 

Australian Early Development Census

Ashdale Cluster schools

Western Australia 2018

AEDC Conference 2018

Four Deputy Principals, Christy Craig (Ashdale Primary), Fiona Irvine (Carnaby Rise P.S.), Natalie Bracegirdle (Landsdale P.S.) and Lainie Beccegato (Madeley PS), represented the Ashdale Cluster schools at the Australian Early Development Census Conference held in Melbourne. The group, along with ten other Western Australian Department of Education school leaders and teachers, were selected through an expression of interest to gain new knowledge about what is having an impact on early years’ outcomes in Australia.

Conference learnings

Representatives from the Ashdale cluster reported that, ‘throughout the conference there was a very clear message that mental health and wellbeing are strongly linked to academic outcomes. Evidence in the research of several keynote speakers including, Dr Kimberly Boller[[1]](#footnote-1) and Meredith O’Connor[[2]](#footnote-2), suggest that children born into disadvantaged families have twice the risk of developing mental health disorders compared to children born into advantaged families.

‘One in seven children in Australia, aged 4 – 17 years, meet the criteria for mental health disorder with one in five in disadvantaged areas. In Western Australia, the 2015 AEDC results show that one in five children entered school developmentally vulnerable in one or more developmental domains. Socio-emotional skills at school entry are predictive of the same skills at later primary school’.

The family environment has a massive impact on the learning potential of a child. Negative impacts for learning and development are at their strongest between 0-3 years of age. Evidence based programs and policies that support a child’s emotional development are likely to have long term impacts on student wellbeing.

Childhood risk for mental illness may be detectable at school entry and may be useful to guide targeted administration of intervention programs at school. Having access to AEDC data to identify areas of vulnerability assists schools in planning for appropriate early interventions in a school context.’

Looking ahead

The key priorities for Ashdale cluster will involve targeting initiatives that positively impact staff, students and the community including:

* Use of the AEDC data to develop cluster and school business plans
* Tracking student wellbeing using Rumble Quest (Griffith University)
* Building partnerships with families to further develop transition to school programs
* Create and strengthen partnerships with outside agencies
* Build capacity of staff to use and interpret AEDC data

Our cluster has identified the need to be more flexible in supporting families. A multi-faceted approach such as building capacity in communities with a mixture of home and school based programs, is more likely to have greater impact. It is critical to use the AEDC data to steer the direction of interventions that support the continuous improvement of outcomes for children.

Considerations

* Use Rumble Quest to gain student wellbeing data
* Review use of Gallup Student poll
* Cluster primary schools to investigate the possible role of speech pathologists and/or occupational therapists to assist school staff, parents and students in the early years of education.

For more information contact

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*Attending the conference allowed us to better understand the impact of the AEDC on shaping future policies, and what we can do in our own school communities, based on international findings with similar data sets.*

1. Boller, K. (2018). *Making the Case for Intervening Early-* *How impact, implementation, performance measurement and quality improvement data inform early childhood policy and practice.* Early Learning Lab, Mathematica Policy Research, Oakland, United States of America. [↑](#footnote-ref-1)
2. O’Connor, M. (2018). *Using the Australian Early Development Census to understand the mental health need of Australian children*. Department of Paediatrics, University of Melbourne, Melbourne, Australia. [↑](#footnote-ref-2)