

Parents Work Collective Submission to IPART Inquiry into Early Childhood Education and Care, May 22nd 2023

Introduction

Parents Work Collective is a national, not-for-profit organisation that advocates for the choice to engage in care work and for that care work to be appropriately supported and valued by government and wider society. We are active in the media and on social media, while also contributing to government inquiries relevant to these issues. We have amassed a significant following since the organisation was formed six months ago.

As an organisation, we are concerned about the way in which childcare expansion policy continues to worsen conditions in childcare centres, perpetuates a culture of devaluation of care and exposes babies and children to care which is developmentally inappropriate and of inadequate quality

There is an enormous push in Australia towards expanding childcare services (or 'early education and care') in the belief that it is in the best interests of children, women, families and the Australian economy for children under five to be in institutional care and for women to perform more paid work. This widely held assumption is evident even in IPART's terms of reference paper for this inquiry which states that "Children who participate in quality early childhood education and care are more likely to succeed at school and have improved lifelong educational, social and economic outcomes." Not only is this statement not supported by the evidence base, as we will demonstrate, it is irresponsible and misleading.

In developing its recommendations to support affordable, accessible, equitable and high quality early childhood education and care (**ECEC**), IPART needs to ask the difficult questions about what truly is best for families, babies and children. The tribunal must consider the tension between delivering developmentally appropriate, high quality care and short term economic gains.

Cheaper is never better, but the push to drive down costs in the sector has sadly led to a situation where thousands of Australian babies and children are exposed to poor quality care each day. Quality care is expensive, often prohibitively so for commercial businesses, but under no circumstances can quality be compromised in the interests of the sector's 'commercial performance'. Delivering quality care on a commercial scale is highly problematic because love and care is impossible to commodify. Many have argued commercialization is in fact completely incompatible with acts of love and care.

If the government wants more families using childcare, the government is obligated to directly subsidise existing childcare providers until the high quality is guaranteed in every centre. Anything less risks exposing babies and children to care that can negatively impact their development.

IPART must also take a renewed analysis of the evidence base in order to establish what exactly constitutes the best possible care in centre environment, staffing ratios, staffing qualification and session lengths.

In its current form, the ECEC sector is unable to meet the needs of children and families¹. Systemic reform and restructure to ensure necessary changes will take decades. IPART must move to recommend strategies that ensure existing services are able to pay staff appropriately and offer the highest quality care, rather than expand the childcare sector beyond limits of quality care. If IPART finds it is not financially and logistically feasible to immediately attain universal high quality care at the sectors current size it must instigate a sectoral contraction to ensure high quality is prioritized.

Proposed policy solutions

Parents Work Collective proposes the following solutions to alleviate the staffing and quality crisis currently gripping the ECEC sector and ultimately improve outcomes for babies and children:

1. Implement a priority system which prioritises children in the 3 and 4 year old age groups where the benefits of early learning are most concentrated and well-established in the evidence base;
2. implement targeted care access which prioritises disadvantaged children or those requiring early intervention in any age group prior to schooling, groups far more likely to benefit from ECEC than children from middle and high income families, yet least likely to use ECEC;
3. ensure the proposed year of full-time 4 year old preschool is not compulsory beyond 15 hours per week, as this is considered the optimal 'dosage' for school readiness and child development. It would also ensure lower demand for the preschool program so that it can be properly resourced rather than 'spread too thin' and quality compromised. Families can apply to use this service beyond the recommended optimal preschool hours due financial hardship, disadvantage or additional needs requiring intervention.
4. conduct a full review of the proposed full time year of four year old preschool in light of the existing evidence base;
5. commission a review of research pertaining to standards that actually constitute 'high quality care' as this is critical to mitigating risks of early and extensive exposure to childcare
6. conduct a review of the research into long-term health risks associated with early and extensive use of childcare to identify quality standards that best mitigate these risks and ensure the delivery of the most developmentally appropriate possible care;
7. conduct a comparison analysis of child outcomes within varying childcare business models such as for-profit, not-for-profit, state run and community run care;
8. implement policies to control and counter subsidy inflation;
9. conduct an analysis of family preferences for models of care;

¹ Senate Select Committee into Work and Care, Final Report, 9 March 2023, page 22, [3.9].

Challenges faced by the ECEC sector

The challenges that the childcare sector now faces are mostly related to the unsustainable expansion of the sector – growth in demand that has occurred much faster than a growth in resources and supply. The Australian Children’s Education and Care Quality Authority estimates staffing shortages in the order of 39 000 educators. This has resulted in overcrowding and compromised quality of care that is well documented in centres² and is already having demonstrable impacts on our youngest and most vulnerable citizens.³ In order for the sector to restructure and reform in a way that will meet future demands and adequately meet the needs of children, it must essentially undergo a short-term period of contraction, before steadily expanding in a sustainable way in the long term.

The Commonwealth Government must ultimately prioritise the users of these services – the children – whose wellbeing is being at risk under the current conditions. The Government must aim to alleviate the situation by investigating mechanisms that would reduce demand for childcare places, such as a prioritisation system, thereby increasing the quality of care.

Detail supporting the proposed policy solutions outlined above

Policy solutions 1 and 2:

Given the impossibility of sourcing an additional 39 000 workers for the childcare sector in the coming weeks and months, and that evidence to the recent Senate Select Committee Inquiry into Work and Care estimated a high quality care guarantee would not be possible until at least 2030⁴, government is obligated to ensure centres meet the legal minimum staffing requirements and minimum quality standards by actively reducing the number of children in formal care in the immediate short term.

Government has so far failed to address the serious ethical issue of incentivising increasing use of a childcare system that is understaffed and cannot guarantee quality care for every child.⁵ Incentivising institutional care models that many researchers consider to be developmentally inappropriate for children under 3 years, a time of immense developmental vulnerability, also poses an ethical problem that government seems unable to address. The short term financial gains of group care seem hardly justifiable given the long term costs of increased physical, cognitive and psychological health risks associated with early and extensive poor quality non-parental care.

² See eg <https://www.smh.com.au/politics/federal/the-pay-does-suck-why-it-s-so-hard-to-get-a-childcare-spot-20230126-p5cfr2.html>; <https://www.news.com.au/lifestyle/parenting/kids/horrible-problem-being-faced-by-parents-across-the-country/news-story/e05c9c5b44b6ea951b7ab511e3a49c64>;

³ Melhuish, Edward & Ereky-Stevens, Katharina & Petrogiannis, Konstantinos & Ariescu, A. & Penderi, Efthymia & Rentzou, Konstantina & Tawell, Alice & Slot, Pauline & Broekhuizen, Martine & Leseman, Paul. (2015). A review of research on the effects of Early Childhood Education and Care (ECEC) upon child development. CARE project; Curriculum Quality Analysis and Impact Review of European Early Childhood Education and Care (ECEC), pg 63.

⁴ Senate Select Committee into Work and Care, Final Report, 9 March 2023, page 28, [3.33].

⁵ For example, according to the latest data from Australian Children’s Education and Care Quality Authority, more than 1 in 7 long day care services in Australia hold a staffing waiver which allows them to operate even though they cannot meet the legal minimum staffing requirements: Australian Children’s Education and Care Quality Authority, *NQF Annual Performance Report Summary* (2022).

The evidence base shows that disadvantaged children are far more likely to benefit from ECEC than children from families providing a normal quality of care at home. In light of this evidence, to both maximise funding impact and reduce demand for childcare places thereby improving quality of care, government must cap overall places in ECEC and ensure disadvantaged children are prioritised in accessing these places

We propose that all 3 and 4 years olds be given priority access to suitable preschool facilities within a certain distance from home before positions for younger toddlers and babies are made available based on staff availability. Disadvantaged children or those requiring early intervention in any age group prior to schooling must also be given priority. ECEC would rely on cross-agency information sharing with the Department of Health, Social Services and Family and Community Services to identify highest priority babies and children.

Policy solutions 3 and 4: Review year of full time four year old preschool

The current proposed year of full-time 4 year old preschool is at odds with large parts of the evidence base which suggests time in preschool beyond 15 hours per week presents no added benefit for the child. If 15 hours per week is widely considered the optimal 'dosage' for school readiness and child development in the general population, an immediate review must be conducted of the proposed year of full time four year old preschool which seems directly at odds with the evidence base.

IPART must recommend the government commission a current analysis of research pertaining to optimal preschool dosages (hours per week). Viewing 15 hours of preschool per week as a 'minimum' dosage for the general population does not reflect the research which has been unable to establish benefits for children beyond 15 hours per week unless they come from neglectful or disadvantaged homes.⁶⁷ A thorough reading of the research would suggest that 15 hours per week of preschool is in fact optimal exposure for 3 and 4 year old children in the general population, particularly in part-time, sessional attendance models.⁸

Until such a time that research is able to establish firm findings that all children benefit from more intense and extensive preschool attendance, policy must assume that 15 hours per week is optimal for child development for children from backgrounds where normal quality of home care is provided.

This erroneous reading of the evidence is a highly unsuitable foundation on which to base policy costing the tax payer billions of dollars. A new analysis of the research must be performed which takes into account the lack of high quality childcare currently available in Australia. Policy development and subsidy spending cannot take a 'cart before the horse'

⁶ AIHW, Literature Review of the impact of early childhood education and care on learning and development, 2014

⁷ Stacey Fox and Myra Geddes, *Preschool: Two Years are better than one*, 2016

⁸ Susanna Loeb, Margaret Bridges, Daphna Bassok, Bruce Fuller, Russell W. Rumberger, How much is too much? The influence of preschool centers on children's social and cognitive development, *Economics of Education Review*, Volume 26, Issue 1, 2007, Pages 52-66,

approach and claim benefits associated exclusively with high quality care when the childcare sector in Australia is highly variable and yet to achieve universal quality standards required to attain positive outcomes for children.

Policy solutions 5 and 6: Establish what constitutes high quality care and the risks of low quality care

IPART must recommend the Government undertake a comprehensive review of research pertaining to what constitutes high quality ECEC as well as the risks of poorer quality institutional care for babies and children under 5 years old.

It would be appropriate to further consult a panel of research experts who have authored research papers in relation to outcomes resulting from ECEC exposure, both positive and negatives. Psychiatrists, psychologists and health professionals also need to be consulted with regard to physical and mental health ramifications of early and extensive group care. This would better inform quality measures to mitigate these risks.

Advocacy for ECEC consistently misappropriates research to claim that more hours in formal care at any age from birth improves cognitive and socio-emotional outcomes. This simply is not the case. There is a strong and extensive body of evidence which shows that, for the general population, ECEC often has no effect on these outcomes, negative effects or positive effects that fade out quickly.^{9,10}

The new analysis must consider that benefits of ECEC are mostly observed in children from neglectful or disadvantaged home environments, the inconclusive data on the amount of ECEC exposure that is optimal, the many studies that find insignificant or negative effects of ECEC, including preschool, for the general population, and the tendency for most benefits of ECEC exposure to fade out in primary school. The new analysis will need to inform funding models.

We are also concerned that IPART is misappropriating evidence of the benefits of preschool to include babies and small children. Claims about the benefits of ECEC routinely fail to distinguish between the evidence based needs of babies and toddlers (aged up to three) and pre-school children (three to five years).¹¹ The developmental needs of a 6 month old baby are vastly different to a four year old child and policy discussion around ECEC must reflect this. We recommend using the terms ECEC (0-3) and preschool (3-4) for clarity.

⁹ Little CW, Larsen S, Byrne B, Logan JAR, Olson RK, Coventry WL. Exploring the Influence of Early Childhood Education and Care on the Etiology of Achievement. *Behav Genet.* 2020 Nov;50(6):387-400. doi: 10.1007/s10519-020-10013-z. Epub 2020 Aug 14. PMID: 32797343.

¹⁰ Sammons, P, Sylva, K, Melhuish, E, Siraj-Blatchford, I, Taggart, B & Elliot, K 2002, *The Effective Provision of Pre-School Education [EPPE] Project: Technical Paper 8a - Measuring the Impact of Pre-School on Children's Cognitive Progress over the Pre-School Period*, Department for Education and Skills and Institute of Education, University of London, London.

¹¹ See, for example,

https://parlinfo.aph.gov.au/parlInfo/download/committees/reportsen/024994/toc_pdf/FinalReport.pdf;fileType=application%2Fpdf;
<https://thrivebyfive.org.au/>; <https://cpd.org.au/wp-content/uploads/2021/11/CPD-Starting-Better-Report.pdf>.

In the terms of this inquiry, the Commonwealth Government appears to be in favour of not just better access to quality preschool or kindergarten programs for three and four year old children, but for more access to long daycare for babies and small children under the guise of early learning benefits associated with preschool. All of this appears to fall under the banners of 'early learning and education' or 'early childhood education and care' and is said to greatly benefit small children. It is quite clearly conflating research to suit an agenda that seeks to increase parents' paid work hours.

There is considerable research in support of the position that the best learning and developmental opportunities for small children, particularly up to the age of three, come from spending time with a loving parent. Long periods of time in institutional childcare, no matter the quality of that childcare, cannot meet the developmental needs of babies and small children in the same way.¹²

There are many credible experts who argue that long periods of time in institutional childcare is not in the best interests of small children, including Dr Peter Cook (child and adult psychiatrist, and author of 'Mothering Matters'),¹³ Steve Biddulph AM (psychologist and internationally-renowned parent educator, author of 'The Secret of Happy Children', 'Raising Boys' and 'Raising Girls')¹⁴, Penelope Leach OBE (world-renowned child psychologist and author of 'Baby and Child'), Allan Schore (psychologist and researcher),¹⁵ Jay Belsky (psychologist and internationally-recognised child development expert)¹⁶ and Robin Barker (author of parenting book 'Baby Love', retired midwife and child and family health nurse).¹⁷

Experts in attachment theory such as Gordon Neufeld PhD (clinical psychologist and author of 'Hold Onto Your Kids') discuss the benefits of close physical and emotional attachment with parental figures, particularly in the early years of children's lives.¹⁸ Dr Neufeld is clear that it is not the content of what small children learn, but the relationships with their primary caregivers, that predict outcomes in adulthood. There is well-regarded research that universal childcare programs may not benefit most children.¹⁹ There is evidence that small children remain in a state of high stress during periods of separation from their parents at childcare.²⁰ Penelope Leach conducted a large survey of infant mental health professionals in 1997, most of whom believed that it is best for infants to be cared for mostly by their mothers.²¹

¹² Anne Manne, *Motherhood*, 2008, Allen and Unwin.

¹³ Dr Cook's roles included those of consultant in child psychiatry with the New South Wales Department of Health at the Queenscliff Health Centre in Sydney, and adviser on child mental health to the Regional Director of the Northern Metropolitan Health Region'. See generally https://www.naturalchild.org/articles/peter_cook/.

¹⁴ See generally https://www.stevebiddulph.com/Site_1/Home.html and file:///C:/Users/36808/Downloads/http_www.aphref.aph.gov.au_house_committee_fhs_workandfamily_subs_sub217.pdf

¹⁵ See generally <https://www.allanschore.com/>.

¹⁶ See, eg, Belsky J. Developmental Risks (Still) Associated with Early Child Care. *Journal of Child Psychology and Psychiatry* (2001), 42, 845-860.

¹⁷ <https://www.robinbarker.net.au/the-incompatibility-of-childcare-for-the-under-threes>

¹⁸ See generally <https://neufeldinstitute.org/>.

¹⁹ <https://ifstudies.org/blog/measuring-the-long-term-effects-of-early-extensive-day-care>

²⁰ M Simms, *Children's cortisol levels and quality of care provision*, 2006.

²¹ Leach P. (1997). Infant care from infants' viewpoint: the views of some professionals. *Early Dev. Parenting* 1997; 6: 47-58.

The overarching position of this extensive and varied body of work, if it were to be summarised, is that children have better developmental outcomes if they are cared for predominantly by a willing and able parent in their early years rather than spending significant amounts of time in externally provided childcare. Psychologists and parenting experts such as Steve Biddulph advocate for delaying introducing children to paid care until they are three.²²

Considering this body of research, in addition to ensuring the proposed full-time year of four-year old kindergarten is not compulsory, IPART is obliged to investigate ways to minimize separation trauma and chronically stressful environments in ECEC, both within the centres and in childcare policies that actually improve a child's access to parents in their earliest years. Possible strategies within centres may include:

- a) training staff in the grief babies and children experience on separating from their primary caregiver;
- b) the most effective ways a secondary caregiver can support a baby or child during this time;
- c) enforcing the introduction of gradual and incremental transition programs for babies and children to reduce separation trauma and toxic stress;
- d) improving conditions for staff that would improve the way they relate to babies and children; and
- e) reducing staff turnover to minimize the separation trauma when a baby or child does form an attachment of sorts to their substitute caregiver at the centre.

Policy solutions 7 and 8: Comparison of business model analysis

We propose that IPART analyses relevant research to determine childcare business models that deliver the best outcomes for children and use this analysis to inform the restructure of the industry. This analysis should also guide government subsidy strategies and improve the effectiveness of investment in the sector as subsidy dollars are prioritised for centres with business models that deliver the best outcomes and capped for businesses that typically deliver the worst outcomes. This practice can already be observed in Canadian childcare subsidy systems and was a result of well documented poor outcomes delivered by a hastily set up, for-profit childcare system in Quebec.²³

It would also be pertinent to investigate the broader market failures within the childcare sector, such as scarcity of childcare places being built into the business model of for-profit and not-for-profit centres alike resulting in affordability issues and childcare deserts. Childcare businesses are extremely high cost and rely on scarcity, high demand and low supply, to drive up prices to cover their costs. Businesses often cannot justify opening centres in rural areas where the demand is low. This market failure is contributing to further

²² file:///C:/Users/36808/Downloads/http_www.aphref.aph.gov.au_house_committee_fhs_workandfamily_subs_sub217.pdf

²³ Cleveland, G., What's the position of the federal government on for-profit child care?, <https://childcarecanada.org/documents/research-policy-practice/21/06/what%E2%80%99s-wrong-profit-child-care>, 21 Jun 2021

widen education gaps and further disadvantage populations that already struggle to obtain services.

IPART must consider the role of increased government investment in the sector to incentivise businesses to build childcare centres in less populated or lower demand areas. It must also consider the expansion of state run day care as a way to ensure more equitable geographic distribution of care.

Subsidy inflation is well documented within the childcare sector and IPART must investigate ways to construct the subsidy to better help the intended beneficiaries, families, while minimising the increase in the overall costs of childcare. If subsidies were paid directly to parents who were not required to disclose whether they received the subsidy or the amount, childcare businesses would be less able to inflate prices in response to each subsidy increase. If government wishes to subsidise childcare centres from a business perspective, this must be in the form of a separate subsidy.

Policy solution 9: Family preferences

When developing recommendations to improve childcare services, IPART must consider the preference of most Australian families to delay a child's entry into formal care. There is a large body of research that has examined the care preferences of families with young children, with most families preferring parental care in the earliest years.²⁴

Families are likely to be dissatisfied with ECEC if their first preference is to care for their children themselves. Part of the solution to improving the care experience for families may lie in enabling families to delay entry to ECEC or facilitate gradual transition programs into ECEC characterized by shorter, sessional attendance. Shorter sessional attendance in preschools is also aligned with the evidence base but the availability of this type of preschool program has reduced dramatically in line with attempts to facilitate increases in parents paid working hours. We cannot compromise child developmental needs in order to fit with the adult working needs.

Conclusion

In developing its recommendations to support affordable, accessible, equitable, and high quality ECEC, IPART needs to ask the difficult questions about what truly is best for families, babies and children. The tribunal must consider the tension between delivering developmentally appropriate, high quality care and short term economic gains. ECEC cannot be improved without consideration of the broader social, cultural, economic and political framework which has led the sector to a state of crisis. IPART must investigate mechanisms to reduce pressure on formal ECEC sector and immediately improve care quality.

At Parents Work Collective, we believe that childcare expansion policy reduces the overall quality of care and actually serves to devalue the care provided by incentivising parents to disengage from care work in favour of paid work. We assert that the wellbeing of children,

²⁴ Australian Institute of Family Studies, *Parent-only care in Australia*, 2016.

and indeed individual, familial, societal and economic wellbeing, is best served by policy that both delivers quality childcare and supports parents to have more choice in how they care for their children.

Formal childcare is important, but in its current form the childcare sector is unable to meet the needs of children and families. Systemic reform and restructure to ensure necessary changes will take decades. Interim measures are essential to ensuring improved performance of the ECEC and wellbeing of children and families until such time as high quality care is guaranteed and staff are entitled to appropriate pay and working conditions.

Regards,

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