Thank you for the opportunity to provide information for this important issue.

The increased prevalence of developmental disorders such as autism and ADHD in children in WA is critical, and will only get worse if not addressed appropriately.

Please find below my responses to each of the questions. I feel that I have important information to contribute to this inquiry, and would welcome the opportunity to also provide information in person.

The role of child development services on a child's overall development, health, and wellbeing:

Healthy child development is dependent on both genetic and environmental factors. Although genetic factors are less able to be controlled, a healthy environment, and appropriate educational services for a young child can make the difference between a person who is able to live a productive life and contribute to their society, or a person who will need ongoing support to live a productive life with dignity. Today in WA, many children have developmental disorders such as autism and ADHD. It is critical to address this both from a perspective of research as to the causes, and intervention in early childhood. To not put significant necessary resources into these issues is both wrong from a human rights and social justice perspective, but also shortsighted from a policy and economic point of view, as effective early services to support the child and their family is an investment that will allow individuals with these types of disorders to be able to be effective and productive members of our society.

How child development services are delivered in both metropolitan and regional Western Australia:

I am presenting this information from an education perspective, as this is my

area of expertise and experience. Although the medical communities are critical as partners in research and diagnosis, children with developmental disorders should be supported by educators who have appropriate training and support. Currently, we do not have enough teachers in WA schools who have the skills to understand and effectively support children with autism, ADHD and similar conditions. The model currently supported in WA is a medical model, which separates the children from receiving comprehensive services. I have conducted research on this issue through my role at Curtin University for the past 3 years, and have interviewed more than 150 families of children with disabilities. Some significant findings include:

-parents are stressed, often to the breaking point.

-this stress is a result of many things including: being on long wait lists to even have their child evaluated; their child being excluded by schools because of his/her difficulties in managing the traditional educational environment; having to quit their job because their carer responsibilities are so intense; marital difficulties because of the stress and/or financial strain they are under; and overall, the lack of available, effective resources to provide their child with the support they need.

The role of specialist medical colleges, universities and other training bodies in establishing sufficient workforce pathways:

This problem is critical, and cuts across many research and educational areas. All universities and training bodies in WA need to work together to solve this problem. Working in isolation will not help, and if we don't work together as colleagues to address the medical, educational, social and mental health aspects of this issue, the problem will only get much worse. There is an understanding and a mindset to do this among my colleagues, but we need dedicated time and resources to be effective.

How to increase engagement with, and collaboration between, government and

non-government child development services including Aboriginal Community Controlled Organisations:

Again, there needs to be resources and time dedicated to collaborative discussions/research/resources. All aspects of the issue needs to be considered with the perspectives of all stakeholders included and honoured. One of the problems, long recognised by research, is that early intervention services for children with developmental conditions cannot take place in only a clinical setting. Rather, the services and education must be able to be generalised to the child's environment and consistent and supportive of the families values and lifestyle. Persons with autism and ADHD have important, significant insights and are valuable sources of information as to what works for them and what is going to allow them to be the valuable contributors to their society that they have a right to be.

How child development service models and programs outside of Western Australia could be applied in Western Australia:

My training was from the University of Missouri, USA. I hold a PHD in Special Education/Educational Psychology with an emphasis on individuals whose disability manifest in severe behaviors. I have worked as an educator and researcher in this area in 3 countries for almost 2 decades. A model that I saw to be successful in my university studies and classroom experience was a focus on educational services in consultation with medical professionals, rather than the extreme separation between the medical community and educators which is the norm in WA. Currently, parents in WA report being on 2 to 3 year waitlists to even have appointments for an evaluation, the first step to receiving a diagnosis and thus being eligible to access services. This loses valuable time for early intervention that often cannot be recovered because of the developmental nature of these conditions. Rather, clinicians with the training and expertise should be located in schools and early childhood

settings. Often times, if issues are caught at this early stage, the need for more intensive, expensive, and less effective services is eliminated. Allied health professionals such as occupational therapists and speech language pathologists embedded in schools and working with educators can provide more effective and less expensive services.

I am currently collaborating with Dr. Douglas Greer and his colleagues from Columbia University, New York, USA regarding the highly effective (with transparent research data) programs to train educators to deliver effective education for persons with developmental disorders from early intervention through adult support. The purpose is to bring this effective methodology of educator training to WA. We have been training educators in WA for the past 3 years, and have research data which demonstrates: significant improvements in child outcomes and effective educator training. Focusing resources on this training will allow us to move forward much more quickly and train more professionals to address this critical problem.