

NSW Government submission

Early Years Strategy Discussion Paper

Introduction

The New South Wales (NSW) Government welcomes the opportunity to respond to the Australian Government's Early Years Strategy Discussion paper, released on 3 February 2023.

The development of a national Early Years Strategy (the Strategy) is an important opportunity to focus public and Government attention on supporting children and families during the most important period of a child's development. A child and family centred Early Years Strategy will help give children the best possible start in life, no matter where they live, or their personal circumstances.

The NSW Government recommends the following key considerations inform the development of the Strategy:

- **Keeping children and families at the centre**, recognising the crucial role parents, carers and communities play in the early years of a child's life;
- **Ensuring services are universally available (population-wide) with tailored delivery models and targeted services for those who need them**, building on individual and community strengths and identifying where service delivery could be improved to achieve better long-term outcomes;
- **Prioritising equity, access and inclusion and reducing system complexity** which exacerbates exclusion issues, particularly for children experiencing vulnerability and disadvantage, and marginalised communities;

- **Collaborating across governments, social service sectors, philanthropic bodies, and the community** to improve coordination of programs and identify opportunities to work together;
- **Providing ongoing commitment to evidence-based service delivery** that supports positive life outcomes for children, including access to quality early childhood education programs, including through funding research and data sharing; and
- **Prioritising a thriving early years workforce** supported by all levels of government, by recognising the pivotal importance the workforce plays in transforming children's outcomes.

The development of the Strategy is also an opportunity to identify areas to better target funding, cooperate more effectively and advance systems integration so that services from multiple levels of government wrap around children and families and deliver better outcomes.

This submission does not constitute a commitment by the NSW Government to new policy or funding settings. However, the NSW government would welcome the opportunity to work with the Australian Government as it further develops the Early Years Strategy and plans its priorities for new investment.

Whole of Government Approach to the Early Years in NSW

The first 2,000 days of a child's life from conception to age five are critical to physical, cognitive, linguistic, social and emotional development. More than 1 million neural connections form every second in the first few years of life¹. Evidence tells us that children's brain growth is strongly influenced by their environment, and early experiences have long-term impacts on children's outcomes.

Keeping families and children at the centre of a holistic and coordinated approach to the early years helps give all children the best start in life. Improved outcomes for children in turn supports a healthier, happier and more productive society, and breaks the cycle of disadvantage.

The NSW Government delivers a range of services, funding and supports for children, families, communities, professionals and organisations across key early childhood related sectors. This includes ownership or shared responsibility for a range of policy levers related to the Early Years, such as child protection, early childhood education, health, public housing, infrastructure and environments. The NSW Government also plays a role as regulator of the early childhood education and care sector in alignment with the National Quality Framework.

The NSW Government has started working to create a more integrated, accessible and affordable early years system.

This includes:

- scaling up state-wide family and child health and development programs that are proven to make a positive difference in the first 2,000 days of children's lives;
- ensuring all women in NSW receive respectful, evidence-based and equitable maternity care that improves experiences and health and wellbeing outcomes;
- making essential early childhood education and care services more affordable, equitable and accessible for parents and carers when and where they need it;
- enhancing quality in services to optimise children's learning and development, and life outcomes; and
- investing in the early childhood education and care (ECEC) workforce.

A core part of this commitment is a \$376.5 million investment in a cross-agency early childhood development approach that is delivering a range of supports and services through partnerships with health, education and child protection to ensure more children are developmentally on track by the time they start school.

There are also a range of other early years related initiatives currently underway across NSW Government which are detailed at [Appendix 2](#).

The Australian Government has a key role to play in improving outcomes for children and families through programs including Medicare and the Child Care Subsidy. The Strategy provides a valuable opportunity to share ideas on further cooperation between Australian, State and Territory Governments and broader community programs, funding and frameworks. NSW is working to improve delivery via a cross-government approach to the early years, and can share experiences of what has worked well and what hasn't. We welcome the opportunity to contribute to the Strategy and look forward to collaborating together to deliver a national early years system that improves lifelong outcomes for children and families.

¹ Centre for Policy Development. (2021). *Starting Better: A Guarantee for Young Children and Families*. CPD. <https://cpd.org.au/wp-content/uploads/2021/11/CPD-Starting-Better-Report.pdf> and Center on the Developing Child (2007). *The Science of Early Childhood Development (InBrief)*. www.developingchild.harvard.edu.

Response to Discussion Questions

1. Proposed Structure of Strategy, Vision and Principles

EYS Discussion Paper Questions

1. Do you have any comments on the proposed structure of the Strategy?
2. What vision should our nation have for Australia's youngest children?
7. What principles should be included in the Strategy?

Key Points

The Strategy could aim towards an early years system that is inclusive of all families and is built on universal services with tailored delivery models, and targeted services for those who need them.

The Strategy would benefit from a focus on improving collaboration between the Australian Government and States and Territories and reducing complexity for children, families, communities and sector professionals.

A national approach to the early years should be centred on the needs of children, as well as the role parents, carers, families and communities play in supporting healthy development and learning for children.

The first 2,000 days of a child's life are a strong predictor of their lifelong health, wellbeing and learning. The brain develops more rapidly and we learn faster at this critical time than any other in our lives – with positive connections and experiences laying the foundations for a bright future.²

Investment in early years prevention and early intervention services has significant benefits for child and family wellbeing by reducing exposure to risk factors such as abuse and neglect, family and domestic violence, and poverty, and supports healthy child development and improved lifelong outcomes.³ Increased investment in prevention and early intervention means more children and families have access to the services and supports they need to thrive, as and when they need them.

The economic return on prevention and early intervention services is also consistently higher than late intervention or crisis services. Investment in early intervention services reduces long-term government expenditure on health, child protection, policing, welfare and other government services.⁴

Children's attachment relationships are a crucial predictor of their later life outcomes.⁵ It is important that the Strategy reflects the importance of evidence based, holistic parenting and wrap-around supports for the child/family as well as focus on parents and carers to provide stable and responsive environments for children in their care.

Universal services such as health services and early childhood education are crucial to ensure all children have the best start in life. These services should be universally available to all families, no matter where they live, with additional support and services provided for those children who experience additional barriers to accessing services. Universal services should be delivered in a tailored way that aligns with individual community needs. Alignment and agreement on key universal services such as health, early childhood education and care, and social services would also allow governments to consider national harmonisation of the offerings to all children to give them a strong foundation and start in life. Targeted services would complement universal approaches to ensure that the unique needs of individual children and families are supported and met.

There is also value in adopting a holistic approach to the early years, which encompasses the broader factors that impact child wellbeing beyond the established early years sectors of education, health and child protection, but which have direct impacts on children and families. This includes housing accessibility, cultural support, and food and water security.

The Strategy is also an opportunity to consider how potential reforms could be staged over the short, medium and long-term.

The following sections highlight key considerations and principles for suggested inclusion in the Strategy.

^{2,3} NSW Health. (2021). *Brighter Beginnings: The First 2000 Days of Life*. <https://www.health.nsw.gov.au/kidsfamilies/programs/Factsheets/brighter-beginnings.pdf>

⁴ Fox, S., Southwell, A., Stafford, N., Goodhue, R., Jackson, D. and Smith, C. (2015). *Better Systems, Better Chances: A Review of Research and Practice for Prevention and Early Intervention*. Canberra: Australian Research Alliance for Children and Youth (ARACY).

⁵ Sullivan, R. M. (2012). *The Neurobiology of Attachment to Nurturing and Abusive Caregivers*. *Hastings Law J.* <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3774302/>

Recognising the needs of children and families from diverse backgrounds

Children and families from low socio-economic backgrounds, children and families from Culturally and Linguistically Diverse (CALD) backgrounds (including from migrant, refugee, and refugee-like backgrounds), Aboriginal and Torres Strait Islander children and families, children and families living in regional and remote areas, children and families experiencing or who have experienced domestic, family and sexual violence, children in out of home care (OOHC), and children and families with disability and additional learning needs, are more likely to experience additional barriers to accessing the early years supports and services. In some communities, early childhood services may be better accessed across borders, including culturally appropriate services.

In 2021, data from the Australian Early Development Census (AEDC) indicated that:

- From 2018 to 2021, the percentage of children developmentally vulnerable on one or more domain(s) increased from 21.7 per cent to 22.0 per cent; and those developmentally vulnerable on two or more domains also increased from 11.0 per cent in 2018 to 11.4 per cent in 2021.
- Aboriginal and Torres Strait Islander children and children from CALD backgrounds are more likely to be developmentally vulnerable than their non-CALD peers.⁶

Children and young people with child protection histories are at risk of poor educational outcomes when compared to their peers in the general community. Children and young people with more Risk of Significant Harm (ROSH) reports before they entered OOHC score lower on NAPLAN in Years 3 and 5 compared to children and young people with fewer ROSH reports.⁷

⁶ Australian Early Development Census. (2022). *Australian Early Development Census National Report 2021: Early Childhood Development in Australia*. Australian Government Department of Education, Skills, and Employment. <https://www.aedc.gov.au/resources/detail/2021-aedc-national-report>

⁷ Department of Communities and Justice. (2021). *Educational Outcomes: Children and Young People in Out-of-Home Care. Pathways of Care Longitudinal Study (POCLS). Evidence to Action Note Number 5*. <https://www.facs.nsw.gov.au/download?file=813820>

⁸ The NSW Department of Customer Service has developed a life navigator tool to support customers access information and services they need at every stage of life including 'having a baby' and 'parenting young children'. NSW Government. (2023). *Life Journeys*. NSW Government. <https://www.nsw.gov.au/life-events>.

⁹ NSW Government. (2018). *Life journey mapping – the NZ experience*. <https://www.digital.nsw.gov.au/article/life-journey-mapping-nz-experience>

It is crucial that the Strategy reflects the needs and aspirations of families and communities for children from diverse backgrounds. Addressing systemic issues such as racism, discrimination and intergenerational trauma should be considered, which impact the way children and families may engage (or disengage) with services in the early years system. Ensuring a holistic, culturally safe and comprehensive approach to education and care also helps ensure equity of access to supports and services.

Aligning with other strategies and frameworks

The Strategy presents an opportunity to connect programs and reforms such as the National Disability Insurance Scheme (NDIS) with existing strategies underway. A suggested list of strategies and frameworks for integration is at [Appendix 1](#). In particular, integration is critical with Closing the Gap and associated initiatives, and with the National Vision on Early Childhood.

Supporting transitions through a life journeys approach

A “life journeys” approach enables the delivery of seamless and connected services to support people during key life moments, and throughout their entire life journey. It works to connect people to the information and services they need, when they need them, and in a format that suits their individual needs.⁸

There is an opportunity for the Strategy to apply key lessons from life journey work undertaken in Australia, New Zealand and internationally.⁹ NSW is working across agencies to deploy and expand life events solutions, including successfully delivering solutions across early years programs. Key to this approach is consultation with children and families on how government can improve the experience of navigating the service system throughout the life cycle to enable seamless access to support, resources and services, and support improved outcomes.

Providing an overarching vision and key principles

An overarching statement such as “*All children are strong, healthy, resilient and able to thrive no matter where they live or what their family circumstances are*” would provide a unifying link between key principles, and clearly articulate what the Early Years Strategy aspires to achieve.

Key principles of an Early Years Strategy should reflect the breadth and depth of factors that support children and families to thrive including:

Child and family centred principles

- Child voice
- A strengths-based approach, focusing on children, families and their local communities
- Child safety and trauma awareness
- Cultural safety and inclusivity
- Equity and inclusion, including prioritisation of the needs of diverse children and families (including cultural and linguistic needs of children and families from diverse backgrounds including from migrant, refugee, and refugee-like backgrounds)

Approach principles

- Evidence based practice supported by human centred design
- Data Sovereignty and data sharing

Systems principles

- Collaboration within and across governments
- ‘Proportionate Universalism’ (proportionate universalism proposes that policies need to be universal, but delivered with intensity and scale that is proportionate to the level of disadvantage and or social need.¹⁰)
- Strategies to address social determinants of health
- Universal models with tailored, co-designed, placed-based implementation models (value-based care)
- Integrated service delivery models (including continuity of care across different service providers) and a ‘no wrong door’ approach
- Health promotion, prevention and early intervention principles
- Trauma-informed approach
- Skilled and sustainable workforce.

¹⁰ Victoria University. (2021). *Blending an implementation science framework with principles of proportionate universalism to support physical activity promotion in primary healthcare while addressing health inequities*. Health Research Policy and Systems. <https://vuir.vu.edu.au/42412/1/Blending%20an%20implementation%20science%20framework%20with%20principles%20of%20proportionate%20universalism%20to%20support%20physical%20activity%20prom.pdf>

2. Policy Priorities

EYS Discussion Paper Questions

4. What specific areas/policy priorities should be included in the Strategy and why?
6. What areas do you think the Australian Government could focus on to improve coordination and collaboration in developing policies for children and families?
8. Are there gaps in existing frameworks or other research or evidence that need to be considered for the development of the Strategy?

Key Points

Consultation, coordination and collaboration between Governments, health, education and social service sectors, the community, and philanthropy is critical to ensuring effective early years policy and program delivery.

The Early Years Strategy is an opportunity to build strong positive discourse and understanding around the importance of the first 2,000 days of a child's life.

The Australian Government is well placed to lead a coordinated and collaborative approach to the early years within portfolios and across tiers of government. The Australian Government could also partner with States and Territories and communities to identify opportunities for collective policy and program delivery, leveraging the expertise of jurisdictions to deliver coordinated or joint-led reform responses.

The Australian Government holds primary responsibility over specific policy and program areas, including Medicare, the NDIS and the Child Care Subsidy, and could consider opportunities to improve affordability and accessibility of services through these programs.

Focusing on co-located and integrated service delivery models is an opportunity to develop coordinated and collaborative solutions to barriers experienced by families when accessing services.

Development of a holistic Early Years Data Strategy would support improved data collection and usage, and support greater transparency and accountability.

Coordination and collaboration across tiers of government to reduce system complexity for families

The Early Years Strategy offers a unique opportunity for the Commonwealth, States and Territories, and local governments to be ambitious, critically reflect on the opportunities and barriers children and families are currently facing and consider how we tackle some of the challenges across the early years system.

The Strategy could be supported by identified opportunities for collaboration and coordination, without duplicating service delivery. For example, a focus could be integration of the way services are delivered to children and families across community health, primary health care, hospital outpatient and Aboriginal health services.

The Strategy also provides a unique opportunity for all stakeholders to align their purpose and roles, and increase collaboration and partnerships. The Australian Government should seek to build strong partnerships with sectors, community organisations, peak bodies and national authorities, and enable shared decision making in the design and delivery of the strategy. Engagement should consider groups including but not limited to maternity and child health, general practitioners (GPs), Aboriginal Community Controlled Organisations (ACCOs), non-government organisations (NGOs) and the Australian Children's Education and Care Quality Authority (ACECQA).

Governance arrangements to support service coordination

The Strategy should seek to embed cross-agency and cross-government collaboration at every stage of the policy and program implementation process, including:

- cross-portfolio approaches to budget design and budget bids,
- a cross-government governance framework that has touch points at every level (from service delivery to Ministers), and
- agency partnerships to develop and deliver universal, targeted and integrated service design.

NSW has started coordinating elements of early years policy and programs through a cross agency governance framework to improve collaboration and service delivery. A senior officer steering committee provides a dedicated authorising environment to progress early years priorities supported by specialised working groups, including for data and evaluation, communications and engagement, supporting tailored policy design and program implementation and delivery.

NSW also has an early childhood development Project Management Office (PMO) function. The PMO sits within the NSW Department of Education and works in close collaboration with NSW Government agencies to build strong relationships, supports program management and reporting, share evidence and measures, manage strategic governance, and support communications and engagement.

For example, the current design of health and development checks to children in preschool settings is managed through NSW Health and NSW Department of Education partnership. This helps agencies to keep children and families at the centre of the work, work towards a common set of goals and outcomes, and develop policies and programs which leverage the strengths of both agencies. The approach also seeks to reduce duplication across NSW.

Another NSW example is the Aboriginal Child and Family Centres (ACFCs). ACFCs are a model of integrated service delivery which is being expanded in NSW as part of our child development programs. ACFCs provide an integrated and culturally-appropriate mix of services. Services are provided in purpose-built premises where early childhood and family support is co-located with referral systems to other providers (e.g. primary and allied healthcare), to improve the overall health and wellbeing of children and support for their families. Fostering cross agency collaboration and overcoming funding silos were critical to the success of the program.

It is important that the Strategy focuses on mitigating the risk of duplication. For example, the Australian Government Connected Beginnings program overlaps with NSW based Aboriginal Child and Family Centres. NSW would value the opportunity to work with the Australian Government to improve collaboration between these two programs and centre them on children, families and communities.

Building positive public awareness on the importance of the First 2,000 Days

Building collective understanding of the value and importance of the first five years of a child's life, including early childhood education, is crucial to ensuring children get the best possible start in life. This can include a focus on:

- Prioritising health promotion in the pre-conception and antenatal period, including healthy behaviours in pregnancy
- Acknowledging the importance of fathers and partners in supporting family wellbeing and children's development
- Supporting parents' and carers' (particularly women) desire and ability to re-enter the workforce in a way that makes sense for them and supports their children's development and wellbeing
- Promoting public health education relating to babies and young children, including breastfeeding, immunisation, healthy infant attachment with sensitive and reliable caregivers, child physical activity and nutrition, and regular developmental assessments to connect families to early intervention services
- Building a strong, positive public discourse on the value and importance of early childhood workforce sectors, including early childhood educators, allied health, and child and family health workers.
- Reducing stigma and shifting the narrative on family and domestic violence, to promote children's safety and wellbeing.
- A focus on prevention and early intervention, especially in the context of child protection, has long term benefits for child and family outcomes.

Early intervention programs that offer early help and support, providing targeted services at the point where they can have the most impact, early in life and early in need can dramatically improve the life trajectory of a child. In addition, programs that strengthen community capacity, as well as capacity of parents and carers, support the family unit. This reduces the need for government intervention, reducing cost to governments and improving lifelong outcomes.

This also includes better support for early years professionals, as this workforce is often the first identifier of potential challenges and risks for families.

Changing universal services and funding models to improve the affordability and accessibility of services

In addition to being well placed to lead a holistic approach to the Early Years, the Australian Government also has primary responsibility of several key policy and program levers which individual States and Territories do not have remit to shape. There is an opportunity for the Australian Government to consider opportunities to shape early years outcomes through these areas.

Australian Government health services, including Medicare, are a significant lever that can be used to drive reform and improve access and affordability of primary and allied health care services. The Early Years Strategy could consider opportunities for Medicare to support access to primary health and early intervention services and better meet the needs of children and families.

NSW welcomes the recent investment announced as part of the 2023-24 Federal Budget that will deliver \$5.7 billion over 5 years to strengthen Medicare and improve access and affordability of general practice services. The tripling of bulk billing incentives for key cohorts, including families with children under 16, as well as investment in improving connection and coordination between primary health care services and allied health services is valuable in ensuring children and families get the support they need. Investment of \$824.4 million in digital health, including to update the My Health Record and development of the MyMedicare system are also welcomed. The Australian Government should ensure that these digital solutions link with work underway in individual jurisdictions, as well as prioritise data sharing opportunities with States and Territories to support ongoing integration and collaboration.

The Australian Government could consider further opportunities to build on recent reforms. This could include a specific focus on access and availability of publicly funded GPs and practice nurses for developmental assessments and specialised paediatric medical services (particularly for rural and remote locations), as well as changes to the Medicare Benefits Schedule (MBS).

The MBS currently does not provide for early intervention services and therapies for children with mild and moderate developmental delays or needs in only one domain of the AEDC, and the cost of accessing early intervention services such as speech pathology is a barrier for many families. Investment in prevention and early intervention improves developmental outcomes for children and ultimately reduces the need for further, more intensive intervention later on.¹¹

In addition to costs, waitlists continue to prevent children and families accessing the support they need either directly through a specialist or through the NDIS. Paediatric medical and allied health services wait list times can often be as long as up to 18 months.¹² The Strategy should consider how to address this potentially through simplifying referral pathways as well as by addressing workforce constraints of healthcare professionals.

Considering how Medicare and primary health care systems could support improved health and wellbeing

Further areas that could be investigated as reforms to Australian Government health systems and well child health care could include:

- Improved connections between public, state-led maternity and child and family health services and general practices. Working with state and local services to improve pathways into support for children under five with developmental delays or disability.
- Improved connections between public, state-led maternity and child and family health services and early childhood education and care provision services in local areas. Working with state and local services to improve pathways into educational and care pathways for children under five.
- Extension of Medicare items to children experiencing vulnerability and disadvantage (e.g. Medicare items available for Aboriginal and Torres Strait Islander children are extended to children experiencing vulnerability and disadvantage).
- Investment in the provision of trauma informed parental mental health care.¹³

¹¹ Child and Family Community Australia. (2017). Prevention of child abuse and neglect, Australian Institute of Family Studies and Australian Research Alliance for Children and Youth. (2015). *Better Systems, Better Chances: A Review of Research and Practice for Prevention and Early Intervention*.

¹² Boulton, K., Hodge, M.A, Jewell, A., Ong, N, Silove, N., & Giastella, A.J. (2023). Diagnostic delay in children with neurodevelopmental conditions attending a publicly funded developmental assessment service: findings from the Sydney Child Neurodevelopment Research Registry. *BMJ Open*.

¹³ Lovejoy et. Al. (2000). Maternal depression and parenting behaviour: a meta-analytic review. *Clin Psychol Rev*.

- Creation of an add-on item for child health checks that can be claimed on top of regular medium and long consult payments and other payments (e.g. immunisations) to incentivise general practitioners to provide health and developmental checks and uplift data collection.

Improvements to health services through universal healthcare systems would benefit from increased data capability to understand how children and families are engaging with supports. The availability of this data would enable State, Commonwealth, and the Aboriginal community-controlled sector to work together to ensure all children get the services they need.

Integrating the National Disability Insurance Scheme (NDIS) more effectively with other service systems

Equitable access to early intervention therapy in primary care is essential for those who require it. Currently early intervention is only funded through the MBS for children with autism, or the NDIS Early Childhood Approach (ECA) which is for children younger than seven years with a disability or global delay.

There is a need to consider how the NDIS interacts with other service delivery models at the State level, including early childhood education and care services, to ensure coordination across systems and support children and families. It is also important to ensure that the NDIS Early Childhood approach continues and that any future changes to the NDIS support continued prioritisation of children's access to quality early intervention services. This could include consideration of:

- Cost barriers and insufficient availability of specialised workforce, which prevents children from receiving an appropriate diagnosis to be eligible for NDIS support,
- Increasing access and availability of NDIS funded services and allied health professionals for eligible children to reduce waitlists, particularly in rural and regional areas, and as health and development checks are implemented in NSW, and
- Reforms to the NDIS to include affordable and flexible plans and services for Aboriginal and Torres Strait Islander children and families.

NDIS interactions with service delivery could also be assisted by providing support for early childhood teachers, educators and centres to upskill in providing adequate care and education for children who are neurodiverse.

There is also an opportunity to review approaches to NDIS support funding and delivery in remote communities and other 'thin markets'. In many communities, NDIS participant choice and competition may not be delivering good outcomes for children. In these cases, the Australian Government could cooperate closely with states to design and fund sustainable, high-quality support delivery. The recent Federal Budget investment of \$7.6 million to the NDIS to pilot alternative commissioning approaches to improve access to wrap-around supports in remote and First Nations communities is an opportunity to explore how we best support children and families. NSW would welcome working with the Australian Government on this work in Western NSW where there are existing service and accessibility challenges, specifically within the context of early childhood,

There may be an opportunity to coordinate delivery through ECE settings and oversee continuous service transition to school as children move between the two settings. Transition points are critical for maintaining engagement, particularly for children with a disability. Better integrating NDIS services with early child health centres, ECE and schools would help families navigate the system, reduce duplication of service provision, and allow a more integrated approach for families managing a child with a disability.

Additionally, a systems-wide approach to NDIS coordination into the ECEC sector may result in better coordination and efficiency of public resources for the NDIS.

National funding for Early Childhood Education and Care should be targeted to drive outcomes

Evidence tells us that high-quality early childhood education programs have significant benefits for children in the two years before school. It also clearly demonstrates that children experiencing vulnerability and disadvantage benefit the most from attending ECEC, with substantially greater impacts on cognitive, social and emotional outcomes.¹⁴

The NSW Government has developed a submission in response to the Productivity Commission Inquiry into Early Childhood Education and Care outlining the broad range of opportunities available to strengthen the ECEC system and better meet the needs of children and families. A streamlined, effective, and inclusive ECEC system is a crucial part of a holistic approach to the early years. The submission brings together opportunities for the ECEC system that align with a holistic approach to the early years and focuses on maximising the positive impact of early childhood education on long-term outcomes for children.

Consideration of the Child Care Subsidy (CCS) activity test and broader Child Care Package is important to addressing barriers for children and families experiencing vulnerability and disadvantage to access early childhood education, given that these are often the children who benefit the most from ECEC. Review of the CCS activity test should consider potential impacts for all children and families accessing early childhood education and care, such as through increased demand for ECEC services.

Consideration could also be given to the impacts of different ECEC funding models on Aboriginal Community Controlled Organisations (ACCOs). Current arrangements mean that services often experience funding instability and insecurity caused by the need to seek funding from multiple sources across varying timeframes. This current approach to funding means that ACCOs experience barriers to delivering stable, high-quality, efficient and effective services, and as well as retaining staff and building the service capacity and capability.

The Early Childhood Care and Development Policy Partnership (ECCDPP) is an Australian Government initiative to bring together governments and Aboriginal and Torres Strait Islander representatives and

improve early childhood outcomes for Aboriginal and Torres Strait Islander children and families. The ECCDPP has agreed to commission a research project in 2023 on funding model options for ACCOs that deliver early childhood education and care and other integrated early years services for children and families. The project aligns with Priority Reform Two and clause 45 of the National Agreement on Closing the Gap, which sets out objectives to build the Early Childhood Care and Development Policy Partnership community-controlled sector with dedicated, reliable and consistent funding models that are responsive to community needs. Considerations under this work include modelling for future ACCO sector growth, the intersections with workforce availability and capability, and funding needs for rural and remote contexts. Work under the Early Years Strategy must align with the work currently being led by the Early Childhood Care and Development Policy Partnership to ensure consistency avoid duplication, and ensure service continuity.

The Strategy can prioritise support for co-located and integrated service delivery models

Navigation of complex system and funding models is a significant barrier for many children and families to get the support they need. Physical location of services is also a key barrier. There is an opportunity for the Australian Government to consider models which work to address these key barriers for families.

Co-location of services involves placing of two or more services in close proximity to each other, such as ECEC, health and development, or social services, while integration of services refers to the relationship between those services. Co-location can benefit children and families, especially those who need access to more than one service or have complex needs, by removing physical barriers to access. Close proximity of services is also beneficial in improving transitions between services. Evidence suggests that integration of early childhood education, family services and maternal and child health services can have a positive impact on addressing developmental issues and improving early cognitive and social development in children, as well as support better use of resources and infrastructure by providing more efficient services and a more connected experience for children and families.¹⁵

¹⁴ Fox, S., Geddes, M. (2016). *Preschool – two years are better than one: developing a universal preschool program for Australian 3 year olds – evidence, policy and implementation*. Mitchell Institute, Victoria University. <https://www.vu.edu.au/sites/default/files/two-years-are-better-than-one-mitchell-institute.pdf>

¹⁵ Department of Education and Training. (2015) Colocation and other integration initiatives: Strategic Evaluation. A Summary Report. State of Victoria. <https://www.education.vic.gov.au/Documents/about/research/colocation/Co-location%20Services%20Summary.pdf>

Hub models such as existing Multifunctional Aboriginal Children's Services (MACS), ACFCs in NSW, or an ECEC hub/central location of family supports provide supportive and collaborative integrated service delivery approaches, and reduce the need for families to re-tell their story or attend multiple locations for support.

Development of future funding, and selection of locations for co-located and integrated service delivery models must involve genuine consultation and collaboration with communities, States and Territories. This will avoid duplication of services and most effectively address communities' needs and service delivery gaps.

Building a high-quality, socially valued, and well remunerated workforce

The Australian Government must invest in all workforces, including allied health workforces, to increase capacity and quality of service delivery. This is particularly important noting the gendered nature of these sectors. Over the past 20 years, the proportion of women in traditionally 'female-dominated industries' (health care and social assistance and education and training) has increased, while average remuneration in female-dominated organisations remains lower than in male-dominated organisations. Unpaid care work is also still largely performed by women.¹⁶ In the ECEC sector, for example, 92% of the workforce identifies as female.¹⁷ In the NSW social services sector, 75% of employees are female.¹⁸

Work performed primarily by women is often less valued.¹⁹ Evidence indicates that minimum and award wages are 10 per cent lower on average for industries and occupations that are dominated by women, in comparison to those industries and occupations that are dominated by men.²⁰ These structural inequities extend throughout the workforce, with roles in female-dominated industries that require a bachelor's degree qualification or higher paying up to 30 per cent less than equivalent roles in male-dominated industries.²¹

Having children (and associated increase in volume and unequal distribution of paid and unpaid care labour responsibilities for men and women) is identified as a key driver for gender disparity in the workforce. Coupled with existing policy settings including paid parental leave arrangements and costs of early childhood education and care, there is a notable and permanent divergence in the labour market outcomes between men and women.²² However, modelling suggests that the economic benefits of reducing the labour force participation gap by half between men and women would increase Australia's national GDP by \$60 billion over 20 years.²³ There is a need to create reform which addresses ongoing issues of gender disparity within care and support workforces such as early childhood education and care, health, and social services, and shift public discourse and improve public perception on the value of these careers. Reforms should also actively consider the role of men in the delivery of paid and unpaid caregiving with a focus on reducing the divergence of labour market outcomes for men and women.

NSW welcomes recent investments in the 2023-24 Federal Budget to support allied health and ECEC workforces, including funding of \$50.2 million to establish the Primary Care and Midwifery Scholarships program, \$31.6 million for improved training arrangements for international medical students working in rural and remote locations, and \$72.4 million over five years to support the skills and training of workers in the early childhood education and care sector.

¹⁶ Workplace Gender Equality Agency. (2019). *Gender Segregation in Australia's Workforce*, Australian Government.

¹⁷ Department of Education. (2021). *Early Childhood Education and Care National Workforce Census*. Australian Government. (Note: includes workforce in long day care, family day care, before and after school care, preschools)

¹⁸ NSW Government. (2022). *Women's Opportunity Statement – NSW Budget 2022-23*.

¹⁹ Cortis, N., & Meagher, G. (2012). *Recognition at last: Care work and the equal remuneration case* in NSW Treasury Technical Paper. (2022). *Women's economic opportunities in the NSW labour market and the impact of early childhood education and care*.

²⁰ Broadway, B. and Wilkins, R. (2017). *Probing the effects of the Australian system of minimum wages on the gender wage gap* in Foley, M., & Cooper, R. (2021). *Workplace gender equality in the post-pandemic era: Where to next?* in NSW Treasury Technical Paper. (2022). *Women's economic opportunities in the NSW labour market and the impact of early childhood education and care*.

^{21, 22} NSW Treasury Technical Paper. (2022). *Women's economic opportunities in the NSW labour market and the impact of early childhood education and care*.

²³ NSW Government. (2022). *Women's Opportunity Statement – NSW Budget 2022-23*.

Many ECEC workers are employed under national Awards, with 62% of the NSW ECEC workforce employed in Australian Government funded services.²⁴ The NSW Government's submission to the Productivity Commission Inquiry into ECEC notes a range of opportunities for exploration to support the ECEC workforce. Consideration should be given to improved supports for early years workforces in consultation with unions and professionals on a range of challenges. The Australian Government could also consider the following supports relevant to the broader early years workforce:

- reviewing skill recognition barriers (including recognition of international qualifications);
- broadening the availability of the Australian Government HELP scheme for qualifications in the early years (including at the vocational level);
- the need to build a strong and positive public discourse on the importance of early years workforces and the care economy, including greater gender equality in the feminised care and education workforces²⁵; and
- specific workforce strategies to ensure a culturally informed and safe workforce for early years professionals, children and families.
- development opportunities to support ongoing upskilling and progression opportunities for existing workforce professionals

The success of the Early Years Strategy and any workforce-focused initiatives which sit under it may depend on local circumstances and available resources, in particular in regional, rural and remote areas. Targeted funding and separate regional initiatives may be required to attract and retain health, education, and other key early years professionals in areas where factors such as geographical isolation, limited community ties, limited access to professional networking or development opportunities, access to family supports (including ECEC) and fragmented and historically unsuccessful relocation incentives impact attraction and retention. We would welcome collaboration with the Australian Government on the development, design and implementation of local, place-based initiatives to support the early years workforces.

²⁴ Proportion of the NSW workforce works in Long Day Care settings. Department of Education. (2021). *Early Childhood Education and Care National Workforce Census*. Australian Government.

²⁵ 92% of the ECEC workforce in NSW identify as female; (ECEC National Workforce Census, 2021), excluding Department run pre-schools.

Using evidence, evaluation and shared data

An essential part of a holistic early years approach is ensuring that policies, funding and interventions are evidence and data-driven, and supported by robust evaluation frameworks that include children, families and communities.

Commissioning research to better inform policy priorities will ensure an evidence-based approach to child development. The Strategy should consider the development of a prioritised or staged research plan, shaped by existing research agendas such as the annual research agenda of the Australian Education Research Organisation (AERO), to identify opportunities for research synergies as well as avoid duplication. Any research or frameworks that are commissioned need to be authentic, co-designed and reflective of the diverse experiences of communities and individuals. A range of possible detailed research priorities across the areas of child development, parental and familial support, communities priorities, behaviours and supports, data and measurement tools, and ECEC are detailed for consideration at [Appendix 3](#).

Improving data collection, sharing and usage and strengthening of current data capabilities will build a more well-informed understanding of early years systems, support improved decision making across levels of government, and reduce the administrative burden on governments and families caused by repeated sharing and storing of duplicative data.

Development of an early years data strategy could build on existing data sharing arrangements, such as the current Preschool Reform Agreement and the recent Data Sharing and Transparency Act 2022, and focus on areas such as child development, accessibility and affordability of services. Data principles including linkage projects should incorporate Closing the Gap priorities such as progressing data sovereignty, break up data to include Aboriginality, and be accessible to communities (where possible) at a local level to identify and address barriers to accessing services, including for families living outside of major cities. This would also align with Closing the Gap Priority Reform 4: Data Collection. This should also be coupled with ongoing data sharing arrangements between the Commonwealth, States and Territories, and the early years sector. An example of this could be through the sharing of ECE vacancy data.

Ethically and safely sharing Child Care Subsidy data could also better inform NSW and other jurisdictions' reform agendas, and position us more strongly to meet demand for ECEC. Similar work that is underway includes the National Disability Data Asset (NDDA) build and underlying data integration infrastructure, with development commencing in July 2023. The NDDA work will deliver an enduring data asset for ECEC disability insights which will complement the work led by the NSW Department of Education on the NSW Early Childhood Test Case through the NDDA which ended in December 2021. The underlying infrastructure has potential to be leveraged for a specific ECEC dataset, potentially in alignment with the Australian Institute of Health and Welfare's current scoping work on a child and youth wellbeing data asset.

3. Outcomes

EYS Discussion Paper Questions: Outcomes

3. What mix of outcomes are the most important to include in the Strategy?
5. What could the Australian Government do to improve outcomes for children – particularly those who are born or raised in more vulnerable and/or disadvantaged circumstances?

Key Points

The Early Years Strategy should be child-centred and outcomes focused and promote access and inclusion for priority cohorts, including cultural safety and disability support.

Holistic outcomes should capture a range of child, family, sector, economic and environmental outcomes to ensure government truly recognises the strengths of children and families, as well as the barriers they face and how government initiatives support them to have the best start in life.

Intended outcomes should be defined and measurable, guided by a robust outcomes measurement framework and underpinned by enabling data and tools to track outcome trajectories over time and across jurisdictions.

Embedding measurable outcomes

Outcomes for the Strategy need to be supported by an outcomes measurement framework and it is important to measure outcomes for a broad range of people. It is also crucial that when developing outcomes, they are not constrained by the data currently available. The Strategy could prioritise development of data to support those outcomes we seek to understand and measure, and establish a “baseline” so that trends in outcomes over time are understood.

The Strategy could include an assessment based on best available evidence including:

- Risk factors affecting children and families and how the system is responding
- Where the evidence suggests the most effective early intervention effort is targeted and how the existing system could be better aligned to have earlier impact;
- Opportunities to leverage national and state activities;
- Opportunities to build shared understanding of the importance of the early years to ensure positive outcomes across the life course and to reduce the demand on acute services.

Focusing on a broad range of outcomes, including overarching and specific outcomes.

When seeking to improve outcomes for children, the Strategy can acknowledge the right for all children to have the best start to life whilst also providing targeted support to ensure particular cohorts receive the additional support they need to thrive. Development of specific outcomes for priority cohorts can ensure focus on greater supports to those who need them most.

Overall outcomes:

- All children have the best start to life
- Children and families feel better supported to exercise control over the decisions that affect their lives
- Children experience an increased sense of cultural belonging and connection to Country
- Meeting wellbeing targets (e.g. no child living in poverty, no child experiencing domestic violence)
- Increased participation in community events and increased sense of belonging in their community
- Children make a strong start in life and learning with effective transitions from ECEC to school

Child focused outcomes:

- Developmental, educational, health, social and wellbeing outcomes over the lifespan

Family focused outcomes:

- Wellbeing of parents/carers and valuing of parental role and parental choice and needs; and economic opportunity

Early Years Sector outcomes:

- Sustainable sector with affordable, accessible, quality services; and a sustainable, skilled and valued workforce

Economic outcomes:

- Short and long-term savings to Government from efficiency gains and from preventative measures leading to reduced spend on interventions; and revenue from increased workforce participation of parents/carers, and of children when they reach adulthood.

Environmental Outcomes

- Impact of climate change, food insecurity, disaster related trauma; access to affordable housing and high quality, safe, and supportive physical environments (such as ECEC infrastructure and green spaces)

Outcomes should also align and recognise where existing work has committed to improving outcomes for children and families, priority cohorts or early years sectors such as Closing the Gap outcomes.

Engaging in co-design

When developing and prioritising outcomes, it is crucial that work is led and co-designed with the children, families and communities who the Strategy intends to support.

Adopting co-design and human-centred design principles within the Early Years Strategy can help facilitate community-led solutions and assist Governments and the community to understand whether the Strategy is achieving its intended outcomes.

Human-centred design could support direct engagement with children, families and communities within the early years system and services and placing them at the centre of the design process to accurately define the problems they are experiencing and identify their needs and possible solutions.

Co-designing with and led by Aboriginal and Torres Strait Islander children and families is particularly important. Cultural determinants of health are protective factors for Aboriginal and Torres Strait Islander people and communities. These factors centre on Aboriginal culture with an interrelated connection to Country, family, kinship and community, knowledge and beliefs, language, self-determination and cultural expression.²⁶ It is important that the development of programs and outcomes for Aboriginal and Torres Strait Islander children and families is led by Aboriginal and Torres Strait Islander communities, is strengths-based, and supports self-determined approaches to child wellbeing.

While co-designed solutions should be owned and driven by communities for communities, human-centred design can also support us in continuous measurement of customer experience outcomes, in addition to service outcomes. Services should be easy to access, trusted, connected and navigate the complexity of Government so parents, carers and families don't have to.

²⁶ Lowitja Institute. (2020). *Culture is Key: Towards cultural determinants-driven health policy*. https://www.lowitja.org.au/content/Image/Lowitja_CultDetReport_210421_D14_WEB.pdf

Conclusion

Jurisdictions across Australia, including the Australian Government, have shared objectives to ensure all children have the best possible start to life and learning. NSW welcomes the Early Years Strategy as an initiative to lead a coordinated and collaborative approach to the early years within portfolios and across tiers of governments, to better support improved lifelong outcomes for children and simplify the system for families and for services.

The NSW Government supports a holistic, child-centred conceptualisation of the early years to support whole-of-family and community wellbeing. This should include a system that is inclusive of all families and is built on an integrated system of universal services with targeted supports for families who need them. The Early Years Strategy must be child-centred and outcomes focused and promote access and inclusion for priority cohorts, including cultural safety and disability support.

It will be critical that the Strategy also recognises broader social determinants of child health and development outcomes and promotes the importance of the first 2,000 days of a child's life. Intended outcomes should be holistic, defined and measurable, guided by a robust outcomes measurement framework and underpinned by enabling data and tools to ensure that the collective work in the early years space improves outcomes for children and families. Alignment with outcomes under Closing the Gap and the commitment to shared decision making is also essential.

NSW welcomes the opportunity for increased collaboration between the Australian Government and States to improve coordination, leverage rather than duplicate one another's efforts, and work together to seize new opportunities.

Glossary

| Acronym | Definition |
|---------|--|
| ACCC | Australian Competition and Consumer Commission |
| ACCO | Aboriginal Community Controlled Organisation |
| ACCS | Additional Child Care Subsidy |
| ACECQA | Australian Children's Education and Care Quality Authority |
| ACFC | Aboriginal Child and Family Centre |
| AEDC | Australian Early Development Census |
| AERO | Australian Education Research Organisation |
| CALD | Culturally and Linguistically Diverse |
| CAPO | Coalition of Aboriginal Peaks |
| CCS | Child Care Subsidy |
| ECCDPP | Early Childhood Care and Development Policy Partnership |
| ECE | Early childhood education |
| ECEC | Early childhood education and care |
| EYLF | Early Years Learning Framework |
| GP | General practitioner |
| MACS | Multifunctional Aboriginal Children |
| MBS | Medicare Benefits Schedule |
| MCoC | Midwifery Continuity of Care |
| MTOP | My Time Our Place |
| NDIS | National Disability Insurance Scheme |
| NGO | Non-government organisation |
| NSW | New South Wales |
| OOHC | Out of Home Care |
| ROSH | Risk of Significant Harm |

Appendix 1 – List of all relevant existing strategies and frameworks for consideration

Aboriginal and Torres Strait Islander children and families

- Closing the Gap
- Productivity Commission Review of the National Agreement on Closing the Gap

Early Childhood and Education

- Draft National Vision on ECEC
- [National Aboriginal and Torres Strait Islander Early Childhood Strategy](#)
- National Quality Framework
- [The National Quality Standard](#)
- Approved Learning Frameworks
 - [The Early Years Learning Framework \(ECE\)](#)
 - My Time Our Place (Outside School Hours Care)
- National Aboriginal and Torres Strait Islander Early Childhood Strategy
- NSW First Steps Strategy
- The National Agreement on Indigenous Early Childhood Development

Affordability and Accessibility

- Productivity Commission Inquiry into Early Childhood Education and Care
- ACCC Inquiry into Child Care

Health

- NSW Health Plan
- Future Health
- Primary Care 10 Year Plan 2022-23
- National Children's Mental Health and Wellbeing Strategy
- NDIS Early Childhood Approach
- [National Obesity Strategy 2022–2032](#)
- [National Preventive Health Strategy 2021–2032](#)
- [National Get Up & Grow Healthy Eating Guidelines](#)
- [National Get Up & Grow Healthy Eating Guidelines for Aboriginal and Torres Strait Islander children](#)

- National Breastfeeding Strategy and Woman-centred care: Strategic directions for Australian maternity services
- Australian 24-Hour Movement Guidelines for the Early Years (birth to 5 years): An Integration of Physical Activity, Sedentary Behaviour, and Sleep
- National Action Plan for the Health of Children and Young People 2020-2030
- Regional Health Strategic Plan 2022-2032
- NSW Healthy Eating and Active Living Strategy 2022-2032
- [NSW Health Caring for Children Manual](#)

Child Protection

- National Strategy to Prevent and Respond to Child Sexual Abuse
- Safe and Supported: The National Framework for Protecting Australia's Children 2021-2031
- National Plan to End Violence against Women and Children 2022-2032

Disability and Additional Needs

- Australia's Disability Strategy 2021-2031

Migration

- Settlement Council of Australia's The Road to Belonging Strategy
- National Settlement Framework

Workforce

- National Strategy for the Care and Support Economy

Legislation

- Disability Discrimination Act
- Disability Standards for Education
- Australian Government's multicultural statement
- Alice Springs (Mparntwe) Education Declaration
- Racial Discrimination Act
- Convention on the Rights of the Child
- 'Cheaper Childcare Bill' (Family Assistance Legislation Amendment 2022)

Appendix 2 – Existing initiatives underway that align with Early Years Strategy priorities

There are a range of initiatives and practices underway within NSW that can be drawn on to inform the Strategy.

NSW Government agencies are currently working collaboratively on a number of evidence-based programs to support children and families from pregnancy through the first 2,000 days – these are detailed below and at [Figure 1](#).

The Department of Communities and Justice and NSW Health are partnering to deliver a state-wide expansion of conferencing services to families in all metropolitan, regional, rural and remote areas to provide early family support. Services deliver supports and early intervention services for expectant parents and their families where there are existing concerns about the safety and wellbeing of an unborn child with the aim of keeping children and families together.

NSW Health is working to implement a life course approach to maternity care, from planning a pregnancy, during pregnancy, birth, the postnatal period and transition to care in the community. By ensuring all women in NSW receive respectful, evidence-based and equitable maternity care this improve the experience and health and wellbeing outcomes to give children the very best start to life.

Expansion of a nurse-led, sustained health home visiting program for families living in areas of socio-economic disadvantage is currently being led by NSW Health. The program aims to strengthen the relationships between children and families, build parenting capacity and support improved child development, wellbeing and health. Investment in this program will expand the number of sites for the program and deliver Lite and Plus versions of the service to provide services to families experiencing varying levels of vulnerability.

Work is also underway through NSW eHealth to develop a personal child digital health record for children from birth to school age. This digital solution aims to give families easier access to and control over their child's health information.

Department of Communities and Justice are working to continue operation and expansion of culturally safe services and supports for Aboriginal families with children aged 0-8 years through Aboriginal Child and Families Centres. ACFCs are operated by ACCOs and deliver ECEC, parent and family support, maternal and child health advice and adult education opportunities, in a way that is tailored to the local needs of families and communities. This work will support the nine existing ACFCs as well as support construction of a number of additional sites across regional NSW.

NSW Government is also currently funding a pilot to explore strategies for the primary prevention of gender-based violence in early childhood education centres across NSW (under the Sexual Violence Plan 2022-2027).

NSW Health and NSW Department of Education are partnering to deliver state-wide health and developmental checks to four-year-old children in ECE settings. This program aims to make health and developmental checks more accessible for children, parents and carers and increase the number of children receiving their developmental checks.

The NSW Early Childhood Education and Care Regulatory Authority is driving innovative work to create culturally safe environments for Aboriginal children and their families. The NSW Quality and Regulatory Services division of the NSW Department of Education is developing the first ever Aboriginal cultural safety framework for ECEC providers and services in NSW, with aspiration to roll out nationally with support from partner jurisdictions and ACECQA. This Framework will ensure every Aboriginal child can experience a culturally safe early childhood education and care journey. The Framework also aims to uplift all children's knowledge and understanding of Aboriginal culture and history. The framework has strong linkages to the national agreement for Closing the Gap, as well as guiding Principles of the National Law (Childrens education and care services).

The NSW Regulatory Authority is also supporting key initiatives such as the Joined up Approvals project (JuA), which seeks to combine some entry point application requirements for ECEC providers from state and federal governments when seeking service approval. The JuA is a significant project that should be considered as part of the strategy. Outcomes of this work may inform future projects which would seek to create more seamless processes, reduce admin burden for ECEC providers while also supporting families in accessing appropriate subsidies for their childcare.

The NSW Office of the Children's Guardian is leading implementation of the NSW Child Safe Scheme, which requires certain child-related organisations to implement the Child Safe Standards recommended by the Royal Commission into Institutional Responses to Child Sexual Abuse. The objective of the Child Safe Scheme is to prevent child abuse in organisations and improve responses when it does occur. This includes creating child safe cultures, where leaders and staff in organisations understand and respect child rights, and empower children and young people of all ages to participate in decisions that affect them.

Figure 1

Cross-government early childhood development programs – overview



NSW agencies are working collaboratively on a number of evidence-based supports (including initiatives and accelerator initiatives) to support children and families from pregnancy through the first 2000 days



Pregnancy



Conferencing service to provide early family support

An interagency initiative to address child protection concerns, during pregnancy and to help keep families together after birth



Birth to age 3



Nurse-led home visiting

A nurse-led, sustained health home visiting for children and families from pregnancy until a child is two years of age. It is an evidence-based intervention for families living in areas of socio-economic disadvantage



Personal child digital health record

Personal child digital health record for holistic, lifetime-improved health outcomes



Culturally safe services and supports for Aboriginal families with children aged 0-8 years

Support for Aboriginal families with children aged 0 to 8 years



Preschool to school



Health and Development checks in preschool

Checks to address developmental delays early on

Early childhood education and care

NSW investment in early childhood education and care to increase access, affordability and quality for all families will ensure children get the best start in life and learning.

Appendix 3 – Proposed detailed future areas of research for consideration

Child development

- Longitudinal study on the effects of COVID on children’s developmental outcomes.
- Given the results for Aboriginal children and the commitment under Closing the Gap Target 4 to increase the proportion of Aboriginal children developmentally on track at school entry to 55% by 2031, consider opportunities to partner with states and territories, communities and Coalition of Aboriginal Peaks (CAPOs) to help lift outcomes for Aboriginal children and families.
- Further evidence gathering around the needs and circumstances of young children with disability and additional learning needs, particularly First Nations children with disability or development delay. There is a lack of access to disaggregated data on these children and a clear need to identify evidence-based strategies to improve early childhood outcomes for these children.
- Similarly, more detailed evidence about the drivers of developmental delay would be helpful in identifying and prioritising responses. For example, some regional stakeholders anecdotally report Foetal Alcohol Spectrum Disorder (FASD) as an explanatory factor in high rates of developmental delay in children from specific communities.
- Support for health promotion activities: In Australia, 20% of children commence school above the healthy weight range.
- The impact of non-urgent child ED admissions and consider how this could be improved.²⁷

Parental and familial support

Parental mental health is particularly pertinent to child development with research demonstrating a strong correlation between depressive symptoms in mothers and disengaged and hostile parenting. Priority areas of research in relation to supporting parents, carers and families could include:

- Focus on selected and targeted mental health interventions.
- Aboriginal-led solutions as per Family Matters report.
- Reference to the impacts of technology in early childhood as this can further affect a child’s mental health.
- Midwifery Continuity of Care (MCoC) is well evidenced to have improved outcomes for mothers and babies – particularly vulnerable families. Specific strategies to increase access to MCoC would strengthen the Early Years Strategy.
- Shift the narrative of the importance of the role of fathers and partners and support women to re-enter and stay in the workforce in a way that makes sense for them.
- Strategic development to identify early mental health support needs for children at risk or experiencing mental health concerns in early childhood.
- Culturally targeted supportive parenting and family care in the early years. Most cases of children requiring out of home care (79%) are due to neglect and emotional abuse, which is preventable with timely, culturally supportive intervention.²⁸ Removing more children in most cases perpetuates trauma, suicide, drug and alcohol use, incarceration and violence. Aboriginal child removals have increased by 110% in the last 10 years, while the non-Aboriginal rate has declined by 12%.²⁹

²⁷ Australian Institute of Health and Welfare. (2022). Australian Government. <https://www.aihw.gov.au/reports-data/myhospitals/sectors/emergency-department-care>

²⁸ SNAICC – National Voice for our Children. (2022). *The Family Matters Report 2022 Snapshot*. SNAICC https://www.familymatters.org.au/wp-content/uploads/2022/11/1533_2022-F.M.-Snapshot-2pp_option-1.pdf and SNAICC – National Voice for our Children. (2022). *The Family Matters Report 2022*. SNAICC.

²⁹ SNAICC – National Voice for our Children. (2021). *The Family Matters Report 2021*. SNAICC.

Community priorities, behaviours and supports

- Evidence should also include what is valued by families (client voice) and other forms of knowledge (e.g. Aboriginal ways of knowing and doing).
- Further research is needed to identify population groups that are not currently participating in early childhood education.
- There is a need to better understand how and to what extent multicultural/CALD communities engage with early childhood development and family support systems.
- Reform of the evidence base process to approve feedback from Aboriginal communities including storytelling, songs and art as evidence.
- Research into reporting activity by unemployed parents of Aboriginal children against early childhood and education milestones of Aboriginal children to support an increase from 38 hours per fortnight (regardless of reporting) to 38 hours per week (regardless of reporting) of subsidised childcare.

Data and measurement tools

- Possible alternative data collection sources for early childhood development, including researching whether the AEDC is a culturally appropriate and safe tool for Aboriginal and Torres Strait Islander children.

Early childhood education and care, the ECEC market, workforce and service types

- Learning and development benefits for children of different qualification levels of teachers and educators.³⁰
- Research to build government understanding of the types of services children interact with before they start school, including data sharing between levels of Government
- There is a gap in the market of innovative service delivery models (such as ECEC for shift work families, or in thin markets). The Strategy could support research into effective models including workforce requirements, as well as initiatives to make those services more financially viable and accessible, and where appropriate, scalable.
- As mentioned above, more evidence-based research and data is needed to inform outcomes and recommendations of the Strategy. For example, data points can inform positions on the number of days children should attend ECEC services, parental preferences and other acute access barriers in metropolitan and regional areas. This could support policy directions and investment in future national funding agreements.
- The Strategy should consider the need for evidence highlighting the benefits of ECEC participation for children and families of different cohorts, in particular for children from lower socio-economic backgrounds.

³⁰ Note the National Children's Education and Care Workforce Strategy (2022-2031) includes actions to review staffing and qualification requirements in the National Regulations as part of the 2024 NQF review, with an emphasis on maintaining the importance of a highly qualified, experienced and sustainable sector workforce (FA5-1); and to review requirements for early childhood teaching programs under the NQF (FA5-2). This research could complement regulatory reforms and support policy and practice change.

Appendix 4 – NSW Government evidence and research

- NSW Health – [Brighter Beginnings Evidence Sheet](#)
- NSW Department of Communities and Justice (DCJ) [evidence portal](#)
 - The DCJ evidence portal includes a suite of contemporary evidence from recently commissioned evidence reviews that are relevant to the early years.
- NSW Department of Communities and Justice Targeted Early Intervention Programs Outcomes Framework <https://www.facs.nsw.gov.au/download?file=679857>

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