

The following table presents some of the hard truths that demonstrate there are outcomes in Western Australia that are far less than satisfactory.

Proud Achievements by 2018	Hard Truths	So What?
Almost all Western Australian babies survive birth and their early years of life.	20+% of these children are at risk and vulnerable in aspects of their health and development at 4 years of age.	Services must be planned, coordinated and delivered to ensure that all children are safe and thriving.
Almost all Western Australian children participate in kindergarten, pre-primary and primary schooling.	By Year 3, 18-20% are at or below the national minimum standards in literacy and numeracy and deemed at educational risk.	There must now be a shift in focus to achievement and readiness not just enrolment.
Across all children, statistics show that there have been improvements in the health and development of children.	Despite significant government funding and support, the developmental status of children from low income families and Aboriginal families continues to be much poorer than other children.	If we don't find better ways to support families in low income communities and Aboriginal families raise their children, the learning and development gap is unlikely to close.
Early childhood parent and child health, education and developmental services are available to nearly all families and children across Western Australia.	Many families don't access the services available.	The availability of services is not the same as accessing them. Services must do much better in reaching those families that need the most support.

SUMMARY

What can we take from the last 50 years, and what does this tell us about what our focus should be now and into the future?

Great strides have been made in improving the health and development of our children – a cause to celebrate. Our children access education earlier and most are doing well when they start school.

What hasn't changed in Western Australia is the **persistent** gap between the most disadvantaged children and their more advantaged counterparts - the developmental opportunities of up to 20 per cent of our children are still remarkably poor.

Papers 2 and 3 in this **CoLab** series of papers will focus on the current developmental status of children in Western Australia, identify issues for early years services; and provide important information to support new strategies to improve the wellbeing of our most vulnerable children.

References and Acknowledgements

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COLAB POLICY PAPERS SERIES

PAPER 1: THE EARLY YEARS IN WESTERN AUSTRALIA: THE LAST 50 YEARS

INTRODUCTION

Welcome to the first paper in our policy series. In this paper we will examine what has been achieved in the early years in Western Australia over the past 50 years.

While it is vital to continue to keep an eye to the future and to challenge ourselves to do better in childhood wellbeing and development, it is also important to take stock and look back to national and state achievements, acknowledging the many past successes resulting from the combined efforts of people, organisations and governments across the communities of our state.

Early childhood wellbeing and development in WA, like elsewhere in Australia, has been a story in parts. But there is much to celebrate, while acknowledging the work of many.

For example, there are much lower mortality rates for our infants than the average for developed countries and the prevalence of illness and accidents is much lower. Parents are more confident in the wellbeing of their children with a recent survey reporting 90 per cent of parents considered their children's state of health as being very good or excellent.

The wellbeing of our children is further supported because most parents rate their own health positively, believe their neighbourhoods are safe and feel they could get help outside the home if they were in a time of need.

Before examining the gains that have been made in improving the health and development of our children, it is important to consider important changes within the Australian population. The following table presents a brief snapshot of how things have changed in recent decades.

Then and Now

Health Factor	1970	Now (circa 2017)
Population (millions)	12.5	24.4
Life expectancy – all males (years)	68.3	80.3
Life expectancy – all females (years)	74.8	84.4
Life expectancy – Indigenous males (years)	n.a.	69.1
Life expectancy – Indigenous females (years)	n.a.	73.7
Infant mortality rate (per 1,000 live births)	17.9	3.4
Indigenous infant mortality rate (per 1,000 live births)	n.a.	6.0
Fertility rate (children per woman)	2.9	1.8
Ratio of health expenditure to GDP (%)	4.1	9.8
Daily tobacco smoking (%)	37	12.8
Alcohol consumption (litres per capita)	11.6	9.9
Overweight or obese (%)	n.a.	63.4

WHAT HAS CHANGED FOR CHILDREN IN THE LAST 50 YEARS

HEALTH

Among our successes is a substantial decline in infant and childhood deaths that has resulted from systematic efforts to control infectious diseases and improved hygiene and nutrition. A consequence has been several significant infectious diseases have largely been eradicated, including those such as poliomyelitis.

This general picture of improvement includes oral health, where Australian children are at or near the top of all developed countries. The proportion of Australian parents rating their child's oral health positively is almost 90 per cent; full immunisation of children across the early years of life is at near universal levels, almost all WA babies and mothers are seen by a child health nurse in their home soon after the birth; and, for almost all of WA, infants' exclusive breastfeeding is initiated at birth. Other developments have continued to support the improvement in health of our children, such as the fluoridation of water, folate fortification of flour and the increasing range of early childhood vaccines.

It was very obvious from early in the 1980's that early years child health and particularly maternal and pregnancy health were absolutely key for childhood disability, and child and youth problems. We acknowledged that brain development in utero and in the first eight years of life predicted most of later health problems and developmental disorders and the like.

Professor Fiona Stanley

Our big push quickly became early intervention and growing kids' brains really well: basically, surrounding children's growing brains with the best possible social and physical environments. We just knew that you really have to try and intervene early to make a big difference and that this was something in the national interest.

Professor Fiona Stanley

Within our households, the promotion of preventive and healthier behaviours has led to better developmental outcomes. For example, almost all children now live in smoke-free homes and fewer than 10 per cent are now born to parents who have smoked during the pregnancy. Childhood preventive behaviours such as the use of sun protection have become a part of Australian life.

In Australia, around the 1990s I came to the view that so much of the health and wellbeing equation was actually located in the social environment in which our communities were functioning.

So where you were born and who your parents were was so important to your life chances - not just adult disease risk, but in how well you did at school, career options, the larger story of lives and how they get lived.

Professor Fiona Stanley

LEARNING

It is difficult to directly compare the learning of our children now with 50 years ago given the absence of standardised learning assessments for all children across that period of time. But we do know children have greater learning opportunities than they did 50 years ago.

Today, early learning and care (childcare) services are required to focus on the learning of children and there is a requirement for a trained teacher to be in every centre. Kindergarten (15 hours a week) has been made freely available for all children and pre-primary is now compulsory, with contact time increasing (from 15 to 30 hours a week), while class sizes have reduced markedly. Perhaps most importantly, parents now have a greater awareness of the importance of early literacy, with approximately 75 per cent of Australian 0 to 2 year-olds regularly having stories read or told to them.

A consequence of these various dimensions of wellbeing is that many children commence their formal school years well equipped to begin their learning journey. Children meet a good standard for reading and numeracy, with Australia's average numeracy scores in the top 50 per cent of OECD countries.

From the mid-nineties, we were really getting active in bringing all the groups in Australia together who'd be concerned about child development and well-being, and that included, obviously, people in child health and paediatricians and psychologists and so on, but also economists, town planners, lawyers, everyone who was interested across health, education, child protection, research, policy and practice in the early childhood environment. We knew that this was literally going to be a nation-building issue and that it needed broad action. So we started ARACY – the Australian Research Alliance for Children and Youth.

Professor Fiona Stanley

CHILDHOOD SAFETY

Child safety, in terms of preventable or accidental injury and fatality, has also had an increasing profile and the community has prioritized its role. As a result, child deaths from injuries halved in Australia, between 1997-2010 alone. Among the reasons for this were that road safety significantly improved for child passengers; backyard pool safety improved and deaths from Sudden Infant Death Syndrome (SIDS) declined as a result of improved public awareness of risk factors. Sun protection structures and policies such as 'no hat no play' in education and care settings also became commonplace.

Things have got better. In my first year of teaching I had 54 Year One students. There was no one to help me. Those who had learning difficulties received very little support and got further behind. Later in my teaching career things were much better – we had psychologists, smaller classes and teacher aides to assist us.

Dorothy – Teacher for 43 years

PROGRESS INDICATORS

Overall, there are positive trends for childhood wellbeing and development in Australia. The following table presents some important indicators of progress.

Some Indicators	National and State Trends Since 1960	Some Indicators	National and State Trends Since 1960
Population 0-4 years	Substantial Increase	Children fully immunised at 2 years (%)	Increase
Maternal Mortality ratio per 100,000 women giving birth	Substantial Decrease	Dental health - mean Decayed, Missing, Filled Teeth (DMFT) Deciduous Teeth at 5 years	Decrease
Live births to teenage mothers aged 15-19 years (per 1,000 females)	Decrease	Percentage of parents of children 0-2 years who read to their child(ren) in the last week	Increase
Low birthweight percentage of total live births	Decrease	Childcare places (approved)	Substantial Increase
Smoking during pregnancy %	Substantial Decrease	Proportion of children aged 4 years enrolled in an early education program in the year before beginning primary schooling	Substantial Increase

But we still have a way to go before WA can show universally sound health and early development for young children, successful learning in the early years, overall community safety and co-ordinated, accessed support services.