

The Caroline Chisholm Society welcomes the opportunity to provide a submission on the Early Years Strategy Discussion Paper – April 2023.

Caroline Chisholm Society – Specialisation in the First 1000 Days and Early Years.

The Society's specialisation is in the First 1000 Days and early years of young children. It is well recognised for its efforts to counter the impact of a range of social and economic factors that diminish the capacity of women to care for babies and young children.

The Caroline Chisholm Society (the Society) is a registered and accredited community service organisation in Victoria covering the western suburbs of Melbourne and Goulburn Valley providing services during pregnancy, for children and families. We offer support for families from the moment a woman learns of her pregnancy to the time her youngest child goes to school. We work with women and their families to achieve a safe and nurturing environment for their children.

As a registered and accredited community agency in Victoria, the Society is also funded through the Department of Families, Fairness and Housing (Victoria) covering the western suburbs of Melbourne providing specialised family services including pregnancy support, housing and perinatal mental health services to women, babies and children up to the age of 5 who may otherwise be at risk of being impacted by family violence, homelessness, social isolation and mental health.

The Society is involved with the support and care of over 600 families (involving over 900 children aged 0-5) per year, providing:

- Home visitation program delivering evidence informed programs to build parenting capacity while at risk of or facing homelessness, family violence and mental health issues.
- Single session and brief consult appointments through placed based programming designed to provide individualised interventions specific to the needs of the mother and her child.
- Outreach and place based supports including material aid in hard to reach communities.
- Perinatal Mental Health Services.
- Specialist Housing Supports.
- Evidence Based Programs focussing on attachment and building adult capabilities.
- Place based outreach services in community and learning hubs.
- New and pre-loved baby and maternity goods to families to alleviate the impact of poverty.

Our strength is our capacity to be flexible and responsive to the need of mothers during pregnancy, post birth and across the early years in the life a young child in the context of a high quality and highly regulated service sector.

In 2021, the Society was a successful recipient of a Westpac Stronger Communities grant to scale up its specialisation in support of at risk and vulnerable women and their children in the Goulburn Valley community. This work has focused on the significance of the First 1000 Days and in response to the growing number of pregnant women at risk of involvement of child protection at the time of giving birth.

The Society has provided a material aid program (the Every Child Program) for over 50 years, and as a point of difference in service provides a practitioner to assess the needs of mothers at their point of contact with the organization. Through this assessment process, it is possible to then either undertake a local intake, offer single session or brief consults to better understand the situation presenting and why is it that a family would need baby food, formula, nappies and cots. The no wrong door often commences from the point of contact with a woman requesting assistance with material aid who might otherwise be seeking nappies and formula but on further assessment with a practitioner it is determined that the mother is homeless and sleeping in her car with young children.



Such programs become critical entry points for families, and yet are programs difficult to fund in not attracting funding from government or corporate sources, and typically dependent on donations and grants.

The Society is developing a maternal wrap around approach based on the principles including trauma informed practices, designed to focus on bringing a team together with specific roles to address the specialist needs for the expectant mother. This is also intended to improve the local knowledge of practitioners in providing specialized services to pregnant women. This will also inform the Society's work in scaling up to develop a specific focus in the First 1000 Days offering pregnant women, services who might otherwise be limited or unable to qualify for support.

Along with developing its maternal wrap around approach, the Society also provides evidence-based programs including SafeCare, Circle of Security and Bringing Up Great Kids (First 1000 Days and Parenting after Family Violence), all within the scope of family services, including group work and home visitation programs.

Underpinning the practice across services offered through the Society is a theory of change. This recognizes the importance of building adult capabilities to improve child outcomes. This is a theory of change developed through the Frontiers of Innovation, Harvard Centre on the Developing Child and is directed toward achieving breakthrough outcomes for vulnerable children and families. Drawing on the experience of researchers, practitioners, policy makers and community leaders the Harvard Centre's theory of change it describes the need to focus on building the capabilities of caregivers and strengthening the communities that together form the environment of relationships essential to children's lifelong learning, health, and behaviour (ref. https://developingchild.harvard.edu/resources/building-adult-capabilities-to-improve-child-outcomes-a-theory-of-change).

Professor of Child Health and Development at Harvard, and Director for the Centre, in articulating why the need to focus on adult capabilities describes this as his "light bulb moment" the reason we're not getting a bigger impact is not because we don't know about how to influence development but because we're giving information and advice to people who need to do active skill building by coaching, by training, by practice ... but we're not doing that ... we need to focus on the development of adults who are important in kids' lives. (ref. <u>https://developingchild.harvard.edu/resources/building-adult-capabilities-to-improve-child-outcomes-atheory-of-change/</u>)

Early Years Strategy

The Society welcomes the Early Years Strategy as a significant undertaking to engage with communities, parents, carers, practitioners, educators, service providers and organisations in recognising the vision we aspire to where every child experiences the opportunity for the best start in life: a chance to thrive; and the importance of building good foundations to ensure that no child or family is held back or left behind (EY Strategy p. 3).

The Society also recognises the important work undertaken at the recent summit (does everyone know what this is), where the themes of empowerment, inclusion, accountability, were identified, along with the importance of developing approaches balancing universal access to services and support but are also responsive and bespoke to local contexts.

The evidence presented in support of the Strategy, the Background Paper, identifies a range of factors supporting the case for the investment in the Early Years. Especially pertinent to the return on investment argument is the reference to Heckman's work (Early Years Strategy Discussion Paper p.8).

And yet the case doesn't necessarily move beyond attempts to understand the impact of the case studies Heckman's evidence drew on to demonstrate the importance of the early years and high quality programming in early childhood services. For instance, a significant evidence-based program like the Abecedarian Approach was one such study underpinning Heckman's return on investment case study.



The Abecedarian Approach is widely acknowledged in the early childhood sector and designed to bridge the relationship between home and early learning programs in order that children receive consistent engagement in strategies designed to improve their social and emotional wellbeing. A focus of the program is designed around evidence-based practices to improve early parenting capacity and the adult capacity of early childhood educators including to provide consistency in practice and engagement with children. It's emphasis on building the connection between home and early childhood programs is an ideal example in demonstrating how effective programming for children in the early years is achievable when systems are aligned and working in unison to deliver on outcomes.

The continued fragmentation that currently exists not only between state and federal investments but also between systems and policies designed to deliver on early years programming and services continue to undermine efforts to improve outcomes in the early years. This also includes the disconnect reflected in policy and funding models purportedly designed to support programs that impact outcomes in children's development and wellbeing, and yet fragmented between those environments where children are constantly moving between – whether it be in an early learning and child care program: playgroups; homes and community services.

And yet the gaps in the connection in a system response to this has been highlighted in the advocacy by the Society that has identified:

- State government deferring a response to the needs of children under the age of 3 as a federal government response in the area of early learning and care.
- State government unable to articulate a prevention approach for the First 1000 Days in response to the growing number of babies and infants, and especially for Aboriginal children either entering out of home care system or involvement with child protection.
- System failure to address the growing number of pregnant women impacted by homelessness and at risk of child protection at the time of giving birth.
- The unmet services and supports for young pregnant women (aged between 13-17) in out of home care at risk of reports to and involvement of child protection at the time of giving birth.
- System and policy failures leading to pregnant women not able to access family services and programs until giving birth.
- Government not able to align funding or policy in support of family services collaborations with early childhood programs.
- Government preferences to work with large consortium service models when negotiating for service delivery that typically exclude developing approaches that balance universal access to services and supports but that are also responsive and bespoke to local contexts.
- The impact of the COVID pandemic on workforce shortages that have led to maternal and child health services being impacted in the delivery of a universal service to all mothers and babies.
- The siloing of systems including policy and funding models limiting the capacity engage in multi or cross sectoral service provision.
- Federal and state government policies impacting the safety and wellbeing of mothers prior to and post birth that might otherwise determine their ability to cover the basic needs such as housing.
- Federal government policies failing to address the safety and wellbeing of mothers experiencing family violence being moved from partnership visas to protection visas limiting their capacity to work, access affordable health care and childcare for their babies and preschool aged children.
- The ongoing disconnect between the provision of early learning and care services and family services to provide for a consistent response and approach in meeting the social and emotional wellbeing of children across the environments in which they move.
- The issue of protection visas designed to support women coming out of family violence situations who have arrived in Australia on partnership visas. Policy determines that the conditions on their partnership visas are transferred across to their protection visas limiting their ability to work, access health care and child care. Numerous case studies the Society has worked with have identified women



with young children who have been placed at further risk of sexual exploitation, homelessness and trafficking due to their inability to secure appropriate housing.

• Increasing numbers of pregnant women rough sleeping, couch surfing and sleeping in their cars only able to access basic Centrelink payments until the birth of their baby. Prior to giving birth women seeking support are not able to access services as the client focus is on the child and until such time as the baby is born, then there is no client to provide services to in preparation for birth. At the time of birth, a report is made to child protection and unless a mother can demonstrate she has secure housing she is likely to be informed that she can't take the baby with her at discharge.

Fundamental to this Strategy is a discourse surrounding whether there is a genuine commitment to specifically set outcomes, targets and policies to address the First 1000 Days as acknowledged in the Strategy's Discussion Paper,

Question 1: Comments on the proposed structure of the Strategy.

In response to the proposed structure of the Strategy reflects a standard structure. Key to the success of the Strategy will be the next steps in engaging with the diversity of stakeholders, lived experience of both parents and practitioners (representing the various family and educational services), community leaders in determining the outcomes, policy priorities and indicators for measuring success.

The process will be challenging to capture a diversity of views in attempts to create an overarching Strategy that children, parents and communities can see their experiences are being recognised.

There is also the challenge and a risk with a significant strategy initiative is the capacity for the outcomes and measures to be accessible, deliverable and measurable.

Question 2: What vision should our nation have for Australia's youngest children?

This question goes to the very heart of intent and purpose of the strategy; and if there is a collective consensus or agreement that the vision resonates this would hopefully set the Strategy up for success in being achievable.

However, the vision remains aspirational and on behalf of the Society I would propose that the vision needs to move beyond aspirational language as children are owed and entitled to being safe, secure, nurtured, cared for, protected, and provided opportunities designed around the very best in what it means to grow up in Australia as a child. Every child is entitled to the best start in life.

And to achieve this it is incumbent on adults to create and advance the interests of children; to advocate for them and ensure that their basic and fundamental needs are being met including:

- opportunities for learning and care environments that are pedagogically designed in response to a child's developmental and learning needs and not driven by school readiness discourse;
- housing and food security;
- safe and nurturing environments;
- access to timely medical and health supports;
- spaces created that afford the recognition of a child's abilities and desires to explore and connect to their communities and families.

It is incumbent on those in leadership and spheres of authority who can determine the policies and mobilise the resources that invest in building the capacity for families and communities to care and educate their children.

It is important to recognize the need to build the adult capabilities of families and communities who ultimately have responsibility for the raising of children; and given recent experiences of the COVID pandemic and the impact of increasing cost of living pressures for families, the social and economic needs of some of our most at risk and vulnerable will continue to grow including placing further pressure on parents in providing for the most basics in the social and economic security of their children.



Question 3: What mix of outcomes are the most important to include in the Strategy

There would be consensus on what is being proposed regarding how an outcome should describe what the Strategy will achieve. However, it is important to make the connections and link policy and system outcomes.

For instance, there remains a significant disconnect in early learning and care settings and home, with a significant focus placed on children entering 3 and 4 year old as a form of school readiness.

Is this in fact the purpose of a rich early learning and care experience for a child to be formally prepared for school; or more importantly to focus on how rich and quality early learning and care experiences – that also engage families and build early parenting capacity – serve the purpose of promoting and enhancing a child's social and emotional wellbeing and development, setting them up for success in how they relate and engage with their peers/with other children within their own families/extended families and within their local communities.

Access to early learning and care experiences for young children and their parents should be made readily available for the purposes of a child and their parents/caregivers being connected, engaged, culturally safe, and establishing a sense of belonging to community.

There is a tendency in strategies like those focussing on the early years to establish focus areas so as to cover all points of contact that might impact or determine how the strategy or plan will be achieved. However, this also runs the risk of siloing the outcomes; or limiting the scope of how an outcome focus might be limited to a particular section of the system.

Again, taking the example of early learning and care, is the outcome here the focus on the early learning and care environment or the system that has jurisdiction over early learning and care that is considered in the outcome. If the focus is on learning and developing, then what are the policy levers and system requirements that are a part of an outcome designed to advance a child's learning and development.

For instance, how is an outcome focus taking into account the need to improve the early learning and development taking place in the home. How do we connect home to early learning programs, with the intent to build early parenting capacity and adult capabilities in providing for the early learning and developmental outcomes of young children.

How do the relevant systems and policies better align to improve the access into systems prior to 3 years of age that currently neglect the importance of early parenting and the formation of values around parenting taking place during pregnancy.

The outcomes need to specifically address:

- the importance of the First 1000 Days bringing together those systems, policies and settings where parents expecting a baby and post birth are connected into services that focus on their parenting capacity.
- The importance of access to universal services currently being undermined by policy and funding measures impacting the availability of timely and responsive interventions.
- the need to build into early learning and care programs the colocation and placed base of family services practitioners in order to improve the service connection and ability to work sooner with parents in building their parenting capacity including connection between strategies in promoting children's learning and development across home and program. There currently exists a significant gap in service including funding and policy to address the disconnect resulting in children accessing programs with little to no connection into the home in order to build and strengthen early parenting capacity prior to children participating in 3 and 4 year old kindergartens.
- Focusing on the outcomes for children requires a serious focus on building the adult capabilities as well as improving system and policy design to ensure these outcomes are achievable.
- Articulating outcomes to focus on early parenting and engagement with families prior children entering kindergarten.



- the systems and policies aligned to each outcome and accountable for delivery on the Action Plan, including clearly articulated expectations in addressing the system and policy misalignments impacting the ability of families to access supports and services for their children.
- How to effectively capture the lived experience of families and their young children; and specifically the lived experience of those displaced and removed from the care of their families in the early years.

Questions

4. What specific areas/policies should be included in the Strategy and why?

5. What could the Commonwealth do to improve outcomes for children particularly those who are born and raised in more vulnerable and/or disadvantaged circumstances?

<u>6. What areas do you think the Commonwealth could focus on to improve coordination and collaboration in developing policies for children and families?</u>

As outlined at the outset of this submission, there remain substantial issues regarding the inconsistencies between policies and funding models that continue to impact the desired outcomes for children.

The Society continues to provide a no wrong door entry to services providing the system navigation, advocacy and community connection that might otherwise leave a pregnant woman with nowhere else to go.

A priority area as identified earlier in the need to improve the connection between home and early learning programs is to establish a pilot project to implement the Abecedarian Approach across early childhood services and family services would begin to address the need to build capacity in parenting; engagement with early learning and care services and improve the parent to child relationship through consistent strategies being applied across home and early childhood settings.

Such a program is yet to happen with the Society continually engaging with philanthropic, foundations, and government (both state and federal) to establish such a project which would be considered an Australian first and fulfill the initial intent of the Approach in strengthening the consistency and engagement of teaching and learning strategies for educators and parents with children from birth to five.

The Society is currently developing a First 1000 Days specialist practitioner to receive those self referrals as well as meet the growing demand of referrals from hospital based social workers, community agencies and maternal and child health nurses for pregnant women and newborns who continue to either not engage or are not able to be accepted into existing services. As current funding models do not accommodate provisions for a pregnant woman to receive services, there is a significant risk of a child protection report once baby is born. As a prevention strategy the Society has argued the case for a First 1000 Days approach to fund this area of work as there remains a gapping absence of specialist services engaged to prevent or mitigate the risks of child protection involvement once a woman gives birth.

As part of the Society's First 1000 Days work, the CEO in former roles in working with government departments and community organisations in Canada, the US and UK, and founder for the Australian Baby Box Project, has developed an in-house baby box project based on the Finland experience providing a point of contact for engaging with mothers during pregnancy to provide a key connect to family services and community agencies who might otherwise disengage with health services due to not being able to afford prenatal education programs. The baby box provides a key opportunity to provide a tangible resource with items in the box including safe sleep sack, clothing, books and toys that are designed to engage with early parenting strategies with mothers as deliberate and intentional interactions, building their attachment and preparing for a safe delivery with mothers connected to services.

The Society has also argued the case to improve the connection between social work and community services training to be further imbedded to services. Such models exist in education such as the Teach for Australia model, which involves Master of Teaching students undertaking their two year placement in schools while



undertaking their education studies. We would strongly argue that the case could be made for social work and community services students to undertake similar programs. The Society currently actively engages with student placements to strengthen their knowledge of system navigation and community connection with the hope that this will be their capacity for further knowledge of how to work through various procedures and systems to get a better outcome for their clients. In the short term, student placements become important system navigators working alongside practitioners who are able to supervise them on placement while at the same time freeing up their time to deliver the parenting intervention designed to improve the parent to child relationship.

In response to question 6, a focus for government would be:

- The inconsistent policies currently impacting the ability of women from immigrant and refugee experiences to find and secure meaningful work and social services supports, especially those impacted by the need to be issued with protection visas.
- Address the funding for Centrelink payments prior to a mother giving birth that impact her ability to secure safe and affordable housing.
- Recognise the specialisation of the First 1000 Days and the needs of some of our most at risk and vulnerable children including babies prior to being born as their mothers struggle to be accepted into services that might otherwise provide critical supports to engage in meaningful ways in preparation for a safe delivery and the ability to keep mother and baby together. The increase costs to out of home care systems and child protection involvement would be significantly impacted through the investments into prevention work. The evidence as argued by Heckman supports this as a priority area.
- Establish a funding initiative targeting specialist housing services including a maternal wrap around approach that engages with family and early childhood education services, providing mothers with up to 6 months of housing. Specialist wrap around supports would include a focus on coaching and mentoring to establish connection into employment and education opportunities.
- Establish funding for family services practitioners to be place based in early childhood programs prior to 3 and 4 year old kindergarten, particularly in at-risk communities where young babies and children are accessing childcare programs due to the exposure of vulnerabilities in their home settings.
- Develop a workforce strategy to address the need to build the workforce capacity in family services and early learning settings, including paid student internships that also recognise the increasing demands for students endeavouring to balance student placements, studies and work in order to support themselves.
- Fund an Abecedarian pilot project along with working with family services and specialist agencies like the Society, in identifying programs to collocate family services practitioners able to engage with families accessing early learning and child care programs, with a focus on 0-3 prior to kindergarten.

Question 7: What principles should be included in the Strategy.

The guiding principles as a preliminary start begin to capture what is important in terms of recognising parents as the first educators of their children, and the need to set them up for success in their parenting; their ability to meet the social and emotional needs of their children; and to be able to provide for safe, secure and caring environments.

The key summit themes also offer guidance in the development of the principles, including:

- Supporting and empowering children, parents, carers, families and communities.
- Inclusion particularly of First Nations peoples, culturally and linguistic diverse (CALD) people and children with a disability.
- Accountability to ensure the early years remain an enduring feature of Commonwealth public policy.
- The importance of developing approaches that balance universal access to services and supports but that are also responsive and bespoke to local contexts.

A response to the Early Years Strategy Discussion Paper



The guiding principles also capture what would be typically accepted including the recognition of diversity in children and families.

Principles including:

- Embedding Proportionate Universalism, responding to the level of presenting need by delivering universal services at a scale and intensity proportionate to what is required in the support and care of children and their families.
- Consideration to the expertise of practitioners whose lived experience is not always acknowledged or captured.
- Collaboration across disciplines, systems and departments, but being clear by what is meant by collaboration and providing guidance on how this is achievable would be helpful as often competing interests and mandates impede this being achievable.
- Strengths based approach to respect the dignity of childhood and to avoid deficit models impacting policy and service designs.
- A universal response cannot mean a uniform approach. Diversity and flexibility in program design and implementation is critical.
- Trauma informed in recognition of the impact of trauma, including neglect and abuse, and the intergenerational legacies of babies and children being removed from their families who they themselves are having children and are at further risk of vulnerabilities impacting outcomes for both parent and children.
- Respect and upholding the dignity of being a parent; and in achieving outcomes for children means engaging respectfully with families to better understand their hopes and dreams for their children; and how best to deliver services and policies that strengthen parenting.
- Recognising the partnership with parents and community in developing a vision and outcomes in the early years.
- Cultural safety for children recognising CALD backgrounds and diversity in parenting as a result of cultural beliefs and practices.
- Value the importance of a childhood that provides for meaningful engagement with their immediate worlds including their communities, families and friends.

Question 8: Are there gaps in existing frameworks or other research or evidence that need to be considered for the development of the strategy.

Is it enough to put forward that there is sufficient evidence to make the case for the need for improved systems and policies designed to deliver on the outcomes for every child under the age of 5. It is now time to deliver on what we know is needed to achieve these outcomes, including:

- better understanding what is happening in our communities and homes that can improve outcomes for children under the age of 2.
- recognising where the system is failing and what is to be done to improve the system responses in order that the Strategy is achievable.
- how to improve the systems and policies that recognises the diversity in service delivery approaches
 including recognising local context and the expertise that is drawn from local communities that has
 shaped the specialisation of so many community and family services, not unlike the Society, who grew
 out of community and specialist responses.

As part of further research work to engage with local communities, parents, practitioners, and service providers across disciplines to better understand the impact of local knowledge and practices that might provide strong evidence in what works best when designing and implementing programs in the early years. Further research focus to include:



How does a Strategy capture such diversity in a way to work effectively across the systems and policies and funding models to deliver on the vision that all children have an entitlement to a way of life that ensures their safety, security, health and happiness. A vision of children thriving in families and have opportunities to fully participate in their communities designed to develop, promote and enhance their social, health and economic wellbeing.

It is incumbent on those of us in positions of influence, responsibility and leadership to engage in more meaningful ways to achieve on this Strategy. It is an important time in our history to do this, and it is critical in the lives of young children that we don't fail them when they need us most.

Submission made by:

Caroline Chisholm Society

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