



22nd April 2023

Dear Professor Brennan,

Thank you for the opportunity to contribute to the Productivity Commission Enquiry into the ECEC Sector 2023. The [National Nutrition Network-Early Childhood Education and Care \(NNN-ECEC\)](#) is a community of practice made up of 34 influential ECEC researchers and academics, senior health practitioners within government organisations, and members of nutrition related not-for-profit non-government organisations from every state and territory in Australia. Our goal is to facilitate consistency of information, research and practical application of nutrition related evidence-based learnings which will support ECEC staff to deliver healthier food environments for the children utilising ECEC services. More about our network can be found on our [website](#).

The following comments are a summary of invited responses from members. These recommendations relate specifically for centre-based services such as long day care, in addition to family day care services. Five key recommendations are outlined in the following sections.

1. Workforce wellbeing is important for quality early education and care.

Early childhood experiences before the age of five are crucial for brain development, building a solid foundation for future success in school, the workplace, and the community (1). Yet, professionals who provide those daily brain building experiences, currently receive wages well below the national average hourly wage of \$37 per hour (2). Educators are at increased risk of living in poverty and experiencing food insecurity, resulting in elevated levels of stress that impacts quality of care (3). Building the capacity of the ECEC workforce to improve the quality of care can be done by their increasing wages. This would provide benefits to the workforce through ameliorating the current high rates of staff attrition, and to children through the attainment of quality ECEC staff.

2. Subsidised food provision (prioritised for services in areas of high disadvantage)

Early Childhood Education and Care operates in a mixed market whereby centres set fees, constrained by a family's ability to pay, resulting in a wide range of out-of-pocket expenses for families. In disadvantaged areas, services with limited funds often reduce costs in relation to food provision either by providing very low-quality meals that do not meet the dietary needs of children in their care, or not providing meals. Anonymous reports provided to the United Workers Union describe expenditure as low as 65c per child per day. Research in a small number of metropolitan services found daily expenditure per child was between \$1.17-\$4.03. This study found none of the services met dietary guidelines recommendations for all core food groups (4), thus missing the critical time epoch to support a child's health and developmental outcomes.

Child hunger is an issue in areas of high disadvantage, with children most at risk of food insecurity also least likely to be provided with meals while attending ECEC. Recent research in Queensland found that centres in the most disadvantaged areas are least likely to provide food (5) with children arriving hungry daily at some lunchbox centres (6). Anecdotally, food insecure families avoid sending children to ECEC due to the shame of being unable to provide food for lunchboxes. ECEC staff have also reported providing food to food insecure children, out of their own pocket, to feed children at centres where food is not provided (6). Further to this, centres who do not provide food, are providing 'band aid' remedies, such as a jam or vegemite sandwich as 'something is better than nothing' due to the limitations of their budget.

Adequate nutrition in childhood is absolutely essential (7). Children who reside in disadvantaged areas are at an increased risk of hunger and food insecurity (8), associated with increased behaviour problems (9), academic performance, and social-emotional skills (10,11). Regardless of the quality of care in ECEC, hungry children struggle to learn, self-regulate, and develop crucial social emotional skills necessary for school and life success. Government subsidised provision of nutritious meals directly to children in disadvantaged centres (without an increase in fees) would help to alleviate some of the burden of food insecurity, thus improving a child's capacity to learn whilst attending ECEC and therefore improving their developmental and health outcomes. This has been done successfully in America through the Child and Adult Care Food Program (CACFP).

3. Universal access to ECEC (especially for those in areas of high disadvantage)

Providing universal access to ECEC services that provide sufficient good quality food and a safe environment that fosters learning would encourage carers/guardians from highly disadvantaged

communities to send children to ECEC. Universal access to ECEC services promotes workforce participation, especially for women. However, access to ECEC needs to be reviewed for contextual issues, such as increased numbers of FIFO/shift workers in a specific geographical location may justify 24-hour access to ECEC. In addition, 24-hour centres could provide a stop gap for emergency accommodation for children in need and be a more consistent and formal approach to emergency child accommodation for young children.

Additional resourcing should be targeted to areas of greatest need as this is where it would have greatest impact (13). Aboriginal and Torres Strait Islander, migrant and refugee communities require a more integrated approach with other allied health professionals. ECEC services could provide an intercept point for these communities for more guided support specifically around trauma diagnosis and management.

4. Registered Nutritionists/Dietitian to support optimal nourishment of children's brains and bodies.

Attendance at ECEC is an opportunity for children to receive food that supports optimal development. Nutrition is a foundational requirement for brain, gut, and general health and is necessary for children to participate in a quality early learning experience, especially for children living in disadvantage. Research suggests that planning for and providing nutritious ECEC meals is challenging for services who often do not have adequate skills (14,15). Menu planning to meet dietary recommendations on a budget with specific dietary considerations, such as food allergies, cultural and religious preferences, require a level of nutrition expertise (16). Rather than increase the burden on ECEC staff to improve the nutritional quality of meals, the NNN is advocating for the provision of trained health professionals such as registered nutritionists/dietitians to assist with menu planning at no additional cost to the service, and a certificate training course for ECEC Cooks to support the practical application of a well-planned menu (17,18).

The benefit of good nutrition in the early years is well documented and a sound investment for the health and wellbeing of future generations.

5. Enhanced monitoring and surveillance of services

The current NQS system de-prioritises review of food provision, yet nutrition is considered foundational to optimising health and developmental outcomes. Currently each jurisdiction is responsible for assessment and rating of services through a quality improvement process (QIP).

Nutrition review requires a level of expertise that the current structure and workforce delineation does not recognise. Current evidence suggests there are variations in state-based interpretation of national requirements, with states finding three yearly reviews challenging (19). There is also anecdotal evidence that some jurisdictions are experiencing more extensive delays to review due to the challenges of supporting ECEC to achieve compliance in some of the forty elements assessed. Timely feedback for services is an important part of improving quality of care, including food provision. Developing qualifications or training for assessment and ratings officers would reduce the impost of onboarding for jurisdictional agencies and outline expectations for provision for each standard, thus supporting efficacy of service review. Within the assessment and rating structure efficacy of review could be achieved through championing assessment and rating officers for specific assessment levels, thus honing their skills.

Disclaimer

The authors' content in this document represents the National Nutrition Networks stance and does not represent views of other employers the authors may have.

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