



Dr Brian Gordon
Education and Health Standing Committee
Legislative Assembly
Parliament House
Perth. WA. 6000.

14th February 2012

Dear Dr Gordon

Thank you for the opportunity to provide a submission to the Education and Health Standing Committee for the inquiry into improving educational outcomes for Western Australians of all ages.

This is a personal submission which documents my response to Inquiry Terms of Reference 2: Factors influencing positive or negative childhood development from birth to year 12.

The content of my submission relates to the early childhood phase of development (0-8 Years).

Yours sincerely

E Stamopoulos

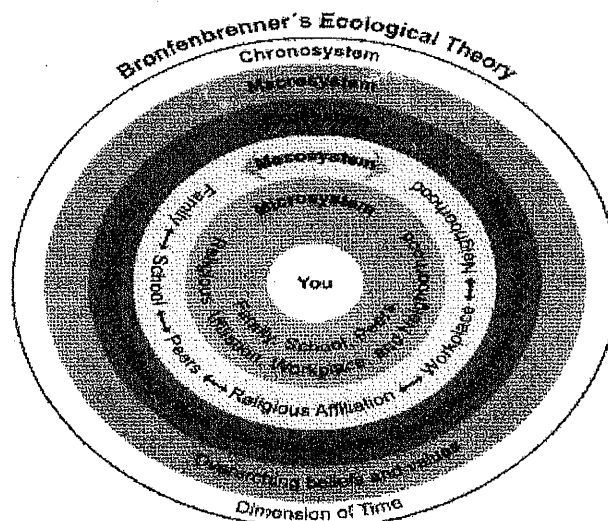
Dr Elizabeth Stamopoulos
Senior Lecturer
Edith Cowan University
Ph: (08)93706192

2. Factors influencing positive or negative childhood development from birth to year 12;

Children experience many changes during their formative years, as they transition between diverse contexts and adapt to change on a personal, social and societal level. The contexts in which they develop, their relationships with others and the interactions that take place within and between these contexts have the potential to influence positively or negatively on their development. It is imperative that we understand the diverse settings and influences that impact on children's development and more specifically, the affordances that are available for children and their families. Within society we see the diversity within and across socioeconomic groups that impact on families' opportunities to access education and health along with "social causation perspectives of contextual influences, family stress or family resources that affect parenting styles and consequent child outcomes" (Berns, 2010). This accentuates the need for professionals across all sectors and government to support families and work with them to make this process seamless and manageable. Situations where universal access provides us with windows of opportunity enable us to engage and connect with families to improve developmental and educational outcomes for children.

Bronfenbrenner (1979, 1989 cited in Krause, Bochner, Duchesne, & McMaugh, 2010) developed an ecological model of human development which demonstrates the social context of individual's experiences within the microsystem, mesosystem, exosystem, macrosystem and the chronosystem in which relationships and interactions take place over time (Refer to Figure 1: Image retrieved from Google images – taken from faculty.weber.edu on the 31.1.2012). Each area is interrelated and impacts on a child's overall development. Interventions across Bronfenbrenner's systems are essential in ensuring children are provided with the affordances they require to nurture their holistic development.

Figure 1: Bronfenbrenner's Ecological Theory



Within the microsystem interactions occur between the child and his/her immediate environment eg parent/child. The primary caregiver, family and relationships are critical in providing numerous opportunities and affordances through which the child can develop, such as nurturance and affection. Affordances may also take the form of post-natal information sessions for parents with the intent of supporting families, building on their knowledge of child development and providing them with the capacity to take on a parenting role. Within this microsystem the family unit is a powerful influence on children's development and their social and emotional well being. Experiences within the womb and in the first three years can impact on children's development in positive and/or negative ways. Critical to their development is the quality of care; attachments and relationships children are afforded.

The mesosystem, on the other hand is where connections and interactions occur between settings such as the home, educational contexts and child health services. This system provides us with windows of opportunity through which we can connect and engage with children and their families as they access universal services. For example, if society believes it is important for all children to have access to health nurses and that annual checks and visits be completed then infrastructure needs to be put in place to make this happen. Inadequate ratios of child health nurses to children impede this process, create challenges and obstacles such as long waiting lists which in turn reduce child health nurses capacity to sustain contact with all children, monitor their development, support families, strengthen relationships, detect and instigate interventions. Yet such decisions are made in the exosystem and are driven by economic, political, education and government systems. Such decisions impact on the child's microsystem and mesosystem and make it difficult for professionals to engage with all children and build relationships which we know are a critical aspect of development in the early years.

The next layer, the macrosystem, reflects the society in which a child lives. It can be argued that some children within this system are afforded experiences which provide a sense of 'belonging, being and becoming'. For example, Australia is a democracy which supports children and families rights to 'belong' to subcultures with differing beliefs and lifestyles which are respected and encouraged. For all children to be supported in current and future stages of 'being' and 'becoming' interventions must be put in place by society to support their needs. The chronosystem on the other hand relates to the role that time plays in causing sequential changes in each system. For example, advancements in ICT require new knowledge that is likely to impact on children and families capacity to learn. If children and families are not provided with infrastructure and they lack ICT resources then this will impact on their development. Therefore, Bronfenbrenner's ecological model of human development relates to individuals, processes, contexts and outcomes over time and challenges us to examine the ecological settings in which children and their families interact to better understand the factors that impact on child development. This model is important because it provides a holistic overview of ecological settings and is developed with the notion that the future is shaped by the present.

However, this model alone does not provide understanding of the situational affordances which families are faced with as they make decisions which impact on their lives. The application of a further layer or an interpretive lens to Bronfenbrenner's model enables us to reflect on children's holistic development and the factors that impact on positive or negative childhood development. More specifically, Gibson's theory (1979) of affordances states that our environment in which we live affords different opportunities, actions and behaviours. According to Sandseter (2009) affordances of the environment include what it 'invites' us to do which can be unique for each individual. Cantor (1994) discusses the importance of the 'person' and the 'situation' and their perceived personal needs and situational affordances which impact on the ways in which they respond and attempt to solve problems. It can be argued that personal needs inform us of what we need to do while situation affordances focus on the pragmatics that is what can be done to solve a problem and reach a solution. For example, in times of poverty and unemployment the current 'situation' of being poor or not having a job may cause psychological distress in parents which in turn decreases their capacity for supportive, consistent and involved parenting. During such times children may experience adjustment problems at school and home. Poverty has the potential to impact on parents' mental health, the home learning environment due to minimal resources, changes in parental beliefs and parenting styles due to insufficient funds which may move priorities from books to food. Such instances offer windows of opportunities through which education and health professionals can connect and support parents specifically in the early childhood years. Close partnerships between early childhood education and care (ECEC) contexts, families and communities are important in understanding and supporting the diverse needs of families and their children. Reducing stressors at a family level through relational trust is critical in the early years and influences our capacity as professionals to improve educational outcomes for children.

Anderson (2010) discusses 'actionable properties' between 'the world' and the 'individual'. The role of leadership within the early childhood field is critical in providing pedagogical and sociological guidance to young children and their families and creating pathways through which we can engage with each other whether it be between 'the world and the individual' or the 'teacher, child and family' who resides within

the 'mesosystem'. Affordances can be materialistic but they can also be inspirational and reflected through our actions and the relationships we forge with young children, families and communities. 'Near universal' pathways are also important in supporting children's development. Valentine, Katz & Griffiths (November, 2007) report that from birth, almost every family will have contact with the health system which makes it likely there will be near universal coverage for babies and young children. In this situation, affordances (health care) are offered to individuals by governments and the health sector to support their needs. However, affordance gaps may emerge when pockets of the community do not have physical access to a service and/or recognize or understand the importance of the service and the opportunities provided to them. For that 'pocket of the community' the affordance of universal coverage may be perceived as being of little use.

Western Australian MP Woollard's report in the Legislative Assembly revealed, "The Auditor General's report documented that in 2009–10, 99 per cent of newborns were seen in the first month...However, this meant other so-called universal checks were ignored. Only 30 per cent of 18-month-old children had a child health nurse check and only nine per cent of three-year-olds had a child health nurse check" (Western Australian Parliament. Record of Proceedings, November 3, 2011, p. 8945). If families are lost along the way then the next point of contact where there is near universal access will be if they attend ECEC contexts or compulsory schooling. It is important to get it right as the child grows and moves beyond each system and opportunities are won or lost. The reasons why all families do not access services need to be examined and understood.

The capacity of the education and health sectors to connect with all children, families and communities is a complex task as affordances are not always recognised and accepted by others. The provision of quality learning experiences and services for all children is important in ensuring positive developmental and educational outcomes. Concerns are raised as reports are released that reveal disparities in the quality of ECD services offered to children with additional needs and some Indigenous children compared to those accessible for other children (Early Childhood Development Workforce Report, November, 2011). The shortage of teachers working in ECEC contexts and the varied qualifications of Early Childhood Development workers impact on the quality of education and care that is afforded to all children.

In October 2011, The Royal Australian and New Zealand College of Psychiatrists released a paper titled: *Addressing the needs of siblings of children with disability or chronic illness: Working within the community*. The paper targeted siblings of children with chronic conditions and argued they are a high risk group which need to be included in targeted prevention and early intervention programs. They reported the 'profound effect' on a child's early year's development of having a sibling with a chronic condition and raised concerns in terms of their trajectory, future health, wellbeing and the economic benefits for society in commencing intervention in the early years. The Royal Australian and New Zealand College of Psychiatrists confirmed the early years are a critical period for preventive approaches which strengthen relationships. They outlined risks for siblings and discussed direct stressors such as the behaviour of the child with the disability and the emergence of internal family stressors, along with consequences such as parent and sibling stress and a family's capacity to function. The report states some services are available but only a very small percentage of siblings' access support programs and they tend to be from families well connected to their community. Research is required to better understand why so few children access services and why those who do so are drawn from families well connected to their community. This paper reveals gaps at policy and service level and a lack of coordinated activities. Again, decisions are made in the exosystem and determined by economic, political, education and government systems yet they impact on the child's microsystem and mesosystem and make it difficult for psychiatrists to provide early intervention to siblings of children with disability or chronic illness.

Concluding comments

The Australian Council of Australian Governments (COAG) acknowledges the importance of the early years of a child's life. Brain research confirms the first three years of a child's life are critical in terms of their holistic development. The National Early Childhood Development Strategy recognises the importance of universal provision in education and health and targets services in areas of great need. The Early Childhood Development Workforce Report (November, 2011) raises concerns in terms of quality provision of services to all children. The Royal Australian and New Zealand College of Psychiatrists confirm the early years are a critical period for preventive approaches which strengthen relationship and target early intervention for siblings of children with chronic conditions.

A recent paper released by the Organisation for Economic Co-operation and Development (OECD) reports on their work on the Social Outcomes of Learning which states that high quality ECEC results in better health, improved social engagement and other behaviours which promote economic and social benefits to children, families and society. This work discusses brain development, its rapid rate in the early years and the knowledge that synapses which are not used are lost. It reminds us that although all children benefit from high quality ECEC, disadvantaged children benefit the most. According to the OECD work research shows that poor quality ECEC provision has lasting detrimental effects on children's development and costs to society (OECD, nd).

Recommendations:

1. A whole of government approach which has the capacity to promote child development and learning (0-8 Years) within and across ecological systems must be introduced in Western Australia.
2. The establishment of an Office that has the power to make decisions and is dedicated to early childhood would overcome the existing fragmentation within the ECEC sector. This is important in light of the data collected by the Telethon Institute for Child Health Research which demonstrates increasing numbers of WA children with issues relating to mental health, obesity, aggression as well as their inadequate readiness for school in terms of poor verbal and social skills.
3. Integrated services such as education and health need to be established that connect ECEC services with families and communities to promote positive development and learning opportunities for children. Community input is important in ensuring services retain their flexibility and meet the individual needs of families and communities.
4. Government incentives for further study are required that nurture leadership within the ECEC sector. Leadership needs to be pedagogically focused on young children and sociologically focused on family and the community in order to promote children's development, support families and achieve educational outcomes for all (Stamopoulos, in press).
5. Better access to health and education services so that young children and their families are afforded opportunities so that benefits are won rather than lost. Windows of opportunity must be recognised through universal access where quality resources and services result in positive outcomes for children and their families.

References:

Anderson, B. (2010). *Pedagogical affordances and cultural adoption of social learning networks in K-12 formal education*. 1-15. Retrieved from http://washington.academia.edu/BillAnderson/Papers/310202/Pedagogical_Affordances_and_Cultural_Adoption_of_Social_Learning_Networks_in_K-12_Formal_Education

Berns, R. M. (2010). *Child, family, school, community: Socialization and support*. (8th ed.). Belmont, CA: Wadsworth Cengage Learning.

Cantor, N. (1994). Life task problem solving: Situational affordances and personal needs. *Personality and Social Psychology Bulletin*. 20(3), 235-243. Retrieved from:
<http://psp.sagepub.com/content/20/3/235.full.pdf+html>

Early Childhood Development Workforce: Productivity Commission Research Report (November 2011). Retrieved from:
http://www.pc.gov.au/data/assets/pdf_file/0003/113907/early-childhood-report.pdf

Gibson, J.J. (1979). *The ecological approach to visual perception*. Boston: Houghton-Mifflin.

Krause, K., Bochner, S., Duchesne, S., & McMaugh, A. (2010). *Educational psychology for learning and teaching*. (3rd ed.). South Melbourne, Victoria: Cengage Learning Australia.

Organisation for Economic Co-operation and Development (nd). Investing in high-quality early childhood education and care. *Education and Training Policy*. Retrieved from,
http://www.earlychildhoodaustralia.org.au/early_childhood_news/eca_webwatch_issue_132_february_2012.html

Sandseter, E. B. (2009). Affordances for risky play in preschool: The importance of features in the play environment. *Early Childhood Education Journal*, 36(5), 439-446.

Stamopoulos, E. (in press). Reframing early childhood leadership. *Australasian Journal of Early Childhood*.

The Royal Australian and New Zealand College of Psychiatrists (October 2011). *Addressing the needs of siblings of children with disability or chronic illness: Working within the community*. 2-23. Retrieved from
http://www.ranzcp.org/images/stories/ranzcp-attachments/Resources/siblings_report.pdf

Valentine, K., Katz, I, & Griffiths, M. (2007). *Early childhood services: Models of integration and collaboration*. Australian Policy Research Centre for the Australian Research Alliance for Children & Youth. 1-59. Retrieved from
http://www.sprc.unsw.edu.au/media/File/Report_ARACY_EarlyChildhood.pdf

Western Australian Legislative Assembly (2011). Record of Proceedings (Hansard). Retrieved from
[http://www.parliament.wa.gov.au/Hansard/hansard.nsf/0/C1DCB3373DA322174825799D000FC0ED/\\$File/A38%20S1%2020111103%20All.pdf](http://www.parliament.wa.gov.au/Hansard/hansard.nsf/0/C1DCB3373DA322174825799D000FC0ED/$File/A38%20S1%2020111103%20All.pdf)