

# Early Years Strategy Submission



## Introduction

The Victorian Aboriginal Community Controlled Health Organisation (VACCHO) welcomes the Early Years Strategy consultation, acknowledging the first five years of a child's life as the most influential for long-term health and wellbeing outcomes. The health and development of children in this period seen as a major indicator of long-term health and wellbeing, and children from low socioeconomic backgrounds are at a significant risk of adverse childhood experiences during this period. VACCHO is a Victorian organisation, this submission will speak to the needs and experiences of Aboriginal Victorians.

## About VACCHO

VACCHO is the peak body for Aboriginal health and wellbeing in Victoria, with 32 Aboriginal Community Controlled Organisations (ACCOs or ACCHOs) as Members. VACCHO Members support Aboriginal and Torres Strait Islander people across Victoria and combined, are the largest employers of Aboriginal people in the state. VACCHO builds the capacity of its Members by strengthening support networks and increasing workforce development opportunities - and we are the leading voice on issues affecting Aboriginal health and wellness in Victoria. We advocate for our Members and Aboriginal community at the state and national levels on all issues related to Aboriginal health and wellbeing.

## Language

The term 'Aboriginal' in VACCHO documents is inclusive of Torres Strait Islander peoples and 'Aboriginal Victoria' includes all Aboriginal people living in Victoria. The terms 'Community' or 'Communities' in this document refers to all Aboriginal and/or Torres Strait Islander communities across Australia, representing a wide diversity of cultures, traditions, and experiences. Community is always capitalised unless it has the word Aboriginal in front of it or if it's referencing a non-Aboriginal community.

## Summary

An Aboriginal child has the right to grow up surrounded by their Community and Culture, with close ties to their Kin and Country, while also experiencing the best possible health and wellbeing outcomes. This is stated in the United Nations Declaration of the Rights of Indigenous Peoples (UNDRIP). These health outcomes must be equitable to those experienced by non-Aboriginal children. Colonisation, the Stolen Generations and the racism entrenched within Australia's service system and broader population continue to have devastating impacts on Community. The strength of Community, Culture and Kinship and its survival must be acknowledged.

There are several important issues facing young Aboriginal children across Australia today. Many of these are systemic, including racism experienced within the mainstream healthcare sector, culturally inaccessible support services and the overrepresentation of Aboriginal children in out-of-home care. These systems and their flaws must be addressed in by the Commonwealth in partnership with Aboriginal voices.

This submission aims to respond to the questions posed by the discussion paper, highlighting that the answers to these often lie within Aboriginal hands. There is already ground-breaking work being done by Aboriginal Community Controlled Organisations (ACCOs) across Victoria, and the positive



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outcomes that result from these can only continue with appropriate funding and policies that support self-determined choices and services.

## *Key recommendations:*

- Include the principles of self-determination, accountability, anti-racism and prevention throughout the Strategy
- Embed Social and Emotional Wellbeing and the cultural determinants of health as unignorable factors of health for all Aboriginal children
- Acknowledge racism as a barrier to good health. The discussion paper is silent on the topic of racism; we know that Community continue to experience systemic and individual racism, and our young children continue to feel the impacts of longstanding, racist systems to this day
- Mandate cultural safety training for all healthcare staff, with training led by third-party Aboriginal organisations
- A dedicated, reliable and consistent funding model to ensure ACCOs are appropriately resourced to provide holistic supports to children and families.
- Create single client data systems to reduce duplication and ensure Aboriginal families have access to wraparound service delivery
- Invest in Aboriginal-led universal and early help child and family services to reduce the number of Aboriginal children in care and ensure Child Protection services align with the Aboriginal Child Placement principle.
- Align with Closing The Gap's priorities relating to Early Years
- Align with Social and Emotional Wellbeing (SEWB) frameworks, the Victorian 'Mana-na woorn-tyeen maar-takoort - The Victorian Aboriginal Housing and Homelessness Framework', the Inquiry into Children Affected by Parental Incarceration and The National Aboriginal and Torres Strait Islander Early Childhood Strategy

## *The Aboriginal concepts of Health and Healing*

For Aboriginal people, good health and wellbeing is more than the absence of disease or illness; it is a holistic concept that includes physical, social, emotional, cultural, spiritual and ecological wellbeing, for both the individual and the community.

Many Aboriginal people continue to experience significantly poorer health and wellbeing outcomes than non-Aboriginal Victorians. These inequities must be seen within a broader socio-political context that includes colonisation, systemic racism, assimilation and forced removal of people from their families and lands. Indeed, the ongoing act of colonisation and forced separation of Aboriginal people from family, Community and country is increasingly being recognised as a factor in understanding Aboriginal health and wellbeing (Axelsson et al., 2016).

These determinants of health and wellbeing are defined as:



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- Social determinants - the impact of poverty, unemployment, housing, educational attainment, and racial discrimination
- Cultural determinants – connection to family, kinship, Community, culture, Country, spirituality, and ancestors
- Historical determinants - the historical context of colonisation and its ongoing impacts. The impact of past government policies and the extent of historical oppression and cultural displacement
- Political determinants - the unresolved issues of land rights, control of resources, cultural security, and the rights of self-determination and sovereignty

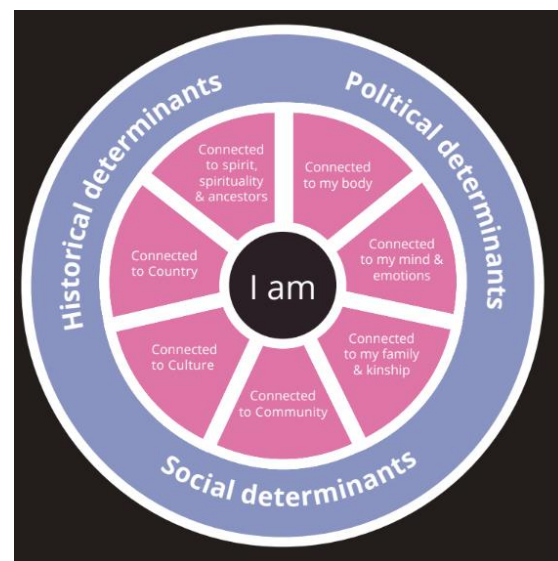


Figure 1. Aboriginal social and emotional wellbeing model ('SEWB wheel') adapted by the Balit Durn Durn Centre from Gee, Dudgeon, Shultz, Hart and Kelly, 2013

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#### Comments on the proposed structure of the Strategy

VACCHO agrees with the proposed structure of the Strategy but believes there are areas that need expansion and clarity to ensure efficiency and positive outcomes. There must be at least one policy priority specifically related to Aboriginal children.

**The discussion paper has omitted any mention of racism**, either systemic or individual; systemic racism experienced by Community in the mainstream health system continues to impact the health and wellbeing of Aboriginal people. This oversight must be rectified, and anti-racism needs to be included throughout the Strategy to ensure cultural safety.

**Accountability** must be integrated into the proposed structure with a clear and transparent framework. This must be reciprocal – the Government must report on its own accountability, outcomes and commitments to key stakeholders, just as funded stakeholders must provide reports back to the funding body. Accountability could be included as part of the 'Outcomes and Evaluation' framework, but this needs focus and meaningful indicators for Government at all levels.

**Collaboration** needs to be a key focus point for the Strategy, with an understanding of the delineations between State/Territory and Federal responsibilities and rights. This will be integral for determining the success (or otherwise) of the Strategy. How will Aboriginal voices be heard throughout the Strategy? How will partnerships be orchestrated and governed?

**Aboriginal self-determination** must be a core principle throughout any strategy relating to or working with Aboriginal people. Self-determination acknowledges that Aboriginal people and their Communities are best placed to understand and respond to issues that affect their lives. They must have meaningful and genuine control over decision-making for their own selves (VEOHRC, 2022).



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

■■■■ spends her first 280 days (give or take) safely inside her mother's womb. Her mother dreamt of her before she was conceived, and she is deeply wanted. There are no medical conditions, pregnancy complications, poverty or violence to impact her growth and development.

She is born at full term, and because she is not preterm, her risk of chronic disease is less. There was no intervention at her birth to cause injury, damage or pain. She has 10 fingers, 10 toes and all of the right parts. She knows her country, culture and community from her first breath and is celebrated at a welcome boorai to country ceremony. She has a long breastfeeding relationship with her mum, which is protective for T2DM and obesity, and her first food transition is balanced and culturally appropriate.

There are no smokers in her life, reducing her risk of SUDI/SIDS (sudden unexplained death in infancy). She is surrounded by Community who support her parents and help her brain grow and develop, strong in culture. By the time ■■■■ is 2 years old, she is talking, walking, climbing, jumping and learning with her cousins, community and friends.

■■■■ and her parents attend parenting yarning circles, and she is on track in all of her key age and stage developments. She is enrolled and engaged with 3- and 4-year-old kinder, hitting all of her milestones without any speech or hearing concerns. If any delays are identified, she is engaged with an appropriate ACCO to provide early interventional support and she and her family are supported through the process.

■■■■ is school-ready by the time she transitions into Prep and is on track in all 5 AEDC domains. She is eager to attend school, makes friends easily and continues to learn, grow and develop with her own agency and connection to culture.'

This is VACCHO's vision for all Aboriginal boorai: a secure, culturally connected childhood, enriched by their kin and protected by the family and the services that support them.

VACCHO's vision for Aboriginal and Torres Strait Islander children starts with babies wrapped in culture, developing and maintaining their personal and cultural identity and strong connections to their community. Children are a part of their family, kinship and community, with their own voice. They deserve to live in a society that values their identity, with experiences free from racism and discrimination, surrounded by inclusive and culturally specific services and opportunities.

All Aboriginal children have the right to a bright, healthy and powerful future — a future that is shaped by their own aspirations and potential, rather than entrenched disadvantage and low expectations. These rights are enshrined in the United Nations Convention on the Rights of the Child. Australia ratified the convention in December 1990 (AHRC, 2023) and we have a shared responsibility to ensure all children in Australia enjoy these inalienable rights.

Connection to country, culture and kinship is deeply entrenched in the wellbeing of all Aboriginal people, and the strength of these connections for both parents and children are intertwined with an Aboriginal child's development, growth and health outcomes. Ongoing colonialism and the Stolen Generations continue to negatively impact the lives of Aboriginal people.



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**VACCHO strongly recommends the inclusion of at least one specific outcome focussed on Aboriginal children. Aboriginal children must be connected to culture and raised in safe, secure and healthy Aboriginal families.**

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

- All Aboriginal families have access to quality, culturally safe universal and targeted services that identify and understand the strength of the culture and kinship systems embedded in Community. They have a stable, safe and suitable place to live and raise their children, in an environment free from violence and abuse.

Families and care systems are integral to the health and wellbeing of children. As such, it is important that an Early Years strategy embeds family and parenting supports into its outcomes and priority areas. Intergenerational trauma continues to heavily impact the social and emotional wellbeing of Aboriginal people, contributing to the prevalence of mental ill health, substance misuse and suicidality seen in Community. The Early Years strategy must prioritise the need for culturally safe healing centres, detoxification programs and Aboriginal-led mental health support services as integral to the health of children.

- All children are born healthy, at term, without poverty, violence or other disadvantage

In 2020, 10.9% of Aboriginal Victorian babies were born with a low birth weight, compared to 6.5% of the general population, and 13.4% of Aboriginal births were pre-term, compared to 7.8% of the general population (CCOPMM, 2020).

- All Aboriginal children and families have access to culturally appropriate prenatal and maternity services

Koori Maternity Services (KMS) is a program funded to provide continuous care, health promotion and pregnancy support to Aboriginal mothers and children in a culturally safe and appropriate setting. This program has had significant success in engaging with mothers of Aboriginal children, providing a range of services from early pregnancy into infancy with a culturally appropriate service delivery and being led by Aboriginal midwives.

In response to the lack of culturally safe care and resulting poorer health outcomes for Aboriginal mothers and children, the Mater Health Service, the Institute for Urban Indigenous Health and the Aboriginal and Torres Strait Islander Community Health Service Brisbane, partnered up to develop a best-practice Birthing in Our Community program (BiOC). BiOC required culturally competent service delivery, and provided outreach, transport, flexible services and community-based sessions, allowing time to build rapport and trust. Using a holistic view of health, the program focused on the social, cultural, biomedical and community needs, and created safe spaces for women to birth and care for their infants on Country. Importantly, it also continued care for the first year of the infant's life.

A study of the program over 5 years found that there was a 38% reduction in preterm births, lowered caesarean section births, lowered third stage labour interventions and an increase in antenatal engagement. It also increased the number of mothers successfully breastfeeding at the point of closure. This program is a clear example of the positive outcomes associated with putting Aboriginal health into Aboriginal hands (Hickey, S. et al, 2018).

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A successful pilot implemented in the Glenelg Shire in Victoria explored the role of integrated, culturally strong holistic child and maternal support for Aboriginal families. Prior to the study, 38% of Aboriginal children in the area were in out of home care; this was reduced to under 5% in the second year of the program.

Almost all children participating received allied health referrals to a range of services, including speech pathology, dentistry, audiology and ophthalmology, and 100% of children were engaged with early childhood education. This was double the state average at the time. Breastfeeding uptake improved from 67% to 100% three years into the pilot, and the rate at six months old increased from 17% to 76%. Immunization rates increased 13%, up to 97%, four years in.

Results from this pilot show how transformational the work of holistic, people-centered and culturally informed practice can be, not just for preserving family and kinship, but also for the long-term health outcomes for Community (Austin & Arabena, 2021).

- Aboriginal children are connected to culture, community and kin

Connection to culture, community and kin are integral for the social and emotional wellbeing of all Aboriginal people, and especially throughout the key developmental stages of early childhood. The overrepresentation of Aboriginal children in out-of-home care is a symptom of a system that does not recognize or respect the importance and strength of kinship systems and non-Westernised parenting, and the lack of culturally appropriate foster homes further damages the harm caused by the original removal, as well as the ongoing impacts of intergenerational trauma.

- Aboriginal overrepresentation in out-of-home care and child protection is reduced

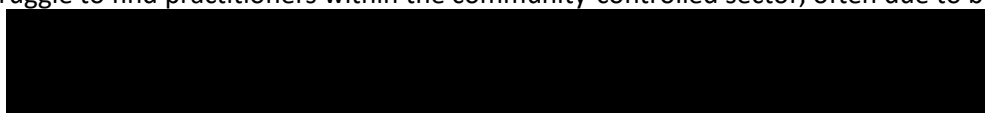
VACCHO welcomes the acknowledgement in the discussion paper that there is not one correct way to raise a child. Unfortunately, this is not reflected in numerous governmental processes and policies. Longstanding racist stereotypes towards Aboriginal parenting has resulted in thousands of Aboriginal children being removed from their families, culture, and community. The Strategy should include the provision of culturally appropriate parenting supports and ongoing enhanced parenting support as early prevention, rather than late-term intervention.

Only 39% of Aboriginal children in OOHC are being cared for by Aboriginal kin, and less than 43% are on orders contracted by ACCOs (only 6.9% of Aboriginal children on protection orders are under the direct authority of an ACCO). This is unacceptable and must be rectified through both Commonwealth and Victorian Government policies, aligning service delivery with the Aboriginal Child Placement principles.

There is a great discrepancy between funding for early intervention and prevention services across State governments. Victorian ACCOs received \$2.65 million for early intervention and \$500,000 for prevention services in the 2021-2022 financial year; Queensland services received \$42 million in the same period.

- Aboriginal children have access to culturally appropriate healthcare at a standard equitable to non-Aboriginal children

All children must have access to quality healthcare from the moment they are conceived. Many ACCOs struggle to find practitioners within the community-controlled sector, often due to budget or



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geographical distance. For young Aboriginal children, this can mean missing out on important early intervention supports, assessments and diagnoses needed to support them into their later lives.

- School readiness improves for Aboriginal children, in line with the Closing the Gap targets

School-readiness is fundamentally a health issue, and only 34.3% of Aboriginal children were assessed as being developmentally on track in all five domains in 2021 (AEDC, 2021), compared to 57.7% of other Victorian children. This is highlighted by Closing the Gap as one of their regressing targets and should be an area of great concern (Productivity Commission, 2022).

- Nutritional education and access improves for all families

Families and caregivers having a better understanding of the impacts and importance of nutrition is imperative to support the health of young children. Poor nutrition can have serious consequences for the health of children from preconception onwards, and VACCHO believes that more should be done to promote healthy eating and nutrition during pregnancy and throughout a child's life. Nutritional education should include breastfeeding: breastfeeding is recommended up to 6 months of age, however, only 48% of Aboriginal mothers in Victoria breastfeed up until 6 months of age in line with WHO advice (Springhall et al, 2023).

[What specific areas/policy priorities should be included and why?](#)

VACCHO supports the priorities identified in the discussion paper as important areas for policy growth and development. There are, however, gaps in policy that specifically support the unique needs of Aboriginal children. ACCOs are already providing incredible, directed work to support Aboriginal children and families, and VACCHO strongly advocates for ACCOs to be provided with the resources to build upon these programs and expand to support a wider cohort of Community.

**Self-determination must be an integral part of any policies developed through the Strategy.**

Specific implementation priorities to consider:

- **Expansion of the Koori Maternity Services in line with population growth** to ensure that every Aboriginal mother and child has access to culturally appropriate antenatal and postnatal health care (including age and stage checks for all Aboriginal children up to five years).
- **Implement a dedicated, reliable and consistent funding model** to ensure ACCOs are appropriately resourced to provide holistic support to Aboriginal children and families.
- **Prioritise data access for ACCOs** to prevent doubling up on collection and the risk of children and families being missed across mainstream and Community-controlled health systems.
- **Reduce the overrepresentation of Aboriginal children in Out-Of-Home Care** by acknowledging the racism prevalent in current processes and policies, and require that every Aboriginal child must be placed in culturally appropriate care, aligning service delivery with the Aboriginal Child Placement principles.
- **Embed Social and Emotional Wellbeing and the cultural determinants of health** as unignorable factors of health for all.
- **Invest in a dedicated and identified Aboriginal workforce**, with specialist skills and training relevant to the sector, with wage parity.



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- **Co-ordinate the approach to funding and implementation** to ensure the previous model of siloed systems is not repeated.
- **Mandate cultural safety training for all staff and integrate that practice in their models of care.**

The National Aboriginal and Torres Strait Islander Early Childhood Strategy must be implemented and funded in full. There has already been an enormous amount of consultation, workshopping and development to create a holistic and consolidated approach to Aboriginal early years that should be adhered to.

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

- Work closely with and listen to Aboriginal leaders and organisations to ensure any Strategy is culturally safe and responsive

The National Aboriginal and Torres Strait Islander Early Childhood Strategy has been consulted on by Aboriginal organisations and experts. The discussion paper also highlights Connected Beginnings as an example of a successful program; many ACCOs such as Bubup Wilam in Naarm (Melbourne) are already providing successful, responsive and accessible services that should be looked to as leaders in the area.

- Implement the recommendations put forward by the Inquiry into Children Affected by Parental Incarceration

Aboriginal people are overrepresented in prison populations (ABS, 2022); children with a parent in prison suffer ongoing trauma, isolation, shame and guilt by association. The long-term health, development and wellbeing of infants and young children is significantly impacted by maternal separation due to incarceration (Legal and Social Issues Committee, 2022). While there are programs such as 'Living with Mum' at Dame Phyllis Frost Centre and Tarrengower Prison, the Inquiry found difficulties in access for Aboriginal women.

- Work with ACCOs to support NDIS reform and improve access to interventional therapies

Approximately 17% of Aboriginal people are living with a profound or significant disability (ABS, 2017). 2022 NDIA reporting shows that only 9.1% of NDIS participants identify as Aboriginal, meaning that up to 37,655 eligible Community members are going without the support they need (NDIS, 2022). The Early Childhood Approach (ECA) has strong foundations but large gaps, especially regarding the lack of funding for assessments and culturally appropriate allied therapy providers. ACCOs must be funded to provide therapeutic services such as speech therapy, occupational therapy, psychology and more to reach the vulnerable Community members living with disability.

- Increase welfare payments for families living in poverty

In Victoria, 50% of Aboriginal people experience extreme to moderate poverty. This heavily impacts housing stability, food security and long-term health outcomes. In the 2016 census, 31% of the Aboriginal population lived below the poverty line (Markham & Biddle, 2017). Families must be supported with an increase to welfare payments in line with the cost of living and the Consumer Price Index.





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

It is important that the Strategy at the Commonwealth level aligns and complements what is happening in other jurisdictions. There is a need to map key strategies and recommendations that focus on the early years at the jurisdiction level to limit duplication, create efficiencies and target focus for greater impact. Alignment and strategic mapping is required to strengthen the impact of the Strategy; it will also help support services with their advocacy work and reporting requirements.

What principles should be included in the strategy?

Alignment with the relevant Closing the Gap priority reforms should guide the principles included in the Strategy.

**Self-determination:** Self-determination acknowledges that Aboriginal people and their Communities are best placed to understand and respond to issues that affect their lives. Genuine decision-making power and meaningful control over choices that impact Aboriginal lives must be given to Aboriginal people. Self-determination is also included in the UNDRIP.

**Anti-racism:** Aboriginal people are still experiencing racism at the hands of service providers, systems and other Australians. This Strategy must work to not only prevent further racism, but implement changes that undo previous harmful decisions and allow Aboriginal people the right to self-determined outcomes.

**Prevention:** Prevention programs across the health, wellbeing, and family services sectors run by ACCOs have proven to be successful in supporting strong and healthy communities, reducing the number of children and young people in out-of-home care, stemming entrance into the justice system, and ensuring that the mental health and wellbeing of communities is supported and fostered. These models must be re-funded to ensure their ongoing benefit to Community.

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

[VACCHO's Balit Durn Durn Report](#) - Social and Emotional Wellbeing (SEWB)

VACCHO has published the Balit Durn Durn report in support of the Mental Health Royal Commission (2021), providing an overview of Aboriginal Communities' experience with the current mental health system and offers self-determined solutions for long-term positive outcomes.

[Culture and Kinship evaluation report](#)

In 2021-22, VACCHO piloted the Culture + Kinship program, an initiative that specifically funded ACCOs to self-determine the design and implementation of programs aiming to increase connection to culture, kinship, Community, and Country. Connection to culture has powerful protective properties that help to safeguard Aboriginal peoples against harms. An independent and internationally assured [Social Return on Investment \(SROI\) analysis of the Culture + Kinship](#) pilot found that \$8.28 of social return was generated for every \$1.00 invested.

[Mana-na woorn-tyeen maar-takoort](#) - The Victorian Aboriginal Housing and Homelessness Framework



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The Australian Housing and Urban Research Institute has found that secure housing gives people a sense of certainty and control that improves the mental health of parents and family stability. The Commonwealth government should work with the Victorian government to implement the Framework, a key priority of which is to build 27,000 homes for Aboriginal Victorians.

## [Food Policies for Aboriginal and Torres Strait Islander Health](#) (FoodPATH)

In 2009, VACCHO launched the [Victorian Aboriginal Nutrition and Physical Activity Strategy](#) which outlined key actions to improve nutrition for Victorian Aboriginal communities. Almost 15 years later, food insecurity, diet-related chronic disease and the nutrition gap have continued to grow, prompting VACCHO to partner with Deakin University and several Member ACCOs to develop the FoodPATH report.

## [Australian Breastfeeding Association’s Call to Action](#)

VACCHO have signed on as a supporter to Australian Breastfeeding Association’s Call to Action for the Australian Government to protect, support, and promote breastfeeding and strongly encourages the Strategy to take into consideration ABA’s recommendations and ongoing work.

## [First 1000 Days Australia](#)

The First 1000 Days Australia is a groundbreaking First Nations model aimed at strengthening all families to give children the best start in life. The First 1000 Days should be heavily consulted in developing the Strategy and all family-facing programs created as a result.

## [RISE Framework](#)

VACCHO recommends using the RISE Framework (figure 2), developed by the Molly Wardaguga Research Centre, to transform maternity systems and services that will enable Aboriginal people to exit poverty and improve their wellbeing.

Figure 2. The RISE Framework model. (Kildea, 2019)

	Current care PHASE 0	PHASE 1	PHASE 2	PHASE 3	Best practice PHASE 4
<b>R</b>	<b>EDESIGN HEALTH SERVICE</b>				
	Routine care in community or hospital	Specific First Nations antenatal/postnatal programs	Continuity of midwifery care and First Nations workers (e.g.djakamirr) adapted for remote	Integrated (primary and tertiary), community-based continuity of midwifery (adapted for women leaving for birth) and wrap around holistic services	Integrated Service/ Hub/ Birth Centre Choice of birthplace
<b>I</b>	<b>INVEST IN THE WORKFORCE</b>				
	No First Nations identified positions Workforce with limited cultural understanding	Identified positions Cultural capabilities training	Career pathways and support for First Nations staff Measures of organisational progress of cultural capability	First Nations workforce pipeline Comprehensive mentoring and support New minimum standards for culturally safe workforce	Culturally and clinically capable (exceptional) workforce
<b>S</b>	<b>TRENGTHEN FAMILIES</b>				
	Ad hoc or non-First Nations antenatal/parenting programs	Formal strategies to engage families in maternal and infant health programs	Wellbeing framework to strengthen family capacity	Community developed cultural strengthening antenatal and parenting programs	Strong resilient families
<b>E</b>	<b>MBED COMMUNITY ENGAGEMENT, GOVERNANCE &amp; CONTROL</b>				
	No First Nations engagement strategy	Multi stakeholder engagement e.g. Community Consultation	Formal system of governance e.g. Advisory Group	Transformative and strategic governance e.g., Steering Committee	First Nations ownership

## [Children’s Ground](#)

The Children’s Ground Approach is a 25-year strategy focusing on prevention, early intervention and empowerment for Aboriginal children. VACCHO recommends that the Commonwealth seeks input from Children’s Ground in developing its collaboration, intervention and cultural connection throughout the Early Years Strategy.



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## Conclusion

VACCHO welcomes the strategy in its strength-based and public health model approach, prioritising universal services and prevention to uphold a children's rights to a safe, secure, healthy, and happy childhood with every opportunity to thrive. There are, however, areas where we believe more could be done to support our Community to prosper and build upon the strengths already found within Community.

Accountability frameworks will be essential to ensure that all stakeholders are working to achieve the goals and outcomes put forward by the Strategy. This includes accountability by all levels of Government and funding bodies, as well as those being funded.

Our families must be supported to raise their children surrounded by Culture, Community and Kinship. As highlighted in the paper, there is no one right way to raise a child, and this must be reflected in changes to the Child Protection system. Aboriginal children must remain within culturally appropriate care arrangements to prevent disconnection and the lifelong trauma that can create. Racism is still entrenched in our social and health systems and must be addressed with commitment from all levels of government.

In recognition of the strategies' acknowledgement that "Aboriginal and Torres Strait Islander children have the right to thrive and to grow up healthy, supported by strong families and proud in culture" the Commonwealth government, in collaboration with Aboriginal organisations, should mandate a minimum annual investment in ACCOs to provide universal and early help/intervention child and family services.

VACCHO suggests that this investment strategy be proportional to the overrepresentation of Aboriginal children in out of home care, meet the obligations of State and Commonwealth governments to the rights of Aboriginal children, and take meaningful action to meet the Closing the Gap commitment to reduce the number of Aboriginal children in care by 45% by 2031.

Precedent has been set for a target of 20-30% of the overall child and families budget to go to ACCOs to provide these services. VACCHO recommends this Strategy works in consultation with ACCOs and state jurisdictions to finalise a 10 year investment strategy in Aboriginal child and family services aimed at strengthening Aboriginal families and preventing childhood adversity.

Intergenerational trauma continues to have negative impacts on Community, and the Strategy needs to take the wellbeing of parents and carers into account. ACCOs and Aboriginal-led programs continue to prove the most effective in harm prevention, recovery and positive health outcomes, and must be funded and supported to continue their work.

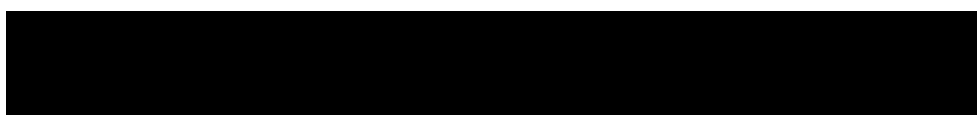
Multiple Strategies and frameworks have already been developed with in-depth consultation from Aboriginal voices. We do not need further consultations - Community needs action on the work we have already done.

VACCHO looks forward to seeing the real outcomes that result from these submissions.



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# Early Years Strategy Submission

