

---

# Editorial

---

Rachael Sanders

Welcome to the first issue of *Children Australia* for 2013. We trust you had an enjoyable festive season and are now firmly back into your work/life routines for the New Year. This year Jennifer and I are continuing with our commitment to bring quality research and practice-based commentaries about issues important to children, young people, families and the professionals who work with them. Later in the year we will see a special issue guest edited by Dr Nicola Taylor from the Centre for Research on Children and Families, Otago University, New Zealand. The special issue will focus on matters related to family law, the court system and separation/divorce. In addition to our regular invitation to submit your papers to *Children Australia*, we invite experts in the field to make contributions to the special issue.

For me, this year brings a particular interest in parents' engagement with parenting resources and the way in which this can impact on children's development. Children's development and well-being is subject to many factors including the biological, family, social, community and economic conditions in which they are raised. Central to children's well-being is the parent-child interaction, which will be the focus of my attention over the next little while. I might leave a commentary about the way in which parenting decisions and behaviours can impact on children's development for later in the year, and take a moment here to reflect on the shape of Australian children's development at this point in time. We often concentrate our efforts on sub-populations – for instance, children in low socio-economic districts – who are facing challenges or adversity, but I thought it was worth looking at the bigger picture by reporting the results of two national projects that are assessing the health and well-being of all Australian children.

When a child is born the trajectory of his or her life is subject to many factors. Genetics plays a significant role in the development of a child, but so too do their relationships, experiences and environments (O'Connor & Scott, 2007). The late nineteenth and early twentieth centuries saw a growth in theories about the way children develop physically, socially and emotionally (Santrock, 2004). Together, these theories provide a conceptual understanding of the way in which infants and children acquire skills, develop in-

dividual characteristics and interact with their world. Recent and significant advances in technology and research applications have substantiated and extended this early knowledge. We now understand that early childhood experiences can impact significantly on brain development and have life-long consequences (Ministerial Council for Education, Early Childhood Development and Youth Affairs (MCEECDYA), 2010). Advances in neuroscience indicate that early childhood experiences not only have psychological effects, but can physically change the brain's neural connections. An individual's genetic composition sets the parameters for psychological and skill development, but the way in which this is expressed is largely determined by their experiences (McCain, Mustard & Shanker, 2007). This is particularly pertinent during the first three years of life when the brain is most malleable (MCEECDYA, 2010), and is known to have life-long consequences for health, education and social outcomes (Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA), 2004–11).

We typically measure childhood development on five domains – cognitive/educational, social, emotional, health and behavioural (Centre for Community Child Health and Telethon Institute for Child Health Research (CC-CHTICHR), 2009). The Commonwealth government has commissioned two studies that are currently measuring and assessing Australian children's developmental outcomes. The studies vary in their approach but, together, they



collect information about how Australian children are faring on these five key developmental domains and the nature of the environments which impact on their development.

The first is the Australian Early Development Index (AEDI). Launched in 2009, the aim of the study is to collect developmental outcome data about every Australian child during their first year of school. The data is collected every three years by teachers who complete a checklist addressing the physical, emotional, social, cognitive and communicative development of all first year students. The data provides a national record, but outcomes for individual regions can be isolated and scrutinised. It presents communities with a snapshot of their children's development compared with other regions, and provides them with evidence of community strengths and weaknesses. The purpose of the information is to help communities refine their policy and planning strategies to cater for the specific needs of their children and help promote positive developmental outcomes (CC-CHTICHR, 2009).

A detailed synopsis of AEDI findings can be found at [www.aedi.org.au](http://www.aedi.org.au), but a cursory inspection of the data tells us that the majority of children are doing well on each of the five developmental domains. However, 4.4% of Australian children experience chronic physical, intellectual and medical needs, 23.6% of children are developmentally vulnerable on one or more of the AEDI domains and 11.8% of Australian children are developmentally vulnerable on two or more of the AEDI domains when entering school.

Four demographic characteristics stand out as particularly influential on children's developmental outcomes. Firstly, there appears to be a significant gender difference at this age, with 16.2% of boys being developmentally vulnerable on two or more domains compared with their female peers at 7.4%. Secondly, geographical location has a significant impact on children's developmental outcomes. Children living in remote areas are twice as likely to experience at least one developmental delay, and children living in socio-economically disadvantaged areas are more likely to be developmentally vulnerable on one or more domains (32%) and two or more domains (17.5%). Thirdly, the results suggest that children's proficiency in English impacts on their developmental outcomes. When we consider that developmental measures include language and general knowledge, it is unsurprising to see that 93.6% of children who are not proficient in English are vulnerable in one or more domains. However, it is worth noting that these children generally score lower across all domains, so their lack of proficiency in English often impacts on their whole of life development and well-being. And finally, the statistics indicate a higher proportion of Indigenous children are experiencing developmental vulnerability on one or more domains (47.4%) and two or more domains (29.6%) with the most marked delays being observed in the school-based assessment of language and cognitive skills (CCCHTICHR, 2009).

The second study assessing aspects of Australian children's experiences is called *Growing Up in Australia: The*

*Longitudinal Study of Australian Children* (LSAC). This is a major project which follows the development of 10,000 children and families across Australia. The study commenced in 2004 with two cohorts – families with 4–5-year-old children (K cohort) and families with 0–1-year-old infants (B cohort). The *Growing Up in Australia* study is designed to investigate the contribution that social, economic and cultural environments have on children's adjustment and well-being. The aim of this project is to identify policy opportunities for improving support, early intervention and prevention strategies for children and their families. Unlike the AEDI, which measures developmental outcomes, this study reports the prevalence of child and family characteristics and behaviours that we know can impact on children's development. I will present some of these characteristics below. Because this is only meant to be a brief summary, I will not provide the statistics for the two cohorts (B & K) separately, but rather take the statistic from the group that reported the highest incidence of the characteristic being measured. It should be noted, however, that there are often only small variations between the two cohorts.

We know that parents who experience mental health problems are sometimes more irritable and exhibit lower levels of parental warmth and responsiveness to their children which, in turn, can negatively impact on their children's healthy development. Parents' level of psychological distress has been collected throughout each phase of the project and indicates that up to 17% of mothers and 12% of fathers experience moderate to severe psychological distress during at least one of the data collection periods. However, poor family functioning and child development is more likely to occur when psychological distress is chronic or persistent. When combining all three episodes of data collection, which signifies six years, only 3.5% of mothers and 2.2% of fathers experienced prolonged moderate to severe psychological distress. However, certain groups are more likely to experience higher and more prolonged levels of psychological distress including sole mothers and jobless parents. Sole mothers are twice as likely to experience a higher level of psychological distress compared with their coupled counterparts, and jobless parents were also twice as likely to experience a higher incidence of moderate to severe psychological distress (Australian Institute of Family Studies (AIFS), 2012).

As previously mentioned, children whose parents experience mental health problems are more likely to experience poor developmental outcomes. This is due, in part, to the nature of parenting style and behaviours adopted by some parents with mental health issues. These parents are often more critical, angry and exhibit lower levels of warmth toward their children. This association is demonstrated in the LSAC data, with parents reporting higher levels of moderate to severe psychological distress being more likely to report 'higher levels of hostile/irritable parenting and lower levels of parental warmth.' Specifically, 1 in 3 parents who experience moderate to high levels of psychological distress

compared with 1 in 5 parents who experience low levels of psychological distress exhibit this type of parenting style (AIFS, 2012).

We know of many protective and risk factors associated with childhood development and readiness for school. Two such characteristics reported in the LSAC study are children's participation in pre-school education and the nature of their television viewing. Preschool education is not only an important predictor of children's adjustment to school and positive developmental outcomes, 'the benefits are broad in scope and include: advancing the development, health and wellbeing of children; supporting workforce participation and equality of opportunity for parents; addressing poverty, disadvantage and social exclusion; arresting the intergenerational transmission of inequality; and facilitating social and economic mobility'. (AIFS, 2012, p. 57). The LSAC data suggests that the vast majority of children are attending some form of pre-school education or care; however, those who come from disadvantaged families, families who speak a language other than English at home, and Aboriginal or Torres Strait Islander children are less likely to attend pre-school education or care.

When considering that television watching 'has been linked in the research literature with concerns about obesity, sleep disruption, delayed language acquisition, poor school performance, aggression, and commercialisation of children' (AIFS, 2012, p. 43), there is justified concern about the nature of programmes being watched and the length of time children devote to this activity. The LSAC data suggests that most parents have rules about television watching, but that they are sometimes inconsistent in applying these rules. The amount of time children spent watching television varied according to age, weekday versus weekend, and family demographics. Less than 50% of 0–1-year-olds watched television, but a quarter watched for more than an hour in any one day. As one would expect, length of time watching television increased with age of child. When 2–3 years of age 'about a third . . . [of] children watched for less than an hour a day, another third for 1–2 hours per day, and the final third watched for more than the recommended 2 hours per day' (AIFS, 2012, p. 45). As children commenced school their week day viewing time remained fairly constant, but their weekend viewing time increased significantly. The figures indicate an inverse relationship between level of socio-economic disadvantage and hours spent watching television, with children living in lower socio-economic conditions spending more time watching television.

Some outcome data has also been collected, including children's numeracy proficiency and their Body Mass Index (BMI). They found that, overall, children had satisfactory numeracy skills and reached the standard required for their age group. However, there were notable differences between children from lower socio-economic backgrounds, those living in single-parent households and where there were more than three siblings. These groups reported lower proficiency rates compared with their peers. Another measure, and one

that directly impacts on physical development, is children's BMI. The majority of children were found to be of normal weight, however, about a quarter of children are overweight/obese at one or more data collection points. Again this was more likely to be the case for lower-socioeconomic families who lived in disadvantaged neighbourhoods (AIFS, 2012).

These studies highlight what I call the one-in-four effect. Overall, our children are doing well and are given every opportunity to reach their full potential. There are, however, one in four children experiencing some form of challenge, adversity or disadvantage that impacts on their healthy development. Obviously it is not the same 25% who always experience poor outcomes, but there is quite a substantial overlap, which is clearly associated with socio-economic disadvantage, sole parenting or being from a CALD or Indigenous family.

I think a common theme that runs throughout these findings is the issue of stress and the cyclical nature of stress. Stress-related disadvantage can create environments that impede children's healthy development, which then potentially adds further stress and distress to parents as they see their children experiencing poor outcomes/behaviours. As a welfare state, Australia provides education and support to help relieve stressors and promote positive outcomes, but one in four children are experiencing poor developmental outcomes despite these supports; which takes me back to a topic of interest to me: the nature of parent's engagement with parenting information, resources and support as a combatant against poor childhood outcomes. Obviously self-empowerment and autonomy is paramount, and it is up to each individual parent if and how they engage with parenting resources, but I cannot help but wonder how much the socio-economical cultural divide impacts on some parents' engagement with resources. If resources are devised and implemented by more privileged classes, does that impede access for more disadvantaged groups in society? Do cultural divides between service providers and service users discourage engagement?

Moving away from an overview of Australian children's health and well-being, let's shift our attention to the mix of articles offered in this issue. We begin with a paper by Rachel Roberts who investigated the omnipresent and important topic of bullying in Australian schools. Rachel looked at this subject from the perspective of children from culturally diverse backgrounds and found that, contrary to expectation, children from ethnic minority groups were less likely to experience direct or indirect bullying or victimisation at school compared with their ethnic majority peers. She, does, however, suggest that schools should help promote children's sense of ethnic identity as a way of mediating their vulnerability to victimisation when it does occur.

In her paper, 'Re-referral for Complex Child Abuse and Neglect Concerns: The Influence of Family and Child Factors in a 25 Year Data Set', Melissa Kaltner undertook an historical examination of the circumstances surrounding

re-referral of complex cases of child abuse to the child protection system. By analysing a 25-year dataset of child protection complex needs reports in Queensland, she found that the majority of children experienced only one referral, but for the 10% of children who were referred more than once, a number of risk factors were associated with multiple referrals. These included the number of ways in which children were maltreated, parents' own experiences of abuse as a child, history of violence and family characteristics such as financial stress and whether there was a disabled family member.

The third paper, by Maria Alexandris, Sabine Hammond and Michael McKay, explores the dynamics of carer-child relationships in permanent care arrangements. With the knowledge that children who experience out-of-home care environments are more likely to experience emotional and behavioural problems, the authors of this study investigated the extent to which children's perceived emotional and behavioural difficulties predicted the quality of carer-child relationships. They found there to be a high prevalence of children's emotional and behavioural difficulties that increased conduct problems and lessened pro-social behaviours, which negatively impacted on the carer-child relationship.

The final two papers address the important topic of education for young people in care. Both papers acknowledge the adversity faced by children in care and the way in which it can impact on their academic achievements. Lisa DeGregorio and Sara McLean provide us with a summary of current knowledge about the cognitive vulnerabilities experienced by some children in out-of-home care, and the implication this can have on their educational experiences and lifelong outcomes. The authors suggest that with the proper support, cognitive deficits can be overcome; and they remain positive and encourage research aimed at identifying and promoting effective interventions.

Approaching this topic from a different perspective, Kathy Mendis presents case studies of the personal resilience of two young people who, despite facing hardship in out-of-home care environments, achieved their academic goals. Kathy 'argues that workers need to look for the strengths in children in care and facilitate the mobilisation of those strengths for them to work their way towards a successful adulthood'. Kathy places an emphasis on children's strengths, not just vulnerabilities, and that the promotion/support of these strengths by workers can help promote positive well-being.

The final two contributions to this issue are book reviews by Frank Ainsworth and Jennifer Hocking. Frank reviewed *Law and childhood studies. Current legal issues volume 14*. Edited by Michael Freeman, this text is principally a collection of 31 papers presented at the 14th Annual International Interdisciplinary Colloquium held at the Law School of University College, London, in 2010, which, according to Frank, includes some papers that might be of interest to our readership. Jennifer provided her thoughts on David Quinton's text titled *Rethinking Matching in Adoptions from Care*. Jennifer says the book 'urges us to pay greater attention to the processes and assumptions embedded in practice'. She says this text is probably most salient for policy and practice leaders and perhaps as a general orientating resource for practice clinicians.

## References

- Australian Institute of Family Studies (2012). *The Longitudinal Study of Australian Children Annual Statistical Report 2011*. Retrieved from, <http://www.growingupinaustralia.gov.au/pubs/asr/2011/asr2011.pdf>
- Centre for Community Child Health and Telethon Institute for Child Health Research (2009). *A Snapshot of Early Childhood Development in Australia – AEDI National Report 2009, Australian Government, Canberra*. Retrieved from, [http://video.rch.org.au/aedi/National\\_Report-March\\_2011\\_Reissue\\_final.pdf](http://video.rch.org.au/aedi/National_Report-March_2011_Reissue_final.pdf)
- Department of Families, Housing, Community Services and Indigenous Affairs (2004–11). *Growing Up in Australia: The Longitudinal Study of Australian Children (LSAC)*. Retrieved from, <http://www.aifs.gov.au/growingup/index.html>
- McCain, M., Mustard, F., & Shanker, S. (2007). *Early years study 2: putting science into action*. Council for Early Child Development: Canada.
- Ministerial Council for Education, Early Childhood Development and Youth Affairs (MCEECDYA). (2010). *Engaging Families in the Early Childhood Development Story: Neuroscience and early childhood development: Summary of selected literature and key messages for parenting*. Retrieved from, [http://www.mceecdya.edu.au/verve/\\_resources/ECD\\_Story-Neuroscience\\_and\\_early\\_childhood\\_dev.pdf](http://www.mceecdya.edu.au/verve/_resources/ECD_Story-Neuroscience_and_early_childhood_dev.pdf)
- O'Connor, T., & Scott, S. (2007). *Parenting and Outcomes for Children*. Joseph Rowntree Foundation.
- Santrock, J. (2004). *Child Development*. New York: McGraw Hill.