

**Individual submission****Elizabeth Daly OAM****Former Chair Tasmanian Early Years Foundation****Co-chair B4 Coalition. (Coalition has not formally met and this submission is not on their behalf)****Term of Reference 1.**

Research funded by TEYF provided clear evidence that the opportunities for increased access for children and their families/carers in a range of health and wellbeing areas is showing success.

The holistic approach to development of children's physical, social -emotional, communication and cognitive capacities is a significant success factor.

The clearly defined partnerships which enable interconnectedness and integrated services to operate in the Centres is also a strong success factor.

I believe further clarification is warranted in determining the time allocated to age appropriate early learning particularly for the group entering Kindergarten, compared with the time spent in early learning by children in Childcare and Early Learning Centres in, for example private schools

Having said that it is clear CFC's serve the 12 communities in which they are sited, very well indeed. Noted is the parenting skill development and the engagement of parents in training at the Centres. The opportunities made possible by CFCs for parent learning and gaining qualifications is unprecedented.

The CFC development model, Family Partnerships, has enabled growth in parenting skills, parent confidence in their own ability and most importantly has overcome most barriers faced by vulnerable parents in attending appointments, training sessions and the like including:

- They are mostly within walking distance for parents
- Financially beneficial in relation to transport (bus fares, petrol, wear and tear on vehicle or need for car is less likely)
- If pick-up is required, the expense is more likely to be within budget for the Centre
- Multiple bus/car trips to city for a range of services not always sourced locally and often with more than one toddler is more achievable in the integrated services model
- The partnering with the community in the planning and the on-going involvement of parents in the running of, and involvement in the Centre is possible

**Term of reference 2.**

Tasmanian 0-5-year-old children experience a wide range of early learning experience prior to the current Kindergarten entry age. I believe the picture is not one of equity, particularly for our most vulnerable. Even though we know from the current research that CFCs are providing strong evidence of success, the question remains, are these vulnerable children, as well as those with no CFC provision, being well served in comparison to children accessing early learning through other channels? It would be beneficial for future educational planning to determine just what the statistics show to utilise budget fairly.

Outcomes from the integrated services offered in CFCs, including learning outcomes, could then be used to consider how the successful elements of CFCs can be replicated to benefit all. We know from DOE data that those children attending CFCs are showing signs of strong school readiness.

Who are the Tasmania children that are experiencing early learning prior to kindergarten and are these children advantaged compared to those that don't?

- Is it children that access CFCs?
- Is it children that attend Child Care Centres for a significant amount of time?
- Is it children that attend Private School Early Learning Centres?
- Is it the children that remain at home with a parent?

Who are the disadvantaged in terms of school readiness?

- Is it children in rural and isolated areas of Tasmania where there are no CFCs?
- Is it the well-recognised and documented communities in low socio-economic areas that suffer such barriers as parents that were early school leavers, intergenerational unemployment, lack of transport, poverty, geographical isolation, drug and alcohol addiction, mental health issues?
- Does it matter?

What can we learn from this information in relation to providing a more equitable distribution of budget?

It is obvious that the CFCs can play a leading role in modelling and sharing good practice

### **Term of Reference 3.**

As mentioned above, recent evaluations of CFCs have clearly shown that the models used have been successful. The opportunities for parents to become partners in their child's learning and development has been exemplary. As has been said previously, barriers to access and participation have been removed.

Having had the opportunity to observe parent development since the commencement of the work of CFCs it has been a remarkable journey to watch. Even though the steps are small they are continually added to and expanded as parents are provided with opportunities to practice the new learning and then move to the next stage. The strength based model facilitates the process that well suits the client group, a group that have been continually faced barriers.

Of note is the partnerships with RTO's /Childcare to enable parents to:

- (a) attend parenting courses to increase skills and knowledge
- (b) prepare for entering the workforce
- (c) Through (a) and (b) gain confidence, build self-esteem, develop leadership skills which benefit the local community

### **Term of Reference 4**

As mentioned previously, the opportunities made possible by CFCs for parent learning and gaining qualifications is unprecedented and well utilised by CFCs.

Inclusion, empowerment, quality relationships and engagement, particularly engagement, have been success factors in CFCs. The professional learning has seen increased numbers of community members that are:

- Learning parenting skills which enrich the parent role and take account of the critical nature of the early years of a child's development
- Engaged in or re-engaged in completing a year 11 or 12 education
- Engaging or re-engaged in their own learning/further education
- Have increased aspiration for self and children
- Increased educational achievement in communities where achievement statistics are low.
- Community leaders are being developed

An example of the product of this skill development, training and leadership is a current Family Violence program at Ravenswood where anti-family violence advocates have been trained to continue aspects of the program when funding ends in June. A significant number of these advocates have completed parenting and/or training programs at the Child and Family Centre as they have spent time with their child.

#### **Term of Reference 5.**

The key learnings and experiences from the CFC story can be replicated.

Economies of scale suggests that current CFCs, with the right operational processes and staffing could model and lead similar practices in LIL sites (Kindergartens) where aspects of health, well-being and early learning are already occurring, but for constrained periods of time. Simply building additional Centres in just some areas is not going to level the playing field and provide equity for all vulnerable children. However far greater numbers could be reached with money spent on people and upgrading kindergarten facilities to replicate, on a smaller scale, the CFC model. This suggestion should not be confused with changing the Kindergarten entry age.

Mobile services, like the once popular, but highly under-funded mobile service that visited those schools/communities without an adequate service, may be worth consideration.

Source: 1. Child and Family Centres, August 2015, Telethon Kids Institute

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