

*Response to **Childcare and Early Childhood Learning: Productivity Commission Draft Report***

A submission from the Australian Research Alliance for Children and Youth (ARACY)

September 2014

1. Introduction

The Australian Research Alliance for Children and Youth (ARACY) is pleased to make the following submission in response to the *Childcare and Early Childhood Learning: Productivity Commission Draft Report* (July 2014).

ARACY's initial submission to the inquiry outlined our broad position on education and care in the early years. ARACY has identified the early years as a key developmental period for establishment of children's social, emotional and cognitive development (ARACY, 2013). A large volume of research evidence indicates the first three years of life are a critical time for brain development, and the quality of interactions between infants and caregivers has been demonstrated to play a significant role in the development of the brain and future learning and physical, emotional and mental health (McCain & Mustard, 1999).

ARACY recommends the development of a coordinated and comprehensive policy and service framework for the early years, including universal access to high-quality and affordable early learning opportunities for all children aged 0-5 years.

The Productivity Commission's *Draft Report* makes numerous recommendations, a number of which ARACY welcomes. However, several claims made in the report are problematic and this submission presents ARACY's strong support for universal access to high quality early learning, including for children aged 3 years and younger. We maintain that there is strong evidence for how children learn and develop in their first three years, and that the case for the importance quality in ECEC is also strong.

Many of ARACY's members, both organisational and individual, will be making separate submissions in response to the *Draft Report*. Service providers are better placed to respond to issues of payment and equity, and as such ARACY offers our endorsement of the submissions put forward by Early Childhood Australia, Goodstart Early Learning, the Centre for Community Child Health and other member organisations.

"The primary focus, as I see it, in the government supported provision of early childhood learning and care in Australia is to

support women to return to the workforce, confident that their children's development and emotional wellbeing is not compromised by being in the care of other people."

Dr Suezanne Packer, OAM, Paediatrician,
Interim Convenor ARACY Early Years Chapter.

Draft recommendations

Supported recommendations

ARACY strongly supports the Commission's recommendations around the provision of integrated and comprehensive support for children with additional needs and for vulnerable and at-risk children (*Draft Recommendation 5.2*), for the continued funding for the Universal Access preschool program (*Draft Recommendations 12.9 and 12.10*), and the Commission's support for further research and evaluation (*Draft Recommendations 13.2 and 13.3*).

Draft Recommendation 5.2 supports the position ARACY put forward in its initial submission that the ECEC platform should be better leveraged to provide holistic support for children's learning, health and wellbeing. ARACY would contend that a broader utilisation of integrated service delivery approaches is warranted, given that children's developmental vulnerability and family disadvantage do not only exist in specific geographical areas.

The recommendations that support evidence-based practice and the use of administrative datasets to support outcomes measurement are welcomed (*Draft Recommendations 5.4, 13.2, 13.3*). A continual process of evaluation and impact measurement is a key aspect of effective policy development. Measuring impact and seeking evidence to inform decisions about 'best buys' should be embedded in everyday practice – facilitating access to the information needed to inform future decisions – especially through better using administrative data and data linkage. The proposal to link datasets from the Child Care Management System, Australian Early Development Census (formerly AEDI) and NAPLAN (*Draft Recommendation 13.2*) will lead to invaluable information to track outcomes and impacts from ECEC participation for Australian children across numerous domains of wellbeing and development. This data will aid research into relative impacts of quality and

quantity of ECEC, differential needs of different cohorts of children, and long term educational outcomes.

Similarly, the suggestion in *Draft Recommendation 5.4* to ensure early intervention programs be underpinned by research and be subject to ongoing monitoring and evaluation is commendable. The review of operation of the new ECEC funding system outlined in *Draft Recommendation 13.3* is also a welcome development. ARACY would recommend this review include measures of child wellbeing and development outcomes rather than simply analysing economic impacts.

ARACY endorses *Draft Recommendation 12.9* for continued funding of universal access to a preschool program of 15 hours per week for 40 weeks per year. We would further advocate for expansion of universal preschool access to cover two years before commencing primary school.

ARACY also supports the measures suggested to streamline processes such as working with children checks and payments in support of families accessing formal care services.

Points of concern

Of particular concern for ARACY and its members is the suggestion in *Draft Recommendations 7.2* and *7.5* that the quality and staffing requirements for children aged three and under should be reduced, as well as the proposed division between 'education' and 'care'.

There is a substantial and rigorous body of evidence to support the importance of children's development in the first three years. This evidence underpins Australia's National Quality Framework (NQF) and the Early Years Learning Framework (EYLF) and emphasises the importance of a child-centred approach to issues of ECEC provision.

2. High-quality early learning opportunities for all children aged 0-5 years

(Information request 7.1; Recommendations 7.2, 7.5)

ARACY is concerned about the assertions made in the *Draft Report* questioning the importance of carer qualifications and enriched learning environments for children younger than three years of age and the potential of offering care-only and care-education services. There is clear evidence linking quality of care and children's developmental and wellbeing outcomes.

As noted by the International Labor Organization (2012), "integration between care and education is essential, irrespective of whether ECE organization is split between childcare from birth to 3 years and from 3 years to start of school, or is a unitary model covering the entire age range from birth to the start of compulsory schooling" (36). Classifying services in terms of 'care-only' and 'care-education' risks a two-tiered ECEC system in which only those with sufficient financial capacity would have access to early learning environments for their children.

Why does quality matter from 0-3?

The *Draft Report* notes, "there is some evidence of developmental benefits for children attending quality early learning from about 1-3 years of age, although the evidence of long term benefits from universal access . . . to such learning is currently less compelling" (PC, 2014, 11-12). However, the evidence for the kind of learning environments and child-carer relationships that are required for positive child development and to protect against harm is very strong. Similarly, the link between quality care environments and child wellbeing has been established. Teachers with greater knowledge of early childhood development have been shown to be more attuned to children's communication and emotional cues, lower carer-child ratios permit more responsive interactions and one-on-one interaction, centres with better qualified staff are more likely to score well on quality rating scales, high quality centres are more likely to result in improved outcomes for children.

As Dalli et al. (2011) note, "studies have consistently shown that only high quality education and care settings – characterized by high adult:child ratios, small group sizes and qualified staff – are of developmental benefit to

children". Government investment in low-quality care will not deliver the child development outcomes and associated productivity gains that investment in quality care can. Modelling undertaken by Pricewaterhouse Coopers (PwC) has looked at the impact of ECEC on the entire economy, with particular attention to the GDP returns from increased female workforce participation, children receiving quality education and care programs, and increased participation of vulnerable children (PwC, 2014). This report aims to "establish a whole of life-cycle value of the economy-wide return of investing in quality ECEC" (PwC, 1). The Computable General Equilibrium (CGE) modelling demonstrated a range of potential benefits to society from providing quality ECEC. These include: growing Australia's GDP; improving workforce participation choices for parents; helping realise the full potential of Australian children; and reducing the impacts of disadvantage (PwC, 26). The CGE modelling results show that "all of these benefits can be achieved with net saving to government" (PwC, 26).

Additionally, there is compelling evidence of elevated *risk of harm* for very young children in poor quality childcare. For this reason, it is imperative that the minimum standards of care outlined in the NQS be maintained. Large numbers of Australian children are in non-parental care at very young ages. The importance of high quality care has been clearly established and the risks associated with poor quality care are apparent. As noted by Dalli et al. (2011), the literature "consistently points out the importance of intersubjective relationships as the key to high quality early childhood education for this (0-2) age group". They identify a number of structural variables necessary to underpin these, including "degree-level, specialised, training for work with infants and toddlers and ongoing professional development that takes into account new knowledge" (153). Avoiding adverse outcomes is imperative, and maintaining a high quality level of care for all children in non-parental care is essential to mitigate this risk.

Defining quality

The *Draft Report* states:

Having nurturing, warm and attentive carers is arguably the most critical attribute of quality in any ECEC setting, especially for younger children. Other factors affecting quality include: staff-to-child ratios; qualifications, skills and training of staff; program

planning and leadership; and the physical environment/facilities. There is, however, little reliable evidence on the relative contribution that each of these makes to child development outcomes. (12)

Quality in non-parental care has been the subject of extensive research. As noted by Lamb (1996), “although individual researchers use a variety of instruments, there is a surprising degree of convergence among the available instruments [used to measure quality], suggesting substantial consensus about the components of high-quality care” (330). Two arenas of quality emerge in the research, described here as *process* and *structural quality*. *Process quality* refers to “what actually occurs in child care settings – children’s interactions with caregivers and other children, particular activities such as language stimulation, and health and safety measures” (Vandell & Wolfe, i-ii). Characteristics of *structural quality* include the child:adult ratio, the size of each group of children, and the formal education and training of caregivers (Vandell & Wolfe, ii).

As the *Draft Report* notes, nurturing, warm and attentive carers are a critical attribute of quality. The research evidence indicates caregivers who have more formal education and more specialised training offer care that is more stimulating, warm and responsive.¹ Carers with professional training in early childhood development are more likely to organise materials and activities into more age appropriate environments for children. These settings are more likely to receive higher scores on the global quality scales such as the ECERS, ITERS, ORCE, and CC-Home (Vandell & Wolfe, 14-15).

Teachers’ education and training are also related concurrently to child performance and adjustment. Burchinal et al. (1996) report that infants have better expressive language skills when their caregivers are better educated. Children are more likely to engage in language activities, complex play with objects, and creative activities in their classrooms when teachers have bachelor’s degrees in child-related fields (Howes 1997, cited in Vandell & Wolfe, 30-31). Munton et al. (2002), provide a review of research on training and group size in early childhood settings. Teacher qualifications were

¹ See for example NICHD 1996; Phillipsen et al., 1997; Arnett, 1989; Berk, 1985; Howes, 1983, 1997.

identified as a significant predictor of childcare quality in a number of empirical studies.²

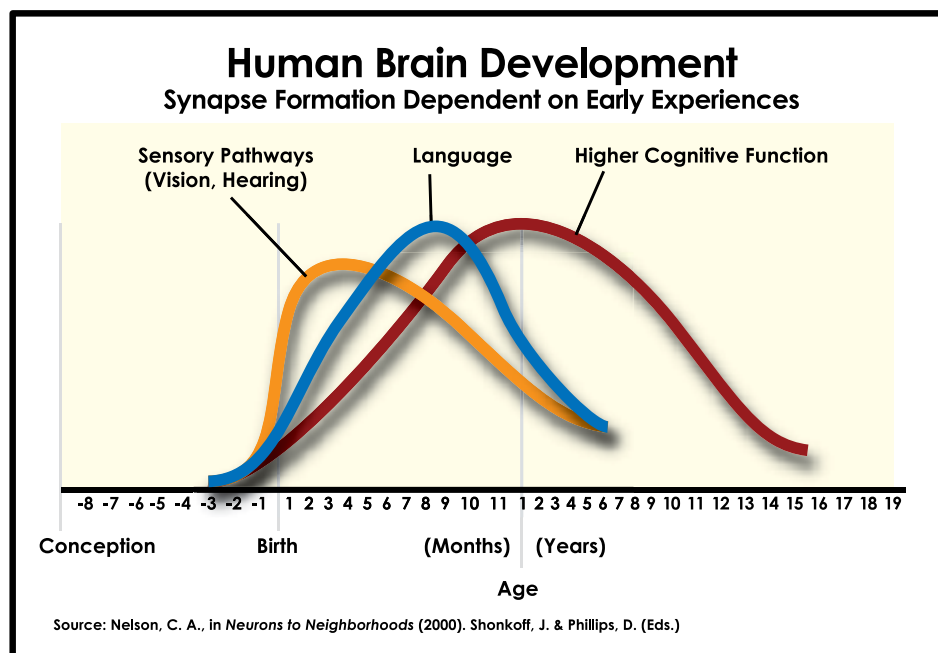
ARACY believes the evidence for maintaining the current NQF requirements for early childhood teacher training and ratios for children aged 0-3 years is strong. We support frameworks in which educators in all forms of non-parental care adhere to the National Quality Standards, including standards for qualifications (*Draft Recommendations 7.8; 8.5*). Where there is currently no such requirement in place, such as in nanny services, we would support moves to implement training and skill development for providers who do not hold formal qualifications. Ideally, the requirements for educator qualifications and staff:child ratios in all forms of non-parental care would be consistent, with supervisory roles filled by professionals with degree level qualifications. For family day care and nanny services, where workers may be providing care in isolation from other educators, suitable coordination, curricula and supervisory provision must be established to ensure adherence with the NQS.

"Providing low cost, low quality, childcare can help maternal employment levels, but if it is not high quality it will hinder child development and make no difference to school-readiness gaps " (Waldegrave, 2013, p. 59).

Brain development

Children's brain volume increases by more than 100% in their first 12 months. This rapid period of growth is a time of intense vulnerability for all infants. Trauma in the first year has lifelong repercussions, especially for right brain emotional development (Schore, 2010). For this reason, a minimal level of care is not adequate, it is vital that standards of care have optimal conditions as their benchmark. As noted above, many children are in non-parental care from very young ages, and there is a significant risk of adverse impacts if care is not of a high quality. To ensure children are not subject to trauma or neglect in their first years, there is a need for non-parental care providers to ensure nurturing, enriched care.

² See for example Mocan, 1997; Howes, Smith & Galinsky, 1995; Smith, 1995, 1999; Clawson, 1997; NICHD, 1996; Mills & Romalo-White, 1999; Honig & Hirallal, 1998.



As the chart above demonstrates, the first 12 months of a child's life is the most intensive stage of brain development of their lifetime, with language pathways forming at their highest rate around 8-9 months, and higher cognitive function peaking around 12 months. "Because brain architecture and skills are built continuously over time, policies that promote healthy development throughout the early years create a foundation for later school achievement, economic productivity, responsible citizenship, and successful parenting" (Center on the Developing Child, 2007, 3). The importance of the caregiving environment is not only due to its impact on capacity for learning, but also its role in the long-term biological organisation of the child, including regulation of the emotional experience (Fonagy, 1996, 131).

Attachment theory: social and emotional development

Early childhood learning environments offer an important context for children to learn about relationships, and their educators play an important role in this. As noted above, the *Draft Report* identified nurturing, warm and attentive carers as a critical attribute of quality (12). This assertion is supported by evidence; for example, children who consistently experience nurturing and responsive caregiving are more likely to explore their environment through play (Colmer, Rutherford & Murphy, 2011, 18).

The quality of the child's interactions with their care-provider, known as the *security of attachment*, has been found to influence social and behavioural development of young children; infants and toddlers need to be able to form attachments with key adults who provide infants with a secure base from which to explore (Press & Mitchell, 2014).

Secure infant-carer relationships promote more advanced types of play and more positive peer relationships (Howes, Matheson & Hamilton, 1994; Howes & Hamilton, 1993). Researchers on the Florida Child Care Quality Improvement Study (Howes, Smith & Gerlinsky, 1995) found improvements in the level of teacher training led to increases in the proportion of children who behaved securely, noting "a BA degree and advanced training encourage more fine-tuned teacher-child interaction – the type of interaction in which teacher responds to teachable moments" (24).

Conversely, preliminary results from the NICHD Study of Early Child Care revealed rates of insecurity were disproportionately elevated when infants were exposed to such multiple risks as poor-quality (insensitive) care both at home and in nonparental care settings, more extensive care, and less stable care (NICHD, 1996).

The nature of relationships between children and their caregivers in their first three years are considered the most significant influence on their development (Mathers et al., 2014, 15). As such, high quality programs for infants and toddlers are characterised by emotional attachment, intimacy, relational pedagogy and intersubjectivity (Press & Mitchell, 2014). Put simply, infants need educators who are attentive and who are familiar. In group care, this means adults who understand the child, understand child development, and the individual and cultural nuances of such development (Press & Mitchell, 2014). Research has shown specialised training is associated with more positive, higher quality interactions and less detached caregiving (Press & Mitchell, 2014).

Pedagogy: age and stage

The development of a national Early Years Learning Framework (EYLF) for Australia (DEEWR, 2009) recognised the importance of the early years for children's cognitive, social and emotional development. The EYLF acknowledges that children's learning is "dynamic, complex and holistic.

Physical, social, emotional, personal, spiritual, creative, cognitive and linguistic aspects of learning are all intricately interwoven and interrelated" (DEEWR, 9). The EYLF notes, "Educators' practices and the relationships they form with children and families have a significant effect on children's involvement and success in learning" (9).

The framework "forms the foundation for ensuring that children in all early childhood education and care settings experience quality teaching and learning" with an emphasis on play based learning (5). It is framed around children's learning, and based on the principles laid out in the United Nations Convention on the Rights of the Child, of which Australia is a signatory (5), in particular the notion that "all children have the right to an education that lays a foundation for the rest of their lives, maximises their ability, and respects their family cultural and other identities and languages" (5; cf. United Nations, 1989, Articles 28 & 29).

The pedagogical practices that have been found to support the development of children under three include:

- play-based activities and routines which allow children to take the lead in their own learning,
- support for language and communication (through use of narrative, shared reading, informal conversations, song and rhymes), and
- opportunities to move and be physically active (Mathers, Eisenstadt, et al., 2014, 16).

ARACY contends that high quality ECEC services would deliver curricula appropriate to best practice for early learning. For babies and toddlers this would include adult support for play that connects play, intention and responsiveness (Cheeseman, 2012, 3). Involving babies in exploration gives the child a sense of agency and control, creates warm connections between baby and carer, builds trust and exposes the child to language learning through educator's descriptions and explanations (Cheeseman, 4). Play-based learning encapsulates responsiveness to children and intentional teaching practices.

Learning and education are not synonymous with classrooms and lessons – in early childhood education, learning is entwined with establishing emotional and social skills, building relationships, interacting with the child, allowing them freedom and space to explore and play, and providing a safe base for them.

Language and literacy foundation skills

Most children begin to use language in the second year of their life, although it is in utero that communication skills such as listening first start to develop. It is in the first 18 months that children build the capacity for internal representation of people and objects (Anisfeld, 2014), which is the foundation of using language. Language is much more than words; it allows active participation in everyday interactions. Piaget's fundamental first stage of human development 'sensorimotor' is crucial for language and literacy. The sensorimotor stage is complete by the end of the second year and yet it provides the building blocks for comprehension, expression and literacy.

Learning to read and write are complex processes which begin well before the age of three. An essential skill needed for literacy is the ability to recognize and manipulate shapes. Activities needed to develop this skill such as jig saw puzzles and shape sorters are vital for young children to practice. Evidence shows that reading to children younger than three influences their language development and their later ability to learn to read (See Rosenquest, 2002 for examples). Oral skills such as story telling precede the capability of written skills.

It is shown that the quality of care for one-year-old children significantly affects cognitive, language and communication skills (Burchinal et al, 2000; Burchinal, Roberts, Nabors & Bryant, 1996). Research indicates that the quality of early child care is a major influence on children's development including communication and literacy skills (Love et al., 2003).

There is evidence that all human environments support language development by providing children with opportunities for communicative experience. The richness of different environments provides varying degrees of motivation for language development, thereby producing group and individual differences in the rate and course of language development (Hoff,

2006). The period from birth to three years of age is a critical period for creating the fundamental skills of language and literacy.

3. Education and care for all children

Although, the Australian Government has historically viewed its investment in ECEC as predominantly an enabler of workforce participation for parents, the evidence for the importance of the early years for child development is now well established (Productivity Commission, 124). As such, ECEC must also be considered as a key contributor to child development and as an investment in long-term productivity and participation. A coordinated and comprehensive health and wellbeing system – which would include universal access to affordable, high-quality education and care to all children aged 0-5 years – is the best investment Australia could make in its future health and wellbeing (ARACY, 2014, 3-4).

As noted in ARACY's original submission to the inquiry, research has consistently demonstrated the importance of the first five years for children's health, early learning, and social and emotional development, and therefore their opportunity, participation and prosperity across the lifecourse (ARACY, 2014, 3). Investment in early childhood education and care should match the importance of this life stage in order to adequately prepare children for their school years and beyond.

The evidence for the effectiveness of high quality early childhood education and care to improve outcomes is strong, particularly for the two years before commencing formal schooling (Sylva, Melhuish et al., 2004; Burger, 2010; Parker, 2013). Comparative AEDI and NAPLAN data reflect the link between pre-school attendance and academic achievement in primary school, with the greatest benefits accruing to those who attended early education for more than one year (Warren & Haisken-DeNew, 2013).

Access to education is one of the rights specified in the United Nations Convention on the Rights of the Child. Early education and care also accrues many benefits to society besides return on investment, and, as such ARACY maintains it should be viewed as both universal entitlement and public good. In a child-centred approach, access to such services would be an entitlement of all children, not dependent upon the employment status of parents. ARACY

notes that children from disadvantaged backgrounds exhibit the greatest levels of vulnerability and have the most to gain from high quality ECEC. They are also least likely to be engaged. For this reason, the application of an 'activity test' requiring parents of these children to be in employment or training is a point of concern.

As noted by the International Labour Organization (2012), broad acceptance of the idea that early education is a public good is likely to coincide with its inclusion as part of the school system (24). This can be seen in the Australian context: the federal government investment in 15 hours per week for 40 weeks a year for all children in the year before school has led to increased participation rates and wider acceptance of this provision as a universal entitlement. AEDI data also indicates improvements in school readiness for children attending these programs.

The evidence does not conclusively call for all children to be made to participate in ECEC from infancy. The home learning environment remains the primary indicator of children's early learning and development outcomes, and where possible support of parents to provide the best care to their children is to be encouraged. However, as a substantial proportion of young children are in some form of non-parental care on a regular basis, it is vital that the government support a system based on the best available evidence, one that avoids risk of harm and rather encourages best outcomes for children (see section 2 for further evidence on early childhood development and the importance of high-quality care).

Universal access to healthcare and schooling are widely accepted as essential for the health and wellbeing of Australians. Extending this universal coverage to provide the youngest Australians with the education and care services with quality standards that meet the threshold for the promotion of child development is in the nation's best interests.

Integrated service delivery

ARACY supports further expansion of integrated service delivery models in the early years, to capitalise on the combined expertise offered by inter-professional practice. Integrated services, as defined by Press, Sumison and Wong (2010, 53), "provide access to multiple services to children and families in a cohesive and holistic way. They recognise the impact of family and

community contexts on children's development and learning and focus on improving outcomes for children, families and communities. Through respectful, collaborative relationships, they actively seek to maximise the impact of different disciplinary expertise in a shared intent to respond to family and community contexts." Such environments offer a non-stigmatizing context in which risk and vulnerability may be observed and intervention services provided to families and children whose needs may otherwise not be identified.

ARACY would support broad establishment of integrated service hubs providing a range of early years service provision to local communities, across the socio-economic range. This approach recognises that, although children in low socio-economic status areas are at greater *risk* of developmental vulnerability, there is a *higher total number* of children experiencing vulnerabilities in middle to high socio-economic status areas (according to AEDI data; see ARACY, 2014, 8-9).

Investment in ECEC

The OECD *Starting Strong II* report into early childhood education and care notes, "most countries need to double annual investment per child to ensure acceptable child-staff ratios and highly qualified staff. . . Investment should be directed towards achieving high quality pedagogical goals, rather than the simple creation of places". Benchmark 8 of UNICEF's minimum standards for early childhood services calls for "a minimum of 1 per cent of GDP" (UNICEF Innocenti Research Centre, 2008).

Australian and state and territory governments spent an average of \$6100 in 2012-13, on ECEC for every child in formal care (Productivity Commission, 128). In contrast, the current schools funding model provides \$9271 per primary school student and \$12,193 per secondary student (Australian Government, 2013, 34(1)(a), 34(2)(a)), as well as loading for a number of factors including students with a disability, students with low SES status, Aboriginal and Torres Strait Islander students, schools that are not in major cities and schools that are not large (Australian Government, 34).

The *Draft Report* asserts, "many of the benefits [of ECEC] accrue primarily to the child attending ECEC and to their families. This means that families should not expect governments to fully fund their use of ECEC . . . the responsibility

for raising children and funding their care and early childhood education should lie predominantly with the family” (12). However, the evidence is clear that ECEC delivers substantial benefits to the community and economy and the argument for public funding of ECEC, alongside health and education, is strong. As noted above, recently released modelling by Pricewaterhouse Coopers has demonstrated a range of potential benefits to society from providing quality ECEC (PwC, 2104). The total GDP impacts by 2050 from increased female workforce participation, long run productivity impacts from participation in quality ECEC and increased participation in ECEC by children currently not attending from disadvantaged and / or vulnerable backgrounds were estimated at \$7.0 to \$9.3 billion increase in Australia’s GDP in net present value terms (PwC, 4).

4. Conclusion

It is encouraging to see a robust debate about the future of early childhood education and care in Australia. The length of the Productivity Commission’s *Draft Report* reflects the complexity of this field, incorporating as it does issues of workplace participation, employment, training, quality standards, equity, access and, central to ARACY’s concerns, childhood learning and development.

While it is commendable to see recommendations to address funding equity, and encourage workplace participation, these objectives must not be achieved at the cost of quality of care. In particular, ARACY does not endorse the downgrading of qualification requirements for care environments for children under the age of three. The evidence is compelling that the first three years of life are the most intensive time for brain development, and as such they offer the greatest scope for influencing social, emotional and cognitive outcomes for children.

ARACY maintains the position that the best model for ECEC in Australia would be developed as part of a coordinated and comprehensive policy and service framework for the early years. Interventions that target young children’s cognitive development and their social and emotional wellbeing have been demonstrated to persist into adolescence and to drive improved outcomes for these young children. This is also the period in which the service system has

the lightest touch and the least investment per child. There is a mismatch between our investment in children and the period that has the greatest impact. Redesigning the ECEC system is an opportunity to move Australia from middle of the road – in terms of child wellbeing and in comparison with peer-countries in the OECD – to the top, to achieve the best futures for our children.

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