



Australian Government

THE EARLY YEARS STRATEGY

SUBMISSION
J Karavolos

30 APRIL 2023

Section 3. My Response

The following section invites responses on a range of questions. You are welcome to respond to some or all of the questions, or provide any other feedback that you think is relevant to the development of the Strategy. This will ensure the Strategy incorporates as many voices as it can.

a. Proposed structure of Early Years Strategy

The proposed structure of the Strategy includes a vision, outcomes, policy priorities and indicators which will measure success against each of the outcomes and priority reform areas. It is proposed that indicators will be developed after the policy priorities are established. A diagram of the proposed structure is at [Attachment B](#).

Implementation Action Plans will be developed after the Strategy is finalised and will set out what will be done to respond to the priority reforms. An Outcomes and Evaluation Framework will also be developed to monitor performance.

QUESTION

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

The Proposed structure looks good in theory. In practice evaluating lessons learnt of other strategies is some of the governance structure elements are missing. That is:

- Assumptions to be tested
- Milestones
- After Indicators need to be able to identify the levers for success
- Roles, Responsibilities and Accountabilities
- Eco System to be drawn into the governance model and Stakeholder mapping to identify what other actors are required to ensure success.
- Independent Verification
- Decision Gates – signal for strategy change or accountabilities to be upheld
- For implementation plan – risk profile and management
- Reporting Cycle

b. Vision

The Strategy's vision will describe the Commonwealth Government's aspirations and ambitions for children in the early years. The Strategy's vision will describe how we want the next generation of Australians to experience their first five years of life. It will be informed by what we hear from the Australian community about what they want for young children in Australia, especially in the critical years from before birth to age five.

Note: the vision for the Strategy is intended to be broader than the vision for the ECEC sector that the Commonwealth Government is developing in collaboration with State and Territory Governments. The Strategy's vision should encompass aspirations for children across all aspects of their lives.

QUESTION

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

Each child receives the love, care, and support to be their best self

- Translates to mean: Each child is seen as an individual, belongs and nurtured unconditionally in a safe society (with no limits put on their potential so they can be their best-self). That is,
 - Strengths-based
 - Individualised Pathways
 - Nurtured to explore their unlimited potential no matter their beginnings
 - Children are respected as individuals
 - Professionals are accountable to children. That is the adult can't hide behind the child and stop having the "child" need to change to fit in – compliance/ society norms/ outcomes / adults way of delivering service
 - Society recognises they are the "village" that is raising "each" child as a nation

c. Outcomes

An outcome should describe what the Strategy will achieve. There are a range of outcomes that children need to do well in life. The Strategy will identify the most important short, medium and long term outcomes to support the early years.

The type of outcomes the Strategy could include might be statements about children being physically and emotionally healthy, learning and developing, being safe or having a positive sense of identity. It could also include references to meeting basic needs or having opportunities to participate in social and community activities, acknowledging culture or ensuring that the early years are inclusive of different families and their needs.

There are many interconnected factors that contribute to good outcomes in the early years. This question asks you to think about the outcomes that should be included in the Strategy.

QUESTION

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

The mix of outcomes should include:

1. Recognition that each child is influenced by its environment so outcomes exist for each of the significant environments in a child's life in the context of psychological and physical safety – home, school, health, community etc
2. Each child is an individual and therefore their developmental outcomes may be different from a timeframe perspective so do not establish outcomes by chronological age. That is early childhood may for some individuals still be in play when they are 18 as developmentally, they are still a 2-year-old.
3. Sense of Identity and Belonging
4. Parent/Carer, Professionals and Society Understanding of Developmental stages and pathways and their impacts.
5. Peer understanding of developmental stages, differences, and disability from early years to establish strong peer support and advocates.
6. A zero tolerance to a child's individual challenges and environmental circumstances dictating their potential.
7. Family units are supported to build capacity to provide a safe environment.

8. Early Years Educational pathways that recognise each child thinks, sees and learns differently.
9. Diagnosis and Health access are critical elements in a child's progress.

d. Policy priorities

For the Strategy to be effective, it is important to identify specific areas (policy priorities) where the Government should focus its efforts.

One area that the Government has already identified as a priority is for the Commonwealth Government to address and break down silos. If there is not a coordinated, joined up approach across Government, there is a lack of ultimate responsibility and accountability for Australia's children. A siloed approach also risks duplicating functions, unnecessary competing for resources and missing opportunities to work collaboratively to improve outcomes.

Some priorities will emerge as the vision and outcomes for the Strategy take shape. We welcome early ideas on priorities for the Strategy.

QUESTIONS

4. What specific areas/policy priorities should be included in the Strategy and why?
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?
6. What areas do you think the Commonwealth could focus on to improve coordination and collaboration in developing policies for children and families?

4. Specific areas/policy priorities should be included in the Strategy and why?

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?

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

So, combining the above questions the response is as follows:

Why? Outcomes for autistic people are reported as poorer in all areas compared to other Australians, including those with other disabilities. This all starts from early years as outlined above with the trajectory of one's life shaped by their early years.

Many of the strategies below apply to other conditions and/or benefit other neurodiverse individuals and minority groups, particularly as 95% of autistic individuals have co-occurring conditions.

- Create an autism and neurodevelopmental stream.
- Continue a Commonwealth Autism Advisor type program to support the NDIS planning process and other government agency programs. This will provide parents of children with an autism diagnosis with the support they need, including pre-planning information on best practice early intervention therapies.
- Extend the Medicare rebate to cover the full costs of autism assessment and diagnosis.

- Fast track implementation of the National Guideline for Assessment and Diagnosis of Autism Spectrum Disorder across all jurisdictions, service systems and sectors.
- Strengthen system capacity to reduce wait times for an autism assessment to three months post referral. Wait times in each region need to be monitored and reported on.
- Support early identification of autism and other conditions by: Building capability in universal service platforms – particularly maternal and child health services and General Practitioners to detect warning signs and refer young children for assessment.
- Supporting the further development of detection apps, including strengthening cultural responsiveness for diverse communities.
- Strengthen pre- and post-natal care for autistic mothers by:
 - Developing autism-specific tools and processes to screen for and identify pre- and post-natal depression in autistic mothers; and
 - Providing an enhanced maternal and child health care offering for autistic mothers and
 - families with autistic children.
- Introduce autism friendly universal design principles across hospitals and major health infrastructure, starting with quiet, low sensory emergency departments, waiting and treatment rooms in public hospitals.
- Provide awareness and training in developmental pathways and disability, including autism for early learning educators, health, government agencies, carers, and peers (children are the best advocates and supports).
- Fund a public education campaign to improve understanding of developmental pathways and differences for disabilities and how to support neurodiverse children.
- Overhaul the National Disability Standards to positively reframe inclusive education as a right, strengthen protections and create accountabilities in the education system to progressively improve key inclusion metrics.
- Expand targeted measures to increase participation of autistic children in early learning. Programs and hold these services accountable for choice and opportunity to achieve inclusion.
- Overhaul ECEI. Provide automatic access as participants to the scheme for every child with an autism diagnosis and enable immediate access to comprehensive early intervention.
- Continue funding national, collaborative research at scale.
- Ensure advocacy programs are funded to support capacity building in children and parent advocacy while the strategy is being developed and executed.

e. Principles

A set of principles will be developed to guide policy and implementation under the Strategy.

Guiding principles could include things such as being child and family centred, listening to the views of children and families, and being inclusive of diverse children and families. They could also consider the needs of children and families across the service system and over time.

QUESTION

7. What principles should be included in the Strategy?

Principles:

- a. each child is an individual and therefore needs an individualised development plan.
- b. each child should be assessed on their developmental age and not chronological age.
- c. a child's family circle is critical to success and therefore capacity building is required in the family unit also.
- d. professionals, educators, agencies, and other supporters need to take responsibility and not hide behind a child's differences for their shortcomings. Hence adapt to the child's agenda and drop the adult's agenda.
- e. pause and listen to the child's voice (and their primary advocate)
- f. don't pretend to know everything, seek expertise, particularly when a disability is involved.
- g. the earlier the diagnosis, intervention and support the better the outcomes, recognising that intervention and support could be family capacity building and/ or incorporated in the individual's interests and relationship based.
- h. all decisions should consider the long-term implications.
- i. effectiveness of outcomes needs to be measured with agreed signposts of success and supported by data.

f. Evidence-based approach

Researchers and practitioners have developed many frameworks to guide policy and practice for the early years. These models or frameworks highlight how different parts of a child's life work together to contribute to positive childhood outcomes. Some of these are described below.

The purpose of these frameworks is similar – to put children at the centre of all policy development and show the interconnections and important elements of early childhood development. These frameworks may help shape the Strategy. Examples include the public health model, ecological systems theory, the Australian Research Alliance for Children and Youth child wellbeing framework (the Nest), and the Organisation for Economic Cooperation and Development (OECD) well-being frameworks. Further information about example frameworks is listed below. It's important to note these frameworks are not the only source of evidence and data that will be drawn upon. The Strategy will recognise the importance of Aboriginal and Torres Strait Islander knowledge bases, recognising there are gaps in current evidence and data, a key priority under the current Closing the Gap Agreement.

- The public health model identifies areas of risk in children's development and prevents problems before they occur by addressing that risk. The model provides different levels of support, from universal services available to everyone to highly targeted offerings. Universal services include things like our health and education systems; targeted (or secondary) services include policies such as parental leave; and tertiary services address acute issues such as child protection^{xxi}.
- The ecological systems theory developed by Urie Bronfenbrenner shows a child's development is influenced by their surrounding environment, which ranges from a child's immediate environment, through their family, community, and up to the influence of society^{xxii}.

- The Nest conceptualises wellbeing as six interconnected domains that support each other to help children both thrive in childhood and reach their full potential as they grow. To have optimal wellbeing, a child needs to have their needs met in all six domains, in an ecological model based on Bronfenbrenner’s^{xxiii}.
- The OECD has two key frameworks for measuring wellbeing. The first is a general wellbeing model that considers diverse experiences and living conditions of people and is built around three components, including current wellbeing, inequalities in wellbeing outcomes and resources for future wellbeing (Figure 1). A second more recent framework developed by the OECD is an aspirational model to pinpoint the aspects of children’s lives that should be measured to best monitor their wellbeing (Figure 2). It is centred on the idea that children should be able to both enjoy a happy childhood and develop skills and abilities that set them up for the future^{xxiv}.

QUESTION

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

- research that demonstrates the benefits of early autism diagnosis and early intervention and that there is substantial short- and long-term benefits from appropriate timely intervention, given that currently there are currently long waiting lists for diagnosis and access to NDIS ECEI pathway or other community supports.
- National Autism Diagnostic Guidelines
- National Guideline for Clinical Practitioner supporting autistic children and their families.
- School refusal research

Note – Initiative missing from Attachment A is the National Health and Mental Health Roadmap for Autism

Contact:

Jenny Karavolos

