

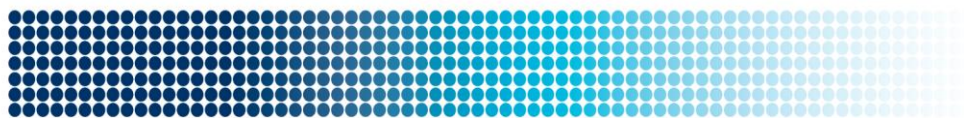
CHILDCARE AND EARLY CHILDHOOD LEARNING

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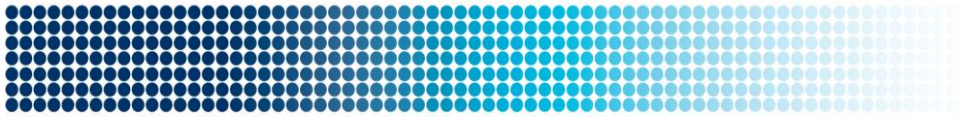
Presentation to Public Hearing of the Productivity Commission's
Inquiry into Childcare and Early Childhood Learning

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EVIDENCE REGARDING CHILD DEVELOPMENT

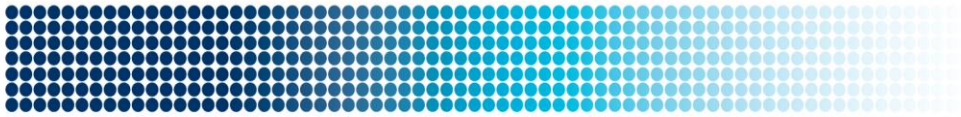
- What happens during the prenatal and early postnatal periods has both immediate and long-term consequences for health and development, affecting the later achievements, social adjustments, mental health, physical health and even the longevity of individuals.
- This is because these are the periods of greatest developmental plasticity during which the foetus and infant are most receptive to external influences – this period lasts from conception to the first two to three years postnatally.
- The nature of the environments in which children spend their time – their relational and physical properties, and the learning opportunities they provide – shape children’s development for better or worse.
- Healthy development depends on the quality and reliability of a young child’s relationships with the important people in his or her life, both within and outside the family - relationships are the medium through which young children learn the skills that enable them to become fully participating members of society.
- The foetus and infant are not passive recipients of experiences, but actively adapt physiologically and neurologically to match the physical, nutritional and relational environments they experience – these adaptation help them survive and even thrive in the short term, but may have long-term adverse consequences for later development, health and wellbeing.
- These early learnings and adaptations are critical because learning and development are cumulative, with later development and learning building upon earlier development, with the result that the gaps between those doing well and those not doing well progressively widen.
- What children ‘learn’ in the early years is not exclusively cognitive or even conscious: much of our most important emotional and interpersonal learning during our first few years occurs before we have the necessary cortical systems for conscious awareness and memory, and therefore many aspects of our lives are controlled by reflexes, behaviours, and emotions learned and organised outside our awareness.
- The brain is not a stand-alone bodily system, but is intricately connected to other major bodily systems, including the immune, endocrinal, cardiovascular and metabolic systems – these systems shape and are shaped by each other.
- Thus, what is ‘learned’ in the prenatal and first two to three years of life affects not only the neurological system but also the other bodily systems to which the brain is connected, with potentially profound consequences over the life course.
- Rapid social, economic, demographic and technological changes over the last few decades have made the world a more challenging and complex place, and altered the conditions under which they are raising children.



- While most families have benefited from these changes, poorly-resourced families find the heightened demands of contemporary living and parenting overwhelming, and there is an increase in the numbers of families with complex needs, and poor health and developmental outcomes.
- In this changed world, the stakes have risen: a competitive global market and, national productivity has become even more important, and improving productivity involves people to master more complex skills required by rapid advancing technologies – therefore, it is no longer acceptable to have children arriving at school poorly equipped to benefit from the learning and social opportunities schools provide, and therefore at risk of not developing the skills and qualities needed in a modern economy.
- Economic analyses show that investments in the early years are more cost effective and beneficial than later investments, and that the cumulative costs of not intervening early are prohibitive.
- In every society, regardless of wealth, differences in socioeconomic status translate into inequalities in child development across a wide range of developmental, health and well-being indicators.
- Discrepancies between children from advantaged and disadvantaged backgrounds emerge early, and progressively widen, with advantages and disadvantages accumulating throughout life.
- Significant numbers of children are arriving at school poorly equipped to benefit from the social and learning opportunities that schools offer, and schools struggle to make up the gap between those children and their peers.

IMPLICATIONS

- This accumulation of new knowledge about the impact of prenatal and early childhood experiences on health, wellbeing and development in later childhood and over the life-course must change how we view the early years.
- It is no longer appropriate nor useful to view the first two or three years of life as a period to simply keep children healthy and safe, while allowing development to take its course until they reach school age: we need to be taking steps to ensure that children are provided with early childhood environments and experiences that build attachments, competencies and skills from birth, and protect them from escalating chains of adverse experiences.



Qualifications for child care workers

- Caregivers and professionals need fundamental relational skills and qualities supplemented by more sophisticated and purposeful set of skills that enable them to provide children with the kinds of environments that will promote their development and wellbeing.
- Acquiring an additional level of sophistication requires appropriate pre-service training, as well as ongoing training, supervision and support.
- Although the evidence clearly indicates that staff qualifications and training are important for quality and have a direct impact on the ability of staff to provide sensitive, responsive and stimulation care and education for young children, this evidence is stronger for children in the pre-school range and is less consistent for children below the age of three.
- This lack of consistency does not indicate that qualified staff are less important for younger children but is more a reflection of the relatively few graduate-qualified staff working with this age group and the limited research that has been conducted.
- The fact that few graduate-level staff work in child care is itself a reflection of the prevailing view that child care is a relatively simple and undemanding job that can be done by those with few qualifications – but the cumulative weight of developmental and health research strongly indicates that this view must now be challenged.

CONCLUSIONS

- As a society, we have long-standing commitments to the public funding of hospitals and schools – but, as yet, no corresponding commitment to some form of early childhood provision, or even an agreement across society as to what that provision should be.
- We are at a transitional point in our understanding of the nature and significance of the early years – we are becoming much more aware of their importance but are not yet committed to a course of action that will ensure that children’s experience of this period is optimal.
- In moving forward, it is crucial that we base whatever we do on our new understanding of the developmental evidence.

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