

**Mental Models in
Early Childhood Development**
April 2024



Table of Contents

About ARACY	3
Introduction.....	4
Executive Summary.....	5
How parents and carers feel about their parenting role and practice	8
Awareness raising and influencing community attitudes	8
What this means for communicating about children, parenting, and families	8
Part 1 – Common mental models about children, families, and parenting	10
Part 2 – How families feel about their parenting role and efficacy	15
Part 3 – How can we influence the way children in their early years are perceived and valued in Australia?	20
Part 4 – Opportunities.....	25
Appendix 1: Prior campaigns covering early childhood development	27
Endnotes	30

About ARACY

For over 20 years ARACY – Australian Research Alliance for Children and Youth – has been bringing people and knowledge together, to make change for the benefit of children and young people. ARACY is unique in linking all areas of wellbeing for children, young people, and their families.

We believe all children and young people should have the opportunity to thrive.

We strive to achieve this by championing evidence-based policy and practice, while forging alliances between government, policy making, research, philanthropy and service delivery with a focus on prevention, early support and engagement. We work for the creation of better systems and supportive environments, and to grow capability across the sector, improving outcomes for children and young people.

Wellbeing can be thought of as a child or young person having everything they need to thrive and reach their full potential. It encompasses all areas of a child's life, which are linked and interdependent.

The Nest,ⁱ Australia's wellbeing framework for children and young people, is a way of thinking about the whole child in the context of their daily lives. Originally informed by the voices of over 4,000 children, young people, and experts, The Nest was developed by ARACY in partnership with 150 organisations between 2010 and 2012 and is regularly refreshed incorporating feedback from practitioners, children and their families. The Nest shows for a child to thrive their needs must be met in six interlocking areas.

1. Being Valued, Loved, and Safe
2. Having Material Basics
3. Being Healthy (physically, mentally, emotionally)
4. Learning (within and outside the classroom)
5. Participating (in decisions, groups, community)
6. Having a Positive Sense of Identity and Culture

The Nest framework is a powerful counter to the all too frequent accusations of fracture, siloing and misalignment of children's research, policy, and practice. The Nest and its practical application using The Common Approach®, have been adopted by governments and organisations across Australia and internationally.

Learn more at www.aracy.org.au.

Introduction

“Australians may nod their heads at the idea that “it takes a village”, but when pressed, most don’t see what needs to be done to more fully support children.”

Nat Kendall-Taylor, CEO of The Frameworks Institute

A “mental model” is a cognitive shortcut, a pattern of thinking about a concept or experience, based on our own experiences and cultural cues built up over time.

Australian society holds a range of mental models about children, families, and parenting. These mental models contribute in both positive and negative ways to how children, families, and parenting is understood, valued, and prioritised in Australian life, community, and politics.

We need to address these mental models and seek to ensure that when people think about children, families, and parenting, they do so in ways that are helpful to the long term development and wellbeing of children and young people.

The "Mental Models in Early Childhood Development" report delves into the societal attitudes and beliefs affecting early childhood development in Australia, specifically targeting the age group of 0-5 years. The report points out the prevalence of counterproductive mental models within Australian society, which obstruct a comprehensive understanding and support for early childhood development. It underscores the critical need to identify and address the mental models that shape perceptions and actions towards the early years, advocating for strategic communication efforts to modify these models towards more positive and supportive views.

Proposed strategies include targeted awareness campaigns and the strategic use of framing in communications to foster beneficial mental models and mitigate the influence of negative ones. This concerted effort aims to boost community comprehension and backing for early childhood endeavours, highlighting the shared responsibility in fostering children's development.

Emphasising an integrated approach that merges awareness campaigns with systemic measures to address existing challenges, the report argues for informed communication and policymaking to transform societal mental models, thus creating an environment conducive to the next evolution of early childhood development in Australia. This initiative is set to contribute towards building healthier, more resilient communities where every child can thrive.

A NOTE FOR READERS

Please be aware that this paper discusses harmful racist mental models, including those relating to First Nations Australians. These are discussed in the context of explicitly seeking to combat them and reduce their prevalence in public discourse. ARACY acknowledges the enduring harm done to First Nations peoples by colonisation and ongoing structural racism in Australia.

Executive Summary

At a glance:

- Australians hold long-standing, often unconscious beliefs about children, parenting and families. These beliefs shape how much support the community and our systems give to children.
- Awareness campaigns about early childhood have worked. Knowing the facts about brain development has not, on its own, built stronger public and political support for children.
- Naming these beliefs, and framing our communication with them in mind, can build the will to support every child to thrive.

How we think about children's first years matters

Governments and organisations in Australia have run many awareness campaigns about early childhood development over the past 20 years. The Frameworks Institute finds these campaigns have been successful in raising awareness and improving public understanding of the science of early brain development.ⁱⁱ Early childhood is now firmly on Australia's policy agenda, with sustained national attention on early learning, care and family support systems.

However, a decade of research by The Frameworks Institute in Australia and comparator countries, along with additional work by Telethon Kids Institute, Menzies School of Health Research and others, suggests that less helpful mental models continue to be sticky in the Australian psyche^{iii iv v}.

Mental models and how they influence our attitudes and behaviour

Human brains are well equipped to notice patterns and use these patterns as unconscious shortcuts in the way we think. Every time we encounter a message or experience, our brain automatically compares it to an internal database of what we've previously learned and believed about that topic.

If a matching mental model is found, we automatically emphasise aspects of the message or experience that align with this model, while downplaying contradictions. This largely involuntary process operates beyond our conscious control.

Our internal database is formed not only by our own experiences, but by the stories we hear – from family and friends, on the news, through our socials, and in the media we consume for education and entertainment. Then the stories we tell and the content we create perpetuate those same mental models, and the loop goes around, reinforcing itself.

This internal database can hold conflicting mental models simultaneously. For example, two common mental models in Australia are “it takes a village to raise a child” and “families should be responsible for their own children”. Messages received about parenting, about children and families, will very likely be matched up with one of these two models.

Framing is the strategic design and use of communications that are intended to activate mental models, also called frames, that are more likely to be supportive of our goals, and less likely to trigger unhelpful models. Framing is the choices we make in what we say and how we say it – what we emphasise, how and what we explain, and what we leave unsaid. These choices affect how people hear us, what they understand, and how they act in response.

In the example above, activating the mental model of “it takes a village to raise a child” cues people to think about the role of extended family, community, and society in rearing children. The other model, that parents are responsible for their own children, cues them to step back, and makes them more likely to reject policies that are designed to help families.

How Australian society thinks about children, parenting, and families

Various organisations and institutes have undertaken research into how children, families and parenting are viewed in Australia and in comparator countries such as the US, UK and Canada. From this body of research, key mental models have been identified that are consistently seen in surveys, polling, and the media. Going deeper, we can draw a correlation between the dominant mental models of a culture, the ways in which public policy reflect these models, and the resulting outcomes for children and families.

The table below is a summary of the key mental models at play in Australia around children, parenting, and families. It is adapted from the work of The Frameworks Institute^{vi vii viii} and Telethon Kids Institute^{ix}.

Model	Influence on people's thinking
Ageing up: In thinking about child development, people tend to focus on older, school-aged children and have trouble holding young children in mind.	Unless age is made explicit, the ageing up model leads people to misunderstand communications about early childhood development as being about older children.
Child development “just happens”: babies, toddlers and children develop naturally and absorb information and developmental inputs like sponges. A caregiver's job is to provide love and basic needs while allowing the natural process of development to run its course.	Broadly, people tend to toggle between thinking of child development as a natural process that only needs love, or one that requires careful cultivating and curating of experiences to “maximise a child's potential”. However, when thinking about babies and toddlers, the natural development model tends to be foregrounded.
Natural parenting: People assume good parenting comes ‘naturally’.	When triggered, both this model and that of natural development above lead people to resist the idea that good child development requires active and specific engagement and parenting practices can be improved. It undermines support for evidence-based parenting resources.
Choice point: People view good parenting as a choice that is up to the individual's discretion and willpower.	This perception puts the onus on the individual to overcome challenges and leaves little room for people to think about how context and circumstance limit and shape people's choices.
Determinism: People believe that people's parenting is determined by how they were parented as children and that there is little that can be done to change this pattern.	This way of understanding is highly fatalistic and restricts people's ability to see how programs to support parents can make a difference to outcomes.
Othering: A combination of the three parenting models above, plus a broader cultural model of individualism and belief that Australia is a meritocracy of equal opportunity, lead to a strong tendency to “other” parents, carers or families who are struggling or do not fit a perceived idea of a “good” family.	This model is structured as ‘us versus them’ and views parenting and family structures that aren't the ‘norm’ as deficient and as harmful for the child's development. For example, children in out-of-home care, single parents, same-sex parents, non-biological parents, and other family structures. The Telethon Kids Institute

	refers to this as the mental model of “Parenting and families look a certain way”.
Threat of modernity: People blame modern life and ‘Australia today’ for many of the challenges parents face and hold a nostalgic view of how parenting ‘used to be’.	A sense of nostalgia for a mythic past lost and gone forever activates fatalistic thinking, shuts down people’s ability to imagine solutions and causes them to disengage.
Men are important, but women are responsible: Though people generally think of parenting in gender-neutral terms, they overwhelmingly blame women for poor parenting outcomes and hold women responsible for fixing problems that arise.	These gendered assumptions undermine men’s role in parenting, disparage women, and make it difficult to foster productive conversations about men’s <i>equal</i> role in parenting responsibilities.
Parenting is a private endeavour: Related to ideas about parenting as a choice point and the role of government (below). Government has no role in family life, and parents who make the choice to have children are exclusively responsible for their upbringing.	This mental model posits both that government has no place in family life, and that children are the sole responsibility of their families (who shouldn’t have had them if they couldn’t provide for them). It prevents people seeing systemic factors and reduces support for policies that support families.
Three models of government: People have contradictory ways of thinking about government and parenting—as an intrusive and unwanted supervisor, as an incompetent problem solver, or as a supportive partner in the parenting endeavour.	Whereas the supervisory and incompetent models block people’s receptivity to policy-based solutions, the support model facilitates thinking about how public programs and infrastructure can be changed to create better parenting outcomes.
Children aren’t relevant to politics: Related to the ideas of parenting being a private endeavour, the idea of childhood as an intrinsically innocent and carefree time, and the three models of government.	This model blocks children’s relevance in public policy, making them invisible in policy areas that are not directly aimed at children – e.g., education, health, child protection.

How parents and carers feel about their parenting role and practice

While there is not a great deal of high quality research into parenting attitudes and practice in Australia, what evidence is available tends to reflect the mental models above. Women do far more child rearing, parents (especially mothers) feel judged if they admit to struggling, and the threat of modernity hangs over families.

Universal supports and services available to parents and carers are better used by those with more resources to start with, and targeted services can be stigmatised and feel unsafe for those they were designed to support (othering)^{x xi xii}.

While limited to parents and carers in Victoria, the only research that correlates mental models with parenting practice found that parents and carers who did not attend any parenting groups or seminars were:

- more likely to believe that parenting comes naturally
- less likely to think parenting advice would be helpful
- less likely to seek support from universal services such as a GP
- less likely to agree there is a role for government in parenting support.

Awareness raising and influencing community attitudes

Raising awareness is not an end in itself. Effective social marketing includes strategies that target change in social environments, communities, social policy, and legislation. It considers the systemic factors influencing behaviour rather than solely relying on individuals to change their behaviour without change to the influencing environment.

By using the strategies of framing, we can contribute to change in the internal databases formed by messaging about children, parenting, and families. We can create more stories that activate the mental models which help us achieve our aims for children to thrive, and reduce the activation of those models which thwart our aims.

Over the long term, this is expected to increase the visibility of children in the public policy arena, generate greater public support for the policies and actions that foster positive child development and family functioning, and increase societal investment in our collective aspirations for Australia's children.

However, for change to be achieved, this must be backed in with active work on the systems and structures that hold the current conditions in place. Educating the public on the impact of toxic stress on the development brain, for example, does nothing without systematic supports to reduce the key drivers of that stress, for example family poverty, embedded racism, or an inadequate mental health system. National strategies that connect evidence, investment and action across systems can provide a scaffold to align and integrate these different levels of activity.

What this means for communicating about children, parenting, and families

- **Common mental models** influence the way messaging designed to raise awareness and influence social attitudes is received. Strategic framing of communications to take these mental models into account and activate the most helpful ways of thinking can make messaging more effective.

- **Raising awareness is not an end in itself.** Effective social marketing includes strategies that target change in social environments, communities, social policy, and legislation, and do not rely on individuals to change their behaviour without changing the drivers of that behaviour.
- **Care should be taken to ensure communications do not reinforce unhelpful mental models.** Depict a wide range of parents, caregivers, families, and communities, using evidence-based strategies in ways consistent with different cultural parenting practices. For example, see this video of a young Cherokee father demonstrating “serve and return” interactions with his toddler daughter <https://healthysafechildren.org/resource/chokeee-nation-video-serve-and-return>.
- **Communications should focus on the benefits to communities and society.** Framing disadvantage in terms of community assets (“not all children have access to ...” e.g., safe playgrounds public transport, etc) depersonalises disadvantage and avoids triggering ideas of worth, deserving and undeserving families, and collective vs individual responsibility. Framing solutions in terms of increasing a community’s assets and strengths demonstrates that the whole community (and wider society) will enjoy the benefits of supporting children and their families.
- **Mental models apply just as much to policy makers as they do to the public.** Certain models, especially those relating to individual responsibility/culpability and “othering”/discrimination (often with the well-meaning intent of targeting cohorts of interest), are both attractive to and potentially counter-productive for policy makers.

Part 1 – Common mental models about children, families, and parenting

“Mental models” are cognitive shortcuts that all people hold. They are an established way human minds make sense of the world around them, using broad brushstrokes to fit stimuli, prompts and experiences into frameworks of similar experiences and cultural cues developed over time. Mental models can be conscious or unconscious, and can both conflict with and support each other.

By making conscious choices in the design and use of messaging and communications, we can encourage the activation of the mental models which are mostly likely to support our aims, and reduce the risk of triggering unhelpful mental models which may make people less receptive.

A growing body of evidence has been developed over the last 10-15 years about the mental models typically held by the Australian public that relate to children, child development, and parenting. Alongside similar work conducted in comparator countries such as the United Kingdom, United States of America and Canada, this evidence base provides a solid foundation for understanding the deep beliefs that shape how Australian society views children, child development and parenting.

Research on public perceptions of children, families, and parenting is well-documented in Australia and similar countries. However, actual parenting knowledge and practices in Australia remain largely unexplored. This, ironically, is likely due at least in part to some of the key mental models which this paper will explore.

Similarly, most research looking at promising practice or specific interventions does not consider the mental models that contextualise either the problem or the intervention, nor does it investigate change in those mental models.

The research drawn upon for this paper has primarily come from:

- The Frameworks Institute, which has worked in partnership with Australian organisations including the Parenting Research Centre, Telethon Kids Institute, Minderoo Foundation, ARACY – Australian Research Alliance for Children and Youth and the Thriving Queensland Kids Partnership since 2015. Key data collections were undertaken between 2012 and 2015 (over 200 in-depth cognitive interviews, rapid “frame test interviews, and expert interviews, and a nationally representative survey of 7,405 respondents) and in 2019.
- The 2023 paper *Mental models underpinning early child development systems and outcomes in Australia* prepared by Telethon Kids Institute for the Early Years Catalyst, a coalition of 10 organisations working for better outcomes in early childhood for children in Australia, which draws upon a review of relevant literature, interviews and focus groups with 69 consumers, service providers, and subjective subject matter experts, and sentiment analysis of social media comments on relevant issues.
- The Parenting in Victoria Today survey, conducted by the Parenting Research Centre with data collections in 2016, 2019 and 2022. The 2022 survey included 2,602 primary caregivers of children aged under 19 years, with 34.8% of respondents having children aged between 0-5 years (903 children in total).
- The newly released the Valuing Children Initiative Survey 2023: Exploring Australian Adults’ Attitudes Towards Children for a Better Future. This survey investigated the attitudes of a weighted convenience sample of 1,008 adults aged 18-75+ towards children, their role and value in society, and the issues affecting them.
- The Concerns of Australian Parents survey undertaken by the Australian Childhood Foundation in 2004 as part of the Every Child Is Important campaign, which focused on reducing child neglect and abuse through influencing community attitudes. This survey undertook interviews with a representative sample of 500 Australian parents, though there was minimal reporting of demographic characteristics. Of these, 305 had a child aged 0-6 living at home.

A range of other research has been drawn upon for specific areas of knowledge, or to act as exemplars or wayfinders. This includes the work of the Menzies School of Health Research into social marketing, especially in First Nations communities, and the work of the TMW Center for Early Learning + Public Health at the University of Chicago.

The authors are also indebted to the foundational work on the neuroscience of child development by the Alberta Family Wellness Initiative and the Harvard Center for the Developing Child, and that of the Murdoch Children's Research Centre and many others into the social determinants of health in an Australian context. A full list of references is included in the endnotes.

What has changed about how Australia views children, families, and parenting?

Active work by many players in this space over the past 10-20 years has raised awareness of the neuroscience of child development, bringing a greater public awareness of how babies' brains grow and develop in their earliest months and years.

The influential US campaign I Am Your Child created in 1997 by filmmaker Rob Reiner, helped to grow public understanding of the importance of the early years in child development. In Australia, 2004's Every Child is Important campaign by the Australian Childhood Foundation and the Commonwealth Government; *Investing in the early years*, Australia's 2009 Early Years strategy; and later initiatives like the Core Story of childhood and the accompanying 2018 public awareness campaign Bright Tomorrows Start Today developed in Australia by Telethon Kids Institute, the Minderoo Foundation and The Frameworks Institute; have all played a role in raising awareness and educated people about early childhood development. (Appendix 2 contains further information about these campaigns.) The United Kingdom continues this work in 2023 with Shaping Us, a national campaign created by the Royal Foundation Centre for Early Childhood.

Follow-up work in Australia has been conducted by The Frameworks Institute in 2019, undertaking a nationally representative survey of over 7,000 respondents. This research indicated that messaging about the importance of the early years for brain development has landed successfully in the Australian psyche. Unfortunately, this increased awareness and understanding is not enough to ensure that children and their needs are high in public thinking or the policy agenda.

The Frameworks Institute's findings and those of Telethon Kids Institute are consistent: there are several distinct and interconnected mental models which between them continue to hold current conditions for children and families in place.

Powerful mental models held by Australia society about children, families, and parenting

The mental models described below are those that emerged most consistently in research from both The Frameworks Institute and Telethon Kids Institute. They are also strongly consistent with Australia's closest comparator countries, the United Kingdom and the United States.

Children's development happens naturally

On-the-street interviews, survey experiments, and focus groups conducted by The Frameworks Institute with over 7,350 people from across Australia^{xiii xiv} indicated that broadly, people in Australia continue to believe that child development is a 'natural' process that should not be distorted by science, medicine, and "modern life" (the internet, changing family structures, children experiencing too much education pressure too early, etc)^{xv}. Childhood is viewed as a time of innocence and simplicity, where children should be protected from adult ideas and concerns. These findings were consistent with those of the Telethon Kids Institute in their 2023 research into mental models about early childhood in Australia^{xvi}.

The role of parents and carers in this mental model is to protect children from outside threats, and at the same time provide the right kind of educational opportunities and experiences to "help children learn".

Parenting comes naturally, too

Good parenting is equated with ‘just caring about your child’, and assumes that this naturally and automatically flows from being a normal and moral individual. Parenting is not thought to require intentional or conscious effort, but rather happens ‘naturally’ and unconsciously^{xvii xviii xix}.

Associated with the idea that parenting is natural and easy, it follows that if a parent or family finds parenting hard, they are doing something wrong. This idea is usually driven by a view that parenting is about personal choices and struggling parents are making poor choices. This mental model ignores systemic factors affecting parenting capacity and is strongly associated with “othering” (below).

There is another common model that on the surface appears to be a counterfactual to “natural parenting” – the idea that “parenting is a slog”. This is exemplified by the plethora of parenting memoirs, websites, articles and products that depict parenting as messy, hard work, and requiring frequent application of antidotes such as “mummy’s wine time”. However, these models can be seen as working together. Parenting *can* be hard, messy and frequently boring – but *good* parents and caregivers make a choice to suck up the hard times and find joy in the little moments, exemplified in the saying “the days are long but the years are short”. Only if a parent or caregiver is consistently not coping are they considered to be failing.

Fathers are important, but mothers are responsible

The Frameworks Institute found that while the Australian public may talk about parenting in broadly gender-neutral terms, digging a little deeper reveals pervasive beliefs about gender roles. Questioning and discussion in interviews about parenting *problems* revealed a deep assumption that women are ultimately responsible for the outcomes of parenting^{xx}.

The 2023 research by the Telethon Kids Institute found related and extended beliefs and ideas about the caring role being integral to women’s identity and power, and that providing care was innate to women. Comments in their focus groups included:

- “Supporting children is integral to maternal identity.”
- “Women enjoy providing care.”
- “Child development is the last bastion of women’s influence.”

Given that caring in general is devalued in Australia, largely due to being viewed as “women’s work”^{xxi}, this has serious implications for the importance placed on children’s lives and development.

This mental model further affects fathers, who Telethon Kids Institute found were limited by this belief in the role they could or should play in their children’s lives. Men in their focus groups described this model playing out at an individual level (ie, “I don’t know what I’m doing”) and their uncertainty around caregiving was reinforced by services that framed the mothers as the primary parent and saw fathers either as a secondary parent or in no role at all^{xxii}.

“Othering”

Consistent with many other mental models of social worth, welfare, privilege and the deserving or underserving disadvantaged, parents and caregivers who do struggle are frequently depicted as outside the mainstream in one or more ways. Socio-economic status, class, mental health, disability and race are all used explicitly or implicitly in the ways Australian society thinks about “good” and “bad” parents^{xxiii}.

This othering has powerful implications for people’s willingness to seek support, and the ways that support may be available or accessible to different families, as well as for people’s likelihood of supporting policies and choices designed to help families.

The Telethon Kids Institute work found mental models about parenting in Australia to have highly problematic racist tones^{xxiv}. There is a tendency to view the dominant Western paradigm of family

structure and parenting style as the only correct way and to devalue other ways of parenting, even where these would appear to fit with other common mental models.

For example, the phrase “it takes a village to raise a child” commonly comes up when asking the Australian public about children and parenting, along with other ideas about community and supportive extended family. This suggests strong family and community connections are valued and appreciated in the context of Australian families. However the Telethon Kids Institute research participants did not recognise these as a benefit in a First Nations parenting context. Instead, they made comments such as “Aboriginal parents ‘pass around their children’, which means they don’t care about the child”^{xxv}. Despite fitting with a commonly accepted mental model, First Nations parenting practices were viewed as inferior.

Other CALD families and parenting practices face similar judgement, as do families living with disability (parents, caregivers and/or children) and LGBTIQ+ families^{xxvi}.

Taken to its extreme, othering finds itself in the Crisis model of “you can’t fix some families”^{xxvii}, which is related to ideas of the forces shaping childhood as being too big to fix (threat of modernity)^{xxviii}. This can cause people to switch off and disengage from the issue.

Parenting is a private endeavour

Again, despite the popularity of “it takes a village” as a concept for positive childhoods, the Australian public see only a limited role for society and government in providing children with the supportive experiences that we know promote positive development.

The work of the Telethon Kids Institute commissioned by the Early Years Catalyst in 2023 confirmed the main mental models that The Frameworks Institute found between 2016 and 2020 continue to keep children’s needs low on the policy agenda. These include persistent beliefs about parenting being innate and a direct reflection of the love parents hold for their children; that needing help equals personal failure rather than systemic pressures; and that government’s role “stops at the front door” - unless you are one of “those” families.

From a systems perspective, the evidence is consistent across Australia and comparator countries that government’s and society’s role in supporting children and families is perceived to be very limited^{xxix}.

Children aren’t relevant to politics

The Telethon Kids Institute’s research identified a mental model that posits children as irrelevant to policy decisions simply because they do not hold enough power and do not contribute much to society. Parents are seen as a proxy for children’s interests: however, these interests are still not seen as relevant to social policy given the prevailing view “families have to fix their problems, not the government”.

The Frameworks Institute found that when thinking about “children’s issues” people restricted their thinking to areas where the child is clearly visible, usually outside the family context – for example, in education^{xxx}. Issues that experts understand to directly affect family functioning and *therefore* child wellbeing – poverty, housing stress, insecure work, etc – are not connected to impacts on children and their development for most Australians^{xxxi}.

Government shouldn’t interfere in parenting / children are only their parent’s responsibility

People have contradictory ways of thinking about government and parenting, which The Frameworks Institute noted tend to fall into three different models. These are as an **intrusive and unwanted supervisor**; as an **incompetent problem solver**; or as a **supportive partner** in the parenting endeavour^{xxxii}.

Whereas the **supervisory** and **incompetent** models block people's receptivity to policy-based solutions, the **support** model facilitates thinking about how public programs and infrastructure can be changed to create better parenting outcomes.

In the Australian context, there is a strong evidence base that the impacts of colonisation and ongoing intergenerational trauma create significant mistrust of authorities and some services for First Nations families^{xxxiii xxxiv}. This suggests that the models of thinking about government are likely to be influenced by these factors and First Nations parents, carers and families may be more likely to view government as an "intrusive and unwanted supervisor", or at best an "incompetent problem solver".

When it comes to the recipients and beneficiaries of support, times of economic stress can foreground the narrative of "lifters and leaners" that has been fostered by numerous political persuasions in people's thinking about government responsibility and policy. Telethon Kids Institute's research found this model emerging in both interviews and "sentiment analysis" of media commentary, with comments such as "Parents should pay for their own life choices – why should the taxpayer subsidise others' decisions?". This relates back to the ideas of othering and personal responsibility/culpability, and creates a reinforcing feedback loop.^{xxxv}

While the public may frequently think individualistically about parenting and the role of government, The Frameworks Institute has found they can also see that meeting the obligations of parenting requires economic resources. Participants engaged with the idea that the high cost of goods and services like housing, health care, and education raises challenges in parenting. From here it is a shorter leap to thinking about parenting as requiring other types of resources.

Parenting can thus be an entry point for productive thinking about how a wider range of social issues and policies impact children. The successful passage of recent changes to Paid Parental Leave is a good example of positive sentiment towards the role of government as a supportive partner to families.

Part 2 – How families feel about their parenting role and efficacy

There is limited information available about the perceptions of parents and carers about their caregiving role, confidence, and effectiveness. Some studies restrict their participants to parents and carers of older children, while others do not provide data disaggregated by age, and few offer representative sampling.

One available source is the Parenting Research Centre's Parenting Today in Victoria survey^{xxxvi}. While limited to parents and carers in Victoria, it remains the most comprehensive parenting survey available in Australia. The survey is representative of the wider population of Victorian families and targets a quota of minimum 40% fathers/male caregivers.

Recognising the limitations of this study, it nevertheless provides a useful starting point for assessing the views of parents and carers. The 2022 survey included the parents and carers of a total of 903 children aged 0-5, or 34.8% of all children whose parents or carers participated. The technical report separates out the data by age group.

The most recent research into parental and societal attitudes to children is the 2023 Valuing Children Initiative Survey. This self-administered online mixed method survey examined the attitudes of 1,008 adults^{xxxvii}, of whom 58% were women, and 67% were the biological parent of a child. Smaller proportions (2.6-4.5%) identified themselves as step-parents, foster carers, or other types of parent/carer. This survey is notable for the high proportion of respondents (19.5%) who worked with children, and those who held a Bachelor degree or higher (33.5% and 33.6% respectively). No data about parent/carer respondents' child age was included in the report.

A third source of data is the Australian Institute of Family Studies' Families in Australia Survey series, which ran between May 2020 and December 2021. Response rates ranged from 7,306 participants in the first survey to 4,436 in the fourth survey. The researchers note that compared to the general population, the survey sample over-represents females, middle-aged, tertiary educated, heterosexual coupled (with/without children). All jurisdictions participated, with Victoria, the ACT and Tasmania over-represented. By geographical area, 57% of respondents resided in a major city, 40% in regional Australia and 3% in remote or very remote Australia.

The reporting that has so far emerged from these surveys has focused on specific topics rather than overall parenting experience, and does not disaggregate responses by child age. These limitations mean that the insights below should be taken only as general themes of potential interest that require more intensive research.

Going back to 2004, the Australian Childhood Foundation undertook research into parental attitudes and understanding of their parenting role as part of the Every Child Is Important campaign, which sought to reduce child abuse and neglect through a broad community education campaign. The researchers undertook phone interviews with 500 parents in Australia. Of these, 305 had a child aged 0-6 living at home, 64% were mothers, and 84% were in a current relationship with a partner. There was an equal distribution of survey across States but not Territories. No information was provided on geographical location, socio-economic status, or First Nations, CALD, or LGBTQIA+ characteristics^{xxxviii}.

In general, the available data on parenting/caring attitudes, perceptions of the parenting/caring role, and parenting/caring behaviour is limited in size, representation, and by numerous measures being self-reported and/or perceptual (ie, likely to reflect the common mental models described above). Looking at population level data for certain child outcomes tells us that while most children in Australia do well, the same cannot be said for all children. There is more to be done to ensure that all children in Australia have the same opportunities to grow and thrive.

Australian Childhood Foundation – The Concerns of Australian Parents (Every Child Is Important)

The most interesting finding of this survey is that three-quarters of parents surveyed said they did not believe that parenting came naturally, a finding at odds with more recent research into mental models

about parenting in Australia. The published paper does not give detail of the interview questions or methodology, making it hard to place these findings in context with other research.

However, a quarter of parents interviewed felt they would be negatively judged by others if they admit to having problems with their parenting. Of the parents interviewed, 22% said they would not ask for help with their parenting for fear of being criticised. This, along with the work on mental models being focused on general social attitudes rather than those of parents and carers specifically, suggests that the idea of parenting coming naturally may be one that does not survive contact with reality, but is sticky enough to cause the shame and fear associated with admitting to needing help.

Parents surveyed identified the early years and adolescence as the two most difficult periods of their parenting journey. A quarter nominated the first year of their child's life as the most challenging, with a further 26% identifying the ages of 2-3 years as most challenging. The primary years (4-6 and 7-10 years) were considered less challenging, at 15%, with 31% finding the middle years of 11-14 the most challenging (noting that only 106 of the 500 parents surveyed had children aged over 15).

The researchers noted: "Within the anonymity of a survey, parents seem able to acknowledge the challenges of parenting, their lack of confidence, their desire to do better and their motivation for information. In contrast, when they actually need support, there are a significant number of parents who are not able to ask for help for fear of being criticised or negatively judged. For these parents, seeking assistance is associated with a great deal of stigma. In this context, **children remain vulnerable to community attitudes which encourage parents to feel like failures when they seek out assurance, resources and support**"^{xxxix} (emphasis added).

Families in Australia Survey – the impact on COVID-19 on families

The Families in Australia Surveys found that while for some, the experience of COVID-19 offered the opportunity to revisit family roles and experiences, for most families caring for children continued to fall disproportionately on mothers and female carers^{xl}.

Mothers made use more often of flexible work arrangements to help care for children. At November–December 2020, 57% of employed partnered mothers and 9% of employed partnered fathers used part-time work to help care for children. During this period it was fairly common for employed couple mothers and fathers to use flexible work (58% of mothers and 38% of fathers) and working at home (52% of mothers and 36% of fathers) to help care for children.

Asked how easy or difficult it was to combine paid work with child care responsibilities, 37% of males compared to 28% of females reported their work–family balance was easy, and 38% of males compared to 46% of females reported it was difficult.

Rates of "active caring" while working (children were likely to be often needing or asking for help or input to what they were doing) varied by the age of youngest child. There was more active caring for children aged 3-5 years, and there was also a higher likelihood of not caring for the youngest children while working because someone else was caring for them (35% for 0–2 year olds). Gender differences were apparent with mothers more often actively caring for children while working (23%) compared to fathers (15%).

More positively, many fathers/male carers surveyed became more engaged with their children^{xli}. Over half (61%) reported spending more time helping with learning and schoolwork. While over half (55%) continued with their regular care routines, 16% found themselves doing more personal care of their children (bathing, dressing, feeding, etc). A third (34%) of fathers/male carers reported spending more time having meaningful conversations.

However, reflecting the gendered nature of care in Australia, while many fathers did more, mothers and female carers, as well as already doing more, also took on a greater amount of *additional* work related to children than fathers in every category except "personal care" and "playing video games".

This research involved a self-administered online mixed method survey of 1,008 adults^{xlii}. Much of the data duplicated a benchmarking survey conducted in 2016, enabling comparison over time.

Of the 2023 respondents, 58% were women, and 67% were the biological parent of a child. Smaller proportions (2.6-4.5%) identified themselves as step-parents, foster carers, or other types of parent/carer. This survey is notable for the high proportion of respondents (19.5%) who worked with children, and those who held a Bachelor degree or higher (33.5% and 33.6% respectively). This is most likely a reflection of the recruitment methods. No data about parent/carer respondents' child age was included in the report.

Several of the mental models described above were clearly visible in the survey results. The **threat of modernity** was very evident, with 48.2% of respondents believing it was either "a little" or "a lot" more challenging to be a child today compared to their own childhoods. This was despite high majorities agreeing that children today had more rights and privileges (67.8% and 67.7%) than in their own childhoods.

Thematic analysis of the qualitative responses found respondents' concerns included "social media" and "too much pressure", especially at school and through access to information, that was causally linked in respondents' minds to rising rates of mental distress and ill health. The researchers noted a strong "innocence narrative" in the qualitative data, including statements about mental ill health having barely existed for children in their own childhoods. Child safety was a prominent focus, with the perception that there were increased hazards and threats with which to contend.

Parenting as a private endeavour was also strongly reflected, with 67% of respondents ranking parents as having primary responsibility for "protecting and promoting the wellbeing of Australian children". Beyond that, even the researchers became vague, with the other options available for this question including "everyone", "the government", and "the wider community". Named roles reflected The Frameworks Institute's research into **children's invisibility in public policy**^{xliii}, with only the visibly child-centric roles of "teachers" and "health professionals" offered as response options.

However, when prompted with specifics of how children could be elevated in public policy, respondents were supportive. A total of 77% agreed with the proposal for a federal Minister for Children and Future Generations "to ensure that their rights and needs are at the forefront of considerations".

Noting that respondents were restricted to the available options, responses to the question "Please rate some of these main challenges faced by parents/carers/ society in raising/ caring for children" also reflected The Frameworks Institute's finding that the public can be prompted to think more broadly about public policy as it relates to parenting and hence children. While issues ranked high in importance reflected the threat of modernity (social media, work-life balance, lack of extended family support), financial pressure ranked highest (91.8%) and housing affordability ranked third (89.7%).

Numerous paradoxes were visible in this research. For example, when asked "how committed is Australian society to protecting and prioritising the needs of children?" a healthy majority of 60.7% said "committed" or "very committed". Yet when asked whether children should be "valued less, more, or just as much now and in the future", an even higher majority of 74% said they should be "much more valued" (42.4%) or a "little more valued" (31.6%). When asked to reflect on how much consideration the Australian government gives to different groups when making policy decisions, only 28.7% felt that children were given enough consideration, a notable fall from 40.8% of respondents in 2016.

Children themselves were positioned as 'the future' and often charged with responsibility for key issues, such as environmental issues. There were also instances in which children were positioned as helpless, or as deserving of innocence or ignorance in order to experience a happy and healthy childhood. Today's children are perceived as less free to play outdoors or access their local community, but at the same time child safety was flagged frequently as a major concern.

Parenting Today in Victoria – understanding perceptions of the parenting/caring experience

This longitudinal survey examines the parenting experience of a large representative sample of Victorian families. In the 2022 survey, a total of 2,602 parents and carers were surveyed. Of these, 57% were women and 43% men. Of the survey cohort's children, 903, or 34.8%, were aged 0-5.

Seven survey items explored the parenting experience. Three statements were used with a 5-point scale of agreement, from 1 ("not at all") to 5 ("extremely"). These statements were: 'Parenting is rewarding'; 'Parenting is demanding'; and 'Parenting is frustrating'.

The majority of participants (90%) agreed parenting was 'very' or 'extremely' rewarding. Some parents agreed that parenting in the past six weeks had been frustrating; 8% saying 'extremely' so, 11% 'very' and close to a third (30%) saying parenting had been 'moderately' frustrating over that time. Furthermore, fifty one percent of respondents agreed that parenting was 'very' or 'extremely' demanding, with 26% of parents saying this was 'moderately' so.

These findings are relatively consistent with the 2019 survey in which 93% of parents found parenting 'very' or 'extremely' rewarding, 9% 'extremely' and 14% 'very' frustrating. However, in 2019, a greater percentage (75%) of parents found parenting 'very' or 'extremely' demanding.

There were child age group differences in the extent to which respondents found parenting to be "demanding" in the past six weeks. Significant differences were found between parents of infants and 13-18 year olds, and parents of 3-5 and 13-18 year olds. In general, a greater proportion of parents of younger children found parenting to be demanding compared to parents of older children. However, parents and carers of infants (0-2) were also significantly more likely to rate parenting as rewarding compared to parents of children aged 6 or older. There were no significant differences by child age group for the statement 'parenting is frustrating'.

Fathers in general found parenting less frustrating or demanding than mothers. There were no gender differences related to how rewarding parents and carers found parenting to be. Parents and carers of children with additional needs were more likely to find parenting "frustrating" and/or "demanding" than parents of children without additional needs.

To measure parenting self-efficacy, the researchers used the 4-item short form of the Me as a Parent scale (MaaPs-SF) (Matthews et al, 2022). The short form has three items on self-efficacy and one item on self-management. Items are scored on a 5-point scale, from 1 ("strongly disagree") to 5 ("strongly agree"). These items included the statement 'I have the skills necessary to be a good parent to my child'.

Parent and carers of younger children (0-5 years) were more likely to score in the positive range for parenting self-efficacy and self-management. Parents and carers of younger children (0-2) were more likely to score themselves highly on the MaaPs tool than those of older children (6 and over). These results were reflected in the 2016 survey, although not in the 2019 one.

Parents and carers of children with complex needs were more likely to score themselves lower on the Maaps tool, but no statistically significant differences were found for differences between socio-economic areas, metro versus regional areas, and parent gender in total MaaP-SF scores (all ages).

The survey also looked at support available and help-seeking behaviours, below.

Parenting Today in Victoria – How parents and carers seek help and engage with support

As with perceptions of parenting and parenting practice, very little data is available on help-seeking behaviour for parenting information and support.

The Parenting Today in Victoria survey investigates help-seeking behaviour among parents and carers, and a research brief^{xxiv} was published in October 2021 based on the data from the 2019 survey. However this research brief did not disaggregate findings by child age.

Almost three-quarters of respondents turned to their family for help and advice in raising their child. The authors note that this finding of families first turning to informal supports is consistent with other Australian research into help-seeking behaviour for mental health concerns or mental distress.

Nine out of ten respondents said that they would ask a professional (eg, GP, maternal and child health nurse, teacher or psychologist) for help if they couldn't find what they needed elsewhere. A quarter of respondents said they did not know about parenting groups or seminars in their area.

The researchers found significant differences between men and women in perceived availability of help: 80% of fathers and 87% of mothers said they knew where to get help from a professional with parenting if needed. Parents who spoke a language other than English were also less likely to say they knew where to find professional help for parenting if they needed it (75% vs 85%) and didn't know about parenting groups that were available to them (37% vs 24%). Parents who reported that their child experienced emotional or behavioural difficulties were also less likely than other parents to agree or strongly agree that they knew where to get professional help if they needed it (75% vs 84%).

When it came to *accessing* support, nearly three-quarters of parents and carers had attended a Maternal and Child Health service first-time parents' group, playgroup or a parent support group.

Parents and carers of children with a medical condition or sleeping problem were more likely to have asked for advice from a GP. Parents and carers of children with medical conditions were also more likely to have sought help from other types of health professionals.

However, parents and carers of children with behavioural or emotional difficulties (such as ADHD, conduct disorder, autism spectrum disorder, depression or anxiety), or who reported their child's behaviour was difficult to manage, were less likely to say they had accessed professional support and advice than other parents.

Close to one third of parents and carers said they had attended a parenting group or seminar. Parents and carers of children with difficult behaviour were no more likely than other parents to have attended a parenting group or seminar – many of which are designed to help children with these difficulties.

Mothers were more likely than fathers to have accessed support from a GP, other medical professional, or a parenting group or seminar (36% of mothers compared to 22% of fathers).

Help-seeking behaviour and links to mental models

The Parenting Research Centre, as well as conducting the Parenting Today in Victoria surveys, has strong links with The Frameworks Institute and has commissioned work from them. This offers a unique understanding of how the help-seeking behaviour of parents and carers is connected to their mental models about children and parenting.

The researchers asked why parents and carers chose not to participate in parenting groups. The most common reason given was 'I don't feel like I need help with parenting or child issues' (42%).

Parents and carers who spoke a language other than English at home were less likely to offer this reason for not participating in parenting groups (29%). Parents and carers who had not attended parenting groups or seminars were also less likely to say they found parenting demanding (73% compared to 80% of parents who had attended parenting groups or seminars).

Parents and carers who had not attended such groups or seminars were:

- more likely to believe that parenting comes naturally
- less likely to think parenting advice would be helpful
- less likely to agree there is a role for government in parenting support.

Parents who believed government had a role to play in parenting support were also more likely to have accessed GPs and other professionals for parenting support.

Part 3 – How can we influence the way children in their early years are perceived and valued in Australia?

To achieve lasting improvements in the wellbeing of children in their first years of life, we need to change both the way people think about children, families, and parenting, and the indirect and direct actions they take that affect children and families.

“Public interest communications” can be defined as the development and implementation of science-based, planned strategic communication campaigns with the goal of achieving significant and sustained positive behavioural change or action on an issue that transcends the particular interests of any single organisation.^{xlv}

Framing theory suggests that to change *behaviour*, it is essential to first understand, then influence *attitudes*^{xlvi}.

Changing both attitudes and behaviours

Raising awareness of why the early years matter is necessary, but it is not enough on its own.^{xlvii} We need to be clear about the actions we want the public — and parents and caregivers specifically — to take.

Any effort to strengthen support for children and families steps into territory that many Australians still see as private. How systems act on behalf of children will shape whether that involvement is seen as an intrusive and unwanted supervisor, an incompetent problem solver, or a supportive partner.^{xlviii} The way we frame communication and policy proposals about the early years will interact directly with the mental models about children, parenting and families set out in this paper.

Knowing is not enough

While awareness is an essential precursor to change, awareness campaigns alone are insufficient to change either attitudes or behaviours. Yet the idea persists that the root of a given problem is that people don’t have the right information, and would change their behaviour if they understood the implications of their action (or inaction). This is frequently referred to as the Information or Knowledge Deficit Model^{xlix | li}.

The Transtheoretical Model of readiness for change^{lii} defines five stages of change and their implications for decision-making, self-efficacy, relapse, and re-commitment. The model is often depicted as a spiral, recognising that individuals may move forwards and backwards through the stages, and previous experiences still constitute useful steps for behaviour change.

The stages are:

- Precontemplation (Not yet acknowledging that there is a problem behaviour that needs to be changed)
- Contemplation (Acknowledging that there is a problem but not yet ready, sure of wanting, or lacking confidence to make a change)
- Preparation/Determination (Getting ready to change, researching options, gathering courage)
- Action/Willpower (Changing behaviour)
- Maintenance (Maintaining the behaviour change).

Large scale public health campaigns are typically focused on the first three stages, with a clear call to action that seeks to achieve the fourth stage. This can target the behaviour directly (e.g., the Cancer Council's Sunsmart campaign's message of Slip! Slop! Slap!) and/or signpost where to find help (e.g., ReachOut's youth mental health campaigns). Few campaigns directly target maintenance and/or backsliding, with the Cancer Council's Never Give Up Giving Up being one exception.

Many awareness campaigns are ineffective, either reaching only those who already care about an issue or failing to change behaviour^{liii}. At worst, they can be actively harmful. In 2006, the United States Centre for Disease Control recommended a national requirement that adolescent girls be vaccinated against human papilloma virus (HPV), a sexually transmitted disease that causes cervical cancer. The recommendation, and the national lobbying campaign that followed, pushed for a state mandate that required the HPV vaccine for school enrolment. This became a political battleground, with some social conservatives arguing the legislation was a gateway to sexual promiscuity. Prior to the controversy, 90 percent of children received the vaccine, but in the years that followed, only 33 percent of girls received it, and only 7 percent of boys^{liv}.

Jasper Fessman^{lv} describes four essential elements of a successful public interest campaign, which are further expanded upon by Christiano & Neimand in a 2017 article for the *Stanford Social Innovation Review*^{lvi}.

These are:

1. Target your audience as narrowly as possible.
2. Create compelling messages with clear calls to action
3. Develop a theory of change
4. Use the right messenger.

The authors note “to inspire and persuade people to adopt a new behavior or a new way of thinking, having the message come from people who have authority and credibility **in your audience's world matters**” (emphasis added). They provide as an example a US climate change campaign^{lvii} that found those with less trust in “official” messengers such as scientists and politicians were more likely to look to religious leaders, coworkers, family, friends, and neighbours for information about climate change.

Australia has already undertaken numerous campaigns designed to improve awareness of early childhood development, from 2004's Every Child is Important campaign by the Australian Childhood Foundation and the Commonwealth Government, to the more recent 2018 Bright Tomorrows Start Today. There have also been numerous jurisdictional campaigns, including NSW's Grow to Learn, Learn to Grow, Tasmania's B4 Early Years Coalition, or Queensland's Early Childhood Development Story.

For a further national campaign to add value, it should have a clear purpose, be well targeted, and have defined calls to action. Campaign messaging should draw on the evidence base and techniques of strategic framing, such as explanatory metaphors, to ensure that it aligns with Australian social values, activates the more helpful mental models about children, parenting and families, and does not

contribute to unhelpful models such as “othering” or reinforcing preconceived ideas of what “good” families or parenting look like. Framing strategies such as explanatory metaphors can help messages to land successfully.

“Awareness raising” is a small part of a big picture

“Awareness raising” must sit within a framework of coherent activity that includes strategies that remove barriers, such as change in social environments, communities, social policy and legislation, rather than solely relying on individuals to change their behaviour.^{lviii}

Menzies School of Health Research observed in a 2013 literature review of social marketing for child safety and wellbeing that “campaigns which have led to heightened awareness, attitudinal change, and increased help-seeking behaviour, are those in which there are clear links to existing programs and continuous supports to facilitate behaviour change about a specific issue (Gibbons and Patterson 2000; Prinz, Sanders et al. 2009).”^{lix}

Raising public awareness needs to be matched by increases in responses from and availability of services. These must be established **before** an awareness campaign is run that might encourage disclosure or prompt people to seek help, otherwise campaigns run the risk of being counter-productive to their aims (Saunders and Goddard 2002) (Andrews 1996; Horsfall, Bromfield et al. 2010; Northern Territory Government 2010).^{lx}

For example, the Cancer Council’s memorable Slip! Slop! Slap! campaign in the 1980s was backed up by a comprehensive, evidence-based SunSmart program in 1988. SunSmart initiatives include mass-media public education campaigns, a schools and early childhood membership program, workplace education, and health professional training. The SunSmart program successfully achieved a considerable cultural shift towards sun protection norms in pre- and primary school-age children, as well as schools and workplaces adopting a sun protection policy. Supportive policy changes included the Goods and Services Tax (GST) being removed from sunscreen in 2001, tax deductions on sun-protective items for outdoor workers being introduced in 2002, and a nationwide ban on commercial solariums in 2015.^{lxi}

Creating behaviour change that lasts

Lessons can be learned to support this scaffolding and alignment from similar work that has gone before.

For example, there has been detailed analysis and evaluation of the US child development campaign / *Am Your Child*, spearheaded in 1997 by filmmaker Rob Reiner. This analysis has shaped key concepts around how to communicate the science of brain development without inadvertently triggering unhelpful mental models, as well as identifying the limitations of a campaign which, while hugely successful in some respects, was not backed up in important areas by policy and investment.

Parental beliefs and investments in activities supportive of child development

Recent research by the TMW Center for Early Learning + Public Health at the University of Chicago found, consistent with other studies, that parental understanding of child development tends to be higher in families with greater socio-economic status^{lxii}. However, centre co-Director Professor Dana Suskind has undertaken further examination of this trend, investigating whether and how parental beliefs in their effect on their child’s development can be altered, and if so, whether this correlates to improved child development outcomes.

The short answer, based on two large scale connected projects^{lxiii}, is yes. In the first, underinsured families, or families with no health insurance, were recruited from paediatric waiting rooms. On each of their “well child” scheduled check-ups, carers were invited to watch a video about child development, with specific tips and activity for promoting healthy development (eg, serve and return interactions). Control groups watched a video about child safety or no video at all.

In the second project, families from a range of socio-economic circumstances were recruited for monthly two hour-long home visits for six months. The visits involved watching a video on a development topic and doing an activity demonstrating how to apply the topic with their child, as well as a discussion of feedback and goals. This experiment's control group received information and home visits on child nutrition.

Within six months of starting the experiments, the beliefs of the treatment groups had shifted significantly from those of the control groups, although both were made up of parents of similar demographics.

Importantly however, the less intensive intervention found that while parents' *beliefs* changed, this did not translate to lasting changes in the ways they interacted with their children. In the home visit program, however, the research team saw the changed beliefs translate into active and lasting investments of time and energy into the kinds of activity known to support strong child development.

"The first program changes parental beliefs but fails to lastingly increase parental investments and child outcomes. By contrast, in the more intensive program, all pre-specified endpoints are improved: the augmented beliefs are associated with enriched parent-child interactions and higher vocabulary, math, and social-emotional skills for the children." Suskind et al, 2022.

The research team sought to neutralise the effects of observation, perceived accountability or expectation, etc with the control group receiving information and visits related to nutrition. Therefore, no conclusions were drawn about why the more intensive intervention had such impact compared to the lower intensity program.

However, qualitative studies of Sustained Nurse Home Visiting programs such as University of Western Sydney's Maternal and Early Childhood Sustained Home-visiting program (MECSH) suggest that the relationships formed with home visiting nurses are a significant factor in supporting women experiencing adversity in the first two years of their child's life^{lxiv}. This adds weight to the argument for any kind of awareness-raising or information activity to be sited in a framework of coherent activity incorporating a range of programmatic supports and policy settings.

Challenge ideas of parents, caregivers, and what "good families" look like

The tendency to "other" parents, caregivers, and families who do not fit the prevailing model can be countered with deliberate communications, designed with and by representatives of different priority groups.

In 2011, SNAICC produced *Growing Up Our Way*, an examination of traditional and contemporary child rearing practices among a range of Aboriginal and Torres Strait Islander families. Researchers including Nicole Muir and Yvonne Bohr (2019)^{lxv} and Shaun Lohoar, Nick Butera and Edita Kennedy (2014)^{lxvi} and many others have examined the strengths of Aboriginal and Torres Strait Islander parenting practices and the ways in which these differ from Western approaches to parenting.

A research report commissioned by the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability into the experiences of parents with disability with the child protection system found "an implicit, and at times explicit, assumption across child protection systems that parents with intellectual disabilities who come to the attention of child protection authorities will not be able to look after their children safely."^{lxvii}

Providing positive images of men and fathers in service delivery has been highlighted as a key engagement strategy and as pivotal in helping fathers, particularly new ones, develop self-efficacy (Daniel and Taylor 2005). Reinforcing the roles of fathers, even if they are not living in the same households as their children, can also provide a protective function for children through enhanced attachment and additional supports in child development (Daniel and Taylor 2005).^{lxviii}

Providing similarly positive depictions of a wider range of parents and caregivers, in different family configurations and demonstrating a range of cultural and parenting practices, should be a purposeful strategy in ARACY's communications and advocacy.

Fostering individual resilience and protective factors vs eliminating chronic systemic stressors

One recognised failing of the *I Am Your Child* campaign was that it did not address the impacts of chronic family stressors on child development^{lxix}, nor call for any systemic policy approach for addressing these.

To create lasting change, it is necessary to move beyond the Knowledge Deficit Model and examine the systemic forces that may be holding current conditions in place. The work of the Alberta Family Wellness Initiative, the Harvard Centre for the Developing Child, and other research institutions has found undeniable links between toxic stress and disruption to healthy brain development in children. However, toxic stressors, or Adverse Childhood Experiences, are not simply one-off traumatic events or severe abuse or neglect. Chronic stress in families, such as that caused by poverty, joblessness, poor health or discrimination, also contributes to toxic stress and poorer outcomes for children. These chronic stressors can fly under the radar and their impact go unrealised.

While an important part of the solution to the impacts of toxic stress is to support children and their families in the development of resilience-boosting behaviours, the Alberta Family Wellness Initiative is explicit that programmatic and systemic solutions are also required^{lxx}.

The second kind of intervention involves prevention: targeting the source of toxic stress so that it doesn't continue. This approach involves helping the caregivers. An intervention for a parent ... is also an intervention for the child. Alberta Family Wellness Initiative

Failing to address the chronic and acute stressors in a family's life means the interference of these stressors will inhibit the ability of both children and caregivers to access the capacity for behaviour change or the desired outcomes.

"(Parents living in poverty) may not have the time, energy or means to parent the way they'd like to." Anita Khanna, national director of public policy and government relations, United Way Centraide Canada

"Children living in poverty are more likely to be at risk for adverse early childhood development, but their parents often have the least resources and capacity to compensate for the risks (double jeopardy)." Professor Frank Oberklaid (2007)^{lxxi}

This presents a balancing act for framing messages about stress and resilience. It is important to avoid activating the idea that child disadvantage is too large and intractable an issue and nothing can be done. However, it is also easy when discussing resilience and protective factors to inadvertently activate the mental model of individual responsibility, with the effect of "othering" affected parents and families who are facing systemic disadvantage that no amount of personal fortitude or parental love can overcome.

From a policy perspective, it is also essential to keep in mind the risk of activating these mental models among policy makers themselves. While fostering individual resilience and protective factors will clearly be attractive to policy makers in comparison to major systemic reform, it is only a partial amelioration that treats the symptoms, not the cause.

There is a considerable body of evidence that effective policies to holistically address the social determinants of wellbeing such as poverty, joblessness, insecure housing, etc, successfully create better outcomes for children and their families.

One recent example is the US study *Baby's First Years*^{lxxii}, a Randomised Controlled Trial (RCT) that recruited over 1,000 mothers shortly after birth. The trial found after one year of predictable, monthly unconditional cash support given to low-income families, 1-year-old children exhibited increased brain activity patterns associated with the development of thinking and learning. A qualitative follow-up study is now being undertaken to understand how the cash gifts were used and the impact on families.

Individual resilience and supporting families to create positive childhood experiences and protective factors is one part of the answer, but it must be backed up with systemic intervention to eradicate the chronic stressors of poverty, joblessness, discrimination, and other social factors if child wellbeing outcomes are to be improved for all.

Part 4 – Opportunities

Early childhood is now on the policy and public radar. The Commonwealth Government’s pre-election commitments to developing a national Early Years Strategy and reforming the Early Education and Care system provide a sound base on which to continue promoting the understanding, valuing, and prioritisation of policy settings and activity that supports strong early development for all children.

Evolution of framing advice (from science to health)

Based on their 2019 research findings about better awareness of the early years as a critical time when a child’s development can be positively influenced, The Frameworks Institute now recommend a slightly different approach to framing messaging about early childhood development. This is designed to activate key values of fairness and equity, as well as longer term societal benefit.

In *Moving early childhood up the agenda: A core story of early childhood development in Australia*^{lxxiii} (L’Hôte, E., Hawkins, N., Kendall-Taylor, N., & Volmert, A. 2020), advice is given to move the “scientific explanation” of child development as supporting *learning* into a broader “*health*” frame. The purpose of adding this “health” frame is to expand understanding of child development past the initial connection of “learning”. As the paper puts it:

“Connecting development and learning to health increases people’s sense of the importance of early childhood and allows them to see it as a social issue. Because health is perceived as a broader goal than learning, it expands the number and types of solutions that people value and support.” The Frameworks Institute, 2021

The papers’ authors note the danger of inadvertently cueing people to think about health in purely medical terms, which “restricts the power” of the health frame to elevate early childhood development. They discuss the importance of avoiding a focus on preventing ill health, and promoting the sense that health is holistic and more than physical.

To further the logic of this thinking, ARACY recommends moving the next step, into a wellbeing frame. The Australian Government has done a great deal since 2020 to promote the public understanding of “wellbeing” as a holistic construct that incorporates health as one important factor but contains much more.

The Measuring What Matters framework is a clear example of how multiple domains combine and interact to promote individual, community and societal wellbeing. ARACY believes the Australian public is ready to understand “wellbeing” as a standalone term when explicitly explained.

While making early childhood development a “health” issue may move it up some people’s list of priorities, it also risks narrowing their understanding of wellbeing, focusing on individual responsibility for merely physical health, and reducing the scope for understanding the role of government in connecting and aligning strategy across multiple portfolios.

An alternative option that retains a health focus is the term “social determinants of health”, which captures the multifaceted domains of wellbeing and their interdependency, and frames this as necessary enablers for “health” as the overall goal. While this terminology does little to address the tendency to discount those factors which do not fit into a pre-conceived “health” mental framework, it is consistent with usage by major global organisations such as the World Health Organization^{lxxiv}.

An established and evidence-based framework for conceptualising children's wellbeing, The Nest^{lxxv}, is in use by a number of jurisdictional and local governments across Australia. It provides a useful scaffolding for understanding how the different elements of wellbeing, including health and learning, come together for children in the context of their individual selves, their families, their communities, and wider society.

Broadening public ideas of children, families, and parenting

Use framing strategies such as explanatory metaphors to:

- Reinforce the established child development narrative, and expand this to wellbeing and lifetime flourishing.
- Articulate that **all** children deserve to grow up strong - activate the value of fairness.
- Define the issue – that not all children in Australia have the same opportunities to thrive.
- Emphasise that supporting children to grow up well benefits communities and society.
- Show different types of families parenting successfully using defined strategies (eg, talk, laugh, play, sing; serve and return interactions) in ways consistent with different cultural and parenting practices.

Appendix 1: Prior campaigns covering early childhood development

Every Child is Important, 2004

- By the Australian Childhood Foundation with the support of the Commonwealth Government (received more than \$1.2 million in funding from the Australian Government's National Agenda for Early Childhood)
- Community education initiative with a focus on reducing childhood abuse and neglect
- Provision of parenting seminars
- Also included a media campaign, the distribution of information booklets and newsletters and three tracking studies to learn of any changes in the community's attitudes to the issue of child abuse
- Aimed to prevent child abuse through eliciting a social commitment to children by parents:
 - works to affirm the value and significance of children to adults, families, and society as a whole
 - encourages all adults to think and view children as a source of hope
 - understand the developmental vulnerabilities of children
 - respect the meaning children give to their experiences
 - engage positively with the principles of children's rights
 - appreciate more fully the capacities and contribution of children to the cultural and emotional life of families and communities.
 - The campaign has been funded by the Australian Government Department of Family and Community Services to be implemented nationally until the end of 2005.
- Included TV, radio and print advertising featuring "Have I told you lately that I love you" by Van Morrison and Rod Stewart
- Integrated the following "multimodal strategies":
 - Interactive website for parents and children's services providers (www.kidscount.com.au)
 - 40 parenting seminars around Australia with well known educator, Michael Grose
 - the distribution of half a million parenting booklets
 - the production and distribution of a free CDROM with parenting information in eight languages
 - the distribution of a Kidscount Parenting Newsletter
 - community attitude tracking research about children, parenting and child protection
- No evaluation data available.

Bright Tomorrows Start Today, 2018

- Funded by the Minderoo Foundation, created by Telethon Kids Institute in partnership with Vroom (funded by the Bezos Foundation, Raising Children Network, and Better Beginnings (an initiative of the State Library of Western Australia))
- Established "to give parents, carers and others who care about or for children some of the tools they need to give all children the best start to life".

- Aims to build community understanding about the amazing potential of a baby's developing brain and to provide expert advice and evidence-based tools to support children's health, development and learning
- "Challenges community thinking about how babies' brains develop" using the Core Story of childhood development created by The Frameworks Institute
- Incorporates the Bright Tomorrows parenting app which "gives families tailor-made tips (called moments) which will enhance their children's development of key life skills during everyday activities"
- No evaluation data available.

Grow to Learn, Learn to Grow, NSW

- Campaign by the NSW Department of Education
- Designed to:
 - help families understand the benefits of early childhood education and care services
 - help families know how to recognise quality in early childhood education and care services
 - encourage the use of a finder tool developed to address shortfalls in existing early childhood education and care finder sites
 - promote the newly introduced NSW family-friendly quality ratings graphic
- The finder and website provide streamlined access to information that supports families during the first 2000 days of a child's life (from pregnancy to age 5)
- No evaluation data available.

B4 Early Years Coalition, TAS

- Run by the Tasmanian Department of Education
- A coalition made up of a broad membership base of "over 250 [Leaders](#), [Members](#), [Supporters](#) and [Friends](#)."
- Has three goals:
 - Everyone values the early years and is aware of, and understands the importance and lifelong benefits of strong healthy development during this period.
 - Everyone supports the early years and has the skills, knowledge, resources and a role to support children, their families and communities; and
 - Everyone works together for the early years to ensure families, services, business and communities have the knowledge, skills and confidence to partner and ensure all children get the best possible start in life.
- Leaders raise awareness of the importance of the early years, especially the First 1000 Days, and undertake an annual Action Plan against the B4 goals and objectives.
- On Monday 15 January 2024, B4 launched a state-wide media campaign "Their first 1000 days last a lifetime. Play. Love. Learn. TOGETHER"
- No further information on the campaign is available as at 17 Jan beyond this article on the B4 website:
<https://b4.education.tas.gov.au/b4-early-years-coalition-needs-your-help/>
- No evaluation data available for the campaign or the coalition.

Early Childhood Development Story, QLD

- Hosted on the QLD Government's Department of Education website
- Part of information provided about general early years development, including brain development, and what parents, carers and families can do to support healthy child development
- Based on Tasmania's B4 Coalition resources
- Unclear what, if any, external promotion beyond the website and a YouTube animation. YouTube video has approximately 5,800 views over 3 years
- No evaluation data available.

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