

Healthy Children – Strengthening Promotion and Prevention Across Australia

National Public Health Strategic Framework for Children 2005–2008



**Healthy Children – Strengthening Promotion
and Prevention Across Australia**

National Public Health Strategic Framework
for Children 2005–2008

Developed by

The Child and Youth Health Intergovernmental Partnership (CHIP) of the National Public Health Partnership.

Suggested citation

National Public Health Partnership, *Healthy Children – Strengthening Promotion and Prevention Across Australia. National Public Health Strategic Framework for Children 2005–2008*. NPHP, Melbourne (VIC), 2005

Web address

Healthy Children – Strengthening Promotion and Prevention Across Australia. National Public Health Strategic Framework for Children 2005–2008 is available at www.nphp.gov.au

Copyright

National Public Health Partnership, 2005

ISBN

Paperback 0-9750074-7-5

Online 0-9750074-8-3

Endorsed by the Australian Health Ministers' Conference, July 2005

Foreword

The health, development and wellbeing of Australian children is an issue of increasing national importance. Today, we know that children's experiences early in life can impact on their health, wellbeing, education, work and social potentials both in the present and later in life. Childhood therefore is a critical time to promote good health and development and is crucial in determining the future health and wellbeing of our nation.

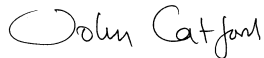
The *National Public Health Strategic Framework for Children 2005–2008* aims to strengthen the nation's capacity to promote good health and prevent illness and injury amongst children. Support is needed not only for those working in the health services and related sectors, but also for parents, families and the broader community. Strategies focus on children from birth to twelve years of age and also address parental health and wellbeing during the antenatal period. Rather than taking a vertical 'health topic' approach the *Strategic Framework* concentrates on horizontal measures that will build capacity across the system to support current and future health priorities.

The *Strategic Framework* is based on what evidence shows is effective in producing good outcomes for children. Each step of its development has been informed by knowledge from Australia and around the world, reflected in key consultation and background documents. A major cross-cutting priority is to reduce health disparities between population groups and particularly to address the health needs of Aboriginal and Torres Strait Islander children.

A wide range of physical and social environments such as the family, care, school and community shapes the health of infants and children. Broader cultural and economic influences, such as family employment, education levels, poverty and housing, cultural background and social discrimination, are also important. The capacity of families to support their children in reaching their potential is affected by all of these environments, many of which lie outside the traditional health sector. These wider determinants of health need to be addressed for effective health promotion and illness prevention, including early intervention. Joining strategic effort across the wide range of government services settings and systems is also necessary.

The *Strategic Framework* is directed at a wide range of stakeholders concerned with the current and future health of Australia's children. It promotes broad-based thinking about the factors and ways of working that shape children's health, development and wellbeing. More than this, it encourages health and other professionals, policy and program developers, research organisations and service providers to take action and look beyond their traditional areas of influence.

This initiative of the National Public Health Partnership through its Child and Youth Health Intergovernmental Partnership (CHIP) group comes at a time of increased interest in the health and wellbeing of Australian children. Health Ministers across Australia believe that a Health Reform Agenda must also focus on better ways of working to improve the health of children. We encourage you to lend your support to taking action for the sake of *Healthy Children – Strengthening Promotion and Prevention Across Australia*.



Professor John Catford
Co-Chair, Child and Youth
Health Intergovernmental
Partnership (CHIP)



Mr Andrew Stuart
Co-Chair, Child and Youth
Health Intergovernmental
Partnership (CHIP)



Ms Heather D'Antoine
Chair, Aboriginal and Torres
Strait Islander Working
Group of CHIP

Contents

Acknowledgements	6
Introduction	8
Building on foundations	8
Investing in Australia's children	9
Development of the <i>Strategic Framework</i>	9
Aim and guiding principles	10
Aboriginal and Torres Strait Islander children	10
Health disparities amongst children	11
Strategic directions	12
1. Strengthen the capacity of parents, families and communities	13
2. Improve the knowledge and skills of key workers	14
3. Develop partnerships and mobilise resources	16
4. Build evidence and track progress for policy, programs and practice	17
5. Transform health systems and environments	19
Implementation	20
Priority actions	20
Early action for health gain	21
Evaluation	22
Conclusion	22
Appendix: National consultation feedback on potential actions for the early years and beyond	23

Acknowledgements

The National Public Health Strategic Framework for Children 2005–2008 was developed for the National Public Health Partnership by the Child and Youth Health Intergovernmental Partnership (CHIP). Its development included extensive consultation across all Australian states and territories culminating in National Consensus Workshops in November 2004. More than 400 representatives of the health, education, welfare, community services, justice and housing sectors, government and non-government agencies, mainstream and Aboriginal and Torres Strait Islander health service providers contributed to this process. Written comments were also received from 142 organisations and individuals. Specific consultations were held with organisations representing the interests of the health, development and wellbeing of Aboriginal and Torres Strait Islander children.

CHIP gratefully acknowledges the contribution made by these many contributors and by former CHIP members, both to this *Strategic Framework* and to the background material on which it is based.

Membership of CHIP

- Professor John Catford, Dean, Health Sciences, Deakin University (CHIP Co-Chair)
- Mr Andrew Stuart, Australian Government Department of Health and Ageing (CHIP Co-Chair)
- Professor Allan Carmichael, State Adviser, Child Health Services, Tasmania
- Dr Kerry Carrington, Australian Institute of Health and Welfare
- Ms Nicki Dantalis, Department of Health, South Australia
- Ms Heather D'Antoine, Telethon Institute for Child Health Research, Western Australia
- Dr Jane Freemantle, Public Health Association of Australia
- Dr Sharon Goldfeld, Department of Human Services, Victoria
- Ms Katrina Horsley, Ms Sue Cooke, Queensland Health
- Dr Tom Ioannou, Australian Government Department of Health and Ageing
- Ms Denise Lamb, ACT Health
- Dr Elisabeth Murphy, NSW Health
- Professor Frank Oberklaid, National Health and Medical Research Council
- Dr Barbara Paterson, Department of Health Services, Northern Territory
- Dr Judy Straton, Department of Health, Western Australia

Membership of the Aboriginal and Torres Strait Islander Working Group of CHIP

- Ms Heather D'Antoine, Telethon Institute for Child Health Research, Western Australia (Chair)
- Ms Rachel Atkinson, National Aboriginal Community Controlled Health Organisation
- Dr Jane Freemantle, Telethon Institute for Child Health Research, Western Australia
- Ms Sue Green, Office for Aboriginal and Torres Strait Islander Health, Australian Government Department of Health and Ageing
- Dr Jan Hammill, Telethon Institute for Child Health Research, Western Australia
- Dr Tamara MacKean, Australian Indigenous Doctors' Association
- Mr Stephen Penglase, Department of Health, South Australia
- Ms Sharron Williams, Secretariat of National Aboriginal and Islander Child Care
- Mr Ken Wyatt, Standing Committee on Aboriginal and Torres Strait Islander Health

Introduction

Building on foundations

The National Public Health Strategic Framework for Children 2005–2008 builds on the important work related to children's health, wellbeing and development already under way by governments.

The Strategic Framework has a focus on strengthening the capacity of the systems that support families, parents, professionals and communities to promote the health of children. Although much of the impetus to improve children's health comes from within the health sector, the Strategic Framework addresses the roles that other sectors play. It serves to strengthen other national policy initiatives, especially those that have a major interest in children's health, development and wellbeing. These include:

- *National Agenda for Early Childhood* (currently under development)
- *Healthy Weight 2008 – Australia's Future. The National Action Agenda for Young People and Their Families*
- *Be Active Australia: A Health Sector Agenda for Action on Physical Activity 2004–2008*
- *Eat Well Australia: An Agenda for Action for Public Health Nutrition 2000–2010*
- *National Aboriginal and Torres Strait Islander Nutrition Strategy and Action Plan – 2000–2010*
- *National Strategic Framework for Aboriginal and Torres Strait Islander Health 2003–2013*
- *National Aboriginal and Torres Strait Islander Health Performance Framework* (currently under development)
- *Overcoming Indigenous Disadvantage: Key Indicators 2003*
- *Australian Health Ministers' Advisory Council Cultural Respect Framework for Aboriginal and Torres Strait Islander Health 2004–2009*
- *National Mental Health Plan 2003–2008*
- *National Injury Prevention Plan: 2004 and Onwards*
- *Healthy Mouths Healthy Lives: Australia's National Oral Health Plan 2004–2013*
- *Aboriginal and Torres Strait Islander Health Workforce National Strategic Framework 2002 – A 5–10 year reform agenda*
- Work progressing under the Ministerial Taskforce on Indigenous Affairs Early Childhood Interventions Working Group
- *National Drug Strategic Framework 1998–99 to 2001–2004*
- Bilateral agreements between Australian governments and states/territories to promote 'joined up' ways of working for child protection
- *National Plan for Foster Children 2004–2006*

Giving effect to the strategic directions that make up the framework for action to support the health and wellbeing of children will be the responsibility primarily of all governments through coordinating action plans at all levels. Imperative to the success of these efforts will be the contributions of the non-government sector and other key stakeholders including parents, families and communities. The Child and Youth Health Intergovernmental Partnership in collaboration with other national bodies will take a lead role in the health sector's national response to the *Strategic Framework*. Initial priorities and immediate actions are outlined in the Implementation section.

Investing in Australia's children

Investing in a population-based approach to children's health provides high returns and positive outcomes for children, their families, governments and society.

The economic case for investment in Australian children's health, development and wellbeing is compelling. Overseas experience shows that investment in programs focusing on children's health and development and parent support has resulted in significant benefits enjoyed long after the investments were made and the costs incurred.

Early investment ultimately reduces the financial costs of problems in health, education, justice and social welfare. A high-quality national commitment to children's health also produces positive outcomes for families, including an increase in income earned, increased prosperity and taxes paid, greater equity amongst children and reduced social exclusion. In turn, these contribute to a well-functioning and healthy population, a vibrant economy and overall community stability and wellbeing.

Investment in children from families experiencing economic disadvantage is also likely to have enormous positive effect. This investment will not only improve the quality of life for those children in need but also probably have a positive effect on far-reaching aspects of the Australian economy, making the workforce of the future more productive through better lifetime earning opportunities and a reduction in poverty.

Development of the *Strategic Framework*

The National Public Health Partnership, through CHIP, has coordinated the development of the *Strategic Framework*. CHIP is a collaborative group that provides national leadership to guide government action on children's and young people's health across Australia. It comprises representatives from all state and territory health departments, the Australian Government health department and invited experts. The work of CHIP assists the National Public Health Partnership in its aim to protect and promote the health of all Australians.

CHIP's Aboriginal and Torres Strait Islander Working Group, whose members have represented government and non-government agencies, has greatly assisted the development of this *Strategic Framework*. The Working Group has guided the consultation process and the development of the *Strategic Framework* regarding specific issues for Aboriginal and Torres Strait Islander children.

Through a process of national consultation on public health issues for all children, as well as specific consultation for Aboriginal and Torres Strait Islander children, many individuals and groups have contributed to the development of this *Strategic Framework*. This has included people representing government, national professional organisations, community-based health, welfare and community services, education and research.

Aim and guiding principles

The aim of the *Strategic Framework* is to improve the health and wellbeing of Australian children (aged 0–12 years, including the antenatal period).

To achieve this six overarching principles will be pursued:

1. *Promoting health and wellbeing* – Focusing on the promotion of good health and wellbeing and early intervention for children and their families to enhance positive outcomes through broad-based programs at a population level.
2. *Closing the health gap* – Supporting those children with the greatest health need and tackling the wider health determinants to reduce health disparities between groups.
3. *Tackling the health needs of Aboriginal and Torres Strait Islander children* – Improving the poorer health outcomes for Aboriginal and Torres Strait Islander children.
4. *Empowering children, parents, families and communities* – Giving people information, opportunities, skills and resources that are critical to advancing children's health, development and wellbeing.
5. *Strengthening partnerships* – Combining efforts to build capacity across sectors, levels and issues for better health outcomes for children.
6. *Ensuring health sector responsibility* – Demonstrating leadership and accountability as a core responsibility of the health sector to improve outcomes for children.

Aboriginal and Torres Strait Islander children

Aboriginal and Torres Strait Islander children have much higher rates of illness, injury and mortality. This is a reflection of the stresses and challenges faced by Aboriginal and Torres Strait Islander communities through socio-economic disadvantage and unemployment of parents, lack of access to health services, exposure to environmental hazards, displacement and changes to social structure, discrimination and geographical isolation. Family violence also impacts on the health and wellbeing of Aboriginal and Torres Strait Islander children. The effects of these disadvantages accumulate and extend beyond pregnancy, birth and the first years of life, and are evident throughout the entire life cycle and in future generations.

An important component of the *Strategic Framework* specifically addresses public health issues for Aboriginal and Torres Strait Islander children. The *Strategic Framework* focuses on children as part of an intergenerational concept of family and children that is integral to the continuation of Aboriginal and Torres Strait Islander culture. It also reflects a holistic concept of health and healing and the connection between children's social, emotional and cultural wellbeing and the wellbeing of their whole community.

Family, community connections and kinship are vital to building the resilience of children, family and community. Community involvement in addressing the health needs of families and children plays an important role in improving health gains over the long term.

The priorities for Aboriginal and Torres Strait Islander children identified in the *Strategic Framework* have been nationally agreed as the major areas where gains can be made. They are based on the notions of community participation, culture, sharing knowledge, partnership and the practical principle that 'everyone learns together'.

Health disparities amongst children

Although the majority of children in Australia enjoy good health, many children face disadvantage. Health disadvantages are not confined to Aboriginal and Torres Strait Islander children or those from culturally and linguistically diverse backgrounds. They may be associated with being in a low-income family or in disadvantaged communities, or with issues such as access to services, parents' level of education, disability and quality of housing. These issues, as well as parents' mental illness, substance misuse and exposure to family and community violence, have an adverse effect on children's health, development and wellbeing, both in the short term and long term.

The *Strategic Framework* highlights where the systems that support children and families, professionals and communities can be strengthened to promote the health of children. It also identifies where links can be made to other sectors whose strategic work can impact on reducing health disparities among children.

Strategic directions

The *Strategic Framework* has five strategic directions. Together, these directions identify effective ways to increase capacity and link health promotion efforts that are intended to improve children's health, development and wellbeing. They reflect the major influences on health from pregnancy and birth through childhood and they address the components necessary to create environments necessary for developing healthy children. They will improve our ability to address key issues and conditions such as mental health, healthy weight and nutrition, ear and hearing health, oral health, asthma, smoking and other substance use, child abuse and neglect, suicide, self-harm and injury. In particular, the directions aim to enhance the health of Australian children who face disadvantage that affects their long-term health and wellbeing.

Each strategic direction is introduced by a short rationale. This is followed by outcomes that the *Strategic Framework* seeks to achieve. The priorities for each strategic direction, based on the best available evidence, are then listed. These apply to all Australian children.

The strategic directions apply to the whole population and there are additional priorities specific to Aboriginal and Torres Strait Islander children. These are marked by a diamond bullet (❖) in each of the priority sections.

The five strategic directions are:

1. Strengthen the capacity of parents, families and communities

Strategic Direction 1 focuses on nationally coordinated ways of connecting parents and families to information and support so they can make the most of opportunities to help children do well. It identifies priorities that have the capacity to impact positively for the future, so that families and communities will be stronger.

2. Improve the knowledge and skills of key workers

A competent workforce is vital to ensuring that the health system addresses the health and development needs of children. Strategic Direction 2 outlines priorities for the development of appropriate skills in people working with children, within the health sector and across other sectors and in culturally appropriate ways.

3. Develop partnerships and mobilise resources

Strong and enduring partnerships for health promotion build the capacity to deliver benefits and sustainable health gains for children. Strategic Direction 3 aims to increase opportunities for stronger links that facilitate sustainable health promotion, within the health sector and with other sectors whose activities impact on health.

4. Build evidence and track progress for policy, programs and practice

Strategic Direction 4 identifies the importance of improving a common evidence base that tells us how well the health sector meets the needs of children. It focuses on strengthening the capacity to collect data, to evaluate interventions and research processes that support health promotion, and to improve the ways we share the evidence to set future actions and priorities.

5. Transform health systems and environments

Strategic Direction 5 recognises that action is now required to facilitate 'joined up' approaches across government and across the health system. This is vital to making the systems involved in the health of children more responsive to the needs of children, families and communities.

Strategic Direction 1

Strengthen the capacity of parents, families and communities

Rationale

Families and communities play a crucial role in providing safe and supporting environments for the healthy growth and development of children. As children grow and develop, families move through a range of universal and targeted services and systems and require certain supports from governments and communities. Many of these cross the health, education and community sectors.

Strategic Direction 1 focuses on nationally coordinated ways of connecting parents and families to information, child-centred services and support so they can make the most of opportunities to help children do well. It identifies priorities that have the capacity to impact positively for the future, so that families and their communities will be stronger.

Outcomes

- Improved social cohesion, supportive networks and early connection of parents, families, and communities to health services for children
- Improved knowledge, skills and help-seeking behaviour for parents regarding children's health, development and parenting
- Strengthened community involvement in decision-making and implementation of programs related to children's health and wellbeing

Priorities

- Provide consistent evidence-based information for families and communities, starting from pre-conception, that will help them to care for children by equipping them with the knowledge they need to ensure their children have the best life chances and are healthy and safe.
- Bring together a variety of services related to children into the one physical location to meet families' needs and to create opportunities for connections between families and antenatal and postnatal care, maternal and child health, community health and general practice, early childhood and outreach support services.
- Develop strategies to engage with and support parents, extended family and carers involved in children's lives for all stages of children's physical, social, emotional, cognitive and mental health, growth and development.
- Support working parents by improving family-friendly workplaces that provide parenting information and support, with the health sector taking the lead.
- Develop and implement appropriate communication strategies to increase community awareness of the importance of healthy pregnancy.
- ❖ Enhance services provided by the Aboriginal community controlled health services, government and non-government organisations to provide support, capacity building and community development opportunities for Aboriginal and Torres Strait Islander parents, families and communities to improve the health and safety of children.

Strategic Direction 2

Improve the knowledge and skills of key workers

Rationale

Many workers are well placed to promote the health, development and wellbeing of children across the health, education and community settings. Health professionals providing care during pregnancy, after birth and during childhood include midwives and obstetricians, general practitioners, maternal and child health nurses, paediatricians, Aboriginal and Torres Strait Islander health professionals and allied health professionals. Workers from other sectors involved in the health of children include childcare workers, educators, family support workers and protective services staff. For Aboriginal and Torres Strait Islander children in particular, carers often include extended family.

A competent workforce is vital to ensuring that the health and developmental needs of children are met. The benefits of this knowledge and skills can be passed on to others, through connections between the skilled workforce, community networks, parents and children.

Strategic Direction 2 outlines priorities to help ensure a national approach to the development of appropriate skills in people working with children. It includes development of the workforce within the health sector, and in culturally appropriate ways. It recognises the need to support and strengthen the knowledge and skills of workers across other sectors whose work makes a substantial contribution to the health of children.

Outcomes

- Improved knowledge, skills and practice of workers who influence the health and wellbeing of infants and children
- Increased collaboration and links across disciplines and across sectors to assist key workers
- Increased development of the skilled workforce working with Aboriginal and Torres Strait Islander children

Priorities

- Develop and disseminate core curriculum models nationally, which include cultural competence for the range of workers who work with children.
- Develop and review competencies for all key workers with primary responsibility for children's health (including monitoring outcomes).
- Support ongoing professional development with an emphasis on linkages across disciplines in children's health, development and wellbeing.
- Provide flexible and innovative approaches to professional development that reflect the importance of culture and needs of local communities, including the use of new technologies to gain access to these opportunities.
- Ensure key workers have access to consistent, quality evidence about effective ways of working with children and families.
- Develop strategies to ensure there are linkages and partnerships in undergraduate and postgraduate education and professional development, within and across disciplines, and across all sectors that deal with children and families, particularly children and families most in need.

- ❖ Build and support a competent health workforce with the capacity to meet the health needs of Aboriginal and Torres Strait Islander children through training, skill exchange between Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander workers, addressing supply of Aboriginal and Torres Strait Islander workers, recruitment and retention of appropriately skilled health professionals in both mainstream and Aboriginal community controlled health services and establishing links between workers in both settings.

Strategic Direction 3

Develop partnerships and mobilise resources

Rationale

There is growing recognition of the benefits of new approaches to long-term investment in children's health, development and wellbeing. Strong and enduring partnerships create new capacity to deliver benefits and sustainable health gains for children.

Collaborations and partnerships hold great potential to expand and share expertise and resources through emerging whole-of-government approaches to planning, which may occur between the health and other sectors, between agencies and across traditional boundaries. Different types of partnerships can be successfully created and embedded in local communities to benefit children.

Strategic Direction 3 aims to increase opportunities for stronger links within the health sector and enduring partnerships with other sectors whose activities impact on children's health, such as early childhood, family support, education and the justice and child protection sectors.

Outcomes

- 'Joined up' initiatives through stronger and enduring partnerships at national, state, regional and local levels and between health and other sectors
- Increased opportunities for alternative resource allocation that facilitate targeted and sustainable health promotion and early intervention across disciplines and sectors
- Extended links between government, non-government and private sectors that improve infrastructure and environments for children and families

Priorities

- Promote partnerships by establishing and promoting funding models that recognise and enable integrated, evidence-based, collaborative approaches to children's health, development and wellbeing.
- Enable partnerships between organisations that address health promotion issues for children, engage with children in planning and policy development and support teenage parents and their children.
- Enable partnerships between service providers to develop principles, protocols and systems for information sharing relevant to the health, development and wellbeing of children.
- Explore ways to establish partnerships with the private sector and encourage private sector investment in promotion of children's health and wellbeing.
- ❖ **Strengthen and implement partnerships between all agencies working with Aboriginal and Torres Strait Islander children, ensuring that Aboriginal and Torres Strait Islander communities participate as equal partners.**

Strategic Direction 4

Build evidence and track progress for policy, programs and practice

Rationale

Our efforts to understand children's health, development and wellbeing must be informed by the best possible evidence to inform policy, practice and research.

Building a more complete picture of the progress of the health and development of Australian children, their families, the health of their communities and the effectiveness of programs and policies relies on the collection of comprehensive information systems and high quality research. In the case of Aboriginal and Torres Strait Islander children, programs and research must be done in ways that fit with Aboriginal and Torres Strait Islander culture and that are consistent with national guidelines, developed by Aboriginal and Torres Strait Islander peoples.

A strategic approach is needed to improve information on the health and development of Australia's children, including how well the health sector meets the needs of children. Collecting data on the health of children must be an essential part of the work of all the state, territory and Australian governments.

Strategic Direction 4 focuses on strengthening the capacity to collect good quality data, to evaluate interventions, to promote useful research and to improve the ways we share the evidence.

Outcomes

- Improved picture of the progress of Australian children's health, development and wellbeing
- Stronger coordinated capacity to collect, analyse and use data at a national, state and local level
- Increased research and evaluation to understand effective policy, programs and practice
- Improved translation of evidence into policy, programs and practice

Priorities

- Develop a core set of nationally consistent indicators for monitoring children's health, development and wellbeing that builds on existing work, and that can reflect system performance and ensure consistent definitions and measurements.
- Build on existing infrastructure to establish a national mechanism to coordinate and lead efforts to track the progress of children, and to strengthen the capacity to collect, analyse and use data at national, state and local levels.
- Develop consistent national and state-based data collections that enable valid comparisons.
- Continue and strengthen a national focus on supporting research and evaluation in children's health, development and wellbeing.

- ❖ Develop additional core indicators for public health interventions to improve Aboriginal and Torres Strait Islander children's health including measures of resilience and strengthened cultural identity. This development will occur in line with the developing *Aboriginal and Torres Strait Islander Health Performance Framework* and the *Overcoming Indigenous Disadvantage Key Indicators*.
- ❖ Monitor planning and performance of services addressing health issues for Aboriginal and Torres Strait Islander children and other vulnerable groups of children.

Strategic Direction 5

Transform health systems and environments

Rationale

There are many important drivers across different systems that impact on children's health. These include the ways that the health system responds to the needs of children. Health system responses involve Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander health service providers and private healthcare providers. Also included is the work of many government portfolios such as health, education, sport, recreation, housing and the judicial system.

Systems are needed that ensure effective collaboration and that take a strategic approach to joined up ways of improving health outcomes for children.

The environments we build and live in also have major influences on children's health, development and wellbeing. Healthy economic, social and physical environments promote the health of children by providing them with easy access to healthy places to live, play, learn and interact with others.

Strategic Direction 5 recognises that action is now required to coordinate joined up approaches across government and within the health system to make the systems involved with children more responsive to their needs and those of their families and communities.

Outcomes

- A whole-of-government approach led by the health system to achieve better health and social outcomes for children
- Coordinated responses within the health system to strengthen health promotion and prevention for children
- Physical, social and economic environments that promote the health and wellbeing of children and their families

Priorities

- Initiate a national approach to continuity of health care for women, infants and children, including support from pregnancy through childhood.
- Work within a whole-of-government framework so that all government and non-government agencies collaborate effectively to improve the health and wellbeing of children, particularly Aboriginal and Torres Strait Islander children.
- Ensure that health service environments are child- and family friendly, culturally appropriate and health promoting.
- Ensure that local neighbourhood environments are child- and family friendly, culturally appropriate and health promoting.
- ❖ **Improve access to services for Aboriginal and Torres Strait Islander children in rural, remote and urban areas.**
- ❖ **Strengthen national, state and territory, local government and community planning to improve infrastructure and environments for Aboriginal and Torres Strait Islander children's health, and to encourage healthy lifestyles in communities.**

Implementation

The *Strategic Framework* will guide and focus both national and local development and investment in public health action for children 0–12 years of age. In addition, linked strategies and other initiatives that are highlighted in the introduction to this document will continue to contribute to a strengthened capacity for public health action.

For greatest effect, the *Strategic Framework* is designed for application to a range of health areas for children. The priority action areas under each of the five strategic directions provide broad action areas for improved policy and practice. In addition, use of the *Strategic Framework* will facilitate a coordinated and consistent approach in the separate efforts of organisations and committees to address specific health gain areas such as maternal health, healthy weight, and mental health in school-aged children.

Priority actions

A detailed action plan to address priorities will be developed by CHIP. The initial focus will be on the following set of priorities representing each of the strategic directions:

- Provide consistent culturally sensitive information for families and communities that will help them to care for children by equipping them with the knowledge they need to ensure their children have the best life chances and are healthy and safe.
- Develop and disseminate core curriculum models nationally for training the workforce across disciplines working with children.
- Promote partnerships by establishing and promoting funding models that recognise and enable integrated, evidence-based, collaborative approaches to services for children.
- Develop a core set of nationally consistent indicators for monitoring child health and wellbeing that build on existing work and that can reflect system performance.
- Initiate a national approach to continuity of health care for women, infants and children and support from pregnancy through childhood.

The implementation response under these priority action areas will be informed initially by the consultation feedback obtained in the development of the *Strategic Framework*, with the capacity also to respond to nationally agreed health system priorities for improved child health outcomes.

The action plan will also draw from the scope of potential activity indicated by the consultation feedback and listed in the Appendix. The plan will reflect both whole-of-population action as well as any additional actions required to most appropriately respond to the needs of Aboriginal and Torres Strait Islander children.

Early action for health gain

Immediate implementation efforts under the *Strategic Framework* will start with efforts around maternal and infant health, emphasising primary prevention and the importance of maternal health and the early years of life on future child and adult health. National and innovative approaches under the directions and initial set of priority action areas in the *Strategic Framework* will include targeted and collaborative action on:

- improving breastfeeding support during pregnancy, birth and beyond
- addressing tobacco and alcohol use during pregnancy
- preventing, identifying and managing postnatal depression.

Other actions will be related to improved models of service delivery and practice including:

- improving the availability of and access to appropriate antenatal care for Aboriginal and Torres Strait Islander women and families
- developing a nationally consistent approach to home visiting
- developing national best practice guidelines for antenatal care covering medical and social aspects of care.

Consistent with national health policy on injury prevention and safety promotion in Australia, and recognising the crucial importance of child protection, complementary action will also be identified to enhance promotion of child safety during pregnancy, after birth and during the early years of life.

Evaluation

Achievements under the *Strategic Framework* will require the combined effort of a range of national and local organisations and individuals that will be supported by coordinating and enabling structures at all levels. A number of relevant strategies and stakeholders have been identified already in this framework; however, further work will be needed to clarify roles and responsibilities in taking forward this agenda for future investment in child health and wellbeing.

CHIP will have ongoing responsibility for monitoring implementation efforts under the *Strategic Framework* on behalf of the National Public Health Partnership. Progress reports will be provided to the Australian Health Ministers' Advisory Council.

The outcomes and priority areas for each strategic direction provide the initial parameters for assessing performance. These emphasise strengthened national health system capacity through improved models of service integration and practice innovation, and include response to the service needs of Aboriginal and Torres Strait Islander children, their families and communities. Fundamental to assessment of performance will be the quality and coverage of the monitoring and surveillance system to underpin policy development, program design and to guide future investment decisions. A more detailed evaluation plan will emerge with the development of the action plan.

For real progress to occur in this area, the actions outlined in the Implementation section must be appropriately supported. The existing commitment of governments to key components of this work is acknowledged and should provide impetus for the evaluation of early gains.

Conclusion

The National Public Health Strategic Framework for Children 2005–2008 provides a comprehensive and clear set of strategic directions for coordinated and integrated action to build and sustain the infrastructure, capacity and effort necessary to improve the health and wellbeing of children in Australia.

Particular attention is given to priorities for Aboriginal and Torres Strait Islander children and appropriate effort for these issues will be a priority of implementation.

There is a high level of support in Australia for a focus on good outcomes for children and the *Strategic Framework* provides an opportunity to ensure that the health sector is well placed to contribute to this goal.

Appendix: National consultation feedback on potential actions for the early years and beyond

The scope of potential public health action identified for the early years and beyond is indicated below. This advice has arisen from consideration of the five strategic directions of the *Strategic Framework*. The scope of activity has been loosely categorised according to these directions, recognising that in many instances the scope of activity is relevant to more than one direction.

Strengthen the capacity of parents, families and communities

- Develop innovative models for continuity of care in health and support from pregnancy through childhood of maternal and child health services, the general practice sector and specialty health services.
- ❖ Develop effective communication, case management and care planning strategies that incorporate interdisciplinary ways of working, between Aboriginal community controlled health services and mainstream services to promote the health of Aboriginal and Torres Strait Islander children.
- ❖ Enable Aboriginal and Torres Strait Islander communities to develop and implement local and regional child health action plans that are consistent with other nationally agreed agendas and frameworks.
- ❖ Develop agreed national protocols for culturally secure health care for Aboriginal and Torres Strait Islander women, in partnership with Aboriginal and Torres Strait Islander communities and organisations.

Improve the knowledge and skills of key workers

- Review existing national best practice guidelines and protocols involved in supporting infants' and children's health, and support dissemination and uptake of revised guidelines.
- Develop a national set of standards and activities for the provision of maternal and child health services.
- ❖ Focus on the review and implementation of the National Aboriginal and Torres Strait Islander Health Worker competencies and extend to other health disciplines through the development of business plans, partnership agreements and service delivery plans.
- ❖ Develop and disseminate core curriculum models nationally that are linked to cultural competence and that relate to the professionals who work in services for young children.
- ❖ Develop and implement formal structures and support for skill exchange between Aboriginal and Torres Strait Islander and non-Indigenous workers, through the development of business plans, partnership agreements and service delivery plans.

Develop partnerships and mobilise resources

- ❖ Develop strategies to overcome inequities in access to primary and specialised care for Indigenous children, rural and remote children and other vulnerable children, through innovations in partnerships, priority setting, resource allocation, planning and accountability.
- Create safe, healthy supportive environments and food supply for children, families and communities through inter-agency collaboration.

Build evidence and track progress for policy, programs and practice

- Establish an ongoing process of indicator review and further development.
- Develop a national evaluation framework for community-level interventions related to the health, development and wellbeing of children.
- Develop a child health impact assessment tool to assist planning within government and local communities.
- ❖ Develop and implement targets to monitor planning and performance of services addressing health issues for Aboriginal and Torres Strait Islander children and other vulnerable groups of children.
- ❖ Develop indicators for Aboriginal and Torres Strait Islander children including measures of resilience and strengthened cultural identity including language, in line with the developing *Aboriginal and Torres Strait Islander Health Performance Framework* and the *Overcoming Indigenous Disadvantage Key Indicators*.
- ❖ Enhance capacity for Aboriginal and Torres Strait Islander health services to utilise administrative and statistical collections to track progress and evaluate programs.
- ❖ Improve the accurate identification of Aboriginal and Torres Strait Islander people in data collections to enable comparable data collections across all states, territories and Australian jurisdictions.
- ❖ Map and plan the distribution of human and financial resources for the implementation of local and regional Aboriginal and Torres Strait Islander child health action plans.

Transform health systems and environments

- Explore the different models of governance needed for the development, implementation and evaluation of whole-of-government policies and programs for young children and their families that promote continuity of care across systems in a federal structure.
- Seek joint calls to action from peak government agencies and key non-government organisations for a commitment to joint, inter-sectoral initiatives and jointly developed principles of operation.