

## Impacts of government policy on children's health, development and general wellbeing

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### Children's health, development and wellbeing.

There is an established body of evidence to show that what happens in the early years of a child's life has a profound impact on their future health, development and wellbeing. There is also a growing consensus that the effects of experiences in later childhood have been underestimated.

Children who have a poor start in life are more likely to develop learning, behavioural or emotional problems which may have far-reaching consequences throughout their lives and in turn, the lives of their children. These problems accrue to the whole society in the form of increased social inequality, reduced productivity and high costs associated with entrenched intergenerational disadvantage.

Although family members have primary responsibility for, and influence on, the health, wellbeing and development of children, the community, businesses and the broader environment in which children live, and the supports provided to families, are also influential. For this reason, a range of factors that both directly and indirectly affect child health, development and wellbeing are discussed in this information sheet: physical health (including maternal health); quality of parenting; child care; education; housing; neighbourhoods; and access to services within the community are all considered important.

- *This information sheet is intended to supplement the Family Impact Statement (FIS) Guidelines. It provides further guidance for determining how the health, development and wellbeing of children in different family circumstances may be affected by a particular policy or program. You can use this information sheet to identify some of the key issues that may be relevant to determining the family impact for your policy issue. You can then use the links to a range of additional resources on the FIS page of the PM&C website to assist with more detailed analysis.*

### Points to consider:

- In 2006-07, there were 2.6 million families in Australia with at least one child aged between 0 and 17 years.
- A child's health, development and wellbeing is shaped by a range of factors such as child and family characteristics (including genetics), and the broader social, economic and physical environments in which the child is raised.
- Child health, development and wellbeing are intrinsically connected and interrelated. For example, a poor economic situation, such as lack of regular, adequate income within the family unit, may have implications for child health, stemming from poor access to nutritious foods, health, and medical services; inadequate or unhealthy housing; and poor access to clothing and heating. These factors may, in turn, affect a child's physical and mental development, and may also affect their wellbeing.

## Policy areas

Proposals impacting on child health, development and wellbeing may relate to policy on:

Health services \* Education \* Employment and working conditions \* Transport  
Infrastructure \* Employment \* Social Inclusion \* Family Law \* Housing  
Communication \* Sport \* Environment

## Child health

Child health and development can be affected by a range of social and environmental factors.

- Affordability and location of child, adolescent, and general health services have a direct impact on health outcomes. Family knowledge about the range of services available, and the appropriateness of these services, may also influence their use by families.
- The availability and affordability of nutritious foods, including fresh fruit and vegetables; access and quality of school lunches and breakfasts; the ability of a family to provide adequate meals and snacks each day; and knowledge of food and nutrition matters within the family may all affect child nutrition.
- Physical activity can have an impact on child health and development, and may be affected by access to local recreational facilities such as sporting clubs; sufficient time for children to engage in physical activities; and positive parental and sporting role models.
- Exposure to health risks such as inadequate shade from the sun and second-hand cigarette smoke may increase the risks of children developing medical conditions such as cancer.
- Exposure to air and water pollution or exposure to air and water that is of poor quality may also affect child health and development.
- Risk-taking behaviours, such as peer group pressure to experiment with drugs and/or alcohol and unprotected sex may increase the likelihood of young adults developing physical or mental health issues.
- Access to, and take-up of, immunisation may have long-term impacts on child, adolescent and adult health.

Maternal health is also an important determinant in child health outcomes, and can affect foetal and child cognitive and behavioural development; risk of impairments and disabilities; and risk of developing chronic health conditions. Maternal health may be affected by a range of factors, such as:

- Access to pre-natal and post-natal health and information services.
- Access to community support services such as breastfeeding or sleep clinics.
- The level of support provided within the family and the level of contact with other family members.
- The level of support provided at work, before and after childbirth (such as time off to attend medical appointments; breastfeeding breaks; graduated return to work policies).

Aspects of maternal health that might affect foetal and child health and development include:

- the mother's age;
- any risk-taking behaviour the mother engages in;
- exposure to diseases (including sexually transmitted diseases);
- access to and take-up of immunisation (both as a child and as an adult);
- drug and alcohol use, including tobacco;
- nutrition; and
- access to, and use of, antenatal care and health services and counselling.

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**Tip:** *Don't forget to think about how social and environmental factors may affect children – many policies that are not directly aimed at families may have a direct or indirect impact on them.*

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## Quality of parenting

Parenting, whether by a biological parent, a carer, or another family member such as a grandparent, has a powerful influence on children's health, development and wellbeing. Parenting also provides an important mechanism by which children learn about their culture and heritage, and develop their own identities and understandings of the world. Factors that influence the quality of parenting a child receives include:

- The amount of time parents are able to spend with their children – this may be influenced by work or study pressures; employment conditions; access to transport and commuting time; and managing multiple caring roles within the family, such as looking after more than one child, a family member with an illness or disability, or a frail-aged parent.
- The types of interactions between parents and their children – for example, children will learn best when they have relationships with adults that are secure and trusting.
- The amount of conflict between parents and relationship difficulties, including breakdown.
- Whether there are parental drug use and mental health issues.
- The level of financial pressures.
- Quality of accommodation, including overcrowding and level of security.

## Child care

It is common for young, preschool-aged children to be cared for by people other than their parents on a short-term, recurrent or irregular basis. Care arrangements range from formal, government-regulated care in centre- or home-based settings, to playgroups, and informal, unregulated care typically provided by grandparents, siblings, friends, neighbours or nannies. Some parents use a mix of formal and informal arrangements. Additionally, most children experience one or more years of an early education program provided in a preschool setting prior to starting school, with all governments committing to provide universal access to preschool in the year before formal schooling by 2013.

- Child care or similar services can provide an avenue for other supports to be provided (such as parenting, health or education services), and can also provide respite for parents, particularly in the case of special needs children.
- Research suggests that early childhood education programs are effective in improving outcomes for young children, particularly those from disadvantaged backgrounds. Benefits include improved cognitive and social development, and better transitions to primary school.
- Early childhood education programs also have long-term benefits for children, such as higher rates of school completion and employment, and reduced criminal activity and welfare dependence.
- Extremely long hours of care may pose risk, but quality of care is thought to be of greater importance than quantity for children's wellbeing and development.

A family's decisions about child care may be influenced by:

- types of care available;
- the location of care;
- parental working hours;
- family income;
- parental study commitments;
- other caring roles or requirements within the family;
- access to transport;
- parental awareness about care benefits/drawbacks; and
- government supplements/supports.

## Education

Families play a vital role in their children's learning and educational development. Research shows that a child's academic progress and level of engagement at school is affected by:

- the learning environment provided at home;
- parents' attitudes and values towards education; and
- parents' involvement in the child's schooling – this can range from participating in the work of the school (e.g. volunteering, coaching); involvement in school events (e.g. parent-teacher meetings) and more formal roles.

A family's ability to provide a stimulating home learning environment and engage in the educational process can be limited by:

- financial disadvantage;
- low parental educational attainment; and
- parental mental health problems.

Activities that have been shown to foster a stimulating home learning environment include:

- reading to children and engaging in other learning activities;
- visiting libraries and other facilities such as museums – this may be impeded by location, lack of transport, language barriers and, for people with a disability, physical barriers;
- involvement in sporting and physical activities; and
- access to a computer and books - goods such as computers and the internet can be costly; may be impeded by the location of the family home; and may be made more difficult by language barriers.

The ability of parents to be involved in their child's school may also be affected by:

- the division of labour within the family unit;
- working arrangements, including flexibility to accommodate absences;
- financial pressures and the ability to take un-paid leave from work;
- other time pressures, such as study or care for other children or adults;
- the availability of transport to get to school or work; and
- language and cultural barriers, and social expectations.

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**Tip:** *If your policy will affect children's health, development or wellbeing there may also be implications for family functioning – see Information Sheet 4.*

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## Housing

A family's access to housing, the location of housing, and the quality or suitability of that housing, can have an influence on child health and wellbeing. Likewise, unstable housing tenure and homelessness can have negative impacts on child outcomes. The available evidence suggests that homeless children and families and those living in overcrowded homes have poorer outcomes in relation to:

- physical health and safety - such as excess weight and obesity, respiratory and infectious disease and accidents, violence and family conflict;
- mental health - including alcohol and drug dependence; depression, schizophrenia and suicide and;
- children's learning and development and behavioural issues.

On the other hand, secure tenure gives people a sense of autonomy, certainty and control and has been found to have beneficial effects for both parents and children in terms of:

- parental mental health;
- family stability;
- employment participation for parents and other family members; and
- educational outcomes for children.

## Neighbourhoods

The character of a neighbourhood is both influenced by, and influences the people who are part of it. These influences occur through a complex web of interdependent factors and can change over time as people move into and out of the neighbourhood and/or the physical characteristics of the neighbourhood change. Notwithstanding the complexity and dynamic nature of these influences, there is increasing evidence that neighbourhoods (including both social and physical characteristics) can have an important impact on families. These impacts can be shaped both by the characteristics of people in the neighbourhood, the physical characteristics of the neighbourhood itself, and the interaction between people and place.

For example, living in a disadvantaged neighbourhood, compared to living in a less disadvantaged neighbourhood, has been linked to:

- poorer outcomes for children, including poorer learning and behavioural outcomes, poorer physical health and higher rates of child maltreatment; and
- reduced job and educational prospects for young people.

In addition, the physical environment of a neighbourhood has been found to impact on children through:

- Heavy or dangerous traffic nearby, or the lack of safe areas to cross major roads has been associated with lower levels of children's physical activity and higher rates of obesity in Australian children;
- The proximity of parks and playgrounds, presence of sports and playgrounds, schools within walking distance and the availability of public transport have also been linked to higher levels of physical activity in children (though not their social or emotional outcomes); and

- The physical safety of children and young adults may also be affected by the levels of sanitation and exposure to rubbish and hazardous materials in the neighbourhood.

Similarly, neighbourhoods with high residential mobility may also mean people have less time and inclination to build trusting relationships necessary to enhance social capital and develop and maintain support networks within their neighbourhood.

### **Access to services**

Children's health, development and wellbeing are affected by the quality, quantity, diversity, availability, and accessibility (location and cost) of recreational, social, educational, health, transport and employment services in the local community. These include:

- pre-school services, child care and schools;
- public transport infrastructure;
- health and medical services, such as general practitioners, hospitals and specialists;
- availability of supports such as interpreters;
- employment resources, including the location of communities relative to labour markets;
- libraries; and
- parks, sporting and recreational facilities.

Service use is affected not only by the cost and availability of services, but also information and awareness about the facilities and services, perceptions of quality, and people's willingness and confidence to use services.

Families living in remote and rural areas also face additional challenges caused by location and distance, and also may experience difficulties associated with maintaining confidentiality in small communities; high staffing costs for some services; and the difficulty and constraints of providing services that cater to diverse family types and needs. Likewise, families from diverse cultural or linguistic backgrounds, and Indigenous families, may experience barriers caused by language and cultural practices.