



Early Childhood Education & Care Productivity Commission Submission



Kids First Australia acknowledges the Traditional Custodians of the land and recognises their continuing connection to land, waters and culture. We pay our respects to Elders past and present. We acknowledge that sovereignty has never been ceded. It always was and always will be, Aboriginal land.



We celebrate and value diversity. Kids First Australia is proud to provide support to the community in the most inclusive manner.

KIDS FIRST AUSTRALIA

Leading change for Australian children.

In this submission we are proud to share our Early Years Education Program (EYEP)[™] - Kindergarten Model, a model of early education and care designed to improve developmental and educational outcomes for Australian children, including preparation for school.

About us

Kids First Australia is a proudly independent child and family services provider and early years education specialist, at the heart of community care since 1896.

Our vision is for all children and young people to thrive in strong, resilient, and safe families and communities. We do this because we believe all kids deserve a bright future.

Informed by evidence, our sector leading programs are designed to strengthen family relationships, support healing and recovery from trauma and ensure children can thrive, now and into their future. Kids First occupies a unique space within the early years and community services landscape with our strong focus on developing, testing and delivering innovative evidence-based services.

We know that the early years are critical

Children's experiences in the years immediately after birth are a major determinant of their lifetime circumstances and well-being. Early life experiences have a fundamental influence on brain architecture, gene expression, and physiology.

The impact of the early years is especially pronounced for children who experience neglect, abuse and toxic stress. Prolonged exposure to physical, emotional and/or sexual abuse and traumatic experiences early in life have been established to cause profound long-term adverse effects on brain and physiological development. (Tseng et al)

Our research demonstrates the importance of holistic early years education and care

For six years, Kids First designed and implemented a unique Early Years Education Program (EYEP)[™], at our West Heidelberg centre in Victoria. The EYEP[™] successfully worked with children who experienced acute disadvantage to support their emotional, social and cognitive development. The program provided high quality education and care for children who live with significant family stress and social challenges so that they could commence school developmentally equal to their peers, and with the knowledge, skills and attributes needed for ongoing successful learning.

An independent randomised control trial, the first of its kind in Australia, was conducted alongside EYEP[™]'s delivery. This research showed that, when compared to their peers, children who participated in EYEP[™] had made gains across their IQ, resilience and emotional development factors. Their families responded better to stress and experienced less of it.

EYEP[™] was characterised by:

- individualised, holistic education and care based on a relational pedagogy
- integrated tertiary level intervention
- sustained and intensive engagement multi-disciplinary professional knowledge, skills and expertise
- safe, welcoming spaces.

Our current phase of innovation: a universal Early Years Education Program – Kindergarten Model

Kids First believes that all Australian children and families should have access to high-quality, holistic education and care, underpinned by a robust practice framework and evidence-based service models. We live and breathe this ethos in our own early years centres and have taken the powerful and practical components of the EYEP[™] and created a new model that can be universally applied in kindergartens, filling a critical gap for the sector.

Our EYEP[™]-Kindergarten Model is based on a strengths-based, trauma-informed, relational pedagogy approach. 'Relational pedagogy' refers to the intentional practice of caring teachers interacting with students to build and sustain positive relationships.

We have taken this approach because it is proven that the most salient environmental influences for infants and young children are their caregiving relationships and the degree of stress that they live with. All children need stable relationships, responsive caregivers and attention to their emotional wellbeing and social competence so that they can flourish.

Tseng, Y., B. Jordan, J. Borland, T. Clancy, N. Coombs, K. Cotter, A. Hill and A. Kennedy (2018), Changing the Life Trajectories of Australia's Most Vulnerable Children – Report no.2: The first twelve months in the Early Years Education Program: An initial assessment of the impact on children and their primary caregivers.

Our EYEPT™ Kindergarten Model

- Combines the innovative and transformational aspects of EYEPT™ and Kids First's practice expertise in school readiness services.
- Draws on sound pedagogical principles, supported by insights from the latest early years education research and literature.
- Recognises the importance of giving children and families a voice, rather than making assumptions about them, their context and their behaviour. Privileging children and family's self-determination is highly important in supporting their recovery from trauma – this means providing choice, options and information so they can make informed decisions.
- Meets and exceeds the requirements of the Australian Early Years Learning Framework (EYLF) and Victorian Early Years Learning and Development Framework (VEYLDF).

Model aims

- Children have strong, authentic relationships with their classmates, families and educators, and a shared sense of belonging.
- Children are active, engaged and capable learners, and are supported to enter primary school.
- Families have strong protective factors so that they can moderate risk and adversity and promote healthy childhood development and wellbeing.

Key features of the EYEPT™-Kindergarten Model include support 'wraparound' services embedded within the Early Years centre. This focus is designed to reduce barriers for families to access and participate in services, address children's identified developmental needs, thereby lessening the impacts and risks of adverse, traumatic events, and strengthening family functioning.

High expectations for educators are coupled with high support, and the model includes intensive training on the model principles as well as coaching and mentoring. A focus on educator wellbeing and self-care includes dedicated mindfulness sessions, access to Employee Assistance Program, and professional development such as vicarious trauma training.

Murdoch Children's Research Institute's Centre for Community Child Health is evaluating the model over a three-year period (2021-2023). The purpose is two-fold: to provide evidence of a cost-effective, impactful, nationally scalable universal early years model underpinned by strengths based, trauma-informed, relational pedagogy and to inform our ongoing implementation and adaption of the model.

An initial year of formative evaluation which supports the clarification and articulation of the EYEPT™-Kindergarten Model, has been followed by a two year period whereby summative evaluation, measuring the impact of the model in a more quantitative manner, making it easily comparable, runs alongside the formative evaluation stream, to further support the refinement of the model.

The second-year evaluation report has shown high classroom quality with our kindergartens delivering the EYEPT™-Kindergarten Model scoring higher than Australian comparison data across Emotional support, Classroom organisation and Instructional support domains. These results are very promising.

Case study: Fatima's story

Kids First's Early Years team members receive extensive training to become a highly skilled workforce. This supports educators to bring a trauma-informed approach to their interactions with children and families. In addition, as an integrated early years education and family services agency, the Early Years team can support kindergarten families to access specialist resources in a joined-up and seamless way.

Fatima had been acting out in her three-year-old kindergarten sessions and was becoming distressed in group situations. Noticing her changed behaviour, her educator Kamal organised a meeting with Fatima's mother Saanvi.

Saanvi confided that her marriage had broken down due to family violence and that she had fled the family home, with Fatima, to reside with her mother, Fatima's grandmother. Saanvi also disclosed that her mother was being violent towards her, which Saanvi had experienced from her as a child.

With Saanvi's permission Kamal consulted her colleague within Kids First's Intake & Engagement Team, with the Intake member linking Saanvi to The Orange Door. The Orange Door worker sourced alternative accommodation for Saanvi so that she and Fatima were safe. This was actioned swiftly and without Saanvi needing to retell her story or be left to navigate a disparate service system.

Once safe, Saanvi was connected to a Kids First Family Therapist for dedicated sessions focused on positive interactions between mother and child.

Fatima is happier, is demonstrating an increased capacity to regulate her behaviours, and has started to engage in play and learning activities with other children.

Improving outcomes for children and families experiencing vulnerability

As we have highlighted, Kids First has specific expertise and experience in working with and improving outcomes for vulnerable children particularly in the universal early years setting.

Our Early Years Education Program (EYEPTM) was designed to (and was proven in its evaluation findings to successfully) support children with highly complex support needs, and their families' emotional, social and cognitive development. The program not only focused on providing a high-quality education and care program for children, it also addressed the trauma experienced by these children in their formative years and wrapped a suite of early intervention and therapeutic family support services around their families to alleviate family stress, and ensure children commenced school developmentally equal to their peers. This program was the subject of an Australia-first randomised control trial (RCT) undertaken by the University of Melbourne and a qualitative study by Charles Sturt University. The success of this model is documented in the research reports available on the 'Information Hub' on our website.

However, this program was only for highly vulnerable 0-3 year olds and it inadvertently stigmatised the very children it was supporting by excluding them from engaging with their community and future classmates in the mainstream/universal education and care setting. It was clear to us through our family support data and our role as co-ordinator of a regional child and family services alliance that few vulnerable families access childcare however they did access kindergarten. We knew that within this highly targeted model, lay the building blocks for a universal early years model that could deliver positive outcomes for all Australian children and their families, no matter their start in life, and this could be achieved in a sustainable and replicable manner. Therefore, we took the best practice learnings from this program and trialled it within one of our universal kindergarten programs.

An evaluation of this approach was undertaken by Monash University Centre of Health Research and Implementation in 2018 which identified that the best practice elements that have been extracted and implemented at the Child and Family Centre enabled the educators to effectively identify, manage and support children from more vulnerable and/or disadvantaged circumstances. It was recommended that these elements, which had never before been employed together within a universal care setting, warranted further development.

Kids First then developed the EYEPTM- Kindergarten Model for application in universal settings.

Kids First has been at the forefront of innovation in the development of the EYEPTM-Kindergarten Model. The Model has been designed to improve education, health and wellbeing outcomes for children who are born or raised in more vulnerable and/or disadvantaged circumstances, and their families, within a universal early years setting.

The EYEPTM - Kindergarten Model is based on a strength based, trauma-informed, relational pedagogy approach. We have taken this approach because it is proven that optimal emotional and behavioural regulation is achieved by infants with the scaffolding provided by their primary caregiver (Hofacker N & Papousek 1998, Tronick E & Gianino A 1986) in moment-to-moment interactions in the context of everyday care and is the foundation for mental health throughout life (Shonkoff, 2011). All early childhood education and care services need structures and processes that facilitate high quality interaction.

Murdoch Children's Research Institute's findings from their evaluation of our EYEPTM-Kindergarten Model support this. Whereby the data from the second-year evaluation has shown high classroom quality with our kindergartens delivering the EYEPTM-Kindergarten Model scoring higher than Australian comparison data across Emotional support, Classroom organisation and Instructional support domains. These results are inclusive of our Centres in highly disadvantaged areas, such as Seymour in Victoria. The majority of our centres are located in vulnerable communities with higher than state average proportions of children engaging in our kindergarten program whom have experienced intergenerational abuse and neglect. It is for this reason that our evaluation findings are exceptionally promising.

Hofacker N & Papousek M. (1998), Disorders of excessive crying, feeding and sleeping: The Munich Interdisciplinary Research and Innovation Program, *Infant Mental Health Journal*, 19 (2) 180-2101.
Tronick E & Gianino A. (1986) Interactive mismatch and repair: Challenges to the coping infant, *Zero to Three*, 6(3) 1-6.
Shonkoff, J.P. (2011), 'Protecting brains, not simply stimulating minds', *Science*, 333(6045), 982-83

Key features of the EYEPT™-Kindergarten Model that we believe improve outcomes for children—particularly those who are born or raised in more vulnerable and/or disadvantaged circumstances include:

Wrap around support

'Wrap around' support services are integrated and embedded within our Early Years Child and Family Centres. These are designed to reduce barriers to access and participation and address children's identified developmental needs, lessening the impacts and risks of adverse, traumatic events, and strengthening family functioning. These include a multidisciplinary team of maternal & child health, family support, playgroups, allied health services and parenting groups.

Early and sustained engagement of families

When families are engaged it is vital to sustain their engagement. If they feel a sense of belonging and connectedness to the services offered, they may be less likely to stop attending. Services provide high quality interactions and sustain the involvement of parents, their children also participate in the services with the goal of improving a child's learning, development and wellbeing. We know from our research that the most salient environmental influence for infants and young children is their caregiving relationships.

Interpersonal interactions are the primary source of experiences (positive and negative) that shape the developing brain and therefore influence development and learning.

Trauma-informed training and reflective practice for educators

To be trauma-informed requires all activities and ways of working to respond to the effects of trauma that children and their families may have experienced, and which may be visible or invisible. Research shows that trauma including grief, abuse, parental addiction or family stress, can undermine children's ability to learn, form relationships and function capably.

Educators are trained in attachment theory and recognising and responding sensitively to trauma through behavioural guidance techniques and modelling self-regulation. Furthermore, educators have ready access to colleagues who practice in infant mental health for advice and support. Regular reflective supervision and clinical coaching provides educators with frameworks and concepts to understand emotional development, child responses to stress, and the skills to apply these concepts to the individual child. Monthly staff meetings occur for all staff with a multi-disciplinary focus on reflection, professional learning, problem solving and decision making.

Co-designing with families

Empowering children and families' voices and active engagement by ensuring participation of all children, with a particular focus on ensuring children from vulnerable backgrounds and their families are appropriately supported to participate in their critical early years. Based on the principles of proportionate universalism, the model has an in-built capability to be scaled up for children and families requiring additional support in a seamless manner.



KIDS FIRST

Contact us

03 9450 0900

info@kidsfirstaustralia.org.au

kidsfirstaustralia.org.au

Stay up to date



Kids First Australia



@Kidsfirstmedia



Kids First Australia



@Kidsfirstaus