Submission to the Early Childhood Education and Care Inquiry

Executive Summary

- Primary caregiver labour is essential to Australia's social fabric, yet it remains invisible, unpaid, and undervalued.
- Families face limited care options: either conform to institutional childcare/schooling systems that do not suit every child, or sacrifice financial stability to provide the care their children need.
- This lack of flexibility discourages many from having children at all, worsening Australia's declining fertility rate and compounding ageing-population challenges.
- Policy must expand beyond large-format childcare centres and support a diversity of models — including direct financial support for parents at home — so families have real choice.
- Supporting caregiver labour will pay dividends in improved child outcomes, reduced long-term health costs, and a stronger, more sustainable economy.

About Me

I am a mother of two young children and a teacher living in Melbourne. My professional background in teaching and my lived experience as a neurodiverse parent inform my perspective.

Among my siblings and friendship groups, many have decided against parenthood altogether. Their reasoning is consistent: they see few workable care options, little support, and a bleak future of either fighting the system to raise their children the way they believe is best, or accepting institutional models that do not serve the majority of families well.

Key Observations

1. Invisible but essential labour

The early caregiving years lay the foundation for lifelong health, attachment, and resilience. This labour, largely undertaken by women, is unpaid and unrecognised in GDP or policy frameworks. Without valuing and supporting it, families are stretched thin, maternal mental health suffers, and children miss out on stable, secure foundations.

Research consistently shows that responsive caregiving is associated with secure attachment, better emotional regulation, positive social interactions, and improved cognitive outcomes (Madigan et al., 2016; Morgan & Fearon, 2022; Verhage et al., 2020).

2. Limited, inflexible care options

Current ECEC policy heavily favours large childcare centres. While these may serve some families, they do not fit all children or circumstances. Alternative models such as family-based care, micro-centres, supported stay-at-home parenting are underfunded or absent.

Parents who wish to care for their children themselves face stark financial penalties compared to those who outsource care. The subsidy system creates structural inequities by recognising only one form of labour (paid institutional childcare) while ignoring another (unpaid family caregiving).

3. Fertility and demographic consequences

The decision to have children is deeply tied to perceived levels of support. Fertility rates in Australia have declined to historic lows, with long-term implications for the workforce, aged-care burden, and economic stability.

Evidence shows that childcare availability and affordability influence fertility decisions (Parr & Guest, 2011; Hart & Pavlopoulos, 2017; Wood & Neels, 2025). Families need real choices in how they care for young children if we wish to stabilise fertility and avoid compounding the economic risks of an ageing population.

4. Child outcomes and long-term costs

Peer-reviewed studies highlight that secure, consistent caregiving in early years is strongly linked to better mental health, educational attainment, and physical health across the lifespan (Madigan et al., 2016; Berlin et al., 2023).

Conversely, high stress, fragmented care, or early institutionalisation can increase risks of behavioural and emotional difficulties. Investing in flexible care models and supporting parents directly reduces downstream burdens on mental health services, healthcare, and social supports.

5. Neurodiverse families and systemic reform

Neurodiverse families, particularly those of us with autism, ADHD, dyslexia, and anxiety, are often the "canaries in the coal mine" of education and care systems. When systems are poorly designed, rigid, or unresponsive, it is our children who suffer first and most acutely.

I am both autistic and ADHD, and my children share these profiles. For us, conventional childcare and schooling models were not workable. We chose to homeschool, and we are not alone: the homeschooling community in Australia is growing rapidly, with neurodiverse families apparently leading the trend.

This is not simply about preference. It is evidence that the system is failing to accommodate difference, flexibility, and child-centred care. Families like mine are inventing and sustaining alternative models because the mainstream system does not.

Supporting flexible care options, direct caregiver payments, and community-based models would not just benefit neurodiverse families, it would benefit all families. A system rebuilt from the ground up, with neurodiverse needs at its heart, will be healthier, more responsive, and more humane for everyone (Pellicano & den Houting, 2022; Graham & Tancredi, 2019).

Policy Recommendations

- 1. Direct caregiver payments: Allow families to receive subsidies (currently channelled only into childcare providers) directly, enabling a parent to remain at home if they choose.
- 2. Tax adjustments: Offer targeted tax breaks for primary income earners where one partner is a full-time caregiver.
- 3. Flexible funding models: Support small-scale, community-based, and family-daycare options alongside large centres.

- Support networks for parents: Fund programs that reduce isolation and stress among primary caregivers and provide parents with evidence based tools for child rearing practices.
- 5. National recognition of caregiver labour: Include unpaid caregiving in social and economic accounting frameworks.

Conclusion

We cannot expect world-class academic outcomes or a strong economy while ignoring the foundational labour of child-rearing. Current policy inadvertently penalises families who want to provide the best care possible, and discourages many from having children at all.

If we want healthy children, a resilient population, and sustainable demographics, we must broaden the definition of "early childhood education and care" beyond centres and recognise families as the first and most essential institution.

I urge the committee to recommend concrete supports for families that give real choice, whether that means institutional childcare, community-based care, or direct parental care at home.

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