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17 June 2020

Ms Emily Cross
Manager
Strategy, Children and Families Unit
33 Charlotte Street
Brisbane Qld 4000

Via email: Emily.Cross@health.qld.gov.au



www.amaq.com.au

88 L'Estrange Terrace
Kelvin Grove 4059

PO Box 123
Red Hill 4059

Ph: (07) 3872 2222
Fax: (07) 3856 4727

amaq@amaq.com.au

ACN: 009 660 280
ABN: 17 009 660 280

Dear Ms Cross

Thank you for providing AMA Queensland with the opportunity to provide feedback on the Queensland Children's Wellbeing Framework. Overall, AMA Queensland finds the Queensland comprehensive in its approach, but does find the document to be too broad, while the framework itself may be unachievable for all population groups in Queensland.

1. What are your organisation's views on the tone, structure and guiding values of the Queensland Children's Wellbeing Framework?

- AMA Queensland finds the structure and values appropriate and the layout and structure of the framework logical. However, the document is too prescriptive at times e.g. "Children are....", AMA Queensland does not think we can say that children are.....we can only guide them to become the person they will be.
- On reading the document one could be forgiven for believing that opportunities in childhood to "*thrive*", to be "*strong in self and culture*" and "*happy and resilient*" are equitable but we know that is not the case. AMA Queensland would suggest the levels of inequity in Queensland society are growing and for example, generational disadvantage has a huge impact on equity as does being from Aboriginal and Torres Strait Islander background or people who are born overseas from developing countries with less affluence, who now live in Queensland, have significantly less opportunities to achieve everything your document espouses.

2. Are there aspirations in the draft framework that should be emphasised further, or other aspirations that should be included?

- AMA Queensland find some of the aspirations too prescriptive; there is no freedom for children to be just kids or work out who they are.
- The document is very specific in its use of terms "*children....develop a positive sense of their identify, self-agency and autonomy.*" AMA Queensland believe children develop a sense of identify at an early stage and later, children learn the reality of where they "fit" into society.

- AMA Queensland would suggest that some of the aspirations occur simultaneously or independent of one another and not sequentially; for instance, learning and exploring. We understand babies and children learn from the day of birth and then every day after that, and that while we recognize the first 1000 days of development and learning are the most important, AMA Queensland would suggest it rarely happens sequentially.

3. Are there shared commitments in the draft framework that should be emphasised further, or other shared commitments that should be included?

- We consider the shared commitment section on “we all play a part” should be expanded to increase the responsibility of the community to care for children. It should include anyone who has contact with children including parents, other family members, educators, police and childcare. If this is to be a whole of government approach this needs to be reflected throughout the framework and measures.
- AMA Queensland overall agrees with the shared commitments but again finds some of the wording problematic. *We should introduce children to music and the arts, guide them to museums and libraries, and help them with the natural world.* The problem with this wording is that it is unrealistic to expect all population groups to experience all of these shared commitments in their lifetime, specifically noting different cultural approaches and issues such as generational disadvantage.
- With the potential importance of epigenetics in the developing foetus and also the foundation of the first 1000 days of life, we would emphasize and focus on the importance of maternal physical and mental wellbeing both in pregnancy and parental wellbeing) postnatal period.

4. Are there ways your organisation could use the Queensland Children’s Wellbeing Framework within their day-to-day work?

- AMA Queensland is a member based organisation and many of our members would suggest they provide a safe environment for children and their parents and carers every day.
- It would be helpful to guide parental questionnaires used in assessments for child development and community child health.

5. Does your organisation have any other feedback?

- More emphasis should be placed on caring for the mother/carer as they care for newborn babies, babies and infants. Studies have shown that supporting new mothers lead to better health outcomes in children. This is an area that needs more attention and funding.
- Perinatal mental illness also needs more focus and as a consequence, more funding.
- The measures – AMA Queensland agrees broadly with the measures included in the draft document although some of these measures already exist in other Queensland Health, Education Queensland and the Department Communities programs (e.g. vaccination program) and therefore, as a result these need to be cross-referenced in this document.

AMA Queensland believe children in Queensland need to be given the best possible opportunity for good health and wellbeing, including living in a community which is inclusive, enriching and supportive. AMA Queensland supports the Queensland Children’s Wellbeing

Framework but does not believe the current draft framework will be relevant to all sections of the Queensland community.

If you require further information or assistance in this matter, please contact Mr Jeff Allen, AMA Queensland Policy Manager on 3872 2262.

Yours sincerely



Dr Chris Perry
President
AMA Queensland



Jane Schmitt
Chief Executive Officer
AMA Queensland