

THE NEXT STEP FOR OUR CHILDREN



The health and well being of Australia's children is the subject of a new investigation by the House of Representatives Family and Community Affairs Committee. Early childhood expert, Professor Alan Hayes, looks at why the inquiry is a timely opportunity to take the next step in ensuring a better future for our children.

In the past two or three years the word 'crossroads' has been used in the titles of several Commonwealth reviews and reports, in areas as diverse as local government and higher education. The crossroads metaphor highlights the turn of the new millennium as a time for reflection and stocktaking. I also suspect that it reflects a fundamental recognition of the real choices confronting Australia on many, if not most, fronts as we move to take our place in a

fundamentally changed and rapidly changing world. A colleague, Frances Press, and I were also guilty in 2000 of using the crossroads metaphor in the subtitle of the Commonwealth's background paper on early childhood education and care, for an OECD Thematic Review conducted across 12 nations. It is particularly heartening, since then, to see evidence of Australia moving significantly beyond the crossroads in thinking about policy for its children and youth.



The appointment of the first Minister for Children and Youth Affairs, Larry Anthony, is a major milestone along the path. The rise of advocacy groups such as NIFTeY (the National Investment for the Early Years) is another, as is the emergence of ARACY (the Australian Research Alliance for Children and Youth), headed by Australian of the Year Professor Fiona Stanley. The Commonwealth report *Child Care: Beyond 2001*, which was one stimulus for the consultation paper *Towards the Development of a National Agenda for Early Childhood*, moved the debate yet further down the road. Finally, and more recently, the announcement of the Inquiry into Improving Children's Health and Well Being by the House of Representatives Family and Community Affairs Committee is another important signal of just how far we have moved beyond the crossroads. Along with the consultation paper, the House of Representatives inquiry is an important and timely opportunity for Australians to have their say on the place of children in our society and our obligations to provide better opportunities for all our children.

In addition to these specific forces, the journey beyond the crossroads started with the renewed recognition of the importance of the early years, of childhood generally, as well as of the family and community contexts of children's development. These issues are clearly at the heart of the current inquiry. The renewed focus on the importance of the early years of human development stems from wider public awareness of the research on early brain development, and particularly the life-long impact of the neurological impairments flowing from abuse and neglect of children. In turn, this has raised the prominence of the early years for politicians and policy makers, with increased interest in the influences on children in the early years of life, including the importance of family and of early care.

The interest in early human development has coincided with recognition of the benefits of investing in prevention rather than in costly and less effective interventions later in life. The Commonwealth, state and territory governments have all recently developed initiatives that focus on the needs of young families, in particular those who are disadvantaged, vulnerable or otherwise socially excluded. Again, these are issues central to the House of Representatives inquiry.

The focus on childhood also relates to a wider 'crossroads' the nation has reached

in terms of its population. The changes that have occurred demographically over the last century are dramatic.

Examination of some of these trends provides insight into a range of issues that currently confront Australia and that have widespread implications for the nation in this new millennium.

The declining fertility rate is perhaps the most marked of the trends. For example, from the 1860s to now, the fertility rate has dropped from six children per female to under two. The trend has been steady

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apart from the rapid decline around the years of the Great Depression and the steep rise in the postwar 'Baby Boom'. In the last two decades, however, the decline has again accelerated. At the same time, and related to the decline in fertility rate, family formation is increasingly delayed. As well, family forms now reflect greater diversity than in earlier times, reflecting complex social and economic changes that have occurred over the last century.

Alongside changes in fertility, life expectancy has also increased considerably over the century. There is now a marked bulge in the distribution of the population by age as the 'Baby Boomer' generation gets older. The rise of lobbying for aged care occurred with some decline in advocacy for children. Fortunately, there are again many signs that we have now moved beyond this thinking.

The place of children is, however, not uniformly advantageous across our communities. In a recent volume, Keating & Hertzman (1999) highlight "modernity's paradox": "A puzzling paradox confronts observers of modern society. We are witnesses to a dramatic expansion of market-based economies whose capacity for wealth generation is awesome in comparison to both the distant and the recent past. At the same time there is a growing perception of substantial threats to the health and well being of today's children."

Australia, regrettably, reflects this paradox. There is accumulating evidence that the threats to children's health and well being are increasing in Australia,

with signs of increasing disadvantage, social exclusion and vulnerability in some communities. Disadvantage is increasingly a feminised phenomenon, with about half of the children who are disadvantaged living in single parent families predominantly headed by their mother. Again, this is a key issue the inquiry will address.

The trends in population and disadvantage are interrelated. Birth rates differ considerably by social class, with the most recent census showing that in the least advantaged suburbs of the capital cities the birth rates are double those in the most affluent. However the average interval between generations for the most affluent is also almost double those for the least affluent (approximately 29 years versus 16 years).

Theodore Dalrymple, a British medical practitioner, recently related an interesting anecdote: "A 26-year-old woman has just become a grandmother. She gave birth at 14, her daughter was 12. On the present trend, she will be a great-great-grandmother by the age of 60. Since the age of menarche decreases as the diet improves, this no doubt represents the triumph of junk food over malnutrition."

These demographic changes highlight the difference in the proportions of families with young children living in disadvantage or affluence and mirror the data from elsewhere in the western world. Not only is there the link to birth rates, but disadvantage also influences the rates of infant mortality and morbidity (the occurrence of health and developmental problems). The numerous risk factors that lead to problems in childhood tend to be, though not exclusively, related to social class.

The interplay of child, family and community factors is also seen in the areas of abuse and neglect, school failure, and criminality, among others. These areas of social concern reflect similar sets of risk factors related to disadvantage, limited parental education, family problems, unemployment and lack of connectedness to community. The impacts on the health and well being of children in disadvantaged communities are widespread. The Family and Community Affairs Committee inquiry focuses clearly on these differences and how they might be addressed, particularly in Indigenous and other disadvantaged groups.

It can be argued Australia has traditionally invested too much, too late when it comes to dealing with the outcomes of childhood risk, such as abuse

and neglect, school failure, and criminality. *Pathways to Prevention*, a report for the National Crime Prevention Program, demonstrated the importance of early intervention, preferably starting before birth or at least in infancy and continuing into adolescence. The report concluded that effective early intervention provides the foundation for prevention of many of the problems that flow from disadvantage and childhood vulnerability.

The Perry Preschool Program in the USA provides one valuable example of the key developmental, educational and social role of early intervention. To summarise the findings briefly, children who had participated in a high quality preschool program showed higher levels of school achievement and appropriate behaviour at primary school, were more likely to complete secondary schooling and to enter further education, had lower levels of crime at 15 years of age, fewer arrests at 19 years of age and half the rate of arrests at 27 years of age, as well as higher levels of income and home ownership as adults.

An approach to prevention of childhood risk factors that is gaining increasing attention involves the provision of high quality education and care, as well as appropriate community supports. The evidence suggests that modifying social contexts is the most cost effective means of increasing resilience and enhancing the development of our children, families and communities. Interventions that focus on children, families and communities, with an emphasis on enhancing parenting skills and strengthening family-to-community links can have significant and enduring benefits. They particularly reduce the negative developmental consequences related to later antisocial behaviour, especially those related to aggression and juvenile delinquency.

The consequences for those children, families and communities at-risk do not occur in isolation from the wider society. The research highlights the interconnectedness of contexts and consequences. The consequences for one group to some extent have implications for the whole of society. Changes in relative affluence, demography, social structures, community resources and government policies have implications for the society as a whole. Promoting the quality of life for children, their families and communities is now seen as a key policy priority. The terms of reference for the new inquiry highlight the importance of family relationships, parenting skills and confidence.

The solution to the current problems will require commitment to prevention and a

willingness to invest in services such as child care, education and community development. Such services have been found to be the most cost effective ways of reducing social and developmental risk and preventing their negative consequences, such as crime, educational underachievement and problems of health and well being.

It is vital to acknowledge the complexity of these issues and the need for 'ownership' by the community, as a whole. The evidence is that intervention will need to be focused on children, families and communities. The solution to the current problems requires mobilisation of community will to embrace prevention and a willingness to invest in the health and well being of children.



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The nations that have a lower burden of social, health and educational problems will be better positioned at best to avoid or, at least, to overcome some of the challenges that they will confront. They will increase the probability that their 'wealth' is sustained and that they possess the social, cultural and economic capital required to be vital, vibrant and resilient nations.

The problem is not so much one of lack of resources but some failure to sustain and coordinate them effectively. Australia has a strong and well-developed infrastructure for addressing the health, educational and developmental needs of young children. This infrastructure also does

much to support families. What is needed, however, is a coordinated, nationally driven framework for maintaining, renewing and deploying these resources. The House of Representatives inquiry, along with other Commonwealth initiatives, provides a timely opportunity to advance the national framework for sustaining the health and well being of Australia's children.

The inquiry into improving children's health and well being has the following terms of reference, with point 2 being a major focus for the committee:

1. How can children's developmental needs best be accommodated in this rapidly changing social and technological environment?
2. What is needed most to strengthen family relationships, parenting skills and confidence?
3. What would a family and child friendly community look like? What practical steps could be taken to strengthen community engagement with families and children?
4. What are the gaps in existing services for children and parents? How could tiers of government and the non-government sector work more effectively to enhance service coverage and delivery?
5. What additional effort is required to meet the needs of Indigenous children, children from diverse cultural backgrounds, children with disabilities, children in jobless families, children known to be 'at risk' and children in foster care?
6. What national goals and targets for improving the health and well being of children and families could be developed to measure progress?

This is a wonderful opportunity for all Australians to influence the next stages of the journey beyond the crossroads, in the interests of the health and well being of current as well as future generations. Please do have your say! ■

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For more information on the inquiry into children's health and well being by the House of Representatives Family and Community Affairs Committee visit www.aph.gov.au/house/committee/fca/childwellbeing or phone (02) 6277 4566 or email fca.reps@aph.gov.au

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