



# Inquiry into Early Intervention into Learning Difficulties

to the Standing Committee on Social Issues

**December 2000**

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## **INTRODUCTION**

UnitingCare Burnside (Burnside) is an agency of the Uniting Church in NSW working with disadvantaged children, young people and families. Burnside provides a range of early intervention and family services as well as out of home care, family counselling and family mediation services.

### **Burnside's statement of purpose:**

*Burnside stands in the Uniting Church tradition of compassion and concern for justice. Our role is to enhance the life opportunities of disadvantaged children and families.*

### **Our service goals are:**

- To protect and nurture children and young people who are unable to live with their families by providing quality care;
- To develop preventative services aimed at children and young people at risk of abuse and/or admission to care;
- To strengthen the capacity of vulnerable young people and families within the community;
- To assist in the development of networks and self-help initiatives which support families and strengthen communities;
- To promote just and equitable social structures aimed at reducing the causes of social disadvantage.

Burnside has been providing services since 1911 and has developed a range of programs that work with vulnerable children, young people and families. We pride ourselves on innovation, respect for all who use our programs and integrity in service provision. We strive to be a best practice organisation with a commitment to client feedback, developing a strong evidence base for all programs and having a child focussed approach in providing our services.

Burnside's policy and advocacy work is informed by the day to day practice of our programs. This helps ensure that our contribution to governmental and other inquiries is shaped by practical service knowledge and is rooted in the experience of disadvantaged people.

Burnside welcomes the opportunity to submit information to the NSW Legislative Councils Standing Committee on Social Issue's Inquiry into Early Intervention into Learning Difficulties.

The purpose of this submission is to indicate the agency's thinking concerning the scope and type of initiatives that are needed to address learning difficulties, and which will provide all children with a better platform for educational achievement and the development of their cognitive, social and vocational capabilities. The importance of a much greater investment in quality early childhood services is fundamental to our argument. Increasingly, research reveals that the early childhood years and the caregiving children experience in those years, lays the foundation for later learning, behaviour and health. We must plan, fund and support early childhood services in a way that more closely reflects the significance of this period of life.

Given Burnside's purpose, this submission focuses on the sorts of early intervention strategies that address the needs of more disadvantaged children and families. The negative educational outcomes of poverty are well established as are the effects of disadvantage on the care and development of children. As described below we will employ a broad definition of learning difficulties.

This submission is set out as follows: a brief comment on the definitions being used is followed by an executive summary which outlines the chief recommendations arising from the submission. The next section provides evidence for the impact of poverty on children's educational and behavioural outcomes. The argument here is that poverty and other disadvantage (especially early on in life) increases the incidence of learning and behavioural difficulties. Therefore, programs designed to support families and ameliorate the negative educational impacts of poverty are an important and necessary strategy to address the learning difficulties of children in NSW. The next sections address the main terms of reference of the inquiry. These include a summary of the changes that will be necessary to ensure significant progress in addressing learning difficulties through early intervention, plus a section on the educational difficulties experienced by children and young people in care, which is a particular focus of Burnside services.

This submission addresses broader preventative aspects rather than strategies for working with children with specific learning difficulties at the microlevel.

## **DEFINITIONS**

This submission will employ the following definitions. 'Early' will be defined as that period focussing on children aged eight years and under, and 'learning difficulties' will be defined broadly as any difficulty encountered by the child which impedes their later effective learning within the preschool/school system. As such, it will cover not only physical, cognitive or neurological delays, but also socio-economic barriers to effective support for the child's learning within the current state education system.

## EXECUTIVE SUMMARY

UnitingCare Burnside (Burnside) affirms Government interest, active support and planning for effective early intervention services for children with learning difficulties.

In approaching this issue, Burnside has defined 'early' as that period from birth to eight years of age, and 'learning difficulties' as any difficulty encountered by the child in his/her development which could impede later effective learning within the education system. Within this approach the relationship between poverty, family functioning and negative educational outcomes (including learning difficulties) is emphasised. Strategies to support children and families and ameliorate the effects of poverty are therefore essential.

In addressing this issue, Burnside uses its knowledge derived from program experience and from available research to support the following recommendations:

### Recommendations

1. That a comprehensive and integrated system of early childhood services be assured through genuine collaboration by all who provide services to children and families, including government departments, community agencies, private providers and voluntary organisations. In order to facilitate this it is important that:
  - All politicians within the NSW State parliament make a bi-partisan commitment to the coordination of effective early childhood programs as a critical immediate and long-term investment in the development of the State. This commitment should be for a minimum three terms of government.
  - That the relevant Government Departments be directed by Parliament to develop strategies to integrate and coordinate the wide-ranging resources for early childhood already available at different levels across the state, in order to ensure that the services they give are comprehensive and thorough.
  - This direction be accompanied by adequate funding and resourcing to ensure the effective delivery of outcomes.

2. That strategies and planning be based on what we know from research and evaluations to be most effective, and that research and evaluation projects are a supported and expected outcome for early childhood programs. The main characteristics of effective programs, as outlined in this submission, are that they:

- **Have multiple components in order to address multiple risk factors.** E.g. a combination of practical and emotional support for parents, parent training and child care, child training and educational support.
- **Combine family focused and child focused elements.** Research supports strongly the contention that both need to be addressed in order to obtain the most positive outcomes.
- **Start early.** Current evidence on brain development, for example, suggests that beginning services in infancy is likely to generate even larger effects than waiting until a year or so before school.
- **Are intensive.** Home visiting programs should have a duration of at least two years and the frequency of visits should be no less than fortnightly. Quality child care and other educationally enriching programs should operate on a full day basis.
- **Maintain quality.** The most effective childcare outcomes, for example, are from services with adequate child/staff ratios, relatively small group sizes, and where staff are professionally trained.

3. That a key strategy should be that of ongoing training and resourcing of staff within children's services to identify and address early signs of educational delay.

4. That more intensive support in all programs be directed to the most disadvantaged groups, as these groups have the highest risk factors for educational delay/ failure.

5. That family focused services eg home visiting, be freely available for all families, with resources being also targeted to communities of high disadvantage.

6. That there be a state-wide provision for free attendance for all three and four year old children in the state at quality child care services for a minimum of one day per week, and two days per week for those children from more disadvantaged communities. Further that early childhood services should develop parent education and support initiatives such as parent/child play programs.

7. That a 'children's futures levy' be instituted to raise necessary funds for the above initiatives and be accompanied by an information campaign that promotes the benefits of early intervention for children and families, communities and the state as a whole. Note: this initiative would be best developed at a national level but is still applicable to NSW.

8. That outcome measures be developed in order to more adequately assess program's effectiveness in reducing learning difficulties.

9. That a review of the salary structure, conditions and career paths of early childhood professional be conducted with a view to implementing strategies to more adequately value the significance of their work.

10. That ongoing funding be made available for community based early intervention programs that support early childhood workers in identifying and addressing learning difficulties in the under fives. Specifically, the Supplementary Services Program and the Special Learning Needs Program should be maintained.

11. That steps be taken to ensure that General Practitioners receive training and support in the identification of learning difficulties and information regarding appropriate referral options.

12. That teachers, particularly teachers of Kindergarten - Year 2, receive ongoing training in identification of learning difficulties and strategies to address such difficulties.

13. That funding of State School counsellors be increased to ensure that adequate assessments of students with learning difficulties can be made in the early years of school.

14. That the number of Reading Recovery staff be maintained at levels able to effectively service the number of referrals.

15. That promising program models such as NEWPIN, the Burnside Family Learning Centre and the Claymore Integration project be expanded to areas of high need throughout NSW.

16. That the educational needs of children and young people in care be placed at the top of the government's agenda to ensure that key government departments are working to remove the barriers that prevent this population's learning difficulties being addressed.

All these strategies should be placed alongside a Government strategy to tackle the incidence of poverty within the communities of NSW, as poverty itself is the greatest indicator for the need for early intervention.

## **THE LINKS BETWEEN POVERTY, FAMILY FUNCTIONING AND LEARNING DIFFICULTIES**

A range of studies has identified how factors associated with poverty impact on children's health, development, school performance and employment prospects (McClelland, 2000). A United States study by Chase-Lansdale and Brooks-Gunn (1995) concluded that child poverty was associated with reduced cognitive development, problems in adjustment and lower school achievement as well as contributing to poor peer relations, depression and delinquency. The Australian Brunsick Family Study (Carmichael and Williams, 1987) found that cognitive functioning at the age of 11 was strongly related to the mother's years in schooling, degree of poverty during the child's first year and current poverty. Furthermore, the longer the child was exposed to poverty the greater the negative impact on their IQ and reading scores. Later work by Brooks-Gunn and Duncan showed similar findings (1997).

In a review of United States studies based on longitudinal data sets Brooks-Gunn and Duncan found that children living below the poverty line were more likely to experience learning disabilities and developmental delays and to score significantly lower than other children on scores of IQ, verbal ability and school achievement. The effects on IQ were particularly apparent for children exposed to poverty early in life. The duration and intensity of the poverty were also important for many outcomes, with deeper poverty and more time living in poverty being associated with more negative effects (Brooks-Gunn & Duncan, 1997). Several studies also found poorer children having greater behavioural and emotional problems. To illustrate, one study found persistent poverty associated with greater dependence, anxiety and general unhappiness among four - eight year olds, while current poverty was linked to hyperactivity, peer conflict and headstrong behaviour (McLeod & Shanahan, 1993). However, the links between poverty and negative educational outcomes are not simple but complex. Most importantly, research is beginning to illuminate the mechanisms or pathways by which poverty exerts its influence on children. Among these, the home environment, including learning experiences in the home, and the types of parental interaction with children seem to be most important. For example, home and parenting factors accounted for at least half the impact of family income on a child's cognitive ability (Brooks-Gunn & Duncan, 1997). Australian research is also contributing to our understanding of these underlying mechanisms.

Recently, the Brotherhood of St Laurence's 'Life Chances' survey has demonstrated how poverty contributes to lower levels of literacy, and numeracy, difficulties in the transition from preschool to school and lower school achievement (Taylor & MacDonald, 1998). The authors found that poorer families had less access

to educational resources such as books and computers, were less likely to read to children and foster an expectation around educational achievement and were subject to higher levels of family conflict and disruption.

The Western Australian Child Health Survey (Zubrick et al, 1997) has also found strong links between factors such as family income, family stress, parental education and employment and children's academic competence. This comprehensive study was designed to determine priorities for health, education and social services in Western Australia. It sampled 2,732 young people aged 4-16 years from 1,462 households. Analysis revealed that the education history and employment status of caregivers was more significant for academic performance than the structure of the family (one or two parents) or the level of income.

The researchers suggest that the mechanism that links caregiver education and employment to their children's academic capabilities is likely to be related to the skills and knowledge that the caregiver has about caring for and raising children rather than the numbers of caregivers or income level per se (Zubrick et al, 1997, p. 32). The attitudes and values of caregivers, which in part have been formed in their educational and occupational contexts, will influence:

- How caregivers use their time and income.
- What proportion of that time and income is directed to educational activities.
- The expectations of caregivers and students about education and its value.
- Family and parental involvement with the school and its community.

These and similar findings lead researchers to recommend both programs that support and enhance effective parenting and quality child care as appropriate strategies to reduce the negative educational consequences of poverty (Brooks-Gunn & Duncan, 1997; Zubrick et al, 1997).

## **RESPONSES TO THE TERMS OF REFERENCE**

### **1. The appropriate role of parents, government departments, non-government agencies and educational organisations in the development, delivery and evaluation of early intervention programs**

Parents, government departments, non-government agencies and educational organisations are all currently involved to some degree in the development, delivery and evaluation of early intervention programs across the State. It is important that all parties concerned with positive educational outcomes for children work together in partnership to develop strategies which are the best we can offer the children of NSW. However, it is also true that each of the above mentioned groups have distinctive contributions to make to the development of children. Some of these are outlined below:

#### **GOVERNMENTS AND GOVERNMENT DEPARTMENTS**

One of the most common criticisms of early childhood services is that they are fragmented and uncoordinated (Oberklaid, 2000). Multiple layers of government are involved in administering and delivering services and there is a confusing array of funding arrangements for different service types, particularly in the area of child care. Ultimately, what is needed is a focus on early childhood services that is national, comprehensive and integrated. It is the responsibility of government to provide this policy framework. State governments should take a lead in calling for a national framework to be developed. Governments clearly have a role in providing sufficient resources for early intervention programs. Support is needed through policy and funding allocations for the main structures for early intervention in this State, ie early childhood services such as preschools, long day care, and more family focused early intervention services. The incidence of learning difficulties would not be as great if early childhood services were adequately funded, resourced and staffed to identify and work with children at risk of educational problems.

Governments should take the lead in ensuring quality standards for services. This includes having an outcome focus and promoting the sorts of service characteristics that are associated with the most positive outcomes. In other words service development should be evidence based. This does not mean being overly prescriptive or having a one size fits all policy. How important service elements are arranged and how they operate are decisions which must be responsive to the particular needs of local communities and are best made at the local level (see Section 2). This is a "tight on outcomes, loose on inputs" approach to government oversight (Oberklaid, 2000).

Governments also have an important role in developing assessment tools that measure the effectiveness of early childhood interventions. The highly regarded Early Years study, commissioned by the government of Ontario, Canada, advocated for a 'readiness-to-learn' measure to be applied when children entered the school system.

There have been similar calls for outcome indicators in Australia (Vimpani, 2000; Oberklaid, 2000). For example, Dr Frank Oberklaid of the Centre for Community Child Health has suggested use of the Parent Evaluation of Developmental Status (PEDS). This 10-point questionnaire is self administered by parents and explores child development and behaviour.

Government departments such as health, education, community services and housing are key providers of the services that have a major impact on children's wellbeing and development. They are critical players in early intervention. The NSW Department of Education, not surprisingly, has developed initiatives with an explicit educational focus. The Department conducts a number of pre-schools on school grounds. These could be expanded, as several commentators have drawn attention to the benefits of locating early childhood services in the school context: it is non stigmatising, resource efficient, encourages familiarity with the school context (important for parents with negative experiences in their own schooling) and eases the transition to formal schooling (Mustard and McCain, 1999; Developmental Crime Prevention Consortium (DCPC), 1999). The Department of Education has also been involved in developing, delivering and evaluating best practice programs such as Parents as Teachers (PAT) in NSW and the Schools as Community Centres program. These are important initiatives though the former, (PAT), has not received the level of funding to allow it to operate statewide in the way that the original program was intended.

A key issue is not just who provides the service but how services are organised and coordinated. There is now much more emphasis on collaboration between both government departments and community sector agencies in the planning and delivery of early intervention programs. Where collaboration is genuine it has potential to foster creative and effective responses to community needs that avoid duplication and over bureaucratisation of services (See Section 2 for examples).

## **PARENTS AND OTHER CAREGIVERS**

We have known for a long time that parenting is critical in shaping a child's capacities including their educational capability. The recent discoveries in neuroscience have highlighted the impacts that early parenting and caregiving have on children's total development. There is now impressive evidence that the first three years lay the foundation for later health, behaviour, schooling and social competence (McCain and Mustard, 1999). We now know that the nurturing a child receives from parents and other primary caregivers has a decisive impact on these capabilities through its impact on the structure and functioning of the brain. This is true for all children. The work by Bruce Perry and others has alerted us to the consequences of more severe deprivation or abuse.

A chronic lack of nurturing and appropriate stimulation and/or traumatic experience is associated with much reduced cognitive and emotional development and a predisposition to impulsive and even violent behaviour (Perry et al, 1995).

The implications of this research are clear. The quality of caregiving, whether by parents or others will have a profound impact on a child's educational capabilities, their attitudes to education and the behaviour that either facilitates learning or impedes it. Quality early childhood programs make a significant impact on learning difficulties in at least two ways. Firstly, programs that support parents and offer direction as to how to best care for children in the home can significantly improve the learning outcomes (but not only learning) in later life. Secondly, programs can supplement the care offered by parents and make an important contribution even when the home environment is less than ideal. Both strategies are particularly important for families subject to the stress of poverty and other disadvantage, as these states undermine effective parenting (Weatherburn and Lind, 1997). Commenting on the role of children's services, the authors of the West Australian Child Health Survey stated... *"the provision of high quality infant day care to families experiencing chronic levels of poverty is a primary prevention strategy as relevant to the concerns of education as it is to health and mental health"* (Zubrick et al, 1997, p. 60).

Parents have a role, not just as the primary carers of children or the recipients of services, but also as the shapers of what services are provided. All parties involved in the development, delivery and evaluation of programs in this area need to involve parents, the most powerful influences in their children's lives. This may mean that programs change and adapt their focus according to the changing needs of the family, as an ability to work flexibly with families is a most important

key to effectively engaging families in early childhood programs. It is also important that programs be developed *with*, not *for*, families, acknowledging their ability to be involved in developing their own social capital within their own communities. This approach ensures that parents will have a greater ownership of the program and makes it more likely that program elements will be reinforced in the home environment. This expectation has been borne out in the results of intervention studies with more positive results emerging from services in which parents are involved. It is also true that parents simply have a right to be fully informed and involved because of their role as the primary carers (See Burnside Family Learning Centre and NEWPIN programs for examples of parental involvement).

### **NON-GOVERNMENT AGENCIES**

There has been a growing appreciation of the importance of early intervention and prevention services within the non-government sector. Agencies have developed a range of early intervention programs. Some are aimed at preventing abuse and neglect, while others seek to improve mental health outcomes, family functioning or address other risk factors.

Due to the interrelationship between risk factors many early intervention programs have had educational impacts even when this was not an explicit intention of the service. However, some programs have been initiated with the intention of improving educational outcomes. The Burnside Family Learning Centre is one example.

Agencies within the child and family welfare sector have also developed a particular expertise in working innovatively with some of the most distressed and disadvantaged families in a way that is not always open to governmental services.

### **Program Example: Burnside NEWPIN**

The NEWPIN program is based on a well-evaluated UK model of early intervention/family support, and was introduced into Bidwill, a suburb of western Sydney with a low socio-economic profile, by Burnside in 1998. NEWPIN, focuses on families at risk of abuse and neglect of their children, and aims to create structures of reciprocity through which the services users go on to become voluntary co-workers in the program. Key elements of the program include a therapeutic support group for women, an open drop-in program and a parent/child play program facilitated by a trained early childhood worker.

During the play program, mothers are coached in play and positive interaction with their children, which is something many of these women did not experience in their own childhoods. Many of the children accessing NEWPIN have significant learning difficulties.

Anecdotal and observational evidence suggests that NEWPIN is having a profound impact. Participants report having a greater sense of control within their family situation and in their lives. Women now talk about enjoying playing with their children rather than interaction with their kids just being a source of stress. This is significant given the research that now points to a sense of control and parenting competence as an important 'underlying factor' in a range of positive health and social outcomes (Zubrick et al 1995; Marmot et al, 1997; DCPC, 1999).

There are also other benefits to the program. After discussion with NEWPIN staff a TAFE outreach program was introduced to the centre. Women wanted to develop their own education as well as model educational achievement for their children. Several mothers have now completed these outreach courses and some have gone on to further study. Other participants have become volunteers for other organisations including helping with children's reading at the local school. So, in significant ways, programs such as NEWPIN can make a contribution to the generation of social capital in what is a very disadvantaged community. The NEWPIN Program has been part of a collaborative research project with Macquarie University that compares outcomes from three different early intervention programs. It is anticipated that results will be available in the near future.

## **2. The adequacy of roles and responsibilities and interagency cooperation around early intervention programs for learning difficulties in NSW**

The increasing awareness of the significance of the early years in shaping children's futures calls for more than programmatic interventions in the first instance. It also presents the opportunity for a major cultural and value shift in government, business and community sectors (Vimpani, 2000).

The shift will see all players assign greater value and invest increased resources in supporting and enhancing children's development. The designation of roles and responsibilities for addressing learning difficulties can then be developed within that larger commitment.

Canada seems to be one country moving in this direction as the following extract illustrates:

*First Ministers affirm their commitment to the well being of children by setting out their vision of early childhood development as an investment in the future of Canada. Canada's future vitality and economic prosperity depend on the opportunities that are provided to children today.*

Canadian First Ministers Communique, September 11, 2000

This statement is not empty rhetoric. On a recent visit to Australia the eminent researcher and co-author of the Early Years study, Fraser Mustard, indicated that combined provincial and national governments in Canada have committed around four billion dollars in new early childhood initiatives.

Alongside a cultural shift several commentators have identified the need for new structures and decision making mechanisms in service planning and delivery (Vimpani, 1999; Oberklaid, 2000; Latham, 1996). This new approach must be marked by collaboration by all who provide services to children and families, including governments, government departments community agencies, private providers and voluntary organisations. Such collaboration will need to be genuine rather than tokenistic in order to be effective. Structures that facilitate collaborative decision making are needed at the national, regional and local levels (Vimpani, 1999). In this process, local community culture and needs must be taken into account. Broad parameters and key elements of programs may be set by policy bodies but it is up to more local decision makers how these will be applied in their own situation. At this stage discussion is broad. In order to advance the debate we need specific models and examples of new structures and collaborative decision making. The place management approach may well offer a helpful model here (Latham, 1996). This involves grouping together the public resources of a given locality – in health, education, housing, community services etc. These resources would be managed by a place authority who is able to purchase services most suited to local needs. This approach, Latham argues, is more flexible, outcome focused and effective than a funnel method of departmental service delivery as it encourages an integrated response to community needs. However, place management should not be used to camouflage government withdrawal from funding of services, as some interpretations of place management seem to imply.

Whatever mechanisms are in place, expansion of early intervention programs for learning difficulties will require the commitment and active encouragement from the Premier and Ministers of relevant portfolios within the State. With this interest and support, bureaucrats will emphasise outcomes in this area and work effectively together to support effective interventions.

While Government Departments are often hindered by their own bureaucracies in effecting swift changes there are good examples of genuine collaboration between government departments and community agencies. The Community Integration Project (CIP) in Claymore in Sydney's south-western suburbs is a case in point. The project is a joint initiative between three government departments (Health, Housing and Education), community agencies including Burnside and local residents. It is generating creative and effective responses to community problems and meeting social needs such as a local food coop and an innovative family centre that has become a significant community meeting place as well as providing a range of family support and children's services.

In another example, aimed specifically at learning difficulties, Burnside has successfully campaigned to improve the educational outcomes of children living in out-of-home care. Most children in care struggle in the education system with frequent school changes and behaviour and discipline issues affecting their progress. In many cases learning difficulties in this group of children and young people remain a hidden issue. All too often children in care start behind their peers and end up falling further behind. In response to this situation Burnside initiated a series of forums called 'Making the Grade'. The forums include workers from Government and non-Government sectors who meet regularly to develop resources, discuss issues, and develop strategies for improving the educational outcomes of children and young people in care (see Section 7).

### **3. The ways in which early intervention practice in NSW might be informed by practice in other States of Australia and overseas, including evidence of the impact of early intervention on child protection, juvenile justice and intensive education programs**

This section outlines some of the findings from research that are relevant to the development of effective early intervention services to support children and families and address learning difficulties. It covers the significance of risk and protective factors, describes types of early intervention programs and their outcomes and summarises the characteristics of the most effective early intervention programs.

## **RISK AND PROTECTIVE FACTORS**

Longitudinal research has revealed that there is a common set of risk factors associated with major social problems such as child abuse and neglect, mental illness, juvenile delinquency, suicidal behaviour, drug abuse, behaviour problems and school problems (DCPC, 1999; Scott, 2000). These factors operate at the level of individual, the family, local community and society. Other studies have revealed the presence of protective factors, including effective social support, which lessen the impact of risk factors and are associated with positive outcomes for children and families.

The impact of risk factors is cumulative, that is, the more risk factors present the greater the chance of negative outcomes through the life course. Although there has not been much attempt to attach different weights to risk factors the impacts of low socio-economic status and various dimensions of parenting seem to be particularly significant and pervasive.

The work on risk and protective factors carries a number of implications. These are that:

- effective programs will seek to reduce risk factors and enhance protective factors.
- programs that target multiple risk factors have a greater chance of more positive outcomes.
- because of the interrelationship of risk factors good programs may produce benefits in more than one area.
- programs will be more effective if they begin early (before risk factors have been accumulated).

### **Types of programs**

Although often discussed collectively there is in fact a great variety of early childhood programs which differ according to their goals and delivery strategies (Gomby et al, 1995). However within this range there are common program elements – these include parent support, parent training, access to resources, child care/preschool and child skills training. Some programs are centre based, others emphasise home visits and many involve some combination of the two. Some broad categories for programs have been suggested. The team from the Developmental Crime Prevention Consortium (DCPC) have distinguished between programs that begin in infancy and programs that commence in the pre school years (DCPC, 1999). Gomby et al, differentiate between child focused and family focused programs.

For the purposes of the next section we will summarise outcomes from a range of programs as it appears that the most effective programs combine elements that focus on both child development and family support/functioning (1995).

## **OUTCOMES OF PROGRAMS**

This section describes some of the outcomes from early intervention programs specifically in the areas of cognitive and educational outcomes, child abuse and neglect and juvenile crime. However it should be noted that programs also have produced other positive outcomes. This material is drawn from a number of reviews of intervention studies (DCCP, 1999; Powell, 1996; Barnett, 1995; Boocock, 1995; Centre for Community Child Health (CCCH), 2000).

### **Educational outcomes**

A review by Boocock (1995) of 15 studies of early childhood programs operating in 13 countries provides valuable data on their contribution to child development and school achievement. Her study particularly focuses on outcomes associated with well established universal pre-school systems such as those operating in Germany, France and Sweden. Boocock found that early childhood services had positive effects on school readiness, cognitive development and school achievement. The positive effects were most apparent for lower income children, narrowing, but not closing the achievement gap that separated them from more advantaged children.

Programs directed towards disadvantaged children and families have also produced very positive results. In his review Barnett found large effects on IQ in the early childhood years and sizeable and persistent effects on reading and mathematics, reduced grade retention, reduced need for special education and more positive socialisation. In particular the effects on grade retention and special education were overwhelming –which is especially relevant when considering the impact of learning difficulties. The positive effects reported were somewhat larger in the small scale demonstration projects compared to the large scale public programs (such as Head Start). Barnett considered this a result of, not any deficit in the nature of the large scale programs themselves, but a lack of sufficient funding of the larger programs which resulted in a lowering of program quality (larger classes, fewer and less educated staff, poorer supervision). Barnett emphasised that the research supported the view that large scale programs could produce the cognitive and academic benefits for disadvantaged children, providing program quality was maintained.

While, as has been noted, early childhood programs do not completely close the gap between advantaged and disadvantaged children, they can make a significant difference. As Barnett stated in concluding his review *...for many children, pre-school programs can mean the difference between failing and passing, regular or special education, staying out of trouble or becoming involved in crime and delinquency, dropping out or graduating from high school.*

(Barnett, 1995, p. 43)

The results noted above provide compelling evidence that a substantial implementation of quality early childhood programs will have a significant impact on children's learning difficulties and lay a much firmer foundation for achievement at school.

### **Effects on Juvenile Crime**

Low socioeconomic status, hostile or neglectful parenting, and low cognitive/verbal ability are significant risk factors associated with chronic delinquency (Yoshikawa, 1995). Australian research has also highlighted the impact of child abuse and neglect on juvenile criminality. Leech (1998) suggests that child abuse should be seen as having twice the weight of other factors. Homel (1998) cites a range of cross sectional and ecologic studies that provide evidence for the relationship between abuse and juvenile offending. Homel concludes that... 'lower levels of parental support, poor parental supervision, and harsh physical punishment and verbal aggression are related to higher levels of official and self reported delinquency' (Homel, 1998, p. 14).

Further compelling evidence for the relationship between child abuse and neglect and juvenile offending has come from recent Australian research by Weatherburn and Lind (1997). The authors note in the report of their research that the incidence of child abuse and neglect was the single most important causal influence on the rates of juvenile crime.

Early Intervention initiatives can operate to address many of the risk factors, particularly those related to parenting practices that are associated with subsequent juvenile offending. The evidence suggests that early childhood programs which seek to buffer the effects of these risk factors (e.g. by fostering positive parenting and enhancing cognitive ability) should be effective in reducing chronic delinquency. Assessing the crime prevention impacts of early intervention programs is complicated by the fact that very few intervention programs have crime prevention as a goal. Consequently, only a handful programs have collected data on anti social behaviour and delinquency.

However, in each of the cases where data has been recorded the studies show a positive effect. Four such programs are described briefly below. Each program combined parental support (home visits) with early childhood education (centre based).

**High/Scope Perry Pre School Project:** This project reduced rates of self-reported delinquency at ages 14 and 19 and adult criminality at age 27. Program participants committed fewer delinquent and criminal acts and less severe acts than control group members. Police and Court records show that participants were less likely than non participants to have been arrested five or more times (7% vs 35%) or to be arrested for drug taking or dealing (7% vs 25%).

**Syracuse University Family Development Research Program:** This program decreased the total number, severity and chronicity of involvement in juvenile crime when compared with a control group. At age 13-16 years only four (of 65 participants followed up) had probation records, three of which were for non serious offences. This compared with 12 control group members (of 54 followed up) having probation records, including for serious offences such as robbery, sexual and physical assault.

**The Yale Child Welfare Project:** This intervention decreased boy's antisocial behaviour as rated by teachers and improved boy's and girl's school adjustment ten years after the program had ended. Program boys were rated as well adjusted whereas non program boys were described as disobedient, and not getting along well with others.

**Houston Parent Child Development Centre:** Parent ratings at one - four years follow up showed decreased anti social behaviour among participants. This was confirmed in a five - eight year follow up by teachers. Teachers rated control group children as more obstinate, impulsive, disruptive and prone to fighting than program children who were described as more considerate and less hostile.

In addition a fifteen year follow up to Elmira Prenatal/Early Infancy Project (Old et al, 1998) found that children borne to low income, single mothers who had received intensive nurse home visits had reduced criminal and anti social behaviour.

The fact that these results were not a major focus of these interventions supports the contention that effective early childhood programs can have multiple benefits.

## **Prevention of Child Abuse and Neglect**

Findings for the impact of early childhood programs on rates of child abuse and neglect have been somewhat more elusive. It is generally home visiting programs and other family focused programs that have had abuse prevention as an aim. Some programs, notably the Elmira New York Early Infancy Project have excellent results in this area. A four year follow up found abuse rates of 4% in the program group compared to 19% in the non program group. There was also reduced incidence of emergency room (hospital) visits, which are sometimes considered a proxy measure of abuse and neglect (Gomby et al, 1999). Similarly, a teenage focused Parents as Teachers program found that children of participants who received both home visits and comprehensive case management services were less likely to be subjects of child abuse investigations than a control group (Wagner & Clayton, 1999). Evaluative studies using comparison groups have also produced promising findings.

Thirteen program evaluations within the Healthy Families America (HFA) initiative found maltreatment rates of less than 6% among service participants, a figure considerably less than expected for children of families comparable (based on risk indicators) to those within HFA programs. However, other studies of home visiting programs utilising randomised controlled trials have found no differences in rates of abuse and neglect (Duggan et al, 1999).

There are at least two reasons that make measuring rates of child abuse and neglect difficult. Firstly, reports to child protection authorities may not reflect the true rates of maltreatment. Probably, child abuse is generally underreported so it is quite feasible that home visited families will be reported more often simply because someone is observing their home life closely and on a regular basis. Secondly, because abuse is a relatively rare occurrence, large sample sizes are needed to demonstrate statistically significant changes in abuse rates. Most intervention programs do not have sufficient numbers of participants to demonstrate changes in this way (Gomby et al, 1999). Consequently, evaluators tend to use other measures besides abuse rates to determine program impacts on parent- child interactions and the level of risk for children.

Several programs (Healthy Families America, Hawaii Healthy Start, Elmira Early Infancy Project) have produced positive results in maternal attitudes to children, self reports on use of harsh discipline and on mothers' scores on scales linked to risk of abuse and neglect eg the Child Abuse Potential Inventory (Gomby et al, 1999).

These sorts of findings indicate that home visiting programs really can contribute to families developing alternative means of discipline, greater sensitivity to children and better understanding of children's development (Daro & Harding, 1999).

## **CHARACTERISTICS OF EFFECTIVE PROGRAMS**

There is a great deal of consensus from the research concerning the characteristics of the most effective programs.

### **Have Multiple Components**

The most effective services have multiple components. This is important in order to address the multiple risk factors that influence outcomes. Although the emphasis differs from service to service most programs offer some combination of practical and emotional support for parents, parent training and child care, child training and educational support.

### **Combine family focused and child focused elements**

It is clear that the child focused programs benefit children more than adults and that the family focused programs benefit adults more than children (Gomby et al, 1995). Gains in child outcomes are unlikely unless programs have an emphasis on child development input (Powell, 1996; Gomby et al, 1995). Programs that rely on indirect methods (attempting to influence the child through parents) have some of the weakest results in child outcomes. At the same time the child focussed educational enrichment programs which have produced the most substantial outcomes combine centre based services for children with significant parent involvement, through home visits, classroom participation or parent groups (DCPC, 1999; Yoshikawa, 2000). This is important to support parent skills and learning in the home environment.

### **Start early**

There are good reasons for starting early. Family functioning outcomes are better for programs that commence early, even before birth. Starting early also avoids the stigma of joining a program after a problem has developed. Starting early is also important for the more child focussed programs. Although good educational and other outcomes are achieved with pre school programs, evidence on brain development suggests that beginning services in infancy is likely to generate even larger effects than waiting till a year or so before school (Barnett, 1995; Yoshikawa, 1995).

### **Are intensive**

While it is not possible to be completely prescriptive about program intensity there are strong indications from research that better outcomes are associated with programs of greater intensity. The most effective home visiting programs have a duration of at least two years (DCPC, 1999). Parents at higher risk have been shown to benefit more from longer term intensive visitation (Wolfe et al, 1995). In his survey, Yoshikawa, (1995) found that programs which produced positive outcomes for both parents and children included 25 –60 home visits, occurring from weekly to monthly. The most effective early educational programs ranged from half day to full day sessions usually four or five days a week. Gomby et al (1995) recommend that in the light of many mothers entering the workforce out of economic necessity or government mandate, full day, full year programs should be the norm.

### **Maintain Quality**

Quality is an essential characteristic of the most effective childcare, preschool and other child focused programs. The most positive outcomes are from programs with adequate child/staff ratios, relatively small group sizes and where staff are professionally trained (Powell, 1996). ). Powell notes that this type of program quality is unlikely to be maintained when parents are positioned purely as consumers of program services: "... low income parents in particular are unable to afford the type of quality that researchers have identified as key to achieving persistent benefits' (p.96).

Another essential aspect of quality is the maintenance of well trained child care staff for early childhood services. Anecdotal evidence suggests that there is a constant stream of staff leaving children's services owing to prevailing salary levels and conditions within the sector. It is apparent that an undervaluing of the early years is reflected in an undervaluing of those who work with children. Attention must be given to issues like salary and career structure if this drain is to be avoided and program quality safeguarded. An investment in early childhood will be hampered unless there is a corresponding investment in greater skills, compensation, and benefits for child care professionals (Phillips, 2000).

Several commentators have highlighted the importance of child initiated learning and play based problem solving as a key emphasis (McCain and Mustard, 1999; DCPC, 1999; Yoshikawa, 1995) although others have cautioned that this approach is not suitable for all children with learning difficulties, such as those within the autistic spectrum (Nixon and Aldwinckle, 1997).

### **Program example: The Burnside Family Learning Centre**

The Burnside Family Learning Centre was established over ten years ago to counteract educational disadvantage among low income families in a community in Western Sydney. Children are referred to the Learning Centre by ten local primary schools if they have learning and/or behavioural difficulties or come from a low income family. The program is based on a family strengths model and a belief that a focus on education can bring about a commitment to positive growth and change. Consequently there is an emphasis on parents and children learning together. Programs include:

- Tutoring for primary school aged children with their parents by qualified teachers. Parents are involved in the tutoring and are supported in conducting follow up work at home.
- Family counselling.
- Groups for parents, e.g. Parenting courses, including child protection, vocational and personal development courses and adult literacy programs. Other agencies such as TAFE are sometimes involved in running these courses. Through these courses many parents move on to further study e.g. in TAFE.
- Self esteem/peer support training for children in class groups in the referring schools or in the community. A holiday recreational program is also offered.
- An 'Early Start' guided play group for parents and children 0-5 years. Facilitated by trained staff the group helps parents with play based learning to develop their children's language, fine and gross motor skills and social skills. Individual work is also available for families or children requiring more active intervention.

The Learning Centre has developed a very effective and positive relationship with the local schools. Feedback from schools and families report high levels of satisfaction with the service. The Centre has been part of a collaborative research project with Macquarie University that compares outcomes from three different early intervention programs. It is anticipated that results will be available in the near future. The Burnside Family Learning Centre is also being used as a model family literacy program by the University of Western Sydney.

#### **4. Research into world's best practice in developing effective strategies to increase awareness and responsibility for assisting families in parenting skills, identifying learning difficulties and early intervention**

This section addresses the question of what strategies will support parent's to become aware of and respond to learning difficulties experienced by their own children. This is particularly important for families who lack parenting skills, (often because these were not modelled in their own family of origin) or who are subject to severe environmental stresses (such as poverty or isolation) that disrupt effective parenting (Weatherburn and Lind, 1997).

The sorts of skills that will enable parents to respond appropriately to signs that their children have learning difficulties are really the same set of characteristics we associate with good parenting in general. They include appropriate monitoring and supervision of children, knowledge about child development that leads to realistic expectations and responsive and nurturing involvement with children.

#### **Parent Skills**

However, not all parents develop these skills to the same degree. Parents struggling with poverty or who have experienced very disadvantaged childhoods themselves may lack relevant knowledge and skills. This view has been supported in conversation with staff in some of Burnside's early intervention programs. They commented that parents may have little knowledge of child development and so are less aware of what their child should be capable of at different stages. This may be more the case for isolated families or parents with more constricted social networks. Such parents may be less exposed to a variety of parenting approaches and knowledge. If parents are unaware that there are problems they are less likely to seek out information or help. Parents may also lack skills in the sorts of play and communication with children that will aid healthy development. Not all parents know how to play or read or talk with children in ways that are nurturing and engaging. So on a broad level, a key strategy to enhance parent's capacity to be aware of and respond to learning difficulties is to expand the sorts of support programs outlined in Section three. Programs that increase parents' skills, provide knowledge about child development, give ideas on good communication and model play and nurturing interaction will go a long way to preventing learning problems occurring or picking them up early. Some of the more parent focused programs that begin at birth or even prenatally are ideally suited to this task. However, child care services such as long day care and pre- schools also have an important role to play. Herein lies a problem, as it is the most disadvantaged families who have the poorest access to quality childcare services.

## **Access to Children's Services**

Use of various forms of child care has increased dramatically since the mid 1970's (McIntosh, 1998). Although there have been some steps to ensure that child care is broadly available there remains a persistent relationship between child care usage and family income. Jamrozik and Sweeney (1996) compared the pattern and extent of childcare use of working and non-working parents between 1984 and 1990. They found that the extent of both formal and informal childcare use was positively related to income. That is, the higher the income the greater the use of child care. They suggest making child care universally accessible if it is not to become another element of inequality.

More recently concern has been expressed regarding declining affordability and accessibility of child care to low income groups. A study by the Brotherhood of St Laurence found that the affordability of child care had deteriorated between 1992 and 1997 and that Childcare Assistance (fee relief) had not kept pace with fee increases over the same period (Tasker & Siemon, 1998). One possible consequence of this is that parents will opt for less expensive and poorer quality care or opt out of paid child care altogether (McIntosh, 1998). There is evidence that this has in fact occurred in the dramatic underspending in the budget for child care subsidies. Spending on child care fee relief for 1997/1998 was \$150 million less than forecast, indicative of a strong decline in use by families on lower incomes (Siemon and Ford, 1999). Although the 1999 tax package improves the situation somewhat it is insufficient to redress the damage done by previous budgets. If steps are not taken to address inequities the current situation will continue to reflect what amounts to a 'de facto disinvestment' in meeting the needs of the most vulnerable families (Harris and Hayes, 1999). The anecdotal evidence of closures of long day care centres in poorer communities is not reassuring (Leppert, 2000). Research by *UnitingCare* Australia, the Uniting Church's peak body for community services, found that recent Federal changes to child care has resulted in fee increases, a rise in part time places (as parents reduce their child's hours of care), higher child/staff ratios and high proportions of low income families experiencing difficulty in meeting the costs of child care (Leppert, 2000).

## **Engaging Parents**

Once programs are established there are other issues that will impinge on how effectively they can engage with parents and thereby influence parent's caregiving. Addressing parent's perceptions of both early childhood programs and their own role as parents is an important factor in the effectiveness of early childhood programs (Powell, 1998). Parents and early childhood program staff

may have different ideas about what constitutes an effective early childhood program. Some research indicates that parents tend to equate good early childhood practice more with didactic methods such as rote memorisation and rehearsal than with more child initiated learning favoured by early childhood professionals (Powell, 1998). This finding is strongest among low income parents (Stipek et al, 1992).

Parents may also have limited ideas on their own role in their children's education or believe they cannot help their children succeed in school. Addressing these issues is vital as parents who see themselves as having an impact on education are more likely to spend time with their children in educationally enhancing ways. For example, mothers who saw themselves as 'educators' spent significantly more time in parent/child activities emphasised in a home visiting program with an educational focus than mothers who saw themselves as 'disciplinarians' (Segal, 1985).

All early childhood programs, especially those targeted in disadvantaged communities, will need to develop methods of engaging parents that take account of their perceptions, interests and circumstances. One way to do this and open up communication is for early childhood programs to develop additional activities tailored to the interests of parents. It is important that any activities be offered in flexible ways to fit in with parental circumstances. Another approach is to build individualised contact into parenting programs e.g through home visits. The Yale Child Welfare Project, an intensive family support for low income families with a first child, included regular individual meetings between mothers and an early childhood worker. The idea of the meetings was to link the centre activities with what was happening in the home and to find mutually agreeable ways to handle any problems that were coming up. These meetings provided the opportunity for a lot of education focussed on finding practical solutions to the problems of being a parent. A ten year follow up of the project found better school adjustment among the program children and that parents had a more proactive stance relating to teachers compared to a control group (Seitz et al, 1985).

Powell, in his article on engaging parents in early childhood programs, has other useful suggestions. Among them are the need for frequent communication, staff being present and available for parents at drop off and pick times and the importance of professional education that promotes skills in relating to parents as well as to children (Powell, 1998). However all these suggestions are contingent on quality programs being available in the first place and accessible for the families that need them most.

## **5. Maximising the effectiveness of assessment and early identification in ensuring improved learning outcomes from schooling for children experiencing learning difficulties**

In addition to the approaches outlined above consultation within Burnside's early intervention programs has yielded the following additional suggestions for maximising the effectiveness of assessment and early identification:

- Ongoing support for community-based early intervention programs funded to support early childhood workers to identify and remediate early learning difficulties in under-5's (e.g. the Supplementary Services Program and the Special Learning Needs Program). While funding for extra services is often from the Commonwealth, a commitment to the children of NSW may mean increased lobbying for Commonwealth funds, or State additions to this money.
- Ongoing training and support for General Practitioners (GPs) in the identification of the range and causes of learning difficulties, as well as appropriate treatments and referral sites. GPs are often the first point of contact for families with children at risk of experiencing learning difficulties, and they need to be fully resourced to meet this need.
- Ongoing training for teachers, most particularly those involved in preschool and Kindergarten to Year 1, in the identification of early learning difficulties, and appropriate strategies to address them. This needs to be addressed not only through teacher training but also through ongoing professional development within the workplaces.
- Staffing of State schools to ensure that the number of school counsellors available to schools guarantees that adequate assessments can be achieved within an effective time span from identification.
- Adequate staffing of State schools to ensure that remedial reading workers e.g. Reading Recovery Program workers, are adequate in numbers to effectively meet the number of referrals.
- Support from the Education Minister down for adequate funding of early remedial programs across all State schools.

- An expectation from all funding bodies that all programs will be evaluated in order to demonstrate their effectiveness in addressing the early learning difficulties of children. The evaluations need to be available to those seeking to choose models for their community. The academic and welfare communities should be involved in development of models. Decisions on policy development and service delivery need to be based on evaluation outcomes, in order to maximise the effective use of scarce resources.

## **6. Support available to families and communities to enable them to be better able to assist their children with learning difficulties**

Burnside believes that the single most important strategy to address learning difficulties in young children is the development of an integrated system of quality early childhood services. What follows are some general directions that the agency considers should characterise the expansion of services in NSW and nationally.

Most importantly, **we must re-conceive quality early childhood programs as a critical investment in the development of the nation.** This re-conception is supported by the emerging evidence that the early years set the foundation for competence and skills that affect learning, behaviour and health throughout life (McCain & Mustard, 1999). If we are interested in addressing learning difficulties, in children reaching their potential, and in having an educated and competent population able to respond to the challenges of a global economy, we must direct at least the same attention and resources to the early years as to the school and post secondary education periods (McCain & Mustard, 1999).

### **The planning of early childhood services must be comprehensive and integrated.**

Burnside believes that governments have an important role to play in setting direction, establishing key elements and providing resources for early childhood services. Ideally the federal government should have a role in establishing a national policy and framework with full cooperation from the states. Development of a national framework has been supported by a variety of groups (ACOSS, 1999; Economic Planning Advisory Commission, 1996).

**Development of early childhood programs should be based on what we know is most effective.** Programs should have multiple service elements, start early, include child and family focused activities, be of good quality and be of sufficient intensity to achieve the best outcomes. Although programs will follow no set institutional structure there are helpful models available. The Early Childhood and Parenting Centres advocated in the Early Years Study offers useful ideas. It describes a hub

and spoke model with a centre providing a range of child development and parenting activities supported by home visiting and/or other 'satellite' locations to ensure early identification and intervention (McCain and Mustard, 1999).

**Effective early intervention should build on existing support structures.** We already have the great strength of a system of early childhood or maternal and child health centres in this country. In Victoria 98 % of parents with infants use this service (Scott, 2000). There are many other services on which to build: long day care and preschool services, family support and other early childhood and intervention programs. Schools are particularly promising sites for reaching out to families (Scott, 2000; McCain and Mustard, 1999; DCPC, 1999). The NSW Schools as Community Centres project has reported many positive outcomes in literacy, health, school readiness and interagency cooperation (Cant, 1997).

**New systems and decision making mechanisms are necessary to facilitate a comprehensive approach to early childhood services.** This approach will be marked by collaboration by all involved in services to children and families, including governments, government departments community agencies, private providers, voluntary organisations and most importantly, local residents. Such collaboration will need to be genuine rather than tokenistic in order to be effective. Mechanisms that facilitate collaborative decision making are needed at the national, regional and local levels (Vimpani, 1999). In this process, local community culture and needs must be taken into account. Broad parameters and key elements of programs may be set by policy bodies but it is up partnerships of local people and service providers how these will be applied in their own situation. A 'tight on outcomes loose on inputs' approach would be most effective.

**A commitment to an integrated program of early childhood education must be sustained over time.** As the research shows, the range of positive results from quality early childhood education takes some time to be evident. The fact that much political policy development is confined to three – four year electoral cycles is a hindrance to long range planning for early childhood services. Ideally, Burnside would like to see bi-partisan political support for an early childhood investment strategy over at least three terms of government. There is surely enough consensus about the necessity and efficacy of early childhood services across the political spectrum to allow this to happen.

A long-term policy would need to be **backed up by substantial funding from government**. A shift from fragmented childcare and a scattering of other services to a long-term investment in social competence through integrated early childhood services implies substantial government support especially for the most disadvantaged. As some of the research has shown, investments in early childhood programs can produce substantial savings down stream in reduced educational health and justice system expenditure. Furthermore, Barnett (1995) has calculated that in the United States the cost of **not** providing at least two years quality early childhood program to be about \$100 000 for each child born into poverty.

For a national initiative part of the necessary funds could be raised through a 'children's futures levy' similar to the operation of the Medicare levy. All taxpayers would make some contribution with higher income earners contributing more. Given that Australia is one of the lowest taxed countries in the OECD there is scope for a measure that:

- a/ focused on our children's future and
- b/ provides some universal as well as targeted assistance.

In calling for greater attention to early childhood Perry states '...we allow our governments to invest dollars in children's services to build human capital in direct proportion to the size of the child rather than the speed at which their brain is developing, which is during foetal life and the first few years of life' (cited in Vimpani, 1999, p.10).

More **intensive support must be directed to the most disadvantaged communities and families**. Given the evidence about the accumulation of risk factors increasing the likelihood of a range of social problems, including learning difficulties, intensive support is vital for the most vulnerable communities. In this way provision of services can be both universal and targeted at the same time. Services would be universal in that they were available to all who lived in some communities and targeted in the sense that a high proportion of residents of those communities are significantly disadvantaged. In addition, steps must be taken to ensure much greater access to quality child care for children of disadvantaged families.

Burnside supports the graded provision of subsidised long day care and pre-school services. A start would be to ensure that every three and four year old child in NSW received at least one day per week free care. Children from low income families should receive two days free care. This level of universal provision would allow all families to have a stake in quality childcare. However, early childhood family support and education programs in these areas must be complimented by stimulus to local economies, maintenance of community infrastructure and job creation. In other words early childhood programs are not a panacea. They can ameliorate some of the destructive consequences of poverty but other measures are needed to tackle the incidence of poverty more directly.

### **Research and evaluation should accompany and inform program development.**

There is a general lack of rigorous research in the area of early intervention services (DCPC, 1999). Much of what we do know about effective early childhood services is based on overseas research and models. Caution has been expressed about the application of similar models in this country (Vimpani, 1999; Scott, 1997; Centre for Community Child Health, 2000).

Good research and evaluation of early intervention services is therefore essential. However, we know enough to commence programs now, with good evaluations built in alongside service provision. The most useful evaluations should be both quantitative, including the identification of some uniform outcome measures (Repucci et al, 1997; Tomison, 1998) and qualitative, including full, rich descriptions of programs that will allow us to understand better some of the underlying mechanisms that make interventions effective (Scott, 1997).

### **Any Other Issues**

#### **Educational needs of children in care**

Burnside works with young people, often in out-of-home care, who have experienced abuse and neglect, and who are often at risk of entering the juvenile justice system. Education is seen as the key to turning them around and improving their life chances. In her 1990 speech for the Hilda Lewis Memorial Lecture, Jane Aldgate looked at the research on education outcomes for children in care in the UK and the US, and states that '*these studies present a gloomy picture of failure*' (p.39). The work of Heath, Colton and Aldgate in the UK clearly demonstrates that children living in even the most favourable of care places, ie. within stable and long-term foster homes, continue to perform well below average at school, even compared with their peers who remained in disadvantaged families (Heath et al., 1989).

Jackson & Martin (1998) also state that leaving care studies consistently show over 75% of young people leaving care have no educational qualifications at all, which in turn has a strong effect on their employment opportunities. In their study of 154 young people who had left care in the previous 10 years, the authors sought to identify what characteristics within the child or the system ensured that child's success within the wider society in later life. Among the protective factors identified as most strongly associated with later educational success were:

- (i) *stability and continuity;*
- (ii) *learning to read early and fluently;*
- (iii) *having a parent or carer who valued education and saw it as a route to a good life;*
- (iv) *having friends outside care who did well at school;*
- (v) *developing out of school interests and hobbies;*
- (vi) *meeting a significant adult who offered consistent support and encouragement and acted as a mentor and possibly role model; and*
- (vii) *attending school regularly (p.578).*

For children in care the authors identify the development of early literacy as particularly crucial, because of the contribution of this skill to early independence from the need for consistent adult attention, which may not be available anyway. It also contributes to the formation of the view by carers and teachers that the child is not disruptive or demanding. Additional programs should be directed to address the educational needs of children in care particularly those who enter the system early in their lives.

### **Program Example: Burnside Education Program**

The Burnside Education Program (Western Sydney) works closely with out-of-home care services within the agency to provide supervised tutoring for children in care. The program acknowledges that children in out-of-home care are not only at heightened risk of coming into the juvenile justice system, but are more likely to have learning problems for a variety of neurological and social reasons. Tutors are specifically selected to work with the children consistently over time, focusing on motivation and positive work habits as well as academic success. It is also emphasised that the earlier the intervention occurs, the more likely the child's outcomes in academic, personal, and work areas, will be positive and rewarding.

Burnside is committed to raising the profile of the educational needs of children and young people in care, and has developed an issues paper, '*Making the Grade*', which is attached for your further information.

## REFERENCES

Australian Council of Social Service (ACOSS), (1999) *Budget 99: making good the promise*, ACOSS paper No. 9, ACOSS, Sydney.

Aldgate, J. 'Foster Children at School: success or failure? The 1990 Hilda Lewis Memorial Lecture', *Adoption & Fostering*, 14 (4): pp. 38-48.

Barnett, W. S. (1995) 'Long-Term Effects of Early Childhood programs on Cognitive and School Outcomes', *The Future of Children*, Vol. 5, No. 3, pp. 25-50.

Boocock, S. (1995) 'Early Childhood Programs in Other nations: Goals and Outcomes', *The Future of Children*, Vol. 5, No. 3, pp. 94-114.

Bronfenbrenner, U. (1989) 'Ecological Systems Theory', *Annals of Child Development*, 6, 187-249.

Brooks-Gunn, J & Duncan, G. (1997) 'The Effects of Poverty on Children' *The Future of Children*, Vol. 7, No. 2, pp. 55-71.

Cant, R (1997) *Interagency School Community Centres Pilot Project: Evaluation Report 1997*, Social Systems and Evaluation.

Carmichael, A. & Williams, H. E. (1983) 'Infant health and family functioning in a poor socioeconomic status multi-ethnic municipality', *Australian Paediatrics Journal*, Vol. 19, pp. 61-67.

Centre for Community Child Health, (2000) *A Review of the Early Childhood Literature*, paper prepared for the Federal Department of Family and Community Services, Commonwealth of Australia, Canberra.

Chase-Lansdale, P. & Brooks-Gunn, J. (eds) (1995) *Escape from poverty: what makes a difference for children?*, Cambridge University Press, New York.

Daro, D. & Harding, K. (1999) 'Healthy Families America: Using Research to Enhance Practice', *The Future of Children*, Vol. 9, No. 1, pp. 152-176.

Developmental Crime Prevention Consortium (1999) *Pathways to Prevention: Developmental and early intervention approaches to crime in Australia*, Commonwealth Attorney General's Department, Canberra.

Duggan A. K., McFarlane, E. C., Windham, A. M., Rohde, C. A., Salkever, D. S., Fuddy, L. Rosenburg, L. A., Buchbinder, S. B. & Sia, G. C. (1999) 'Evaluation of Hawaii Healthy Start Program', *The Future of Children*, Vol. 9, No. 1, pp. 66-80.

Duncan, G., Brooks-Gunn, J. & Klebanov, P. (1994) 'Preventing Child Abuse & Neglect: Programmatic Interventions', *Journal of Child Welfare*, 73, 5, pp. 405-430.

Economic Planning Advisory Commission, (1996) *Future Child Care Provision in Australia: Child Care Task Force Interim Report*, Australian Government Publishing Service, Canberra.

Gomby, D., Lerner, M., Stevenson, C., Lewit, E. & Behrman, R. (1995) 'Long-Term Outcomes of Early Childhood Programs: Analysis and Recommendations', *The Future of Children*, Vol. 5, No. 3., pp. 6-24.

- Gomby, D., Culross, P., & Behrman, R. (1999) 'Home Visiting: Recent Program Evaluations-Analysis and Recommendations', *The Future of Children*, Vol. 9. No. 1, pp. 4-26.
- Harris, E. & Hayes, A. (1999) Responding to the needs of disadvantaged children and their families: Rethinking priorities for children's services, *Paper presented to the Executive, Australian Early Childhood Association*, May, in Darwin.
- Heath, A., Colton, M. & Aldgate, J. (1989) 'The Education of Children In and Out of Care', *British Journal of Social Work*, 19, pp. 447-460.
- Hemel, R. (1998). *Developmental Issues in Crime Prevention and the Links with the Prevention of Abuse*, Paper presented at Building Partnerships: NSW Child Protection Council State Conference, Sydney Masonic Centre, May 4-5.
- Jackson, S. & Martin, P. (1998) 'Surviving the Care System: education and resilience', *Journal of Adolescence*, 21, pp. 569-583.
- Jamrozik, A. & Sweeney, T. (1996) *Children and Society: The Family, State and Social Parenthood*, MacMillan Education Australia, Melbourne.
- Latham, M. (1996) 'Making Welfare Work', *Policy*, Vol. 12, No. 3, Spring, pp. 18-24.
- Leech, M. (1998) *Distillations from Pathways to Prevention: Developmental and Early Intervention Approaches to Crime in Australia*, Paper presented at the National Partnerships in Crime Prevention Conference, Hobart, February.
- Leppert, S. (2000) *Child Care at the Crossroads: Impact of Federal Government Funding Cuts on Community Based Child Care*, Paper presented at the Australian Institute of Family Studies Conference – Family Futures- Issues in Research and Policy, Sydney, 25 July.
- Marmot, M., Bosma, H., Hemingway, H., Brunner, E. & Stansfield, S. (1997) 'Contributions of job control and other risk factors to social variations in coronary heart disease incidence', *Lancet*, 350, pp. 335-339.
- McCain, M. N. & Mustard, J. F. (1999) *Reversing the real brain drain: The Early Years Study Final Report*, Toronto, Government of Ontario, Canada.
- McClelland, A. (2000) 'No child...' *Child Poverty in Australia*, Brotherhood of St Laurence, Melbourne.
- Nixon, D. & Aldwinckle, M (1997) *Exploring: Child development from three to six years*, Social Science Press, Katoomba.
- Oberklaid, F. (2000) *Platforms for Promoting Child Health and Wellbeing*, Paper presented to Rethinking Early Childhood Development Conference, Royal North Shore Hospital, Sydney, November 13.
- Olds, D., Henderson, C., Cole, R., Eckenrode, J., Kitzman, H., Luckey, D., Pettitt, L., Sidora, K., Morris, P., & Powers, J. (1998) "Long-term effects of nurse home visitation on children's criminal and antisocial behaviour", *Journal of American Medical Association*, October 14, Vol. 260, No. 14, pp. 1238-1244.
- Perry, B. D., Pollard, R. A., Blakley, T. L., Baker, W. L. & Vigilante, D. (1995) 'Childhood trauma, the neurobiology of adaption, and 'user-dependent' development of the brain: How 'states' become 'traits'', *Infant Mental Health Journal*, 16, 4, pp. 271-290.

- Phillips, D. (2000) *From Neurons to Neighbourhoods: The science of Early Childhood Development*, Paper presented to Rethinking Early Childhood Development Conference, Royal North Shore Hospital, Sydney, November 13.
- Powell, D. (1996) *Do Early Childhood Programs make a Lasting Difference to Children and Families?* Paper presented at Child and Family Policy Conference, University of Otago, New Zealand, July 10-13, 1996.
- Powell, D. (1998) 'Reweaving Parents into the Fabric of Early Childhood Programs', *Young Children*, September, pp. 60-67.
- Repucci, N. D., Britner, P. A. & Woolard, J. L. (1997) *Preventing Child Abuse and Neglect Through Parent Education*, Paul H Brookes, Sydney.
- Scott, D. (1997) 'Home Visiting: An Australian Perspective', *Children Australia*, Vol.22, No. 3, pp. 10-16.
- Scott, D. (1999) 'Creating Social Capital: The distinctive role of the non-government agency', *Children Australia* Vol. 24, No.1, pp.4-7.
- Scott, D. (2000) 'Embracing what works: Building communities that strengthen families', *Children Australia*, Vol. 25, No. 2, pp. 4-9.
- Segal, M. (1985) 'A study of maternal beliefs and values within the context of an intervention program', cited in Powell, D. *Reweaving Parents into the Fabric of Early Childhood Programs*, *Young Children*, September, pp. 60-67.
- Seitz, V., Rosenbaum, L. D., & Apfel, N. H. (1985) 'Effects of Family Support Intervention: A ten-year follow up', *Child Development*, 5, pp. 76-91.
- Stipek, D., Milburn, S., Clements, D. & Daniels, D. H. (1985) 'Parents' beliefs about appropriate education for young children', *Journal of Applied Developmental Psychology*, 13, pp. 293-310.
- Sydney Morning Herald, Jones, C. *Bad start for our children*, Friday, October 29, 1999, p. 3.
- Taylor, J. & MacDonald, F. (1998) *Life at six: life chances and beginning school*, Brotherhood of St Lawrence, Fitzroy.
- Tasker, G. & Siemon, D. (1998) *Is child care affordable? Pressures on families and their use of formal long day care*, Brotherhood of St Lawrence and Community Child Care, Melbourne.
- Tomison, A. M. (1998) *Valuing Parent Education: A Cornerstone of Abuse Prevention*, National Child Protection Clearing House Issues Paper No 10, Australian Institute of Family Studies, Melbourne.
- Vimpani, G. (2000) *Counteracting the effects of macro-system dominance on child health and well being*, Paper presented at the Rethinking Early Childhood Development Conference, Royal North Shore Hospital, Sydney, November 13.
- Vimpani, G. (1999) 'The First Three Years- Setting a Course for Life', *Childrenz Issues*, Vol. 3, No. 2, pp. 7-12.
- Wagner, M. & Clayton, S. (1999) 'The Parents as Teachers Program: Results from Two Demonstrations', *The Future of Children*, Vol. 9, No. 1, pp91-115.

Weatherburn, D. & Lind, B. (1997) *Social and Economic Stress, Child Neglect and Juvenile Delinquency*, NSW Bureau of Crime Statistics and Research, Sydney.

Wolfe, d. A., Repucci, N. D. & Hart, S. (1995) 'Child Abuse Prevention: Knowledge and Priorities', *Journal of Clinical Child Psychology*, 24, Suppl., Pp. 5-22.

Yoshikawa, H. (1995) 'Long-Term Effects of Early Childhood Programs on Social Outcomes and Delinquency', *The Future of Children*, Vol. 5, No. 3, pp. 51-75.

Zubrick, S. R., Silburn, s. R., Gurrin, L., Teoh, H., Shephers, C., Carlton, J. & Lawrence, D. (1997) *Western Australian Child Health Survey: Education, Health and Competence*, Australian Bureau of Statistics and the TVW Telethon Institute for Child Health Research, Perth.