



**Child  
Development  
Council**

**Australian Government**

**The Early Years Strategy**

**Discussion Paper**

February 2023

**Submission from the Child Development Council**

**South Australia**

**28 April 2023**



**Government  
of South Australia**

# Contents

Introduction .....	4
RESPONSE TO SECTION 3: 'YOUR VIEWS' .....	5
1 Do you have any comments on the proposed structure of the Strategy?.....	5
2 What vision should our nation have for Australia's youngest children?.....	6
3 What mix of outcomes are the most important to include in this Strategy?.....	8
4 What specific areas/policy priorities should be included in the Strategy and why?.....	8
5 What could the Commonwealth do to improve outcomes for children – particularly those who are born or raised in more vulnerable and/or disadvantaged circumstances?.....	9
6 What areas do you think the Commonwealth could focus on to improve coordination and collaboration in developing policies for children and families?.....	10
7 What principles should be included in the Strategy? .....	11
8 Are there gaps in existing frameworks or other research or evidence that need to be considered for the development of the Strategy? .....	12
RESPONSE TO SECTION 1: INTRODUCTION.....	13
Child Development Council.....	13
At a glance - children under five years in South Australia.....	14
All children .....	14
Location .....	14
Socioeconomic level (IRSD) .....	15
South Australia's population by age groups .....	15
Children under five years by age .....	15
In out-of-home care.....	16
Disability .....	16
Aboriginal children under five years in South Australia .....	17
Aboriginal children – numbers and proportions .....	17
Aboriginal children under five years by age.....	17
RESPONSE TO SECTION 2: THE CASE FOR AN EARLY YEARS STRATEGY .....	18
How are children are faring in the early years? .....	18
Figure 2 Participation in early childhood education and care in South Australia in 2021..	18
Gaps in our knowledge .....	19
Developmental milestone data.....	19
Early intervention.....	19
Addressing data gaps and data quality.....	20
What is the Australian Early Development Census telling us in South Australia? .....	21

Figure 3	AEDC results of developmental vulnerability by collection year, states and territories, 2009 - 2021 .....	22
Table 3	Percentage of children developmentally vulnerable in 2021 by AEDC domain, state and territories .....	22
Cohorts at risk of poorer development outcomes.....		23
Table 4	Percentage of children (birth to four years inc) by socioeconomic level (IRSD), 30 June 2021 .....	23
Children who are developmentally vulnerable in South Australia .....		23
Figure 4	Change in developmental vulnerability in one or more domains in SA by socioeconomic quintiles, 2009 - 2021.....	24
Annex 1	Policy brief: South Australia's surprising downward trend in AEDC results .....	25
Annex 2	Mapping the dimensions, indicators and measures of South Australia's Outcomes Framework for Children and Young People against the Closing the Gap targets .....	29

## Introduction

This submission by the Child Development Council provides insights about the early years sector in South Australia, including achievements and challenges confronted that may be useful in informing the development of Australia's The Early Years Strategy.

The Child Development Council's submission has the purpose of informing the Strategy about the Council, a legislated body set up in South Australia, intended to provide this state with a set of data upon which decisions can be made about children in the early years (birth to five years).

The Council's response to The Early Years Strategy discussion paper is sequenced as follows:

- the questions posed at the end of the discussion paper are responded to first, based on South Australia's experience (pages 5-12)
- comments regarding the Council as a model for a national approach are provided next (pages 13-17)
- finally, the Council provides insights from *How are they faring? South Australia's 2022 Report Card for children and young people*, making visible both the categories of data that could be collected to provide a foundation for the Strategy, as well as the data gaps (pages 18-24).

# RESPONSE TO SECTION 3: 'YOUR VIEWS'

Section 3 of the discussion paper asks eight questions under the paragraphs marked a. to f.

## 1 Do you have any comments on the proposed structure of the Strategy?

The proposed structure comprises the vision, outcomes, policy priorities and indicators, informed by the principles and evidence. This structure in itself is not without merit but fails to explain how the various strategies and plans and initiatives identified in Attachment A will be brought together into a cohesive approach across the Australian Government.

Previous approaches around coordination have not always been successful, in part because there has not been an identified lead agency/department or because responsibilities have not been accorded to the level of government or community which can best have responsibility for achieving the desired outcomes. (The Closing the Gap strategy is a case in point.)

In addition to achieve success requires the alignment of policies, structural changes in roles and responsibilities, the redesign of funding arrangements and accountabilities and significant work in relation to the workforce, training and development, reporting and service redesign.

- Data should inform the setting of policy priorities, not only the indicators

Good quality data are fundamental to government and policy makers for creating strategies, setting objectives or developing and implementing policies, eg setting the national priorities.

- Robust data, and the timely availability thereof, should be a policy priority

Measurement and reporting are a means to an end and to be effective in improving outcomes, data must be timely, able to be disaggregated, have some consistency of indicators and measures and reflect data gaps with placeholder measures. Data gaps, data lags and inferior data inhibit decision-makers from making informed decisions. Some of the available data are too old for a contemporary evidence-base to inform decision-making, eg the *National Oral Health Plan 2015-2024* calls for a population-based epidemiological study of the oral health of children and young people to be conducted every 10 years.

- Evaluating the effectiveness of the Strategy

The Council supports the notion of an 'Outcomes and Evaluation Framework' to evaluate the effectiveness of the Strategy, eg every three years.

- Reporting under the Strategy

Regular reporting should be built into the Strategy. In SA, the third report card under SA's legislated framework, SA's 2022 Report Card, provides population-level outcomes for children

and young people (birth to 18 years). Part A reports for all children and young people<sup>1</sup> and Part B reports for Aboriginal children and young people.

The data are reported for the framework's five legislated dimensions – health, safety, wellbeing, education and citizenship (preparing for adulthood) – to provide an evidence-base that informs strategies, objectives, policies and funding decisions.

The data indicate that *most* children and young people in SA appear to:

- be in good health
- be safe from preventable abuse and neglect
- be happy, inspired and engaged,
- have positive experiences of learning
- be preparing for adult life.

Importantly, SA's 2022 Report Card also shows that some groups of children and young people have poor outcomes and highlights areas for collective effort by State authorities. See [Outcomes at a glance](#), an A3 placemat summary of SA's 2022 Report Card which highlights key data and priorities for action for SA.

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

Australia's youngest citizens should:

- be in good health
- be safe from preventable abuse and neglect
- be happy, inspired and engaged
- have positive experiences of learning
- be preparing for adult life.

Children are valued and contributing citizens from birth. In the interest of maximising their individual outcomes, as well as system outcomes, the Strategy might benefit from aligning outcomes from (before) birth to every stage of development and adulthood.

The Australian Research Alliance for Children and Youth (ARACY) model, the Nest, could be used to inform the Strategy's outcomes. The Nest conceptualises wellbeing as six interconnected domains for children to thrive and reach their full potential, and it includes principles and priority

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<sup>1</sup> References to 'all children and young people' are inclusive of Aboriginal children and young people.

directions to mobilise collective effort to improve the wellbeing of children and young people (birth to 24 years).<sup>2</sup>

The Early Years Strategy should include a vision and commitment to give children the best start in life – to support and strengthen the preconditions for children to learn, grow and thrive<sup>3</sup>.

It requires an integrated, high quality and accessible system that covers the period from prebirth to school entry and includes the health, development and learning of all children. It also requires essential partnerships with parents and caregivers, integrated and coordinated services at the local level which deliver not only early childhood education and care (ECEC) services that are culturally appropriate, but also services for children with additional needs and support for families in their parenting and care giving roles.

The Gillard Royal Commission Interim Report<sup>4</sup> has identified three themes and underlying principles to support its recommendations to the SA Government:

- Embrace all children – be universal but not be uniform; take active steps to ensure full participation of all children (in three-year-old kindergarten); cater to the different needs of communities, families and children; and enable families to make choices about the settings and services that best meet their needs
- Fairness – which means the system should support equity for all children and families, providing additional hours and supports as required to improve outcomes
- Quality – which means the system will be designed to reach or exceed current quality benchmarks and measurably improve learning outcomes
- Build the connections that matter for children’s lives including data collection, adaptation, community input and support for professional development and research at every level of the system

The provision of linked, system-wide data providing de-identified data sets that bring together Australian Government data with State and local government data sets would be a positive development. If these data could also be available at a population and sub-population or community/local government area level this would also allow for focussed research<sup>5</sup>, more and localised responsive interventions and improved policies and programs.

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<sup>2</sup> The six domains of the Nest wellbeing framework are: valued, loved, and safe; material basics; healthy; learning; participating; and positive sense of identity and culture.

<sup>3</sup> Summary of Findings Royal Commission into ECEC Interim Report, April 2023 p.37

<sup>4</sup> *ibid*

<sup>5</sup> Research findings being undertaken by the Murdoch Research Institute and the University of Melbourne and a range of organisations involved in the GenV Project.

### 3 What mix of outcomes are the most important to include in this Strategy?

A national Wellbeing Strategy for the Early Years could include the Nest domains, ie: valued, loved, and safe; material basics; healthy; learning; participating; and positive sense of identity and culture. The Strategy should be closely aligned to Closing the Gap outcomes. For example, the Council has mapped/paired SA's framework measures against the Closing the Gap outcomes and targets (refer Annex 2).

The ecological models such as the Nest are based on the work of Urie Bronfenbrenner (1979), and have been used in Australia to support a number of research projects and programs in early childhood. Building on Bronfenbrenner's model, the attractive OECD Aspirational Framework includes child-focused measures and indicators that are drawn from a broader and even more ecological view. The availability of the relevant data sets and the resources available to enhance the current data sets into a systematic approach will determine the feasibility of the preferred option.

### 4 What specific areas/policy priorities should be included in the Strategy and why?

Data and other evidence should inform the determination of specific areas/policy priorities. An inflexible one-size-fits-all approach for all states and territories might not be effective in improving outcomes for all groups of children and young people across the nation. In SA, proportionate universalised access to preschool is required.

The AEDC data for SA indicate that, upon starting school, large numbers of children are developmentally vulnerable across the entire socio-economic distribution and, largely, the situation hasn't improved in the last decade. These data indicate that:

- there are vulnerable children *at every socioeconomic level* of the whole population in SA
- the largest numbers of children developmentally vulnerable in SA live in quintiles 2, 3 and 4. In fact, 56% of all children (birth to five years) who are developmentally vulnerable live in the three middle socioeconomic quintiles (2,492 out of 4,490)
- from 2009 to 2021, the proportions of children developmentally vulnerable in one or more domains were from the lowest socioeconomic quintiles. In 2021, 58.1% lived in the most disadvantaged circumstances (33.8% in quintile 1 and 24.3% in quintile 2)<sup>6</sup>
- since 2015, there has been a steady rise in the proportion of children (birth to five years) who are developmentally vulnerable in one or more domains living in the two *least disadvantaged* circumstances, ie quintiles 4 and 5<sup>7</sup>

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<sup>6</sup> In 2021, the highest numbers of children who were developmentally vulnerable in one or more domains were in quintiles 1 (1,663) and 2 (1,067)

<sup>7</sup> Smaller proportions of children who are developmentally vulnerable in one or more domains are associated with higher socioeconomic levels.



- the proportion of children developmentally vulnerable in one or more domains in socioeconomic quintile 4 was 1.2 percentage points higher in 2021 than in 2018. There were also minor changes for the other socioeconomic quintiles.

Because of the importance of the first five years of a child's life, there are many areas requiring attention including prenatal care and maternal and child health; expanded early intervention services, paid parental leave, support for parenting and initiatives to enhance community wide knowledge about child development and associated assessment, strengthening access, affordability and availability of ECEC services, wrap-around services and processes so information can be disseminated without families having to tell their stories again and again; workforce availability and ongoing support and joined up training and development for all staff involved in health, early learning and family support services.

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

The latest RoGS data indicate that SA continues to spend less than other Australian jurisdictions on prevention and early intervention services and the main messages from the AEDC results in 2021 are that there are vulnerable children *at every socioeconomic level* of the population in SA.

Investment in non-stigmatising universal and proportionate services is urgently needed, informed by community voices, eg Aboriginal children and families. Such services would identify more families in need of greater levels of assistance to improve children's outcomes.

The Gillard Royal Commission into Early Childhood Education and Care Interim Report<sup>8</sup> released on 17 April 2023 provides advice about the approach to improve outcomes for children who are born or raised in more vulnerable or disadvantaged circumstances.

Recommendations 24 and 25 of this interim report suggest first that the Australian Government extends changes to the Child Care Subsidy Activity Test to include all families experiencing deep disadvantage and low rates of engagement in ECEC. Second, that resources be available to reduce costs (eg for transport) to enable economically disadvantaged families to attend ECEC; the direct investment in services to support community outreach and communication in areas with lack of connection or low take up of ECEC and targeted fee relief where fees are a barrier to enrolment or attendance.

There should be a core platform of ECEC and health and family services that are available across the country, complemented by services for children identified with significant risk factors or the early symptoms of developmental delay.

<sup>8</sup> Royal Commission into Early Childhood Education and Care (2023). [Royal Commission releases Interim Report | Royal Commission into Early Childhood Education and Care \(royalcommissionecec.sa.gov.au\)](https://royalcommissionecec.sa.gov.au), Accessed 28/4/23.

## **6 What areas do you think the Commonwealth could focus on to improve coordination and collaboration in developing policies for children and families?**

An essential component to responding to this question is to gain agreement to the Strategy, its proposals and measures, from the broad range of stakeholders who will be involved, by necessity, in implementing the Strategy and making it a success.

Achieving this agreement will necessitate a campaign that brings together:

- parents and parent organisations, Indigenous organisations and on-Government organisations that manage and deliver ECEC services (health, learning and development etc)
- Government Departments at Commonwealth and State levels through Ministerial Councils, interdepartmental committees and/or specifically targeted forums

to solve complex problems. Children's' voices should also be part of the communication and feedback.

From implementation, regular reporting and feedback should also be a feature of the Strategy.

To the greatest extent possible, the Strategy should include incentives for collaboration and penalties for non-compliance within government. Chief executives' performance could be assessed against clearly defined criteria and reported annually to Parliament, eg in terms of cross-department collaboration, cooperation and consolidation of programs/initiatives etc.

Proposals by agencies for legislation, policy, services and/or funding allocation could be reviewed by an Early Childhood Minister and/or assessed by a cross-department Early Childhood Best Interest Committee, comprising early years experts including those from relevant fields. Using defined criteria, these fora could ensure all relevant departments are involved and/or have been consulted to avoid silos, duplication of effort and counter-productive competition for resources.

Other important issues to consider include:

- programs that are teacher-led and delivered
- teachers' pay and conditions equal to the schooling sector, ie equal pay for equal work
- proportionate universalism
- children (birth to five years) in programs led by a four-year early childhood degree qualified teachers in a birth to five award, eg a separate, standalone degree specific to supporting the needs of babies, toddlers and preschoolers that is standardised across Australia to some extent, eg at a minimum:
  - greater content on child development including critical approaches
  - greater content on early indicators to identify where extra, specialised support is needed, including for children with disability and delay

- greater content on the different range of pedagogical approaches to support development/skills/learning, especially for two to four-year-olds, eg culturally responsive pedagogies
- experience/ways of engaging with community and other service providers across social protection, health etc
- additionally, ways to initiate relationships, build trust to be positioned to support parents in their parenting
- experience in the use of formative assessments for two to four-year-olds
- democracy – working with families as partners and co-constructors in determining the work of services relevant to each family
- children’s voices including decision-making about them where possible and/or by families and professionals’ observations.

## 7 What principles should be included in the Strategy?

Any principles developed should be the subject of a second consultation process.

Many of the principles contained in the COAG discussion paper for a national quality framework for ECEC<sup>9</sup> (August 2008) and subsequent work undertaken for a broader Commonwealth health and development strategy are still relevant, eg:

- support parents to actively engage in their child’s learning and development from birth
- expand access to ECEC and building a culture that prioritises early learning and development as the foundation for human capital development
- grow the capacity of the early learning workforce to deliver exceptional early learning and care etc.

It is important to define key terms and to ensure that the best interest of children and young people is an overarching principle for all those acting under the Strategy. South Australia’s [OAB Act](#) under which the framework is developed references the United Nations Convention on the Rights of the Child, relevant international human rights instruments and section 4 of the OAB Act defines key terms such as ‘rights’, ‘development’ and ‘wellbeing’ as follows:

### 4—Meaning of rights, development and wellbeing

- (1) *For the purposes of this Act, a reference to the rights of children and young people will be taken to include a reference to rights recognised in accordance with statutory and common law, rights set out from time to time in the United Nations Convention on the Rights of the Child and the United Nations Declaration on the Rights of Indigenous Peoples and rights set out in any other relevant international human rights instruments.*

<sup>9</sup> Commonwealth of Australia (2008). Productivity Agenda Working Group – Education, Skills, Training and Childhood Development. A national quality framework for early childhood education and care. A discussion paper. Accessed 28/4/23. <https://www.acecqa.gov.au/sites/default/files/2020-12/ANationalQualityFrameworkForEarlyChildhoodEducation.pdf>.

- (2) *For the purposes of this Act, a reference to the development of children and young people will be taken to include a reference to the physical, cultural, social, emotional and intellectual growth of each individual from birth through to adulthood.*
- (3) *For the purposes of this Act, a reference to the wellbeing of children and young people will be taken to include a reference to—*
  - (a) *the care, development, education, physical and mental health and safety of each individual from birth through to adulthood; and*
  - (b) *the cultural identity, safety and wellbeing of children and young people.*

Section 5 of SA’s OAB Act imposes a statutory duty in connection with the United Nations Convention on the Rights of the Child and other relevant international human rights instruments regarding children and young people as follows:

*5—State authorities to seek to give effect to United Nations Convention on the Rights of the Child etc*

*Each State authority must, in carrying out its functions or exercising its powers, protect, respect and seek to give effect to the rights set out from time to time in the United Nations Convention on the Rights of the Child, the United Nations Declaration on the Rights of Indigenous Peoples and any other relevant international human rights instruments affecting children and young people.*

The proposed Strategy needs to be federally legislated to be legally binding: it is worth contemplating that without clear deliverables and accountability, the Strategy could be paid lip service by policy and decision makers without consequence.

**8 Are there gaps in existing frameworks or other research or evidence that need to be considered for the development of the Strategy?**

A framework can only be effective in improving outcomes if it facilitates the reporting of data and other evidence to inform decision-making.

Naming the Strategy ‘The National Wellbeing Strategy to Improve Outcomes for Young Children’, may be a useful consideration.

# RESPONSE TO SECTION 1: INTRODUCTION

The Council's response below to this first section, consists of an overview of the Council and its legislated role, to provide the Strategy with a possible model for consideration nationally.

## Child Development Council

The Council is an independent statutory body, under Part 6 of the [Children and Young People \(Oversight and Advocacy Bodies\) Act 2016](#) (OAB Act). The OAB Act is committed to the Minister for Education, Training and Skills. The Council operates in accordance with the provisions of the OAB Act and the [Children and Young People \(Oversight and Advocacy Bodies\) Regulations 2017](#) (OAB Regulations). The Council's key legislated functions include to establish and maintain SA's [Outcomes Framework for Children and Young People](#) (framework), to promote uptake of the framework and to report how children and young people are faring with the objective of improving outcomes for all children and young people in SA.

Annually, the Council publishes a [report card of population-level data outcomes for children and young people \(birth to 18 years\) in SA](#). This publication reports data in the five legislated dimensions of health, safety, wellbeing, education and citizenship. Other publications include policy briefs and dashboards. An annual report of the Council's operation in each financial year is submitted to the Minister for Education, Training and Skills by 31 October for tabling in Parliament.

The purpose of the framework is to:

- help ensure that children and young people (birth to 18 years) in SA experience a good life, now and into the future
- facilitate a whole-of-government approach to creating strategies, setting objectives and developing/implementing policies relating to children and young people
- report how children and young people are developing and progressing over time.

The framework guides all State authorities<sup>10</sup> in SA, individually and collectively, to improve outcomes for all children and young people. Embedded in the framework, is a Charter for Children and Young People (Charter) with 20 essential life conditions, that all children and young people can and should have to thrive.<sup>11</sup>

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<sup>10</sup> State authorities are defined in the Act to include statutory officials, public sector agencies, the South Australia Police, local government ie, councils, incorporated or unincorporated bodies established for a public purpose by/under an Act (other than incorporated companies, associations, cooperatives, societies or other voluntary organisations) and established or subject to control or direction by the Government a Minister of the Crown or a local council (whether or not established under an Act) and any other person or body declared by the regulations to be a State authority.

<sup>11</sup> The Charter for Children and Young People is embedded in South Australia's Outcomes Framework for Children and Young People with five legislated dimensions (health, safety, wellbeing, education and preparing for adulthood (citizenship)). It is not a charter of rights; rather it is a charter of 20 essential life conditions that all children and young people can and should have, without discrimination, for a good life at every stage of their development.

## At a glance - children under five years in South Australia

### All children



During Census 2021, there were 94,200 children **under five years** estimated to be living in SA.

Census 2021 indicates children **under five years** made up 26% of SA's population **under 18 years**; slightly more than half (51%) were male and 49% were female.

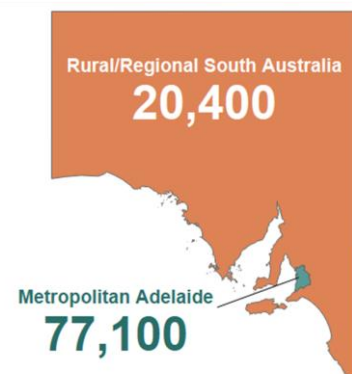
Source: Census of Population and Housing, 2021, TableBuilder

### Location

The latest available data:

- 2021, indicate that 79.0% of children **under five years** in SA were living in the Adelaide metropolitan areas (ie, Greater Adelaide) and less than one quarter (21.0%) were living in rural and regional areas
- 2016, indicate that more than half (53%) of Aboriginal children **under five years** were living in major cities in SA.

Sources: Australian Bureau of Statistics, cat no. 3235.0 Regional Population by Age and Sex, Australia, June 2021; Australian Bureau of Statistics 3238.0.55.001 Estimated resident Aboriginal and Torres Strait Islander and non-Indigenous population, states and territories, Remoteness Areas - 30 June 2016.

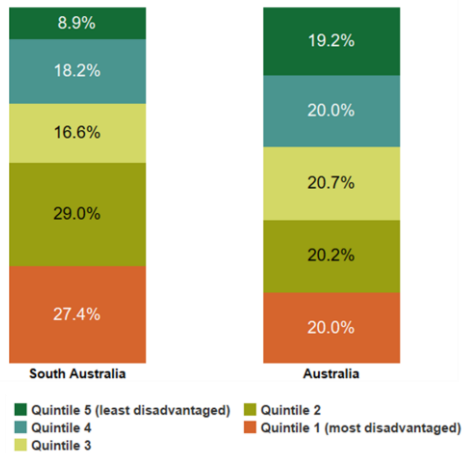


In 2021, national comparison shows that of all children **under five years** in SA:

- **8.9%** were estimated to be living in the **least** disadvantaged socio-economic circumstances (**19.2%** nationally)
- **56.4%**, ie more than half, lived in disadvantaged socio-economic circumstances (**40.2%** nationally)
- **27.4%** lived with the **most** disadvantage (**20.0%** nationally).

## Socioeconomic level (IRSD)

The latest available data, 2021, for children and under five years in SA indicate that:



- 27.4% (25,800), (*more than one quarter*) were estimated to be living in the *most disadvantaged* socio-economic circumstances (20% nationally)
- 63.8%, more than six in 10, were estimated to be living in the three middle quintiles (60.9% nationally)
- 8.9% (8,300) were estimated to be living in the *least disadvantaged* socio-economic circumstances (19.2% nationally).

Sources: Australian Bureau of Statistics, cat no. 3235.0 Regional Population by Age and Sex, Australia, June 2021 and Australian Bureau of Statistics, cat no. 2033.0.55.001 Census of Population and Housing: Socio-Economic Indexes for Areas (SEIFA), Australia, 2016.

Notes: Due to rounding the proportions may not add up exactly. IRSD cuts are based on ranking within Australia, and it excludes Unknown IRSD.

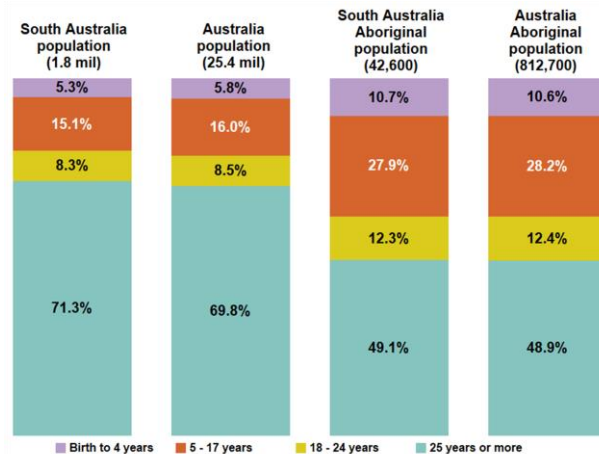
## South Australia's population by age groups

Census 2021 indicates that:

- children **under five years** made up 5.3% of SA's population (1.8 million)
- Aboriginal children **under five years** made up 10.7% of SA's Aboriginal population (42,600)
- 20.4% of SA's population were **under 18 years**
- 38.6% of SA's Aboriginal population were **under 18 years**.

Sources: Census of Population and Housing, 2021, TableBuilder

Note: Due to rounding the proportions may not add up exactly.



## Children under five years by age



The Census data disaggregated by age for children in SA indicate that in 2021:

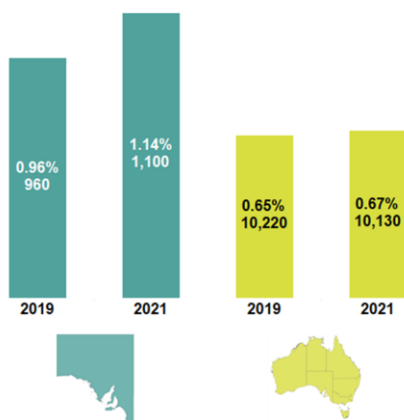
- 19,100 (20.3%) were **three-year-olds**
- 19,400 (20.6%) were **four-year-olds**.

Source: Census of Population and Housing, 2016 and 2021, TableBuilder

Note: Due to rounding the proportions may not add up exactly.



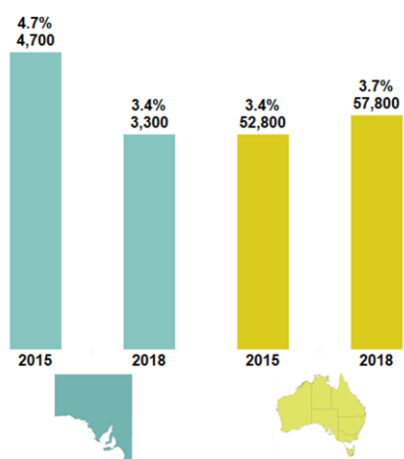
## In out-of-home care



The latest available data, 30 June 2021, indicate that 1,100 (1.14%) of all children **under five years** in SA were in out-of-home care (0.67% nationally).

Source: AIHW Child Protection Collections 2018–19 and 2020–2021

## Disability



The latest data, 2018, indicate there were 3,300 children **under five years** with disability in SA.

The prevalence of disability among children **under five years** is 3.4% in SA in 2018.

Nationally, children with disability made up 3.7% of children **under five years** in Australia in 2018.

Source: Australian Bureau of Statistics (ABS), Survey of Disability, Ageing and Carers, Australia, 2018, cat. no. 4430.0

**Note: The data have a high relative standard error and therefore should be used with caution.**

The latest data, 2021, estimated approximately 97.5% children **under five years** living in SA were born in Australia.

Of children **under five years** born overseas, and living in SA, the top five countries of birth were India, England, Pakistan, United States of America and China (excludes SARs and Taiwan).



## Aboriginal children under five years in South Australia

### Aboriginal children – numbers and proportions

The 2021 Census data indicate that:

- 4,500 Aboriginal children **under five years** were estimated to be living in SA, making up 4.8% of all children **under five years** in SA
- Nationally, Aboriginal children **under five years** comprised 5.9% of all children and **under five years**.

Source: Census of Population and Housing, 2016 and 2021, TableBuilder



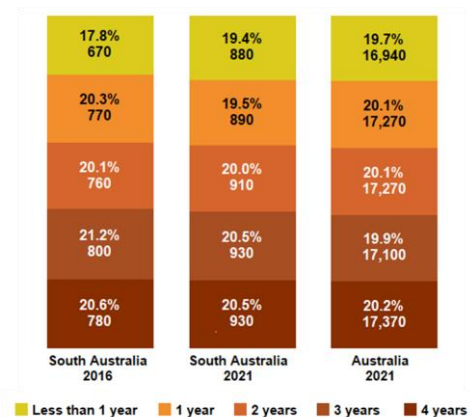
### Aboriginal children under five years by age

The 2021 Census data, disaggregated by age for Aboriginal children **under five years** in SA indicated that there are approximately 4,500 Aboriginal children in this age group:

- 930 (20.5%) were three-year-olds
- 930 (20.5%) were four-year-olds.

Source: Sources: Census of Population and Housing, 2016 and 2021, TableBuilder

Note: Due to rounding the proportions may not add up exactly.



## RESPONSE TO SECTION 2: THE CASE FOR AN EARLY YEARS STRATEGY

The Council's response to this second section offers insights into children (birth to five years) in SA, taken from [How are they faring? South Australia's 2022 Report Card for Children and Young People](#) (SA's 2022 Report Card), making visible both the categories of data that could be collected to provide a foundation for the Strategy, as well as the data gaps.

### How are children are faring in the early years?

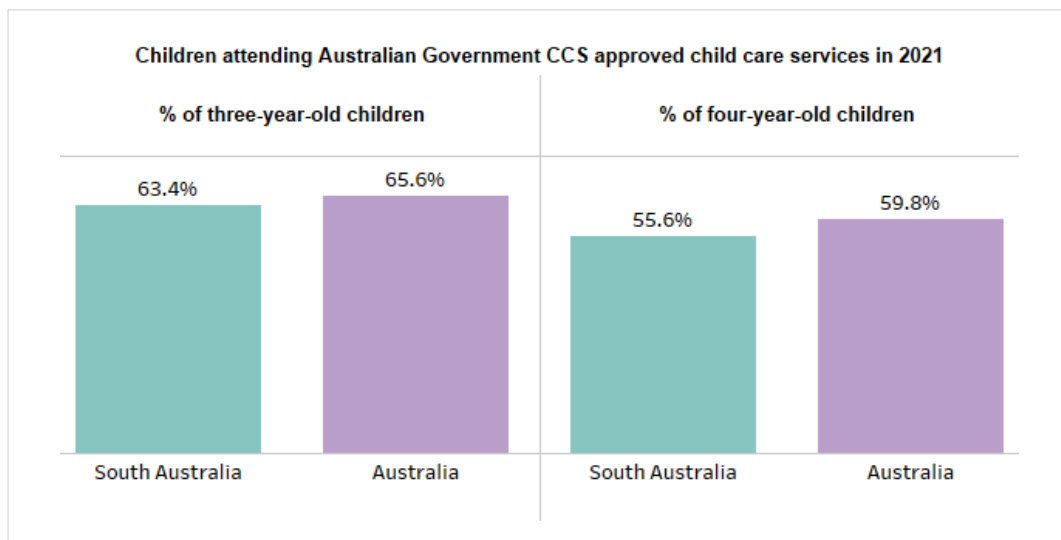
The Council notes that the Strategy:

- vision will describe the Commonwealth's aspirations and ambitions for children in the early years and should encompass aspirations for children across all aspects of their lives
- is intended to be broader than the vision for the early childhood education and care sector that the Commonwealth is developing in collaboration with State and Territory governments.

In 2021:

- 63.4% of **three-year-olds** were *attending* an approved childcare service in SA, a rate slightly lower than the national average of 65.6%. New South Wales (NSW), Queensland (QLD) and the ACT had much higher proportions than SA.
- 55.6% of **four-year-olds** were *attending* an approved childcare service in SA, a rate somewhat lower than the national average of 59.8%. New South Wales (NSW), Queensland (QLD) and the ACT had much higher proportions than SA.

**Figure 2 Participation in early childhood education and care in South Australia in 2021**



Source: Report on Government Services (RoGS) Early childhood education and care 2022 (Table 3A.14)

Notes from RoGS:

- a) Data are drawn from the Child Care Subsidy System (CCSS)

- b) Attendance data relate to the March quarter
- c) Children can use more than one type of care. Children attending approved services may be counted more than once if attending more than one service during the reference period but are counted only once in the total. Also, data for Australia may not equal the sum of states and territories because children are included only once in the Australia total but may be captured attending services in more than one jurisdiction
- d) Children from Aboriginal and Torres Strait Islander play groups and enrichment programs were not included because ages are not collected for these children
- e) Proportion calculated using ABS estimated resident population (ERP) as at 31 December of the previous calendar year. Population data for 31 December 2016 onwards are the first preliminary ERP.

## Gaps in our knowledge

### Developmental milestone data

A Council policy brief in August 2020, [\*South Australia's surprising downward trend in AEDC results\*](#) highlighted a lack of population wide data on child development in SA prior to the federally implemented triennial AEDC. The AEDC data indicate that a large number of children were developmentally vulnerable across the entire socio-economic distribution upon starting school. The policy brief is attached (Annex 1).

On 22 June 2021, new funding of \$50.1 million for an [\*Early Learning Strategy\*](#) was announced in SA's State Budget, including funding for two additional universal checks at key stages between birth and school age. The existing checks were available soon after birth, at 6 to 9 months, 18 to 24 months and preschool. The two new universal checks would be at 12 month and 3 years, increasing the total number of universal checks between birth and 5 years to six. The Council welcomed this news because accessing help and services in the early years, eg for disability or developmental delay, can significantly improve a child's outcomes at every stage of life. Regrettably, these additional universal checks have not been implemented and the available data for families who choose to access the existing checks, are not representative of the population and cannot be reported as population-level data in SA.

### Early intervention

Early identification of, and support for, children with developmental delays and disability is essential to children gaining the skills needed to thrive.<sup>xviii</sup> The National Disability Insurance Scheme (NDIS) early childhood intervention approach aims to support children with a developmental delay or disability to develop the skills they need to take part in daily activities and achieve the best possible outcomes. In quarter 4, 2020-21, the numbers of children under six years receiving early childhood early intervention (ECEI) supports and children with an approved NDIS plan before entering school were:

- 680 children under six years received ECEI supports through the NDIS
- 5,651 children under six years had an approved NDIS plan.

## **Addressing data gaps and data quality**

Good quality data are fundamental to government and policy makers for creating strategies, setting objectives or developing/implementing policy. Data gaps inhibit SA's decision-makers from making informed decisions to improve the outcomes of children and young.

South Australia's framework exists to improve the outcomes of children and young people in five specified dimensions. For the framework to be effective in improving outcomes, the data reported under the framework should be used to evaluate proposed policies and funding allocation in SA, eg using a set of agreed principles.

Measures with known data gaps were included in the inaugural framework because they were considered fundamental to outcomes. These measures are 'placeholders' to highlight where data are needed. South Australia's 2022 Report Card highlights the data gaps in all five dimensions. The current lack of developmental milestone data for children under five years remains of grave concern and means that SA has no information regarding how many children in this age range are developmentally on track. The report card also highlights that some of the available data are too old to provide a contemporary evidence-base to inform decision-making.

Measurement and reporting is a means to an end and to be effective in improving outcomes, data must be timely, able to be disaggregated, have some consistency of indicators and measures and reflect data gaps with placeholder measures.<sup>ii</sup>

At a population level, most children and young people in SA appear to be doing well, however, SA's 2022 Report Card highlights areas of concern that should be prioritised, eg data limitations are more pronounced for Aboriginal children and young people.

The 2020 National Agreement on Closing the Gap (National Agreement) was developed in partnership with the Coalition of Peaks. The National Agreement has 17 targets for eight subject areas (health and wellbeing, education and employment, justice, safety, housing, land and waters, languages and digital inclusion). The National Agreement targets include all Aboriginal four-year-olds being enrolled in early childhood education by 2025 and, that by 2028:

- 90-92% of babies born to Aboriginal mothers have a healthy birthweight
- 45% of Aboriginal children are assessed as developmentally on track in all AEDC domains
- the rate of Aboriginal children and young people in detention has reduced by 11-19%.

Since the framework commenced in 2019, yearly report cards have shown how children and young people under 18 years are faring in the five dimensions. Wherever possible, data disaggregated for Aboriginal children and young people have also been reported.

Specific areas of concern for Aboriginal children *under five years* that have been highlighted in report cards in 2020, 2021 and 2022, that are of some relevance to the National Agreement targets, have included:

- babies born with low bodyweight
- infant mortality rate for infants under 12 months
- mother's age at birth; smoking and seeking antenatal care in pregnancy
- rates of children and young people (birth to 18 years) being *in* OOHC.

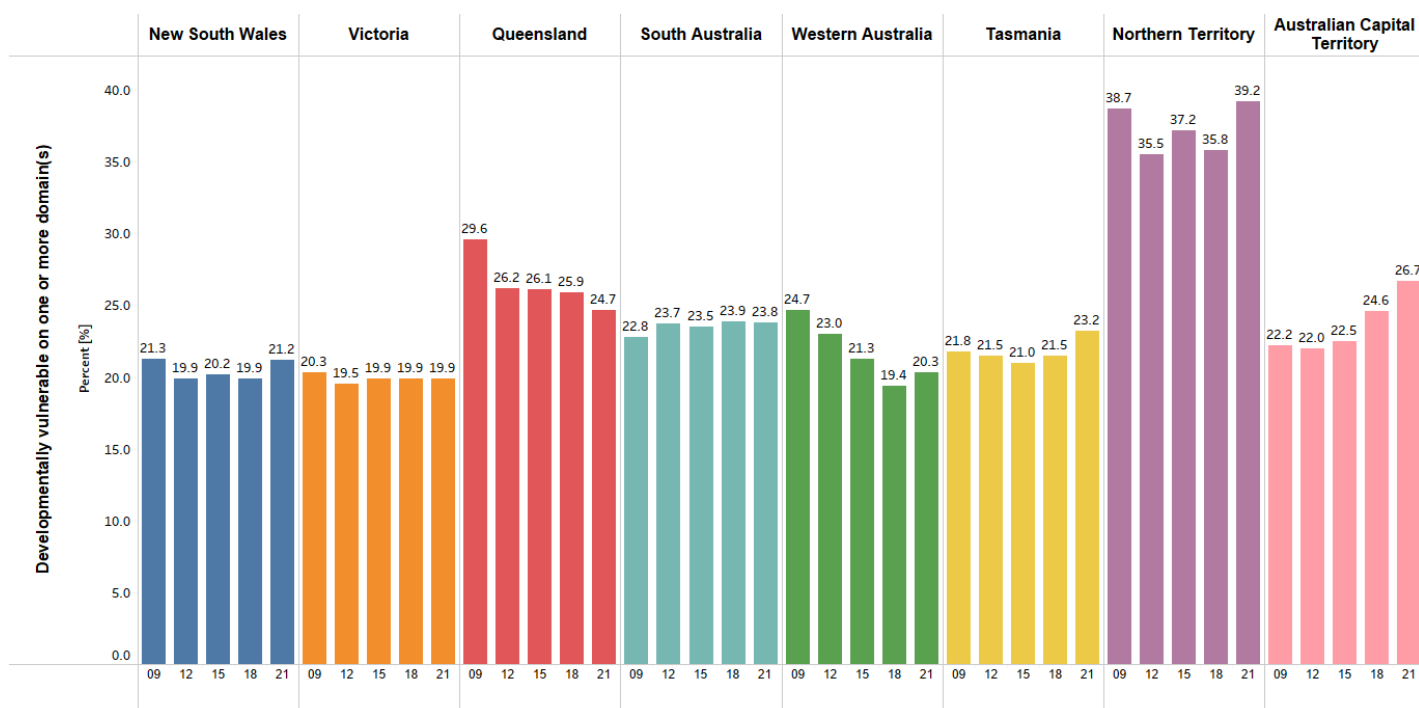
The Council is raising awareness of the data gaps with SA's decision makers and data custodians. To comply with the statutory duty of State authorities regarding the framework, the Chief Executives and leadership teams of state government agencies and councils should lead their organisations and staff in:

- 1 Endorsing the framework in high-level planning and strategy processes and documentation, thereby publicly committing to improving agreed outcomes for children and young people. All governments should work towards this shared set of outcomes as legislated and gazetted.
- 2 Applying the [framework](#) and proactively:
  - determining how the organisation's policies, programs and services align with the five dimensions and outcome statements
  - embedding the dimensions and outcome statements in organisational policy, programs and services ie, into all existing aspects and mechanisms to give effect to the framework
  - considering the indicators and the outcomes statements and asking: *Are we collecting and/or reporting data that provide evidence of how children and young people are doing?*

### **What is the Australian Early Development Census telling us in South Australia?**

Minor movements occurred in the AEDC results between 2018 and 2021. The 2021 AEDC results indicated that a quarter (23.8%) of children were developmentally vulnerable in one or more domains in their first year of full-time schooling. Figure 3 below shows a one percentage point increase from 2009. Queensland has continued to show improvement from 2009 to 2021. Western Australia's results showed improvement from 2009 to 2018 (inc), however, 2021 saw a slight increase in developmental vulnerability in that state in one or more domains.

**Figure 3 AEDC results of developmental vulnerability by collection year, states and territories, 2009 - 2021**



Source: Australian Early Development Census (AEDC), 2021 results

Table 3 indicates that SA had significant higher proportions of developmental vulnerability in:

- emotional maturity domain (10.3% vs 8.5%)
- physical health and wellbeing (10.7% vs 9.8%)
- social competence (11.2% vs 9.6%).

**Table 3 Percentage of children developmentally vulnerable in 2021 by AEDC domain, state and territories**

State / territory	Physical	Social	Emotional	Language	Communication	Developmentally vulnerable in one or more domains
New South Wales	9.4%	9.4%	7.3%	6.2%	8.4%	21.2%
Victoria	8.1%	9.0%	7.7%	7.2%	7.4%	19.9%
Queensland	11.6%	10.6%	10.0%	8.4%	9.1%	24.7%
<b>South Australia</b>	<b>10.7%</b>	<b>11.2%</b>	<b>10.3%</b>	<b>7.9%</b>	<b>8.6%</b>	<b>23.8%</b>
Western Australia	9.4%	7.6%	7.8%	7.2%	8%	20.3%
Tasmania	11.1%	9.3%	10.3%	9.2%	6.6%	23.2%
Northern Territory	18.3%	21.7%	17.7%	21.2%	16.8%	39.2%
Australian Capital Territory	12.8%	12.2%	10.6%	6.5%	9.2%	26.7%
<b>Total</b>	<b>9.8%</b>	<b>9.6%</b>	<b>8.5%</b>	<b>7.3%</b>	<b>8.4%</b>	<b>22.0%</b>

Source: Australian Early Development Census (AEDC), 2021 results

## Cohorts at risk of poorer development outcomes

Census 2021 reported there were 94,200 children under five years living in SA, including 4,500 Aboriginal children (4.8%). At 30 June 2021, more than half of all children under five years in SA were from low socioeconomic communities with 27% living in the most disadvantaged socio-economic conditions (Table 4). South Australia had a higher proportion of children living in the most disadvantaged socio-economic conditions than NSW, VIC, QLD, WA and the ACT.

**Table 4 Percentage of children (birth to four years inc) by socioeconomic level (IRSD), 30 June 2021**

State / territory	Quintile 1 (Most disadvantaged)	Quintile 2	Quintile 3	Quintile 4	Quintile 5 (Least disadvantaged)	Total
New South Wales	24.3%	24.3%	19.1%	12.6%	19.7%	100%
Victoria	13.3%	18.5%	21.7%	23.6%	22.9%	100%
Queensland	21.9%	16.7%	22.3%	23.8%	15.3%	100%
<b>South Australia</b>	<b>27.4%</b>	<b>29.0%</b>	<b>16.6%</b>	<b>18.2%</b>	<b>8.9%</b>	<b>100%</b>
Western Australia	11.3%	19.5%	25.1%	24.2%	19.8%	100%
Tasmania	44.3%	18.3%	18.3%	16.2%	3.0%	100%
Northern Territory	28.1%	7.5%	22.1%	17.3%	25.0%	100%
Australian Capital Territory	0.1%	0.9%	5.2%	33.4%	60.4%	100%
<b>Australia</b>	<b>20.0%</b>	<b>20.2%</b>	<b>20.7%</b>	<b>20.0%</b>	<b>19.2%</b>	<b>100%</b>

Source: Australian Bureau of Statistics, cat no. 3235.0 Regional Population by Age and Sex, Australia, June 2021 and Australian Bureau of Statistics, cat no. 2033.0.55.001 Census of Population and Housing: Socio-Economic Indexes for Areas (SEIFA), Australia, 2016.

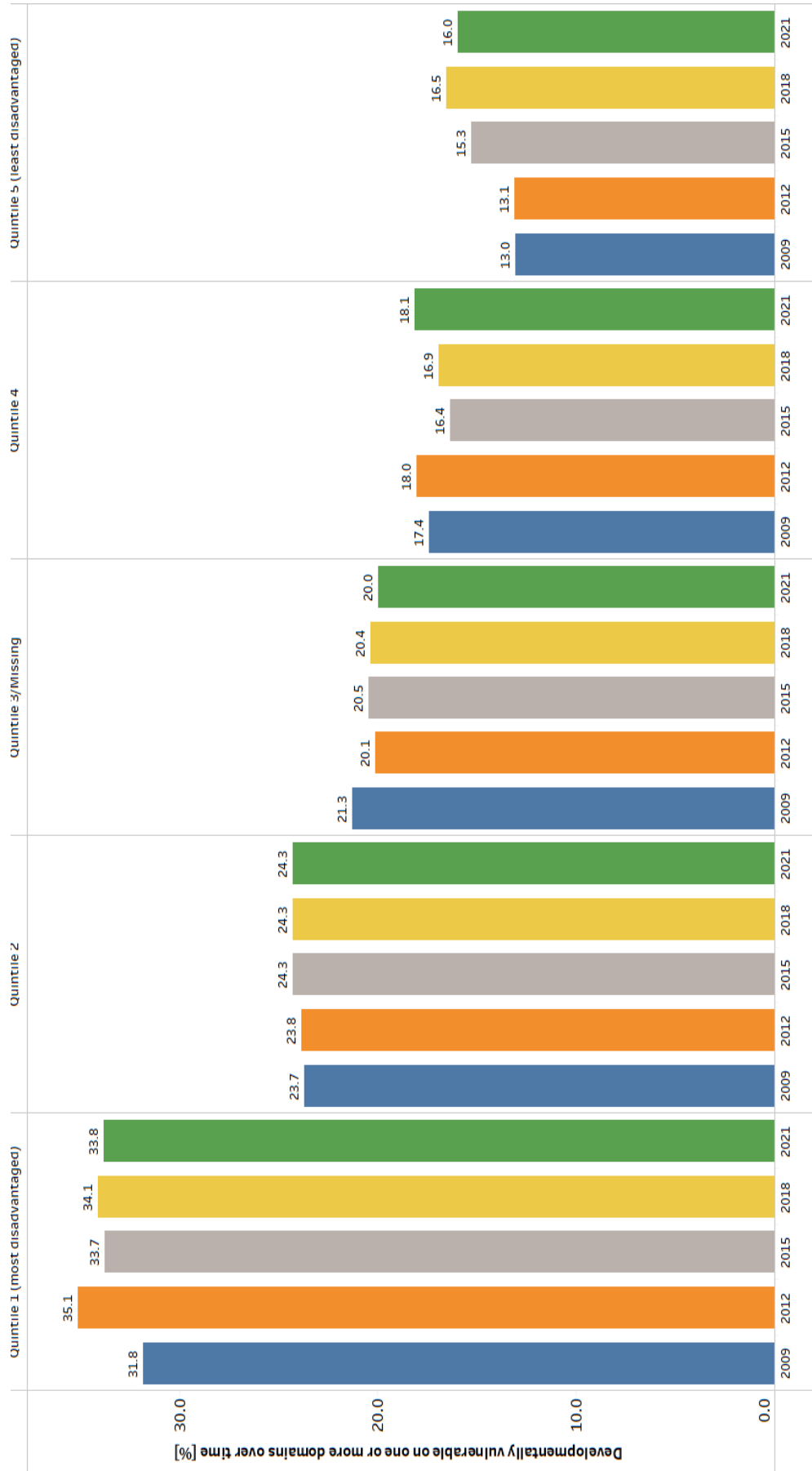
Notes:

- Due to rounding the row percent may not add up exactly to 100%. IRSD cuts are based on ranking within Australia. Excludes Unknown classification of IRSD.
- Quintiles are used for the Socio-Economic Indexes for Areas (SEIFA). The lowest quintile (Quintile 1) represents the most socio-economically disadvantaged areas; the highest quintile (Quintile 5) represents the least socioeconomically disadvantaged areas.

## Children who are developmentally vulnerable in South Australia

Regarding children's developmental vulnerability in one or more domains in SA by socioeconomic quintiles across the five AEDC data collection periods, it is evident that since 2009 there has been an increase in vulnerability in all quintiles except quintile 3 where the decrease is slight.

**Figure 4 Change in developmental vulnerability in one or more domains in SA by socioeconomic quintiles, 2009 - 2021**



Source: Australian Early Development Census (AEDC), 2021 results

Note: Unclassified socioeconomic quintiles are reported Quintile 3 as one category ' Quintile 3/Missing' .



Issue 1 August 2020



# EvidenceMatters

Every young South Australian Counts!



## Policy Brief 1: South Australia's surprising downward trend in AEDC results

The Australian Early Development Census (AEDC) is a nationwide data collection of early childhood development at the time children commence their first year of full-time school. The Instrument collects data relating to five key areas of early childhood development referred to as 'domains':

- Physical health and wellbeing
- Social competence
- Emotional maturity
- Language and cognitive skills (school-based)
- Communication skills and general knowledge.

Data from the AEDC provides crucial evidence to guide decision-making and planning and ensure resources and services are better targeted towards supporting the future and wellbeing of children and families across Australia. Importantly, the AEDC has been shown to strongly predict later health, wellbeing and academic success.

The AEDC is held every three years, with the 2018 AEDC data collection being the fourth collection, allowing communities and jurisdictions to track child development over time.

Unfortunately, unlike most other jurisdictions, **South Australia has shown a small**

**but steady decline in results** since the first AEDC in 2009. By comparison, Western Australia in particular but other jurisdictions also, have shown a marked improvement in child development over this same time period (refer to Figure 1).

These results cannot be accounted for by changing socio-economics and, interestingly, the communities within South Australia showing the greatest decline in results over time are the upper and middle socio-economic communities (refer to Figure 2).

As many children live in the middle and upper socioeconomic quintiles these changes equate to



Government of South Australia

many more children entering the school system with less capacity to take advantage of the school learning environment. Figure 3 depicts both the percentage and the number at the same time using a bubble chart.

The size of the bubble represents the number of children developmentally vulnerable, whereas the placement of the bubble shows the percentage of children developmentally vulnerable within the local government area by socioeconomic position.

**What is very clear is that there is a large number of children developmentally vulnerable across the entire socioeconomic distribution within South Australia.**

Though the social gradient in child development seems to suggest that we should focus our efforts on children in low SES families, and those who have been identified as 'at-risk', this is not the case. There are vulnerable children at every SES level of our society. It is true that, if you look at the lowest SES ranges, a much higher proportion of children in these groups are vulnerable. But the largest number of vulnerable children is in the middle class SES ranges. This is because the greatest number of children can be found in these groups.

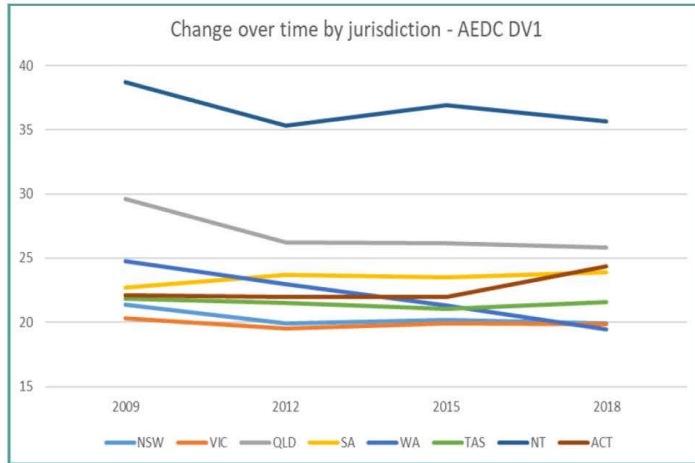


Figure 1: Jurisdiction specific changes in children developmentally vulnerable on one or more of the five AEDC domains over time.

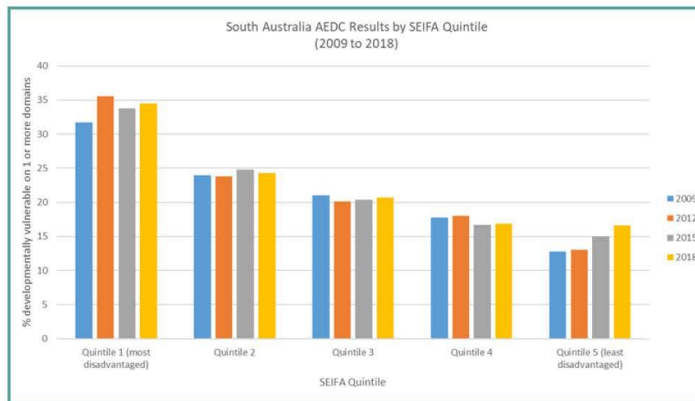


Figure 2: Change in developmental vulnerability within South Australia by socioeconomic quintile.

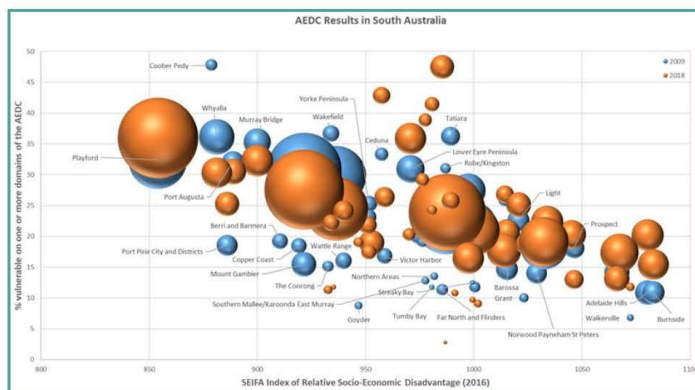


Figure 3: Bubble plot depicting the number of children developmentally vulnerable (size of the bubble) and the proportion of children vulnerable by socioeconomic for each Local Government Area in South Australia.

So, as we search for ways of reducing inequality and flattening the social gradient in child development, **we need to develop strategies that reach all children.** In practice, this requires tailoring strategies to reach children in all walks of life and addressing the barriers to access that some children experience.

### **A universal approach**

Australia's major policy platforms such as health and education are generally universal and incorporate some element of targeting to reach vulnerable populations.

However, particularly in maternal and child health services, different jurisdictions have a different service delivery mix, with some having a stronger universal base and others putting a greater emphasis on targeted strategies.

A universal approach has the potential to improve things for children in all SES ranges.

In practice, children in higher SES ranges tend to benefit more than those in lower SES ranges. This is because lower SES families are more likely to face obstacles to accessing services – these might be physical, cultural, or social.

Using a universal approach without addressing barriers to

access, one that provides the same service to all, can actually steepen the gradient, and create greater differences in child outcomes between SES ranges. The AEDC data in South Australia would indicate that this is not the case.

Targeting programs toward children who are most vulnerable has the potential to reach children in the greatest need. However, targeting also has substantial challenges.

First, targeted solutions can reach the most vulnerable children in low SES ranges in a more intensive way, and so possibly improve outcomes for these children. As the largest number of vulnerable children are in the middle SES bands and many still in the upper SES, the majority of vulnerable children are missed.

Second, targeting programs in itself does not eliminate barriers to access – barriers such as the stigma associated with some programs continue to affect families.

Additionally, targeting poor communities may miss children in key population groups such as Aboriginal children, who are likely to face many barriers to access independent of the

geographical region in which they live.

**Targeting alone then, does not flatten the social gradient overall and improve child outcomes across the whole population.**

The AEDC data in South Australia indicate that perhaps services in the early years are too targeted and thus missing many vulnerable children, and that this targeted approach is not resulting in large improvements in child vulnerability for those living in the poorest communities.

**Key to reducing vulnerability in the early years is a strong universal platform of supports and services available to all children, with a targeted strategy on top of this base.**

### **AEDC results and implications for service provision**

In South Australia, over many years, the child health nurse schedule has become increasingly targeted.

Unfortunately, without an increase in budget, *these enhanced targeted services have come at the expense of undermining the universal services that were originally the foundation of the service.*

Currently, on the basis of a universally offered check in the



first few weeks after birth, families are screened into a comprehensive schedule of ongoing support. The criteria to receive this enhanced support are stringent.

Based on this first assessment, if a family is not screened in to these enhanced targeted services then no further service is proactively provided by Child and Family Health Services (CAFHS)<sup>1</sup> to the family.

Formerly CAFHS nurses proactively provided developmental screening and surveillance from birth to school age, and CAFHS doctors were trained and available to provide free standardised developmental assessments. Referral and assessment data were collected on a universal information system.

Being the one universal service system provided to families in South Australia prior to school age, the changes in AEDC results over the last 10 years may be in part a reflection of the changes to CAFHS.

Ideally, universally applied checks, rather than a passive offering, would occur not only

in the first two weeks after birth, but additionally at 8 weeks (when likely indications of postnatal depression can be identified), 12 months, 2 years and 3 years.

Such a service allows for early identification of child disabilities and vulnerability thus maximising the benefit of early intervention and reducing the burden on later health, education and social services.

Ideally, CAFHS would provide the essential supports that families and young children need for optimal development and learning and be a regular, welcoming touchpoint for families.

### Monitoring all children

Importantly, child health services<sup>2</sup> should collectively provide a way of *monitoring all children*.

Currently, South Australia has **no population wide data on child development prior to the federally implemented triennial AEDC**, meaning we are blind to the developmental health and wellbeing of children living in our state.

As such, many children are entering the education system with unidentified disabilities and developmental delays at an age where the greatest opportunity for early intervention is already past.

### Recommendations

- *That the development of all children in South Australia from birth to school age is monitored proactively and regularly.*
- *That universally applied checks are delivered in the first two weeks after birth, at 8 weeks, 12 months, 2 years and 3 years at a minimum.*

1. *CAFHS is a key state-wide service and requires adequate funding for universal, targeted and statutory child health and development services to provide key backbone services*
2. *Critical child development services are situated in three local health networks (North, South and Central). These services require close linkage and models that support and enhance children's development.*

## Annex 2 Mapping the dimensions, indicators and measures of South Australia's Outcomes Framework for Children and Young People against the Closing the Gap targets

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 1 Aboriginal and Torres Strait Islander people enjoy long and healthy lives	Target 1 Close the Gap in life expectancy within a generation, by 2031	Yes, indirect contributors	Health	Children and young people are thriving	Proportion of children and young people with access to healthy food	Meeting NHMRC fruit and vegetable guidelines	2-17 years (inc)
"	"	"	Health	"	Number of children and young people with tooth decay	Tooth decay in deciduous teeth (%) (NO NEW DATA)	5-10 years (inc)
"	"	"	"	Children and young people have health-promoting behaviours	Proportion of children and young people being reported as underweight, overweight or obese	Underweight Overweight Obese Overweight/obese	2-17 years (inc)
"	"	"	"	"	Proportion of young people smoking tobacco	Ever smoked tobacco (NO NEW DATA)	12-17 years (inc)
"	"	"	"	"	Proportion of young people consuming alcohol	Ever consumed alcohol (NO NEW DATA)	12-17 years (inc)
"	"	"	"	"	Proportion of young people with potentially unsafe or binge-drinking behaviour	Unsafe or binge drinking – ever (NO NEW DATA)	12-17 years (inc)
"	"	"	"	"	Proportion of young people taking illicit drugs	Ever taken illicit drugs inc cannabis (NO NEW DATA)	12-17 years (inc)

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 1 continued	Target 1 continued	"	"	Children and young people have health-promoting behaviours	Proportion of young people taking illicit drugs	Ever taken cannabis (NO NEW DATA)	12-17 years (inc)
Outcome 2 Aboriginal and Torres Strait Islander children are born healthy and strong	Target 2 By 2031, increase the proportion of Aboriginal and Torres Strait Islander babies with a healthy birthweight to 91 per cent	Yes	Health	Babies are born healthy	Proportion of low birthweight babies as a proportion of all live birth	Low birthweight	Birth
"	"	"	"	"	Proportion of pregnant mothers smoking in the first 20 weeks of pregnancy	Pregnant mothers smoking	Before birth
"	"	"	"	"	Proportion of mothers under 20 years when giving birth	Under 20 years <i>and</i> birth rate per 1,000 population	Under 20 years

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
"	"	"	"	"	Proportion of mothers attending a first antenatal visit in the first 14 weeks of pregnancy	First antenatal visit in first 14 weeks	Before birth
Outcome 2 continued	Target 2 continued	"	"	Babies are born healthy	Rate of infant mortality per 1,000 live births	Infant mortality rate (per 1,000 population)	Under 12 months
Outcome 3 Aboriginal and Torres Strait Islander children are engaged in high quality, culturally appropriate early childhood education in their early years	Target 3 By 2025, increase the proportion of Aboriginal and Torres Strait Islander children enrolled in Year Before Fulltime Schooling early childhood education to 95 per cent	Yes	Wellbeing	Children have early experiences that enhance their development	Proportion of children with special needs, birth to five years, attending approved childcare services	Vulnerable group: - Aboriginal children - Children with disability - Regional areas - Remote areas - Low-income families - Non-English-speaking background	Birth to 5 years (inc)
"	"	"	"	"	Proportion and number of three-year-old Aboriginal children enrolled in a quality preschool program	Aboriginal	3 years

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
"	"	"	"	"	Proportion of children enrolled in a quality preschool program <i>in the year before attending fulltime school</i>	Preschool	4 years
Outcome 4 Aboriginal and Torres Strait Islander children thrive in their early years	Target 4 By 2031, increase the proportion of Aboriginal and Torres Strait Islander children assessed as developmentally on track in all five domains of the Australian Early Development Census (AEDC) to 55 per cent	Yes	Education	Children enter the school system ready to take advantage of the learning environment	Proportion of children developmentally vulnerable in one or more of five domains under the Australian Early Development Census (AEDC) when they enter school	Developmentally vulnerable	4-6 years (inc)
"	"	"	Health	Children have a healthy early life	Proportion of children meeting development milestones at two and four years	Developmental milestones – 2 and 4 years (DATA NOT AVAILABLE)	Under five years
"	"	"	Health	Children have a healthy early life	Proportion of children fully immunised at one, two and five years	Fully immunised – 1, 2 and 5 years	Birth to five years (inc)



Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
"	"	"	Education	Children enter the school system ready to take advantage of the learning environment	Number of children receiving early childhood intervention supports through the National Disability Insurance Scheme (NDIS) or with approved NDIS plan before entering school	Early childhood early intervention	Birth to 6 years (inc)
"	"	"	"	"	"	NDIS plan	"
Outcome 4 continued	Target 4 continued	"	"	"	Proportion of Year 1 students reading at an age-appropriate level or better	Phonics	Year 1
Outcome 5 Aboriginal and Torres Strait Islander students achieve their full learning potential	Target 5 By 2031, increase the proportion of Aboriginal and Torres Strait Islander people (age 20–24) attaining year 12 or equivalent qualification to 96 per cent	Yes	Education	Children and young people are engaged in school, further education, training or work	Proportion of young people completing a senior secondary certificate of education qualification or equivalent by 19 years	Senior secondary certificate	Year 12
"	"	"	Education	Children and young people are engaged in school, further	Rate of attendance for students enrolled at school	Rate of school attendance	Year 1 to Year 10

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
				education, training or work			
"	"	"	Health	Children and young people are thriving	Number of children and young people with tooth decay	Tooth decay in permanent teeth (%) (NO NEW DATA)	6-14 years (inc)
Outcome 5 continued	Target 5 continued	Yes	Education	Children and young people's experience of learning is positive	Proportion of students achieving at or above minimum standard in reading, writing and numeracy	Reading, writing, numeracy	Year 3, 5 and 7
"	"	"	Citizenship	Children and young people develop skills for an independent life	Proportion of young people 14-15 years that are literate	Reading, writing	Year 9
"	"	"	"	"	Proportion of young people 14-15 years that are numerate	Numeracy	Year 9

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
"	"	"	"	"	Proportion of young people 15-19 years that are financially literate	Financial numeracy, Inflation, Diversification, Risk-return, Money Illustration	15-19 years (inc)
"	"	"	"	"	Proportion of Year 10 students achieving at or above proficient standard in the Australian curriculum civics and citizenship assessment	Civics and Citizenship	Year 10
Outcome 6 Aboriginal and Torres Strait Islander students reach their full potential through further education pathways	Target 6 By 2031, increase the proportion of Aboriginal and Torres Strait Islander people aged 25–34 years who have completed a tertiary qualification (Certificate III and above) to 70 per cent	Yes, indirect contributors	Refer indicators listed for CTG Outcome 7 and Target 7	Refer measures listed for CTG Outcome 7 and Target 7	See below	See below	See below

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 7 Aboriginal and Torres Strait Islander youth are engaged in employment or education	Target 7 By 2031, increase the proportion of Aboriginal and Torres Strait Islander youth (15–24 years) who are in employment, education or training to 67 per cent	Yes	Education	Children and young people are engaged in school, further education, training or work	Proportion of young people fully engaged in school, work or further education and training	Fully engaged	15-19 years (inc)
Outcome 7 continued	Target 7 continued	Yes	Education	"	Proportion of young people with disability, partially or fully engaged in school, work or further education and training	Partially or fully engaged	15-19 years (inc)
"	"	"	Citizenship	Children and young people develop skills for an independent life	Average hours of paid employment for young people 15-19 years	Employed young people (hours)	17 years
"	"	"	"	"	Proportion of young people 16-19 years with a driver's licence	Driver's licence	16 - 19 years (inc)

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 8 Strong economic participation and development of Aboriginal and Torres Strait Islander people and communities	Target 8 By 2031, increase the proportion of Aboriginal and Torres Strait Islander people aged 25–64 who are employed to 62 per cent	Yes, indirect contributors, however, <b>CTG Target 8</b> is beyond the scope of the framework	Refer indicators listed for other CTG Outcomes and Measures	Refer measures listed for other CTG Outcomes and Measures	-	-	-
Outcome 9 Aboriginal and Torres Strait Islander people secure appropriate, affordable housing that is aligned with their priorities and need	Target 9a By 2031, increase the proportion of Aboriginal and Torres Strait Islander people living in appropriately sized (not overcrowded) housing to 88 per cent	Yes	Safety	Children and young people live in safe housing	Proportion of children and young people living in households with financial hardship	Financial hardship	Birth to 14 years (inc)
"	"	"	"	Children and young people live in safe housing	Number of children and young people experiencing homelessness	Homelessness (per 10,000 population)	Birth to 18 years (inc)
"	"	"	"	Children and young people are safe from crime	Proportion of children and young people feeling unsafe in their local area at night	Feeling unsafe at night	12 - 16 years

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
"	"	"	Citizenship	Children and young people develop skills for an independent life	Proportion of young people 15-19 years satisfied with their level of independence	Satisfied with independence	17 years
"	"	"	"	"	Proportion of young people 15-19 years not currently living with their parents	Not living with parents	18 years
Outcome 9 Aboriginal and Torres Strait Islander people secure appropriate, affordable housing that is aligned with their priorities and need	Target 9b By 2031, all Aboriginal and Torres Strait Islander households: - within discrete Aboriginal or Torres Strait Islander communities receive essential services that meet or exceed the relevant jurisdictional standard. - in or near to a town receive essential services that meet or exceed the same standard as applies	Yes, indirect contributors, however, <b>CTG Target 9b</b> is beyond the scope of the framework	Refer indicators listed for other CTG Outcomes and Measures	Refer measures listed for other CTG Outcomes and Measures	-	-	-

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
	generally within the town (including if the household might be classified for other purposes as a part of a discrete settlement such as a “town camp” or “town based reserve”)						
Outcome 10 Aboriginal and Torres Strait Islander people are not overrepresented in the criminal justice system	Target 10 By 2031, reduce the rate of Aboriginal and Torres Strait Islander adults held in incarceration by at least 15 per cent	Yes, indirect contributors	Refer indicators listed for CTG Outcome 11 and Target 11	Refer measures listed for CTG Outcome 11 and Target 11	See below	See below	See below
Outcome 11 Aboriginal and Torres Strait Islander young people are not overrepresented in the criminal justice system	Target 11 By 2031, reduce the rate of Aboriginal and Torres Strait Islander young people (10–17 years) in detention by at least 30 per cent	Yes	Safety	Children and young people are safe from crime	Number of arrests involving young people 10-17 years	Apprehended by police (per 10,000 population) – apprehension includes arrested and/or reported	10 - 17 years (inc)

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 12 Aboriginal and Torres Strait Islander children are not overrepresented in the child protection system	Target 12 By 2031, reduce the rate of over-representation of Aboriginal and Torres Strait Islander children in out-of-home care by 45 per cent	Yes	Safety	Children and young people are safe from abuse and neglect	Number of children and young people being admitted to out-of-home care	<b>Admitted</b> to out-of-home care (per 1,000 population) and <b>In</b> out-of-home care (per 1,000 population)	Under 18 years
Outcome 12 continued	Target 12 continued	Yes	Safety	Children and young people are safe from abuse and neglect	Proportion of children twelve months old or under being notified to the child protection system	Substantiations of notifications to child protection (per 1,000 population)	Under 12 months and 1-4 years (inc) and 5-9 years (inc)
Outcome 13 Aboriginal and Torres Strait Islander families and households are safe	Target 13 By 2031, the rate of all forms of family violence and abuse against Aboriginal and Torres Strait Islander women and children is reduced by at least 50 per cent, as progress towards zero	Yes	Safety	Children and young people live in safe housing	Proportion of children and young people feeling concerned about family conflict	Family conflict	15-19 years (inc)



Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 13 continued	Target 13 continued	Yes	Safety	Children and young people are safe from preventable injury	Number of children and young people presenting to emergency departments with potentially preventable hospitalisations	Potentially preventable hospitalisations (% of total admissions)	Birth to 17 years (inc)
"	"	"	"	"	Number of deaths of children and young people being attributed to preventable/unintentional injury	Injury death (per 100,000) population	Birth to 14 years (inc)
"	"	"	"	"	Number of police cautions or fines issued for failing to safely restrain passengers under 16 years	Failing to safely restrain passengers	Under 16 years
"	"	"	"	"	Number of children and young people 5-13 years attending a swimming safety program	Swimming safety program	5-13 years
"	"	"	"	Children and young people are safe from crime	Number of children and young people who are victims of offences reported to police	Victims of crime (per 10,000 population) excluding sexual assault and related sexual offences	Birth to 17 years (inc)

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 14 Aboriginal and Torres Strait Islander people enjoy high levels of social and emotional wellbeing	Target 14 Significant and sustained reduction in suicide of Aboriginal and Torres Strait Islander people towards zero	Yes	Wellbeing	Children and young people are leading satisfied lives	Rate of suicide for children and young people	Rate of suicide for children and young people aged per 100,00 population	5-17 years (inc)
"	"	"	Health	Children and young people are thriving	Proportion of children and young people estimated to have an emotional, mental health or behavioural problem	Mental health support service	5-17 years (inc)
"	"	"	Health	Children and young people are thriving	Proportion of children and young people considering themselves to be in good or excellent health	Good or excellent health	Years 4 to 10
"	"	"	"	"	" 12-year-olds	"	Year 6
"	"	"	"	Children and young people are thriving	" 16-year-olds	"	Year 10

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 14 continued	Target 14 continued	Yes	Wellbeing	Children and young people are connected to family, friends and culture	Proportion of children and young people feeling connected to adults <i>in their home</i>	...in their home (DATA NOT AVAILABLE)	Year 4 to Year 10 students
"	"	"	"	"	Proportion of children and young people feeling connected to adults <i>in their school</i>	...in their school	Year 4 to Year 10 students
"	"	"	"	"	Proportion of children and young people feeling connected to adults <i>in their community</i>	...in their community (DATA NOT AVAILABLE)	"
"	"	"	"	"	Proportion of children and young people with one or more friends in whom they can confide	Friendships	"
"	"	"	"	Children and young people play and participate in recreational activities	Proportion of children and young people participating in organised activities outside of school hours	Organised activities	"

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 14 continued	Target 14 continued	Yes	Wellbeing	"	Proportion of children and young people participating in sport or recreational physical activities	Organised sports	Year 4 to Year 10 students
"	"	"	"	Children and young people are leading satisfied lives	Proportion of children and young people feeling optimistic about life	Optimism	"
"	"	"	"	"	Proportion of children and young people reporting a medium to high level of satisfaction with life	Satisfaction with life	"
"	"	"	Citizenship	Children and young people are engaged in community activities	Proportion of children and young people participating in volunteering	Volunteering	15-19 years (inc)
"	"	"	"	"	Proportion of children and young people participating in community support groups	Community support groups (DATA NOT AVAILABLE)	15-17 years

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 15 Aboriginal and Torres Strait Islander people maintain a distinctive cultural, spiritual, physical and economic relationship with their land and waters	Target 15a By 2030, a 15 per cent increase in Australia's landmass subject to Aboriginal and Torres Strait Islander people's legal rights or interests	Yes, indirect contributors	Wellbeing	Children and young people are connected to family, friends and culture	Proportion of children and young people participating in cultural activities	Participating in cultural activities	5-14 years (inc)
"	"	"	"	"	Proportion of children and young people participating in cultural activities	Attending at least one cultural venue or event	5-14 years (inc)
Outcome 15 Aboriginal and Torres Strait Islander people maintain a distinctive cultural, spiritual, physical and economic relationship with their land and waters	Target 15b By 2030, a 15 per cent increase in areas covered by Aboriginal and Torres Strait Islander people's legal rights or interests in the sea	Yes, indirect contributors, however, <b>CTG Target 15b</b> is beyond the scope of the framework	Refer indicators listed for other CTG Outcomes and Measures	Refer measures listed for other CTG Outcomes and Measures	-	-	-

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 16 Aboriginal and Torres Strait Islander cultures and languages are strong, supported and flourishing	Target 16 By 2031, there is a sustained increase in number and strength of Aboriginal and Torres Strait Islander languages being spoken	Yes, indirect contributors, however, <b>CTG Target 16</b> is beyond the scope of the framework	Refer to indicators listed for other CTG Outcomes and Measures	Refer measures listed for other CTG Outcomes and Measures	-	-	-
Outcome 17 Aboriginal and Torres Strait Islander people have access to information and services enabling participation in informed decision-making regarding their own lives	Target 17 By 2026, Aboriginal and Torres Strait Islander people have equal levels of digital inclusion	Yes, indirect contributors, however, <b>CTG Target 17</b> is beyond the scope of the framework	See below and refer also to indicators listed for other CTG Outcomes and Measures	Refer measures listed for other CTG Outcomes and Measures	-	-	-
“	“	“	Citizenship	Children and young people participate in decisions that affect them directly and the wider society	Proportion of children and young people feeling able to have a say on important issues	Having a say on important issues (DATA NOT AVAILABLE)	15-17 years

Closing the Gap (CTG)		Outcomes Framework for Children and Young People (framework)					
Outcome	Target	Any relevant framework indicators and measures?	Dimension	Indicator	Measure	Measure detail	Age
Outcome 17 continued	Target 17 continued	"	"	"	Proportion of young people 18 years enrolled to vote	Enrolled to vote	18-19 years (inc)

