What makes a good childhood?
Berry Street was formed on the lands of the Wurundjeri people of the Kulin Nation. We pay our respects to their Elders, past and present, and to all the traditional custodians of land throughout Victoria.

Written and prepared for Berry Street by Julie Noonan


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EXECUTIVE SUMMARY

The concept of a ‘good’ childhood means many things to many people. Making a definitive assessment of a good childhood is difficult, but is a task that Berry Street feels is important to undertake for the sake of those children whose childhoods are blighted by violence, poverty, neglect, educational or any other disadvantage.

**Berry Street knows a good childhood is fundamental to a child’s sense of wellbeing. A good childhood is characterised by stable, responsive, caring relationships in families and in the community. Children thrive in nurturing environments that encourage them to explore and engage safely with the world around them, and support them to fulfil their potential.**

The aim of this position paper is to provide a summary of current thinking and research surrounding the concept of childhood wellbeing and outline an understanding of what is meant by a ‘good childhood’ at Berry Street.

The literature review undertaken for this project seeks to bring together information on current and recent research findings and practices, frameworks, key issues and approaches to measurement. It is not intended to be a comprehensive analysis of the developmental needs of children, nor of research studies and their findings, but seeks to provide an overview of current concepts of childhood wellbeing and today’s key contributing factors.

**The History of Childhood**

Over the past 500 years, our attitudes towards children and the way in which we interact, engage and care for them has changed dramatically. The concept of childhood – how we define it and the experiences and activities of children within it – is an ever-shifting one that has presented us with many opportunities and challenges across the centuries.

In 1989, the UN Convention on the Rights of the Child became the first international human rights treaty to develop a universal and legally binding set of standards concerning children.

**21st Century Childhood**

The pace of change in the 21st century has been rapid. Whilst this century is marked by growing economic prosperity in Australia and other Western societies, research shows that social inequalities are on the rise, and the health and wellbeing of our children is either static or declining.

Some of the key issues having an impact on childhood wellbeing today include:

- Greater challenges in balancing work and family responsibilities
- Weakening parental confidence around parenting
- Increasing levels of child abuse and family violence
- Dramatic increases in behaviour disorders, psychological problems and disease
- Security and safety concerns having an impact on our children’s social interactions
- Inequity of access to education
- Marked alterations in the nature and amount of work and opportunities for the
employment of young people
- Pressures on affordable housing, particularly public housing
- Insufficient resilience and coping strategies amongst children and young people
- The impact of technology and the media.

The Importance of the Early Years

The evidence for the importance of a child’s early experiences is overwhelming. A good childhood really is the foundation for a healthy adult life and society.

The intense activity of the developing brain architecture that begins before birth provides the foundation for all future learning, behavior and health. Although individuals continue to develop beyond their childhoods, the environmental conditions to which children are exposed in the early years of development can have consequences for the rest of their lives.

However, research findings tell us that there is not a ‘point of no return’ beyond which intervention for children and young people is useless. There is much we can do to prevent or reverse risk factors for children and young people.

Defining Childhood Wellbeing

Childhood wellbeing – how we define it and what its key factors are – is a growing field of research around the world.

Childhood wellbeing is generally understood to describe the quality of children’s lives. It is an overarching and multi-dimensional concept that encompasses both subjective indicators (i.e. perceptions of their quality of life and overall life satisfaction) and objective indicators (i.e. household income and health status) that focus on the immediate lives of children, but also consider the longer-term outcomes.

Wellbeing from a Child’s Perspective

Increasingly, researchers have recognised how important it is to seek out, validate and incorporate the views of children themselves about what they believe is important for their personal wellbeing, as well as for the wellbeing of all children.

International research indicates that family and family connectedness and/or conflict are at the very centre of a child’s sense of wellbeing. Other factors identified by children as being important to their wellbeing include:
- Home as a place of safety and security
- Being valued and respected for who they are
- Being involved in decisions made about their lives
- Ability to cope with adversity
- Being bullied
- ‘Safe spaces’ in the community that allowed them to connect with people
- Mental and emotional aspects of health
- Having enough money to live amongst their peers without shame.
Measuring Childhood Wellbeing
In recent years, there has been a shift away from measuring childhood wellbeing using only objective measures to a more multi-faceted approach where children and young people are engaged in identifying the factors (both objective and subjective) that define wellbeing for them. This approach has highlighted some important differences in how children and adults view and define childhood wellbeing.

The effectiveness of services and programs being provided to children and young people are enhanced when we actively seek out, listen to, and incorporate the perspectives of children and young people on their own lives.

**Children and adults have different ideas about what makes a ‘good childhood’.**

What Makes a Good Childhood?
We outline thirteen indicators or domains that we consider contribute to a good childhood.

These domains have been organised into three broad outcomes for children, namely to: Thrive, Achieve and Belong.

**Berry Street: A Vision for all Children**
Berry Street’s vision is for all children to have a good childhood. We recognise the importance to society generally of focusing on childhood whilst also acknowledging Berry Street’s particular interest in protecting and supporting children who have had adverse childhood experiences, and their families. We work collaboratively to build and share knowledge, advocate for change and encourage public discussion around the key issues affecting childhood.

**Childhood: A Shared Responsibility**
The health and wellbeing of all children and young people is a core goal for any society. Parents/carers, service providers, governments and communities all have a role to play. We also need to engage children and young people in discussion and decision-making about their own lives, and encourage broad community conversations about how we can best meet the changing needs of children, young people and families today and into the future.

**We need to engage children and young people in discussion and decision-making about their own lives.**
INTRODUCTION

One thing we all have in common is the experience of having once been a child. The period of childhood, when we reflect back, is often remembered as a fleeting time. Yet researchers and early childhood practitioners tell us that this ‘fleeting’ time is one of critical development for a child, and its importance must be understood.

Our memories and experiences of our own childhood often help to shape the way we think of childhood, and how we, in turn, may go on to parent and engage with children. Our collective ideas and experiences of children and childhood also inform how we as a community treat and engage with children more broadly.

Childhood may be ‘fleeting’ but it is a time of critical development for a child.

Being a child in the 21st century comes with many challenges and threats – both real and imagined – as well as enormous opportunity and choice. We live in an age of rapidly advancing technology that is not only changing the way we learn, work and connect, but is also altering our traditional view of childhood.

Much of the research and social commentary around parenting and childhood wellbeing seems to want to focus our attention on what is negative in children’s lives and what we as parents/carers and community are doing wrong. As a result, we know much more about the harmful impacts of negative parenting than we do about the positive benefits of good parenting.

There is a pressing need to encourage parents/carers, service providers, governments and communities to have robust and open discussions about the quality of childhood today; what we as individuals and communities can do to continually improve it; and how we can best support those who have not experienced a good childhood.
CHILDHOOD: A DEFINITION

Child: The UN Convention on the Rights of the Child defines a child as all those under the age of 18 years, unless under the law applicable to the child, majority is attained earlier (United Nations, 1989).

Childhood: Has been described as the ‘State of ‘being’ a child: the ‘time of being’ a child (Morrow, 2011) and consists of a number of distinct developmental periods, ranging from early infancy to late adolescence (Bromfield & De Gregorio, 2012).

The UN Convention, the first international human rights treaty to bring together the universal set of standards concerning children, and the first to present child rights as a legally binding imperative, defines childhood as:

- A separate space from adulthood, and recognises that what is appropriate for an adult may not be suitable for a child; and
- Recognises that children are the holders of their own rights and are therefore not passive recipients of charity, but empowered actors in their own development.

Today, childhood is universally acknowledged as a precious and vital stage within the lifespan of a human – an important period of physical growth, and mental and emotional learning and development.

Childhood is a time in which children should live free from fear, violence and abuse, and be cared for and nurtured in a way that helps them to realise their full life’s potential.
CHILDHOOD: A HISTORY

The experiences of childhood differ according to geography and time.

Over a span of 500 years, the experiences of, and attitudes to, children have changed significantly. The practice of identifying a distinct developmental period of a human’s life as ‘childhood’ is relatively recent.

In times past, children existed alongside adults and, once they were past infancy, were expected to work, firstly with their families, and then often as waged or unwaged labourers, in order that they and their families could survive (Aries, 1960, 1979; Cunningham, 2006).

The French social historian, Phillipe Aries, believed that childhood was, “socially constructed – that it had different meanings, and children had different roles, across different historical periods and in different cultures” (Aries, 1960).

The changing nature of ‘childhood’ over the centuries highlights that it is not a constant, but an ever-shifting concept.

‘Childhood’ across the centuries

15th century: Phillipe Aries made the claim that in medieval society the idea of childhood did not exist (Aries, 1960). He believed that children and adults existed alongside each other – that they worked and lived together (and were educated, in the case of boys and men) with no distinction between adult and child.
16th century: Across much of Europe and America, with the growing movement of Calvinism and the Protestant reformation, it was argued that children were, “doomed to sin and evil unless controlled by their parents” (Thane, 1981). This concept was new because it introduced the notion that children were psychologically and morally different from adults. It prescribed strict adult control of children and resulted in more formal, distant relations between parents and children (Thane, 1981).

17th century: Philippe Aries argues that childhood was ‘discovered’ as a distinct and special phase of life in the seventeenth century. Some of the key factors that he cited for contributing to this phase were:

A steady decrease in child mortality. When it became more likely that children would survive childhood, parents began treating them with more interest and affection;

• The rise in affection and attention paid to children produced a kind of ‘culture’ of childhood – a newfound interest in children;

• Separation of educational institutions. A sharp divide was introduced between adult and child worlds and promoted the idea that children were subordinate beings in need of supervision and discipline by the adults around them (Aries, 1960).

Children were seen as innocent and ignorant. The English philosopher, John Locke, believed that children’s minds were a ‘blank slate’ and that it was the role of the parents to fill it by ‘experience or education’ (Locke, 1690).

18th century: The 18th century saw a further shift away from strict parental control towards a more affectionate and nurturing relationship between adults and the child. Further importance was placed on “nurturing and educating the child in order to encourage a rational and humane adult” (Thane, 1981). During this period, education became more widespread and institutionalised.

Aries argued that this period also signified, “a movement away from a crowded, public social life that placed more value on the collective than it did on the individual” (Aries, 1960). There was an ‘inward movement’ by families to create a more private family environment, with the immediate family at the centre and society at the edges.

19th century: The child was becoming the centre of the family’s attention. The focus on family and the individual child continued with an emphasis on education and control. Pat Thane, in her ‘Childhood in History’ paper (Thane, 1981), highlights the reassertion of parental authority within the family and a revival of more formal parent-child relationships.

During the Industrial age, very young children were exploited for labour, which stood in stark contrast to the new ‘idealisation of childhood’ becoming popular amongst the middle classes. This contradiction became the basis for the widespread campaigns to limit and eventually abolish child labour, which ran throughout the century (Anderson, 1980; Clarke, 2004).
20th century: The role that policy makers, community groups and welfare institutions played in the care of a child continued to grow. By the 1950s, there was a growing view that the care and nurture of a child was not one that came instinctively to parents, but was a skilled role that required education and training. The result of this thinking was an increase in supports for parents, parenting ‘education’ and child-focused practitioners who had specialised training (Clarke, 2004).

Pat Thane, Childhood Historian, believes that the new focus on the need to raise children to be mentally and physically fit adults led to the gradual withdrawal of orphaned and other children from large institutions into smaller ‘scattered home’ institutions and then, in the 1920s/1930s, to a preference for foster care over any form of institutional care (Heywood, 1998).

“Children were increasingly seen as the responsibility of the State, which intervened in their education, their health, their diet and their upbringing in ways designed to improve the national wellbeing by developing its future citizens. Abuse and neglect, which had existed for centuries, were first described as such in the medical literature in the 1960s” (Clarke, 2004).

In 1989, the first legally binding instrument to protect the rights of the child was developed – the UN Convention on the Rights of the Child. During this century, in many Western countries, childhood became an established and recognised period within a child’s life (United Nations, 1989).

21st century: In industrialised Western societies, children’s daily lives focus on structured education and formal learning. By the beginning of the 21st century, researchers and others were highlighting certain changes to society as being ‘toxic’ for childhood (Garbarino, 1995; Keating & Hertzmann, 1999; Stanley et al., 2005). There is a growing perception and increasing evidence of substantial threats to the wellbeing of today’s children and young people (Hetzel, 2015).

Virginia Morrow, from the University of London, argues that: “How we think about and understand children and childhood matters, because our collective views, theories and ideas ultimately affect how societies treat and engage with children in daily life and practice” (Morrow, 2011).

The changing nature of ‘childhood’ over the centuries – how we define it, and the experiences and activities of children within it – highlights that it is not a constant but an ever-shifting concept.
CHILDHOOD: IN THE 21ST CENTURY

In the 21st century, childhood conditions are changing rapidly, affecting the health, wellbeing and development of many Aboriginal and non-Aboriginal children (BSCI, 2016). Despite children being raised in a time that is firmly focused on the needs and care of children – with greater awareness and knowledge than ever before on the factors that have an impact on childhood – evidence suggests that Australian children and young people growing up in the 21st century are not faring as well as they could be.

Whilst the 21st century has been marked by growing economic prosperity in Australia and other Western societies, research shows that social inequalities are on the rise, and the health and wellbeing of our children, is either static or declining. This has been called “modernity’s paradox” (Keating and Hertzman, 1999).

Comparative indicators across OECD countries show that whilst we are doing well in some areas, others are of great concern (ARACY, 2013).

Despite economic prosperity, Australian children in the 21st century are not faring as well as they could be.

In his discussion paper: ‘The changing conditions of childhood’, David Green paints the picture of a society that is grappling with the emergence of increasingly complex health and social issues that are having a profound impact on the wellbeing of children growing up in the 21st century. He notes that changes to childhood are happening “so fast that we can barely identify them and their effects, before the children involved have grown into adolescence and adulthood”, and that an increasing number of children and their families are experiencing problems not just in, “one domain of their lives but in a number of domains simultaneously” (Green, 2013).

Young people in out-of-home care, for example, are considerably more likely than non-marginalised young people to go to school or bed hungry, move house or school regularly, miss school frequently, experience high levels of health complaints and report frequent bullying. They are also much more likely than non-marginalised young people to rate their quality of life as low (Redmond, 2016).

Some of the key contributing factors researchers, social commentators and parents have identified as affecting child wellbeing today include:

**Family**

- Less parental attachment in infancy
- Changing families – fewer children, more conflict and stress
- Reduced social interaction with extended family
- Weakening parental confidence about parenting
- Ways of communication are changing and parents are feeling out of touch
- Greater challenges in balancing work and family responsibilities (Pocock, 2003)
- Inconsistency in child care and the impact of long day care not yet known
- Overwhelming amount of information focused on parents and their parenting style (Noonan, 2016)
• Increasing levels of child abuse and family violence
• Increase in understanding, support and resources for families supporting children with special needs (Noonan, 2016).

Parents are less confident in their ability to parent, although there is an overwhelming amount of information on the topic.

Health and wellbeing
• Dramatic increases in behaviour disorders, including attention deficit disorders and hyperactivity
• Increase in psychological problems, such as emotional problems, learning disorders, depression and anxiety and/or addictions to alcohol, drugs and gambling (Productivity Commission, 1999)
• Poor diet – rise of pre-packaged and processed foods
• Complex health diseases on the rise including obesity, asthma, diabetes and eating disorders
• Lack of exercise – too much time spent indoors on sedentary activities
• ‘Free play’ has become too structured, which is impacting on children’s creativity (Noonan, 2016)
• Insufficient sleep for children and young people
• Children and young people who are more vulnerable to injury, abuse, neglect or trauma, including those who have special needs or a disability, those who are disadvantaged by poverty, poor parental health and education or social isolation, and those who have already experienced trauma and dislocation from kin and country (such as some Aboriginal, refugee and homeless children and young people), are among those most likely to experience the poorest health and wellbeing (The Council for the Care of Children, 2015).

Safety
• Rising numbers of children and young people suffering from abuse, neglect and family violence
• Security and safety concerns affect our children’s interactions with neighbours and broader community (Noonan, 2016)
• Fear for our children’s safety is having an impact on children’s ability to build resilience (Noonan, 2016)
• Privacy and protection of personal information of increasing concern (Noonan, 2016).

Rising numbers of children and young people suffer from abuse, neglect and family violence.
**Education/employment**
- Low levels of engagement at school. Young people in marginalised groups were generally more likely than non-marginalised young people to miss school frequently (Redmond, 2016)
- Link between missing school and bullying (Redmond, 2016)
- Schooling accessibility becoming unequal
- Declining educational achievement
- High levels of expectation being placed on children to succeed (Noonan, 2016)
- School pressure is associated with health complaints (Redmond, 2016)
- Marked alterations in the nature and amount of available work and opportunities for the employment of young people, with globalisation and technological advances placing greater demands on education and skills development (ABS, 2009).

**Material wellbeing**
- The proportion of children in poverty in Australia, while close to the average for OECD countries, is high in comparison with the best performing nations and has not decreased in recent years (ACOSS, 2014)
- Increasing inequality and locational disadvantage are now defining the environments of many children and young people
- Significant economic hardship and joblessness for many households (Gregory, 1999)
- Hunger impacts on opportunities and is associated with lower school engagement. Nearly one young person in every classroom often go to school or bed hungry (Redmond, 2016)
- Pressures on affordable housing, particularly public housing
- Link between poverty and wellbeing. The Childhood Wellbeing study conducted by the University of Loughborough (Stratham, 2010) concluded that growing up in impoverished households directly impacted on the wellbeing of children and young people. Children who were poor were more likely than those who were not poor to have a more difficult home life, have negative attitudes towards school, to feel isolated and anxious and to engage in antisocial and risky behaviour.

The proportion of children in poverty in Australia is high in comparison with the best performing nations.

**Positive sense of self**
- A lowered level of emotional security
- Children have less first-hand experience of the world, which is now increasingly experienced through an electronic screen
- Childhood is compressed but adulthood is deferred (Green, 2013)
- No time for children to just ‘be’ (Noonan, 2016)
- Insufficient resilience and coping strategies amongst children and young people (Coulson, 2017).
Participation
- Technology and the media are changing the experience of childhood (direct marketing to children, the sexualisation of children, etc.)
- Issues relating to social media (cyber bullying, peer pressure, body image) affect children’s lives (Noonan, 2016)
- Children are accessing technology at younger and younger ages
- Rapid technological change bringing new ways of learning, communicating and interacting across communities (Robinson, 2009)
- Rising cost of child-care and after-school activities (Noonan, 2016)
- Increase in children’s structured, scheduled activities (Noonan, 2016)
- Children have more opportunities to engage with local and global communities (Noonan, 2016).

Technology and the media are changing the experience of childhood.

Environment
- Challenges for rural and remote communities and the dramatic impact of climate and water issues (Hetzel, 2015)
- Children’s understanding of the issues that have an impact on the environment is greater than ever before (Noonan, 2016).

Social/community
- Inappropriate role models
- Low levels of social support
- Experiences of bullying on the rise.

A parent’s perspective
Research conducted with parents in Australia highlighted several key themes they felt were affecting childhood in the 21st century:
- Technology and social media. Many parents attribute the issues they face to be driven by children’s increased access to technology and their inability to adapt and keep up. This often factored as a great source of family conflict (Redmond, 2016; Noonan, 2016; Quantum, 2016).
- Over-parenting: Children today are assumed to be too sheltered and ‘over parented’. In contrast to the past, children have few responsibilities and very limited opportunities to learn life’s hard lessons. Increased pressure on parents through a wave of parenting resources and training can often be seen as a further burden to parents (Redmond, 2016; Noonan, 2016).
- Increased work pressure: The pace of life is fast, and seems to be getting faster. A perceived lack of work/life balance is placing greater strains on parenting and family life (Redmond, 2016; Noonan, 2016).
- Breakdown of community: Communities are assumed to be less safe and less ‘neighbourly’ than in the past, providing parents with less support (Redmond, 2016).

The pace of change in this century has been rapid and unprecedented in its scope and
impact on different segments of the population, particularly children (Stanley et al., 2005). As we as individuals, families and communities attempt to adapt, research indicates that the transitions appear to be continuing; the long-term impact of such a rapidly changing society is not yet known (Keating, 1999).

**Many 21st century parents feel a lack of control over their children’s lives and are overwhelmed by the issues and their ability to manage these.**

This makes the role of parenting in the 21st century a complex one.

Today, we see the child placed firmly at the very centre of the family, with a plethora of education and training resources available to parents; and an increased understanding of what children need for a ‘good’ childhood, as well as the substantial threats to the wellbeing of children and young people.

The paradox is that whilst we appear to know more than ever before about what a child needs to achieve the best outcomes in life, 21st century parenting is, for many, categorised by a feeling of having diminishing control over the lives of their children, and feeling overwhelmed by the growing complexities of issues affecting childhood and their ability to manage.

**Childhood: Diversity**

Children’s experiences of childhood – how it is lived and experienced – differ according to culture, class, gender and religious backgrounds. In many developing countries, children’s roles, and how they experience childhood, are vastly different from those in Western societies.

In Aboriginal and Torres Strait Islander families and communities, children have a special place. “Today, Aboriginal communities see children as central to the life and culture of the community” (SNAICC, 2010, P.23).

Often the way in which children and young people are portrayed in news media and popular culture, particularly in Western societies, can play an important role in how we as individuals and communities understand them and respond to them (Morrow, 2011). Positive images and stories, particularly around adolescents, and young males in particular, seem to be of the minority.

For marginalised children and young people, these ‘perceptions’ can be even more extreme.

Childhood studies remind us that not all childhoods are the same for all children, and suggest that we need to respect the dignity and self-worth of all children, and try to understand their lives from their own viewpoints, without judgment (Morrow, 2011).
CHILDHOOD: SO WHAT MAKES A ‘GOOD’ CHILDHOOD?

How do we define a ‘good’ childhood? Does the word ‘good’ imply that the child has every material and economic advantage in life? Does it infer a moral judgement on parents whose children may not be viewed as having a ‘good’ childhood, based on the standards and values of others?

The changing nature of how we have defined and understood ‘childhood’ over many centuries’ highlights that it is not a constant but an ever-shifting construct. Childhood today is universally acknowledged as a precious and vital stage within the lifespan of a human – an important period of physical growth, mental and emotional learning and development.

The concept of a ‘good’ childhood is a broad term that can mean many things to many people, across different times and places.

Making an assessment of what makes a ‘good’ childhood for individual children, and for all children more generally, is a difficult task, but one in which Berry Street feels is important to undertake.

 Berry Street knows a good childhood is fundamental to a child’s sense of wellbeing. A good childhood is characterised by stable, responsive, caring relationships in families and in the community. Children thrive in nurturing environments that encourage them to explore and engage safely with the world around them, and support them to fulfil their potential.

Begin at the beginning: The importance of the early years

Although intuition tells us how important a child’s early experiences are, the evidence is now overwhelming. Over the previous decade, we have seen a greater focus on, and understanding of, the importance of childhood wellbeing – both from an objective and subjective perspective. It is now generally understood that children’s wellbeing is crucial, not just for their own lives, but for society as a whole (ARACY, 2016).

A good childhood really is the foundation for a healthy adult life and cohesive society, and it’s important to get it right in the early years.

Antenatal period

Because healthy development in the earliest years is dependent on the future mother’s health and social environment before she becomes pregnant, taking action to support healthy child, adolescent and adult development sets the critical foundations for health and social development in the early years (Harvard University, 2010).

Critical impacts in the antenatal period include:

• Exposure to maternal substance use
• Maternal nutritional behaviour
• Mother’s mental and physical health.
Early brain development

The basic architecture of the brain is constructed through a process that begins before birth and continues into adulthood (Harvard, 2017). The first few years of life are a period of intense activity in the developing brain: billions of connections are rapidly being formed between individual neurons across different areas of the brain that allow them to exchange information and form circuits. In the first few years of life, more than one million new neural connections form every second (Harvard, 2017).

This architecture provides the foundations for all future learning, behavior and health (Harvard, 2017) and allows us to interpret information from our environment and interact with the world around us: every thought, feeling, and action we perform originates from our brains (Alberta, 2017).

The simple circuits that regulate our most basic skills (i.e. sensory systems) form first, and provide the foundation and scaffolding for more complex circuits that regulate more multifaceted behaviors such as language attention and emotional regulation (Alberta, 2017).

The interaction of genes – which provide the basic blueprint – and experiences, shape the developing brain (Harvard, 2017). Once the connections in a brain circuit are formed, the brain refines these connections through experience: the connections that are used the most become strong and resistant to change, and those that are used the least get weaker and are eventually lost (Alberta, 2017). This process is called ‘pruning’ and allows the brain to create more efficient circuits over time and establish either a strong or weak foundation for all of the learning, health and behaviour that follows (Harvard, 2017).

Although individuals continue to develop beyond their childhoods, the environmental conditions to which children are exposed in the early years of development can have consequences for the rest of their lives (Power & Hertzman, 1997; Shonkoff et al, 2009). High-quality experiences will reinforce important cognitive, social and emotional skills that are necessary for learning, forming close relationships and positive health outcomes, and will create a solid foundation for additional development.

Children who do not have the same opportunities as others, or who are exposed to negative experiences like maltreatment or witnessing domestic violence, often have poorer outcomes in comparison (Alberta, 2017).

Researchers have identified the impact that stress – and specifically ‘toxic’ stress – can have on the architecture of the developing brain. All humans will experience stress both in their early years and throughout their adult lives. Activation of the stress response produces a wide range of physiological reactions that prepare the body to deal with threat (Harvard, 2017). Some levels of stress, and learning to cope with adversity, therefore, are common and important components of healthy development.

However, when these stress responses remain activated at high levels for significant periods of time, without supportive relationships to help calm them, toxic stress results (Harvard, 2017).
Toxic stress can occur when a child experiences strong, frequent, and/or prolonged adversity – such as physical or emotional abuse, chronic neglect, exposure to violence, and/or the accumulated impacts of family economic hardship – without adequate support. This prolonged activation of the stress response systems can disrupt the development of brain architecture and other organ systems and increase the risk for stress-related disease and cognitive impairment, well into the adult years. (Harvard, 2017).

The more adverse experiences in childhood, the greater the likelihood of developmental delays and later health problems, including heart disease, diabetes, substance abuse and depression (Harvard, 2017). Recent research supports the ‘additive’ model of risk that proposes that with an increasing number of risk factors, there will be a reasonably steady increase in problematic outcomes (Appleyard et al, 2005).

The heartening news is that research findings also tell us that there is not a ‘point of no return’ beyond which intervention for children and young people is useless (Appleyard et al, 2005) and that there is much we can do to prevent or reverse the damaging effects of toxic stress response. With an increasing number of positive protective factors, there is likely to be an increase in positive outcomes (Rutter, 1999).

The most critical component in helping to prevent or reverse the impacts of toxic stress and build resilience for children and young people is the presence of stable, supportive, caring and committed parents, caregivers or adults (Harvard, 2017).

Every risk factor that we can reduce matters.

A good childhood: What young people think

IMAGINATE was a national multimedia competition for young Australians aged 13 – 25 held in 2014. The Berry Street Childhood Institute invited young people to use creative expression to respond to the question: “What should a good childhood look and feel like in Australia today?”

The competition drew 90 entries from young Australians across every State and the ACT. Using words, pictures, music and film, the entrants portrayed their ideas of what makes a good childhood. A group of young people then analysed the entries to form a statement that reflects the full range of themes described by the artworks. This is the resulting narrative about a good childhood:

- My childhood is perfectly imperfect:
- It’s the simple things – love, family, friendships, belonging;
- My imagination is where I make my hopes and dreams;
- The freedom to explore lets me be curious, discover and grow;
- When I test my limits and am fearless, I learn more about who I am;
- There is fun, joy and laughter.
- My childhood is my right – respect it and protect it!

(Berry Street Childhood Institute, 2014)
CHILDHOOD: WELLBEING FACTORS

In order to identify the factors that contribute to a ‘good’ childhood, we need to first determine and understand the key factors relating to contemporary childhood wellbeing.

Child wellbeing, how we define it and what its key factors are, is a growing field of research around the world. In developing frameworks and indicators to describe wellbeing (and therefore the factors that make a good childhood), we can begin to measure how countries and communities are faring, by assessing the different domains of the lives of their youngest citizens (Statham & Chase, 2010).

Childhood Wellbeing

Childhood wellbeing is a broad term that can mean different things to different people.

It is generally defined as an overarching and multi-dimensional concept, with a range of indicators that are used to describe and measure the quality of children’s lives – their physical, emotional and mental health, their relationships and connections with others, participation, educational attainment, access to economic and material resources and other positive attributes of a child or young person’s life up to 18 years of age (Hetzel, 2015). Assessing wellbeing should focus on the immediate lives of children and young people but also consider the long-term outcomes, and incorporate both subjective and objective measures as well as difficulties and deficiencies.

Childhood wellbeing is not just about the immediate lives of children, but also the long-term outcomes.
Two common approaches to identifying child wellbeing factors:

**Subjective wellbeing**: A child or young person’s own assessment of their lives (including positive and negative emotions) at a particular point in time, both as a whole, as well as individual aspects of it. This generally includes the following:
- Happiness with family and other social relationships
- Perceptions of their quality of life and overall life satisfaction
- Feeling that life is worthwhile
- How healthy they feel
- How they feel about the future
- How confident they feel when faced with adversity and new challenges.

**Objective wellbeing**: This relates to the social and economic indicators that are felt to contribute to children’s wellbeing. This is generally agreed to include the following:
- Household income/levels of poverty
- Educational resources/attainment
- Health status (including children born with low birth weight, and levels of health behaviours such as smoking, drinking and drug use).

Another concept for identifying child wellbeing is ‘psychological wellbeing’. This refers to a sense of personal growth and development and often includes the following components:
- Self-acceptance
- Self-image
- Positive relations with others
- Sense of autonomy
- Environmental mastery
- Sense of purpose in life
- Competence
- Personal growth (Ryff, 1989).

**In their own words – How children themselves define the factors that relate to their wellbeing**

Increasingly, researchers have recognised how important it is to seek out, validate and incorporate the views of children themselves about what they believe is important for their own wellbeing, as well as for all children.

Research conducted with children and young people, both within Australia and internationally, has concluded that the overriding wellbeing factors identified by children were about their emotional life: the importance of their relationships; feeling positive about themselves; feeling safe and secure in their environment; and their ability to act independently.

A study conducted by the Childhood Wellbeing Research Centre at Loughborough University found that family conflict had the strongest association with child unhappiness (Statham, 2010). Similarly, an analysis of longitudinal data indicated that positive relationships with parents were closely associated with reported improvements in wellbeing over time (Gutman et al, 2010).
The ‘nurturing’ qualities of support networks – parents, caregivers, family and community – and the environments where children grow, learn and live were found to have the most significant impacts on their development (Hertzman, 2000).

Low-level wellbeing was found to be concentrated in groups of young people who are recognised as marginalised – young people with a disability, young carers, materially disadvantaged young people, culturally and linguistically diverse young people, indigenous young people, young people in rural and remote communities and young people in out of home care (Redmond, 2016.) These young people are more likely to go hungry, be bullied, miss school and experience health complaints.

Marginalised young people are more likely to go hungry, be bullied, miss school and experience health complaints.

Other important factors of childhood wellbeing – identified as important by children and young people – were:

<table>
<thead>
<tr>
<th>Relationships with family and friends</th>
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<tbody>
<tr>
<td>• Importance of family life</td>
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<tr>
<td>• Strong, loving family relationships</td>
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<tr>
<td>• Positive, supportive friendships</td>
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<tr>
<td>• Experiences of being bullied</td>
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<tr>
<td>• Conflict with friends</td>
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<tr>
<td>• Family conflict</td>
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<tr>
<th>Sense of self</th>
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<tbody>
<tr>
<td>• Being valued and respected for who they are</td>
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<td>• Having a positive sense of self</td>
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<td>• Take time out/having your own space to reflect</td>
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<td>• To always be the person you want to be</td>
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<tr>
<td>• Sense of belonging</td>
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<tr>
<td>• A feeling of accomplishment</td>
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<table>
<thead>
<tr>
<th>Good physical environment</th>
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<tbody>
<tr>
<td>• Home as a place of safety and security</td>
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<tr>
<td>• Home as a place for having fun and time out</td>
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<tr>
<td>• The need for natural, open spaces in which to explore and experience free play</td>
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<tr>
<th>Independence</th>
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<tr>
<td>• Wanting to make choices in everyday situations and have some control over their own lives with age appropriate guidance from parents/carers/adults</td>
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<tr>
<td>• To be involved in decisions made about their lives</td>
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<tr>
<td>• Developing the skills to solve problems</td>
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<table>
<thead>
<tr>
<th>Happiness</th>
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<tbody>
<tr>
<td>• Feelings of happiness</td>
<td></td>
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<tr>
<td>• Having fun</td>
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</tbody>
</table>
| **Resilience** | • Ability to integrate sadness into one’s life and be able to deal with it  
• Ability to cope with adversity  
• Ability to deal with day-to-day stresses and challenges  
• To have physical and emotional security |
| **Education and learning/school** | • Enjoying and achieving  
• Having opportunities  
• Being bullied  
• Missing school  
• Experience of pressure from schoolwork  
• Exclusion from education/training settings |
| **Participation, Community** | • Behaving well in relation to others  
• Participating in activities for fun  
• Wanting to feel part of their communities and neighbourhoods and to make a positive contribution  
• Not engaging in anti-social behaviours or offending behaviour  
• Facilities on offer  
• Their experiences of local adults (noisy or arguing neighbours, people taking drugs or drinking, etc.) |
| **Feeling safe** | • Being protected from harm and neglect  
• Personal safety – feeling secure within families and global safety  
• Feelings of safety in the local area  
• ‘Safe spaces’ in the community that allowed them to connect with people with some independence (traffic and design qualities of communities considered) |
| **Health/ Appearance** | • A desire to exercise and keep fit and healthy  
• Mental and emotional aspects of health |
| **Money and possessions** | • Having enough money for a decent standard of living for the family. *This was not based on individual needs but centred on the family having enough money*  
• Enough money to live among their peers without shame  
• Money important for social and cultural participation  
• Not being prevented by economic disadvantage from achieving their full potential in life |
In recent years, there has been a shift away from measuring childhood wellbeing using objective measures to a more multi-faceted approach where children and young people are also engaged in identifying the factors that define wellbeing for them.

This latter approach has revealed the importance that children and young people place on their subjective wellbeing, and has highlighted some important differences in how children and adults view and define wellbeing (Statham, 2010).

Research conducted through the Good Childhood Report 2016 highlights that children’s direct experiences are much more important for their wellbeing than factors that are more removed from them, and that factors that are known to be related to adults’ wellbeing are not necessarily linked to children’s wellbeing (ARACY, 2016).

A child’s happiness doesn’t depend on the size of their house or prosperity of their neighbourhood, but on their experiences within these environments.

One example of these differences was the finding that children’s subjective wellbeing was not associated with objective social indicators about their local environment, although their parents’ wellbeing was (ARACY, 2016). It found that children’s happiness and subjective wellbeing is not greatly influenced, for example, by how big their house is, or how affluent their neighbourhood is, but by their experiences and interactions with family, friends and neighbours within those environments.
The study found that children who rated their local area more highly in terms of facilities (local amenities, rubbish and graffiti levels, etc.); safety and freedom (cars not driving too fast, dangerous animals off lead, etc.); and their experiences with local adults (noisy/unfriendly neighbours, people taking drugs or drinking, neighbours arguing, etc.) had significantly higher subjective wellbeing (ARACY, 2016).

The research also highlighted that the quality of family relationships matter much more to a child’s sense of wellbeing than the family structure they live in. Equally, children’s direct experience of material deprivation matters much more to them than household income, which is often a measure of an adult’s sense of wellbeing (ARACY, 2016).

Sometimes adult assumptions about the important influences on children’s wellbeing hold true. Yet decisions about which aspects of wellbeing to measure have often been made according to what researchers believe to be important or what is known to be important for adults (The Children’s Society, 2010).

This can lead to an overemphasis on factors relating to ‘becoming an adult’ and a neglect of children’s quality of life in the ‘here and now’ (The Children’s Society, 2010).

**Measuring wellbeing from the child’s perspective**

In recent years, our knowledge of what works to improve the experience of childhood, and what does not, has enabled us to place the mental health and wellbeing of children much nearer the centre of our thinking (Layard, 2009). If policies and programs/services are to effectively engage and meet the complex needs of children and young people, there needs to be a better understanding of what children and young people themselves identify as being important to their wellbeing.

This involves:

- Ensuring that subjective wellbeing measures are incorporated into research and data collection projects focusing on childhood wellbeing,
- Actively seeking out and listening to the perspectives that children and young people have on their own lives, what impacts their wellbeing and the effectiveness of the services and programs that are being provided to them,
- Monitoring and tracking changes to children’s wellbeing over the longer term, through different stages of their life, and the factors impacting on this.

It is important to note that measuring child wellbeing – particularly subjective wellbeing – can be complex and imprecise. Researchers point to the difficulties in establishing comparable wellbeing domains based on a lack of data from children and young people themselves as well as the risk of using indicators across a wide range of socio-economic and geographical contexts (Statham, 2010).

If policies and programs/services are to meet the complex needs of children, there needs to be a better understanding of what children and young people themselves identify as being important to their wellbeing.
One objective of the research undertaken for this project was to identify the range of childhood wellbeing frameworks, informed by research and evidence, being used by government and service providers both within Australia and internationally. This included work previously undertaken by Berry Street in this field.

In 2012, Berry Street contracted the Australian Centre for Child Protection (Bromfield & DeGregoria, 2012) to develop an organisational outcome framework that would bring together all of Berry Street’s programs and activities under one coherent conceptual frame that clearly articulated with Berry Street’s strategic vision. The starting point for this framework was Berry Street’s vision around good childhood.

At the conclusion of the research project, an analysis was then conducted on the commonalities of the child wellbeing domains across these frameworks, including Berry Street’s own.

The domains reviewed incorporated the views of parents, children and young people themselves, around what they believe to be important to their wellbeing, both individually and to all children. The review also considered dimensions for physical, emotional and social wellbeing as well as subjective and objective wellbeing measures.

We have below outlined 13 indicators of material, physical, emotional, social, educational and cultural development that we consider contribute to a good childhood.

These domains have been organised into the three broad outcomes recommended in the Outcomes Framework report commissioned by Berry Street (Bromfield & DeGregorio, 2012), namely that children:

**Thrive, Achieve, and Belong**

<table>
<thead>
<tr>
<th>Thrive</th>
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<tbody>
<tr>
<td>Domain: Safety and Security</td>
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<tr>
<td>Domain: Healthy Development</td>
<td></td>
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<tr>
<td>Domain: Material and Economic resources</td>
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<table>
<thead>
<tr>
<th>Achieve</th>
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<tbody>
<tr>
<td>Domain: Education and Learning</td>
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<tr>
<td>Domain: Positive sense of self</td>
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<td>Domain: Being</td>
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<tr>
<td>Domain: Age appropriate independence and competence</td>
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<tr>
<td>Domain: Building Resilience</td>
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<tr>
<th>Belong</th>
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<tbody>
<tr>
<td>Domain: Love, care and commitment</td>
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<tr>
<td>Domain: Culture and spiritual connection</td>
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<td>Domain: Positive social relationships</td>
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<td>Domain: Participation</td>
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<td>Domain: Child-friendly communities</td>
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Childhood Domains – Thrive

Domain: Safety and Security
A recurring theme for children’s wellbeing is the need to feel safe and secure, both within the home and within the community in which they live. An ideal environment for children to thrive is one free from abuse, neglect, violence, anti-social behaviour and crime.

Children’s sense of safety and security increases when they have the protection of consistent caregivers and trusted people around them, a personal safe place to live, and the opportunity to safely participate in community life – in neighbourhoods, schools and broader community settings.

A major challenge for parents and communities living in any society is to ensure the safety of their children whilst allowing them opportunities to develop their social, emotional, cognitive and physical development. This is often achieved through unstructured play and providing the freedom children need to explore the world, and learn responsibilities to care for and protect one another (Ably, 2005; Guldberg, 2009; Howard, 2011).

Security and a safe environment are important, because they make a child feel safe (Imaginate, 2014).

<table>
<thead>
<tr>
<th>Safety and Security</th>
<th>Indicators considered indicative of a good childhood:</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Protected from physical, sexual and emotional abuse, neglect, violence and exploitation</td>
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<tr>
<td></td>
<td>• Parents/caregivers/community as protectors and home as a safe haven</td>
</tr>
<tr>
<td></td>
<td>• Children’s home environment is safe, hygienic and free from hazards</td>
</tr>
<tr>
<td></td>
<td>• Access to stable and secure housing</td>
</tr>
<tr>
<td></td>
<td>• Safe and supportive neighbourhoods and communities that allow children and young people to engage with some independence</td>
</tr>
<tr>
<td></td>
<td>• Adequate parental/community supervision</td>
</tr>
<tr>
<td></td>
<td>• Trusted people around them.</td>
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</tbody>
</table>

Domain: Healthy Development
The foundations for health and wellbeing are established early in life. Many factors – including inherited genes, a child’s own biology and their personal life experiences – have an impact on the development of a child’s physical and mental health. These early foundations help to set the pattern for health in adulthood.

Good health is a crucial element in a child’s quality of life, and influences participation in many aspects of life including schooling and recreation activities (AIHW, 2015).
**Healthy Development**

Indicators considered indicative of a good childhood:

- Optimal development before birth
  - A healthy start to life (immunisation and breastfeeding)
  - Development of healthy stress response systems
  - Child’s medical needs are met (doctor, dental, etc.)
  - Access to nutritional food
  - Children receive adequate physical care (hygiene, appropriate clothing)
  - Emotional, psychological and mental health needs are met
  - Regular physical activity and engagement in sporting and leisure activities
  - Prevention and early intervention of emerging health or developmental issues
  - Access to services and support networks that support the child’s optimum growth and development.

**Domain: Material and Economic Resources**

For all children to survive, they need to have the very basic material resources in place – food, water and shelter. In order for children to thrive, they need much more than the basics. Their shelter needs to be adequate and stable, their food and water needs to be sufficient and healthy, and they need the economic resources to access transport and participate in social, cultural, education and training opportunities.

*Children and young people who have material basics have access to the things they need to live a ‘normal’ life (ARACY, 2013).*

**Material and Economic Resources**

Indicators considered indicative of a good childhood:

- Access to nutritious food and clean water
  - Adequate and stable place to live
  - Access to transport and material goods
  - Enough money for a reasonable standard of living
  - Enough money to participate in social and cultural activities
  - Not being prevented by economic disadvantage from achieving their full potential in life.
Childhood Domains – Achieve

Domain: Education and Learning
Learning is a continuous process throughout life, from infancy through early childhood to adolescence, and beyond. In order for children and young people to thrive, they need opportunities for early engagement and participation in learning and education. This can occur in a variety of informal and formal settings, both within the home and within the classroom and the community.

Education and learning opportunities should develop the full capacities of the child – cognitive, physical, social, emotional and ethical (Alliance for Childhood, 2012).

<table>
<thead>
<tr>
<th>Education and Learning</th>
<th>Indicators considered indicative of a good childhood:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Access to a comprehensive range of quality education and learning opportunities</td>
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<tr>
<td></td>
<td>• A supportive learning environment</td>
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<tr>
<td></td>
<td>• Education that develops the full capacities of the child – cognitive, physical, social, emotional and ethical</td>
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<tr>
<td></td>
<td>• Children are confident, active and involved participants in learning</td>
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<td></td>
<td>• Parental engagement in children’s learning</td>
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<td></td>
<td>• Children develop a range of skills and processes that allow them to transfer and adapt what they have learned from one context to another</td>
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<tr>
<td></td>
<td>• A sense of enjoyment and achievement</td>
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<tr>
<td></td>
<td>• Children and young people given opportunities to engage in further education, employment, and/or training according to their capabilities.</td>
</tr>
</tbody>
</table>

Domain: Positive Sense of Self
Identity is not fixed, but rather it is shaped by experience. For children and young people, having a positive sense of self, and being valued and respected for who they are, is vital for their wellbeing. Children learn about themselves and construct their own identity within the context of their families and communities. This includes their relationships with others, places and things and the actions and responses of others (DEEW, 2009).

We need to allow children to be who they are – with respect for their feelings, tastes and ideas (Neustatter, 1992).
### Positive Sense of Self

<table>
<thead>
<tr>
<th>Indicators considered indicative of a good childhood:</th>
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<tbody>
<tr>
<td>Being valued and respected for who they are and what they do</td>
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<tr>
<td>• Having a positive sense of self</td>
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<tr>
<td>• Feeling a sense of belonging</td>
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<tr>
<td>• Developing solid values and morals</td>
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<tr>
<td>• Interacting in relation to others with care, empathy and respect</td>
</tr>
<tr>
<td>• Happiness, positive outlook</td>
</tr>
<tr>
<td>• Creative expression through music, dance, drama and the other arts</td>
</tr>
<tr>
<td>• Opportunities for exploratory play</td>
</tr>
<tr>
<td>• Being listened to and understood</td>
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<tr>
<td>• Using one’s key individual strengths to bring about a connection to something bigger than oneself</td>
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<tr>
<td>• Taking time out/having personal space to reflect</td>
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<tr>
<td>• Achieving goals and fulfilling the need to build confidence and self-esteem</td>
</tr>
<tr>
<td>• Recognition by others and a sense of pride and satisfaction with life</td>
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<tr>
<td>• Gaining knowledge and skills to prepare for adult life according to their capabilities</td>
</tr>
<tr>
<td>• Sense of accomplishment achieved through the mastery of a task.</td>
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</table>

### Domain: Being

As the experiences of – and attitudes to – childhood have changed significantly over time, we now recognise the importance of seeing children not as the adults they will become but as the children they are in the here and now. This concept of allowing children to ‘be’, reminds us of a child’s right to be a child and to experience the joy of childhood. Their current quality of life is as important as the future adults they will become.

### Childhood should be a time of discovery and dreaming, free from the burdens of adult life *(Quantum, 2016)*.

### Being

<table>
<thead>
<tr>
<th>Indicators considered indicative of a good childhood:</th>
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<tbody>
<tr>
<td>• Recognising the significance of the here and now in children’s lives</td>
</tr>
<tr>
<td>• Childhood as a time to be, to seek and make meaning of the world</td>
</tr>
<tr>
<td>• Children developing an awareness of their social and cultural heritage and of gender and their significance in their world.</td>
</tr>
</tbody>
</table>
Domain: Age Appropriate Independence and Competence

Childhood is a time of increasing independence. As children become less dependent on others for their basic survival, they begin to develop the skills needed to explore the world independently. Parents, carers and the community can support children to develop a sense of themselves as individuals with their own skills, strengths and opinions. The development of independence and competency contributes to a sense of identity, self-esteem and achievement.

When children feel that their voice is heard and they are able to make valuable contributions, their sense of themselves as competent members of society grows.

<table>
<thead>
<tr>
<th>Age-Appropriate Independence and Competence</th>
<th>Indicators considered indicative of a good childhood:</th>
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<tbody>
<tr>
<td></td>
<td>• Allowing children and young people to make choices in everyday situations</td>
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<td></td>
<td>• Having opportunities to practice age-appropriate independence and life skills</td>
</tr>
<tr>
<td></td>
<td>• Encouraging independent play</td>
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<td></td>
<td>• Age-appropriate guidance from parents/cares/adults</td>
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<td></td>
<td>• Enjoying and achieving – making positive contributions and developing skills for adulthood</td>
</tr>
<tr>
<td></td>
<td>• Displaying age-appropriate independence and life skills</td>
</tr>
<tr>
<td></td>
<td>• Taking responsibility for one’s behaviour</td>
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<td></td>
<td>• Empowering children with a sense of trust, support and confidence.</td>
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</tbody>
</table>

Domain: Building Resilience

Learning how to cope with adversity is an important part of healthy child development. Every child is born with the capacity for resilience, but the attributes and characteristics we teach our children make a direct and significant contribution to how resilient they become (Coulson, 2017). Parents and carers need to provide the tools to enable children and young people to cope with the day-to-day stresses and challenges of life and to persevere when faced with challenging learning situations.

Building a close, loving relationship with a child is the most important thing you can do to support their resilience.
**Building Resilience**

**Indicators considered indicative of a good childhood:**
- Ability to deal with day-to-day stresses and challenges
  - Ability to manage and heal from trauma/adversity
  - Learning to cope with manageable threats
  - Develop appropriate adversity and resilience.

---

**Childhood Domains – Belong**

**Domain: Love, Care and Commitment**

Research has long recognised that families are a child’s single most important environment in terms of influence on development (Garbarino, 1995) and are fundamentally important to a sense of wellbeing for children and young people. How effectively a family functions, the consistency and quality of care provided, and access to social and family support networks all strongly contribute to the wellbeing of a child.

Families vary greatly in structure, but what matters most is the quality of experiences provided within the family environment where children grow, learn and live. Ideally these are loving, nurturing, and accepting practices that meet the child’s fundamental needs.

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**It’s the simple things that matter to a child – love, family, belonging** *(Imaginate, 2014).*

---

**Love, Care and Commitment**

**Indicators considered indicative of a good childhood:**
- Environment in which children and young people observe and experience consistent and unconditional love
  - Responsiveness to a child’s individual needs
  - Quality one-on-one time
  - An environment that supports physical and emotional wellbeing
  - Care that enables a strong connection to culture
  - Belonging: knowing where and with whom you belong
  - Stable, strong and supportive connections with family and extended family
  - A kinship approach to building security, trust and confidence
  - Establishing order, boundaries and rules and enforcing them in a firm but not dictatorial manner.
Domain: Cultural and Spiritual Connection

Our languages, traditions, behaviours, beliefs and values help us to understand the world in which we live in and how we engage with it. Our cultural experiences and values shape the way we see ourselves and what we think is important.

In particular, our Australian Aboriginal cultural practices highlight the role of the collective community in helping the spirit of a child emerge as he or she grows and experiences life. This is done by letting the child know who they are in relation to their family, the broader society, the environment and the living spirits of the sacred ancestors and the land (SNAICC, 2011).

The social, emotional and spiritual wellbeing of Aboriginal and Torres Strait Islander children is dependent on cultural connection.

Your culture helps define how you attach, how you express emotion, how you learn and how you stay healthy (Bamblett, 2006).

<table>
<thead>
<tr>
<th>Cultural and Spiritual Connection</th>
<th>Indicators considered indicative of a good childhood:</th>
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<tbody>
<tr>
<td>Valuing and respecting cultural diversity of Aboriginal and Torres Strait Islander peoples</td>
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<tr>
<td>Connection to culture and land and a sense of belonging</td>
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<tr>
<td>Understanding of past history</td>
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<tr>
<td>Recognising how cultural factors affect family functioning</td>
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<tr>
<td>The role of spirituality in family and community life</td>
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<tr>
<td>Sharing knowledge through community engagement and participation</td>
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<tr>
<td>Recognising the importance of story-telling.</td>
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</tbody>
</table>

Domain: Positive Social Relationships

Once children and young people start to explore relationships outside the family, friendships and social connections play an increasingly important role in the wellbeing of children. Good friendships help children and young people explore their personality, provide a support mechanism and back up to the family, as well as keep them safe in a variety of contexts (Statham, 2010).

It's important to have friends around you to help you along your journey no matter what happens (Imaginate, 2014).
### Positive Social Relationships

**Indicators considered indicative of a good childhood:**

- Supported to explore relationships outside the family
- Positive peer relationships
- Experiencing respectful, responsive and rewarding interactions
- Connectedness to the broader social environment
- Social responsibility: being a good person in relation to others
- Understanding the importance of ‘other people’ in our own wellbeing.

### Domain: Participation

Active participation in the life of a community provides children and young people with a sense of purpose and connection. Children and young people contribute much to our society. They actively produce knowledge as they learn; they offer their labour in the form of part-time employment, volunteering and housework, caring and other roles for their families; and they enhance communities through their artistic, sporting and cultural efforts (DCFS, 2008).

**Children and young people can make valuable contributions to communities and are empowered themselves when they participate.**

### Participation

**Indicators considered indicative of a good childhood:**

- Children and young people respected as participants in community, social, cultural and political life
- Having a voice that is heard and engaged in decision making
- Making a positive contribution and helping to shape the structures and processes around them
- Enhancing communities through their artistic, sporting and cultural efforts
- A sense of belonging and connection to community
- Identifying and participating with their kinships groups and/or culture
- Behaving well in relation to others: engaging in law abiding and positive behaviour.
Domain: Child friendly Communities

A child friendly community is one that values the importance of the child, and takes a shared community approach to ensuring the wellbeing and safety of children through the programs, services and supports it provides to children, young people and families. A child or young person’s day-to-day experience of living and learning in the environment around them, and their interactions and experiences within that community affect their overall wellbeing.

The design and physical features of the natural and built environment must be designed with children’s needs in mind. An ideal physical environment is safe, appropriate and provides an abundant and diverse range of experiences and interactions that support children’s wellbeing, learning, creativity and developing independence.

Safe, positive, creative environments have a significant impact on a child or young person’s wellbeing.

<table>
<thead>
<tr>
<th>Child Friendly Communities</th>
<th>Indicators considered indicative of a good childhood:</th>
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<tbody>
<tr>
<td></td>
<td>• Child friendly environments that facilitate fun, a sense of community and interaction with others</td>
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<td></td>
<td>• Collective community ownership about how children will be protected and cared for</td>
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<td></td>
<td>• Contributions of elderly family members in family and community life</td>
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<td></td>
<td>• Access to a diverse range of quality networks and services</td>
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<td></td>
<td>• The need for open, natural places in which to explore and experience free play</td>
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<td></td>
<td>• Appreciation and stewardship of nature</td>
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<td></td>
<td>• The quality of the physical environment – housing, transportation, noise, crowding, environmental quality, etc.</td>
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<td></td>
<td>• An understanding of the social responsibility and moral obligation to people within their community</td>
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CHILDHOOD DOMAINS: MARGINALISED CHILDREN AND YOUNG PEOPLE

The marginalised children and young people with whom we work – those who have suffered abuse, neglect or trauma; those who are disadvantaged by poverty; have received poor parental health and education; or have experienced trauma and dislocation from kin and country – often require intensive and long-term support.

The childhood domains outlined above contribute to the wellbeing of children and their experience of childhood. The absence of many of them is what sets apart the children and young people with whom we work.

The needs of marginalised children and young people, who often lack positive and secure attachments to family and community, are great:

• They need warm, responsive, attuned care in an environment that is free from abuse, neglect and violence
• They need support to remediate the impacts of poor or absent parenting
• They need preventative programs to redress health and developmental concerns
• They need positive role models and mentors in their life
• They need support to help them develop their sense of identity and self-esteem
• They need to be engaged and supported in effective learning and education.
CHILDHOOD: A SHARED RESPONSIBILITY

The health and wellbeing of all children and young people is a core goal for any society.

For children and young people suffering from disadvantage, the longer society waits to intervene, the more costly it is to remediate the effects of that disadvantage (Hetzel, 2015).

Berry Street is acutely aware of what happens when children are denied a good childhood.

We know that whilst parents have the primary responsibility to provide their children with a good childhood, they cannot do this in isolation. Parents/carers, service providers like Berry Street, government and community all have a role in contributing to children’s wellbeing.

The role of family
Parenting is like any job – it requires skills, ongoing training and support. As the environment changes for children and young people, so too do our parenting skills and strategies need to adjust and respond to the new environment. As parents/carers, we need to understand the importance of effective parenting – and the harmful effects of ineffective parenting – to society as a whole, and recognise and understand the role we play as key influencers on our children’s environments.

The role of Service Providers
We need to ensure that the services and programs we deliver to children, young people and families – in particular those who are marginalised – are of the highest quality, and meet their specific needs.

It is vital that the voices of children and young people are sought, valued and incorporated into the services and programs being provided – ensuring that we capture their subjective, as well as objective, wellbeing needs.

We need to provide support to parents and families in the early childhood development years and beyond, encouraging and supporting a discussion around parenting and parenting challenges.

The role of Government
Government needs to continue to work as a supportive ‘partner’ with parents, service providers and communities across a range of service delivery areas to meet the changing needs of children, young people and families.

Government also needs to continue to confirm the importance of seeking, understanding and valuing children’s own perspectives on their subjective wellbeing and their lived experience over time.
If we want to improve children’s lives, it is important that we routinely include their perspectives in what is studied, counted and acted on in policy and practice (Fattore, 2007).

The role of Community
The social impacts of parenting are widely recognised. Parenting effectiveness has critical social, economic and public health implications and is a critical means of reducing social disparities and promoting the quality of family, civic and community life (Volmert, 2016.) It is therefore imperative for all communities to find effective ways to support parents and families.

As a community, we need to engage the voices of children and young people in the discussion and decision-making around the design and planning of our communities.

We feel that it is time to engage with others (particularly with children and young people themselves) around what we can do to improve childhood for all children.

A shared responsibility
As Berry Street celebrates its 140th year of caring for the most marginalised children, young people and families in society, it is timely that we reflect on the adversities we have faced during that time, and prepare ourselves for the challenges that lie ahead. We hope to encourage discussion and debate about the changing conditions of childhood and the challenges we face today and into the future.

We need to start with ongoing and robust conversations around the state of childhood today, the key factors impacting on childhood, and how we can best meet the changing needs of children, young people and families.

We need to ask: ‘What can we do as individuals, families and communities to ensure children and young people have the best childhood possible?’

Together, there is much we can do to ensure the wellbeing of children and young people in the 21st century and beyond.

Protecting our children and young people is everyone’s business.
REFERENCES


Secretariat of National Aboriginal and Islander Child Care (SNAICC). (2010). *Working and Walking Together: Supporting family relationship services to work with Aboriginal and Torres Strait Islander families and organisations.* SNAICC, North Fitzroy, Victoria.


APPENDIX 1

Childhood: Berry Street

Who we are and what we do:
In 1877, a group of courageous women identified, highlighted and responded to the increasing rates of infant mortality and the plight of disadvantaged pregnant girls and women – and who had neither homes, hope nor money. These were the challenges of the time, and their collective response would go on to become the largest and most respected child and family welfare organisation in the State, Berry Street.

Today, our greatest challenges include helping children and young people recover from the devastating impact of abuse, neglect and violence; and helping mothers and fathers to be the parents they want to be.

Our work focuses on two main areas:
• The rights of all children to a good childhood; and
• Supporting those children, young people and families with the most complex issues arising from their personal experiences of abuse, neglect and/or violence.

There are more than 340,000 reports of suspected child abuse and neglect across Australia each year (over 900 a day) and nearly 35,000 children in Out of Home Care – 6,000 in Victoria alone. These are strong indicators that far too many children are not having a good childhood.

Together with other service providers, we have engaged in increasingly complex service responses to the issues facing children and young people in the 21st century.

To be effective, we know that we need to:
• Forge strong relationships with our clients and help restore a belief in themselves and their future – because we know that learning to trust again is the essential step in healing
• Stick with these children, young people and their families – because we know that they have been let down far too often
• Help children and young people recover from the trauma of abuse, neglect and violence – because we know that with support and opportunities, children and young people can reach their full potential
• Look beyond challenging behaviour to identify and build on strengths – because we know that every person has strengths that, if acknowledged, will provide a platform for healthy development
• Include family members and other significant people in planning and caring for children and young people – because we know it is critical to strengthen connections and build positive relationships
• Respect people’s cultures and spiritual beliefs – because we know how important these can be in developing identity and a sense of self
• Involve the children and young people in our care in planning, decision-making and the way we help to meet their needs – because we know that taking control of their
lives builds resilience and independence
• Acknowledge and promote the human rights of children and young people – because we know that a good childhood is every child’s birthright and that means a better society for us all.

A ‘good’ childhood for all children
Over our long history, we have grown to meet an increasing demand, and adapted to meet new challenges, as well as building on our commitment not just to the provision of social services, but also to social change.

Whilst Berry Street’s services are primarily focused upon improving the lives of children and young people who have experienced harm and disadvantage, we know that having a good childhood is more than just the prevention of harm or absence of abuse (Bromfield, 2012).

We recognise the importance to society generally of focusing on childhood whilst also acknowledging Berry Street’s particular interest in protecting and supporting children who have had adverse childhood experiences, and their families.

Berry Street’s vision is for all children to have a good childhood.

Through our Public Policy and Advocacy agenda, we are seeking to transform communities through the recognition of children’s rights, the empowerment of women, the prevention of poverty, the prevention of child abuse and neglect, and through the promotion of social inclusion.

Empathy for families, as they confront hardships beyond their control, and the challenge of raising children have driven us to move beyond the 19th and early 20th century approach of ‘child rescue’ to focus on supporting family and community wellbeing.

Our current areas of policy and advocacy work are:
• Early years – place-based investment in family support and child development
• Redress for past care leavers and families affected by forced adoptions
• Education and schools – re-engaging marginalised young people in education
• OOHC Reform – shared models of care, foster care as a specialised intervention, kinship care model, transformation of residential care
• Leaving care – supporting the ‘Homestretch Campaign’
• Youth justice reforms – shifting the emphasis from punitive to restorative interventions
• Statutory child protection – promoting restorative work with families.

We also strive to ensure children have a good childhood through knowledge development. The Berry Street Childhood Institute is a knowledge-to-action centre for improving childhood. Through knowledge building and sharing, we seek to strengthen the capacity of practitioners, services, systems and the community so together we can enhance outcomes for children and young people who have experienced trauma and disadvantage.

The Berry Street Strategic Plan 2016 – 2019 identifies our intention to ‘increase our
influence and the impact of our experience, knowledge and advocacy’. One of the activities planned to assist us meet this priority was the development of this position paper on ‘A Good Childhood’.

Berry Street’s Programs and Services that contribute to a good childhood are outlined in the table below.

**Berry Street Programs and Services: Contributing to a good childhood**

<table>
<thead>
<tr>
<th>Berry Street Programs and Services</th>
<th>Activities</th>
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| **Out of Home Care:** Support and therapeutic interventions for children who have been removed from their family environment because of serious child abuse, neglect and family violence. | • Recruiting and training carers  
• Providing a physical care environment (ensuring safety)/temporary respite care  
• Healthcare, therapeutic relationships, educational opportunities, life skills  
• Supporting families to reduce stress  
• Supporting extended families to care for a child  
• Enhancing community supports for families  
• Behavioural and therapeutic interventions for children. |
| **Specialist case management and therapeutic services:** Therapeutic and clinical interventions for children and young people experiencing trauma and attachment difficulties arising from abuse and neglect; and specialist case management with emotional and/or behavioural problems and related risks. | • Therapeutic services for sufferers of abuse  
• Behaviour change programs  
• Therapeutic services for children managing parental separation  
• Increasing young people’s capacity to integrate in social settings to form and maintain relationships  
• Client advocacy  
• Co-ordination of service networks for young people  
• Counselling services  
• Recreational opportunities. |
| **Education & Skills:** Providing children and young people with formalised learning and academic skills as well as general life skills enabling them to transition into independence. | • Educational programs for disengaged and at-risk students  
• Maintaining school attendance, facilitating child readiness for school and assisting in school integration, Individually tailored education and learning plans  
• Links to employment networks  
• Relationship skills, health skills, independent living skills, vocational skills  
• Developing personal interests  
• Mentoring and counselling to help individuals engage in vocational opportunities, develop healthy personal relationships and sustain independent living.  
• Supported accommodation. |
<table>
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<tr>
<th>Family wellbeing, family violence and family capacity building:</th>
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</table>
| Enhancing the capacity of parents to provide effective care and support for their children; providing services for women and their children who have or are experiencing family violence; and providing services to address relationships to build capacity of clients, many of whom are parents. | • Strengthening parenting skills  
• Supporting healthy family relationships,  
• Safe access between parents and children  
• Connecting families to support services  
• Keeping families and children safe  
• Strengthening family resources  
• Enabling children to have a ‘voice’  
• Assisting parents and children to recover from violence  
• Supporting families during and after crisis (including environmental crisis). |
| Community strengthening: |  |
| Increasing financial inclusion; building capacity in rural communities; and working with vulnerable groups within the community. | • Increasing participation of refugee families in early years universal services  
• Increasing awareness in refugee families about the importance of investing in the early years  
• Increasing access to culturally inclusive bilingual resources  
• Integrating schools, families and communities  
• Providing venues for schools/community ‘hubs’  
• Enabling community to take responsibility for child wellbeing  
• Developing culturally appropriate resources  
• Increasing social capital  
• Reducing social isolation. |
| Restorative and practical support: |  |
| Ensuring a continuing commitment to individuals who have experienced adversities during childhood. | • Providing support to care leavers. |
| Advocacy & public policy: |  |
| Tackling complex social and economic policy issues at the highest level. | • Berry Street’s advocacy and social policy agenda aim to improve the outcomes of all children by influencing the social structure, laws and public policies. |
| Practice development, research & knowledge dissemination: |  |
| Ensuring organisational effectiveness and contributing to the wider knowledge base in child welfare. | • In-house and commissioned evaluation and research initiatives  
• Berry Street Childhood Institute and its associated knowledge transfer activities, conference papers and articles, etc. |
What makes a good childhood