

Childcare

and Children's Health

A national program developed by the Centre for Community Child Health at the Royal Children's Hospital in Melbourne with support from Johnson & Johnson. This publication promotes current expert advice on child health and wellbeing and current policies and practices for those who work with young children and their families.

Moving Towards Integrated Education and Care in Early Childhood Services

Educators are "early childhood practitioners who work directly with children in early childhood settings" (Early Years Learning Framework, p.45). Early childhood teachers are considered degree-qualified educators.

Introduction

The early childhood education and care (ECEC) sector in Australia today is both diverse and complicated – the result of a largely unplanned evolution. Many factors have contributed, and may continue to contribute, to this situation, including:

- demand for services
- historical practices and traditions
- varying types and sources of funding
- differing government policies and regulations
- a broad range of training institutions and qualifications required for carer/educator.

Not surprisingly, there are misperceptions in both the community and media about how early childhood services contribute to child development. Even the labels 'preschool' and 'childcare' contribute to a false understanding where the educational and care aspects of child development are unnaturally divided.

In recent years there has been a considerable positive shift in attention to ECEC services from all levels of government, particularly to improve their cohesive nature. Initiatives such as the Early Years Learning Framework (EYLF), and the National Quality Framework (NQF) aim to improve consistency across the sector and support educators to improve the quality of early childhood programs. They acknowledge

that all services (family day programs, long day programs, shorter day/sessional programs) contribute to children's learning and development.

Defining Integrated Education and Care in the Early Years

Traditional boundaries and definitions of childcare and preschool become less restrictive when educators understand that health, well-being, learning and development are interrelated. Integrating education and care recognises the child as a whole person who needs all areas of development to be nurtured simultaneously and recognised as co-dependent. Well-being is fundamental to children's learning and



development in the early years, and the emphasis needs to be on the learning process, rather than focusing on skills acquisition and performance.

Signs of well-being in children include fun, joy, vitality, inner peace, eagerness to explore the environment and self-confidence.

Educators that value the family as the child's first educators and continue to build on learning at home understand that nurturing a child's well-being is fundamental to the child's motivation to explore the environment, engage with adults and peers, and engage in play experiences. The relationships children have with educators and their peers are critical in the early years to nurture a child's interest in learning and discovery. Children who have warm, close, supportive relationships with their early childhood teachers are more likely to have better relationships with other children, do well academically, and have fewer behaviour problems in early childhood and elementary classrooms (Gallagher & Meyer, 2006).

Integrated education and care involves all of the adults in the early learning environment balancing the care routines with adult-guided and child-guided play experiences. The aim of integrated education and care is to ensure that every interaction the child has – with educators, adults, peers or their environment – contributes positively to their development. Ideally early childhood teachers will lead programs for all children – infants, toddlers and preschool aged.

Child-guided experiences follow children's interests and actions, however, educators often provide the materials, become involved in play, and add a range of supports and challenges.

Adult-guided experiences predominately follow the educator's goals, but the experience is shaped by children's active engagement. (Epstein, 2007)

Integrated practice in Australia

Achieving integrated practice requires developing new and different ways to work with children and families. ECEC services across Australia are at varying points of integrated practice, mostly due to differing state-based regulatory requirements, a service's individual approach and philosophy, a service meeting the individual needs and requests of the families, or a combination of factors.

A common misunderstanding is that long day care centres and family day care services provide 'care' for the children of working parent/s and preschools provide more structured educational programs as part of a child's preparation for school. Despite Australia having an early history of service integration for the first few decades of the 1900s (KU, Gowrie & SDN provided care, health and educational programs), in the later half of the century, services separated. There is now a changing understanding of integration for both educators and managers. Today, it is expected that integrated services will differ in every community, as they are influenced by the needs of the communities, as well as other factors including varying state/territory requirements.

Examples along the Integration Continuum

Tasmania:

All early years services are the responsibility of the Department of Education. A curriculum framework *Launching into Learning* guides programs for children aged 0–4 years.

Victoria:

The new Department of Education and Early Childhood Development (DEECD) is now responsible for all early childhood services.

The 2009 regulations require that all long day care and kindergarten services have an early childhood teacher. An early learning program for four year-old children is funded by the Department, however the program may be operated within a long day care centre or a stand-alone kindergarten (preschool). It is also common for teachers to be employed in programs for three and four year-old children.

NSW:

All long day care centres and preschools offering more than 29 enrolment places, are required to have at least one early childhood teacher. This number increases with the number of places. Programs for infants, toddlers, as well as preschool age children will often employ teachers.

What does integrated practice look like for children?

- I trust my educator/s and feel safe when I am here. I have cuddles, sit on a lap to read a story or drink a bottle, and know that my nappy will be changed.

This allows me to really focus on playing, having fun and making friends which is how I learn.

- My educator/s set up appealing activities for me to play with. They stay close by, support me in case I need help, help me to think of different ideas, challenge me and play with me and my friends throughout the day. Sometimes they set up the same activities again tomorrow, or they might change something or set up something new.
- My educator/s and my family talk to each other so that many of the rules and expectations are the same. My family also teach my teachers [educator/s] words in my home language, and the names of people and things I like the most. This helps me to feel comfortable and confident when I am here.
- My educator/s take photos, talk with me and write down what I do and say, and then show me and my family the things I have been exploring and learning. This means that I can play the same type of game at home which links what I learn at home to what I learn with my friends and educator/s.

What does integrated practice look like for families?

- My child's educator/s show us how and what our child is playing with and learning. We can see how playing helps our child to learn and grow.
- We can see that our child's educator/s are interested in our child's learning and development and we actively support them in this.
- The educator/s involve us in setting goals for our child, and we work towards reaching them when we are at home. The teachers support all educators to keep records so we can see the links between what our child could do when they were 18 months and what they are doing now that they are four years-old.
- We feel comfortable raising concerns with our child's educator/s and know that if they are unable to help us, they will find out who can.

What does integrated practice look like for early childhood educators?

- Our program's main focus is on relationships, rather than routines and activities. We ensure there is time to actively foster relationships with children, families, and colleagues which shifts our focus from

specific isolated child outcomes/checklist-type goals and completing routine tasks, to discovering a child's approach to learning and their experiences in the service and at home.

- Our focus is to promote and support a program that integrates care and education. We share tasks like cleaning, changing nappies, and reading a story.
- A collaborative approach to program planning is led by teachers, while recognising that all educators contribute to children's learning and development.
- We understand that responding to the vulnerability and competence (Lally, 2007) of infants and toddlers is different to preschool-age children and requires different skills and routines.

Final thoughts

Achieving integrated practice can be a challenging task, however it helps to keep in mind that integrated practice is a process of change rather than something that is achievable tomorrow. Integrated practice is different for different communities, but the idea behind integrating services remains the same – improving outcomes for children and supporting their families.

Questions for Reflection:

- How does your daily routine/program support the development of relationships between educators and children, children and their peers, and educators with family members? How are routine tasks divided between staff? How do educators and coordination staff work together to build positive relationships with each other and with children and families?
- How does the program documentation show the process of children's thinking and learning during play experiences as well as skill acquisition?
- Do all educator/s have an opportunity to contribute to all stages of planning – observation, evaluation, program documentation? How can educators share their experiences with others in their FDC scheme?
- How are families supported to understand the links between early learning in the home environment and the learning that occurs within our service?

A full list of references and the Parent Fact Sheet can be downloaded from the Early Childhood Connections website: www.ecconnections.com.au

Case Study

Gowrie Victoria's program is underpinned by a 'whole-child' philosophy. This philosophy helps Gowrie Victoria seamlessly integrate caring practices with their educational program.

A "whole-child" approach recognises that a child's development in all domains – social/emotional, physical, cognitive, and language – occurs simultaneously and co-dependently.

The following case study responds to the reflection questions and outlines how Gowrie Victoria has integrated early childhood services.

Philosophy and Curriculum

In 2005, Gowrie Victoria began to review their program planning in order to strengthen their "whole-child" approach for integrated service delivery.

It was intended that the program would recognise and value the *process* of children's learning (the how), and children's *knowledge and skill development* (the what). It would encourage the educators to think about how they support each child's learning and development within a group environment, as well as what children are learning. Gowrie Victoria also understands cuddles, joy and laughter are critical program elements.

Over the next few years, Gowrie Victoria developed a curriculum framework for this "whole-child" approach, with four curriculum areas:

- Concepts (e.g. cause and effect)
- Skills (e.g. counting, and independent feeding)
- Dispositions (e.g. persistence, and curiosity)
- Values (e.g. respect, and sharing)

This framework guides educator/s to support each child's, and the group's, learning in each of these areas (the new Early Years Learning Framework will be integrated into current practice).

Other operational areas of Gowrie Victoria were also reviewed to support the "whole-child" philosophy, including the following.

Staffing and rosters

Two important approaches adopted to support educators to develop and maintain relationships with children and families are:

- An early childhood teacher leads each room team and assists the team to support children's learning with responsive interactions and providing engaging materials and environments.
- Familiar relief staff (assistants through to teachers) provide support by covering shifts for program planning or leave days. They have relationships with children and families, are familiar with individual children's needs and interests, and take part in a child's learning journey.

Daily routine/program/environments

A well set-up environment combined with a flexible routine allows educators plenty of time to spend with children and families and documenting their learning. Gowrie Victoria's program:

- Is play-based, flexible and provides children with an indoor/outdoor program and uninterrupted time to play.
- Incorporates an extra 15 minutes at each end of educators' shifts to allow time to set-up and put-away without children present, as well as additional program planning time for all staff.
- Ensures that lunch-time is a relaxed and social routine, with adults and children sitting together.
- Encourages both educators and children to take responsibility for cleaning and tidying.

Documentation

Documentation allows a child's learning to be shared between educators, families, and children:

- Children's participation, interests, approaches to learning and group activities are recorded in individual and group portfolios. Portfolios feature educator and parent-written stories (done in collaboration with children) of the child's discoveries, learning and conversations. These portfolios link learning at home with learning at the centre; and link learning in infancy with learning during preschool years.

Early Childhood Development and Television

Television is a normal part of the environment for most children in Australia. Children are exposed to television from a very early age, sometimes even from birth. Cognitive, social-emotional and physical development occurs while children experience television directly as intentional viewing and indirectly via background exposure (this can be in shopping centres, doctors waiting rooms or in the many homes where television is always switched on).

'Children in the twenty-first century typically develop in front of a screen' (Calvert & Wilson, 2008)

Perhaps surprisingly, young children are the heaviest watchers of television. It is estimated that an average four month-old Australian baby watches 44 minutes of television per day, while a child aged 0-4 years with subscription television watches an average of 194 minutes per day (Australian Communication and Media Authority [ACMA], 2007). Typically, young children spend more time watching television than any single other waking activity. They watch at any and all times, not just at the designated 'C' (children's television) or 'P' (preschool classification) timeslots. Also, young children are increasingly watching television on their own, without an adult (or even an older sibling) to help them make sense of what they are watching.

Why is television an early childhood health issue?

Television is the main contact with the media for preschool-aged children. A growing body of research points to the significant impact of television on children's well-being, health and development. Recent research shows links between television viewing and obesity, language development, behaviour, sleep and social-emotional development.

Children will be affected by television exposure differently, depending on:

- Content of the program (for example, violence)

- Amount of time they spend watching television (the risks increase with the number of hours of television exposure)
- *How* the young child watches television (for example, if the child is watching on their own?)

While certain television programs can be beneficial socially and educationally to older preschool children, research shows that this is not the case for children aged two and under. In fact, the negative impact of television is most significant for this age group. All experts advise limiting young children's exposure to television, and the American Academy of Pediatricians takes this further by advocating a 'no screen policy' (including no television) for children under the age of two years.

Obesity

The link between obesity/overweight and the number of hours that children watch television is well researched. An Australian study found that children who watch 20 hours or more of television per week doubled their risk of being overweight or obese compared with children who watch less television (Wake et al., cited in ACMA, 2007).

Language development

Television may also negatively affect early language development. A recent study found that adults spoke less to young children when television was on, and young children responded with fewer vocalisations, so that parent-child interactions typically decreased. The researchers concluded, "these results may explain the association between infant television exposure and delayed language development" (Christakis et al., 2009).

Behaviour

Television programs provide models and 'scripts' for social behaviour and interactions – including play. For example, exposure to violent content increases the risk that children will develop scripts for play which promote violence.

Sleep

Television viewing may also affect the quality of children's sleep (ACMA, 2007) There is an association



between television viewing and irregular sleep schedules in infants and children younger than three years of age (Thompson & Christakis, 2005).

Social-emotional development

Viewing violence is associated with a range of problems including: desensitisation; a lack of empathy with victims of violence; an increased tendency to aggression; and the perception of the world as scary. It may also cause children to regard violence as both a normal and acceptable way to resolve conflict. Some children are more vulnerable than others to these effects. Vulnerable children are typically male, younger than seven or eight, living in violent homes, and heavy consumers of media (Young Media Australia, 2007).

What can carers do?

Carers have a role in promoting children's health and wellbeing and reducing the risks associated with television in early childhood. Carers can do this by:

- Providing information to parents about the effects of television exposure
- Promoting positive alternatives to watching television
- Promoting the importance of face-to-face,

responsive interactions and talking, singing, reading in early childhood development

- Promoting play as the medium through which children learn
- Advocating for better quality children's television programs, with clearly defined criteria to measure quality.

For children older than two years, moderate exposure to carefully selected television and other electronic media may be useful in promoting positive developmental outcomes that include early literacy development. A recent review of research into the effects of television on early literacy development (Moses, 2009) concluded that television can be a useful resource and part of the many experiences that promote early literacy. However, to gain these benefits, it is suggested that carers:

- Establish goals for selecting programs for young children
- Watch programs with young children and talk about the content
- Supplement television viewing with other literacy experiences
- Extend the program's literacy content and messages.

Further Reading

National Childcare Accreditation Council, 'Using television in childcare', Putting Children First, 1(30)

QIAS Principles 4.1 - 4.6

FDCQA Principles 3.1-3.7

A full list of references and the Parent Fact Sheet (available in different community languages) can be downloaded from the Early Childhood Connections website: www.ecconnections.com.au

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