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AMA submission to Australian Government's National Early Years Strategy

Submitted via: <https://engage.dss.gov.au/early-years-strategy-public-submissions/>

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

The AMA supports the proposed structure of the strategy.

We emphasise the importance of utilising a whole-of-community approach to underpin the effort to maximise a child's potential. We also note by the policies and practices centred around children need to be informed by collaborative research that cuts across multiple policy areas including medicine, health, education, welfare, and justice.

The structure of the strategy should be underpinned by initiatives that already exist and work with children in their early years. It is important that policies developed through the strategy do not contradict good work that has, as is continuing to be, undertaken across sectors. This is especially relevant regarding initiatives focussed on Aboriginal and Torres Strait Islander people, and the *National Agreement on Closing the Gap 2020*.

Under this agreement, all Governments have committed to:

- Strengthening structures to empower shared – and equal – decision making with Aboriginal and Torres Strait Islander peoples.
- Building the community-controlled sector to meet the needs of Aboriginal and Torres Strait Islander peoples and deliver services how and where they need.
- Improving mainstream services to be culturally safe and responsive to the needs of Aboriginal and Torres Strait Islander peoples.
- Shared agreement, transparency and access to data and information that supports Aboriginal and Torres Strait Islander initiatives.

The AMA suggests that a strong outcomes and evaluation framework must accompany the final strategy to ensure that all relevant levels of government are accountable for its ultimate success. The Department must be flexible with the proposed structure as the strategy is developed and evolves, to ensure it is truly informed by those that it affects.

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

The AMA believes the vision for the nation regarding Australia's youngest children should include the right for all Australian children to:

- a healthy start to life
- a safe and secure environment in which to live
- equitable access to opportunities to help them learn, develop, and thrive.

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

The AMA recommends priority is given to the inclusion of the following outcomes:

Improved Access to Developmental Checks for all Australian children aged 0-5

The AMA strongly believes that medical practitioners, early childhood educators, parents and guardians all have a role to play in the care of children and identification of whether they are meeting developmental milestones. Early detection of developmental delays can allow for early intervention, benefitting the lifelong health of the child. This developmental surveillance can be undertaken in several ways, through milestone checklists, analysis of parent and carer concerns, soft-entry points such as playgroups, as well as clinical judgement and screening tests done by health practitioners.

General Practitioners (GPs) are in a unique position to be able to detect developmental problems with children, due to the frequent interaction with families in the early stages of a child's life. Communication between families, medical practitioners and other professionals working with children in their early stages of development, is vital to better health outcomes for the child.

Targeted Nutrition and Food Security Programs

The AMA acknowledges the importance of good nutrition towards improved health outcomes for younger children throughout their development. Hungry and poorly nourished children are at significant risk of poor health, delayed development, and poor school outcomes. Excess consumption of sugar in sweetened foods and drinks has led to obesity and poor dental health. This also includes those foods and drinks marketed for babies and toddlers. Parents and carers must be provided with accurate nutritional information to be given the autonomy to make good nutritional choices for their children. The strategy must include policy outcomes that will ensure children are well nourished and consume less unhealthy foods.

Reduction in Children Impacted by Poverty in their Early Years

Reducing the number of younger children living below the poverty line in Australia must be an identified outcome of the strategy. Income support payments should be set at a level that supports individuals and families to live with dignity and meet their basic needs. During the

Covid-19 pandemic when income support payments were lifted was hugely beneficial to children and their families. This reduced anxiety about whether families could meet their basic needs such as food, heating, and shelter. Access to good housing is a fundamental human right and essential for children to be able to grow up in a healthy and nurturing environment. These basic needs are central to the health of a child, and as such, rates of children experiencing poverty must be addressed in the strategy.

Implementing the Child Mental Health and Wellbeing Strategy, Especially Where it Relates to the Early Years of Development

The AMA suggests that to improve mental health outcomes of Australia's children, a commitment to fund and implement the recommendations in the recently released *National Children's Mental Health and Wellbeing Strategy 2021* is agreed upon by the Commonwealth Government.

The mental wellbeing of children is imperative to their mental health into adulthood. The early years of a child's life are start of a lifelong mental health journey and can be adversely influenced by risk factors including: prenatal stress, poor attachment, abuse or neglect; parental mental illness or substance abuse, family disharmony, conflict, violence, low socioeconomic status and poor links with community. Important protective factors include secure attachment to family, family harmony, supportive relationships with other adults and community involvement.

These factors, whether positive or negative, can have an impact during the extensiveness of brain development in utero and the early years of life. The evidence suggests links between nutrition, care and nurture in directly affecting the wiring of the pathways of the brain; and the degree to which negative experiences in the early years, including severe neglect or absence of appropriate stimulation, are likely to have decisive and sustained effects. The strategy should prioritise child mental health, emphasising the positive role protective factors can have on early brain development and linkages of this to mental health in later life.

Supporting Parents and Carers Through the Challenges of Raising Children in Their Early Years

As identified in the AMA's 2021 [Health Literacy](#) position statement, Health literacy is an important determinant of health, playing an essential role in the health-related behaviours of Australians and the way in which they interact with the health care system. Health literacy is a dynamic concept. The health literacy of any individual can fluctuate throughout their life based on age, health status, education, personal circumstances, disability, and cognitive ability. The healthy literacy of parents and carers is pivotal to the health of children in their earlier years. The AMA suggests that the strategy take into account the importance of health literacy, and look at joint outcome priorities, that are also being tackled in the Health Literacy Strategy, which the AMA [submitted](#) to in November. Policies surrounding children, must support parents and carers, in their capacity to build a relationship with, and raise a healthy, safe and secure child.

Access to Early Education Programs for All Children

Interventions that seek to improve the outcome for Australia's children must be adequately resourced. Interventions such as home visiting programs, parenting programs, and culturally appropriate pre-school education should be available to all children who require support, including those children with learning, language, behavioural, physical, or developmental difficulties. Community-based health workers should also be available to all and be well integrated within the early-education sector.

Early education programs also allow for parents and carers to return to work, which is a valuable option for many people with children in the early year age bracket, that can improve issues such as gender equity and workforce shortage. However, for this to be an option for many, the cost of these programs must be considered. The early childhood workforce must also be paid appropriately for the work they are doing in caring for young children.

Improved Support for Aboriginal and Torres Strait Islander Children

It is imperative that as part of the strategy, culturally appropriate programs and support avenues are established to build on existing strengths within Aboriginal and Torres Strait Islander communities. This will involve collaborating with key community leaders on program design and implementation. Effective preventative programs should target the whole community to avoid stigma and employ Aboriginal and Torres Strait Islander community-based workers wherever possible. Supporting Aboriginal and Torres Strait Islander children must involve promoting culturally safe early childhood health and education options for whole communities.

Climate Change Mitigation and Adaption to Support Future Generations

The AMA recognises that children are going to face the full consequences of a heating climate. To ensure a safe future and liveable environment for our children, we need to rapidly transform our energy systems and economy to reduce the dependence on fossil fuels. We suggest that the strategy identify climate change as a critical factor for child health and wellbeing.

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

The AMA suggests that policy priorities work towards the mix of outcomes per our suggestions above.

5. What could the Commonwealth do to improve outcomes for children—particularly those who are born or raised in more vulnerable and/or disadvantaged circumstances?

The AMA understands that a person's health is shaped by the social, economic, cultural, and environmental conditions in which they live. Health inequities typically arise because of

inequalities within society, they are avoidable and can be associated with forms of disadvantage such as poverty, discrimination, and access to goods and services.

The AMA acknowledges that the Covid-19 pandemic has created additional pressures on Australian communities. Households are struggling with the rising cost-of-living, including the cost of food, fuel and accommodation. The Australian health care system is also under significant strain in primary care, health workforce and increased pressure on public hospitals, especially emergency departments.

Considerations of additional supports for socio-economically disadvantaged community groups must be considered in the context of the above. For example – the AMA would welcome a strong focus on ensuring that health care services and early education are available to all Australian children - no matter where they live or what their household circumstances are.

In 2022, the AMA joined with other leading health and welfare groups to call for a [Child Health Taskforce](#), to report on priority initiatives with focus on improving the social determinants of child health. Key focus areas were:

- reducing poverty,
- improving housing and
- addressing issues around nutrition, food security and sugary drinks.

The AMA also called for acknowledgement of climate change to ensure a safe future and liveable environment for all children. Australia needs to rapidly transform our energy systems and economy to reduce the dependence on fossil fuels. We need plans spanning the short, medium, and longer terms.

As per our comments made in Question 3, the AMA reiterates that strategy must prioritise the fundamental principal of cultural safety. This is vital to understanding and addressing the barriers that exist for Aboriginal and Torres Strait Islander families, to access support services across sectors such as education, health and social services. The Government has made a commitment to the *National Closing the Gap Agreement 2020*, and cultural safety is a core component that must be recognised to help close the gap.

The evidence is clear, that good early child development programs that involve parents or other primary caregivers of young children, can influence how they relate to and care for children in the home. This can vastly improve outcomes for children's behaviour, learning and health in later life. Universal programs and interventions aim to benefit children and families from all socio-economic groups in society. Outcomes data must be collected regarding all children across Australia, including those with disability, to ensure that there is equity in the outcomes being improved.

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

The AMA welcomes the approach taken to link this strategy with other national strategies to improve coordination. This should include collaboration between strategies such as the *National Children's Mental Health and Wellbeing Strategy 2021* and the *National Preventative Health Strategy 2021-2030*, working towards goals that are universal of improved health outcomes. Additional policy resources the Commonwealth should use to underpin their coordination and collaboration for Aboriginal and Torres Strait Islander children and families include the *National Aboriginal and Torres Strait Islander Early Childhood Strategy 2021* and the *National Agreement on Closing the Gap 2020*.

As well as integrating and implementing the work of previously developed strategies, the AMA suggests that it is essential to focus national policy on the early years of child development. In particular, the effects on learning, behaviour, and health throughout the life cycle, which involves all stakeholders. In Australia, general practitioners are often the initial point of contact with the primary health care system.

General practitioners coordinate care for their patients, particularly when a patient needs to access other health (and development) services. General practice nurses who are appropriately trained, supervised and who are suitably funded, are well placed to support general practitioners, particularly in relation to undertaking initial prevention activities, such as paediatric screening. Child and family health nurses, Aboriginal health workers, social workers, community-based health workers and health educators may also provide care and support to children and their families. Stakeholder engagement early, especially with professionals involved in health, such as the ones mentioned above, is imperative to sector support for policies which impact these workforces, and the children they support. The Commonwealth Government should commit to building, and valuing, the early childhood workforce. This can ensure that developmental programs and care of children in their early years continues.

7. What principles should be included in the Strategy?

The AMA recommends the strategy is underpinned by the principles of equity and access. Every child has a right to a safe and healthy start to life, regardless of the social and cultural determinants they are born into. This includes all children having access to appropriate health care and early childhood programs, universal services which are responsive to the needs of communities, as well as being culturally aware and safe. The strategy must be evidence based and informed by the lived experience of children and families.

The AMA suggests it would also be beneficial for the strategy to be underpinned by principles from global commitments outlined in the [Sustainable Development Goals](#) (SDGs). These goals recognise that ending poverty and other inequities must be done by developing strategies that improve health and education, reduce inequality, and spur economic growth.

The AMA also notes that it would be appropriate to reference the [United Nations Convention on the Rights of the Child](#) and the [United Nations Declaration on the Rights of Indigenous Peoples](#) in the strategy. Our national commitment to each of these instruments creates an important set of principles that should be adequately reflected in the strategy, grounding it in a child-centred and human rights focussed approach.

1st May 2023

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