

To
The Principal Research Officer
Community Development and Justice Standing Committee
Legislative Assembly
Parliament House
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Submission to the
Community Development and Justice Standing Committee
INQUIRY INTO THE ADEQUACY OF SERVICES TO MEET THE DEVELOPMENTAL NEEDS OF
WESTERN AUSTRALIA'S CHILDREN

Submitted by

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I am prepared to present my case to the committee in person.	

1. Summary of submission

As a key stakeholder in the early years sector and a voice for over 16,000 families, Playgroup WA has for many years been concerned that existing programs supporting the social and cognitive development of children 0-3 are not meeting the needs of all families and young children. We believe that prevention and intervention services are substantively under resourced and that improving this long term situation requires a coordinated cross government approach led by a Statutory body reporting to Parliament. We also believe that existing services do not adequately recognise or support abundant research that parent/child interaction and play based learning are cornerstones of healthy social and cognitive development

Playgroup WA is a not-for-profit organisation which supports the formation and development of playgroups. The first WA playgroup was established in Subiaco in 1970, and since then numbers have grown so that today Playgroup WA has more than 500 member playgroups comprised of approximately 16,000 family memberships across WA. Playgroup WA is the peak body for playgroups in Western Australia and works to advocate on behalf of families and children between 0-5 years of age. Playgroup WA is actively involved in the developmental needs of children 0-5 in WA through our support of parent led and facilitated playgroups,

educational workshops for parents and early literacy programs in Mirrabooka and the West Pilbara.

Playgroups have a number of important functions for families and children in the early years, they:

- Provide a fun and learning environment for babies and young children.
- Promote emotional, physical, social and cognitive development through play.
- Foster attachment between parents / caregivers and children.
- Reduce social isolation through the formation of locally based social networks.
- Peer support for parents and caregivers.
- Are a point of contact for parents / caregivers to access advice and information on a range of things including support services, parenting information, managing challenging behaviours, play and early child development, to name a few.
- Opportunities via involvement in the committee to: use/develop skills in Leadership, Finances/book keeping, management etc.

The basis of Playgroup WA's approach to supporting families and children in the early years is premised on an understanding of the significant roles that play and parent/child interaction have in healthy child development. When children play, they are practising skills in all areas of their development; thinking, solving problems, talking, moving, cooperating and making decisions for themselves. Children use play as a means to learn about and make sense of the world around them. Play is not only fun, but important for many reasons as it allows children to:

- Have the opportunity to explore and discover.
 - Experiment and try out things they've learned and seen.
 - Put into action and practise things they have learnt.
 - Use their imagination and be creative.
 - Try adult roles and understand them.
 - Improvise, be innovative and creative.
 - Ask questions and discuss things.
 - Process new information
 - Develop language ability
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2. Playgroup WA would like to comment on the following Terms of Reference

- a) whether existing government programs are adequately addressing the social and cognitive developmental needs of children, with particular reference to prenatal to 3 years;

General view:

Current services are not adequately addressing the social and cognitive development needs of children prenatal - 3years.

Reasons / experience:

As a community based organisation working directly with families and children 0 – 5 years and with other service providers, such as community based Early Years Network Groups, Parenting Network Groups, and Child Health Services, we have been hearing consistent and repeated concerns about the adequacy of services from parents and fellow workers for many years. These concerns include the number of child health nurses, waiting lists for child development services and limited family support services. The failure of funding to keep pace with population growth is a long standing community and early childhood sector concern as highlighted by the WA Children’s Commissioner and National Investment for the Early Years (NIFTEY).

As a State wide body we are concerned about inequities in access to services particularly outside the metropolitan area. Equity of access is an important issue as whilst some families may have personal resources to purchase private assistance, this option is not available to disadvantaged communities. For those living in rural and remote areas there are often no private or public services available. This clearly impacts most severely on our Indigenous children. Access is also impacted by the availability of transport and, in relation to playgroups the availability of venues, again highlighting the need for broad cross government involvement. In our experience the provision of transport has been a critical factor in the establishment of many playgroups and is often neglected in funding models. Participation in playgroups is also unevenly spread across WA. Playgroups rely on local fees and fundraising and participation rates are lower in disadvantaged areas. Disadvantaged groups sometimes require support to establish new groups. Playgroup WA receives Federal funding to support from 7 to 9 new groups per year across WA.

Whilst some successful programs such as Better Beginnings (an intensive child health nurse home visiting program) have been introduced they are typically highly targeted with limited coverage across the State. As such, there tends to be a focus on metropolitan ‘crisis’ or high end needs rather than looking at the promotion of wellbeing for the prenatal – 3 years as a universal model of early intervention. Whilst such programs are positive, demand for them will only increase whilst preventative programs are systematically under funded.

Recommendations:

We recommend that the State Government demonstrate a real commitment to the 0 – 3 years through concrete policy and action.

- Establish an Office of Early Childhood with statutory powers to oversee and monitor early childhood service provision and resources
 - Develop policies and strategic objectives specific to 0-3 years within a framework that takes a broad view of developmental needs (such as those proposed by the World Health Organisation, *Solid Facts*¹; and the Ecological model²)
 - Develop a more coherent and integrated framework around government and government funded programs to reduce fragmentation and the resultant duplications and gaps due to ad hoc governmental programs.
 - Adopt preventative approaches to emotional and cognitive development for 0 -3 year olds through improved access to antenatal and postnatal services, parenting services, family support and community and supported playgroups.
 - Substantively increase funding for child health nurses and allied health professional working with children 0-3.
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¹ World Health Organisation (2003) (2nd Ed.) *Social Determinants of Health: The Solid Facts*. International Centre for Health and Society, WHO.

² Bronfenbrenner, U. (1979). *The Ecology of Human Development*. Harvard University Press, MA.

- b) how to appropriately identify developmentally vulnerable children;

General view:

Accepting it is important to identify children who are most developmentally vulnerable; we argue that the most effective support for the early years begins with a universal approach to service delivery. If we are to optimise child development then a base line of support and services are needed for all parents / caregivers and children. Taking a universal approach means all children and parents / caregivers have better access to the supports they need, including those considered most developmentally vulnerable. Whilst more resources need to be put into basic development screening(via increased child health nurse funding) as a critical preventative measure it also very important to remember that parents and caregivers are the closest observers of children. Increasing the understanding and capacity of parents and caregivers around child development would have a great impact on early identification. At present ante natal and post natal education/support for parents around child development is extremely limited. Where such initiatives have been introduced they have been very welcomed by parents.

Reasons/Experience:

- Whilst child health nurses generally do an extraordinary job, funding for basic health screening is simply inadequate. The lack of funding impacts on the number of home visits, limits community involvement and reduces the capacity to introduce programs and services. All of those have reduced early identification opportunities over many years. The involvement of child health nurses and child development staff in playgroups has proved very successful in increasing early intervention though is unfortunately limited by staff restrictions. Further details on the supply of health staff can be found in the NIFTEY submission.
 - A universal approach to government programs for the early years will provide a wider coverage of support for all families and will necessarily include those considered most vulnerable.
 - Opportunities to identify issues in the ante natal and post natal periods are severely limited. Existing ante natal services are largely focussed on pregnancy and birth with little attention to child development or preparation for parenting with service provision dominated by a mixture of hospital based programs and GP services. Only a small number of “at risk” families are connected and thereby available for early identification with child health services in the ante natal period. The only universal services provided in the immediate post natal period are an initial home visit by a child health nurse and/or midwife, the purple book for new parents given to new parents and a selection of brochures provided at the hospital. Opportunities for early identification in such a system are clearly very restricted.
 - The critical role of parents and caregivers and the importance of play in early social and cognitive development is well established in research and of particular interest to Playgroup WA. The impact of early attachment on brain development and long term mental health are
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core components of the early brain development research whilst play based learning is essential in social and cognitive development. Increasing parental knowledge and capacity is thereby an obvious strategy in improving prevention and identification of developmental concern. Parental/caregiver enthusiasm for education is highlighted in the following two programs. During a recent three month period over 250 parents/caregivers attend workshops on Early Brain and Emotional Development provided by Playgroup WA and Edith Cowan University. Feedback from those workshops showed a large number of workshop participants felt the need for more information on managing challenging behaviours and that many had not previously understood the significant role they as parents / caregivers can have in facilitating healthy child development. The Ngala at Kwinana program has for the past two years been successfully offering a variety of ante natal and post natal education opportunities to families of children 0-3 in Kwinana. Such is the parental thirst for information that at times 80 people attended informal drop in sessions focussed on play and child development. It is worth noting that such programs are typically limited to short term funding that ceases irrespective of success.

- Developmental vulnerability should be considered through a broad lens and not be narrowed down to parameters that exclude the wider social/cultural, economic and environmental aspects in which families and children are situated. From this perspective identification of vulnerable families will not be effective if seen as the domain of just one service or government department. If viewed more widely, the identification of vulnerable children requires more innovative and opportunistic approaches. There are many examples where community based organisations and groups have been able to improve services to young children through taking up opportunities as they presented themselves.
 - In a regional centre in WA's mid-west the playgroup was co-located in the same building as the Child Health Nurse. This presented an opportunity to improve immunisation rates by allowing the nurse to access the group while they were attending the centre.
 - Rockingham Educating Young Parents project – This is a project operating through South Coastal Women's Health Services for Kwinana Industries Education Partnership (KIEP) aimed at engaging young parents into education and employment. Milestone checks are conducted on all children attending the crèche services provided to the young parents. As a result two children have been identified to have minor delays against expected milestones and programs put in place to respond to this and one child was identified to have significant delays against expected milestones and referred to developmental services for a full assessment.

Unfortunately the availability of such services is largely random, reliant on short term funding and dependent on the good will of individual staff rather than systemic requirement.

Recommendations:

1. The provision of early identification services in WA should be based on proven successful models and not historical funding models. Child health nurse services have
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long been identified as essential in an early childhood service delivery system with demonstrated importance of home visiting in particular.

2. Increased priority and resources should be given to the support and education of parents and caregivers in relation to enhanced developmental outcomes and early identification.
- Increase the capacity of agencies and services already working with children 0-3 years in order for them to better expand the work they do and to develop a greater focus on early emotional and cognitive development.
 - Improve referral pathways for children identified to be developmentally vulnerable.
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- c) which government agency or agencies should have coordinating and resourcing responsibility for the identification and delivery of assistance to 0–3 year old children;

General view:

Playgroup WA believe that to effectively deliver assistance or support specifically geared to the developmental needs of children in the early years requires a lead directorate integrating existing agencies with the appropriate powers to instigate policy development, oversee resource allocation, critically review Departmental early years plans and drive implementation across Departments. As argued in an OECD policy brief on early childhood education and care³ such a body cannot simply work in isolation but must be based on a ‘systemic and integrated approach’. To be effective it requires a mandate to bring together government departments to work with an integrated focus on issues impacting on the wellbeing of families and children. This means bringing together various sectors and departments across health, housing, transport, education and so forth. We therefore support the WA Children’s Commissioner’s call for the establishment of an Office Early Childhood that can monitor and coordinate policy, funding and service delivery across Departments.

Reasons/ experience:

The need for an integrated cross government approach to child development is overwhelming. Modern child development research proves that early development influences children’s life outcomes across a broad spectrum. This spectrum includes life chances in relation to education (including literacy and numeracy), employment, criminality, mental health, obesity, diabetes, relationships, future parenting and violence just to name a few. Clearly this range of issues affects society as a whole and thereby deserves a whole of community response. We all have an investment in the optimum development of our children and the diversity of impacts needs to be reflected by the diversity of agencies and Government Departments with a duty to respond. Current policy, service provision and resource allocation is made by individual Departments within the context of Departmental pressures. It has lead to WA being significantly behind other jurisdictions both in terms of investment and coordination.

The lack of a clear and cohesive framework makes it difficult for service providers and, importantly, families to identify and locate the services / programs needed (It is not unusual for Playgroup WA to be contacted by other providers or to receive interagency group emails requesting information on behalf of clients who are experiencing difficulty in locating specific services / programs.) Further, it works as a barrier to the recommended systemic integrated approach⁴. For families

³ Bennet, J. (2007) Results from the OECD Thematic Review of Early Childhood Education and Care Policy 1998 – 2006. *UNESCO Policy Brief on Early Childhood*. No 14 Nov – Dec,

⁴ An example of this approach: Toronto First Duty Phase 1 Summary Report (2006) *Evidence-based Understanding of Integrated Foundations for Early Childhood* Toronto First Duty – Early Learning and Care for Every Child.

where a child has special developmental needs this means negotiating with and visiting a range of agencies who are rarely located nearby and which have different entry and service criteria and limited communication.

One result of our current system is that short term non-recurrent funding is often all that is available to agencies trying to implement new programs. This does not allow for the sustainable development of programs for the 0 to 3s and also leads to costly reinventing of the wheel as programs commence and close often with no reference to what has gone before and no capacity to plan for the future. The absence of any central framework or agency also means that we have no central repository of knowledge. A lack of communication and understanding of the negatives and positives that come out of these services, and hence no overall strategic direction for the provision and improvement of services for this age group.

Recommendations:

An independent WA Office for Early Childhood be established that:

1. Reports directly to Parliament or dedicated Minister
 2. Has power to collect and monitor information from other Departments in relation to Early Childhood services
 3. Develops a State wide strategic plan for Early Childhood
 4. Monitors equity issues in relation to access to services
 5. Reviews Departmental funding plans for early childhood in the context of the State wide strategic plan
 6. Provides a central clearing house facility for WA early based initiatives, best practise and research.
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- d) what is the best model to ensure interagency and intergovernmental integration of developmental programs delivered to 0–3 year old children;

General view:

1. Integration needs to be undertaken at the governance level described above via an Office of Early Childhood but also at the level of service delivery. Current discussion of integrated service delivery models such as Children’s Centres needs to be viewed more broadly than physical collocation of services.

Reasons/experience:

- Communication between agencies and professionals in relation to early childhood is severely hampered by the lack of a common framework and a language that can be understood by professionals, parents and caregivers. Initiatives driven through individual Departments are inevitably based on the language and professional background of those Departments and are all but incomprehensible to outsiders let alone parents. The absence of a common language complicates referral and reduces the effectiveness of early identification and assessment of issues. At present there is significant disconnect between health, education, early childhood workers and parents/caregivers as agencies and individuals pursue goals in isolation. For example schools and child care centres have no agreed communication despite child care settings often having intimate knowledge of children and families. There are of course individual exceptions but there is no systemic requirement or encouragement of this type of information sharing.
 - The absence of common frameworks and pathways leaves parents having to attend multiple agencies while repeating family information to many sources. This system significantly increases the chances of children and families falling through the cracks.
 - Cross agency and cross professional training is essential to breaking down these barriers yet is severely limited in WA. Positive models of cross professional training such as Family Partnership Training do exist.
 - Integrated service delivery centres be they called Children’s Centres, one stop shops or Child and Family Centres bring the opportunity to break down such barriers and allow parents and children to more easily access a range of services. Such centres require more than a simple collocation of agencies but require a genuine collaborative approach to service delivery that includes new governance structures and the involvement of local communities to ensure optimal outcomes in widely differing communities. Such centres also need to encourage the involvement of parents and wider community activities. Locating a child care centre on school grounds does not produce an integrated service centre for children and families. In our view such centres would have facilities for playgroups, parent education, early child care and education and child and parent health and development services with the particular combination determined by consultation with the local community and under a common
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centre governance model that includes centre service providers and service users.

An example model from Canada proposes three streams of service.

- Prenatal and Post-Natal Care – Pregnancy and early parenting services including early assessment of maternal and foetal health, screening, risk assessment and referral; pre and post natal nutrition; home visits and infant stimulation
- Parenting and Community Supports – To include a suite of services such as home visits, parenting classes, family resource centres, playgroups, toy and book libraries and respite for occasional relief from care giving responsibilities.
- Early Childhood Learning and Care – Include programs that provide opportunities for interaction and play (playgroups), prepare children for school, and provide care that promotes child development and supports parents.⁵
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Recommendations:

An Office of Early Childhood facilitates the development of a WA Early Years Framework.

This new Office should have sufficient powers to drive service delivery integration initiatives that include:

1. Cross professional and agency training
2. Clear referral pathways
3. Common assessment tools
4. Open communication between agencies and professionals and families
5. Integrated service delivery centres providing child and parent services

⁸ Battle, K & Torjman, S (2000) *A Proposed Model Framework for Early Childhood Development Services*

- e) how to best prioritise the resources available for meeting the needs identified;

General view:

- Resource allocation needs to be considered in relation to an overarching early years framework with individual Department plans being reviewed and monitored by an independent Office for Early Childhood. This Office would thereby have the responsibility of driving an integration agenda through it's oversight of all plans. The office would also be responsible for establishing transparent benchmarks for service delivery to ensure services keep pace with population increases and emerging needs. It is clear that funding for prevention, identification and early intervention have not kept pace with population needs and without independent oversight individual Departments will continue to be under pressure to dedicate resources to crisis or high need areas.

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Reasons/ experience:

- The current lack of resources devoted to social and cognitive development services has been a long time in the making and the responsibility of successive Governments and the actions of individual Departments over many years. The research on social and cognitive development that has become available in recent years presents an overwhelming argument for new ways of working as we now know beyond reasonable doubt that the early years of life critically affect individual life outcomes and their participation in society. The success or otherwise of early childhood development has implications across traditional government Departments and demands a response that transcends professional and Departmental boundaries.
- Individual Departments have proven unable to sustain an adequate level of universal or targeted services for the young children and their parents in WA and require stronger commitment and leadership from Government.

Recommendations:

1. An Office of Early Childhood be established to review and monitor resource allocation and service delivery plans across Departments .
 2. Benchmarks in relation to minimum service levels be developed to ensure service delivery grows with population levels and emerging needs.
 3. Current universal programs be expanded with greater attention to early education of parents, screening and family support.
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- f) what is the most appropriate measure of program outcomes; and

General view:

In general our view is that measures need to link effective program delivery population level outcomes within the context of a cross government and community framework for early years. This will require increased investment in evaluation and research as well as the establishment of base line data and service delivery benchmarks. We also believe that Departmental program outcomes should be reviewed and monitored externally and should be available for public scrutiny. Current service delivery levels do not demonstrate clear links to evidence or best practice and are clearly inconsistent with the evidence of the importance of early child development.

Reasons/ experience:

- It is clear that WA child development policy and resource allocation has not been based on evidence. We are in the situation where services have failed to match basic population increases over an extended period when the evidence for the importance of such services has become universally clear. That this situation should arise in the same State where the Telethon Institute for Child Health Research has been such a big contributor to the worldwide evidence makes this failure unforgivable. Whilst Countries around the world have sought to develop new initiatives and the Australian Government shown increased commitment over the past decade, service levels and funding sources in WA have continued to lag. In such a situation we believe a paradigm shift is required in this State whereby Departmental services are reviewed by an independent body such as an Office Of Early Childhood. Such an office can assist in the establishment of benchmarks, gather and publish data, commission research and report to Parliament and the community of WA on how our young children are faring and how our publicly funded services to them are meeting their needs.
- Given the diverse life impacts associated with child development population level outcomes need to be longitudinal and include multiple sources from ante natal parental smoking and Fetal Alcohol Syndrome rates to Child and Adolescent mental health rates; education performance and adult mental health and criminal activity. The diversity matches the reality of the wide reaching impact of social and cognitive development.

Recommendations:

1. Base line data on prevalence rates in a range of areas be established in the context of a cross government early years framework outcome targets led by an Office of Early Childhood.
 2. An Office of Early Childhood annually report to Parliament and the community of WA according to benchmark performance.
 3. Longitudinal research across Departments be identified coordinated and utilised by an Office of Early Childhood and service providers.
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