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Investing in the Early Years—A National Early Childhood Development Strategy

An initiative of the Council of
Australian Governments

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Contents

Executive summary	4
Chapter 1	
The Case for Change	6
1.1 Introduction	6
1.2 Why do we need a National Strategy?	6
Chapter 2	
The National Strategy—a vision for Australia’s children for 2020	13
2.1 The vision	13
2.2 The outcomes framework	13
2.3 Building an effective early childhood development system	16
2.4 Elements of an effective early childhood development system	17
Chapter 3	
Implementing the National Strategy	22
3.1 The approach	22
3.2 Current commitments	23
3.3 Immediate action	23
3.4 Steps to address gaps	23
3.5 Specific reform priorities to address gaps	28
3.6 Next steps	30
Appendix 1	
The evidence base	31
Early childhood development	31
Endnotes	37

The shared vision of the Commonwealth and state and territory governments is that by 2020 all children have the best start in life to create a better future for themselves and for the nation.

PRINCIPLES FOR THE NATIONAL STRATEGY

- A focus on the whole child, across cognitive, learning, physical, social, emotional and cultural dimensions and learning throughout life
- A focus on the whole of early childhood, from the antenatal period to age 8
- A focus on all children, and providing additional help for those children most in need to reduce social inequalities
- A focus on enhancing positive factors and reducing risks for children
- A focus on the whole service system, covering both universal and targeted supports and services, across sectors and levels of government, including non-government agencies
- A focus on respect for diversity and difference as a strength, and helping children develop a positive sense of self and culture.

Executive summary

The National Early Childhood Development Strategy, Investing in the Early Years (the strategy), developed under the auspices of the Council of Australian Governments (COAG), is a collaborative effort between the Commonwealth and the state and territory governments to ensure that by 2020 **all children have the best start in life to create a better future for themselves and for the nation**. This is our vision.

The strategy will guide Australia's comprehensive response to evidence about the importance of early childhood development and the benefits—and cost-effectiveness—of ensuring all children experience a positive early childhood, from before birth through the first eight years of life. It will also support Australia to better meet the diverse needs of today's families and focus on improving child outcomes and foster the health and wellbeing and productivity of our next generation.

National effort to improve child outcomes will in turn contribute to increased social inclusion, human capital and productivity in Australia. It will help ensure Australia is well placed to meet social and economic challenges in the future and remain internationally competitive.

Our understanding of the interactions between genetics and early childhood experiences has advanced through research in neurobiology which highlights the importance of the early years in shaping the architecture of the brain.

Raising children is the prime responsibility of families, parents and carers who have the most powerful influence on their child's life and development.

This strategy focuses on how Australia's early childhood development system aims to engage with and respond to the needs of young children and their families so that Australia's young children have the best possible start in life. The strategy also highlights the important role of communities, non-government organisations and government in shaping children's early childhood development.

The strategy advocates for building on the substantial current investment being made to transform the way our nation responds to the needs of young children and their families. This entails implementing a range of existing reforms, rethinking current approaches, addressing gaps and building a strong Australian evidence base.

The strategy seeks to achieve positive early childhood development outcomes and address concerns about individual children's development early to reduce and minimise the impact of risk factors before problems become entrenched. The aim is to improve outcomes for all children and importantly, reduce inequalities in outcomes between groups of children. This is especially important for some Indigenous children who, on average, have significantly poorer outcomes than non-Indigenous children.

Specific outcomes for children relate to improved health, cognitive and social development leading to improved transition to school and improved educational, employment, health and wellbeing outcomes. In recognition of the critical role of families, the strategy seeks outcomes for families related to workforce participation and engagement of parents in understanding the importance of early childhood development and in supporting their child's development.

To achieve these outcomes, the strategy details the areas where action is required to build system effectiveness and capacity and to address gaps in order to develop an effective early childhood development system by 2020. In addition to current commitments,

a number of immediate actions and specific reform priorities have been identified where governments will work together to implement the strategy.

In this context, it is important to note that the strategy builds on and links with a number of landmark Commonwealth election commitments and COAG early childhood development reforms in 2008. These reforms represent a substantial new financial commitment. New commitments under the National Framework for Protecting Australia's Children, in particular, will make a significant contribution to implementing the strategy.

This strategy will evolve and respond to the challenges and needs of Australia's children and families and the future reform opportunities that will help us deliver on our vision. Crucial to this will be achieving broad, sustained and thoughtful discussion on how we as a nation can improve early childhood outcomes.

National reform initiatives that seek to improve early childhood outcomes include:

- a National Partnership Agreement on Early Childhood Education to achieve universal access to quality early childhood education for all children in the year before school by 2013
- a National Partnership Agreement on Indigenous Early Childhood Development to establish 35 new Children and Family Centres and to increase access to antenatal care, teenage sexual health and child and family health services for Indigenous children and families
- a six-year National Partnership Agreement on Preventive Health with a focus on strategies to prevent chronic diseases that commence in early childhood
- a national quality agenda for early childhood education and care which includes stronger standards, streamlined regulatory approaches, a rating system and an Early Years Learning Framework
- national workforce initiatives to improve the quality and supply of the early childhood education and care workforce
- the Closing the Gap initiative which includes ambitious targets for Indigenous children related to infant mortality, literacy and numeracy and participation in quality early childhood education
- a National Framework for Protecting Australia's Children
- the Melbourne Declaration on Educational Goals for Young Australians
- a National Family Support Program which brings together eight Commonwealth programs for children, families and parenting
- paid parental leave arrangements
- a National Plan to Reduce Violence against Women and Children
- development of an Early Intervention and Prevention Framework under the National Disability Agreement
- a National Partnership Agreement on Homelessness, with a focus on intervening early for children and their families at risk of homelessness.

“Children who have good early childhood experiences before age 6, in stimulating, nurturing environments have better outcomes throughout their life... better school grades, better self esteem, fewer social problems, and fewer health problems and are less likely to be teen parents, use drugs or be involved in crime”

Clyde Hertzman (2003)¹

In June 2008, there were around 2.7 million children aged 0–9 years in Australia.

Of these children, 1.37 million were aged 0–4 years.²

“We simply cannot afford to ignore the issues [for children] if we want to succeed in a world where what is needed are competent, intelligent and socially capable people.”

Fiona Stanley, Sue Richardson and Margot Prior (2005) p219³

Chapter 1

The Case for Change

1.1 Introduction

The strategy is based on clear evidence from Australia and overseas that the early years of a child's life have a profound impact on their future health, development, learning and wellbeing.

It is of concern therefore that Australia is seeing increases in poor outcomes for children and young people in a number of key areas, and a widening of inequalities in outcomes between groups of children.

There are also signs that social changes over recent decades have impacted on family functioning and that some early childhood development and family support services struggle to meet diverse family needs.

In particular, more and more families rely on early childhood services to support their workforce participation and the choices they make about how they balance work and family responsibilities.

It is imperative to look at how policy, services, supports and programs may need to adjust to better support families with young children. This is needed to ensure the best possible outcomes for children and to contribute to Australia's economic goals by supporting workforce participation now and into the future.

A positive start in life helps children develop to their fullest. The benefits accrue to the whole society, through enhanced human capital and capability, increased productivity, greater social inclusion and reduced public expenditure in health, welfare and crime related to disadvantage over the life course.

Healthy and happy children are more likely to become healthy and resilient adults who have more equal capacity, opportunity and resources to contribute to a cohesive and prosperous society.

Conversely, children who have a poor start in life are more likely to develop learning, behavioural or emotional problems which may have far-reaching consequences throughout their lives and in turn, the lives of their children. These problems accrue to the whole society in the form of increased social inequality, reduced productivity and high costs associated with entrenched intergenerational disadvantage.

There is good evidence that many programs aimed at alleviating disadvantage during the early years of life are both effective for improving child outcomes and often yield higher returns on investment than remedial interventions later in life.

1.2 Why do we need a National Strategy?

Children are important

Children are important. They bring their own value and influence to the world, as well as being shaped by the world around them. Children give joy and purpose to the lives of many and help bring people together. Children are particularly vulnerable in the early years and need others to seek out or advocate for services or supports on their behalf.

Children are also important for their future contribution to society—as the next generation of leaders, workers, parents, consumers and members of communities. Their ability to participate fully in society as adults will be largely shaped by their childhood experiences. Children who have a good start in life are more likely to develop the capabilities that will better equip Australia to compete in a global society. This will be increasingly important as our workforce shrinks due to population ageing and low fertility rates.

As a signatory to the United Nations Convention on the Rights of the Child, Australia has a longstanding commitment to nurture and protect children in our society. The strategy will help ensure that children's rights and needs are at the centre of policy development and service delivery.

It takes a village to raise a child

Parents and/or other main carers have the primary responsibility for, and influence on, their child's wellbeing, learning and development. All parents need some level of support and use services at some stage during their child's early childhood years.

There is, however, a broader responsibility for creating conditions in which families and children can thrive. This responsibility extends to all levels of government, communities, non-government organisations and business.

Such responsibility encompasses community planning around the needs of children and families, such as for public transport, housing, parks and access to a range of supports and services. It also encompasses the broader socio-economic influences on children and families, such as the mass media, family-friendly workplaces, and broader policies for taxation and income support.

The United Nations Convention on the Rights of the Child spells out the basic human rights that children everywhere have: the right to survival; to develop to the fullest; to protection from harmful influences, abuse and exploitation; and to participate fully in family, cultural and social life.⁴

Roles and responsibilities

The National Strategy requires action by:

Families—Parents and other primary carers have the most direct influence on young children. Their role is to provide a nurturing home environment and to access the services and supports to best meet a child's developmental needs for emotional security, physical health, socialisation, cultural identity and stimulating play-based learning experiences.

Community—Local government, non-government organisations, community leaders, volunteers, businesses and service providers have a responsibility to ensure the community is child and family-friendly. This includes fostering a culture where children and parents are valued and supported, inclusive planning processes for the built and natural environment that take into account the needs of children and families, and promoting community safety.

Organisations—Government, non-government providers and private providers have an important service delivery, community development and advocacy role. This includes providing quality, accessible and affordable services which have a central focus on supporting positive development of children as well as supporting the participation of parents in community life. Providers also have a responsibility to offer good conditions and professional development for the early childhood and family support workforce.

Workplace—Employers have a role in supporting the parenting responsibilities of all workers, through such mechanisms as family-friendly leave provisions and flexible working arrangements. Businesses also have an important role in supporting children and families in their local community both in the direct provision of a range of services and through philanthropic activities.

Government—All levels of government have programs to deliver services and supports for young children and families. Governments provide leadership and build capacity through funding, planning, workforce development, research and monitoring to ensure effective policy responses for Australian children and their families.

“Learning and motivation are dynamic, cumulative processes. Skill begets skill; learning begets learning. Early disadvantage, if left untouched, leads to academic and social difficulties later in life. Early advantage accumulates, just as early disadvantage does.”

James Heckman and Dimitriy Masterov (2004) p3⁵

KEY PROTECTIVE FACTORS

- Secure attachment with a primary carer
- Breastfeeding
- Good nutrition and physical activity
- Stimulating play-based learning experiences.

KEY RISKS

- Abuse and neglect, exposure to violence, harsh and inconsistent discipline
- Insecure attachment, for example related to maternal depression
- Living with adults who abuse alcohol, tobacco and other drugs, especially during pregnancy
- Low birth weight, and poor diet
- Chronic health or disability
- Growing up in poverty.⁶

What happens in early childhood affects later development

The convergence of evidence from a range of fields underlines the importance of a child's early growth and development for establishing the foundations of their health, learning, social and cultural outcomes into the future.

Research has shown that the brain grows rapidly and is most malleable during early childhood. Genetic make-up and environmental factors during early childhood interact to have life-long effects on the structural development of a child's brain and on programming biological and behavioural responses. There are sensitive periods for different aspects of development, such as language and emotional control, particularly in the first three years of life, commencing before birth.

The health of the mother during pregnancy and the child's early health have a lasting impact on health and socio-economic status throughout life. Many chronic health problems in adulthood, such as obesity, heart disease, diabetes and mental health problems have their origins in early childhood.

Early development is also critically influenced by the quality of the relationship between the child and primary caregivers. Children have better outcomes when they form a secure attachment with a carer who understands and responds to their physical, emotional, social and learning needs with consistency and warmth.

On the other hand, exposure to ongoing stress and traumatic events, such as abuse and neglect, can have severe impacts on the nervous system's response to stress for the rest of a child's life. This has consequences for a child's future learning, behaviour, and physical and mental health, as well as significant costs to society.

Whether a child is more likely to experience problems later in life or not depends on the accumulation of risk and protective factors, with earlier and longer exposure to multiple risks associated with increased risk overall.

Quality early childhood development and family support programs can make a positive difference

There is good evidence that quality maternal, child and family health, early childhood education and care and family support programs make a significant difference for improving outcomes for children. There are particular benefits for children from disadvantaged backgrounds. Strong evidence suggests that targeted early childhood approaches are also cost-effective.

Longitudinal research from overseas has provided a wealth of information about the benefits of early childhood development programs for children and society. This research relates predominantly to targeted programs but also includes longitudinal studies of universal parenting programs in the United States and Australia and universal preschool in the United Kingdom (see Appendix for more information on these studies).

Although early childhood development programs vary, most offer some combination of quality maternal, child and family health, early childhood education and care, and parent support services. The quality of the workforce is a key factor in achieving good outcomes for children.

Effective early childhood development programs are generally those that work directly with children and also with parents to improve their engagement, capacity, skills and confidence.

Additionally, effective programs are usefully structured around key transitions during early childhood such as pregnancy and birth, from home to early childhood education and care, and the transition to school. These are times when children are at different developmental stages, and when parents and carers face different challenges and are more receptive to assistance.

Access to quality health care, especially during pregnancy and in the first few years of life, is effective for promoting healthy lifestyles and responsive care by parents, and for reducing risks for children, such as low birth weight.

Strategies that foster the development of secure attachments between parents or carers and young children—such as paid parental leave, family-friendly work provisions, support for breastfeeding and understanding of the importance of the early years—can help mitigate risk factors significantly.

Similarly, a number of parenting programs that teach parents positive parenting skills and consistent discipline methods have been shown to be effective for improving outcomes for both parents and children. Such outcomes include increased parenting skills and confidence and reduced emotional and behavioural problems in children.

There is good evidence that early childhood education programs are effective in improving outcomes for young children. Some of the strongest evidence comes from longitudinal studies of intensive early childhood education programs in the United States that targeted a small number of disadvantaged children and were delivered by highly qualified staff. These programs were found to deliver significant benefits, such as improved cognitive and social development, better transitions to school and reduced need for remedial education and, in the longer-term, higher rates of school completion and employment and reduced criminal activity.

There is also longitudinal evidence from the United Kingdom, based on a sample of over 3000 children, that quality early childhood education benefit all children and that disadvantaged children benefit more if they attend centres with a mix of children from different social backgrounds.

Another key research finding is that quality matters when it comes to the child's learning environment, including the quality of the home learning environment and the early years of primary school. Aspects of quality include the capacity and engagement of parents in their child's development; stimulating play-based learning activities; higher qualifications of early childhood professionals; lower child-to-staff ratios and a strong relationship between the child and a stable caregiver.

Based on a number of landmark longitudinal cost-benefit studies of targeted early childhood education and nurse home visiting programs in the United States, a number of leading economists advocate investment in early childhood development programs for disadvantaged individuals or communities. For example, Professor James Heckman believes investment is needed because the return 'far exceeds the return on most projects that are currently funded as economic development'.⁸

Some researchers have estimated that, in the context of early childhood education and care, while the return from some early childhood programs provided to all children would be lower than for targeted programs, it would still be positive overall. This is because all children and families require some support at different times and the largest group of vulnerable children, in terms of actual numbers, is in the middle of the social gradient.

Other advantages of universal programs may include, greater accessibility, reduced stigma, and a role in assessing and referring those children in need of additional support.

"Children living in poverty are more likely to be at risk for adverse early childhood development, but their parents often have the least resources and capacity to compensate for the risks (double jeopardy)."

Professor Frank Oberklaid (2007) p3⁷

"If we want to change environments in which children grow up, we need to move beyond targeting narrowly defined populations."

P Drielsma (2003), Australian conference on Child Abuse and Neglect⁹

"Many experts now predict that this generation could have a lower life expectancy than their parents."

ARACY (2008), Submission to the 2020 Summit¹⁰

AREAS OF CONCERN

Increasing rates of childhood and youth obesity¹²

Smoking and alcohol consumption during pregnancy

Around 15 per cent of women suffer from antenatal and post natal depression¹³

A 40 per cent increase in male youth suicide between 1979 and 1998 (declining since 2004)¹⁴

A 115 per cent increase in the number of children in out-of-home care between 1998 and 2008¹⁵

Half of all children in one-parent families live in households where no adult is employed

6.1 per cent of one-parent families reported going without meals in 2006¹⁶

In 2005–06 there was a difference of \$213 per week in disposable income between low and middle-income households with children under 5 years old

In 2004–2006 the injury death rate of Indigenous children aged 0–4 years was more than three times that of the non-Indigenous rate

In 2006–07 child protection substantiations for Indigenous children aged 0–12 years were nearly six times higher than for non-Indigenous children

In 2007 the percentage of Indigenous year 5 students meeting the national benchmarks for reading (67.6 per cent) and numeracy (65.5 per cent) was markedly lower than non-Indigenous students (at around 89 per cent for both).¹⁷

Areas of concern

For children

While most Australian children are doing well, there are areas of concern, particularly for some groups of children. These concerns include: low birth weight; rates of childhood obesity and diabetes; children with a disability, child social, emotional and behavioural issues; and unacceptable levels of substantiated child abuse (see side box for examples).

Australia compares unfavourably with other OECD countries on a number of measures of child health and wellbeing, particularly in relation to outcomes for Indigenous children (see Table 1).

TABLE 1 INTERNATIONAL COMPARISON

Taken from the Australian Research Alliance for Children and Youth (ARACY) Report Card 2008¹¹

DOMAIN	INDICATOR	OECD RANKING	
MATERIAL WELLBEING	Reported deprivation	Australia	10/30
		Indigenous	29/31 (only Turkey and Mexico have worse levels)
INFANT HEALTH	Infant mortality	Australia	20/27 (bottom third)
		Indigenous	26/28 (more than double the non-Indigenous rate)
	Low birth weight	Australia	7/18
		Indigenous	19/19 (lowest in the OECD and more than double the non-Indigenous rate)
	Mental health	Australia	18/23
		Indigenous	23/24
SCHOOL ACHIEVEMENT AT AGE 15 YEARS	Reading	Australia	6/29
		Indigenous	29/30
	Maths	Australia	8/30
		Indigenous	29/31 (better only than Turkey and Mexico)
FAMILY RELATIONSHIPS	Sense of belonging	Australia	11/29
		Indigenous	29/30
BEHAVIOUR AND RISKS	Teenage pregnancy	Australia	21/30
		Indigenous	31/31 (five times the Australian average and worse than Mexico)

Additionally, in what has been described as the ‘paradox of progress’¹⁸, social inequalities across many indicators of child development have actually increased rather than decreased with increasing wealth in Australia.

There is ongoing concern about the children who live in families with a high risk of intergenerational disadvantage, for example, those who live in jobless families, some Indigenous children, and children involved in the child protection system or out-of-home care. Without suitable support there is an increased likelihood that children will remain in a cycle of poverty.

Children and families living with a disability, such as autism, can also be at risk. The significant adjustments required in many instances can cause stress and put pressure on family relationships. Parents and carers need information and access to appropriate services and supports to ensure their children are valued and included so that they have every opportunity to achieve.

For families

A number of Australian experts believe that worsening trends for children and young people may be warning signs that some of the significant social changes over the past 50 years are placing considerable pressures on some families. These changes may have resulted in a weakening of protective factors and an increase in risks for children.

More women are participating in the workforce and more people are having children later in life. Australian families have become more diverse in their composition, circumstances and cultural background. More families have complex needs. More children experience family break-up and live in single-parent, step and blended families. Parents' stress and lack of money and time for children often associated with these family arrangements can have a negative impact on child outcomes if families do not receive the support they need and that suits their circumstances.

The Household, Income and Labour Dynamics in Australia (HILDA) Survey, for example, points to higher work-family stress levels among families who are working full time and for single parents and parents with the youngest child aged under six.¹⁹ More generally, the role of parenting can be challenging for all parents, regardless of background or circumstances. All families can require additional support, for a range of reasons, at different periods in a child's life.

For services

There are signs that the service system is struggling to meet the diverse needs of families today. Australia currently has a complex and multi-layered system of policy development, funding, service provision and regulation involving a range of government and non-government stakeholders to support young children and their families.

While there are examples of high-quality, innovative service provision in Australia in some locations, early years services are fragmented. Access to some services, particularly for allied health and specialist services, can be limited. There is often a lack of continuity of care between, for example, maternity services and the child and family health services that operate in the community.

For many families, negotiating the current service network can be time-consuming and frustrating. This can place an added burden on families, particularly those in crisis. It can create delays in service provision which, at times, can discourage families entirely. Often families most in need of services are the ones who do not use them. Indeed, many of the most marginalised children come in contact with professionals only through adult-focused services, such as drug and alcohol rehabilitation for parents and other family members.

Universal health and early childhood education and care services have difficulty engaging with some children and families. This is particularly so with some Indigenous children and families, families with low incomes, children and families from culturally and linguistically diverse backgrounds, and children with or in families with a disability. Barriers to accessing services include availability of services, cost, lack of awareness, a chaotic home life, cultural appropriateness, lack of trust, distance from the service and lack of transport.

To meet the diverse and complex needs of children and families and stop those most in need falling through the cracks, services overall need to be more coordinated,

COMMUNITIES FOR CHILDREN

Communities for Children (CFC) is a place-based prevention and early intervention initiative implemented in 45 disadvantaged communities around Australia from 2004. It takes a whole of community partnership approach to improve service coordination, address unmet need and improve community capacity around the needs of children 0-5 years and their families.

The recent three-year longitudinal evaluation of the initiative found significant improvements in outcomes for children, families and communities compared with control sites, including:

- improved receptive vocabulary and verbal skills in children from low-income households or where mothers had Year 10 education or less
- less hostile and harsh parenting practices
- children were more likely to be living in households where at least one parent was employed
- 'hard to reach' families equally likely to benefit
- improved service capacity, reduced service gaps, increased prevention, innovation and tailoring of services
- increased engagement of families
- highly significant increases in coordination and collaboration between agencies.²⁰

comprehensive, interdisciplinary and flexible. Additionally, some of the pressure in the system could be alleviated through a greater focus on prevention and better assessment and referral to early intervention services.

This will involve improving the inclusiveness of services and looking at ways to make services responsive to different family situations, to maximise use of existing infrastructure, and to build the evidence about what works to improve transitions for families moving between services. This includes integration where services and professionals across health, early childhood education and care, family support and specialists work very closely together, regardless of whether they are co-located or not.

While there is a lack of evaluation comparing integrated and fragmented service delivery, most evaluations to date indicate that service integration can make a positive difference to outcomes for families and children (with the main influence on outcomes being the quality of the actual services delivered). In particular, the recent Stronger Families in Australia study of the impact of the Communities for Children initiative, found a relationship between improved outcomes for children in sites and a better coordinated local system of early childhood services.

When properly linked to employment, health and social services, integrated services increased service use by families. They improved outcomes, such as increased maternal employment, less family poverty, improved parenting skills, and greater family and community cohesion.

The evidence points to the need to get the right mix of universal and targeted services to both improve outcomes for all children and ensure that additional assistance is provided in a timely way to those that need it. This is supported by Australian evidence which suggests that universal service platforms provide a non-stigmatised entry point to more intensive support for families with additional needs.

Further longitudinal research and robust evaluation is needed to know with confidence what programs and service delivery approaches represent the best investments for children in the Australian context.

More detail on the evidence base underpinning the strategy is provided in the Appendix.

■ ■ Chapter 2

The National Strategy— a vision for Australia's children for 2020

Children deserve the best start in life, and it is in Australia's long-term national interest to want the best for them now and to help them develop to their fullest throughout life.

In March 2008, COAG agreed to the aspiration that 'children are born healthy and have access throughout early childhood to the support, care and education that will equip them for life and learning, delivered in a way that actively engages parents and meets the workforce participation needs of parents'.

The strategy is defined by a vision, outcomes, progress measures and key elements that make up an effective early childhood development system. Specific immediate and longer-term actions have been identified across these elements in the next chapter.

2.1 The vision

By 2020 all children have the best start in life to create a better future for themselves and for the nation

A number of policy objectives relate to this vision, including: greater social inclusion; improved outcomes for the majority of children but specifically Indigenous children and the most disadvantaged; and increased productivity and international competitiveness.

2.2 The outcomes framework

The outcomes framework for the strategy at Diagram A (see page 115) brings the vision and outcomes together. It reflects the early childhood reform priorities agreed by COAG in early 2008 and focuses on what Australia needs to achieve in order to ensure children have the best start in life.

Seven outcomes are identified where support for children is needed to realise the vision. In effect they fall into two groups. The first group focuses on the child and broadly describes a young child's developmental pathway, beginning in the antenatal period:

- children are born and remain healthy
- children's environments are nurturing, culturally appropriate and safe
- children have the knowledge and skills for life and learning
- children benefit from better social inclusion and reduced disadvantage, especially Indigenous children
- children are engaged in and benefiting from educational opportunities.

The second group recognises the primary importance of the family. The strategy seeks outcomes for families related to parenting relationships and workforce participation that underpin the five earlier outcomes:

- families are confident and have the capabilities to support their children's development
- quality early childhood development services that support the workforce participation choices of families.

Primary progress measures associated with each of the child-focused outcomes will be developed and tracked over time to monitor and report on outcomes being achieved and to build an Australian evidence base about Australia's young children and their families.

Finally, the framework highlights seven areas for action that make up an effective early childhood development system for children and their families:

- support for children, parents, carers and communities
- responsive early childhood development services
- workforce and leadership development
- quality and regulation
- infrastructure
- governance and funding
- knowledge management and innovation.



An effective early childhood development system recognises the primary role of families in the lives of young children. It has strong leadership, coordinates policy direction, uses collaborative and inclusive approaches and forges strong links within and across services, professionals and communities.

2.3 Building an effective early childhood development system

Achieving the vision and outcomes requires an effective early childhood development system that focuses on the key elements needed to deliver a comprehensive approach to improving children's early childhood development outcomes.

The child is at the centre of the system, illustrated in Diagram B below.

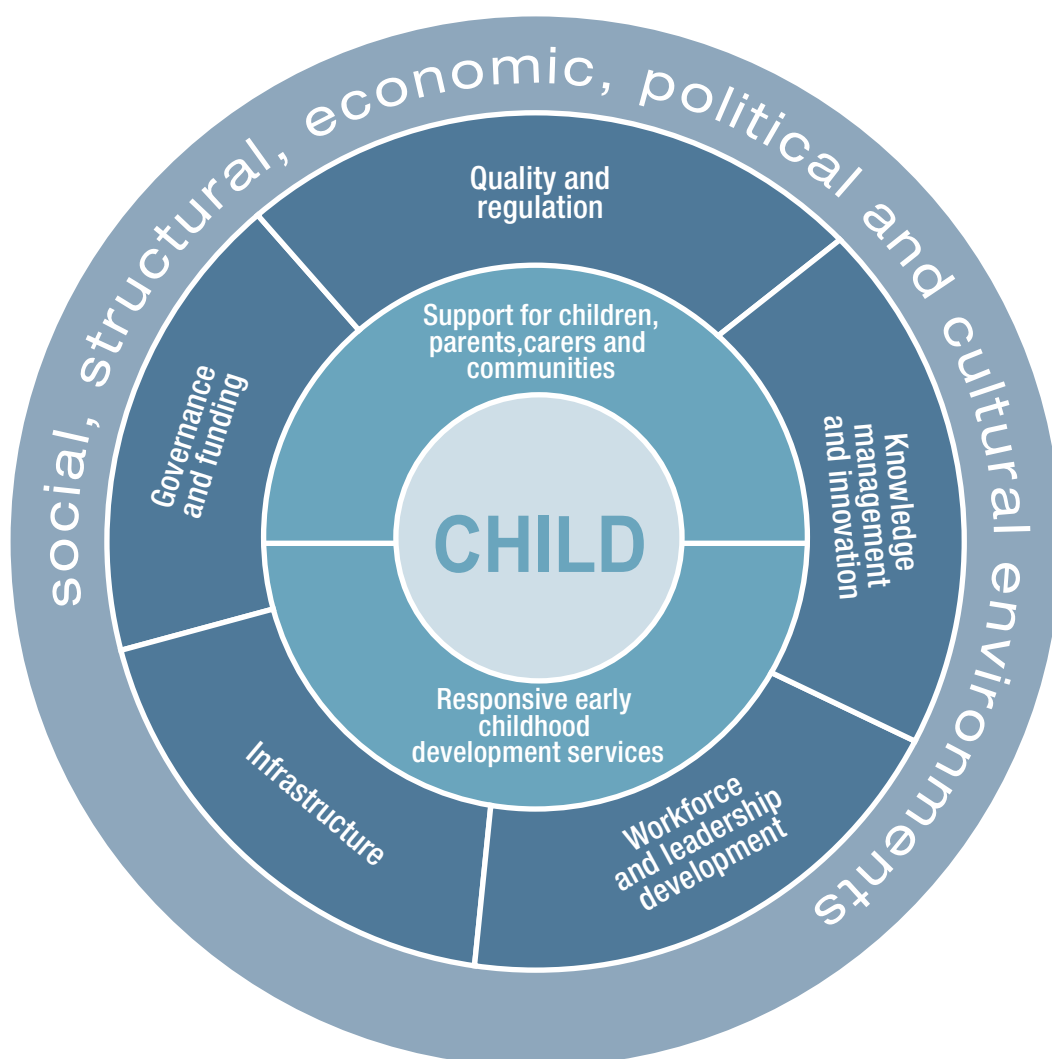
The first two elements of the system have a broad focus:

- support for children, parents, carers and communities
- responsive early childhood development services.

The other five elements, illustrated in the next ring of the diagram, focus on more discrete enabling areas, each contributing in different and interdependent ways to ensure the effectiveness of the system as a whole. Workforce development, for example, is seen as critical for delivering improved quality as well as more effective service responses across sectors.

The early childhood development system sits within a broader socio-ecological context which includes the structural or built environment, economic and political conditions, cultural values and social networks.

DIAGRAM B ELEMENTS OF AN EFFECTIVE EARLY CHILDHOOD DEVELOPMENT SYSTEM



2.4 Elements of an effective early childhood development system

Support for children, parents, carers and communities

Nurturing environments foster the development of young children. An effective early childhood development system increases capability in parenting and in communities by building on existing strengths rather than focusing on problems.

To ensure the best for children, parents and carers need the capacity to care for and support their children. Where necessary, they need access to appropriate services that can assist them in this critical role.

Capacity includes having good mental and physical health to attend to children's emotional and physical needs; having time to spend with and positively respond to children; having the resources to actively support children's learning and development; having financial resources to meet children's basic needs for food, health, shelter and stimulation; being socially connected to others; and being a positive role model for children of participating in community life.

Broader supports encompass such things as: child support, paid parental leave, family law services, taxation and income support policies, and an industrial relations system that supports parents and carers to raise children and balance work and family commitments.

Communities also have a critical impact on child development and wellbeing. Building community capacity and child and family-friendly communities will help achieve the outcomes and vision for children.

Communities that understand the importance of the early years and place a high value on young children, and on the role of parents and caregivers, are more likely to provide effective supports for families. Child and family-friendly communities encourage community involvement in—and accountability for—delivering flexible and coordinated evidence-based early childhood development and family support programs which respond to the needs of local children and families. They also take into consideration the needs of young children and families in community planning in areas such as housing, transportation, urban design and community resources.

Child and family-friendly communities contribute to safe environments for children, encourage active play, foster a positive sense of cultural identity for children, promote supportive social relationships, and provide access to a range of services and facilities.

Responsive early childhood development services

The strategy promotes early childhood development services that are responsive to the needs of children and families.

Responsive in this context means: high-quality programs in services; active service outreach into the community; a strong focus on promotion and prevention; engaging and empowering parents and communities in early childhood development and services; and responding to issues for children and families that arise.

Importantly, responsive early childhood development services optimise the use of three service layers: universal, targeted and intensive. Optimal service responsiveness is achieved through nesting these service layers together and ensuring they are well coordinated, interdisciplinary and flexible.

2020 VISION

Families are confident and have the capabilities to support their child's development and participate in the workforce. All parents and carers are actively engaged in fostering their child's development. Children, parents and carers are consulted about their needs and have access to the right information, services and support at the right time. Families feel welcomed by services. Communities are safe and family-friendly. There is increased public awareness about the importance of the early years, and a culture which values young children, supports the role of parents and carers, and prioritises early learning and development.

2020 VISION

Australia has world-class early childhood development services that form a cohesive, accessible and nationally recognisable system. There is a core universal provision linked to a range of targeted and intensive services. Services are delivered in a mixed market and providers have the flexibility to respond to local and individual need. There is a strong focus on promotion, prevention, early detection and early intervention in children's developmental pathways. Services are delivered by an appropriately qualified and inter-disciplinary workforce according to robust quality assurance processes.

2020 VISION

Australia is seen as providing international best practice in quality early childhood and family support services. Quality is underpinned by a strong evidence base and an adequately qualified workforce which responds to the diversity of child and family need. Children's outcomes are placed at the centre when designing quality services. Quality has universal understanding across sectors and reflects an interdisciplinary approach. Parents have a good understanding of what to look for in quality services. There is a systematic approach to quality assurance which is efficient, transparent and supports continuous quality improvement.

The early childhood development services and support model presented on the following page provides universal, targeted and intensive services across maternal, child and family health, early childhood education and care and family support, delivered in a way that is accessible and seamless from the user's perspective.

Services for children and their families are linked in different ways, depending on local needs and circumstances, to promote a holistic response to each child and family situation. This includes integration, whether physical or virtual, that encourages interdisciplinary approaches to meeting the needs of children and their families, such as consistent assessment and sharing of information. It also includes effective governance at all levels and a commonsense approach to removing unnecessary barriers to access, such as inflexible eligibility criteria.

Universal services can operate as the pathways to targeted and intensive services, however, this is not necessarily a linear process. In fact, intensive services often act as the pathway to targeted and universal services, especially for marginalised children who are less likely to regularly attend universal children's services.

In a responsive service system there are no 'wrong doors'. Any point of initial inquiry will provide access to a broader range of appropriate services and programs. The aim is for children and families to receive the right level of support in the most effective way and in a timely manner, without unnecessary referrals to other services.

Quality and regulation

Evidence shows the importance of high-quality services for improving outcomes for young children and their families.

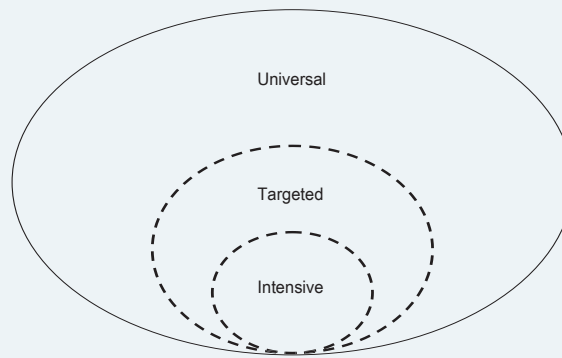
Evidence has also shown that the quality of the home learning environment is one of the strongest predictors of good learning, social and behavioural outcomes for children. Action to improve quality is therefore as much about supporting parents to provide quality, nurturing care for children in the home as it is about enhancing quality in the services accessed by children and families outside the home environment.

Quality standards vary across jurisdictions, sectors and service types. Existing arrangements for setting, assessing and monitoring quality in the early childhood sectors are fragmented and complex. This limits the responsiveness of services and inhibits continuity of care and support for families.

An effective early childhood development system supports best practice and continuous quality improvement in service delivery. It balances access and affordability, and raises family and community awareness about quality. Quality assurance and regulatory arrangements, covering aspects of quality such as qualifications, child-to-staff ratios and health and safety, should be straightforward, appropriate and consistent across all levels of government. The regulatory environment should ensure service providers are accountable and do not face unnecessary regulatory burdens.

Other important aspects of the quality of a child's early experiences include: accessible, inclusive, culturally safe and engaging service environments built around strong relationships between professionals and children and their families; the use of the nationally agreed Early Years Learning Framework; and promotion of healthy eating and physical activity consistent with the Australian Government's Healthy Eating and Physical Activity Guidelines for Early Childhood Settings.

Integrated Early Childhood Development Services and Support Delivery Model



Universal services and supports are aimed at the general population and are accessible to all, including through outreach.

Their main goal is to increase protective factors and reduce risks for child development, provide support for optimal family and community environments for all children, and provide early identification and referral for children and families who may require more targeted or tertiary services. In addition to core maternal, child and family health, General Practitioners, early childhood education and care services, and family support services, universal approaches include broader supports such as paid parental leave, medical benefits, child care assistance and the provision of information about child development.

Targeted services and supports target children and families or communities who have a higher need or higher risk than the general population. The joint aims are to minimise the effect of risk factors for children and to build protective factors and resilience. Importantly, the services and supports work to reduce inequalities in outcomes between groups of children. Priority and increased access to universal services is one form of targeted support, for example, health care concessions, child care assistance, family payments and rebates, and offering an additional year of preschool to disadvantaged children. Other forms include: outreach programs, supported playgroups, health services, disability and inclusion support services and parenting or family relationships programs.

Intensive services and supports are individually tailored responses to a particular child and family situation that is highly stressful and may be ongoing. Examples are parental substance abuse, mental illness and homelessness, and when children are experiencing or at risk of abuse or serious harm. The aim of these services is to prevent or reduce the risks to children and build parents' skills and capacity. These services may include intensive whole-of-family services, specialists and treatment programs for parents.

Another example of intensive services are the specialist supports for children with disabilities, which help to build on the child's strengths and maximise their development, reduce the impact of disability, improve the child's functioning overall and support the family.

Intensive services for adults are an important contact point for some of the most marginalised children who might not routinely attend children's services due to family dysfunction.

Different families require different levels of support at different times. In a truly integrated system, there are pathways from universal service to more targeted and intensive services, but also from higher-end services back to universal platforms.

2020 VISION

The early childhood sector is attracting the brightest to the profession, and there is a sustainable workforce supply which closely matches demand. Early childhood workers are valued and appropriately skilled according to best practice in quality and interdisciplinary service delivery. Overall job satisfaction and good working conditions are reflected in stable recruitment and retention rates. The profile of the early childhood workforce reflects the community. There are career opportunities and good articulation between training pathways, including recognition of prior learning. Professional development and incentives are in place to grow and support leaders in the field.

2020 VISION

Children and families can access services that are fit for purpose and located in areas convenient to their needs, such as close to work, home and public transport. Services are designed around the developmental needs of children and in ways which cater for interdisciplinary approaches and provide targeted outreach. Infrastructure, including ICT, supports responsive service delivery which allows children and families to make a seamless transition between universal, targeted and tertiary services as needed.

Workforce and leadership development

A primary determinant of quality in early childhood development service provision is the workforce—their qualification levels and ongoing training, their motivation, and their interaction with families and children. Workforce issues are widely regarded as the key challenge for achieving the vision for children. The early childhood workforce is central to delivering early childhood development services and bringing about fundamental cultural change required for responsive service delivery.

The early childhood workforce in Australia incorporates a range of professionals, paraprofessionals and staff with and without formal qualifications. These include, for example, early childhood teachers, child care workers, midwives, child and family health nurses, general practitioners, Aboriginal health workers, paediatricians, social workers, speech therapists, occupational therapists and physiotherapists.

The workforce also includes professionals who work with adults and who will come in contact with some children in family circumstances of extreme disadvantage. Other professionals work in the disability support sector and with children and families from culturally and linguistically diverse backgrounds.

There are separate education and training pathways and variable levels of qualification, status and conditions. There are significant supply, recruitment and retention issues. The workforce is ageing in some sectors, especially in health and child care, and in some locations. High staff turnover, especially in early childhood education and care, is a particular concern because of the importance of continuity of care and relationships to children's social and emotional development.

Additionally, developing the workforce to reflect the composition of the local community—especially where there are high numbers of Indigenous and culturally and linguistically diverse families—is an important strategy for addressing workforce shortages and reducing cultural barriers to access.

Attention to coherent training pathways, qualifications, cultural competencies, supply issues (especially in rural and remote areas), staff support and mentoring, professional status, work conditions, interdisciplinary practice and leadership are all aspects of building a capable early childhood workforce.

Infrastructure

The accessibility and inclusive nature of the service environments in which children and their families participate is another important determinant of the quality of a child's early experiences.

Attention to supply and demand and redesigning some service infrastructure to support more inclusive integrated and responsive service delivery is important for meeting the changing needs of children, families and communities. This includes infrastructure design that facilitates universal assessment at various points in the early years, with ease of access to more targeted and intensive services as appropriate.

Service infrastructure needs to meet quality standards and be accessible. It also needs to have appropriate information and communication technology, for example consistent referral and booking procedures across services.

Infrastructure to support the delivery of early childhood development outcomes needs to be fit for purpose, support interdisciplinary and integrated approaches, and be located to enable ease of access within the community for children and their families. Innovative approaches are required in providing infrastructure for Indigenous families, such as design that takes into account extended family relationships and that is culturally welcoming.

Governance and funding

Early childhood is a complex area. Numerous and diverse government and non-government stakeholders work across a range of areas of responsibility.

Streamlined governance mechanisms (including payments and administration) at the national, state and local level will clarify roles and responsibilities, improve accountability for children's outcomes, improve continuity and foster effective decision-making and joint planning.

Early childhood development services, predominantly early childhood education and care services, operate in a mixed market. Governance arrangements therefore require strong coordination and attention to sustainability. In this context, funding for programs and services can come from multiple sources across different levels of government. Accountability mechanisms capable of capturing this complexity without overburdening service providers are required.

Whole-of-government and cross-sectoral governance arrangements, effective consultation with children and families, and more flexible funding and administrative arrangements are needed to better engage with children and families and respond holistically to their diverse issues.

Knowledge management and innovation

To know what works, and how we are going in realising the strategy vision for children and the associated outcomes and progress measures, Australia needs to transparently collect, evaluate and publicly disseminate relevant information and evidence. This includes longitudinal measurement. Good Australian data and evidence are needed to monitor outcomes, complement international evidence and advance early childhood development policy, investment and service provision in the Australian context.

Currently, information is collected across maternity services, child and family health, early childhood education and care, and child and family social characteristics. There are gaps in the information, however, and treatment of data definitions, collections and reporting is not consistent. More could be done to use and link existing sources of information, for example, population and service provider surveys, longitudinal studies and administrative data sets.

Gaps exist in information about what services children and families are receiving and how services are contributing to improved child outcomes. There is a need for better information at both the individual and service level to inform innovation and to facilitate cost-benefit and randomised control evaluations at the community level to support continual learning.

Considerable data development and research activity is already under way. There is scope to design a more efficient, integrated and comprehensive information system.

Such a system needs to provide nationally and internationally comparable data about early childhood development and evidence about what programs, services and income supports result in successful outcomes for children and their families.

2020 VISION

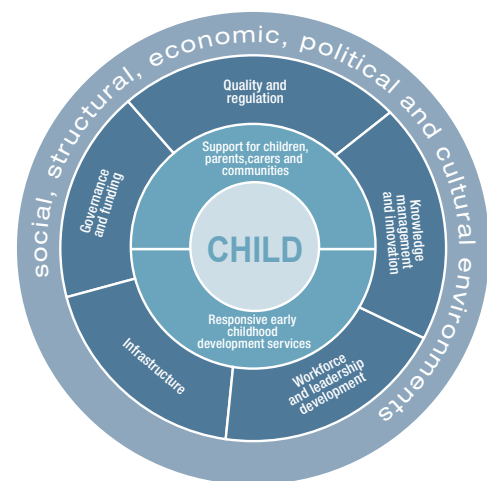
Governance, funding and planning processes are streamlined and integrated across levels of government and sectors. There are effective coordinated planning processes which support participative decision-making and efficient use of resources. Areas of gaps and duplication are identified and addressed, synergies are realised and there is reduced red tape. There is greater consistency, best practice and sharing of resources in providing support and services for young children and families.

2020 VISION

Australia has a strong evidence base that is readily available and informs policy and practice in early childhood approaches. There is a national data system and a national evaluation plan which supports monitoring and accountability under the National Strategy and continually expands the evidence base about what works to improve child outcomes. There are effective partnerships between policy, research and practice.

"Investments in prevention may have a large payoff in terms of future human capital accumulation, but it is important to learn what types of investments are most effective."

Janet Currie 2008, p53²¹



Chapter 3

Implementing the National Strategy

Concerted national action is needed to deliver the 2020 vision:

All children have the best start in life to create a better future for themselves and for the nation.

The strategy provides the framework to organise government and community response to this vision.

3.1 The approach

Transforming the way Australia supports young children and their families will take time and resources. It requires a flexible approach that enables continual learning and responsiveness to emerging issues, and that takes into account the different needs, priorities and available resources in each jurisdiction. In this respect, the strategy provides a roadmap to 2020 that will be added to and adjusted over time.

The approach links up the desired outcomes for children and their families with actions in each of the key elements of an effective early childhood development system (described in chapter 2). These actions will provide a focus for short, medium and longer-term effort.

Outcomes

Actions are mapped against the main outcome each relates to as numbered below (noting that many of the actions will contribute to more than one outcome):

1. children are born and remain healthy
2. children's environments are nurturing, culturally appropriate and safe
3. children have the knowledge and skills for life and learning
4. children benefit from better social inclusion and reduced disadvantaged, especially Indigenous children
5. children are engaged in and benefiting from educational opportunities
6. families are confident and have the capabilities to support their children's development
7. quality early childhood development services that support the workforce participation choices of families.

3.2 Current Commitments

Table 2 on page 24 outlines the key current national commitments the Commonwealth and the state and territory governments are already implementing. This represents a significant investment and agreed work program of reform under the strategy.

This is on top of ongoing commitments by state and territory governments which support young children and their families. These commitments include core health, early childhood education and care, child protection, disability support services and specific initiatives around home visiting, service integration, community development and innovative services for Indigenous children.

There are also a range of relevant ongoing commitments at the Commonwealth level which provide broader supports to families and underpin national early childhood development approaches. These include: the family support program (encompassing family relationships services, playgroups and parenting programs); the Child Support System; income support; family tax benefits; paid parental leave; medical and pharmaceutical benefits; child care assistance; industrial relations policies; and longitudinal studies on children, youth and household income and labour dynamics.

3.3 Immediate action

Table 3 on page 26 outlines new actions, within existing resources, agreed by all jurisdictions to lift the capacity of the early childhood development system and build momentum for transforming the system over time.

3.4 Steps to address gaps

Drawing on the evidence and areas of greatest concern for children, a range of steps have been identified in Table 4 on page 27 that will be considered to address specific gaps and further build capacity over the life of the strategy to achieve the vision by 2020.

Within these steps, a number of specific reform priorities have been identified (highlighted in yellow in Table 4) for further development by the Commonwealth and state and territory governments into proposals for COAG consideration in 2010:

- Strengthen universal maternal, child and family health services
- Support vulnerable children
- Improve early childhood infrastructure
- Build parent and community understanding of the importance of early childhood development
- Strengthen workforce across early childhood development and family support services
- Build better information and a solid evidence base.

In considering how and when these priorities should be progressed over the short, medium and long-term to 2020, COAG will take into account the starting point of each jurisdiction, available resources and emerging new priorities.

These priorities are discussed further in Section 3.5.

TABLE 2 CURRENT NATIONAL EARLY CHILDHOOD DEVELOPMENT COMMITMENTS

ELEMENT	OUTCOME	COMMITMENT
SUPPORT FOR CHILDREN, PARENTS, CARERS & COMMUNITIES	1	The COAG Early Intervention Services for Parents, Children and Young People measure which aims to support mental health promotion, prevention and early intervention in children and young people
	2	Commitments under the National Framework for Protecting Australia's Children including: the priority actions of developing ambitious national standards for out of home care; improved support for young people leaving care; new demonstration sites in disadvantaged communities to enhance service integration for children at risk; better utilisation of early intervention and prevention services including enhanced access to quality child care for children at risk; and a number of national leadership projects to improve the evidence base and enhance national consistency
		The National Partnership Agreement on Homelessness with a focus on supporting women and children at risk of homelessness
		A National Plan to Reduce Violence Against Women
	3	The Home Interaction Program to help disadvantaged parents assist their child make a successful transition to school
	4	The National Disabilities Agreement which has a focus on early identification and intervention, supporting key transitions and the role of families and carers
	6	Australia's Future Tax System Review
		Paid Parental Leave—18 weeks post-natal leave for the primary carer paid at the adult federal minimum wage commencing 1 January 2011
		Research characteristics of shared care parenting to determine the arrangements that work in the best interests of the child
RESPONSIVE EARLY CHILDHOOD DEVELOPMENT SERVICES	1	The National Partnership Agreement on Preventive Health with a focus on the early years
		The National Healthcare Agreement which supports child and family health
		Finalise the National Framework for Universal Child and Family Health Services
		The teenage sexual, maternal and child health initiative under the National Partnership Agreement on Indigenous Early Childhood which contributes to the <i>Closing the Gap</i> target to halve the mortality gap for Indigenous children under five
	3	National Partnership Agreement on Early Childhood Education to support universal access to quality preschool by 2013, (including all remote Indigenous children as a <i>Closing the Gap</i> target)
	4	Child and Family Centres under the National Partnership Agreement on Indigenous Early Childhood
	5	The Improving Teacher Quality, Literacy and Numeracy, and Low Socio-economic Status School Communities National Partnerships under the National Education Agreement
		The Melbourne Declaration on Educational Goals for Young Australians
	7	A national commitment to establish integrated early learning and care centres (first 38 under way, including six autism specific centres)

ELEMENT	OUTCOME	COMMITMENT
ENABLING ELEMENTS • quality and regulation • Workforce and leadership • Infrastructure • Governance and funding • Knowledge management and innovation	1	The Australian Commission on Safety and Quality in Healthcare
		The COAG 2008 Health Workforce Reform Package, particularly reforms related to primary health care
		National Nutrition and Physical Activity initiatives such as the National Breastfeeding Strategy and Healthy Eating and Physical Activity Guidelines for Early Childhood Settings
	3	National Early Childhood Education and Care workforce initiatives including additional university places for early childhood teachers, the removal of TAFE fees for child care students and paying 50% of the HECS-HELP fees of early childhood teachers who work in areas of high disadvantage
		The national quality agenda for early childhood education and care encompassing national standards, streamlined regulatory approaches, a rating system and an Early Years Learning Framework
		Implement the core competencies to underpin the education and training of early childhood professionals developed jointly by the Ministerial Councils for Health and Community and Disability Services
		National early childhood research and monitoring development activities including the Australian Early Development Index (AEDI), the Headline Indicators for Children's Health, Development and Wellbeing and data development for reporting under COAG, specifically the development of a data and evaluation strategy under the National Partnership Agreement for Early Childhood Education

TABLE 3 IMMEDIATE ACTIONS WITHIN EXISTING RESOURCES

ELEMENT	OUTCOME	ACTIONS
SUPPORT FOR CHILDREN, PARENTS, CARERS & COMMUNITIES	5	Enhance collaboration across schools and early childhood services to improve transition to school from early childhood settings
	6	Establish local governance arrangements that facilitate consultation with children and families about their needs to foster child-friendly communities, drawing on the Australian Early Development Index (AEDI)
	7	Actively promote integration of early childhood education and care, for example in planning processes for new services
RESPONSIVE EARLY CHILDHOOD DEVELOPMENT SERVICES	1	Develop antenatal care guidelines
		Develop a Maternity Services Plan drawing on findings from the Maternity Services Review
		Develop ways to better engage parents and professionals in the evidence base about early childhood development and incorporate key messages into core early childhood service delivery, such as expanding the use of the current immunisation or child health book
	4	Coordinate existing national investments to improve service delivery in rural and remote areas around the needs of young children, such as through the National Partnership on Remote Service Delivery
ENABLING ELEMENTS • quality and regulation • Workforce and leadership • Infrastructure • Governance and funding • Knowledge management and innovation	All	Implement new ministerial council arrangements for early childhood development
		Agree a new national approach to the governance of quality standards for early childhood education and care.
		Further consider the development of a National Agreement on Early Childhood Development
		Consider the Australian Early Development Index (AEDI) results in community, state and national planning processes
	3	Implement workforce measures as part of the National Partnership Agreements on Early Childhood Education and Improving Teacher Quality, including the first national survey of early childhood teachers
		Develop training materials to support the release of the Early Years Learning Framework and the National Quality Agenda
		Target education and employment programs towards the early childhood education and care sector
		Improve data collection related to early childhood education and care under specific funding to states and territories for this purpose under the National Partnership Agreement for Early Childhood Education

TABLE 4 FURTHER STEPS TO ADDRESS GAPS OVER THE LIFE OF THE STRATEGY TO 2020

ELEMENT	OUTCOME	ACTION AREAS—TO BE FURTHER DEVELOPED FOR COAG CONSIDERATION STARTING WITH SIX SPECIFIC REFORM PRIORITIES HIGHLIGHTED WITH *
SUPPORT FOR CHILDREN, PARENTS, CARERS & COMMUNITIES	6	* Build parent and community understanding of the importance of early childhood development, including through providing evidence based information
		Increase access to parenting programs and other parent supports
		Build partnerships with non-government organisations and employers to increase support for families and communities
		Improve whole-of-government policy and planning to strengthen broader socio-economic supports for families e.g. income support, housing, transport, employment, child care assistance, and workplace policies
	4	Strengthen the capacity of adult-focussed services, such as homelessness, mental health, drug and alcohol rehabilitation services, to respond to the needs of young children in families accessing these services (also relates to action area 3.5 under the National Framework for Protecting Australia's Children)
RESPONSIVE EARLY CHILDHOOD DEVELOPMENT SERVICES	1	* Strengthen maternal, child and family health service delivery as a key plank of a strong universal service platform
		Increase coordination between maternal, child and family health services and education and care and family support
		Improve capacity to assess child health and development between 18 months and 3 years
	4	* Improve support for vulnerable children and their families through improved service response and accessibility, particularly children with a disability, children at risk of homelessness, some Indigenous and CALD children, children in jobless families, and children in or at risk of entering the child protection system
	All	Targeted support for innovative projects in service delivery, including establishing clear and accessible referral pathways between universal to targeted and intensive services, and building the evidence base about integrated service delivery models
		Establish mechanisms to share information and link data about young children across professions, services and government agencies, with appropriate privacy protections
ENABLING ELEMENTS • quality and regulation • Workforce and leadership • Infrastructure • Governance and funding • Knowledge management and innovation	All	* Improve early childhood development infrastructure to support maternal, child and family health service delivery, increased access to quality early childhood education and care, and improved service response for vulnerable children
		* Strengthen the workforce across early childhood development and family support services, particularly around leadership and interdisciplinary practice, to better support children with special needs, and to deliver culturally inclusive services
		* Build better information and a solid evidence base, including a comprehensive national minimum data set to support the early childhood development strategy
		Strengthen national quality frameworks for maternal, child and family health, and for the family support sector

3.5 Specific reform priorities to address gaps

From the gaps to be addressed, governments have identified six specific reform priorities for further development and consideration by COAG in 2010. These are highlighted in yellow in Table 4. They were selected on the basis of evidence, greatest need and links to other commitments or enablers to deliver early outcomes under the strategy.

COAG will take into account the starting point of each jurisdiction, available resources and emerging priorities when it considers how and when these priorities should be progressed over the short, medium and long term to 2020.

1. Strengthen universal maternal, child and family health services

The aim of this reform priority is to strengthen maternal, child and family health service delivery as a key plank of a strong universal service platform.

Further consideration will be given to actions such as:

- improving continuity of care across maternal and child and family health services
- increasing access to services by vulnerable families
- promoting protective factors and reducing risks for child development (such as healthy lifestyles during pregnancy, breastfeeding and responsive parenting)
- timely assessment, referral and early intervention for children and families with complex needs.

2. Support for vulnerable children

This reform priority aims to improve the service response and outcomes for vulnerable children and their families, building on the National Framework for Protecting Australia's Children. Particular attention will be given to children with a disability, children at risk of homelessness, some Indigenous children, some children from culturally and linguistically diverse backgrounds, children in jobless families and children in or at risk of entering the child protection system.

Further consideration will be given to actions such as:

- improving assessment to identify vulnerable children
- improving the effectiveness of 'no wrong door' referral pathways across universal, targeted and intensive early childhood and family support services
- improving outreach and engagement with vulnerable families in supporting child development in the home and in participating in services at all levels, especially universal health, early childhood education and care, and family support.

3. Engaging parents and community in understanding the importance of early childhood

This reform priority aims to build understanding among parents, other primary carers and the broader community of the importance of early childhood development to whole of life pathways. Growth in knowledge from the neurosciences shows how brain development in the early years can set trajectories for learning and development throughout life. Specifically, brain development is at its most critical phase from birth to the age of three.

It is therefore imperative that the importance of brain development during this time is consistently and universally promoted to all parents and caregivers in order to maximise the contribution they can make to their children's development. Activities under this priority will increase awareness of key behaviours which parents and caregivers can adopt during the early years of a child's life to enhance brain development and, overall future life chances of children.

Further consideration will be given to actions such as:

- targeted awareness raising about the importance of early childhood, the value of children, role of parents and those who work with children
- increasing access to information about the risk and protective factors for child development and the services and supports available for children and families.

4. Improve early childhood infrastructure

Strategic improvements to early childhood development infrastructure are needed to deliver the COAG early childhood education and care reform agenda, and specific reform priorities for strengthening maternal, child and family health services and the service response for vulnerable children and families.

Further consideration will be given to actions such as:

- expanding the supply, modernising and rationalising existing early childhood infrastructure
- developing service integration models
- building community-level responses, especially in disadvantaged communities
- building partnerships and leveraging third-party investment in infrastructure.

5. Strengthen the workforce across early childhood development and family support services

The aim of this reform priority is to build the capacity of the early childhood development workforce to achieve the 2020 vision for children, and beyond. This will complement workforce initiatives to support current commitments to improve access to quality early childhood education and care. However, it has a greater emphasis on the broader early childhood development workforce, including health, family support and professionals working in adult-focused services.

Further consideration will be given to actions such as:

- increasing the quality and overall supply of the workforce
- developing leadership
- developing skills in engaging with families and interdisciplinary approaches
- inclusive service delivery and cultural competencies.

6. Build better information and a solid evidence base

The aim of this reform priority is to develop national capacity for monitoring, research and evaluation related to children, families and early childhood development services to inform policy and improve transparency under the strategy.

Further consideration will be given to:

- consistent unit record information and a comprehensive national minimum data set to support the early childhood development strategy
- improving the dissemination of the evidence about early childhood development
- improving reporting (building on existing data development and reporting initiatives)
- implementing a national research agenda
- building the evidence base around innovative and integrated service delivery.

3.6 Next steps

The Commonwealth and state and territory governments will progress implementation of the strategy following endorsement by COAG.

This will involve the following steps:

- Publicly release the strategy
- Report back to COAG on progress on immediate steps outlined in Table 3 in 2010
- Present fully developed proposals for the six specific reform priorities for COAG consideration in 2010; proposals to include short, medium and longer-term milestones
- Give further consideration to the development of a National Early Childhood Development Agreement consistent with the new Intergovernmental Agreement on Federal Financial Relations
- Agree progress measures and reporting under the strategy for COAG consideration in 2010, seeking alignment with existing data development initiatives and relevant COAG, Ministerial Council and national reporting processes, such as the Headline Indicators for Children's Health, Development and Wellbeing.

■ ■ Appendix 1

The evidence base

The following provides a brief summary of some of the extensive evidence base available about early childhood development and the various types of early childhood interventions which have been shown to influence child outcomes. It is not intended to be comprehensive but rather to outline the primary research drawn on in developing this strategy, reflecting both Australian and international sources.

Early childhood development

Brain development

The brain's basic architecture is built over time in a process that begins before birth and continues through to adulthood. The brain is built over a succession of 'sensitive periods'. These sensitive periods are associated with the formation of specific circuits that are associated with specific abilities.

The development of increasingly complex skills builds upon the circuits and skills that were formed earlier. It is through this process that early experiences create the foundation for learning, behaviour, physical and mental health. The stronger the foundation in the early years, the more likely it is that there will be positive outcomes for children.

Healthy brain development is important not just for cognitive skills and future academic achievement but also for physical, social and emotional development.²²

Almost all the brain cells an individual will ever have develop during the first 20 weeks of pregnancy. Unlike other cells in the body, the brain cannot regenerate if damaged.

A child's brain is immature at birth and the connections between brain cells multiply considerably in the first few years of life.

The developing brain is particularly vulnerable to toxins up until the first year of life as it does not have the same physical protections as the adult brain.²³

During the preschool years the brain begins to maximise efficiency by determining which connections to keep and which to eliminate. Further development is cumulative, and later stages build on the foundations of earlier skill and knowledge acquisition.²⁴ Children play an active role in their own learning and development by selecting certain experiences over others and through their behaviours and characteristics which influence how caregivers respond to them.²⁵

There are sensitive periods for different aspects of brain development. The neural pathways for emotional control, for example, are established primarily between the first six to 30 months of life and are powerfully influenced by the quality of the care and stimulation the child receives during this time. This is the foundation of social competence and affects how well the child will adapt to school, form successful relationships with others and develop general life skills.

During the first 24 months of life, children's acquisition of language is highly associated with their mothers' speech and interaction with them. By two years of age, children whose mothers speak to them the most have vocabularies up to eight times greater than those whose mothers speak to them the least.²⁶

GROWING UP IN AUSTRALIA

The Longitudinal Study of Australian Children (LSAC) Growing up in Australia is following two groups of children aged 0–1 years and 4–5 years for 6 years (over 10,000 children in total) and is providing insights into the effects of early experience on later developmental outcomes.

Some of the key findings from LSAC to date are:

- Higher quality child care is associated with positive socio-emotional outcomes for children.
- Longer hours of child care were associated with improved social competence but also higher rates of behaviour problems.
- Compliance with child support and shared decision-making following parental separation was relatively low.
- Parental involvement in children's learning is important for children's academic progress.
- Fathers did not have a major influence on the capacity of couple families to provide parent-only child care.
- Parent reports suggest that the wellbeing of study children was consistent with that of children growing up in the 1980s however teacher reports suggest study children are more likely to display conduct and hyperactive behaviour problems than their 1980's counterparts.³⁸

Biological embedding

Since the completion of the mapping of the human genome, the study of gene-environment interactions has cast a whole new light on the importance of the early year's environment in the origins of health and some of the most burdensome adult diseases.²⁷

Biological embedding is a process whereby experiences are programmed into the functioning of developing biological and behavioural systems. These systems are very difficult to modify later on. This process can be adversely affected by poor nutrition and exposure to stress or toxins during pregnancy and the first years of life.²⁸

Poor foetal growth and low birth weight (less than 2.5 kg) is linked to the development of later childhood cognitive and behavioural disorders as well as chronic diseases later in life such as obesity, heart disease, diabetes and mental health problems. Low birth weight is known to be related to a range of preventable risk factors during pregnancy, many of which occur more frequently among Indigenous Australians. These include low maternal age (less than 17 years), maternal malnutrition, tobacco, alcohol and other drug use during pregnancy, genito-urinary tract infections including sexually transmitted diseases, and poor antenatal health care utilisation.²⁹

Similarly, many disabilities and impairments have their origin at birth or in early childhood and can be better managed or improved through early detection and intervention.³⁰

Another risk factor for child development is poor nutrition related to the modern western diet. Compared to the previous generation, children are consuming significantly more food and drinks with high calories and marked changes in the ratio of high density versus low density fats and oils. Both of these trends have been implicated in increased childhood overweight and obesity and emotional and behavioural problems.³¹

Attachment theory

One of the most critical factors shaping children's development is the quality of their relationship with a parent or close carer and the ability of that carer to understand and nurture their development. Parenting attributes such as consistency, warmth and community connectedness are associated with positive outcomes for children.³²

Attachment is an instinct where infants seek closeness and communication with carers. Attachment is considered secure when the carer responds in a predictable, warm and appropriate way. Positive responses from the carer release pleasurable hormones that help the brain to grow. Children who are loved and have care which is responsive to their needs are generally more likely to approach others with positive expectations and be receptive to guidance and control.³³

Attachment is affected by a number of factors, including antenatal and postnatal depression in mothers.³⁴ Importantly, the Longitudinal Study of Australian Children findings show that parental confidence and skills is a key factor in accounting for the overall proportion of children who are developmentally at risk.³⁵

Impact of stress

Ongoing stress and highly stressful events during early childhood can adversely influence the nervous system's response to stress for the rest of a child's life, with consequences for ongoing learning, behaviour, and physical and mental health.³⁶

Recent stress hormone studies show that children having more secure attachment relationships in infancy are less likely to show increases in the stress hormone cortisol when they are behaviourally upset as preschoolers. Preschool children who have poor behavioural control and aggressive behaviour are also more likely to have higher levels of cortisol than other children.³⁷

Exposure to abuse and neglect and other traumatic experiences are associated with negative outcomes for children across all income levels. Research into the biological effects of stress on the developing brain shows that long-lasting ‘blunting’ of the stress response system can occur in some (but not all) children. This occurs through a process of ‘methylation’ where specific genes are regulated to respond differently to future stressful situations. Brains of severely abused children have been shown to have smaller volume and less areas of connection between the right and left hemispheres. Such adaptations can have significant adverse consequences for ongoing physical and mental health.³⁹

Multiple risks and intergenerational disadvantage

Early childhood development is affected by the interplay of a number of multiple risk and protective factors in the child’s environment. No single risk or protective factor is enough to make a significant difference.⁴⁰

Parents’ age, educational level, employment status and family income have all been shown by the Longitudinal Study of Australia’s Children to be independently associated with children’s developmental outcomes.⁴¹

For children living in poverty, the probability of being exposed to multiple risk factors is considerably higher. Children in low-income families are more likely to have poor developmental outcomes, make a difficult transition to school, and have reduced aspirations and to pass this risk on to their children in a cycle of intergenerational disadvantage.⁴²

Poverty is more complex than insufficient income, and includes such things as social status, exclusion and lower self-esteem. The effects of poverty on children and their development include a number of often interconnected factors including stress, poorer health outcomes, limited exposure to early learning opportunities and poorer parenting. These factors are related to: parental level of education; the impact of stress associated with poverty on parents’ mental health, lifestyle behaviours, and capacity or willingness to access quality services; and unstable housing and food insecurity.

Research on resilience has highlighted a number of protective factors that can reduce the impact of poverty on young children, such as the presence of an involved significant adult other than a parent in the child’s life, professional support to improve mother–child interactions, and positive community environments.⁴³

Effective interventions

Longitudinal research from overseas has provided a wealth of information about the benefits of targeted early childhood development programs for children and society, particularly those which work directly with both children and parents.⁴⁴

Table 5 on the next page summarises these benefits for both developing and developed countries. The following sections provide some examples of relevant research.

TABLE 5 A SUMMARY OF THE BENEFITS OF EARLY CHILDHOOD PROGRAMS⁴⁵

BENEFITS	PATHWAYS LINKING EARLY CHILDHOOD DEVELOPMENT TO HUMAN CAPITAL			
	EDUCATION	HEALTH	SOCIAL CAPITAL	EQUALITY
FOR CHILDREN IMMEDIATE	Higher intelligence, improved practical reasoning, eye and hand coordination, hearing and speech reading readiness, improved school performance less grade repetition and dropout increased schooling	Less morbidity, mortality, malnutrition, stunting, child abuse better hygiene and health care	Higher self-concept more socially adjusted less aggressive more cooperative better behaviour in groups increased acceptance of instructions	Reduced disadvantages of poverty improved nutritional status, cognitive and social development and health
FOR ADULTS LONG-TERM	Higher productivity increased success (better jobs, higher incomes) improved childcare and family health greater economic wellbeing	Improved height and weight enhanced cognitive development less infections and chronic diseases	Higher self-esteem improved social competence, motivation, acceptance of norms and values less delinquency and criminal behaviour	Equality of opportunity, education, health and income
FOR SOCIETY	Greater social cohesion; less poverty and crime lower fertility rates increased adoption of new technologies improved democratic processes higher economic growth	Higher productivity less absenteeism higher incomes	Improved utilisation of social capital enhanced social values	Reduced poverty and crime better societal health increased social justice higher sustainable economic growth

Health interventions

A well-known US study on nurse home visiting, the Elmira project, has demonstrated the benefits of early assessment and extended support by skilled health professionals for disadvantaged children and parents. Benefits included improved health behaviours during pregnancy, greater social support, increased birth weight and reduced risk of premature birth.⁴⁶

Parenting programs

Recent longitudinal evaluations of the Triple P program (Positive Parenting Program), which comprises five levels of intervention of increasing intensity and targeting from broad media and communications to enhanced family intervention, have demonstrated improved child and family outcomes. These include: reduced rates of emotional and behavioural problems in children; reduced rates of child abuse and neglect; increased parenting skills and confidence; and reduced parent depression, stress and coercive parenting.⁴⁷

There is evidence that parental employment can contribute to better health, educational and social outcomes for children. When balanced with access to adequate family time and social capital, stimulating employment is associated with mental health and wellbeing of parents who are then able to parent more effectively and support better outcomes for children. Employment also provides greater financial security for families and children.

Paid parental leave has been shown to be one of the most effective ways of supporting parents achieve a positive work and family balance. Children under 12 months of age, in particular, have better outcomes when mothers are able to take leave, in part, because this supports longer duration of breastfeeding.⁴⁸

Early childhood education and care

A number of longitudinal US studies, notably the High Scope Perry Preschool Program and the Carolina Abecedarian Project, which targeted very disadvantaged families, found significant short and long-term improvements in child development outcomes. These included: improved cognitive and social development; reduced need for remedial education; higher rates of school completion and post-school education; higher employment rates; and reduced criminal activity and welfare dependence.⁴⁹

The UK study Effective Provision of Preschool and Primary Education (EPPE), which examined the longitudinal effects of preschool on over 3000 children, provides evidence that larger, less intensive programs also produce positive results for all children. Preschool contributed to better intellectual development, improved independence, concentration and sociability for all children. Better outcomes were found when children attended preschool for longer and when staff had higher qualifications. Disadvantaged children were found to have benefited more if they attended centres which had a mix of children from different social backgrounds.⁵⁰

The importance of quality

A number of studies, including EPPE, also point to the critical importance of high-quality in early childhood development programs for improving outcomes. Key aspects of quality linked to positive child outcomes include higher qualifications of the early childhood professionals, lower child-to-staff ratios and a strong relationship between the child and a stable caregiver.⁵¹

Research also indicates that young children who spend excessive hours in poor-quality child care characterised by low staff qualifications and ratios and excessive staff turnover are more likely to have higher levels of the stress hormone cortisol and to develop social, emotional and behavioural problems.⁵²

The importance of quality extends to the quality of the primary school a child attends and the effectiveness of school-based programs for sustaining good outcomes.⁵³

The home learning environment

Significantly, the EPPE study found, both initially and at follow-up of children in primary school at age 10 and 11, that the mother's educational status and the quality of the early years home learning environment were the strongest predictors of good academic, social and behavioural outcomes for children.⁵⁴

Cost-effectiveness—universal and targeted approaches

The literature on the cost-effectiveness of early childhood development programs refers primarily to the US studies on targeted early childhood development programs mentioned above. A large proportion of the return on investment from these programs was due to reduced crime.⁵⁵

While it is uncertain whether similar but less intense programs made universally available in the Australian context would also be cost-effective⁵⁶, there is good longitudinal evidence (for example, from the EPPE study and the Triple P evaluations) that quality early childhood education and parenting programs can benefit all children and families.⁵⁷

Further, there is a view that universal approaches are the best way to address disadvantage because outcomes tend to lie on a social gradient and the largest group of vulnerable children, in terms of actual numbers, is in the middle of this gradient.⁵⁸ Universal approaches need to be considered in the context of an analysis of the cost/benefit evidence related to the range of priorities competing for available government resources.

Many health-based universal programs have been shown to be cost-effective. Immunisation programs are a good example of this. The introduction of subsidised immunisations for measles in 1970 saved an estimated 95 lives and prevented approximately four million cases between 1970 and 2003 with estimated savings on health care in excess of \$9 billion.

Social marketing can also be a very powerful and cost-effective tool for changing risky behaviours, noting that for some risks to the developing child, such as alcohol use during pregnancy, a service response may be too late. For example, a conservative estimate of the benefits (net present value) from public health campaigns to reduce smoking over the past 30 years is around \$8.5 billion (based on an assumption that these programs contributed to 10 per cent of the reduction in smoking).⁵⁹

Service integration

There are signs that the current service system is struggling to cope with overall demand and many children and families—often those with the greatest need—are not getting the help they need. There is also low participation in universal health and early childhood services by some families. To be more effective and efficient, a number of experts propose the development of an integrated service system of universal, targeted and intensive services based on a strong prevention focus.⁶⁰

Recent findings from the Early Years Study in Canada support the development of well-funded, quality, integrated services. These services improved outcomes for children, but when they were properly linked to employment, health and social services, there were other beneficial outcomes. Increased service use by families led to more maternal employment, less family poverty, improved parenting skills and greater family and community cohesion.⁶¹

This is supported by Australian evidence, which suggests that universal service platforms provide an entry point for families to access services. They can be an effective and non-stigmatised mechanism to identify and refer high-risk families to more intensive support.⁶²

There also needs to be effective outreach and engagement with the most marginalised families and efforts to make all services more accessible and inclusive.⁶³

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