

CENTRE FOR COMMUNITY CHILD HEALTH

**SUPPORTING YOUNG CHILDREN AND THEIR FAMILIES:
WHY WE NEED TO RETHINK SERVICES AND POLICIES**

CCCH Working Paper 1

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REASONS WHY CHANGE IS NEEDED

There is evidence that the increasing prosperity that Australia and other developed nations have experienced over the past few decades has not brought with it corresponding increases in psychosocial and health functioning. On the contrary, there is increasing evidence that these are worsening. It has become increasingly apparent that there is need to reconfigure the services we provide to young children and families in order to achieve better outcomes for young children, families and society:

There are ***six main reasons why change is needed:***

- Major social and economic changes – international and local
- Changes in families and in family circumstances
- Service delivery issues – problems in meeting child and family needs
- Worsening developmental outcomes
- New knowledge of factors affecting child development and family functioning
- Evidence of the efficacy and cost effectiveness of early intervention

Major social and economic changes

The first reason why change is needed is because there have been major social and economic changes occurring that create challenges for families, services and governments.

International changes

In developed nations around the world, there have been a number of common social and economic changes over the past two or three decades. These include:

- **Adoption of free market economic policies** – the globalisation of commerce
- **Concurrent rise in general prosperity** – dramatic increases over the last few decades
- **Reduction in government control** over market and in government responsibility for provision of public services
- **Fall in birth rates** – an international phenomenon
- **Increased movement of people** between countries, leading to more diverse societies
- **Globalisation of ideas and culture** – world wide web

Changes in Australian society

There have been corresponding changes in Australian society over the same period. These include:

- **Improvements in general prosperity**

‘ overall economic growth in Australia has gone from being quite modest in the 15 years following 1975 to being relatively rapid in the subsequent 15 years. Together these years of growth have produced impressive levels of general material prosperity, although the benefits of this prosperity have been very unevenly shared. And it has come at a cost that we do not yet fully understand.’ (Richardson and Prior, 2005, p. 2)
- **Widening gap between the rich and the poor** – with consequent social gradient effects on health and well-being

‘Within societies, health is graded by social status. Whether we look at life expectancy or at the frequency of most causes of death and disability, health standards are highest amongst those nearest top of the social ladder -- whether measured by income, education, or occupation -- and lower as we look at each successive step down the ladder.’ (Wilkinson, 2005, p.14)
- **Changes in demographics** - drop in birth rate and decrease in proportion of children in society - from 1:3 in 1977 to 1:4 in 2002 (but with a recent upturn).

Children are less of a social priority – the care of the aged becomes more of a priority and takes up more and more of the public budget. (The old used to be the poorest group in society – now it is single parents with children, followed by large two-parent families).

Those who do not have (and do not intend to have) children may have less of an investment in the future (and therefore less of a concern about what happens to children).

- **Further cultural diversification** – new migrant and refugee groups
- **Changes in employment opportunities and conditions**

Over the past 25 years there has been:

- a decline in men's participation in the labour market and in their employment, and an increase in women's participation and employment
- a large shift away from full-time and towards part-time work
- a rise in the proportion of workers who are employed as casuals
- a rise in long hours of work
- increased inequality in the distribution of pay – pay at the top end has risen faster than pay at the bottom and, especially for men

These changes have come at a cost:

'There is no doubt that the Australian economy has become more efficient at producing a variety of the sorts of things that people want to buy, at a relatively low cost. This is good to people as consumers. But it has achieved this success at the expense of people as workers, parents and citizens. Our economic life is now harsher, more pressured, less forgiving of any shortcomings, more unequal, more insecure. Our very effective economic machine is taking us efficiently in the wrong direction.' (Stanley, Richardson and Prior, 2005)

- **Changes in the cost of housing** as a proportion of income – Australia now has one of the highest rates in the developed world
- **Changes in social mobility**, with consequent weakening of the social infrastructure

It should be noted that the Australian governments of all political persuasions have done (and continue to do) much to protect families from the adverse effects of these social and economic changes.

Changes in families and family circumstances

In addition to the social and demographic changes just outlined, there have been significant changes in families, and in the conditions under which families are raising young children. These have created problems for the existing system of child and family services as well as for governments, and therefore represent a second reason why the service system needs to change.

Changes in families

Families have changed significantly over the past two or three decades - they are more varied in their structure, and more diverse culturally and ethnically:

- Families are smaller – extended families are also smaller – fewer cousins, uncles and aunts
- Childlessness is increasing – more people who neither have children nor intend to have children
- Mother's age at first birth is increasing – from 25 in 1984 to 29 in 2004
- More single parents – due principally to growth in the number of children born mothers without a partner, rather than to marriage or cohabiting breakdowns
- More blended families
- More shared custody arrangements
- More same sex couple families

These changes have important consequences:

- Children are growing up with fewer siblings, as well as smaller extended families
- Because families have fewer children, parents are more intensely concerned about their welfare

Changes in family circumstances

The circumstances in which families are raising young children have also changed:

- More parents are working
- More mothers with babies are working
- More parents are doing shift work and working non-standard hours
- More parents are working longer hours
- More families are jobless
- More children are being raised in poverty

'There is virtually no evidence that increasing the incomes of families that already have a comfortable material standard of living is particularly beneficial to children. But there is plentiful evidence that poverty is harmful.' (Richardson, 2005, p. 122)

The need for parents to work has created a number of tensions that have not yet been satisfactorily resolved:

- Our society has an ambivalent attitude to the relation between parenting and employment. On one hand, it is seen to be highly desirable for parents to be in employment, yet it is also thought to be desirable for parents to be at home caring for their children, especially when they are little.
- Australian employers have not yet made the changes that are necessary to enable people to be good parents without paying a major price in terms of career progress or even current wage.
- 'In total, the workplace has become very hostile to parents, and hence to children. Many men are finding it hard to obtain adequate full-time work and hence to be breadwinners (or even to find a partner). Others, while they have high-paid jobs, find all their energy, attention and time being absorbed by the demands of work, so they have little left to give their children. The picture for women is different, as they have opted to work part-time to enable them to manage children and some paid work. But they pay a high price in terms of their job advancement and the low

incomes they can earn in casual and part-time work.’ (Stanley, Richardson and Prior, 2005)

There are a number of other social changes that have a significant impact on the conditions under which families are raising young children:

- There has been a partial erosion of traditional family and neighbourhood support networks, due to factors such as increased family mobility and the search for affordable housing
- There has been an increase in the number of parents whose own experiences of being parented were compromised, and who therefore have difficulty parenting their own children
- Because families are smaller, people have less exposure to parenting while growing up and therefore have fewer models to draw upon when they tackle the task themselves
- These social changes have also contributed to an undermining of confidence among parents in their ability to raise their children well
- There is no longer a social consensus about the right way to bring up children, or even that there is a single right way
- All these factors have contributed to an increase in the number of families with complex needs
- Overall, parenting young children has become a more complex and more stressful business for many families

Service delivery issues

The third reason why the service system needs to be reconfigured is that, as a result of the social and economic changes already noted, the services themselves are experiencing difficulties meeting the needs of children and families.

Challenges currently facing services for children and families

- The service system is having difficulty providing support to all families who are eligible – many or most forms of service have waiting lists
- Services cannot meet all the needs of families that they do serve
 - no single service is capable of meeting the complex needs of many families
 - these unmet needs may loom larger in the lives of parents than the needs of the child with a developmental or mental health problem.
- Families have difficulty finding out about and accessing the services they need
- Services are often not well integrated with one another and are therefore unable to provide cohesive support to families
- Services have difficulty tailoring their services to meet the diverse needs of families
- Services have difficulty reaching and engaging marginalised families effectively

- Services are typically treatment-oriented rather than prevention- or promotion-focused, and therefore cannot respond promptly to emerging child and family needs
- The service system does not maintain continuous contact with families of young children during the early years
- Many families are isolated and lack supportive personal networks - extended family, friends or other families of young children
- The early childhood field is undervalued and underfunded, and has difficulty attracting and retaining staff
- Many people working with children and families have not had opportunities to learn about recent early childhood research findings
- Many people working with children and families have not been trained in ways of working with families

Systemic issues

In addition to the challenges just listed, there are a number of systemic issues that create difficulties for child and family services.

- Government departments, research disciplines and service sectors tend to work in 'silos', despite there being strong arguments for greater service integration and a 'whole of government' approach to service delivery
- Responsibility for provision of services to young children and their families is spread across three levels of government - federal, state, and local - with different planning processes and funding priorities
- The combined effect of the growth in the numbers of aged people and the decline in the birth rate will be a reduction in the proportion of the population which is working and therefore paying taxes - thus creating a 'welfare squeeze' which reduces the general funds available for services
- Most specialist intervention services are already underfunded, and it is looking increasingly unlikely that they can ever be fully funded in their present forms
- Governments are more concerned about promoting general economic growth than reducing economic disparities, despite evidence of the link between widening social inequalities and worsening developmental outcomes
- Governments spend a disproportionate amount on services for adults and the aged, in comparison to the very young, despite the greater developmental importance of the early years and the greater likelihood of young children living in poverty

It should be acknowledged that the difficulties that services are having in meeting all the needs of all families are not the fault of the services themselves. In many respects, Australia has an exemplary system of child and family support services, and it worked well when society was more homogeneous and the demands upon families were fewer. However, the social and economic changes have greatly altered the circumstances in which families are raising young children, and the traditional forms of service and support have not yet fully adapted to the new environment.

Worsening developmental outcomes

The fourth reason why we need to rethink how best to support families of young children is that outcomes for children and young adults have worsened or are unacceptably high (Perrin, Bloom and Gortmaker, 2007; Stanley, Prior and Richardson, 2005; Richardson and Prior, 2005). Bruner (2004) refers to these as 'rotten outcomes'. (The term 'rotten outcomes' refers to a variety of child and adolescent problems, including infant mortality, low birth weight, child abuse, school dropout, juvenile delinquency, substance abuse, teen parenting, and youth violence.)

This phenomenon has been dubbed 'modernity's paradox':

'A puzzling paradox confronts observers of modern society. We are witnesses to a dramatic expansion of market-based economies whose capacity for wealth generation is awesome in comparison to both the distant and the recent past. At the same time, there is a growing perception of substantial threats to the health and well-being of today's children and youth in the very societies that benefit most from this abundance.' (Keating and Hertzman, 1999)

Similarly, in commenting on mental health outcomes, Rutter (2002) observes:

'Over the course of the last 50 years, there have been tremendous improvements in the physical health of children and in the life expectancy of adults. It is chastening to realize that there have not been parallel improvements in psychological functioning or mental health (Rutter & Smith, 1995). On the contrary, psychosocial disorders in young people have tended to increase in frequency over the last half century. Why has this been so? I would argue that this has to be an answerable question. If we had a proper understanding of why society has been so spectacularly successful in making things psychologically worse for children and young people, we might have a better idea as to how we can make things better in the future.'

This pattern is evident in all developed nations, including Australia:

'In Australia, decades of peace and economic prosperity had failed to translate into improvements in many measures of children's population health and well-being. In some areas, previous gains in health have slowed or have reversed, and there is a real possibility that the current generation of Australian children will not enjoy a better level of health and children than the preceding generation. In other areas, there is an increasing social divide with respect to the available opportunities to participate in the basic social, civic and economic activities of the nation.' (Zubrick, Silburn and Prior, 2005)

One manifestation of this paradox concerns people's well-being. Measures of social well-being used to increase in parallel with wealth as countries got richer during the course of economic development. But now, although rich countries have continued to get richer, measures of well-being have ceased to rise, and some have even fallen

back a little. Since the 1970s or earlier, there has been no increase in average well-being despite rapid increases in wealth (Wilkinson, 2005).

Worsening (or unacceptably high) developmental outcomes in young people include

- *Mental health* - eg. depression, suicide, drug dependence
- *Physical health* - eg. asthma, obesity, diabetes, heart disease
- *Academic achievement* - eg. literacy levels, retention rates, educational outcomes
- *Social adjustment* - eg. employment, juvenile crime

These have been summarised by Stanley, Richardson and Prior (2005) as follows:

- Increasing proportions of our children and youth have complex diseases such as asthma, diabetes, overweight and obesity, intellectual disabilities, and particularly psychological problems such as depression / anxiety, suicide and eating disorders.
- There have been no improvements in the proportions of our children born prematurely or underweight, or in those diagnosed with physical disabilities such as cerebral palsy.
- There have been perceived dramatic increases in a range of behaviour problems such as attention deficit disorder and hyperactivity; dangerous activities such as substance abuse; and the high levels of teenage pregnancies.
- Trends in behavioural and learning outcomes in schools are challenging teachers, and education departments are voicing concern at the levels of social and other problems in schools and how these may affect educational achievement.
- Not all types of juvenile crime have increased, but the most aggressive ones certainly have, such as assault and rape.
- Child abuse and neglect is reported more than ever before, although it may be that the occurrence is not really increasing, but that it is more acceptable to report it.
- Whatever the case, child protection services everywhere are in a state of crisis

Stanley et al note some common patterns in these trends:

- They are occurring at younger and younger ages
- Girls are now involved almost as frequently as boys in activities such as substance abuse, anti-social behaviour and aggressive crime.
- The problems are more severe, more complex, and more difficult to manage than 10-20 years ago.
- The different outcomes between the social levels of the Australian population have not levelled out as anticipated, but instead have become more marked.

Other points regarding developmental outcomes

- The rates of all these poor developmental outcomes have risen or are unacceptably high

- The developmental pathways that lead to each of these outcomes can be traced back to early childhood
- All the poor developmental outcomes identified have associated social and financial costs that cumulatively represent a considerable drain on societal resources (Collins and Lapsley, 2008; Kids First Foundation, 2003; Perrin, Bloom and Gortmaker, 2007)

These worsening outcomes in development and well-being appear to represent an *unintended* consequence of economic policies and practices that in other respects have been outstandingly successful. As Richardson and Prior (2005) have pointed out,

‘... overall economic growth in Australia has gone from being quite modest in the 15 years following 1975 to being relatively rapid in the subsequent 15 years. Together these years of growth have produced impressive levels of general material prosperity, although the benefits of this prosperity have been very unevenly shared. And it has come at a cost that we do not yet fully understand.’

New knowledge of factors affecting child development and family functioning

A fifth reason why we are rethinking how best to support young children and their families is the deepening of our understanding of how children develop and the factors that affect their development. The research findings are far too numerous to elucidate here, but key areas in which our knowledge has grown include the following:

- The nature and significance of the early years (McCartney and Phillips, 2005; Shonkoff and Phillips, 2000)
- The role and significance of relationships in child development (Gerhardt, 2004; National Scientific Council on the Developing Child, 2004a)
- The neurobiology of interpersonal relationships (Cozolino, 2002, 2006; Goleman, 2006; National Scientific Council on the Developing Child, 2004b, 2005; Siegel, 1999, 2001)
- Cumulative impact of multiple risk and protective factors on child functioning (Appleyard, Egeland, van Dulmen and Sroufe, 2005; Durlak, 1998; Shonkoff and Phillips, 2000)
- The interplay between genes and environment (Ridley, 2003; Rutter, 2006)

The growth in our understanding of family and community functioning has also been considerable, if less dramatic. Key findings include

- The relationship between parenting practices and child development (Barlow, Parsons and Stewart-Brown, 2005)
- Cumulative impact of multiple risk and protective factors on family functioning (Ghate and Hazel, 2002)

- The importance of social support for parental and family functioning (Cochran and Niego, 2002; Cooper, Arber, Fee and Ginn, 1999; Crnic and Stormshak, 1997; Thompson and Ontai, 2000)
- The prevalence of social gradient effects (Hertzman, 1999; Marmot, 2005; Wilkinson, 2005)
- The role of social capital (Coleman, 1988; Cox, 1995; 2002; OECD, 2001)

Efficacy of early intervention and the importance of the early years

The final reason why change is needed comes from the accumulating evidence of the long-term efficacy of early intervention and the economic benefits to be gained from investments in the early years. Again, there is only time to list a few of these findings:

- Long term effects of early childhood and early childhood intervention programs (Guralnick, 1997; Karoly, Greenwood, Everingham, Houbé, Kilburn, Rydell, Sanders and Chiesa, 1998; Karoly, Kilburn and Cannon, 2005)
- Cost effectiveness of early childhood and early childhood intervention programs (Galinsky, 2006; Karoly and Bigelow, 2005; Melhuish, 2003)
- The effectiveness of parenting interventions (Barlow, Parsons and Stewart-Brown, 2005; Moran, Ghate and van der Merwe, 2004)
- Benefits of investments in the early years (Cunha, Heckman, Lochner and Masterov, 2005; Heckman and Masterov, 2004; Lynch, 2004; Rolnick and Grunewald, 2003)

Together, the six factors just outlined - social and economic changes, changes in families and family circumstances, service delivery issues, worsening developmental outcomes, new knowledge of factors affecting child development and family functioning, and evidence of the efficacy of early intervention - make a powerful argument for rethinking how we deliver early childhood and family support services.

WHAT TO CHANGE

What form should this change take? There are three main ways in which change is needed: we need more supportive communities, better coordinated services, and improved forms of dialogue between communities and services.

- **More supportive communities.** As a result of the pervasive economic, social and demographic changes that have occurred over the past few decades, there has been a partial erosion of traditional family and neighbourhood support networks. This has left a greater proportion of parents of young children with relatively poor social support networks and therefore more vulnerable. The evidence regarding the importance of social support and social connectedness strongly suggests that one way in which we could address this problem is by providing families of young children with multiple opportunities to meet other families of young children.

- **Better co-ordinated services.** In the light of the difficulties that services have in meeting all the needs of all families effectively, the service system needs to become better integrated, so as to be able to meet the multiple needs of families in a more seamless way. We need to turn the system around so that it puts the customer first, tailoring our services to the needs and circumstances of families rather than the needs of professionals and bureaucracies.
- **Improved forms of dialogue between communities and services.** For the service system to become more responsive to the emerging needs of young children and families, we need better ways of communicating, more constant feedback. This needs to occur at all levels, involving service providers in their dealings with individual families, agencies with their client groups, and service systems with whole communities. For individual professionals, this means using a service philosophy based on family-centred and strength-based practices as well as needs-assessment procedures and tools that regard parent input as being as important as professional input. For service systems, it means developing skills in talking to communities of families – in other words, community-centred practice.

One way in which the service system will need to shift is from targeted and treatment approaches to a universal prevention approach to service provision (CCCH, 2006). In the existing system, targeted and treatment services are mostly located separately from universal services; there are referral ‘bottlenecks’ that result in delays in help being provided; and the communication between services tends to be one way. Services are having difficulties meeting the needs of all children and families effectively because they are too dependent upon scarce specialist services. The answer is not simply to increase funding for targeted and treatment services (such as early childhood intervention services) in their current forms. First, given the range of services that would need additional funding (which includes health, mental health, disability, special education, family support, parenting, child protection services etc.), the cost would be prohibitive. Second, the evidence would suggest that the targeted approach is not the most efficient and effective way of meeting the needs of all children and families, or even those of the most vulnerable children and families for whom they are intended.

The existing service system of universal, targeted and treatment services needs to be reconfigured as an integrated and tiered system of secondary and tertiary services, built upon a strong base of universal and primary services (CCCH, 2006). Secondary and tertiary services are similar to targeted and treatment services in that they provide direct services to children and families with problems and conditions that are either mild or moderate (secondary services) or chronic, complex and severe (tertiary services). However, the integrated tiered system differs in approach from the current system in a number of important ways:

- it has the capacity to respond to emerging problems and conditions, rather than waiting until problems become so entrenched and severe that they are finally eligible for service
- it focuses on targeting problems as they emerge through the secondary and tertiary layers, rather than people as risk categories, thus avoiding unnecessary stigmatising

- it aims to drive expertise down to universal and secondary services, facilitating collaboration and strengthening their capacity to deliver prevention and early intervention strategies
- it would have outreach bases co-located with universal services to facilitate collaboration and consultant support

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