

# Why children and their early years matter

An evidence summary in support of the Early Years Strategy 2024–2034

## Reader's guide

This is a supporting evidence summary to read with the Early Years Strategy 2024–2034. It draws on literature to explain the importance of the early years as part of a child's development and wellbeing. It also provides a point-in-time assessment of how children are faring in Australia.

Disclaimer: This is not an academic research paper. It is a collection of existing evidence sourced as part of the drafting of the Early Years Strategy. All sources are cited where possible.

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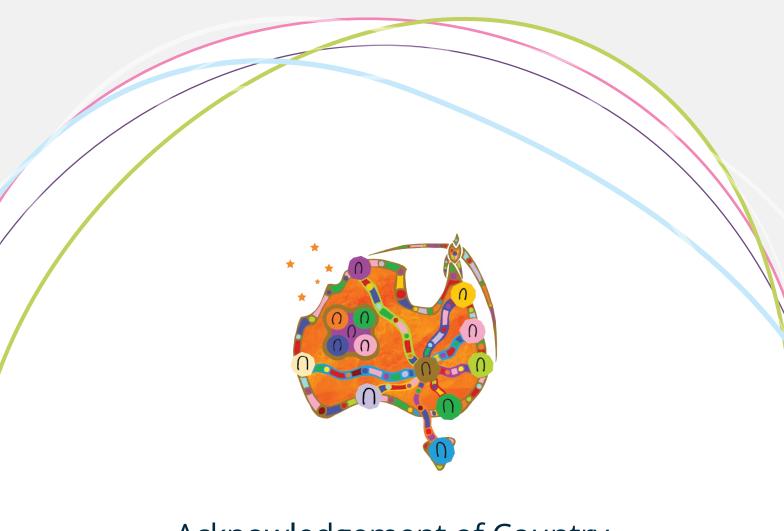
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## Acknowledgement of Country

The Australian Government acknowledges Aboriginal and Torres Strait Islander peoples throughout Australia and their continuing connection to land, water, culture and community. We pay our respects to the Elders both past and present.



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The early years is a vital period of development in a child's life. By committing to action under the Early Years Strategy, we support our youngest children and set them up for success, which benefits not just them, but communities and the nation, now and in the future.

## A critical window

The early years provide the opportunity to have the *biggest impact* on child development. A child will feel the impact of their early childhood experiences throughout their life.

We are all shaped though a complex interaction between our genes and the environment we are raised in.<sup>1</sup> Early experiences are especially important as a child's brain builds its circuitry. As our brains mature, they lose some plasticity.<sup>2</sup> So, while every year of childhood is influential to development, the early years is when we can set children up to achieve good health and wellbeing outcomes for their whole life.

For all children to thrive and reach their potential, we must take a **whole of child** focus in the early years – their physical, mental and emotional development as well as their sense of wellbeing and identity, and their place in the world.

The early years of a child's life, from the important conception and antenatal period right through to 5 years of age, are often referred to as the first 2,000 days. It's a time to positively influence a child's development, sense of identity, health, learning, safety, resilience and happiness.<sup>3</sup>

### Stages of growth and development in the early years



- 1 National Scientific Council on the Developing Child, Connecting the Brain to the Rest of the Body: Early Childhood Development and Lifelong Health Are Deeply Intertwined, Working Paper No. 15, 2020.
- 2 Center on the Developing Child, Inbrief: The Science of Early Childhood Development, Harvard University, 2007.
- 3 Center on the Developing Child, Inbrief: The Science of Early Childhood Development.

### Brain development

Children's genes provide a blueprint which, when combined with relationships, environments and experiences, shape the most malleable organ in the body – the brain.<sup>4</sup>

Brains are built. How they are built (their architecture), and whether they are strong or fragile, is the foundation for the learning, health and behaviour that follow.5

"Early plasticity means it's easier and more effective to influence a baby's developing brain architecture than to rewire parts of its circuitry in the adult years." <sup>6</sup>

A child's early years – especially the first 1,000 days – is when the developing brain is most responsive to being shaped by the environment.<sup>7</sup> The most important feature in that environment is the *relationships* a child has with parents, caregivers and extended family.<sup>8</sup>

### If you don't get a good start early, it is hard to catch up

In the first few years of life, more than one million neural connections form in our brains each second – a pace never repeated again. While brain development continues throughout life and positive changes can be made at any age, it becomes a slower process to 'rewire' or change the brain architecture as we age. 10

The objective in the early years is to develop a **strong foundation**, so that children can achieve good health and wellbeing outcomes over their life course.

A focus on the early years is a commitment to prioritising prevention and early intervention. This means preventing problems occurring before they begin and addressing them early when they do to reduce or mitigate risk factors and increase protective factors. Starting early gives children the best possible start in life.

<sup>4</sup> National Scientific Council on the Developing Child, <u>Early Experiences Can Alter Gene Expression and Affect Long-Term Development</u>, Working Paper No. 10, Center on the Developing Child, Harvard University, 2010.

National Scientific Council on the Developing Child, <u>The Timing and Quality of Early Experiences Combine to Shape Brain Architecture</u>, Working Paper No. 5, Center on the Developing Child, Harvard University, 2007.

<sup>6</sup> Center on the Developing Child, Inbrief: The Science of Early Childhood Development.

<sup>7</sup> National Scientific Council on the Developing Child, The Timing and Quality of Early Experiences Combine to Shape Brain Architecture.

<sup>8</sup> National Scientific Council on the Developing Child, <u>Young children develop in an environment of relationships</u>, Working Paper No. 1, Center on the Developing Child, Harvard University, 2004.

<sup>9</sup> Center on the Developing Child, Inbrief: The Science of Early Childhood Development.

<sup>10</sup> National Scientific Council on the Developing Child, Connecting the Brain to the Rest of the Body: Early Childhood Development and Lifelong Health Are Deeply Intertwined.



## The joy of children

Children bring great joy and happiness to families and communities. They encourage adults around them to look at the world with fresh eyes and open thoughts. Quality time spent playing, reading and being active with children provides many benefits to parents and caregivers, siblings and extended family members, kin, friends and those living nearby. There are also benefits of intergenerational groupings – therapy for both old and young as they interact socially together.<sup>11</sup>

Connecting with young children can reduce stress, build strong bonds with others, and improve mental and physical health and wellbeing.<sup>12</sup> Children may test the resilience of adults who care for them at times, but raising children provides opportunities for families to navigate challenges and build new skills and competencies.<sup>13</sup>

<sup>11</sup> K Radford, R Gould, N Vecchio and A Fitzgerald, 'Unpacking intergenerational (IG) programs for policy implications: A systematic review of the literature', Journal of Intergenerational Relationships, 2018, 16:302–329, doi:10.1080/15350 770.2018.1477650.

<sup>12</sup> K Nomaguchi and MA Milkie, 'Parenthood and well-being: A decade in review', Journal of Marriage and Family, 2020, 82(1), 198–223.

<sup>13</sup> Nomaguchi and Milkie, 'Parenthood and well-being'.

## What we know about young children

There are more than 1.82 million children aged 0 to 5 in Australia. They come from diverse backgrounds, families and circumstances.

For us to achieve better outcomes under the Early Years Strategy, we must start with a deep understanding of early childhood in Australia. This includes:

- ▶ how children are faring
- ▶ the current landscape of the early years
- ▶ the factors that enable children to thrive.

Children today will occupy a very different world to the one that has shaped their parents' lives, and must be prepared to react with resilience and adaptability to what may come.

## How Australia's children are faring

There are many examples of how children are getting a great start in life in Australia.

There are high numbers of children born at a healthy birth weight, and Australia has high levels of childhood immunisation and high participation in preschool.<sup>14</sup>

One way that we measure how children are faring in Australia is through the Australian Early Development Census (AEDC).<sup>15</sup> By measuring the domains of physical health and wellbeing, social competence, emotional maturity, language and cognitive skills, communications skills and general knowledge, the AEDC provides an indication of how young children have developed by the time they start school.

The latest AEDC (conducted in 2021) shows that the majority of children (54.8%) are developmentally on track on each of the 5 measured domains.<sup>16</sup> This is a slight drop from a high of 55.4% in 2018<sup>17</sup>, with the drop possibly due to the impact of COVID-19. In 2021, 34% of Aboriginal and Torres Strait Islander children starting school were assessed as being developmentally on track in all of the 5 measured domains.<sup>18</sup>

<sup>14</sup> Australian Institute of Health and Welfare, <u>National Perinatal Data Collection</u> annual update 2021 data visualisations [Table 4.2], AlHW, Canberra, 2021 and Department of Health and Aged Care, Immunisation Data: Historical coverage [data tables for all children], Canberra, 2023 and Australian Bureau of Statistics, Preschool Education 2022, ABS website, 2023, accessed 31 August 2023.

<sup>15</sup> Australian Early Development Census, <u>Australian Early Development Census National Report 2021</u>, AEDC, 2022, accessed 14 September 2023.

<sup>16</sup> AEDC, Australian Early Development Census National Report 2021.

<sup>17</sup> AEDC, Australian Early Development Census National Report 2021.

<sup>18</sup> AEDC, Australian Early Development Census National Report 2021.

We also know that some children experience adverse events in their lives.

We recognise there are too many children in the child protection system – in 2021–22, about 178,000 children came into contact with the child protection system.<sup>19</sup>

Children may witness domestic and family violence between family members, or be subjected to violence by family members. This can have a range of effects on their health, wellbeing, and social and emotional development.<sup>20</sup> Over the long-term, children who are victims of violence themselves or witnesses of intimate partner violence can be twice as likely to have a psychiatric diagnosis, emotional and behavioural difficulties, and impaired language skills at age 10.<sup>21</sup>

The Australian Child Maltreatment Study has shown that 62% of Australians have experienced a form of child maltreatment. Australians who experience childhood maltreatment (physical abuse, sexual abuse, emotional abuse, neglect and exposure to domestic violence) are substantially more likely to have a mental disorder, engage in health-risk behaviours and use more health services s.<sup>22</sup>

Children may experience mental health disorders either directly or indirectly. The World Health Organization estimates that worldwide, around 8% of children aged 5 to 9 and 14% of adolescents aged 10 to 19 live with a mental health disorder.<sup>23</sup> Up to 1 in 5 children in Australia live with a parent with a mental illness.<sup>24</sup>

There are also pockets of entrenched or persistent disadvantage, and commonly these are concentrated in specific locations.

## Children aged 0 to 5

At 30 June 2022, an estimated 1.82 million children aged 0 to 5 lived in Australia. Boys made up a slightly higher proportion of the population than girls (51% compared to 49%).

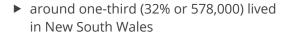
The number of children aged 0 to 5 living in Australia has increased from approximately 1.79 million in 2012.

However, due to sustained low fertility rates and increasing life expectancy, the number of children aged 0 to 5 as a proportion of the entire Australian population has steadily fallen from 7.9% in 2012 to 6.8% in 2023.<sup>25</sup>

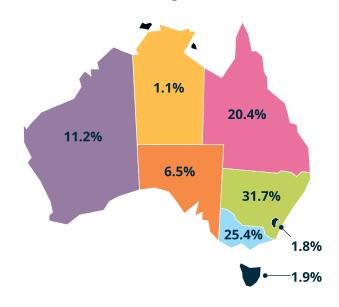
- 19 Australian Institute of Health and Welfare, Child Protection Australia 2021–22 [web report], AIHW, 19 September 2023, accessed 26 September 2023.
- 20 M Campo, <u>Children's exposure to domestic and family violence: Key issues and responses</u> (CFCA Paper No. 36), Child Family Community Australia information exchange, Australian Institute of Family Studies, Melbourne, 2015.
- 21 LJ Conway, F Cook, P Cahir, S Brown, S Reilly, D Gartland, F Mensah and R Giallo, 'Children's language abilities at age 10 and exposure to intimate partner violence in early childhood: results of an Australian prospective pregnancy cohort study', Child Abuse & Neglect, 2021, 111:104794, doi:10.1016/j.chiabu.2020.104794.
- 22 DM Haslam, DM Lawrence, B Mathews, DJ Higgins, A Hunt, JG Scott, MP Dunne, HE Erskine, HJ Thomas, D Finkelhor, R Pacella, F Meinck and E Malacova, 'The Australian Child Maltreatment Study (ACMS), a national survey of the prevalence of child maltreatment and its correlates: methodology', The Medical Journal of Australia, 218(S6):S5–S12, April 2023, doi:10.5694/mja2.51873, accessed 2 February 2024.
- 23 World Health Organization, <u>World mental health report: transforming mental health for all</u>, World Health Organization, Geneva, 2022.
- 24 AIHW, Australia's children, Cat. no. CWS 69, AIHW, Canberra, 2020, accessed 25 October 2023.
- 25 ABS, National, state and territory population, June 2023 [key statistics], ABS website, 2023, accessed 2 February 2024.

### Where children live

Children aged 0 to 5 typically live with their families, and so their geographic distribution will generally be similar to that of all Australians. In 2023, of all children aged 0 to 5:



- one-quarter (25% or 465,000) lived in Victoria
- ► one-fifth (20% or 370,000) lived in Queensland
- ▶ 11% (206,000) lived in Western Australia
- ▶ 7% (118,000) lived in South Australia
- ▶ 2% (35,000) lived in Tasmania
- ➤ 2% (32,000) lived in the Australian Capital Territory
- ► 1% (21,000) lived in the Northern Territory.<sup>26</sup>



In 2021, most children aged 0 to 5 lived in major cities (73% or 1.33 million), with 17% (315,000) living in inner regional areas, 8% (141,000) living in outer regional areas and 2% (42,000) living in remote and very remote areas.<sup>27</sup>

## Children's backgrounds

In 2021, 6% (or around 104,000) of children aged 0 to 5 were Aboriginal and Torres Strait Islander children. Approximately 13% of the Aboriginal and Torres Strait Islander population was aged 0 to 5, compared with 6.8% of the non-Indigenous population.<sup>28</sup>

In 2021, just over 3% (around 59,300) of children aged 0 to 5 were born overseas. More than one-quarter (27% or around 473,000) of children aged 0 to 5 had both parents born overseas, while another 17% (around 302,000) had one parent born overseas.

In 2021, almost three-quarters of children aged 0 to 5 (72% or 1.272 million) used English at home, while around one-fifth (21% or around 381,000) spoke a language other than English at home.<sup>29</sup>

In 2021, almost 14,800 children aged 0 to 5 were permanently settled in Australia, including around 520 who arrived in Australia under the humanitarian program for refugees and others in refugeelike situations.<sup>30</sup>

<sup>26</sup> ABS, National, state and territory population, June 2023 [key statistics].

<sup>27</sup> ABS, Regional population by age and sex, 2022, obtained by data request on 9 September 2022.

<sup>28</sup> ABS, Census of Population and Housing, [Tablebuilder], 2021, produced by AIHW on request.

<sup>29</sup> ABS, Census of Population and Housing. Approximately 7% (125,000) were not stated or not classifiable.

<sup>30</sup> Department of Home Affairs, Settlement reports, 2023, accessed 25 August 2023.

### Child safety

A 2021 national survey found that 62.2% of Australians aged 16 or older reported experiencing one or more form of child maltreatment in childhood. Of this:

- ▶ 32% experienced physical abuse as a child
- ▶ 28.5% experienced child sexual abuse, with just over half of those being abused by another child aged under 18
- ▶ 30.9% experienced emotional abuse as a child
- ▶ 8.9% experienced childhood neglect
- ▶ 39.6% had been exposed to domestic violence as a child.<sup>31</sup>

### Substantiations of child protection notifications

In 2021–22, around 16,200 children aged 0 to 4 (including unborn children) were subjects of substantiated maltreatment.

Between 2019–20 and 2021–22, the rate of children aged 0 to 4 (including unborn children) who were subjects of substantiated maltreatment, decreased from 11.7 to 10.7 per 1,000 children.<sup>32</sup>

### Out-of-home care

At 30 June 2022, around 9,700 children aged 0 to 4 were in out-of-home care.

Between 30 June 2020 and 30 June 2022, the rate of children aged 0 to 4 who were in out-of-home care remained relatively stable for all children, from 6.7 to 6.4 per 1,000 children.<sup>33</sup>

### **Domestic violence**

An estimated 2.6 million people aged 18 years and over (13%) witnessed violence towards a parent by a partner before the age of 15.<sup>34</sup>

<sup>31</sup> B Mathews, R Pacella, et al., 'The prevalence of child maltreatment in Australia: findings from a national survey'.

<sup>32</sup> AIHW, analysis (2019–20 to 2021–22) Child Protection Australia, [Table S3.6 & P2], produced by AIHW on request.

<sup>33</sup> AIHW, analysis (2019–20 to 2021–22) Child Protection Australia, [Table S5.5 & P4], produced by AIHW on request.

<sup>34</sup> ABS, <u>Personal Safety Australia</u>, ABS website, 2021–22, accessed 5 September 2023.

## What we know about families

The Australian Bureau of Statistics (ABS) defines a family as 2 or more persons, one of whom is at least 15 years of age, who are related by blood, marriage (registered or de facto), adoption, step or fostering, and who usually live in the same household.<sup>35</sup> This definition may not always align with how a child defines their family, and it may not align with the concept of a family for Aboriginal and Torres Strait Islander Australians.

In 2021, 81% (around 1.4 million) of children aged 0 to 5 lived in couple families, slightly higher than in 2011 (76%) and 2016 (79%). About 13% (around 228,000) of children lived in one-parent families in 2021, while for another 6% (around 107,000) of children, family composition was other or not defined.<sup>36</sup>

The majority of children aged 0 to 5 living in couple families in 2021 lived with their *natural or adopted parents* (90% or around 1.3 million):

- ▶ 5.6% (around 80,400) lived in **blended families** a family with at least one child of both partners (natural or adopted) and at least one stepchild
- ▶ 3.8% (around 54,300) lived in **stepfamilies** a family with at least one stepchild and no natural or adopted children.

Children living in one-parent families, blended or stepfamilies may live according to shared-care arrangements agreed between their original parents; however, no nationally consistent data is available on these arrangements. Less than 1% of children in couple families lived in other arrangements, such as grandparent families and families with foster children only.<sup>37</sup>

In 2021, approximately 7,800 (0.4%) children aged 0 to 5 lived with a same-sex parent couple. The number of children living with a same-sex parent couple has almost doubled since 2016 (from approximately 4,300 children).<sup>38</sup>



<sup>35</sup> ABS, <u>2901.0 - Census Dictionary</u>, ABS website, 2011, accessed 16 June 2023.

<sup>36</sup> ABS, Census of Population and Housing, [Tablebuilder], 2011, produced by AlHW on request.

<sup>37</sup> ABS, Census of Population and Housing.

<sup>38</sup> ABS, Census of Population and Housing.

### Strong families and proud in culture

Across Australia, many Aboriginal and Torres Strait Islander families and communities are successfully supporting and nurturing their young children. Yet wide gaps in early childhood development outcomes persist.<sup>39</sup>

We know relationships with community, kin, caregivers and Country are important. They are often the first relationships Aboriginal and Torres Strait Islander children have outside the home.

The Early Years Strategy supports the Closing the Gap early years outcome areas:



Outcome area 1: Aboriginal and Torres Strait Islander people enjoy long and healthy lives.



Outcome area 2: Aboriginal and Torres Strait Islander children are born healthy and strong.



Outcome area 3: Aboriginal and Torres Strait Islander children are engaged in high-quality, culturally appropriate early childhood education in their early years.



Outcome area 4: Aboriginal and Torres Strait Islander children thrive in their early years.



Outcome area 12: Aboriginal and Torres Strait Islander children are not overrepresented in the child protection system.



Outcome area 13: Aboriginal and Torres Strait Islander families and households are safe.

<sup>39</sup> Productivity Commission, <u>Closing the Gap Socioeconomic Outcome Area 4 Aboriginal and Torres Strait</u> <u>Islander children thrive in their early years</u> [Dashboard], Productivity Commission, Australian Government, accessed 25 October 2023.



## Housing and labour force status

### **Housing stress**

In 2021, 18% (around 316,000) of children aged 0 to 5 were living in households with housing costs (mortgage repayments or rent payments) that were above 30% of their household income.<sup>40</sup>

### Homelessness

In 2021, 0.5% (almost 9,000) children aged 0 to 5 were homeless.41

### Labour force status

A family's economic situation is closely related to the labour force status of the individuals within the household. Family joblessness can affect children by reducing a family's overall financial security and economic wellbeing. Joblessness denies families an important income stream, and the associated financial constraints can increase financial stress and reduce parental investment in children's needs, such as education, food and housing.

In 2022, around 89% of families with a youngest child aged 0 to 4 had one or more parent employed, and around 9% of families had no parent employed.<sup>42</sup>

<sup>40</sup> ABS, Census of Population and Housing.

<sup>41</sup> ABS, Census of Population and Housing.

<sup>42</sup> ABS, Labour Force Status of Families, [Tablebuilder], 2022, produced by AIHW on request.

## What we know about the antenatal period

The foundations for good health start during the antenatal period and the first years of life. Maintaining a healthy lifestyle during pregnancy contributes to better outcomes for the baby and the mother.<sup>43</sup>

## Smoking during pregnancy

In 2021, the majority of women who gave birth (around 92%) reported not smoking during the first 20 weeks of their pregnancy, while around 8% (around 25,600) of women did report smoking during the first 20 weeks of their pregnancy. Between 2011 and 2021, the proportion of women who smoked during the first 20 weeks of pregnancy fell from 13% (around 37,700) to 8% (25,600).<sup>44</sup>

In 2021, of those women who reported smoking during their pregnancy, 72% reported that they continued smoking after the first 20 weeks. Between 2011 and 2021, the proportion of women who continued smoking after the first 20 weeks of pregnancy rose from 70.8% to 72.4%. However, over this time, the total number who continued to smoke decreased from around 26,700 to 18,500.45

## Drinking alcohol during pregnancy

In 2021, the majority of women who gave birth (around 97%) reported not consuming alcohol during the first 20 weeks of their pregnancy, while around 3% (around 5,565) of women did report consuming alcohol during the first 20 weeks of their pregnancy.<sup>46</sup>

### Antenatal care

In 2021, around 80% of women (or 246,000) attended antenatal care visits in their first trimester. The number has increased from around 188,000 (or 66%) in 2011. Young women (aged less than 25), Aboriginal and Torres Strait Islander women, women living in remote or very remote areas, and women from the lowest socioeconomic areas were less likely to attend antenatal care in the first trimester.<sup>47</sup>

<sup>43</sup> AIHW, Australia's children.

<sup>44</sup> AIHW, National Perinatal Data Collection annual update 2021, [Data sets], AIHW website, 2021, accessed 16 August 2023.

<sup>45</sup> AIHW, National Perinatal Data Collection annual update 2021.

<sup>46</sup> AIHW, National Perinatal Data Collection annual update 2021.

<sup>47</sup> AIHW, National Perinatal Data Collection annual update 2021, [Table 2.1], AIHW website, 2021, accessed 16 August 2023.

## What we know about births and infants Births

In 2022, there were 300,684 registered births in Australia, a slight decrease from 2021 when there were 309,996 birth registrations. Aboriginal and Torres Strait Islander children accounted for 7.6% of registered births in 2021.<sup>48</sup>

In 2022, the total fertility rate was about 1.63 babies per woman, which is similar to the 2020 rate (1.7 babies per woman). Overall, the total fertility rate has been declining since 2012 when it was 1.9 babies per woman.<sup>49</sup>

In 2022, the median age of mothers was 31.9 years, and the median age of fathers was 33.7 years. The median age of parents has generally increased since the 1970s. In 1975, the median age of mothers was 25.8 years, and the median age of fathers was 28.6 years.<sup>50</sup>

In 2021, women aged under 25 who gave birth accounted for 11% (34,387) of all births.<sup>51</sup> Many young mothers access antenatal care in the first trimester (68%) and have more than 5 antenatal visits (91%).<sup>52</sup>

The health of a baby at birth is a key determinant of subsequent health and wellbeing. Low birthweight has been associated with increased risk of coronary heart disease, diabetes, hypertension and stroke in adulthood. Following birth, breastfeeding is a protective factor that reduces infant mortality, protects against illnesses, and helps develop a baby's microbiome.<sup>53</sup>

In 2021, the majority of live-born infants had a healthy birthweight (92%) compared with around 6.3% (19,600) born with low birthweight. There has been very little change in the proportion of children with low birthweight since 2011.<sup>54</sup>



<sup>48</sup> ABS, Births, Australia [key statistics], ABS website, 2022, accessed 3 February 2024.

<sup>49</sup> ABS, Births, Australia.

<sup>50</sup> ABS, Births, Australia.

<sup>51</sup> AIHW, Australia's mothers and babies: Maternal age, AIHW website, 2023, accessed 3 February 2024.

<sup>52</sup> AIHW, Australia's mothers and babies: Focus population groups, AIHW website, 2023, accessed 16 January 2024.

<sup>53</sup> AIHW. Australia's children.

<sup>54</sup> AIHW, National Perinatal Data Collection annual update 2021, [Table 4.2], AIHW website, 2021, accessed 3 February 2024.

## Breastfeeding

Breastfeeding is a known protective factor for infant health and wellbeing, and it supports bonding between mother and baby.

In 2020–21, of infants aged 0 to 3 years:



4 out of 5 (80%) received breast milk at 4 months old



almost three-quarters (74%) received breast milk at 6 months old



around half (51%) received breast milk to 12 months old.55

In 2020-21, 66% of infants aged 0 to 3 exclusively breastfed at 4 months, and 35% at 6 months.<sup>56</sup>

### Infant mortality rate

In 2022, the mortality rate for infants aged less than one was 3.2 per 1,000 live births. The infant mortality rate has decreased from 2011 (3.8 per 1,000 live births).<sup>57</sup>

<sup>55</sup> AIHW, Australia's mothers and babies: Breastfeeding, [Figure 1], AIHW website, 2023, accessed 3 February 2024.

<sup>56</sup> AIHW, Australia's mothers and babies: Breastfeeding, [Figure 2], AIHW website, 2023, accessed 3 February 2024.

<sup>57</sup> ABS, <u>Deaths, Australia</u>, 2022, ABS website, 2021, accessed 3 February 2024.

## What we know about early childhood health and wellbeing

### Preterm births

Preterm birth is associated with perinatal mortality, long-term neurological disability, admission to neonatal intensive care, severe morbidity in the first weeks of life, prolonged hospital stay after birth, readmission to hospital in the first year of life, and increased risk of chronic lung disease.

In Australia in 2021, 8.2% of births were preterm (less than 37 weeks gestation). The proportion of babies born between 20 and 36 weeks has remained steady since 2011 (8.3%).

While almost 1 in 5 (17%) babies required admission to Special Care Nursery (SCN) or Neonatal Intensive Care Unit (NICU), babies were more likely to require admission if they were born preterm (77%).

In 2021, spontaneous preterm labour or rupture of membranes accounted for 15% of perinatal deaths and 35% of neonatal deaths.<sup>58</sup>

### **Immunisation**

As children grow, immunisation protects them from harmful, and potentially fatal, diseases.<sup>59</sup>

In 2022, the proportion of children who were fully immunised was:



<sup>58</sup> AIHW, Australia's mothers and babies: Gestational age, AIHW website, 2023, accessed 3 February 2024.

<sup>59</sup> AIHW, Australia's children: Immunisation, AIHW website, 2023, accessed 3 February 2024.

<sup>60</sup> Department of Health and Aged Care, Immunisation Data: Historical coverage.

## Children with disability

In 2018, around 57,800 (3.7%) of children in Australia aged 0 to 4 were estimated to have disability, of whom around 36,000 (2.3%) were estimated to have a severe or profound disability. A higher proportion of boys (4.8%) were estimated to have a disability than girls (2.7%).<sup>61</sup>

Higher prevalence of disability in boys than girls is also reflected in National Disability Insurance Scheme (NDIS) participation rates, with around 12% of 5- to 7-year-old males and 5% of 5- to 7-year-old females having an NDIS plan.

At 30 September 2023, there were around 151,000 children aged under 9 with an NDIS plan comprising a package of reasonable and necessary supports. This was approximately 23% of all active participants with an NDIS plan. Around 104,000 of these children were aged between 0 to 6 years (68.8%).

A further 17,200 children aged under 9 were supported by the NDIS-funded early childhood approach, of which around 16,500 (96%) were accessing early connections, that is, early childhood interventions that are available for children with developmental delay or a disability without requiring a diagnosis.<sup>62</sup>

## Child mortality rate

In 2022, the mortality rate among children aged 0 to 4 was 0.8 per 1,000 children. The rate has decreased from 0.9 per 1,000 in 2011.<sup>63</sup>

### Child mental health

There are multiple risk factors for childhood mental illness, including genetic predisposition, individual personality factors, family factors (including parents with mental illness) and adverse childhood experiences.<sup>64</sup>

Up to 1 in 5 children in Australia have a parent with a mental illness. 65

Among children aged 5 to 14, mental disorders make up 3 of the 5 leading causes of the total burden of diseases for children in Australia.<sup>66</sup>

The World Health Organization estimates that worldwide, around 20% of children and adolescents suffer from a mental health condition and that mental disorders are likely to become the leading cause of morbidity and mortality by 2030.<sup>67</sup>

- 61 AIHW, Microdata: Disability, Ageing and Carers, Australia, [Tablebuilder], 2018, by AIHW on request.
- 62 National Disability Insurance Scheme, <u>Quarterly report to disability ministers</u> for Q1 of Y11, NDIS, 2023, accessed 2 February 2024.
- 63 ABS, Deaths, Australia, Data explorer dataset (Deaths, Year of registration, Age at death, Age-specific death rates, Sex, States, Territories and Australia), [Tablebuilder], 2023, produced by AIHW on request.
- 64 National Scientific Council on the Developing Child, <u>Establishing a Level Foundation for Life: Mental Health Begins in Early Childhood</u>, Working Paper 6 [Updated Edition], Center on the Developing Child, Harvard University, 2008/2012.
- 65 AE Reupert, DJ Maybery and NM Kowalenko, 'Children whose parents have a mental illness: prevalence, need and treatment', The Medical Journal of Australia, MJA Open 2013, 1 Suppl 1:7–9.
- 66 AIHW, Australia's children.
- 67 World Health Assembly, 65, Global burden of mental disorders and the need for a comprehensive, coordinated response from health and social sectors at the country level: report by the Secretariat, World Health Organization, 2012, accessed 20 October 2023.

## Fruit and vegetable consumption

In 2020–21, over 8 in 10 (85%) children aged 2 to 4 met the recommendations for daily fruit consumption. Just over 1 in 5 (21%) children aged 2 to 4 met the recommended guidelines for vegetable consumption.<sup>68</sup>

## Sugar sweetened drinks

Over 9 in 10 (91%) children aged 2 to 4 did not usually consume sugar sweetened or diet drinks. Nearly 1 in 10 (9%) children aged 2 to 4 usually consumed sugar sweetened or diet drinks on at least a weekly basis.<sup>69</sup>

## Play, early learning and care

In 2022, a poll among children aged 1to 5 who played most days of the week indicated:

- ▶ 44% played outside at home in the front or back yard on at least 4 days a week
- ▶ 45% played outside away from home on at least 4 days a week
- ▶ 71% played inside not using a digital device on at least 4 days a week
- ▶ 27% played inside using a digital device (e.g. iPad, computer or phone) on at least 4 days a week.<sup>70</sup>

Early **home learning** experiences in the first 3 years of life are important because for most children, the home is the main influence on child language and cognitive development.

Women tend to spend more time caring for children, and less time on employment-related activities, compared to men. More female parents of children under 15 years participate in childcare activities than male parents (89% compared to 73%). Female parents spent 3 hours 34 minutes per day participating in childcare activities, compared to 2 hours 19 minutes per day for male parents.<sup>71</sup>

### Research shows:

- ▶ 54% of children are 'always or usually' cared for by the mother
- ▶ 37% of children are equally cared for between the mother and father
- ▶ 11% of children are always or usually cared for by the father.<sup>72</sup>

<sup>68</sup> ABS, National Health Survey 2020–2021, Australia, [Table 10.1, 10.3], 2022, produced by AIHW on request.

<sup>69</sup> ABS, National Health Survey 2020–2021, Australia.

<sup>70</sup> The Royal Children's Hospital National Child Health Poll, <u>Australian families: How we play, Poll Number 28</u>, The Royal Children's Hospital Melbourne, Parkville, Victoria, 2022.

<sup>71</sup> ABS, How Australians Use Their Time, ABS website, 2020–21, accessed 13 October 2023.

<sup>72</sup> K Hand, J Baxter, M Carroll and M Budinski, <u>Life during COVID-19: Early findings</u> (Families in Australia Survey report), Australian Institute of Family Studies, AIFS website, 2020, accessed 22 September 2023.

### Early education settings

Early education settings, such as early childhood education and care, which includes preschools, centre-based day care, in-home care and family day care, along with other community settings such as playgroups and libraries, provide opportunities for children to grow and learn.

When children attend early childhood education and care settings, they have opportunities to learn through play, and socialise with other children, facilitated and extended by qualified educators and teachers.<sup>73</sup> This includes the recently updated and approved *early years curriculum*, the Early Years Learning Framework.

For Aboriginal and Torres Strait Islander children, early childhood education and care services also provide an opportunity for them to strengthen their cultural identity and sense of belonging within their communities. Aboriginal and Torres Strait Islander community-controlled organisations play a critical role in delivering early childhood education and care services that meet the needs of children and families.

Early childhood education helps to enhance children's learning at this critical stage to create a foundation for lifelong learning, skill development and wellbeing. The Experiences at preschool, underpinned by the early years curriculum, help children to develop their vocabulary, communication skills, maths skills and problem-solving abilities, as well as the ability to concentrate, follow instructions and get along with others – skills that are critical to later success. The stage of the stage

Studies highlight that early childhood education breaks down the barriers to educational success faced by children in disadvantaged circumstances, making sure they have basic skills they need for life.



<sup>73</sup> Australian Children's Education and Care Quality Authority, <u>Standard 1.2 Practice – Case study 1</u>, ACECQA website, n.d., accessed 24 October 2023.

<sup>74</sup> OECD, Starting Strong 2017: Key OECD Indicators on Early Childhood Education and Care, OECD Publishing, Paris, 2017.

<sup>75</sup> D Phillips, et al., <u>Puzzling it out: The current state of scientific knowledge on pre-kindergarten effects – A consensus statement</u>, Brookings Institution, Washington DC, 2017, accessed 3 February 2024.

### Attendance at early childhood education and care

In the September quarter 2023, 49% (or around 911,000) of children aged 0 to 5 attended Australian Government subsidised early childhood education and care. This was consistent with proportions over the previous 12 months (ranging from around 48% to 49%).<sup>76</sup>

Between the September quarter 2020 and the September quarter 2023, use of early childhood education and care has been consistently highest for children aged 3 (between 60% to 68%) and lowest for children aged less than one (between 6% to 12%).<sup>77</sup>

In the September quarter 2023, 49% (or around 911,000) of children aged 0 to 5 attended Australian Government subsidised early childhood education and care.

The quality of education and care services has consistently risen in recent years, with 91% of the 17,424 approved early childhood education and care services in Australia meeting or exceeding the control of the cont

education and care services in Australia meeting or exceeding the National Quality Standards at 1 October 2023, up from 56% in 2013.<sup>78</sup>

### **Preschool participation**

In 2022, out of an estimated population of 319,000 children in the year before full-time school, about 284,000 children (approximately 89%) were enrolled in a preschool program and over 275,900 (approximately 86%) were enrolled for 600 hours or more.<sup>79</sup>

Children were most commonly enrolled in preschool programs in centre-based day care (around 47% or 134,000), followed by dedicated preschools (around 39% or 110,000). Around 14% or 40,100 were enrolled across both service types.

In 2022, out of an estimated population of 19,200 Aboriginal and Torres Strait Islander children, in the year before full-time school about 18,900 children (approximately 99%) were enrolled in preschool and 18,400 (approximately 96%) were enrolled for 600 hours or more. Aboriginal and Torres Strait Islander children were most commonly enrolled in dedicated preschools (49% or 9,200), followed by preschool programs in centre-based day care (39% or 7,400). Around 13% or 2,400 were enrolled across both service types.<sup>80</sup>

<sup>76</sup> Department of Education, Child Care Subsidy, September quarter 2023 data tables, 2023.

<sup>77</sup> Department of Education, Child Care Subsidy, September guarter 2023 data tables.

<sup>78</sup> ACECQA, National Quality Framework Snapshot Quarter 2, ACECQA, 2023, accessed 2 February 2024.

<sup>79</sup> ABS, Preschool Education methodology, 2022, ABS website, accessed 19 January 2024.

<sup>80</sup> ABS, Preschool Education 2022.

## The best start for children

The Early Years Strategy recognises that children grow and develop in the context of their families, kin, communities and society. Action to improve outcomes for young children must encompass all of these spheres.

A child's development is shaped by the people and relationships, communities, cultures and society that surround them.<sup>81</sup> Children are part of Australia's social ecology, and we recognise they affect, and are affected by, a complex range of social and environmental interactions (see Figure 1).

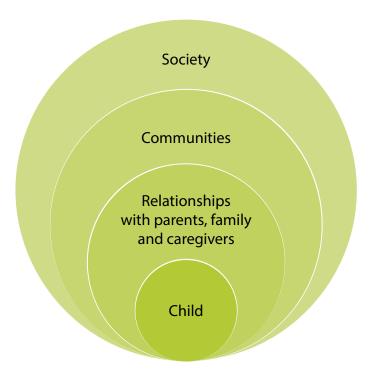


Figure 1: Social ecology of child development

<sup>81</sup> U Bronfenbrenner and PA Morris, 'The Bioecological Model of Human Development', in RM Lerner and W Damon (eds.), Handbook of child psychology; Vol. 1: Theoretical models of human development (pp.793–828), John Wiley & Sons, Inc, New York, 2006.

### Positive protective factors

Children's development can be conceptualised like a scale, with positive, protective factors on one side, and significant adversity or trauma on the other side (see Figure 2). *Adverse* childhood experiences are things that may cause toxic stress.<sup>82</sup> Examples include poverty, exposure to domestic violence or parental substance abuse, discrimination or parental mental illness.

In the early years, the goal is to tip or **stack the scale** in favour of protective factors that can have a positive impact on children and their development and also minimise the impact of any adverse childhood experiences. Over time, the cumulative impact of positive experiences can make it easier to achieve positive outcomes.<sup>83</sup> **Protective factors** can include things like having at least one stable, caring and supportive relationship or connecting with cultural traditions.

When children do not have all they need in their early years, including when they experience greater adversity, this can affect their development.<sup>84</sup>

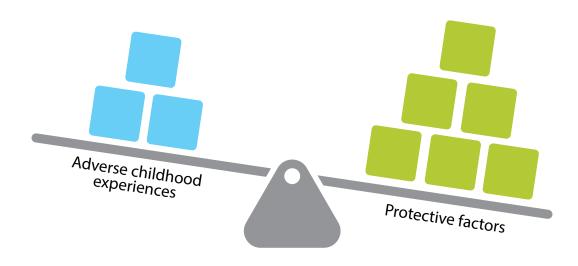


Figure 2: Protective factors scale

All children should have great opportunities right from the start. Yet challenges in early childhood development can occur for a range of *complex* reasons, within a wide range of families and in a wide variety of circumstances. It is important to avoid making *assumptions* about outcomes based only on a child's family background or circumstances.

<sup>82</sup> National Scientific Council on the Developing Child, Excessive Stress Disrupts the Architecture of the Developing Brain, Working Paper No. 3 [Updated Edition], Center on the Developing Child, Harvard University, 2005/2014.

<sup>83</sup> Center on the Developing Child, Resilience, [web page], Harvard University, n.d., accessed 24 October 2023.

<sup>84</sup> D Higgins and A Dean, A population approach to early intervention and prevention, Australian Institute of Family Studies website, 2020, accessed 24 October 2023.

Learning to cope with stress or adversity is a normal part of brain development. The evidence tells us that all children need to experience some *stressors* in their lives to grow healthy brains and build lifelong resilience. The evidence also tells us that when there is too much stress or stress over a prolonged period, this can disrupt healthy brain development and other biological systems, and even weaken the immune system.<sup>85</sup>

We know that some children may experience adversity or adverse events in the early years. Nurturing relationships with trusted adults can buffer a stressful experience, which helps babies and very young children to develop resilience and helps them cope with stress and adversity later in life.

If children do not have a nurturing and responsive relationship with an adult, or if they experience adversity, such as physical or emotional abuse, poverty, or their parent or other primary caregiver experiences serious illness, they can experience the effects of excessive stress.<sup>86</sup>



Overall, poor early childhood experiences can lead to physiological and behavioural changes, including to children's brain development, and can make children more prone to poor long-term outcomes.<sup>87</sup>

This includes being susceptible to impairments in learning, memory and regulating behaviour, and chronic health conditions later in life such as heart disease, diabetes, depression and dementia. Research has found that approximately 80% of young people in juvenile justice settings in Australia have experienced multiple traumatic stressors. Trauma in early childhood can impair school readiness, academic achievement, and both physical and mental health throughout life.

<sup>85</sup> National Scientific Council on the Developing Child, Excessive Stress Disrupts the Architecture of the Developing Brain.

<sup>86</sup> H Monks, J Mandzufas and D Cross, <u>The Impact of Poverty on the Developing Child: A Narrative View</u>, Life Course Centre Working Paper Series, 2022-06, Institute for Social Science Research, The University of Queensland, 2022.

<sup>87</sup> National Scientific Council on the Developing Child, Connecting the Brain to the Rest of the Body: Early Childhood Development and Lifelong Health Are Deeply Intertwined.

<sup>88</sup> National Scientific Council on the Developing Child, Connecting the Brain to the Rest of the Body: Early Childhood Development and Lifelong Health Are Deeply Intertwined.

<sup>89</sup> Royal Australasian College of Physicians, <u>The Health and Wellbeing of Incarcerated Adolescents [PDF 227KB]</u>, Sydney, 2011.

<sup>90</sup> Center on the Developing Child, <u>Early Childhood Mental Health</u>, [web page], Harvard University, n.d., accessed 25 October 2023.

### 'Stacking the scales'

Children thrive when they have what they need to develop well. We know from the science of early childhood development that when protective factors such as responsive relationships and supportive environments are present, children, even those experiencing challenges, are better able to cope and achieve good outcomes.<sup>91</sup>

Strengthening foundational adult relationships by supporting families and communities can prevent early harm and strengthen developing brains, ensuring that a child's early development is on track or, if required, can get back on track, to give them the best start in life.

For example, assisting adults to build the skills necessary for success in parenting and the workplace can protect children from the adverse impact of poverty in early childhood.<sup>92</sup>

Healthy protective behaviours are also important and begin *before* a child is born. Avoiding exposure to smoking or alcohol in pregnancy is a protective factor. Other protective factors include having lots of fruit and vegetables and good mental health.

When the added protection and buffering of protective factors outweighs adversity early in life, children are more likely to complete school education, become lifelong learners, be prepared for adult life with work, family and friends, and be active members of their community.<sup>93</sup>

<sup>91</sup> National Scientific Council on the Developing Child, <u>Place Matters: The Environment We Create Shapes the Foundations of Healthy Development</u>, Working Paper No. 16, Center on the Developing Child, Harvard University, 2023.

<sup>92</sup> H Monks, J Mandzufas and D Cross, The Impact of Poverty on the Developing Child: A Narrative View.

<sup>93</sup> National Scientific Council on the Developing Child, The Timing and Quality of Early Experiences Combine to Shape Brain Architecture.

### Nurturing relationships

The single most important protective factor that helps children develop well and build resilience is having at least one **stable and committed relationship** with a parent, caregiver or other adult.<sup>94</sup>

A child's early relationships, environments and experiences can either support or inhibit their healthy development.<sup>95</sup>

Sensitive and nurturing relationships build foundational language and communication skills, and create secure attachment, which leads to higher levels of cognitive competence and fewer psychological problems. <sup>96</sup> These relationships provide a significant buffer for children when they experience high levels of stress, and contribute to them building resilience. <sup>97</sup>



Children thrive when these relationships are based on a strong connection to their own culture, including the experiences, values and beliefs of their families and their communities. For Aboriginal and Torres Strait Islander children, connection to family, kin, community, culture and Country are critical to their development and wellbeing.

Aboriginal and Torres Strait Islander people have a close relationship and connection to Country, which enables ways of being, learning, knowing and doing. When connection to culture and society is strong, children develop a sense of belonging.<sup>98</sup>

When there is respect and understanding of the importance of Aboriginal and Torres Strait Islander culture and child-rearing practices, this helps to build safe and secure environments for children to develop a strong sense of identity.<sup>99</sup>

Children from multicultural backgrounds also have a rich heritage of their own, and staying connected to their culture can help them thrive.

<sup>94</sup> Center on the Developing Child, <u>3 Principles to Improve Outcomes for Children and Families</u>, Harvard University, 2021.

<sup>95</sup> National Scientific Council on the Developing Child, Early Experiences Can Alter Gene Expression and Affect Long-Term Development.

<sup>96</sup> National Scientific Council on the Developing Child, Young children develop in an environment of relationships.

<sup>97</sup> Center on the Developing Child, Resilience, [web page].

<sup>98</sup> National Indigenous Australians Agency, <u>National Aboriginal and Torres Strait Islander Early Childhood Strategy</u>, NIAA, 2021.

<sup>99</sup> NIAA, National Aboriginal and Torres Strait Islander Early Childhood Strategy.

### Parents and caregivers are a child's first and most important teacher

Relationships are the foundation of positive growth and development for children. One of the most important contributions we can make is to support the foundational relationships that really matter to children in their early years. When we focus on these foundational relationships, children and their parents, families, kin and caregivers get support to do better now and into the future.

Children's first and most important teachers are their parents, families and caregivers, including kinship carers. When adults form special **bonds** with young children and spend time closely interacting with them, children are able to learn about themselves, and their world, including ways to express themselves and communicate.<sup>100</sup>

#### Serve and return

Children, especially as infants and then toddlers, need many positive interactions with responsive caregivers, often called 'serve and return'. There are many ways parents, caregivers and families can build positive and responsive relationships with young children. Similar to a game of tennis, 'serve and return' is when a baby or young child babbles, cries or communicates with gestures or movements, and an adult responds with words, singing or hugging. New neural connections in the brain are built and strengthened, which help develop early communication and social skills. Close *interactions* and *responsiveness* with plenty of 'serve and return' opportunities that are often joyful and fun, create a rich brain-building environment.<sup>101</sup>

Families provide the first learning environment in their homes. There are many 'teachable' moments every day with parents, siblings and other family members. Children learn best when they have access to everyday objects, books and natural materials to investigate and satisfy their curiosity. 102

Children learn and get continuous stimulation through their environment, especially when a responsive adult is talking to them and playing with them. This might be by counting when climbing stairs, predicting the next part of a familiar storybook or by remembering the words and rhythm of songs, which they sing together. Playing simple games with children such as peeka-boo builds strong relationships and creates a sense of belonging and joy.

These simple activities are powerful ways parents, caregivers and families stimulate thinking and imagination, which improves social and emotional skills and helps to build better brains and bodies.<sup>104</sup> Engagement has many positive impacts on children's development and education outcomes.<sup>105</sup>

<sup>100</sup> Raising Children Network, Relationships and child development, [web page], 2023.

<sup>101</sup> National Scientific Council on the Developing Child, Young people develop in an environment of relationships.

<sup>102</sup> JM Zosh et al., <u>Learning through play: a review of the evidence (white paper)</u>, The LEGO Foundation, DK, page 16, 2017.

<sup>103</sup> National Scientific Council on the Developing Child, Young people develop in an environment of relationships.

<sup>104</sup> National Scientific Council on the Developing Child, Young people develop in an environment of relationships.

<sup>105</sup> The Fathering Project, Submission to the Early Years Strategy discussion paper by the Fathering Project, 2023.

### **Communities**

Early childhood environments, including outside the home, also help children thrive.

Communities matter and help shape development in many ways. Physical and social environments have a significant effect on children's developing brains and bodies. 106

The network of people around children and families, including kin, friends, neighbours and educators, has a role in creating positive environments and experiences to support children's health and wellbeing. These broader social supports offer connection, safety and security.<sup>107</sup>

Importantly, communities should be accessible to all children, including to children with disability or developmental delay who should experience *full participation* in all aspects of life. The built and natural environment, for example, affects how children access spaces to play and spend time in nature, in turn influencing their physical, social and emotional health.

All environments children experience, including before they are born, shape their development. This includes good nutrition, dental care, adequate sleep, rest, physical activity, and connection with others.

High-quality antenatal care during pregnancy, and regular antenatal care in the first trimester, is associated with better maternal health in pregnancy, fewer interventions in late pregnancy and positive child health, development and wellbeing outcomes. Good support during pregnancy, birth and the early months and years of a baby's life can improve short- and long-term outcomes for mothers and babies.

Broader economic and social factors, such as economic security, social inclusion, safe and secure housing, and access to high-quality health care are also important.<sup>109</sup>



<sup>106</sup> National Scientific Council on the Developing Child, Place Matters: The Environment We Create Shapes the Foundations of Healthy Development.

<sup>107</sup> National Scientific Council on the Developing Child, Place Matters: The Environment We Create Shapes the Foundations of Healthy Development.

<sup>108</sup> AIHW, Australia's mothers and babies [media release], AIHW, 29 June 2023, accessed 24 October 2023.

<sup>109</sup> Dr R Hutchinson and J Vo-Phuoc, <u>It's not as simple as 'nature or nurture': the impact of socioeconomic influences on children</u>, PWC Australia, n.d., accessed 24 October 2023.

## Investing in young children

Investments in the early years have immediate and direct benefits for children, helping to achieve better outcomes across health, wellbeing, education and other domains. Investments can also help children have a fulfilling childhood with opportunities to experience play, nurturing and connection.

### Better outcomes

Investing in the early years of a child's life sets them up to be a well-functioning and positive contributor to their society. There are also long-term benefits more broadly for individuals, families and communities.

With healthy early childhood development, the building blocks for 'educational achievement, economic productivity, responsible citizenship, lifelong health, strong communities and successful parenting in the next generation', are established. Healthy early childhood development helps to grow citizens who can contribute to Australian society and make us *stronger* as a nation.

Studies over the past few decades in Australia and overseas reinforce what we have known for a long time – investment in the early years is a sound investment in both the lives of children and families today and for the future productivity, prosperity and wellbeing of the nation. Many countries and jurisdictions now have child wellbeing plans in place.

The Effective Provision of Pre-School Education Project found that children from both advantaged and disadvantaged communities are less likely to be developmentally vulnerable if they attended preschool. Those who attend preschool typically outperform their peers in physical, social, cognitive, communicative and adaptive development.<sup>111</sup>

Children who are developmentally on track when they start school are more likely to stay on track, complete school education, get a job and contribute positively to the broader society.

Research conducted in 2019 analysed the economic impact of early childhood education in Australia and found that for every \$1 invested in preschool education, Australia receives \$2 back over a child's lifetime.<sup>112</sup>

A 2010 study found that in Australia, the potential value of future benefits that can be realised as a result of prevention and early intervention is over \$5.4 billion per year.<sup>113</sup>

Significant research in the United States has shown that every \$1 invested in quality early years programs from 0 to 5 years can yield returns of between \$4 and \$16.114

<sup>110</sup> Center on the Developing Child, What is Early Childhood Development? A Guide to the Science (ECD 1.0), Harvard University, n.d.

<sup>111</sup> K Sylva, E Melhuish, P Sammons, I Siraj-Blatchford and B Taggart, 'The Effective Provision of Pre-School Education (EPPE) Project: Findings from Pre-school to end of Key Stage 1', SureStart, 2004.

<sup>112</sup> PWC, A Smart Investment for a Smarter Australia: Economic analysis of universal early childhood education in the year before school in Australia, The Front Project, PwC, 2019.

<sup>113</sup> Department of Social Services, <u>Positive Family Functioning</u>, final report by Access Economics Pty Ltd for Department of Families, Housing, Community Services and Indigenous Affairs, DSS, 2010.

<sup>114</sup> Heckman: The economics of human potential [website], 2023.

### The impact of not investing in the early years

A lack of appropriate and well-targeted investment in early childhood development affects the long-term health and wellbeing of individual children. The consequence of not addressing adverse environments can create *deficits* in skills and abilities. This drives down economic productivity and increases social costs.

Children who do not receive optimal care or stimulation, who are poorly nourished, neglected or abused, can experience physiological and behavioural changes that make them more susceptible to chronic health conditions and mental health disorders later in life, such as heart disease, diabetes, depression and dementia.<sup>115</sup>

Research shows that by Grade 3, children assessed as developmentally vulnerable according to the AEDC are a year behind their peers on NAPLAN (the national literacy and numeracy assessment), and by Grade 5 they are on average 2 years behind. Evidence shows these children are more likely to drop out of education early without the skills they need to go on to tertiary education or vocational training.<sup>116</sup>



Children who experience poverty at some time in their childhood are more likely to have poorer cognitive and social outcomes, to be obese and have lower levels of general health. There are substantial differences in developmental outcomes for children who had experienced persistent poverty, compared to children who were never poor.<sup>117</sup>

Research has established that interventions in the early years, particularly supportive parental relationships and efforts to improve education outcomes, can interrupt disadvantage.<sup>118</sup>

<sup>115</sup> National Scientific Council on the Developing Child, Connecting the Brain to the Rest of the Body: Early Childhood Development and Lifelong Health Are Deeply Intertwined and DM Haslam, et al., 'The association between child maltreatment and mental disorders in the Australian Child Maltreatment Study'.

<sup>116</sup> The Front Project, Supporting all children to thrive: The importance of equity in early childhood education, 2022.

<sup>117</sup> D Warren, Australian Institute of Family Studies, Social Policy Research Paper No. 47, Low Income and Poverty Dynamics Implications for Child Outcomes, Commonwealth of Australia, DSS, 2017.

<sup>118</sup> F Perales, A Higginson, J Baxter, M Western, S Zubrick and F Mitrou, <u>Intergenerational Welfare Dependency in Australia: A Review of the Literature</u>, Life Course Centre Working Paper Series, 2014-09, Institute for Social Science Research, The University of Queensland, 2014.

## **Equity**

The Australian Government, through the Early Years Strategy, aspires to do more than just having most children do well. It is about all children thriving.

We want *all Australian children* to enjoy a positive start to life, reach adulthood equipped to meet life's opportunities and challenges, and to realise their own unique potential.



## Children's rights

We respect the human rights of children in Australia. This means that we consider children's views and needs as valuable members of our society. Children should live free from discrimination and harm.

The Early Years Strategy gives life to the *United Nations Convention on the Rights of the Child (UNCRC)*, which recognises that childhood is a special, protected time, in which children must be allowed to grow, learn, play, develop and flourish with *dignity*.

In support of this UN Convention, the Early Years Strategy is child focused, giving life to its principles that:

- children should not be subject to discrimination
- ► a child's best interests should be a primary consideration when making decisions that affect them
- ▶ the rights of children to survival and development should be protected
- ▶ the views of the child should be respected.

The Australian Government is also guided by:

- ► the Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, Child Prostitution and Child Pornography (OPSC)
- ► the Optional Protocol to the Convention on the Rights of the Child on Involvement of Children in Armed Conflict (OPAC)
- ▶ the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), which provides a framework that seeks to protect the rights and dignity of people with disability including children and promote their full participation in society, on an equal basis with others; in broad terms, in Australia the UNCRPD is implemented through legislation, policy and programs
- ▶ the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) Australia supports the UNDRIP and shares its underlying commitment to deliver real and lasting improvements for Indigenous peoples and their communities. As a resolution of the United Nations General Assembly, UNDRIP is not a legally binding instrument, but it does carry political and moral weight. Australia gives practical effect to the principles set out in UNDRIP through the development of our domestic policies and programs. Many of the principles set out in UNDRIP reflect, or provide further content to, Australia's obligations under international human rights treaties, including those listed here
- ▶ the International Covenant on Civil and Political Rights (ICCPR)
- ▶ the International Covenant on Economic, Social and Cultural Rights (ICESCR)
- the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW).

**Australia's Disability Strategy 2021–2031** also plays an important role in protecting, promoting and realising the human rights of people with disability. Under that strategy, there are 5 Targeted Action Plans (TAPs) that commit governments to specific actions to improve outcomes for people with disability. One TAP focuses on children from infancy to school age with disability or developmental concerns, their families and caregivers. This TAP sets out key actions to strengthen early identification, information, supports and pathways, as well as collaboration between programs and services, all of which contribute to the development and wellbeing of children to help them thrive across and between life stages.

## Reducing disadvantage

The results from the AEDC across Australia are mixed. Some children are at risk of not reaching their potential and some children are experiencing higher rates of vulnerability. These experiences intensify when children face intersecting experiences of disadvantage and vulnerability.

A fair outcome for children is about *reducing disadvantage and vulnerability*. Every child should have the same opportunities, right from the start.

There are also pockets of progress in the AEDC results. An example of where improvement has occurred is the number of children who are developmentally vulnerable on one or more AEDC domain(s) who have a language background other than English compared with those children with English only. This gap has steadily narrowed from 10.5 percentage points in 2009 to 4.5 percentage points in 2021.

For Aboriginal and Torres Strait Islander children, the proportion who are on track in all 5 domains is increasing at a faster rate (8.0 percentage points between 2009 and 2021) than the whole population (4.1 percentage points).

Overall, the proportion of Aboriginal and Torres Strait Islander children on track in all 5 AEDC domains rose between 2009 and 2018 (from 26.3% to 35.2%), but then declined slightly to 34.3% in 2021. This is the first time developmental readiness has declined since 2009.

We need collective efforts to support *Aboriginal and Torres Strait Islander children* to be school-ready and thrive, in genuine partnership with Aboriginal and Torres Strait Islander families, kin, stakeholders, communities, and states and territories. The Early Years Strategy aligns with, complements and accelerates existing reforms.

- ► The *National Agreement on Closing the Gap* is a commitment to working in partnership with Aboriginal and Torres Strait Islander people, communities and organisations to implement the policy reform and supports needed to improve early childhood development, health and wellbeing outcomes for Aboriginal and Torres Strait Islander children.
- ► The *National Aboriginal and Torres Strait Islander Early Childhood Strategy* sets out 5 goals for Aboriginal and Torres Strait Islander children, the outcomes to be achieved and opportunities for reform.
- ► The *Early Childhood Care and Development Policy Partnership* co-chaired by SNAICC, National Voice for our Children, and the Australian Government Department of Education provides a forum for governments and First Nations representatives to develop advice on reforms to improve early childhood outcomes for Aboriginal and Torres Strait Islander children and families across early childhood education and care, maternal and child health, and child safety.
- ► The *Early Childhood Care and Development Sector Strengthening Plan* outlines the critical role of Aboriginal and Torres Strait Islander community-controlled organisations in leadership and service delivery to support the safety, wellbeing, health and development of children in their early years.

It is important to note that for some children their development may not be best measured against universal developmental milestones. Children who are not measured as developmentally on track through the AEDC can still reach their *individual potential*. This is where other measures, such as broader measures of wellbeing, can be critical to understanding the true experiences of these children and their families.

### Where children are born and raised

All children deserve a fair outcome, regardless of where they are born or raised. We know that not every community is providing children with the opportunities they need to thrive.

A myriad of factors can affect child development. Some children, families, kin and communities will need different supports at different times in their lives. We know there are times when we need to acknowledge the *unique differences* that exist across Australia's children, families and communities, embrace the *strengths* that these differences bring and *adjust* our approaches to get the best possible outcomes for children.

There are increasing rates of developmental vulnerability the further away a child is from a metropolitan centre. Children from major cities were less likely to be developmentally vulnerable on one or more domains of the AECD (20.8%) compared with children from remote and very remote areas (34.4%).<sup>119</sup>

Children from the most socioeconomically disadvantaged Local Government Areas (LGAs) are less likely to be developmentally on track on all 5 AEDC domains (42.7%) in comparison with those from the least socioeconomically disadvantaged LGAs (63.4%).<sup>120</sup>

The AEDC results show that the gap in developmental vulnerability on one or more domains between the most socioeconomically disadvantaged locations and the least disadvantaged locations has increased, widening to 18.3 percentage points in 2021 from 17.4 in 2018.

We also recognise the unique experience of *Australian Defence Force* families and the children and families of *veterans*. While many defence and veteran families report overall positive wellbeing, the children of defence and veteran families often deal with challenges that are not faced by civilian families, such as frequent relocations, school changes, disruptions to education, loss of social networks, and separation from close family members. Additional concerns may arise during deployment and transition to civilian life, due to worry about the parent's wellbeing and changes in the home environment. There is, for example, evidence of a higher percentage of emotional, hyperactive or peer problems, including an increased vulnerability to behaviour problems among the children of current serving Australian Defence Force members when compared to the general population.<sup>121</sup>

<sup>119</sup> AEDC, Australian Early Development Census National Report 2021.

<sup>120</sup> AEDC, Australian Early Development Census National Report 2021.

<sup>121</sup> D Smart, S Muir and G Daraganova, <u>Transition and Wellbeing Research Program: Family Wellbeing Study, Summary Report</u>, Department of Defence and Department of Veterans' Affairs, Canberra, 2018 and C Tan, <u>Australian Defence Force Families research 2019</u>, Directorate of People Intelligence & Research, 2020.

## References

Australian Bureau of Statistics, 2901.0 - Census Dictionary, ABS website, 2011, accessed 16 June 2023.

Census of Population and Housing, [Tablebuilder], 2011, produced by AIHW on request.

How Australians Use Their Time, ABS website, 2020–21, accessed 13 October 2023.

*National Health Survey 2020–2021, Australia*, [Table 10.1, 10.3], 2022, produced by AIHW on request.

Census of Population and Housing, [Tablebuilder], 2021, produced by AIHW on request.

Deaths, Australia, 2022, ABS website, 2021, accessed 3 February 2024.

Personal Safety Australia, ABS website, 2021–22, accessed 5 September 2023.

Births, Australia [key statistics], ABS website, 2022, accessed 3 February 2024.

Labour Force Status of Families, [Tablebuilder], 2022, produced by AIHW on request.

Preschool Education methodology, 2022, ABS website, accessed 19 January 2024.

Regional population by age and sex, 2022, obtained by data request on 9 September 2022.

Deaths, Australia, Data explorer dataset (Deaths, Year of registration, Age at death, Age-specific death rates, Sex, States, Territories and Australia), [Tablebuilder], 2023, produced by AIHW on request.

*National, state and territory population, June 2023* [key statistics], ABS website, 2023, accessed 2 February 2024.

Preschool Education 2022, ABS website, 2023, accessed 31 August 2023.

Australian Children's Education and Care Quality Authority, <u>Standard 1.2 Practice – Case study 1</u>, ACECQA website, n.d., accessed 24 October 2023.

National Quality Framework Snapshot Quarter 2, ACECQA, 2023, accessed 2 February 2024.

Australian Early Development Census, *Australian Early Development Census National Report 2021*, AEDC, 2022, accessed 14 September 2023.

Australian Institute of Health and Welfare, *Microdata: Disability, Ageing and Carers, Australia*, [Tablebuilder], 2018, by AIHW on request.

analysis (2019–20 to 2021–22) Child Protection Australia, [Table S3.6 & P2], produced by AIHW on request.

analysis (2019–20 to 2021–22) Child Protection Australia, [Table S5.5 & P4], produced by AIHW on request.

Australia's children, Cat. no. CWS 69, AIHW, Canberra, 2020, accessed 25 October 2023.

*National Perinatal Data Collection* annual update 2021 data visualizations [Table 4.2], AIHW, Canberra, 2021.

*National Perinatal Data Collection* annual update 2021, [Table 2.1], AIHW website, 2021, accessed 16 August 2023.

National Perinatal Data Collection annual update 2021, [Data sets], AIHW website, 2021, accessed 16 August 2023.

Australia's children: Immunisation, AIHW website, 2023, accessed 3 February 2024.

Australia's mothers and babies [media release], AIHW, 29 June 2023, accessed 24 October 2023.

Australia's mothers and babies: Maternal age, AIHW website, 2023, accessed 3 February 2024.

Australia's mothers and babies: Focus population groups, AIHW website, 2023, accessed 16 January 2024.

Australia's mothers and babies: Breastfeeding, AIHW website, 2023, accessed 3 February 2024.

Australia's mothers and babies: Gestational age, AIHW website, 2023, accessed 3 February 2024.

*Child Protection Australia 2021–22* [web report], AIHW, 19 September 2023, accessed 26 September 2023.

Bronfenbrenner U and Morris PA, 'The Bioecological Model of Human Development', in RM Lerner and W Damon (eds.), *Handbook of child psychology; Vol. 1: Theoretical models of human development* (pp.793–828), John Wiley & Sons, Inc, New York, 2006.

Campo M, *Children's exposure to domestic and family violence: Key issues and responses* (CFCA Paper No. 36), Child Family Community Australia information exchange, Australian Institute of Family Studies, Melbourne, 2015.

Center on the Developing Child, *Resilience*, [web page], Harvard University, n.d., accessed 24 October 2023.

What is Early Childhood Development? A Guide to the Science (ECD 1.0), Harvard University, n.d.

*Early Childhood Mental Health*, [web page], Harvard University, n.d., accessed 25 October 2023.

Inbrief: The Science of Early Childhood Development, Harvard University, 2007.

3 Principles to Improve Outcomes for Children and Families, Harvard University, 2021.

Conway LJ, Cook F, Cahir P, Brown S, Reilly S, Gartland D, Mensah F and Giallo R, 'Children's language abilities at age 10 and exposure to intimate partner violence in early childhood: results of an Australian prospective pregnancy cohort study', *Child Abuse & Neglect*, 2021, 111:104794, doi:10.1016/j.chiabu.2020.104794.

Department of Education, Child Care Subsidy, September quarter 2023 data tables, 2023.

Department of Health and Aged Care, *Immunisation Data: Historical coverage* [data tables for all children], Australian Government, Canberra, 2023.

Department of Home Affairs, Settlement reports, 2023, accessed 25 August 2023.

Department of Social Services, *Positive Family Functioning*, final report by Access Economics Pty Ltd for Department of Families, Housing, Community Services and Indigenous Affairs, DSS, 2010.

Hand K, Baxter J, Carroll M and Budinski M, *Life during COVID-19: Early findings* (Families in Australia Survey report), Australian Institute of Family Studies, AIFS website, 2020, accessed 22 September 2023.

Haslam DM, Lawrence DM, Mathews B, Higgins DJ, Hunt A, Scott JG, Dunne MP, Erskine HE, Thomas HJ, Finkelhor D, Pacella R, Meinck F and Malacova E, '<u>The Australian Child Maltreatment Study (ACMS)</u>, a national survey of the prevalence of child maltreatment and its correlates:

methodology', The Medical Journal of Australia, 218(S6):S5–S12, April 2023, doi:10.5694/mja2.51873, accessed 2 February 2024.

Heckman: The economics of human potential [website], 2023.

Higgins D and Dean A, *A population approach to early intervention and prevention*, Australian Institute of Family Studies website, 2020, accessed 24 October 2023.

Hutchinson Dr R and Vo-Phuoc J, *It's not as simple as 'nature or nurture': the impact of socioeconomic influences on children*, PWC Australia, n.d., accessed 24 October 2023.

Monks H, Mandzufas J and Cross D, *The Impact of Poverty on the Developing Child: A Narrative View*, Life Course Centre Working Paper Series, 2022-06, Institute for Social Science Research, The University of Queensland, 2022.

National Disability Insurance Scheme, *Quarterly report to disability ministers for Q1 of Y11*, NDIS, 2023, accessed 2 February 2024.

National Indigenous Australians Agency, *National Aboriginal and Torres Strait Islander Early Childhood Strategy*, NIAA, 2021.

National Scientific Council on the Developing Child, <u>Young children develop in an environment of relationships</u>, Working Paper No. 1, Center on the Developing Child, Harvard University, 2004.

Excessive Stress Disrupts the Architecture of the Developing Brain, Working Paper No. 3 [Updated Edition], Center on the Developing Child, Harvard University, 2005/2014.

*The Timing and Quality of Early Experiences Combine to Shape Brain Architecture*, Working Paper No. 5, Center on the Developing Child, Harvard University, 2007.

Establishing a Level Foundation for Life: Mental Health Begins in Early Childhood, Working Paper 6 [Updated Edition], Center on the Developing Child, Harvard University, 2008/2012.

*Early Experiences Can Alter Gene Expression and Affect Long-Term Development*, Working Paper No. 10, Center on the Developing Child, Harvard University, 2010.

<u>Connecting the Brain to the Rest of the Body: Early Childhood Development and Lifelong Health Are Deeply Intertwined</u>, Working Paper No. 15, 2020.

Place Matters: The Environment We Create Shapes the Foundations of Healthy Development, Working Paper No. 16, Center on the Developing Child, Harvard University, 2023.

Nomaguchi K and Milkie MA, 'Parenthood and well-being: A decade in review', *Journal of Marriage and Family*, 2020, 82(1), 198–223.

OECD, <u>Starting Strong 2017: Key OECD Indicators on Early Childhood Education and Care</u>, Starting Strong, OECD Publishing, Paris, 2017.

Perales F, Higginson A, Baxter J, Western M, Zubrick S and Mitrou F, <u>Intergenerational Welfare</u>

<u>Dependency in Australia: A Review of the Literature</u>, Life Course Centre Working Paper Series, 201409, Institute for Social Science Research, The University of Queensland, 2014.

Phillips D, et al., <u>Puzzling it out: The current state of scientific knowledge on pre-kindergarten effects – A consensus statement</u>, Brookings Institution, Washington DC, 2017, accessed 3 February 2024.

Productivity Commission, *Closing the Gap Socioeconomic Outcome Area 4 Aboriginal and Torres*Strait Islander children thrive in their early years [Dashboard], Productivity Commission, Australian Government, accessed 25 October 2023.

PWC, A Smart Investment for a Smarter Australia: Economic analysis of universal early childhood education in the year before school in Australia, The Front Project, PwC, 2019.

Radford K, Gould R, Vecchio N and Fitzgerald A, 'Unpacking intergenerational (IG) programs for policy implications: A systematic review of the literature', *Journal of Intergenerational Relationships*, 2018, 16:302–329, doi:10.1080/15350770.2018.1477650.

Raising Children Network, Relationships and child development, [web page], 2023.

Reupert AE, Maybery DJ and Kowalenko NM, 'Children whose parents have a mental illness: prevalence, need and treatment', The Medical Journal of Australia, MJA Open 2013, 1 Suppl 1:7–9.

Royal Australasian College of Physicians, *The Health and Wellbeing of Incarcerated Adolescents* [PDF], Sydney, 2011.

Smart D, Muir S and Daraganova G, <u>Transition and Wellbeing Research Program: Family Wellbeing Study, Summary Report</u>, Department of Defence and Department of Veterans' Affairs, Canberra, 2018.

Sylva K, Melhuish E, Sammons P, Siraj-Blatchford I and Taggart B, '<u>The Effective Provision of Pre-School Education (EPPE) Project: Findings from Pre-school to end of Key Stage 1</u>', SureStart, 2004.

Tan C, <u>Australian Defence Force Families research 2019</u>, Directorate of People Intelligence & Research, 2020.

The Fathering Project, <u>Submission to the Early Years Strategy discussion paper by the Fathering Project</u>, 2023.

The Front Project, *Supporting all children to thrive: The importance of equity in early childhood education*, 2022.

The Royal Children's Hospital National Child Health Poll, *Australian families: How we play*, Poll Number 28, The Royal Children's Hospital Melbourne, Parkville, Victoria, 2022.

Warren D, Australian Institute of Family Studies, Social Policy Research Paper No. 47, *Low Income and Poverty Dynamics Implications for Child Outcomes*, Commonwealth of Australia, DSS, 2017.

World Health Assembly, 65, *Global burden of mental disorders and the need for a comprehensive, coordinated response from health and social sectors at the country level: report by the Secretariat*, World Health Organization, 2012, accessed 20 October 2023.

World Health Organization, *World mental health report: transforming mental health for all*, World Health Organization, Geneva, 2022.

Zosh JM et al., *Learning through play: a review of the evidence (white paper)*, The LEGO Foundation, DK, page 16, 2017.



