

Australian Government Department of Social Services – The Early Years Strategy

Wyndham City submission to Discussion Paper February 2023



Thank you for the opportunity to submit a response to the discussion paper released on *The Early Years Strategy*.

This submission provides feedback on the following six key areas of focus set out in the discussion paper:

- the proposed structure of Early Years Strategy (the Strategy)
- vision to describe how we want the next generation of Australians to experience their first five years of life
- identification of outcomes to support the early years
- identification of specific areas (policy priorities) where the Government should focus its efforts
- a set of principles being developed to guide policy and implementation under the Strategy
- evidence-based approach to guide policy and practice for the early years.

This submission aligns with Council's commitments to support health and wellbeing outcomes for children in their early years. The commitment is referenced in the following key Council documents:

- Wyndham 2040 Community Vision¹
 - Our community has the infrastructure and services it needs to support holistic health and wellbeing for all.
 - Everyone is able to access services for health and wellbeing, and these are delivered to a high standard.
- Wyndham City Council Plan 2021-2025²
 - Council will:
 - Provide high-quality, equitable and accessible services and community facilities that cater for all ages and life stages.
 - Advocate and plan for increased investment in health and support services to improve the wellbeing outcomes of all residents.
 - Ensure the needs of the community are well represented through effective advocacy and strong collaborative partnerships with key stakeholder and all levels of Government.
- Wyndham Municipal Public Health and Wellbeing Plan 2021-2025³

¹ www.wyndham.vic.gov.au/about-council/your-council/integrated-strategic-planning-and-reporting-framework/wyndham-2040

 $^{^2\} www.wyndham.vic.gov.au/sites/default/files/2022-07/Wyndham\%20City\%20Council\%20Plan\%202021-25-Jul2022-REV.pdf$

 $^{^3\} www.wyndham.vic.gov.au/about-council/your-council/integrated-strategic-planning-and-reporting-framework/wyndham-municipal$

- Priority 4 Accessible Services We can access safe and culturally appropriate services
- Living your best life in Wyndham A lifecourse framework to support our community through all of life's stages (Lifecourse Framework)⁴
 - Wyndham families have access to services that support the capacity of the family through a range of targeted and integrated programs that respond to local community needs.

The submission was developed in consultation with staff working with early years children and their families in the Community Support Department.

Please contact	
	if you require further information on any
aspect of this submission.	
Kind regards,	

Wyndham City

⁴ www.wyndham.vic.gov.au/sites/default/files/2023-01/Lifecourse%20Framework%20%20External%20Document%20-%20FINAL%20-%20ADOPTED%202022-09.pdf

In Victoria, local government has a statutory role in planning for its communities. The Victorian State—Local Government Agreement, signed between the Victorian Government and the Municipal Association of Victoria, guides state—local government relations. It acknowledges the key role of local government in improving coordination and strategic planning of government services at the local level⁵. Wyndham City Council has a role as a direct service provider and as a facilitator to connect people to our various service delivery partners in order to meet the needs of our diverse community. Council's roles across the early years sector focuses around five principal areas:

- Planning and coordination acting as a key coordination point and community planner in early years
- Service provision delivering a range of early years programs, activities, and initiatives
- Facility planning planning, providing, and maintaining a range of early years infrastructure
- Advocacy lobbying and advocating to state and federal governments and other key stakeholders on behalf of early years programs, young children, and their families
- Strengthening community capacity facilitating community connections and community participation in decision-making, including vulnerable families⁶.

Many council roles (strategic coordination, partnerships and brokerage, advocacy, capacity-building, research and engagement, information dissemination, funding and grants, compliance, service delivery) and outcomes outlined in the *Lifecourse Framework* and *Municipal Public Health and Wellbeing Plan 2021-25* apply.

Council's response to the eight lines of inquiry follows:

⁵ www.education.vic.gov.au/Documents/childhood/providers/edcare/EYMPolicyFramework.pdf

⁶ www.mav.asn.au/__data/assets/pdf_file/0004/21694/MAV-Resource-Guide-to-Municipal-Early-Years-Planning-Jun-2022.pdf

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

The proposed structure should articulate approaches adopted and clearly articulate roles and responsibilities of all levels of government. For example:

Lifecourse and family centred approach

A lifecourse approach emphasises the social perspective by considering wellbeing and access to education across a person's life. It recognises that past and present experiences are shaped by the wider social, economic and cultural context.

Considering priorities over the lifecourse with a family centred approach, broadens the criteria in which health community services are planned and delivered, ensuring greater integration by incorporating transitional life points. Rather than a life stages approach (predominantly age cohort based), lifecourse planning ensures that individuals and families have continuous consideration and can navigate difficult life transitions. This approach also requires that we are mindful of the changing needs of children, young people and their families along the lifecourse – from birth, through the early years, middle years and youth, adolescence and young adulthood. The changing needs and experiences of the family can be described as a continuum of development beginning with antenatal care and infancy.

Intersectional approach

An intersectional approach understands that tackling disadvantage in one group may not address discrimination and marginalisation experienced by all other groups equally. Taking this approach allows us to better understand and respond to the diverse needs of communities and remove systemic barriers and structures that prevent inclusion. The Strategy should prioritise the overlapping factors that require more targeted and innovative actions, to deliver equitable outcomes for everyone in our richly diverse communities.

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

The Government's approach to early learning with emphasis on children's development, their sense of identity, health and wellbeing, learning, safety, and happiness is commended.

The vision should make clear what outcomes we want from the Government's actions for children in their early years to ensure families have access to services that support the capacity of the family through a range of targeted and integrated programs that respond to local community needs. The Australian Government's Productivity Commission Inquiry Report - Mental Health 2020⁷ (Inquiry Report) states Governments are investing significant efforts in children's wellbeing – but can achieve much more with an outcomesfocused approach that measures success, and enables improvement in leadership, training and resourcing (refer Recommendation 5 Focus on Children's Wellbeing Across the Education and Health Systems). Council supports and encourages operationalisation (via the Strategy) of a focus on children's wellbeing across the education and health systems.

Importantly, the vision should put the voices and experiences of children, families and carers at the centre of the Strategy. From the outset of Strategy development and throughout the delivery phase.

A snapshot of key emerging issues:

Population growth

Wyndham is one of the largest and fastest growing municipalities in Australia. The 2023 population forecast for City of Wyndham is 322,226, and is forecast to grow to 501,634 by 2041⁸.

The population of children and young people is increasing in Wyndham. As the population grows, additional early years infrastructure will be required to meet the demand for maternal and child health centres and early childhood education and care, such as childcare, kindergarten and playgroups. In particular, the roll-out of the landmark Best Start, Best Life Kindergarten reform will increase pressure on these services. In response to the Three-Year-Old Kindergarten reforms, Wyndham City worked with the Victorian Government to sign a Kindergarten Infrastructure Service Plan (KISP) and the first Building Blocks Partnership Funding Agreement to support the timely delivery of infrastructure to support the reforms. A review on KISPs have commenced following the announcement of the latest reforms.

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⁷ www.pc.gov.au/inquiries/completed/mental-health/report/mental-health-volume1.pdf

^{8 .}id Forecast

In 2021, around 93 children were born each week in Wyndham, a figure that steadily increased from 61 births per week in 2011. As a result, over 18 percent of Wyndham residents are children under 10 years old, with 26,099 children under 5. This also means that over 31 percent of the Wyndham population are primary school children, 21,981 of whom are attending a government school. There is also a high participation rate for childcare in Wyndham, with demand for Three-Year-Old Kindergarten expected to rise from 42 percent of Three-Year-Olds attending in 2020, with 63 percent of families indicating a preference for Three-Year-Old Kindergarten when sessional hours available increase to 15.

Equity

Levels of relative disadvantage vary dramatically by suburb across Wyndham, ranging from the 12th percentile (high disadvantage) in Werribee to 90th percentile (low disadvantage) in Williams Landing⁹.

The case study below (refer **Text Box 1**) highlights how disadvantage such as in the case of poverty intersects and overlaps with many other areas such as domestic violence, social isolation and unequal social capital amongst individuals, insecure employment conditions and addiction – which all require policy attention if we are to improve child and family outcomes. The case study also illustrates that social disadvantage is a complex problem, generated and ad maintained across the lifecourse and over generations through a combination of factors as well as variations in individual circumstances.

Text Box 1 – Intersections of disadvantage, food poverty, job insecurity and domestic violence

is three years of age and attends a Wyndham kindergarten two days per week.

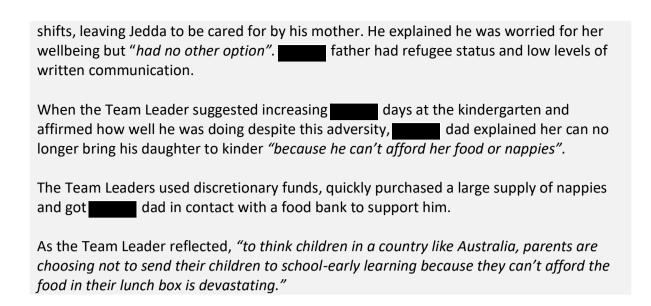
Noting her attendance had waned over the last few weeks, the Team Leader gently asked father "is everything Ok". Between sobs, Jedda's father revealed his wife who was drug dependent had left him and his child to fend for themselves and he was living with his mum who was in his words "abusive, neglectful and hates Jedda and I so much".

dad expressed the vitriol aimed at him "you're so hopeless, nothing good comes from you", and Jedda experiences punching and kicking by his mother who resented her son and child residing with them amongst other resentments.

dad worked part time as a cleaner, completing a combination of day and night

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⁹ Based on the ABS Census 2021



Impact of pandemic and recovery

The pandemic brought about a notable increase in inequity, particularly in relation to more vulnerable community members. Health equity means improving health and living conditions for those residents so that services are easy to locate and culturally appropriate.

Additionally, the impact of racism on social cohesion has also been felt. Major areas of concern expressed by diverse communities in research presented by Ethnic Communities' Council of Victoria (2020) includes social isolation, stress within households, risk of mental health deterioration, family violence, and racism¹⁰.

Mental wellbeing, housing and homelessness and family violence

Family and domestic violence is the single biggest driver of homelessness in Australia. There is need to continue to address family violence – relevant Royal Commission into Family Violence recommendations. The importance of maintaining mental wellbeing came to prominence during the pandemic and remains an ongoing pressing issue for everyone in our community. The social and emotional wellbeing of children was a key theme in the Australian Government's Productivity Commission Inquiry Report – Mental Health 2020¹¹.

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

¹⁰ https://eccv.org.au/wp-content/uploads/2020/08/ECCV-Submission_Inquiry-into-COVID-19-response_final-version-1 ndf

¹¹ www.pc.gov.au/inquiries/completed/mental-health/report/mental-health-volume1.pdf

Strengths of children and their families (of broad representation including CALD communities for example) should be recognised, understood and leveraged. For example, strengths include resilience and perseverance, help-seeking behaviours, connections and relationships, kindness/prosocial behaviour, sense of community and engagement with the community etc.

Challenges include mental health issues, barriers to information about services available, family / domestic violence and family breakdown, language barriers for CALD communities etc.

Using clearer language is helpful. For example, in the early childhood sector educators will generally use strength-based language and so rather than say "the child shows depressive symptoms" and pathologise the child, educators will say the child's regulation skills are poor/need developing. This is an important distinction because many of children have serious mental health issues and PTSD (post-traumatic stress disorder), depressive symptoms, attachment difficulties that go beyond developmental normal milestones such as separation anxiety.

A lifecourse and family centred approach:

- Council believes that everyone has fundamental rights and health and education needs throughout their life. Identified health priorities include pandemic recovery, mental wellbeing, homelessness, social connection, technology (digital and health literacy, and medical care (ongoing chronic conditions)¹². (Note: some are particularly relevant to certain life stages).
- A lifecourse approach presents intersecting opportunities:
 - planning grounded in a more sophisticated understanding of how diversity and lived experience influence our abilities to overcome life's challenges
 - a more cohesive sector wide service response, aligned to the diverse and changing needs of communities
 - o consistency and alignment of services.

¹² www.wyndham.vic.gov.au/sites/default/files/2021-

^{11/}WYN%20Municipal%20Public%20Health%20%26%20Wellbeing%20Plan%202021-25_for%20adoption.pdf

- Council believes there is an opportunity to improve strategic coordination and collaboration across life stages.
- Council believes there is synergy between principles of equity and the
 lifecourse approach, as health and education inequities are rooted in the
 complex processes of disadvantage across life stages and generations.
 The case study below (refer **Text Box 2**) highlights the interplay between
 intergenerational disadvantage and worsening child development
 outcomes.
- The social context which influences and underpins healthy communities
 has us looking at four key themes: People and Community; Places and
 Spaces; Earning and Learning; Leadership and Participation.
- Key outcomes should focus on the transitions experienced across the lifecourse where prevention and early intervention will have the greatest benefits.
- For children in the early years population cohort: Wyndham families should have access to services that support the capacity of the family through a range of targeted and integrated programs that respond to local community needs.

Text Box 2 – Worsening child development outcomes, intergenerational disadvantage, poverty-food insecurity

At one of Wyndham's community centres, 70 percent of children enter kindergarten with diverse and often extreme complexities. These generational complexities ensure disadvantages in all aspects of children's and families' lives. Children show a low level of ability to engage in sustained play. It has been observed that approximately 40 percent of Four-Year-Old children play at the level of an 18-month old, often playing alone. Furthermore, approximately 50 percent of children find sharing and taking turns overwhelming. Children don't know how to have conversations that go both ways. Worryingly, it is estimated that only approximately 20 percent of children have the capacity to listen, even in small groups and for short periods of time.

Many parents' lives are hampered by disadvantages, undiagnosed needs or trauma, low reading and math skills, poor financial literacy and poverty. Wyndham has approximately 20 percent of children with kinship care orders. Many guardians don't have the skills to provide the predictable routines and caring interactions they need. Approximately 30 percent of children have inconsistent attendance. Approximately 80 percent of children access our breakfast program on a regular basis. Approximately 40 percent of children were provided with food for lunch, and approximately 30 percent of families were referred to a food bank during the year or provided top-up food for them.

Wyndham City Council's key outcomes for children in their early years (as per Living your best life in Wyndham – A lifecourse framework to support our community through all of life's stages):

- Early years children and their families enjoy strong and healthy
 relationships with their family and peers embedded in their broader
 community. Children in their early years and their families have access
 to the programs and services they need to live healthy and happy lives.
- Welcoming public spaces enable early years children to socialise, play and spend time in safe and fun environments in parks and neighbourhoods. Places and spaces are easy for families to access locally, and neighbourhoods are designed to be child-friendly to maximise active transport, play and local connection.
- Quality, inclusive, local education meets the needs of early years children and supports them to develop physically, mentally, socially and emotionally. Parents, carers and families are supported through adequate access to education and employment opportunities.
- Early years children feel a sense of belonging and connection to their wider community. Early years children and their families have opportunities to participate in a range of activities¹³.

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

The actions under the Strategy should aim to create a higher quality, more equitable and inclusive early childhood system. The national reform to early years should (in no particular order of priority):

- ensure effective governance and partnership arrangements to support cross-disciplinary integration
- improve the ratio of educators to children, getting children the supports they need
- make it easier to access affordable services and prioritise interventions (at a local level)

Wyndham City

¹³ www.wyndham.vic.gov.au/sites/default/files/2023-01/Lifecourse%20Framework%20%20External%20Document%20-%20FINAL%20-%20ADOPTED%202022-09.pdf

- prioritise a universal offering for all families, with flexible support for priority groups
- strengthen the role and influence of Aboriginal people, communities and organisations and support Aboriginal and Torres Strait Islander families and children
- support families and children from culturally diverse communities, including children from refugee backgrounds
- fast-track new paediatric health and family support services as a priority
- strengthen integrated service delivery
- make it easier to navigate services
- address workforce challenges
- contribute to avoiding and reducing family violence
- contribute to improving mental wellbeing
- support lifelong learning (starts at birth)
- support strong family foundations.

As outlined in the following:

Ensure effective governance and partnership arrangements to support crossdisciplinary integration

Ensure effective governance and partnership arrangements to support crossdisciplinary integration and establish more suitable and durable national funding arrangements for early childhood.

This also needs to be in alignment with early years services management – changes to the management of kindergartens – transition from Kindergarten Cluster Management (KCM) to Early Years Management (EYM). The introduction of EYM reflects the broader role KCM organisations fulfil in delivering additional early years services. This broader approach aims to promote a long-term vision towards a more integrated and sustainable early childhood education and care (ECEC) system)¹⁴. ECEC refers to the holistic development of children including their social, emotional, cognitive and physical abilities¹⁵.

¹⁴ www.education.vic.gov.au/Documents/childhood/providers/edcare/EYMPolicyFramework.pdf

¹⁵ www.earlychildhoodaustralia.org.au/wp-content/uploads/2021/07/How-to-talk-about-ECEC.pdf

Complement the Victorian Government's policies on local council including: Supporting Children and Families in the Early Years: A Compact 2017-2027 between the Victorian Government Department of Families, Fairness and Housing (DFFH) and local government – represented by the Municipal Association of Victoria¹⁶; Education State Early Childhood Reform Plan; Roadmap for Reform: strong families, safe children (responding to the findings of the Royal Commission into Family Violence (Victoria)); Out-of-Home Care Education Commitment; and Victorian Child Safe Standards etc.

Improve the ratio of educators to children, getting children the supports they need

The case study below (refer **Text Box 3**) highlights the multiple pathways educators navigate to get funding for increased ratios. Taking into account the high percentage of children with developmental delay, it is encouraged that inreach is a part of early childhood curriculum and Government remove the onerous consent/permissions which inhibit children getting the support they need.

Text Box 3 – Advocacy for increased ratios – children are being left behind. Current ratio is 1:11.

Based on observations of children attending the Three-Year-Old Kindergarten this year, a high percentage of children (approximately up to 60 percent) in the group required continuous one-on-one support from the educator throughout the session due to various reasons, such as:

- separation anxiety
- low play skills
- required support to move from one activity to another or to transition within the daily routines
- limited language skills to communicate with others
- low social skills and issues with self-regulation
- low confidence and skills in exploring the outdoor playground area (such as climbing up, down, and over the a-frame, balancing on the wooden board)
- having developmental concerns required support through referral pathways (IPC Health, support from allied health and FKA Children's Services, paediatrician).

With the complex dynamic and high needs of the children within the group, the ratio of one educator to 11 children has proven challenging to cater for the needs of the children in the group to ensure their inclusion and wellbeing and to support their learning and development.

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¹⁶ www.vic.gov.au/early-years-compact

In the first term of 2022, the educators had support from the Additional Assistant from the SRF (School Readiness Funding) menu item. However, as the funding was exhausted, the educators needed to apply for various funding to maintain the support from the additional assistant throughout the year from Wyndham City Council Additional Assistant Funding and KIS Funding (as soon as the children were deemed eligible after seeing the paediatrician). Even with the support from additional assistants, other educators in the non-contact duty or Team Leader often had to step in to support the session to ensure the children's safety and wellbeing in the group.

A high number of children in the group, both Three- and Four-Year-Old Kindergartens, at least seven out of 30 children required additional support through the referral pathway such as Pre-School Field Officer (PSFO), community health, Occupational Therapist, Psychologist, Speech Therapist, Paediatrician, and NDIS (National Disability Insurance Scheme), due to concerns about their development.

Compared to previous years, there has been a significant increase in the number of children and families who experience separation anxiety. Until the beginning of term four, some children and/or families continue to require reassurance and ongoing support from the educators to manage separation anxiety, and some referrals to psychologists have been made to support the children and families further.

Where there are a high number of children with high needs, lower staff to child ratio is needed to ensure capacity to support the inclusion of all children and to ensure all children get the right level of support they require.

Anecdotally, local primary schools are reporting similar challenges where children are arriving at primary school with lower regulation and social skills which is impacting their learning and interactions with peers. This also has linkage with the need for trauma informed practice.

Make it easier to access affordable services and prioritise interventions (at a local level)

Make it easier to attend quality, inclusive, local education, health and mental health services. Improve accessibility of mental health services and early detection of health or developmental problems.

Improve affordability and access – at a local level – of education, health and mental health services for children and their parents/carers', including access to health and wellbeing services, housing, sport/recreation/leisure opportunities, gender and sexuality (LGBTIQ+) services, growing resilient communities (health and social justice impacts of climate change) etc.

An Australian consensus study has shown that local priorities for preventing mental health problems for children living with adversity emphasised relational approaches to service provision and were shaped by the availability of existing interventions and supports in the locality¹⁷.

Prioritise a universal offering for all families, with flexible support for priority groups

Prioritise in all services the needs of vulnerable children and their families¹⁸. Improve support for vulnerable families, funding of services and support groups including for children with a disability and their parents/carers and CALD communities.

Strengthen the role and influence of Aboriginal people, communities and organisations and support Aboriginal and Torres Strait Islander families and children

The cultural determinants of health have a strengths-based perspective, acknowledging that stronger connections to culture and Country promotes and leads to stronger health and wellbeing and improved outcomes across the other determinants of health.

Untangling complex and intersectional disadvantage in the early education space requires tailored, place-based interventions that are led by the

¹⁷ https://bmcpsychology.biomedcentral.com/articles/10.1186/s40359-021-00652-0

¹⁸ www.mav.asn.au/__data/assets/pdf_file/0004/21694/MAV-Resource-Guide-to-Municipal-Early-Years-Planning-Jun-2022.pdf

community, as well as responses tailored to First Nations children and families with First Nations leadership, children and families from culturally and linguistically diverse communities and those with complex needs¹⁹. The Aboriginal and Torres Strait Islander Census population of the City of Wyndham in 2021 was 2,508²⁰. From 2016 to 2021, City of Wyndham's Aboriginal and Torres Strait Islander population increased by 786 people (45.3 percent). The major differences between the age groups of the Aboriginal and Torres Strait Islander population in the City of Wyndham and the Aboriginal and Torres Strait Islander population in Victoria were a larger percentage of people aged 0 to 4 years (12.6 percent compared to 10.7 percent)²¹.

The national reform to early years presents an important opportunity to strengthen the role and influence of Aboriginal people, communities and organisations, particularly in their relationships with Government. There is an urgent and important need to support Aboriginal and Torres Strait Islander families and children.

Support families and children from culturally diverse communities, including children from refugee backgrounds

In Victoria, the Legislative Assembly Legal and Social Issues Committee's 2020 Inquiry into early childhood engagement of CALD communities explored early childhood engagement of CALD communities. At a broader societal level, the Committee heard that racism and discrimination are underlying barriers to engaging culturally diverse communities in services. Negative community experiences such as systemic bias and/or racism can lead to social isolation, which in turn can create a cycle of mistrust. The report addresses current barriers that culturally diverse families face in accessing services. It highlights the importance of early learning opportunities in laying the foundations for children's long-term development, and indicates that this is particularly relevant for children from refugee backgrounds²².

¹⁹ https://www.bsl.org.au/news-events/media-releases/opportunity-to-overhaul-early-years-development-must-be-seized/

²⁰ https://profile.id.com.au/wyndham/first-nations-keystatistics

²¹ https://profile.id.com.au/wyndham/first-nations-age-structure

²² https://new.parliament.vic.gov.au/get-involved/inquiries/inquiry-into-early-childhood-engagement-of-cald-communities/

The Victorian Government's Response to the Inquiry into early childhood engagement of culturally and linguistically diverse communities – March 2021 included to establish an Anti-Racism Taskforce. The taskforce will guide the design and implementation of a whole-of-government Anti-Racism Strategy to achieve long-term behaviour change across the Victorian community²³.

More tailored and culturally appropriate support for people who are new arrivals is urgently required.

Further work is required to proactively address race discrimination, considering issues such as how race intersects with other forms of discrimination. Direct consultation with communities, ensuring a diversity of voices and perspectives will help shape strategy for a stronger, fairer nation.

Fast-tack new paediatric health and family support services as a priority

Early access to paediatric health and family services helps children overcome developmental challenges that can have lifelong impacts. Currently, there aren't enough of these services to meet Wyndham's needs.

Many families travel long distances for treatment and waiting lists can be a year or more long.

Wyndham need new paediatric health and family support services to be fast-tracked as a priority. The municipality is in need of a health and wellbeing hub that can focus on addressing large shortfalls in allied and acute paediatric and other critical services.

Wyndham has welcomed the Victorian Government's Early Parenting Centres Expansion and Upgrade project²⁴ that will see Tweddle Child and Family Health Service deliver a new Early Parenting Centre in Wyndham in 2023.

At current, some waiting lists, for accessing a speech pathologist / paediatrician for example, are 12 to 18 months long in the Wyndham local area (refer **Text Box 4**).

Text Box 4 – Relationship between child outcomes (attendance) and material aid (food),

https://new.parliament.vic.gov.au/492eed/contentassets/fe1b7395cb8741749e62d81f62729a8a/final_respon se to parl inquiry into ec engagement cald communities ty4kgltq.pdf

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²⁴ www.vhba.vic.gov.au/health/specialist-centres/early-parenting-centres-expansion-and-upgrade

and experiences of CALD families

Wyndham has found an increase in the number of families accessing Wyndham's food bank compared to last year. At one centre in Wyndham the food bank must be topped up at least once a week, with approximately 25 percent of families accessing the food bank on a regular basis and using local food banks to feed their family. Some families in the past have also identified that the children are unable to attend learning and education services as they do not have food in the house for lunches. This led this kindergarten to encourage families to access Wyndham's own food bank and to provide breakfast in the morning. All kindergarten groups at this centre have at least 5-15 children that access Breakfast Club on a regular basis.

At this kindergarten there are at least 1-2 children in majority of its groups that have a diagnosis of some sort, such as Global Developmental Delay, speech or emotional needs. It is estimated that 70 percent of local children have anxiety and struggle to self-regulate and rely on educators to utilise strategies they have previously been developed. Wyndham has also identified three children in the Three-Year-Old age group that families have been encouraged to undergo formal assessment and expect there to be a formal diagnosis within their Four-Year-Old Kindergarten year. One Four-Year-Old Kindergarten group have several children with high needs that need to undergo formal assessment, but educators are struggling to communicate with and link families into services due to language and cultural differences as well as waitlists, lack of knowledge and issues related to cultural acceptance.

Strengthen integrated service delivery

Integrate early childhood services across all three levels of government, including co-located and integrated service models. Leverage the opportunity to strengthen collaborative planning between all levels of government and explore opportunities for co-investment (where appropriate) in assets to enable complementary services to be offered within integrated facilities to support access for families. A more cohesive sector wide service response is needed, aligned to the diverse and changing needs of Wyndham's community. This is in line with the strategic intent of Wyndham's Early Years Partnership Framework.

Furthermore, integrated early childhood facilities that are co-located with schools and community services are shown to have lasting benefits for children. For example, Birnbial Family Centre at Manor Lakes will provide three and four-year-old kindergarten, maternal and child health services and integrated office space for services. It is located next to a new primary school,

Ngarri Primary School (opening in 2023), to support the transition from preschool to prep. Supports an integrated and networked approach to children's education and development. Refer www.wyndham.vic.gov.au/project/birnbial-family-centre

Make it easier to navigate services

Make the early childhood service system easier to navigate and increase its capacity to outreach (for example, early childhood services could be an entry point for other wrap-around supports) and engage proactively with disengaged and deeply excluded families. The case study below (refer **Text Box 5**) highlights how whilst there is potential from cross disciplinary collaboration and the service systems working together, in the case of the NDIS and the lived experiences of clients and parents/carers, there can be significant shortfalls that result in negative outcomes for individuals and families.

Text Box 5 – Challenges navigating the local service system and capacity issues

Mira has newly arrived from South East Burma and her child attends kindergarten a few days a week at an integrated service. The integrated service had a community cultural worker who was multilingual supporting families navigate the local service systems although funding was short term and her role recently came to an end.

In December Mira spoke to the kindergarten teacher about her NDIS plan for her two children, both of whom have a diagnosis of a global developmental delay. Mira's English is limited, and the Team Leader got the Community Cultural Worker involved.

This is an example of an integrated and coordinated approach to support families with the kindergarten and cultural worker joining forces to support the family. This has been supported by a strong community governance including the provision of a Community Manager who works closely with the placed-based services to orientate them into the vision and expectations of a multi-disciplinary approach.

Notwithstanding this, when the Community Cultural Worker audited the correspondence from the NDIS provider, the following was revealed:

- one phone call over a 12 months period between Mira and the NDIS partner no placed-based meetings happened despite assurance this was the intention over multiple email correspondence from the NDIS partner
- no translator provided, despite the request
- limited context provided about the roles of various support staff across a number of organisations
- Mira still confused by the entire NDIS process and remains unclear how much money she has received and how to activate funds for purchase

• Mira's children still do not have any additional support for their disabilities.

It would be useful to understand the pervasiveness of these types of situations and root cause analyses so the frequency can be minimised as not all services have access to cultural workers that can support with navigating through such situations.

Address workforce challenges

Strengthen the early childhood workforce, including qualified early childhood educators, maternal and child health nurses and allied health and education professionals – to address the workforce needs of the sector.

The discussion paper does not address the workforce pipeline. Yet there are well established current challenges and opportunities across the sector in association with workforce attraction and retention.

In the Victorian context, the Victorian Government's roll-out of the Best Start, Best Life Kindergarten reform will require the attraction and retention of a qualified kindergarten workforce across individual service providers. There is limited workforce of qualified Maternal and Child Health (MCH) nurses. In Victoria this workforce is ageing and the pathway to becoming qualified is extensive.

In Wyndham the MCH service has experienced significant pressure due to the ongoing impacts of the COVID-19 pandemic, including limited workforce availability, high birth rates and high demand for services.

During 2022, Council in partnership with the Municipal Association of Victoria (MAV), the Department of Health (DH), and Safer Care Victoria (SCV) developed an MCH Service Recovery Action Plan to enable the implementation of agreed time limited workforce initiatives and alternative MCH service delivery models to address the needs of families in the community based on risk.

As workforce availability allows, the MCH service continues to gradually increase its service offering to more children and families, targeting services to those who have missed multiple Key Age and Stage visits due to prioritised service arrangements.

However, Council is concerned about the immediate and long-term impacts on children not receiving necessary health and wellbeing assessments and early intervention supports as a result of Wyndham's MCH workforce shortage.

Parents are also missing out on timely information about childhood development and opportunities to address wellbeing and environmental risks before attending kindergarten and school.

This concern is compounded by the continued impacts of the COVID-19 disruption. Specific impacts include the social and emotional development of children and family wellbeing, increasing complex family needs, as well as poor access to general practitioners, allied health services, specialist intervention services and increasing adversity thresholds for access to child and family services.

There is a workforce shortage across the early years sector (including in kindergarten services, maternal and child health services, and targeted services). Clarity of the workforce pipeline for the sector is required to inform decision making on future service provision.

Contribute to avoiding and reducing family violence

Family violence has been identified as a problem affecting children and young people. Family violence continues to be a major health and safety issue for Wyndham, representing a significant concern and priority for our community. Effectively addressing this issue requires partnerships and collaboration.

Important service responses in Wyndham include:

• The Orange Door Network is a key recommendation of the landmark Royal Commission into Family Violence. Orange Door Network has a new site in Werribee (opened since October 2022). The Royal Commission into Family Violence also helped to identify important gaps, such as the need to better respond to the richness of Victoria's diverse communities. As mentioned throughout this submission, Wyndham is one of the fastest growing municipalities in Victoria and Australia, home to a young and diverse population. Furthermore, as a growth area and outer suburban council the diversity and demographic mix of our municipality has driven (and continues to drive) strong demand for community services.

The Multidisciplinary Centre (MDC) provides victims of family violence and sexual offences with a range of services, including counselling and advocacy support, general health checks, therapeutic support, forensic medical services, as well as guidance through the justice system.

Wyndham's community health provider - IPC Health - provide services that contribute to wellbeing and quality of living, such as family violence, child and family services, activity groups, health promotion and community strengthening.

Continued investment and prioritisation of prevention of family violence and interventions for children and families experiencing family violence should be a priority for the national Strategy.

Contribute to improving mental wellbeing

Contribute to Australian Government's Productivity Commission Inquiry Report - Mental Health 2020. Including Recommendation 5 Focus on Children's Wellbeing Across the Education and Health Systems.

Support lifelong learning (starts at birth)

Lifelong learning (starts at birth) and learning through play – play is recognised as a fundamental element of healthy development and learning.

Support strong family foundations

Recognise that family foundations include broad ranging aspects, such as: jobs and skills; safe, secure and affordable housing; health, health equity, socioemotional, cognitive and socio-economic related.

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?

An integrated approach to early childhood development, health and education – beginning at birth and spanning both formal early childhood services and

home-based support – can counter family disadvantage, stop at-risk children and families from falling through the gaps and ensure all children have the best possible start in life²⁵. We want to give our children the start in life they deserve, but local services are having trouble keeping up with demand. Wyndham's population is growing faster than expected. Many of our newest community members are parents with young children. Analysis of the service age groups of City of Wyndham in 2021 compared to Great Melbourne shows 28.8 percent of the population was aged between 0 and 17 (compared with 21.5 percent for Greater Melbourne)²⁶. In 2021, the largest age group in City of Wyndham was 35 to 39 year olds²⁷.

An Australian consensus study

An Australian consensus study was undertaken on prioritising interventions for preventing mental health problems for children experiencing adversity using a modified nominal group technique²⁸. This study aimed to: (1) reach consensus on local priority interventions for preventing mental health problems for children living with adversity in Wyndham, Victoria; and (2) understand the enabling factors and barriers to implementing these interventions. Three interventions reached consensus among the mixed stakeholder groups as being a 'high' or 'very high' priority for implementation in Wyndham: nurse home visiting, parenting programs and community-wide programs. Taking into account their potential to act as a gateway for families to increase their knowledge about topics like parenting²⁹. Enabling factors and barriers to the implementation of interventions to supporting families living with adversity in Wyndham can be seen below³⁰:

²⁵ www.bsl.org.au/news-events/media-releases/opportunity-to-overhaul-early-years-development-must-be-

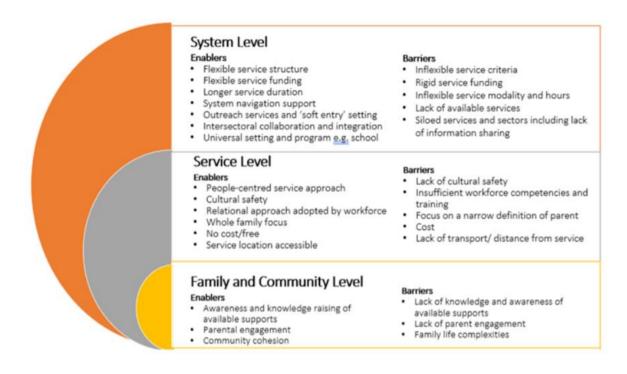
²⁶ https://profile.id.com.au/wyndham/service-age-groups

²⁷ https://profile.id.com.au/wyndham/five-year-age-groups

²⁸ https://bmcpsychology.biomedcentral.com/articles/10.1186/s40359-021-00652-0

²⁹ www.childhoodadversity.org.au/our-work/child-and-family-hubs/formative-research/

³⁰ www.childhoodadversity.org.au/resources/research-snapshots/prioritising-interventions-for-preventingmental-health-problems-for-children-experiencing-adversity-a-modified-nominal-group-technique-australianconsensus-study/



Refer video providing an overview of each of the six different evidence-based intervention types: https://youtu.be/Yj3zt4vz4d8

Restacking the Odds to Give Children the Best Start

Inequities emerging in early childhood often continue into adulthood, contributing to unequal rates of low educational attainment, poor mental and physical health and low income and in some cases, this experience is part of a persistent cycle of intergenerational disadvantage. To redress inequities, research tells us that efforts should be delivered during early childhood (pregnancy to eight years of age) to deliver the greatest benefits.

To that end, the 'Restacking the Odds' (RSTO) aims to support communities, service providers, policy makers with the critical tools and resources to help them provide better equality and more accessible health services and early childhood education.

In an Australian first, the Murdoch Children's Research Institute and project partners have developed a framework of evidence based indicators across five core strategies in early childhood: antenatal care; sustained nurse home visiting; early childhood education and care; parenting programs; and the early years of school. The indicators define how these strategies should be delivered across the dimensions of quality, quantity and participation.

The community in Wyndham has been instrumental in supporting the RSTO project. Wyndham has helped the project team understand how the fundamental strategies were being delivered and accessed, and whether the indicator data would be of practical value. Refer: https://pubmed.ncbi.nlm.nih.gov/31586934/

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

A collaborative and effective relationship between all levels of government (and inter-governmental departments) provides a foundation for strengthening services for children and families. Cross-portfolio collaboration is also required across broad ranging Government departments (e.g. across immigration, social services, early childhood education and care, and more).

Demonstrate a shared focus on improving and sustaining outcomes for children and families across all Australian communities. Consultations with families and those who work in early years services have shown that we need more consistent, measurable, and accountable service delivery³¹. In all Australian jurisdictions, clearly defined roles and responsibilities, joint planning and consistent goals and coordination across the early years services system will support more effective service delivery that maximises benefits for children and families.

Consider developing a regulatory performance framework identifying key performance indicators (KPIs) to evaluate performance and measure success against strategic objectives.

Clarify methodological considerations regarding performance against any outcomes outlined in the Strategy to ensure improved outcomes for children and responsiveness to changing needs of families. Clarification is needed on connectivity between State and Commonwealth funding initiatives e.g. Child Care Subsidy (CCS) and kindergarten funding. Funding arrangements need to be strengthened (this also has linkage with the before mentioned need to make it easier to navigate services).

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³¹ www.mav.asn.au/__data/assets/pdf_file/0004/21694/MAV-Resource-Guide-to-Municipal-Early-Years-Planning-Jun-2022.pdf

7. What principles should be included in the Strategy?

- Co-design Co-design is the active involvement of a diverse range of participants in exploring, developing, and testing responses to shared challenges³². Consultation with children has a basis in international law through the United Nations Convention on the *Rights of the Child* which was ratified by Australia in 1989.
- Engagement Children and their families (particularly vulnerable children and their families) are actively engaged and consulted.
- Lifecourse Lifecourse considerations fit well with health and wellbeing priorities in recognising the need for greater collaborative partnerships.
 Accepting the principle of the lifecourse has implications on the way health systems are developed to cater for individuals' health care needs.
- Transdisciplinary approach Mapping across child development, assetsbased pedagogies, and bilingualism, specifically seeking to reconceptualise early years strategy and supports in ways that foundationally reposition intersectionally minoritised young children, families and communities.
- Diversity and inclusion All children and their facilities are able to benefit from accessible and inclusive services, opportunities and assistance. The needs of vulnerable children and their families will be prioritised in all services.
- Child-centred The child is at the centre surrounded by family, kin and early childhood professionals who support children's healthy development and learning.
- Strengths-based A collaborative and solutions-focused way of working.
- Equity of access All citizens should have equal access to high-quality community services and infrastructure.
- Partnerships and collaboration Seek common ground and foster relationships that will deliver positive change. Messaging should centre on opportunities for further collaboration and future improvements. Specifically, future improvements are needed to the National system to uphold and maintain quality systems and services across State and territories boarders.

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³² https://onlinelibrary.wiley.com/doi/full/10.1111/1467-8500.12310

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

Research shows that high-quality early childhood, health and support services have huge benefits in terms of children's lifelong wellbeing.

Childhood is a stage of life where investment has the greatest return and opportunities to intervene have the greatest impacts³³. The Strategy should adopt a child-centred framework.

Of relevance in this strategic context, some important research / evidence follows:

The Murdoch Children's Research Institute report titled 'The impact of the COVID-19 pandemic on children in Australian early childhood education and care: A rapid review prepared for the Australian Government Department of Education, Skills and Employment January 2022'

The first five years of a child's life are critical for laying the foundations for healthy development. Adverse events or circumstances that occur during these years can have a significant impact on children's health and developmental outcomes. The Australian Government Department of Education, Skills and Employment engaged the Centre for Community Child Health, Murdoch Children's Research Institute to review the direct and indirect impact of COVID-19 on children 0 – 5 years, including the impact of disruptions to ECEC attendance and the likely length of all impacts. The COVID-19 pandemic has caused momentous changes to children's lives, which has the potential to impact their health, development and wellbeing.

The report describes that "Given that given that children were less able to access maternal and child health services (for developmental screening), paediatricians and allied health services, it is anticipated there will be a decrease in diagnoses of Additional Health and Developmental Needs (AHDN). This means ECEC will play an even more important role in early identification of children with AHDN as well as providing a high quality learning environment

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 $^{^{\}rm 33}$ www.mav.asn.au/__data/assets/pdf_file/0004/21694/MAV-Resource-Guide-to-Municipal-Early-Years-Planning-Jun-2022.pdf

for all children, particularly those that have missed out on other early intervention services" (p. 22).

The report finds that there is an urgent need for more research and more data on the impact of the pandemic on young children, including the likely length of these effects. Quality ECEC remains an important intervention for children with pre-pandemic AHDN, children who are socio-economically disadvantaged, and children who have suggested the effects throughout the pandemic. Efforts to ensure all children have access to high quality ECEC into the future should be an important part of the pandemic recovery³⁴.

<u>Early Education and Care – Intergenerational Project (linking the senior years to the early years)</u>

In term 1, 2022, Wyndham City's Early Education and Care Services, in partnership with Deakin University, were proud to pilot the very first Intergenerational Project at Wyndham. The project had the following aims:

- A planned program that supports intergenerational connections in Chinese families
- Increased understandings of young children's learning by Chinese grandparents
- Chinese grandparents being supported to link to wider social services and community networks.

The Chinese community in Point Cook were chosen as the focus, as Chinese senior residents (aged 50+) make up almost 13 percent of the entire Chinese population in Wyndham. The project team identified that in existing Chinese communities, most senior residents are fully or partially involved in raising their grandchildren.

Despite this, it is reported that Chinese grandparents face great challenges playing their grandparenting role in Australia due to the language and cultural barriers and a lack of knowledge about Australian education. Across 2020-2021 grandparenting relationships were also affected in the context of COVID-19,

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³⁴ www.rch.org.au/uploadedFiles/Main/Content/ccchdev/Impact%20of%20COVID-19%20pandemic%20on%20children%20in%20Australian%20ECEC%20(1).pdf

due to lengthy lockdowns that resulted in restricted contacts among members in many families.

With the assistance of a variety of local Chinese Group Leaders, a group of grandparents were recruited via the social media platform WeChat. In addition, three Kindergarten Educators also joined the group via an expression of interest process.

Commencing February 2022, ten weekly online workshops were carried out in Mandarin (a translator attended to help English speaking participants only) and a variety of topics were explored such as Language and Literacy, Children's Development, Learning & Behaviour and Community Connections.

The outcomes informed the project facilitators that the mental health and wellbeing of grandchildren and immediate family members was front of mind for many grandparents, with a key interest in child behaviour and typical/atypical child development also evident. The project team also learnt many valuable lessons from the participants such as their experiences with cultural diversity, the high regard that is held for the expertise of educators and commonly experienced challenges amongst families. These outcomes will inform recommendations for future projects moving forward.

Project findings:

- Children's mental health front of mind The Chinese grandparents demonstrated an interest and commitment in supporting children's wellbeing – essentially, they wanted their grandchildren to be happy, have friends and be resilient.
- Child psychology application is a key interest Grandparents wanted to discuss and make sense of children's behaviour and what is typical and atypical.
- Needs and interests revealed by a community development approach –
 COVID-19 has negatively impacted on the mental health of grandparents
 due to isolation and other factors, and they were less likely to seek help
 for risk of stigma and cultural inclusion unless they felt emotionally safe
 to do so.

- Cultural fit equals higher engagement The grandparents responded positively to the educator who coincidently came from a Confucian heritage, and anecdotally responded well to interaction styles that married their own.
- Physical health rates high Some grandparents may devalue their identity and the critical role they play in children's development.

This research has implications for:

- Service delivery inclusion there is a need to ensure the inclusion of grandparents in kinder family engagement strategy. Grandparents as a key stakeholder has implications for future service planning and investment.
- Recruitment and cultural alignment recruitment strategy to consider the cultural needs and languages of the community.
- Community connections promote the mental health resources and opportunities for grandparents to connect and contribute.
- Investment in research is needed about the link between effective immigrant parenting and grandparenting and children's outcomes.
- Cultural competences ongoing commitment to promoting cultural 'competence' training and making spaces for different cultural groups.

Centre of Research Excellence in Childhood Adversity and Mental Health

The Centre of Research Excellence (CRE) in Childhood Adversity and Mental Health, partnering with IPC Health in Wyndham Vale and Wyndham City Council are working in partnership to co-design a Child and Family Hub in Wyndham Vale, Victoria³⁵. The aim of the child and family hub study is to co-design, test and evaluate integrated Child and Family Hub models for detecting and responding to children aged 0-8 years and their families living with adversity and at risk of poor mental health outcomes in Wyndham Vale, Victoria and Marrickville, NSW. As well as improve health sector response by drawing upon community and social sector assets. Refer video on the co-design process available here: www.youtube.com/watch?v=5EIK R-6OCc&t=5s

Other

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³⁵ www.childhoodadversity.org.au/our-work/child-and-family-hubs/formative-research/

Research in Australia and overseas highlights the importance of early education and care for children's social and cognitive development, especially for children from disadvantaged backgrounds³⁶.

Australian research highlights the challenge to public policy is how to ensure that children enter the ECEC system early enough, for a sufficient period of time on a weekly basis and at high enough quality to make a positive difference to their learning and life trajectories. Noting particular interest in vulnerable children continues because their poor outcomes are of great concern and these children also potentially have the most to gain from early intervention³⁷. Importantly, there is robust evidence on the importance of engaging Indigenous children in ECEC programs to improve outcomes³⁸.

³⁶ https://theconversation.com/better-cheaper-childcare-is-on-the-horizon-in-australia-but-4-key-challenges-remain-199864

³⁷ https://ijccep.springeropen.com/articles/10.1186/s40723-015-0012-0

³⁸ https://caepr.cass.anu.edu.au/sites/default/files/docs/Working Paper 103-15 0.pdf