

Submission on the inquiry into Early Childhood Education and Care

Affordability and availability gaps need to be addressed to achieve universal access

Health and Wellbeing Queensland (HWQld) strongly agrees with the first theme highlighted in the draft report, that affordability and availability gaps need to be addressed to achieve universal access to early childhood education and care (ECEC) for all Australian children and families to ensure all children have the best start in life.

Universal access to ECEC affords the opportunity to improve the health outcomes of children indirectly through educational attainment, which results in improved health outcomes. Universal access can also directly improve children's health outcomes by ensuring that quality ECEC services provide a healthy environment, with the provision of healthy food and ample opportunities for physical activity. Attending a healthy ECEC environment provides an equitable opportunity for positive health outcomes for all children.

HWQld supports equitable and accessible childcare, especially for our youngest Queenslanders living in rural and remote areas, who are often the most disadvantaged when it comes to educational attainment and its associated positive health outcomes. We encourage the Productivity Commission to consider how universal access to ECEC, underpinned by a quality framework, can be achieved to benefit all children who live rurally or remotely.

Availability can only improve if workforce challenges are resolved

HWQld recognises that significant workforce challenges need to be resolved to improve ECEC experiences of children and families.

In relation to draft **recommendations 3.1 - 3.7** which focus on improving workforce pay, upskilling and teaching qualifications:

- HWQld supports the need for a capable ECEC workforce that is valued within our communities. HWQld encourages the Productivity Commission to consider how childcare services could be supported by people with different skill sets beyond education, such as health professionals.
- Greater emphasis on healthy eating, physical activity and wellbeing education in the relevant Certificate III, Diploma and Early Childhood Teacher qualifications would be beneficial. Access to quality professional development for educators and teachers on healthy eating, physical activity and wellbeing would improve the quality of ECEC and result in improved health outcomes for our children.

ECEC services do not consistently respond to family needs

HWQld supports the draft report's recognition that children and families have unique needs as an important foundation for the development of a truly universal ECEC system.

In relation to draft **recommendation 7.2** - Support connections between ECEC and child and family services:

- HWQld notes that the draft report recognises transport and food insecurity as barriers to ECEC access and attendance (p48). It is important to emphasise the inequities that arise from food insecurity and highlight how food provision within ECEC can promote equity and address some of the barriers faced by families experiencing disadvantage.
- The relationship between food security and ECEC access and effectiveness is mediated through several linkages. Firstly, as highlighted by a quote in the draft report from a participant in the Productivity Commission inquiry (p48), the inflated cost of food, paired with low incomes in the most disadvantaged households, presents a financial barrier to ECEC access. Secondly, where ECEC services have no or inadequate food provision this can also present a barrier to access. Further, evidence suggests that food insecurity in early childhood can affect school readiness and educational attainment and that households with children are more likely to experience food insecurity than households without children. These linkages mean that ECECs offering adequate food services provide an important opportunity to supply stable food secure environments for children experiencing disadvantage at home, whilst simultaneously supporting families to access ECEC services.
- The problem of food insecurity in Australia is growing. Those most impacted are children from households experiencing financial hardship or single parent households, people living in remote areas, Aboriginal and Torres Strait Islander peoples, peoples from culturally and linguistically diverse backgrounds, refugees and people seeking asylum. Concerningly, research indicates the ECECs in Queensland's most disadvantaged regions (where food insecurity risk is highest) are currently least likely to provide meals as part of their service. Therefore, addressing food security with targeted food and nutrition support as part of ECEC service provision will support young Queenslanders experiencing the greatest disadvantage.
- HWQld recommends the Productivity Commission recognises healthy food provision as a core foundation of *quality* ECEC services. A flexible approach would be needed to implement any new quality requirements related to healthy food provision, noting potential impacts on existing services. This should also include more support for ECEC services in rural, remote and other disadvantaged areas where barriers to food security and food provision are greatest.

Quality is paramount to achieving the benefits of ECEC

HWQld agrees that the quality of ECEC services is paramount in achieving the full potential benefit of ECEC services for children and families.

In relation to draft **recommendations 8.1 – 8.3**, which focus on assessment and performance reporting of services:

- HWQld considers that quality ECEC services cannot be achieved without food-based standards and more robust physical activity guidelines being implemented in the early years settings.
- HWQld is of the view that current regulatory systems for healthy food and adequate physical activity provision, and early intervention for children not achieving healthy growth, are not currently fit-for-purpose. Comprehensive change to these systems would have long-term benefits for our youngest Australians and the ECEC workforce.
- HWQld recommends development of compulsory national nutrition standards for the ECEC sector.
- Coordination of food provision and quality nutrition, through a National Early Years Food Standard, is integral to support universal access to quality childcare. As young children spend an average of 31.9 hours per week in care (Ref 1), this can equate to more than 50 per cent of their daily nutritional requirements being consumed in the ECEC setting.

- In addition, young children who are enrolled in long daycare may need to complete their total daily activity whilst at the centre. This is at least three hours per day for children aged 1 to 5 years and includes both play and energetic activities (for those aged 3 to 5 years).
- Quality Area 2.1.3 in the National Quality Framework assesses early years childcare centres against ‘healthy lifestyle’ with ‘healthy eating and physical activity promoted and appropriate for each child.’ This criterion lacks rigour and guidelines as to how this quality area is assessed. HWQld further notes that available nutrition or physical activity resources (such as *Get up and Grow — Healthy eating and physical activity for early childhood — Resource collection*) are often outdated and lack practical advice for educators and services, in what and how to implement effective practice.

New coordination mechanisms to support universal access

HWQld supports the development of new national coordination mechanisms to promote effective collaborations across appropriate sectors to support universal access to quality ECEC services.

In relation to draft **recommendations 9.1 and 9.2**, which recommend a National Partnership Agreement for ECEC and the establishment of an independent ECEC Commission:

- To enable early identification and intervention for children not meeting expected physical or developmental milestones, HWQld recommends national funding to support cross-sector collaboration between the health and education sectors and professionals.
- The submission highlighted the importance of supporting children to meet development and physical milestones. HWQld would like to highlight the importance of physical health and the need for associated preventive action plans. The 2022 National Health Survey results showed that less than 1 in 5 children aged 2 to 3 years met both the fruit and vegetable daily intake recommendations. This contributes to unhealthy growth patterns, which are reflected in increasing obesity rates, currently at record high levels for 5–17-year-olds nationally, with one in five children considered clinically overweight and 8.3 per cent of children living with obesity.
- The early childhood period is crucial as it is when children start and establish behaviours that contribute to obesity, from poor eating habits, inadequate sleep, and a lack of physical activity. Embedding allied health professionals, such as dietitians or exercise physiologists, to support ECEC staff to build positive health behaviours in children, their families and ECEC staff will prevent future poor health. This approach not only supports children requiring additional support through targeted early interventions and referral pathways, it also improves the overall the quality of ECEC services, benefiting all attending children.

Ref 1 - Child Care in Australia quarterly information report, March quarter 2022. Accessed Dec 2023 <https://www.education.gov.au/early-childhood/early-childhood-data-and-reports/quarterly-reports-usage-services-fees-and-subsidies/march-quarter-2022-report#:~:text=In%20the%20March%20quarter%202022%2C%2048.3%20per%20cent%20of%20children,approximately%203%20days%20per%20week.>