2022c).
- From the early years, it is common for children to have low levels of physical activity and screen time. Children with the highest levels of physical activity and lowest screen time typically have the highest levels of health-related quality of life (del Pozo-Cruz et al., 2019).
- Early play is important for later child development.
  - Children who spend more time engaging in quiet free play at 2-3 years have better developed self-regulation skills at age 4-7 years. Further, around 1 to 5 hours of active free play per day at 4-5 years also contributes to better self-regulation skills in children aged 6-7 years (Colliver et al., 2022).
  - Peer play at age 3 is associated with lower scores on hyperactivity, and conduct, peer, and emotional problems at age 7 (Zhao & Gibson, 2022).
  - For children diagnosed with autism, early (2-3 years of age) engagement in symbolic play is associated with better long-term language development, relative to children without an autism diagnosis (Zhao & Gibson, 2022).
- Playing individual sports at ages 4-5 years promotes the development of self-regulation skills in early childhood. Team sports are not associated with early childhood self-regulation (Howard et al., 2018).

### Home environment-reading, music.

- Quality of the home learning environment such as numbers of books in the home, access to a computer and shared reading are strongly associated with children's learning outcomes (Wake et al., 2010) and executive functioning skills (Walker et al., 2014).
- Early shared reading builds receptive vocabulary and learning skills (Shahaeian et al., 2018). Children who read with their parents daily at 2-3 years old have better reading and numeracy abilities at 8-9 years than other children (Yu & Daraganova, 2014).
- Parent-child engagement in home music activities supports 2–3-year-old children's later prosocial skills, numeracy skills, and attention regulation at ages 4-5 years (Williams et al., 2015).

### Childcare and preschool education

- Children that attend a formal early childcare program, have higher vocabulary scores than children who do not attend such programs (Harrison et al., 2010).
- The establishment of high-quality relationships between children and their carers in childcare settings is predictive of better emotional regulation, and higher vocabulary, literacy, and math scores between 4 and 7 years of age (Gialamas et al., 2014a; 2014b).
  - The child-carer relationship is more important for developmental outcomes than the childcare providers' programme or activities (Gialamas et al., 2014a).

- High quality child-carer relationships are especially impactful for children from lower income families, and can reduce developmental gaps (Gialamas et al., 2015).
- ‘Stacking’ early interventions across the early years maximises the impact on reading outcomes, with each additional service that a child attends associated with an increase in reading scores (Molloy et al., 2019).
- Disadvantaged children that attend playgroup at birth-one year and two-three years have higher levels of learning competence and emotional functioning (in girls only) than disadvantaged children that do not attend playgroup (Hancock et al., 2012).
  - Children that are the most disadvantaged face greater barriers in accessing early childhood education and are more likely to be in exclusive parental care (Harrison et al., 2010; Wong et al., 2014).

## Indigenous and Culturally and Linguistically Diverse Families

- Across childhood, Indigenous children experience worse rates of disadvantage than children from the rest of the Australian population. This gap widens as children get older (Mishra et al., 2018).
- Children from Indigenous and CALD backgrounds experience poorer mental health outcomes at school-entry than their peers (Priest et al., 2012).
- Infants from Indigenous and CALD backgrounds is more likely to have their health needs unmet by healthcare services. Overall, 10% of Australian infants have unmet health needs that increase to 15% for Indigenous and CALD families (Ou et al., 2011).
- Young children from migrant families spend more time reading than their non-migrant peers. Children from a non-migrant background spend more time than their migrant counterparts in non-structured social and other leisure activities (Chen, 2022).
- In the LSAC data, differences in early vocabulary, literacy, and numeracy skills between Indigenous and not Indigenous 4–5-year-old children were observed in 2003 – 2004, but not in 2007 – 2008 after policies to address Indigenous disadvantage in early childhood were introduced (Sims & Phan, 2013).
  - Other research has shown that one-to-two-thirds of observed differences in early vocabulary, language, and numeracy skills between Indigenous and not Indigenous 4–5-year-olds is predicted by socioeconomic differences such as income and parental education (Leigh & Gong, 2009).

## Children’s outcomes and ECEC

As the insights from LSAC in the preceding section demonstrate, access to early childhood education and childcare promotes wellbeing and enhance social and educational outcomes and are particularly important for children from disadvantaged backgrounds. Consequently, it is particularly important for the Early Years Strategy to focus on childcare and early childhood education (Questions 4, 5 and 6 on policy priorities in the Discussion Paper).

Early childhood education and care provides an important context in which this development may occur. There is significant interest in the relative influence of ECEC on children’s



development over and above other influences such as those related to parental income and household income. There is further interest in the extent to which the impacts of ECEC benefit some cohorts more than others.

As noted, LSAC has provided opportunities to undertake original research on ECEC for Australian children. These data have been used to explore patterns of attendance in childcare and preschool, as well as opportunities to explore how this and other factors are related to children's outcomes as they grow. This study's linkages with other information, including the Australian Early Development Census (AEDC), have added to its usefulness in regard to research on these outcomes. See for example, [Preschool and children's readiness for school](#).

AIFS has new LSAC research underway that builds on available international and national evidence to examine the impact of early childhood education on academic outcomes. It is due for publication in late 2023. This research will generate unique insights about the optimal amount of early education for later academic achievement across primary and secondary school. The potential influence of children's socioeconomic circumstances, neighbourhood characteristics, and parent's education are also considered.

## Three-year-old preschool

AIFS was commissioned by the Australian Government Department of Education in 2016 to undertake a [critical review of Australian and international literature](#) on the value of preschool. The review examined the key and influential evidence on the value of preschool for 3-year-olds, First Nations children and those from disadvantaged backgrounds and the applicability of the international evidence to the Australian context. The report had a number of recommendations:

- the evidence showed that disadvantaged children have the most to gain from high quality ECEC programs, and disadvantaged children (including those from low socio-economic status, culturally diverse, and First Nations families) would therefore benefit from the provision of high quality three-year-old preschool. Preschool programs need to be of the highest quality however when they are targeted to disadvantaged children to achieve the desired long-term benefits.
- Other recommendations related to the recommended dosage (hours per week), the curriculum, teacher qualifications, and inclusion for children and families with additional needs (pages 52-53 of the report):
  - Programs should have a dosage of at least 20-30 hours per week across school terms.
  - Programs should have a well-planned curriculum that is sequenced into four-year-old programs and primary school.
  - Preschools should provide culturally appropriate settings for children from diverse backgrounds, including those from Indigenous, disadvantaged, and English-as-a second-language families, and children with special educational needs.
  - Teachers require appropriate qualifications and training, and further efforts are needed to up-skill the workforce.
- The report also recommended the need for further research evidence. For example: "Australian evidence should be gathered to determine whether extending universal access to all three-year-old children would yield further benefits. The evidence base is currently not definitive on whether more advantaged children also benefit from high quality three-year-old preschool." The final recommendation was that "High quality evaluation should be embedded within any changes to the provision of preschool in order to demonstrate



effectiveness against both participation in other types of ECEC and home-only care. An important component of the evaluation would be measuring success in promoting uptake of the services by the most vulnerable children in the community.”

## Early childhood education dynamics

In Australia, ECEC comprises childcare (e.g. centre based or long day care, family day care, outside school hours care) as well as preschool, each providing important supports to families through children’s early years to the primary school years.

- Child care is often considered to have a primary focus on supporting parental employment, and is typically structured with longer sessions of care, or flexible sessions, to support this. It differs to preschool in this respect, given preschool hours are typically more similar to school hours (although with shorter sessions and fewer days per week); consequently, preschool is less conducive to supporting parents’ employment. The availability of formal child care has become increasingly important and in demand, as parental employment (most notably mothers’ employment) continues to increase.<sup>2</sup>
- However, child care and preschool have similarities in their delivery of programs that benefit the wellbeing of children at all ages. This includes structured preschool programs being offered in many child care services for children at appropriate ages.

There is significant variation across jurisdictions in the way preschool services are delivered. In some states, preschool education is integrated with the public school system. In others, preschool is largely delivered by private and community-based providers. Nationally there is a commitment to ‘universal access’ to preschool, to ensure all children can access 15 hours of quality preschool program in the year before full-time school. Some states have committed to extend their universal access to three-year old children.

Although ECEC workforce issues have not been central to AIFS research, the Child Care Package evaluation highlighted challenges some child care services have in recruiting and retaining appropriately qualified educators. As reported for the evaluation, this was a significant issue for child care services in specific locations and was especially challenging for the In Home Care program. The In-Home Care program aims to support families’ workforce participation by providing access to ECEC where other approved child care services are not available or suitable.

Some key issues that have emerged in recent AIFS research (including the Child Care Package evaluation) include:

- The *availability* or access to child care remains a significant problem for some families. This is to some extent related to location, with variation in supply across regions with access more difficult in some, particularly rural locations.
- Some families continue to report that the *cost* of child care is a barrier to them using any or more child care, although in the Childcare Package Evaluation it was noted that families often do not understand child care fees and costs.
- Access to *flexible* child care is not always possible where families are seeking flexibility in the days or hours of child care. This is especially challenging for parents who work variable hours.

<sup>2</sup> See recent AIFS research on this topic <https://aifs.gov.au/research/research-reports/employment-patterns-and-trends-families-children>.



Additional issues related to the introduction of the Child Care Package in 2018 include:

- The extent to which families understand the Child Care Subsidy (and Additional Child Care Subsidy), the Activity Test and enrolment steps was considered. The findings from the evaluation indicated that there was widespread understanding, and most families did not experience significant difficulties accessing the Child Care Subsidy. However, concerns remained that a lack of understanding or other difficulties may have resulted in some families not applying for subsidies even if they were eligible for them. Lack of understanding of the complexities was especially noted as a concern for families experiencing vulnerabilities (such as those poor English language proficiency).
- Through the evaluation data collections, concerns were often expressed that for low-income families who did not meet the Activity Test, the number of hours of subsidised ECEC had halved with the introduction of the Child Care Package.
- There were particular and significant challenges for First Nations families arising from the transition to the Child Care Package, especially those that had previously made use of the former Budget Based Funded (BBF) Services. The former BBF services, in evaluation data collections, commonly reported about their experiences in providing child care to vulnerable families. Concerns around parents' understanding of the Child Care Subsidy and the Activity Test, and the adequacy of 24 subsidised hours per week were key issues. Services themselves underwent significant changes to ensure they could support families through these processes, while also needing to change their business model. In addition, there was concern that the transition to the new funding model and alignment to the Child Care Package took away from the focus on child wellbeing, and the focus of many of these services in providing a culturally appropriate service for the community.

## Paid Parental leave

AIFS has a long history in undertaking research on the leave-taking and employment of new parents, reporting on parental employment trends, and has ongoing involvement in the International Network on Leave Policies and Research.<sup>3</sup> We recognise the importance of a paid parental leave scheme that provides families with options for taking time out of employment to nurture infants and young children, while maintaining a longer-term connection to employment.

Some Australian parents can access employer-funded parental leave schemes. However, uneven access to leave provisions across industry and sectors has been widely noted, contributing to inequalities in leave access for parents employed in different parts of the labour market. Parents in more precarious jobs or in self-employment are likely to be without this support and may need to return to work earlier than preferred or become disconnected from the labour market. Access to the Australian Government's Paid Parental Leave is especially important for these families, for both mothers and for fathers.

There are strong gendered norms in Australia related to which parent takes time out of employment to care for children. This is apparent in [recent AIFS research](#), using detailed census data. Men's employment trajectories tend to be unchanged by the arrival of a new child

<sup>3</sup> See recent AIFS research on employment [Employment patterns and trends for families with children | Australian Institute of Family Studies \(aifs.gov.au\)](#) and [Employment of men and women across the life course | Australian Institute of Family Studies \(aifs.gov.au\)](#). Also see Whitehouse, G., Baird, M. and Baxter, J.A. (2022) 'Australia country note', in Koslowski, A., Blum, S., Dobrotić, I., Kaufman, G. and Moss, P. (eds.) *International Review of Leave Policies and Research 2022*. Available at: <https://www.leavenetwork.org/annual-review-reports/>

while a women's career is often significantly disrupted, through time taken out of employment and a preference for part-time work or more flexibility when returning to work. Given these differences, it is not surprising that women use Paid Parental Leave in greater numbers than men using Dad and Partner Pay. Exploring these gender differences, and how leave is used within the family, is an important aspect of understanding family life for children in the weeks and months after birth.

Research on the use and impacts of the current Paid Parental Leave policy in Australia is limited and is a clear evidence gap that should be addressed. AIFS has initiated a project to analyse administrative data on PPL and DAPP to provide insights into the use of the current policy, and how access and use varies across different demographic groups. The Multi Agency Data Integration Project (MADIP) project links these administrative data with other data sources, and findings are expected to be published by AIFS in 2023.

## Key AIFS resources on ECEC

This section highlights some past AIFS research and evaluation activities, with links to published findings. Detailed findings from these activities can inform the development of the Strategy.

### Child Care Package Evaluation

Our most recent large scale project on ECEC was leading the [Evaluation of the Australian Government's Child Care Package](#).<sup>4</sup> The Child Care Package included the introduction of the Child Care Subsidy (replacing previous subsidies, with a new Activity Test, income test and hourly fees caps) and a new Child Care Safety Net, comprising the Additional Child Care Subsidy, the Inclusion Support Program and the Community Child Care Fund. It also involved regulatory change, a new IT system and the incorporation of some 'Budget Based Funding' services into the main child care system. The evaluation of these changes involved a vast program of data collection from families, the child care sector and stakeholders, and included extensive analysis of administrative data relating to child care. Evaluation findings have fed into the Government's decisions about changes to child care policy, and the final report was published in 2022.

This report provides insights on topics relevant to the Early Years Strategy, covering findings related to:

- Affordability and access.
- Parents' workforce participation.
- Families experiencing vulnerabilities.
- The supply of ECEC, sector viability and business models.

In addition to the overall evaluation, AIFS also led the consortium to evaluate the [Inclusion Support Program](#) and the [In Home Care program](#).<sup>5</sup> These evaluations provided more detail about those programs and contain findings that relate to the accessibility of ECEC to children from more vulnerable cohorts.

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<sup>4</sup> AIFS led the consortium with the ANU Centre for Social Research and Methods, the UNSW Social Policy Research Centre and the Social Research Centre

<sup>5</sup> See also the full reports from these evaluations [In Home Care Evaluation Report | Australian Institute of Family Studies \(aifs.gov.au\)](#) and [Evaluation of the Inclusion Support Program | Australian Institute of Family Studies \(aifs.gov.au\)](#)



## Child Care Flexibility Trials Evaluation

The Child Care Flexibility Trials were conducted by the Australian Government in 2013 and 2014. These trials focused on meeting the child care needs of parents who worked non-standard or variable work hours and who may have had difficulties finding care that supported such work hours. AIFS was commissioned to evaluate the trials and the findings were published in the AIFS report [Flexible child care | Australian Institute of Family Studies \(aifs.gov.au\)](#). This report describes what trials were undertaken, and learnings from them. A more in-depth research report ([Flexible child care and Australian parents' work and care decision-making | Australian Institute of Family Studies \(aifs.gov.au\)](#)) explored further the decision-making of parents in relation to flexible child care and parents' work.

## Access to early childhood education

Two Access to Early Childhood Education and Care Services projects were commissioned by the Department of Education and undertaken by AIFS in 2011-2013. While these reports are now from some time ago, they still offer some valuable insights. The focus of these research projects was finding out more about gaps in access to and participation in preschool programs by Australian children aged 4–5 years old. This project examined participation in standalone preschools as well as preschool programs delivered through the child care system.

- The first project ([Access to early childhood education in Australia | Australian Institute of Family Studies \(aifs.gov.au\)](#)) reviewed the definition of “access” to preschool and discussed possible approaches to measurement of access. It also used survey and census data to identify issues and factors affecting access to preschool services.
- The second project ([Access to early childhood education in Australia: Insights from a qualitative study \(aifs.gov.au\)](#)) went deeper into the question of what barriers there might be to preschool participation, including consideration of how participation is affected by different delivery systems. The research involved qualitative interviews with parents in Victoria, South Australia, Tasmania and Western Australia.

These projects showed that the children missing out on preschool were more often represented among disadvantaged families, and whose children are perhaps in greatest need of preschool to achieve school-readiness. First Nations children and children of parents from non-English speaking backgrounds were less likely to be participating in preschool, according to analysis undertaken for this report. In the second report, different perspectives were evident concerning reasons for non-participation in preschool. However, a commonly reported difficulty related to parents' ability to manage the hours of preschool around their other commitments, notably those relating to their employment.

## Recommendations – research and evaluation

Evidence based policy and program development is essential. AIFS welcomes the recognition of the need to develop a research agenda to underpin the Early Years Strategy. A critical first step in this process should be an audit of existing sources of evidence and data and gaps in the evidence base (**Question 8, Discussion Paper**).

A central concern of this audit should be the adequacy of the evidence base on areas of Commonwealth policy responsibility, including levers that influence poverty (such as income

support policies and their implications for children and families), paid parental leave, influences on employment decisions among parents, supply of and access to quality childcare and policies and support relating to disability as well as separated families (including post separation financial arrangements).

The audit should also assess how such data sources can be used to evaluate the impact of the Early Years Strategy, as evaluation is necessary to assess the impact (positive, negative, and unintended consequences) of the policy and program changes that occur as a result of the Strategy.

A further focus of the audit should be on the adequacy of the evidence base in relation to First Nations, Culturally and Linguistically Diverse families and families where a parent or child has disability.

AIFS also reinforces the need for national longitudinal data to enable the assessment of causal and determinant factors for child wellbeing outcomes. As this submission demonstrates, LSAC has been and continues to be critical to understanding social, economic, and familial factors on outcomes for children across a range of domains, including physical and mental health, education and social functioning. LSAC commenced in 2004 with 2 cohorts of 5,000 children each, aged 4-5 and 0-1 years, and is now up to the 10<sup>th</sup> wave of data collection, with the children now teens and young adults.

AIFS recommends that a new babies cohort be recruited to LSAC:

- LSAC is now 20 years old, and the babies and kindergarten cohorts are now young adults. A new birth cohort recruitment for LSAC would provide rich research opportunities, allowing comparison of a new generation to those of the current study. This would allow identification and comparisons of the impact of a range of emerging issues, including technology, and changing family forms.
- At the same time observation of the young adult's experience of their own family formation would become possible.
- Extending the current study by following the offspring of the current LSAC cohort would also allow detailed intergenerational research on the impacts of ECEC.



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