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Closing the gap clearinghouse

Early childhood and education services for Indigenous children prior to starting school

Resource sheet no. 7 for the Closing the Gap Clearinghouse

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Summary

What we know

- High-quality early intervention/education improves children's lifelong outcomes across all areas—education, health (mental and physical) and wellbeing.
- Early intervention/education is more effective, particularly for vulnerable families, when it is holistic—i.e. addresses children's and families' learning needs taking into account the contexts in which they live.
- Closing the gap in outcomes between Indigenous and non-Indigenous Australians requires a focus on early intervention/education of Indigenous young children (from birth), their families and communities.

What works

- Services are more effective for Indigenous children and families when they are aware of and address cultural competence/cultural safety in their service delivery.
- A key component of cultural competence/safety often rests on employing Indigenous workers.
- It is critical that non-Indigenous staff have awareness of how to engage and support all cultures, but particularly Indigenous cultures.
- Honest engagement, building trust, working with community members is essential.
- A focus on empowerment, and working from strengths makes a difference.



What doesn't work

- We cannot assume that what works for families from the non-Indigenous culture can be used to successfully shape Indigenous programs.
- Mainstream services offering generic support without taking into account issues of cultural competence/safety for Indigenous children and families do not help.
- Developing a one-size-fits-all approach (e.g. rolling out across the country a program that is successful in one context on the assumption that it will be successful everywhere) does not result in effective services.
- Assuming we, as outsiders to a particular community, know what will work best in that community does not result in programs that meet community needs.

What we don't know

- How to significantly increase the early childhood Indigenous workforce; to train and support Indigenous workers who will remain in their communities; and to build structures to enable Indigenous workers to develop a career path.
- How to develop unique Indigenous services for Indigenous families rather than rely on models developed for and tested with non-Indigenous groups.
- How to increase trust of Indigenous families in mainstream services and non-Indigenous staff.
- How to improve governance of Indigenous organisations to improve service delivery.
- How to best deliver programs to Indigenous families and their children in the various Australian contexts, including across geography and subcultures.
- How to support Indigenous and non-Indigenous people to move forward together in partnership in service delivery.
- How to create the funding and management structures to operate truly integrated services.

Introduction

The National Partnership Agreement for Indigenous Early Childhood Development (COAG 2008a) aims to halve the gap in mortality rates for Indigenous children under five within a decade, halve the gap for Indigenous students in reading, writing and numeracy within a decade, and ensure all Indigenous 4-year-olds have access to quality early childhood education within five years, including in remote areas.

Currently 75% of Indigenous children between 3.5 and 4.5 years of age do not attend any formal early childhood service (FaHCSIA 2009). Of those who do, 34% are attending a community-based (i.e. non-school) program, 30% a kindergarten or pre-first year of school program in a school setting or a preschool, 21% a child care program and 2% family day care. Of the infant cohort, 29% had attended a playgroup or similar group in the month prior to data collection. Alternative care was provided for the children by the child's other parent (51%), grandparents (49%), other relatives (30%) and a parent living elsewhere (6%).

In order to achieve these targets it is important to understand that early childhood education cannot be separated from child, family and community health and wellbeing. In acting on this understanding, Indigenous early childhood programs in Australia are sometimes interpreted as 'leading the way' in current attempts to reinterpret early childhood education as a strategy to address social inclusion (Sims et al. 2008). Internationally, such a perspective is often positioned as quality early intervention or, more recently, integrated service delivery (Azzi-Lessing 2010; Katz & Redmond 2009; Melhuish et al. 2010) which is known to be particularly effective for



addressing disadvantage. Addressing disadvantage in the early years requires a holistic approach that addresses children and families in the context of their communities and cultures (Hallam 2008; Watson & Tully 2008), taking into account children's physical and mental health, emotional wellbeing and development.

This means, in considering Indigenous early education, non-Indigenous policy makers and service deliverers need to clearly understand their assumptions based on experiences with non-Indigenous early education. For example, in non-Indigenous contexts early education services are often perceived to be primarily centre-based learning programs such as long day care services, kindergartens and preschools whose role it is to prepare children for school. There is no doubt that readiness for school is a key factor in closing the gap between Indigenous and non-Indigenous Australians (Australian Government 2010), but it is not the only factor to consider and programs are now beginning to address issues such as family support and the provision of non-centre-based services.

Background

Footprints in Time – The Longitudinal Study of Indigenous Children-Key Summary Report from Wave 1 (FaHCSIA 2009) provides a picture of Indigenous families across Australia that does not claim to be representative, but is

'...relatively consistent with the distribution of ABS estimates of the numbers of Indigenous children aged 0 to 5 years across Australia'.

Nearly half of all Indigenous families have a partner living in the home and average families consist of five people living together. Grandparents are the primary carers for 3% of children. The majority of Indigenous children (81%) live in a rented home and 16% are likely to have lived in four different houses by the time they were 4. Unpartnered parents were less likely to list wages/salaries as their main source of income (16% compared to 61% of partnered parents).

Most parents spoke English (95%) and 20% spoke one or more Indigenous languages: 15% of the children are learning two languages and 4% three or more. Many Indigenous parents believed they had someone to talk to when they were sad (74%) or had an older person to look out for them (71%). Despite this, many families experienced considerable stressors, with nearly half reporting 3–6 major life events in the last year and 19% reported 7 or more. Common stressors included pregnancy/birth, death of close friend or relative, crowding, illness, employment or financial pressures.

As more waves of the study are completed, *Footprints in Time* will provide insights into the likely impact of pre-school and other program involvement on early educational experience (FaHCSIA 2009).

Some Indigenous families experience complex and multiple stressors: poverty, mental health concerns, addiction, and/or family violence (Bromfield et al. 2010), along with social exclusion. These complex and multiple factors are a significant risk factor for child abuse and neglect (Sam 1993). Aboriginal and Torres Strait Islander children are 7.5 times more likely than non-Indigenous children to experience abuse or neglect (Berlyn & Bromfield 2010), although much of that difference arises from different rates of neglect rather than other forms of abuse: 36.3% of substantiated cases of neglect for Indigenous children and 27.1% for non-Indigenous children. These high rates of neglect are strongly associated with the economic disadvantage so prevalent in Indigenous communities (Berlyn & Bromfield 2010).

The National Framework for Protecting Australia's Children (COAG 2009b) takes a preventative approach in addressing family preservation/support. In this approach, where policy may be ahead of community practice, a social marketing approach (Horsfall et al. 2010) would be useful in increasing public awareness of the importance of parenting, child rearing and early childhood services generally, in order to create communities more supportive of families and more child- and family-friendly.



The framework also offers a targeted approach focusing both on families who are vulnerable and families who are at risk. Such families are often characterised as ‘hard to reach’ because they tend not to engage in available services. However, McDonald (2010) suggests that often it is the services themselves that are ‘hard to reach’ and that we would be more successful engaging families if we were to reframe our thinking—to avoid seeing the problem as owned by the families but rather see it as our problem that we are not delivering services that families can access, want or trust. This is a key factor to consider when working with Indigenous children, families and communities.

What evidence is there that early childhood programs address disadvantage?

We now recognise that basing national initiatives on:

...evidence from randomised trials provides little guidance on how to replicate these models successfully; neither does it provide the ability to generalise findings to diverse populations and diverse contexts...Thus, not all would agree that programs with the ‘best’ evidence should be given priority (Barnes 2010).

Thus, although research evidence such as that discussed below is important, it is also necessary to view the evidence with a sound understanding of the importance of context.

Studies of early intervention programs have shown that quality early childhood programs make a significant difference to lifelong outcomes. The High/Scope Perry program, which offered a quality centre-based program for children of disadvantaged backgrounds in America in the year before they began school, has been shown to improve educational and employment outcomes, mental and physical health, and decrease risk for incarceration, teenage pregnancy and welfare dependency (Schweinhart et al. 2005). In economic terms, this United States study has quantified that an investment of \$1 in the early intervention (brought up to today’s value) provided a return on investment of \$17. Given a greater level of investment in early childhood in Australia, the return on investment here may be anticipated to be smaller.

Olds et al. (1998) demonstrated that intervention begun earlier in children’s lives has a greater return. Nurses visited low-income, first-time mothers during pregnancy and for 2 years after the birth. Child abuse rates were reduced by 79%, and mothers had less time on welfare and fewer arrests and convictions compared to the control group mothers. At 15 years of age, children were 55% less likely to have been arrested and had fewer behaviour problems. By age 15 the return on investment was calculated as 4:1, with the break-even point occurring 4 years after the intervention. By 2005 this program was operating across 20 states of America and reaching 20,000 families (Goodman 2006).

The Effective Preschool and Primary Education study in the United Kingdom randomly selected 3,000 3-year-old children from regular preschools (compared to the special demonstration programs above) in an attempt to evaluate the impact of preschool education on outcomes (Sammons et al. 2007a; Sammons et al. 2007b; Sammons et al. 2008; Siraj-Blatchford & Woodhead 2009). The children who attended preschool showed greater cognitive and language gains, which have remained evident up to age 11 (the children’s current age). The quality of the home learning environment was shown to have a major impact on child outcomes.

What are the characteristics of successful early childhood programs?

Successful early childhood programs offer a range of services depending on the needs of the children, families and communities in which they are located.



Parent education

The risk of poor child outcomes increases when parents do not have the necessary child rearing skills for the context in which they live, and when they lack social support and have little understanding of child development (Barlow et al. 2005; Holzer et al. 2006). The success of parent education programs depends partly on the material offered and partly on the way it is delivered. Programs offering learning opportunities that include skills training, information, cognitive retraining and concrete services are more successful.

Programs need to be delivered using a strengths-based approach that recognises the expertise parents bring to the learning, and builds on that expertise (Early & GlenMaye 2000; Sims 2002). Generally, the more intense and longer lasting the program, the better the outcomes for parents and children. Holzer et al. (2006) reviewed 20 evaluations of parent education programs that had used an experimental method. Of these, 18 (5 of which were Australian-based including the Triple P-Positive Parenting Program) reported the parent education had led to a decline in child maltreatment, a reduction in negative parental attributions, an improvement in the use of positive child discipline strategies, increased parental competence and self-efficacy and improved knowledge of child development.

Healthy Family Circle Program (Lawrence et al. 2010)

This program is run jointly by Relationships Australia (NSW) and Mudgin-Gal Aboriginal Women's Corporation. Workshops, activities and opportunities to yarn all aim to empower women through sharing stories and experiences. Women attending the program have achieved a range of life goals, including completing training in playgroup facilitation, governance, sports coach and community support work. Women also act as mentors for other women.

Yorgum Aboriginal Family Counselling Service (Lawrence 2010)

This is an Aboriginal-controlled service, with strong roots in the local Nyoongar community. Operating in Perth, it offers counselling to Aboriginal children who have experienced or witnessed family violence or abuse, link-up services for members of the Stolen Generation, support for Aboriginal grandmothers' groups, and community education/community development programs. Trained counsellors, a psychologist and an art therapist work for the organisation and all are Aboriginal. The service arose from a group of women who yarned, under a tree in 1991, about their concerns around Aboriginal family violence and its consequences. Nyoongar and Aboriginal English are used routinely in the service.

Home visiting programs

A recent review of home visiting programs (Higgins et al. 2006) shows that it is possible to reduce the prevalence of child maltreatment through such a program (for example, David Old's nurse home visiting discussed above) and improve some child outcomes and general parenting skills. However, credible evaluations using experimental methods are rare, so it is difficult to draw definitive conclusions from the available evidence.

Home visiting programs are diverse. Sometimes home visitors are employed to demonstrate activities parents can undertake to facilitate children's development. These visits sometimes are very visitor-driven and don't take into account the reality of families' lives. Other programs focus more on building relationships with parents and work with them to develop learning opportunities using the normal routines and activities of the day. The effectiveness of programs depends more upon how they are operationalised, rather than on the site of program delivery (i.e. the home) (Sims 2002).



Key features of successful home visiting programs include those with (Higgins et al. 2006):

- an identified target population (e.g. teenage mothers)
- more highly qualified and trained home visitors (professionals versus paraprofessionals versus community volunteers)
- home visitors with experience in dealing with complex risks
- sufficient time to establish relationships and work through behavioural and cognitive changes
- the ability to be flexible to meet diverse needs of families (compared to offering a specific type of service and that service only)
- a focus on the family—a holistic view involving working with parents, extended family and children as appropriate for each family. It is important to remember that the family is not a homogenous group (Warin 2007), and that each family member will have different, and perhaps competing, issues.

Family Home visiting—Aboriginal Research Partnership (Sivak et al. 2008)

All families are offered a home visit following the birth of their baby, with Aboriginal families able to have an Aboriginal Cultural Consultant visit as well. For those families whose additional needs will best be met by a sustained home visiting program, this is offered up until the child is two years of age. Visits are initially weekly, then fortnightly, and in the second year of life, monthly. The service is run under the auspices of the SA Children, Youth and Women's Health Service. Home visitors are trained in the Hilton Davis Partnerships with Parents model. Protocols were developed for engaging Indigenous families and children. The evaluation indicated parents appreciated practical assistance, information and referrals for other issues (e.g. housing) and identified increased parental self-confidence in their parenting. Flexibility was a key factor—the ability to change appointments, location, duration and frequency of visits and the ability to address the needs of other members of the family (not just the mother–child dyad). The Indigenous cultural consultants' role in working with Indigenous families was highlighted as a key factor in engaging and working with Indigenous families.

Integrated early childhood service delivery

Combining a range of different early childhood services so that families experience 'wrap-around' (Brechman-Tousaint & Kogler 2010) delivery is the key principle of integrated service delivery. Such delivery has become strongly associated with the Australian Government's social inclusion agenda (Izmir et al. 2009). Not all integrated services need to be co-located, and decisions about different ways of integrating depend on the community and agencies involved. For example, service integration can:

- be a network of programs that talk with each other and deliver separate services
- be a lead agency/core group of agencies planning services together, each accountable to their own agency
- share service delivery and planning across multiple agencies (Rogers & Moore 2003)
- share management and funding across the multi-agency group.

Integrated services may offer a range of programs depending on the needs of the community. They usually include some form of child-focused program (such as facilitated playgroups, child care), parent-focused programs (such as parent education, home visiting) and social capital building programs (opportunities for parents to network and build relationships, community functions to bring people together, linking business to community, etc.).

They may include special needs programs relevant to each community (programs for specific culturally and linguistically diverse groups, inclusion support, addiction programs, counselling, family violence prevention programs, adult education, preparation for employment, etc.) (Sims 2010a, b).



Sure Start—an integrated approach

Sure Start in the United Kingdom required agencies to work together with the aim of creating seamless service delivery relevant to each specific community, to families in very disadvantaged communities (Melhuish et al. 2010). Evaluations of Sure Start show mixed results. The latest followed 7,000 children and measured outcomes at 9 months, 3 years and 5 years, comparing them with a group from the Millennium Development Study selected from comparable areas of high disadvantage (NESS 2010). Children growing up in Sure Start areas are less likely to be overweight and more likely to be physically healthy. Mothers created a more stimulating home learning environment but were also more likely to be depressed. Homes in Sure Start communities were less chaotic and parents used less harsh discipline.

Features of successful interventions

Irrespective of the type of program offered, the way in which services work with families is a key determinant of success. Rowlands (2010) argued: ‘What was actually done for children and families determined outcomes rather than the structural integration of services’, and the same applies across different structures. Key components of successful service delivery include the following:

- Working holistically—recognising that families live in communities that shape learning opportunities available to children and the way in which parenting occurs.
- Working from strengths—recognising that all families and children have strengths. It is essential to remember that each family/community/culture has different strengths, not all of which are recognised as strengths in a white, middle-class world. Families with complex and multiple challenges have strengths that have enabled them to get through one day at a time. Recognising and validating these strengths can be a challenge for practitioners, but is an essential component of demonstrating respect and building a relationship based on trust.
- Working to empower families—listening to families and working with them towards outcomes of their choice.
- Focusing on relationship building—none of this can happen without trust between service personnel and families. Time needs to be allocated to build relationships, and value needs to be placed on these activities (sitting and yarning may be a much more effective use of time than trying to complete a formal questionnaire to identify family priorities).
- Working with families and children where they are—reaching out into the community and making contact in places where families already spend time (e.g. in the park, at the shops).
- Working in a way that avoids labelling—this might involve using a universal venue so families do not feel stigmatised accessing a service, or creating informal spaces rather than using desks and a reception counter.
- Working to build community networks—no one service can offer everything; however, a worker with good networks can work with families across multiple agencies and ensure that service delivery is effective and efficient.

The report *Indigenous families and children: coordination and provision of services* examined service provision, service coordination, Indigenous families and children in Communities for Children sites as part of the evaluation of the Stronger Families and Communities Strategy 2004–2009 (Flaxman et al. 2009). The report identified factors that facilitate or hinder service provision and outcomes, and considered sustainability issues. The author noted research showed that if Indigenous families’ access to services is to increase, both Indigenous-specific and mainstream services need to be safe, comfortable and culturally appropriate for Indigenous families and children. In relation to sustainability, it was found that even a four-year program was too short for services to establish effective partnerships in the absence of pre-existing relationships, particularly in remote areas. However, some respondents believed families and young children were benefiting from the Strategy in the areas of health, wellbeing, parenting skills and young children’s preparation for learning.



Jalaris Aboriginal Corporation, Derby, Western Australia (Secretariat of National Aboriginal and Islander Child Care 2005)

This program began as a drop-in centre for young mothers and their children, and employed family support workers and trainees. Attendance rapidly grew to over 400 families and demand soon outstripped resources. There were concerns that parents were using the service to babysit and were not engaging in programs themselves. Staff reflected and developed programs on parenting and health education (including child care). Jalaris negotiated with the local TAFE to provide an Aboriginal short course in nutrition, cooking and hygiene for 10 students taught at Jalaris. The service offers 'good food barbecues'. On school days a trainee works with children to make their own nutritious lunch at the centre. Children who are truant often come for lunch and can be encouraged back into school. Argyle Diamonds and Western Metals Corporation provided a caravan that is used for child and maternal health services and staffed by Aboriginal family support workers who have additional training in nutrition and health. Family support workers are able to work directly with families and, in addition, are focusing on building self-esteem in children. The service coordinates school holiday bush camps for school children and local elders introduce local bush tucker and medicine. There is a women's room fitted with a computer, fridge, microwave, sewing machines, television and video, and the women work on a range of projects including producing hand-painted bags, clothing, curtains and artwork. The service works with other agencies in the community and has an advisory group consisting of representatives from a wide range of agencies and government departments. Associated with the service is a young women's centre that teaches a range of life skills such as computing, crafts, cooking and driving. The local TAFE runs literacy and numeracy courses through the centre. Workers (training in child care) run a crèche at the centre.

How does this apply to early childhood Indigenous programs?

Recognising the unique position of Indigenous Australians and the impact of colonisation, exploitation and generations of disadvantage is essential in thinking through service delivery in Indigenous communities and with Indigenous families. The principles identified should guide engagement with communities and families. True respect, for example, recognises that Indigenous families have significant strengths—strengths that those enmeshed in the hegemonic culture are likely to overlook. For example:

...the high value placed on independence in the dominant culture has led to conditions such as 'enmeshment' and 'co-dependency' being regarded as dysfunctional. However, such judgements are culturally relative, and can lead to misunderstanding and misdiagnosis (Libesman 2004).

Working with Indigenous communities and families requires cultural competence, defined in the Early Years Learning Framework for Australia (DEEWR 2009) as requiring:

- skills—for living and working in Aboriginal and Torres Strait Islander contexts socially and professionally
- knowledge—an understanding of culture, history and contemporary Aboriginal and Torres Strait Islander societies, including the importance of connectedness to land and spirituality
- attitudes—a willingness to explore differences in individual and societal values, beliefs and practices.

Ultimately cultural competency is about building relationships founded on mutual respect and trust (Secretariat of National Aboriginal and Islander Child Care 2005).



Women's Indigenous Supported Housing Project NSW (Frow 2010)

Families NSW, through the Aboriginal Sustained Home Visiting Program, began visiting Indigenous women in 2000 before the birth of their child and for a further 2 years. They found that many of their young mothers were homeless (some living out of cars, or 'couch surfing'). This affected their mental health, their ability to parent and their access to health services. Families NSW in consultation with a range of agencies formed a partnership to develop a support program. This program used a strengths-based approach and aimed to improve parenting skills, living and social skills, enhance self-esteem, build confidence, enhance children's health and social wellbeing and provide family support. Mothers are allocated housing with rent subsidised to public housing level, and are given assistance to furnish the house. A case plan is developed and intensive family support offered through the Aboriginal family worker scheme. Home visiting begins intensively and tapers off over 12 months with regular reviews. The young women are supported to join other groups (such as the supported playgroup and the Solid Koori Families group). Domestic and family violence prevention is a strong focus of the family work. At 9 months there is an assessment of ability to transition into longer term tenancies with Housing NSW, which guarantees a placement in the same area, ensuring that the young women can still access the community services they have been introduced to, and still retain care of their children. Between 2006 and 2008, 13 women came through the program and all have maintained stable tenancies with Housing NSW and maintained care of all their children.

Successful programs are culturally strong (Munford et al. 2010) and map onto forms of early childhood care and education held to be important in the local community (Guilfoyle et al. 2010). For example: 'Aboriginal and Torres Strait Islander culture and spirituality are increasingly recognised as a strength and protective factor for our families and children' (Larkins 2010). Thus successful programs support the Indigenous notion of the strong child who is an equal member of society with the right to act autonomously and make his or her own decisions (Warrki Jarrinjaku ACRS Project Team 2002):

...the central positioning of Indigenous children as active members of the community who are entitled to make decisions on their own behalf, and who are listened to and respected for who they are in the here-and-now of their everyday lives, does not sit well with a system based on minority world constructions of the child as 'developing' (Hutchins et al. 2009).

Successful programs recognise the importance of family and community. 'Educators honour the histories, cultures, languages, traditions, child rearing practices and lifestyle choices of families. They value children's different capacities and abilities and respect differences in families' home lives' (DEEWR 2009). Building parental confidence and efficacy through working together and involving extended family members offers positive community development outcomes (Secretariat of National Aboriginal and Islander Child Care 2004).

Jilkminggan Jet Crèche, Northern Territory (Hutchins et al. 2007)

Starting out as a playgroup in the local recreation hall, Jilkminngan Jet Crèche ended up with over 50 children on its list. The crèche focused on health and nutrition, providing both morning tea and lunch. Fruit, vegetables and fresh eggs from the community garden were used to add to food purchased from the shop. It is not uncommon for some children to arrive at lunchtime, but staff position this as positive. Pregnant and breastfeeding mothers are also encouraged to attend so they can enjoy a healthy lunch.

Successful programs are developed with the community and thus reflect each unique community: one size does not fit all (Stanley et al. 2003). This requires a recognition that Indigenous Australians are not all the same; they do not speak the same languages nor live in the same regions (Rigney 2010). It requires recognising that not all communities are the same, even if statistically they may appear to have the same levels of disadvantage. While



programs can have common intent, aims and principles and draw on the same evidence-base, they often need to evolve out of each individual community with extensive involvement of local people to ensure that what is offered is what community members want (Edwards et al. 2009).

Successful programs reflect issues of place: how to effectively use space to create a feeling of safety. For example, it may be more appropriate for workers to meet with families under the trees in the local park than to ask them to come into an office to talk. More effective connections with local families may be made at the footie at the weekend, or playing bingo at the local pub than at a formal open day.

There is clear evidence that employing local Indigenous people in an early childhood program increases participation rates (Rigney 2010; Sims et al. forthcoming). This requires addressing barriers that limit Indigenous participation in the early childhood workforce including issues around cultural safety in the workplace, inflexible employment patterns and limited opportunities to train in the workplace (Hutchins et al. 2010). This also requires thought around supporting career development for Indigenous workers. Indigenous workers beginning employment in their local communities have the right to progress their careers in ways that may move them away from direct service delivery to local Indigenous communities. Such career progression may cause tension for Indigenous workers who may face conflicting obligations from family, community and employers.

Ikuntji, Northern Territory (Hutchins et al. 2007)

Two hours by road from Alice Springs is Ikuntji, a community attempting to resolve child care staffing issues. The community council employed a non-Indigenous woman from outside the community as a facilitator/mentor to work with staff to develop the service. At the same time, a local grandmother was appointed as director of child care. Both worked together to develop the service.

They employed local women for a set number of hours each week, all of whom are paid for sick days and personal leave days. They recognise and respect cultural and family responsibilities: time off for funerals and other cultural business is paid at a lower rate. This enables the centre to employ relief staff while maintaining the commitment of existing staff.

Culturally specific services

The Early Years Learning Framework requires educators to:

...make curriculum decisions that uphold all children's rights to have their cultures, identities, abilities and strengths acknowledged and valued, and respond to the complexity of children's and families' lives. Educators think critically about opportunities and dilemmas that can arise from diversity and take action to redress unfairness. They provide opportunities to learn about similarities and difference and about interdependence and how we can learn to live together (DEEWR 2009).

Current service delivery offers opportunities in both non-Indigenous and Indigenous-specific program settings to achieve this.

Birrlee Multifunctional Aboriginal Children's Service, Tamworth, NSW (Hutchins et al. 2007)

This is an Indigenous child care centre licensed for 39 places. A bus collects up to half of all the children each day and returns them home. Families with children experiencing health and disability problems, developmental delays and behavioural issues are included in the service, which includes a comprehensive range of health services delivered by a registered early childhood nurse with midwifery and child care qualifications. A nutrition program offers morning and afternoon tea and lunch and, for some children, breakfast as well. The centre is seen as successful by the community because of its combination of support services.



Indigenous children attending non-Indigenous child care services are, by the nature of their attendance, like other minority groups, often learning to deal with the non-Indigenous culture and cultural domination that goes along with this, an essential skill for survival in the broader Australian context (Borg 2004). The Early Years Learning Framework (EYLF) and other programs seek to ensure that services support children in this struggle through developing and implementing individual plans addressing each child's needs/experiences in early childhood services. However, many programs still struggle with how to manage this (for example review the discussion boards associated with the Early Childhood Australia Facebook page addressing the EYLF at <http://www.facebook.com/eylflplp>). As a consequence, some argue from an ideological perspective that early childhood programs are best delivered in segregated settings that recognise (Hutchins et al. 2007):

- the primacy of culture
- the primacy of self-determination and Indigenous sovereignty and the related principles of self-management and community control
- the need to develop capacity building for a marginalised/colonised community in a dominant/colonial context
- the primacy of addressing children's development needs
- the primacy of holistic, strengths-based community development approaches to child welfare encouraging and facilitating communities 'doing it for themselves' rather than 'being done to'.

Clearly there is tension between those who believe a social inclusion agenda is best achieved by ensuring that non-Indigenous services are sufficiently skilled to offer appropriate programs to Indigenous children, families and communities, and those who believe that social inclusion is best achieved through providing segregated services.

Communities for Children East Kimberley (Save the Children 2010)

The East Kimberley C4C programs have been operating for 7 years and are aimed at providing support for parents and children who are vulnerable or at risk, with the ultimate aim of improving child development outcomes, parenting and child safety. Seven programs were developed:

- Community Activity Fund—small grants to groups and individuals wanting to offer innovative community-based early childhood initiatives.
- Deadly Blokes and Kids—uses music, song writing and performance for fathers and their children to reintegrate men into the family. Fathering workshops are also available.
- Early Years Network—regular meetings between different agencies to enhance collaboration. Training is offered by the network as well.
- Kununurra Early Learning—activities each week in partnership with the Kununurra Neighbourhood House for parents, carers and children up to 12 years old.
- Mums and Bubs—with the Ord Valley Aboriginal Health Service—early learning and care activities for children aged 0–5 years and their mothers.
- Warmun Early Learning Centre—early childhood education program for children aged 3–5 years. The centre operates 4 days a week, 8 am – 2 pm.
- Wyndham Early Learning Activity—provides activities for pregnant women, parents and children aged 0–5 years. This includes nutritional cooking, cultural activities, how to play with children and an annual baby expo to celebrate all babies.



Facilitators and barriers

- Cultural competency requires more than an awareness of Indigenous culture, but a willingness to engage with heart as well as mind; an engagement many service providers find difficult given the mismatch between Indigenous and non-Indigenous cultures on fundamental beliefs around children, child rearing and the roles of parents and community.
- The history of colonisation has resulted in generations of disempowerment. Present-day actions in service delivery can continue to feed mistrust and disempowerment.
- Policy makers and program developers need to understand that evidence-based practice does not necessarily translate into effective Indigenous programs.
- Improving outcomes for Indigenous families and communities needs to begin with families and communities themselves, addressing their own priorities in their own way.
- Agencies often find it difficult to step back and allow time for trust to develop. The nature of government funding (often available within a specific program for a specific time to foster specific outcomes) in itself can create pressure for action that undermines the time needed to build trust and genuine partnerships.
- Agencies and pre-service educators need to facilitate ongoing training for Indigenous workers to create an Indigenous early childhood workforce with the skills and support to work in Indigenous ways in Indigenous communities and in Indigenous programs.
- Agencies need to offer training to all staff to facilitate development of cultural competency. This requires movement beyond awareness of cultural differences to reflecting on fundamental values and beliefs, understanding how these affect practice, and developing the skills to work to support children and families whose goals and practices are significantly different from their own.

Conclusion

The National Early Childhood Development Strategy (COAG 2009a) argues the need to strengthen universal maternal, child and family health services, provide support for vulnerable children, engage parents and the community in understanding the importance of early childhood development (ECD), improve early childhood infrastructure, strengthen the workforce across ECD and family support services, and build better information and a solid evidence base. This resource sheet addresses these issues as relevant to Indigenous early childhood education and services.

Given that the experiences children have in their early years shape lifelong outcomes, it is essential we ensure those experiences are as positive as possible (Allen 2011; COAG 2008b). Waiting until children start school to offer quality learning opportunities is too late. If we wish to address the gap in outcomes between Indigenous and non-Indigenous Australians we need to have a more sustained focus on appropriate Indigenous programs. We need to recognise the strengths evident in current Indigenous programs and their role in leading our thinking around alternative approaches to working in early childhood.

Research in Australia and internationally indicates the need to develop the following:

- High-quality, well-resourced integrated family support programs that have a holistic focus, combining education, health and wellbeing initiatives into seamless opportunities for vulnerable and at risk children, families and communities. Such programs need to draw on evidence and best practice but often be developed locally and be sufficiently flexible to address local needs and value existing strengths. Indigenous programs need to include Indigenous staff and address the reality of Indigenous family lives. Non-Indigenous focused services need Indigenous workers.



- High-quality non-parental care options (programs operating under the National Early Childhood Quality Framework such as child care, family day care, preschool, occasional care, playgroups) offering children learning experiences that many families find difficult to duplicate. We need a mixture of non-Indigenous and Indigenous services, both with culturally competent and/or Indigenous staff. These services can be funded through a combination of mainstream and Indigenous-specific funding as appropriate.
- High-quality preschool experiences such as those targeted in the National Partnership on Early Childhood Education (universal access to preschool initiative) in the year before school that use appropriate early childhood teaching and learning strategies to ensure children have the necessary skills to be able to cope with schools (although ultimately one could argue that we need to change the schooling system to ensure it has sufficient flexibility to be 'ready' for the children who will be attending, Dockett et al. 2010).

A key action needs to be raising awareness of the importance of early childhood, particularly for vulnerable groups, among the whole Australian community. Social marketing strategies (Horsfall et al. 2010) are particularly effective in achieving such outcomes, and particularly so when they are supported by high-quality services demonstrating successful outcomes. Any social marketing, consistent with the National Early Childhood Development Strategy, needs to recognise that children are not the sole responsibility of their parents, but a responsibility shared by the whole community.

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Terminology

'Aboriginal and Torres Strait Islander' and 'Indigenous' are used interchangeably to refer to Australian Aboriginal and Torres Strait Islander peoples. The Closing the Gap Clearinghouse uses the term 'Indigenous Australians' to refer to Australia's first people.

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Electronic resources

Australian Research Alliance for Children and Youth: <<http://www.aracy.org.au/>>.

Early Childhood Australia: <<http://www.earlychildhoodaustralia.org.au/>>.

The Founders' Network: <<http://www.founders.net/>>.

Promising Practices Network: <<http://www.promisingpractices.net/programs.asp>>.

Secretariat of National Aboriginal and Islander Child Care: <<http://www.snaicc.asn.au/>>.

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