

Quality child care as an intervention: Issues for caseworkers



Introduction

When placing children from vulnerable families in child care it is imperative, if the intervention is to be successful, that the child care centre chosen provides high quality care.

This Research to Practice Note seeks to assist caseworkers, and other operational and policy staff, assessing and referring clients to centre-based child care.

The importance of quality

It is well accepted that children benefit from high quality care¹, and that where the quality of care is low, children suffer².

Vulnerable children are the most responsive to the positive effects of high quality care and make the greatest gains³. Equally, vulnerable children are also the most susceptible to the negative effects of poor quality care⁴.

Centre-based care can provide greater quality assurance than home-based care – which is likely to be more variable in the quality of its delivery. Most research that assesses the effects of quality child care services has involved centre-based care.

The critical factor in the provision of child care programs is the provision of quality. Quality is referred to as being *process* or *structural* quality.

Process quality

Process quality is measured by observing the nature of caregiver and peer interactions, the variety and appropriateness of the activities and the type of language, stimulation and discipline styles used.

Caregivers need to be warm and caring, and be attentive to, and respectful of, children's individual needs. Caregivers should be culturally sensitive and accepting of differences. Children should be disciplined in positive ways, teaching social skills, instead of blaming, criticising, or punishing. Children need carers who will speak to them and actively encourage them to respond.

Structural quality

High structural quality creates the conditions conducive to high process quality of care. It includes staff to child ratios, staff qualifications, group sizes and staff stability. Other observable factors such as hygiene practices and the physical space are also part of this dimension of quality.

Good staffing ratios can mean that caregivers spend less time managing children's behaviour and more time interacting with children¹.

Staff with higher qualifications, and who are better paid, provide activities for children of a higher quality and are more responsive and less restrictive in their interactions with children¹.

The National Institute of Child Health and Human Development (NICHD) Study of Early Child Care in 2003 showed that group size and child-to-adult ratios were more critical than other factors in rating *process quality* for infants.

How does quality of care affect children?

Children in centres that demonstrate high process quality are happier, have closer attachments to their caregivers and perform better on cognitive and language tests than children in poor quality care. They have better general knowledge, are more able to initiate, understand and participate in conversation, are more cooperative, show less hostility and conflict and are more persistent than children in lower quality care.

In the longer-term these children are more ready to start school and have better language, pre-numeracy and pre-literacy skills. Poor quality care predicts heightened behavioural problems¹.

Studies which have used quality rating scales suggest Australian child care is generally of higher quality than that found in the US⁵.

When high quality child care is accompanied by programs aimed at parents and/or the community, the gains for children are the greatest.

Vulnerable children

When vulnerable children are placed in child care as part of a welfare intervention there are a number of issues that should be considered. Vulnerable children should be integrated with children who are not from disadvantaged backgrounds and the number of children placed in a room should be capped.

Issues to consider when choosing child care

When choosing child care it is important to look at how carers and staff interact with the children and whether the atmosphere is warm, friendly and welcoming. Some additional questions you might like to ask are:

- Are parents made welcome to visit the child at any time?
- Are all children made to feel welcome?
- Are family members encouraged to participate in activities?
- Is information shared between the staff, carers and families?
- Is information readily available about the child care service's policies?
- Are families informed about proposed changes to policies?
- Is there a planned program of day to day activities for my child?
- Am I encouraged to talk to staff or carers about the program/s offered?
- Do the activities interest the children?
- Do children have opportunities for self expression, self direction and self discipline?
- Are meal or snack times pleasant?
- Are children's individual needs met?
- Are there opportunities for children to become familiar with the broader community?
- Are the children encouraged to explore and take on new challenges?
- Is the equipment and the play spaces provided safe for children?
- Are there clear procedures for raising any concerns I may have?

Extracted from the National Childcare Accreditation Council's website.

Don't forget to utilise the expertise of your local Children's Services Advisor for additional advice and assistance.

Further reading

- Prevention and Early Intervention Literature Review, DoCS, 2004. Copies are available on DoCS' intranet and internet – www.community.nsw.gov.au
- "Choosing the right child care", *Parenting* 0-5 years, pp. 31-34, DoCS intranet
- National Childcare Accreditation Council (NCAC) – www.ncac.gov.au
- Early Childhood Australia www.earlychildhoodaustralia.org.au/
- Zero to Three www.zerotothree.org
 an organisation committed to the promotion
 of healthy development of infants and toddlers
 by supporting and strengthening families,
 communities, and those who work on
 their behalf.

Endnotes*

- 1 Vandell DL & Wolfe B, (2000). Care quality: Does it matter and does it need to be improved? (Special Report No. 78). Madison: University of Wisconsin, Institute for Research on Poverty
- 2 Hausfather A, Toharia A, LaRoche C & Engelsmann F, (1997). Effects of age of entry, day-care quality, and family characteristics on preschool behaviour. *Journal of Child Psychology & Psychiatry & Allied Disciplines*, 38(4): 441-448
- 3 Farrington D & Welsh BC, (2003). Family based prevention of offending: a meta-analysis. The Australian & New Zealand Journal of Criminology, 36(2): 127-151
- 4 Tschann JM, Kavier P, Chesney MA & Alton A, (1996). Resilience and vulnerability among preschool children. Family functioning, temperament, and behaviour problems. *Journal of the Academy* of Child & Adolescent Psychiatry, 35(2): 184-192
- 5 Harrison L, Watson J & Skouteris, H (2004). Measuring quality using the ECERS & ITERS: Is Australia doing as well as expected. Paper presented at the 12th Annual ARECE Conference Melbourne, January
- * Additional references available on request.

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