

Submission on the Australian Government's Early Years Strategy

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About Relationships Australia Victoria

Relationships Australia Victoria (RAV) is a community based, not-for-profit organisation with no religious affiliations. We provide a diverse range of services and programs including counselling; family dispute resolution (mediation); family violence services; relationship education; mental health services; specialised royal commission support services, workplace services; and professional development and training. We support all members of the community, regardless of their religion, age, gender, sexual orientation, lifestyle choice, cultural background or economic circumstances.

Our services span the prevention, early intervention, response and recovery spectrum, and are delivered from with 18 centres across Victoria, through additional outreach locations, via telephone and online. First established in 1948, we have 75 years' experience in working with families to have healthy, safe and respectful relationships.

Our vision is for positive, respectful, safe and fulfilling relationships for all Australians. Our focus is providing high-quality, effective and accessible services for people with complex relationship issues and delivering prevention services that lead to system-wide change that reduces the incidence of relationship problems. RAV's approach to service delivery is premised on the knowledge that healthy, safe and respectful relationships are an effective protective and preventative factor for mental health and wellbeing.

Structurally, RAV is part of a national federation of 8 state and territory Relationships Australia organisations, which while being independent of each other, share common objectives.

Amongst our services, RAV is proud to deliver an enhanced model of prevention and early intervention services targeting parents in the early years. In response to emerging evidence of the importance of the early years and critical transitions, our 'early matters' program provides early parenting education combined with individualised one-on-one family support.

We uniquely understand the importance of the early years for child development and future life outcomes. In particular, we recognise and focus on the link between improved social and emotional competencies and improved outcomes for mental health and wellbeing, and healthy and respectful relationships.

Our 'early matters' early parenting education and support service

RAV has been delivering the 'early matters' service in the City of Brimbank and the City of Ballarat since 2015. The service's model integrates evidence-based universal parenting programs, parenting education sessions and individualised one-on-one family support at key transition points. 'early matters' aims to reduce risk factors and increase protective factors to achieve positive outcomes for parents, children, and families.

Evidence shows that in the early years safe, stable and nurturing relationships are the most important protective and preventative factor in healthy development of children and young people. Services and programs that focus on parental social and emotional competencies, healthy attachment, and an understanding of child development provide protection and prevention for both parent and child (Crouch et al., 2018).

The 'early matters' service aims to:

- improve child wellbeing and early development.
- enhance parental confidence and skills.

- strengthen positive family relationships.
- promote social and emotional competencies.
- promote gender equality and reduce violence against women.

The universal delivery of education sessions by qualified professionals allows us to engage vulnerable families who might otherwise not access information and support. Through relational interaction and continuity of care, vulnerable families engage with our service's parenting programs and tailored one-on-one support. Participation in our programs can have a transformational impact for families and parenting practices.

Evidence-Informed Approach

The 'early matters' model is informed by contemporary emerging evidence, a comprehensive program logic and theory of change (see below), and ongoing evaluation. A 2019 evaluation of 'early matters' demonstrates the service was associated with improved parental confidence, increased access to support, greater social and emotional awareness and reduced behavioural concerns.

The service continues to develop and adapt to community needs with an increased focus on antenatal and maternal and child health education and support. In 2023, 'early matters' in Ballarat will deliver parenting education through all antenatal classes in the public hospital, and through the Maternal Child Health Nurse program.

Our service is also collaborating with Ballarat 4 Kids, a coalition of local organisations pursuing a whole-of-city approach to ensure all children get all they need to thrive in life. As a partner of this initiative, we will deliver 'early matters' to families on a paediatric waitlist in the local community. We will be evaluating the impact of our service on the waitlist by addressing early signs of social emotional and behavioural difficulties.

The 'early matters' Theory of Change:

Improved parenting skills and knowledge (leads to) secure attachment and positive family relationships (which leads to) greater social and emotional regulation (which leads to) improved mental health and wellbeing outcomes (and) pro social behaviours and healthy relationships (with) additional positive outcomes for parents, family, peers and society more broadly.

Supporting Evidence

There have been numerous theories supporting early intervention and preventative strategies in childhood development. 'early matters' is underpinned by the confluence of developmental and attachment theories, which posit that healthy developmental outcomes are strongly influenced by secure attachment in caregiver or child-parental relationships during the early childhood years. Secure attachment is aligned with enhanced developmental outcomes later in life in areas such as self-reliance, self-efficacy, empathy and social competence.

Conversely, insecure attachments are often associated with an increased likelihood of developing social and emotional issues in later life (Moore et al., 2017). Functional families are evidenced to be critical to healthy attachment, and consequently to healthy developmental outcomes, providing leverage towards social and emotional competencies. In 'at-risk' or 'vulnerable families', early intervention in childhood - through service and program access - provides a critical and timely opportunity to prevent internalisation (poor mental and wellbeing outcomes) and externalising behaviours (violence or anti-social behaviours) from transpiring.

Tuning in to Kids™ at RAV

RAV delivers Tuning in to Kids™ programs across many of our centres and through a range of services. The Tuning in to Kids™ program is an evidence-based parenting program with a focus on parenting strategies that through parents encourage children and young people to understand and accept their emotions, associated with improvements in the parent-child relationships and mental health and wellbeing (Gottman et al., 1996; Yap et al., 2016). Robust evidence supports the benefits of emotion-focused parenting leading to improvements in parenting, parent-child relationships, and reduced family conflict (Havighurst et al., 2020).

Tuning in to Kids™ is one of 9 nationally ‘supported’ peer-reviewed parenting programs (Molly et al., 2019). The programs are delivered within a preventative and early intervention context. Evidence also demonstrates the link between increased social and emotional competencies and gender equality (Cahill et al., 2019; Cherewick et al., 2021). We also deliver specifically tailored Tuning in to Kids™ programs for culturally and linguistically diverse communities, as well as Dads Tuning in to Kids™ programs to enhance reach and effectiveness within these cohorts.

Response

Summary

Vision

An integrated approach to child wellbeing and the early years is a complex challenge beyond the capacity of any one organisation or sector.

RAV believes that a vision for Australia's youngest children should include a focus on:

- A society that shares responsibility for child wellbeing and supports families to thrive in the early years of life.
- Universal services that are accessible and adaptable to local context and need.
- A focus on secure attachment, positive healthy family relationships, and increased social and emotional competencies.

Outcomes

In the context of a biopsychosocial model, evidence shows that parent and family relationships are the most important protective and preventative factor in the healthy development of children and young people, particularly in the early years. As such, RAV believes that it is important to include the following outcomes and indicators specifically in the strategy.

- Positive family (parent-child) relationships.
- Improved social and emotional wellbeing for parents and children.

Protective factors that reduce risk and promote healthy development and wellbeing of children and families include attachment, parental resilience, social connections, holistic support, parental knowledge and child development, and social and emotional competence (Capacity Building Center for States, 2016).

Policy Priorities

To achieve the above outcomes, which are further detailed in our response to question 3, we are advocating for a greater focus on the following policy priorities:

- A preventative public health approach.
- Earlier and timely intervention.
- Universal access to evidence-based parenting programs.
- Individualised, timely and tailored family support based on need and context.
- A focus on social and emotional competencies.
- A skilled, professional workforce to delivery programs and services.
- A recognition of the importance of collaborative relationships between services and families.

Detailed response

1. Do you have any comments on the proposed structure of the strategy? (Structure)

We support an ambitious vision for children and their families in Australia and recognise that despite positive developments, there is work to be done. We are pleased to contribute to this consultation and overall support the proposed structure of the Early Years Strategy.

Principles

We believe the principles to be developed and evidence should underpin the strategy as an overarching framework. In RAV's experience, in complex dynamics systems, principles can inform a consistent approach whilst allowing flexibility for local adaptation and innovation. Current theory suggests that by following core principles, programs are well positioned on a pathway to achieving their intended results. Principles should be meaningful and represent practice values; provide guidance on how to be effective; invoke a sense of purpose; are context sensitive and adaptable to complex systems; and can be evaluated for process and results (Patton, 2010). Further information on recommended guiding principles relevant to the strategy is provided in our response to question 7.

Indicators

Population level indicators will be an important mechanism to inform the strategy and measure progress on outcomes. Quality measurement of indicators will allow for the simultaneous appropriate targeting of interventions and investment, as well as tracking of progress on key indicators and outcomes.

Measurement

Nationally, more consistent and comprehensive data measuring children's subjective wellbeing and family relationships would benefit the implementation of the Early Years Strategy. We believe that these indicators, particularly in the early years, are critical aspects of overall wellbeing and indicators of future outcomes. Examples of relevant population level indicators include Cantril's Ladder, used internationally in the Health Behaviours in School-Aged Children study by the WHO, UNICEF and the OECD.

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

An integrated approach to child wellbeing and the early years is a complex challenge beyond the capacity of any one organisation or sector. Australia ranks 35 out of 38 on child wellbeing outcomes from a group of the wealthiest OECD and EU countries (UNICEF Innocenti, 2020). As highlighted in the Discussion Paper, nearly 45% of children were developmentally at risk or vulnerable on one or more domain (Australian Early Development Census [AEDC], 2021). Particularly concerning is the inequality of outcomes for children from disadvantaged backgrounds. First Nations, rural and remote, culturally and linguistically diverse, and children with disabilities experience increased developmental vulnerability.

RAV believes that a vision for Australia's youngest children should include a focus on:

- A society that shares responsibility for child wellbeing and supports families to thrive in the early years of life.
- Universal services that are accessible and adaptable to local context and need.
- A focus on secure attachment, positive healthy family relationships, and increased social and emotional competencies.

3. What mix of outcomes are the most important to include in the strategy? (Outcomes)

In the context of a biopsychosocial model, evidence shows that parent and family relationships are the most important protective and preventative factor in the healthy development of children and young people, particularly in the early years. As such, RAV believes that it is important to include the following outcomes and indicators specifically in the strategy.

- Positive family (parent-child) relationships.
- Improved social and emotional wellbeing for parents and children.

Protective factors that reduce risk and promote healthy development and wellbeing of children and families include attachment, parental resilience, social connections, holistic support, parental knowledge and child development, and social and emotional competence (Capacity Building Center for States, 2016).

Positive Family Relationships (Supporting Evidence)

Many factors influence children's health, development and wellbeing. Parent-child and family relationships and parenting styles in the earliest years are the most important determinant of future health and wellbeing outcomes (Moore et al., 2017). Investing in developing healthy functional parent-child relationships is an investment into mitigating future behavioural problems. Family and relationship interventions in early childhood can help to avert social and emotional problems in later life (see question 4 for additional benefits of early intervention). Evidence has shown that positive parenting results in better parent-child relationships which consequently has resulting impacts on social and emotional wellbeing, and positive mental wellbeing of children.

Parents and children themselves consider positive family relationships to be the most important aspect of wellbeing (Australian Research Alliance for Children and Youth [ARACY], 2014). Globally, children with more supportive families have better emotional and mental wellbeing outcomes (UNICEF Innocenti, 2020).

Attachment theory posits that for normal social and emotional development, young children need to develop a relationship with at least one primary caregiver. Secure attachment is the capacity to connect well and securely in relationship with others. A secure attachment is aligned with enhanced developmental outcomes in later life, self-reliance, self-efficacy, empathy, and social competence (Bowlby, 1988; Goldberg, 2020). Family outcomes are maximised when child attachment is protected, and families are supported to cope in society (Bretherton, 1992).

Relationships are central to children's emotional wellbeing and attachment with a primary care giver has significant impacts on child development and future life outcomes (Benoit, 2004). Strong and supportive relationships, both inside and outside the home, can support children's mental health and wellbeing (National Children's Mental and Wellbeing Health Strategy, 2021). Parenting skills and strategies that encourage understanding and acceptance of emotions are associated with better outcomes for children and young people, including a positive preventative effect on mental health outcomes (Gottman et al., 1996; Yap et al., 2016).

Social and Emotional Wellbeing (Supporting Evidence)

Social and emotional wellbeing is fundamental to children and young people's current and future quality of life, particularly mental health (ARACY, 2014). Improving social and emotional wellbeing in early

childhood leads to better outcomes in later life and is important for overall wellbeing. Conversely, children who experience social, emotional and behavioural difficulties are at risk of developing social problems later in life, such as mental health problems (for example, depression), and externalising behaviours such as hostility, aggression and anger. Such children would benefit from early, appropriate and timely support (Hervatin & Hinkley, 2021; Toumbourou et al., 2017; Tully, 2020).

Early childhood years are foundational years for building and modelling social and emotional wellbeing, and providing children the capacity to self-regulate and manage emotions and behaviours. The period of early childhood from birth to 5 years is characterised by rapid development including in children's social, emotional and behavioural skills. This is a key foundation for health social and emotional development including the ability to deal effectively with life stressors and promoting positive mental health (Hervatin & Hinkley, 2021).

Later in life, social and emotional competency leads to stronger, healthier peer relationships, more pro-social behaviours and higher academic goals and motivation (Denham et al., 2010). Higher social and emotional competence has been shown to lead to reduced suicidality (Posamentier et al., 2023) and reduced substance abuse/misuse (Jones et al., 2015; Merrell et al., 2008; Zins & Elias, 2006).

4. What specific areas/policy priorities should be included in the strategy and why? (Policy Priorities)

To achieve the outcomes detailed in our response to question 3, we are advocating for a greater focus on the following policy priorities:

- A preventative public health approach.
- Earlier and timely intervention.
- Universal access to evidence-based parenting programs.
- Individualised, timely and tailored family support based on need and context.
- A focus on social and emotional competencies.
- A skilled, professional workforce to delivery programs and services.
- A recognition of the importance of collaborative relationships between services and families.

To reduce risk factors and increase protective factors, policies should focus on parental social and emotional competencies, healthy attachment, and an understanding of child development. Parental social and emotional competence is known protective factor for both parent and child. We have found that combining universal, evidence-based parenting programs with targeted one-on-one family support is an effective model for engaging vulnerable families at critical transition points. Universal parenting education delivered by qualified professionals facilitates engagement of vulnerable families with targeted one-on-one support by reducing stigma, building trust and relationships, and addressing the immediate needs of families. This can lead to increased engagement with evidence-based parenting programs according to the needs of families and communities and addresses the disadvantage and inequality of outcomes.

Early intervention and preventative strategies in childhood are greatly supported by childhood developmental (i.e. Gottman) and attachment theories (i.e. Piaget, Bowlby). The National Children's Mental and Wellbeing Health Strategy (2021) identifies actions that include routine evidence-based parenting programs at key developmental milestones, and emotional wellbeing modules embedded in antenatal and parenting programs.

Prevention and Early Intervention (and Why)

Family and relationship interventions in early childhood can contribute to averting the course of social and emotional problems in later life. Early intervention is a particularly important strategy for vulnerable or disadvantaged families in reducing risk factors and improving outcomes (see response to question 5). Conversely, early childhood trauma can cascade into a lifetime of negative health and wellbeing outcomes with resulting effects (Moore et al., 2017; Toumbourou et al., 2017).

Prevention and early intervention can promote family and child wellbeing by strengthening protective factors by increasing competencies and skills, and providing families with the conditions and assistance they need before problems escalate. Preventative programs, particularly when provided consistently and universally, have a wider reach, impact and higher cost-benefit outcome. Preventative programs that focus on parental social and emotional competency, healthy attachment, and an understanding of child development, provide protection for both parent and child (Crouch et al, 2018).

The effectiveness and cost-benefit of prevention and early intervention approaches is increasingly well understood. Many health and social problems have a common foundation in family and relationships (Toumbourou et al., 2017). Prevention as a strategy is particularly important during early childhood, with the opportunity to positively influence life-long health and wellbeing outcomes, and also achieving the highest rate of return (Fox, 2015; Moore et al., 2017). A preventative approach would have broader benefits into the future, including reducing mental health, addressing gender inequality and other social issues.

Mental health disorders are the largest contributor to the burden of disease and suffering in young people, and have broad ranging life impacts (ARACY, 2012). Evidence suggests that sound early investment in childhood and adolescence can prevent up to half of mental health problems in adulthood. Therefore, prevention and early intervention related to families, relationships and parenting can significantly improve mental health and other outcomes later in life including the promotion of gender equality and the prevention of family violence.

The potential value of early intervention in general has been estimated at \$5.4 billion per annum (Access Economics, 2010). Conversely, the cost to the Australian Government for late intervention with children and young people is estimated at \$15.2 billion per year (Teager et al., 2019).

Cost-benefit studies indicate that early childhood prevention and intervention programs that focus on mentoring, parenting, and attachment are more economical and effective than later treatment initiatives (Molloy et al., 2019).

Reducing wait lists for essential services such as paediatricians or occupational therapists is one of the best ways to intervene early, support child development and prevent social, emotional and behavioural difficulties and further negative consequences later in life. Families often have to wait to access specialist intervention for children in the early years, when developmental needs rapidly change and inadequate support can result in difficulties rapidly cascading into more severe negative consequences.

Evidence-Based Parenting Programs (and Why)

Parenting is a set of skills and capacities that can be improved through experiences and confidence (Vollmert et al, 2016). Parenting programs seek to enhance parental emotional intelligence and provide parents with the tools to understand parenting and their children's behaviours and emotions, as well as to manage their own stresses in parenting.

Universal parenting programs and education can strengthen parental capacity, confidence and skills. Improved parental skills and knowledge facilitates the better management of children's emotions, behaviours and development; stronger and healthier parent-child relationships and family dynamics; and

consequently, translates into positive social, emotional and behavioural outcomes, and impacts multiple aspects of children's development (Hervatin & Hinkley, 2021).

Parenting skills and strategies that encourage understanding and acceptance of emotions (such as Tuning in to Kids™) are associated with better outcomes for children and young people and have a positive preventative effect on mental health outcomes (Gottman et al., 1996; Yap et al., 2016).

The National Children's Mental and Wellbeing Health Strategy (2021) supports the promotion of parenting programs to all families at key developmental stage as a way of supporting child development.

Skilled Professional Workforce (and Why)

Programs delivered by trained professionals show the greatest chance of effecting change (Hervatin & Hinkley, 2021). Effective identification of risk factors by a practitioner is crucial in determining the choice of most effective program.

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? (Policy Priorities)

In working with vulnerable families and children, RAV has found the following to be important:

- Timely and seamless support (see our response regarding early intervention in question 4).
- Relationships between practitioners/services and families.
- Continuity of care.
- Engagement via universal services that are non-stigmatising and able to build trust.
- A systemic, integrated approach to public health.
- Addressing community and family needs with tailored and individualised support.

The social, emotional and behavioural development of children and young people can be adversely affected by growing up with experiences of family violence, disasters or traumatic events, financial difficulties, and parental mental health issues (ARACY, 2012; Tully, 2020). Comprehensive evidence has shown that, particularly for the most vulnerable families, the overall efficacy of a program should be determined by not just the program itself, but also by the delivery of the service. That is, how a service is delivered (process) is just as important as the service itself (Moore, 2015). For example, our counselling service adopts a common elements approach (see Outcomes Practice and Evidence Network, Child and Family Services) because evidence supports that the principal factors of success are technical quality, relational practice or therapeutic alliance, and practitioner qualities or practices. We also regularly review collaborative goals and outcomes with clients.

Evidence from the Centre for Child and Community Health has inspired our approach, alongside research literature which has identified practice elements, specifically relevant for vulnerable and/or disadvantaged families. Regardless of content, effective programs should:

- be relationship-based.
- involve a partnership between practitioner and families.
- include target goals identified by parents.
- provide choice.
- build parental competencies.
- be non-stigmatising.
- demonstrate cultural awareness and sensitivity.
- maintain continuity of care.

As discussed, RAV's 'early matters' service successfully engages vulnerable families by delivering universal parenting education sessions integrated within antenatal and post-natal programs. By building trust and providing a continuity of care, 'early matters' families often transition to access parenting programs and/or family support and to working on collaborative family goals. Targeted one-on-one family support that is delivered by qualified professionals that focuses on a family's identified needs can engage vulnerable families, and address disadvantage and inequality of outcomes according to the needs of families and communities.

There is evidence family and relationship services can provide children and families who are at risk of potential social and health problems with overarching protective factors (secure attachment and support), and teach social and emotional competencies, through parenting programs or one-on-one support (Toumbourou et al., 2017). This is the focus of our 'early matters' service.

Interventions that are timely, holistic, and community- and family-centred ensure that reach of universal messaging is maximised, and that there is potential to build connection and encourage access of parenting programs and one-on-one support.

RAV also believes that to be most effective at engaging vulnerable families, approaches should be:

- systematic
- integrated
- using a public health approach to child wellbeing.
- incorporate universal services involving targeted and tailored support.
- non-stigmatising

An example of such an approach is the delivery of programs within the 'early matters' service through maternal child health nurse and antenatal education programs.

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

RAV believes that the following policies and/or strategies could improve coordination and collaboration:

- A systematic, integrated approach.
- Funding models that promote and support collaboration.
- A shared focus on improving family outcomes.
- A long-term, sustainable approach.
- Engagement of communities and families.
- Valuing relationships and continuity of care

We require 'systems change' to address the structural, service system, and social barriers influencing child and families outcomes. An integrated approach to child wellbeing and the early years is a complex challenge beyond the capacity of any one organisation or sector. It requires coordinated efforts across multiple levels, and the integration of policies across all levels of government to address early childhood outcomes (UNICEF Innocenti, 2020). Complex and intersectoral issues require long-term, multipronged investment. Having a strong Theory of Change that is informed by existing and emerging evidence should guide investment. The importance of collaboration, community, and relationships in achieving positive outcomes for families also needs to be recognised. Communities should be empowered and consulted to improve outcomes.

Collaboration can be promoted through supportive funding models. Coordination can be supported by the integration of prevention and early intervention services within universal services, to increase access to and equity of service delivery. For example, parenting programs and education that promote social and emotional competencies should be integrated into universal services such as maternal and child health services and antenatal support.

The Early Years Strategy should encourage intersectoral collaboration. Collaboration can be promoted through supportive funding models. Programs and services that address shared goals and outcomes can be encouraged to collaborate instead of competing through supportive funding arrangements. Place-based approaches are a response to complex social problems. They specifically aim to engage vulnerable families by designing systems that are flexible and responsive to family and community needs. Common elements of place-based approaches that are particularly relevant to the Early Years Strategy include collaboration across multiple stakeholders and sectors; a focus on long-term sustained and systemic outcomes for families; a shared common goal; a holistic approach; community consultation and engagement; data-drive decision making; and adaptation to specific contexts. These principles can also be applied without a specific geographic focus, as with for example, some collective impact models.

7. What principles should be included in the strategy? (Principles)

The following principles are important for the Early Years Strategy:

- **Community and family-centred:** Services using this approach are delivered with consideration of the community and family context, to allow collaborative shared decisions about goals and activities. Core principles of a family-centred approach include focusing on family strengths, respecting family diversity and values, encouraging family decision making and empowerment, communicating with families in an open and collaborative fashion, adopting a flexible approach to service provision, and recognising the value of informal support systems.
- **Culturally responsive:** This approach takes into account the social, political and diversity of culture and how it influences an individual's experience of healthcare and social services. This is an ongoing process, requiring cultural sensitivity, regular self-reflection, and proactive responses to the child and family with whom the interaction is occurring. Practitioners consider social and cultural factors in managing therapeutic encounters with clients from different cultural and social backgrounds.
- **Early intervention:** An approach of timely, early intervention for those in need, that addresses the impacts of trauma and social determinants. Families and children, in particular, should be supported as early as possible, before their mental health is negatively affected.
- **Evidence-informed:** An evidence-informed approach that integrates best-practice, continuous feedback, research and data with practitioner experience in the context of client needs and preferences. It involves the collection of routine feedback and evaluation data to improve decision-making and effectiveness.
- **Holistic:** A socio-ecological approach to holistically meet the needs of families and individuals by taking the client context and need into account.
- **Prevention-focused:** A population level universal and targeted prevention approach that promotes social and emotional competencies and mental wellbeing.
- **Relational:** An approach that is based on the principles and practices of engagement and responsiveness, both at the individual and community level. It recognises the importance of the therapeutic alliance in the delivery of child and family services.
- **Strengths-based:** A collaborative approach between the client and the service supporting them, that allows them to work together to determine an outcome that draws on the client's strengths

and self-determination. It builds on the positive resources and abilities that children, families and communities have, and views clients as resourceful and resilient.

8. Are there gaps in existing frameworks or other research or evidence that need to be considered for the development of the strategy? (Evidence-based approach)

RAV supports a preventative public health model, as well as the application of a biopsychosocial or ecological systems theory approach, and believe that these are relevant and appropriate in addressing child wellbeing. Our submission highlights the opportunity for increased universal primary prevention and early intervention in supporting families in the early years. Addressing wellbeing in the early years will require systems change, and a whole of government and community response.

The ARACY Nest Framework is inclusive of our aims, with a focus on the 'being loved and safe' domain for child and youth wellbeing. In particular, we support the focus on positive family relationships, and connections with others and secure attachments. However, given the supporting evidence, we believe a stronger focus specifically on social and emotional wellbeing is crucial to the success of the strategy.

Recent emerging evidence should inform efforts to frame the early years as a social issue, and change policy and practice to better support young children and their families. The recommendations include framing the narrative as health and wellbeing related, affecting all Australians now and into the future. Disadvantage or inequity will undermine progress and development for the health and wellbeing of all children, therefore we need to universally support all families (Kendall-Taylor et al., 2023).

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