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Geraldine French and Dr. Katherine Zappone

The Childhood Development Initiative (CDI) has created a ten-year strategy to improve the health, safety and learning of the children of Tallaght West, and to strengthen their sense of belonging in their own communities. This paper portrays an overview of the strategy, the principles of freedom and prevention which underpin the project and outlines two of the eight activities, namely the Early Childhood Care and Education (ECCE) programme and the Enhancing Quality through Integration and Training (EQIT) programme. These two activities seek to develop high quality services in accordance with international evidence on early childhood development, local quantitative and qualitative research, national policy developments and scientific service design and will be rigorously evaluated. We will argue that given the process adopted and positive evaluation results, these services should be replicated and mainstreamed.

Overview of CDI

The CDI strategy has been developed by a consortium of people living and working in Tallaght West who came together in 2003 determined to find a better way to use their collective resources to improve the health and well-being of their children. CDI places children at the centre of its vision for the community. Its strategy embraces the broadest community participation, and builds on the strong history of partnership among statutory, local development and voluntary agencies. It is underpinned by a clear logic model informed by scientific methods of needs analysis, service design, innovation and rigorous evaluation (CDI and Dartington Social Research Unit [DSRU], 2004; CDI, 2005).
Outcomes

The strategy sets out to make a significant impact on four child outcomes: (1) Health, both physical and psychological; (2) Safety, by reducing the harm children experience as a result of risks in the community, in school and in home; (3) Learning and Achieving, by improving children’s readiness for transition to school, strengthening participation in school and empowering children to become more reflective and creative in all aspects of learning; and (4) A Sense of Belonging, including giving to and receiving from family, friends and community. The strategy also includes, family outcomes with the specific targets of improving parent-child relationships, skills and the enjoyment of parenting.

CDI is supported by Atlantic Philanthropies with the DSRU and the Office of the Minister for Children and is underpinned by the following principles.

Principles of Freedom and Prevention

Promoting the well-being of children—particularly those whose freedom to develop is inhibited by disadvantaged social and economic circumstance—requires theory and practice that brings about substantive, lasting change at a number of levels as follows (Zappone, 2005):

- The individual child
- The relations between the child and adults
- The community within which the child grows and develops
- The systems and services that are in place for the child
- The social and economic conditions that the child is born into
If positive change happens only at one or two of these levels, the individual child will be less likely to have her needs met, and to be free to develop her unique capabilities and powers into her adulthood. Methods for lasting change for the largest percentage of children from disadvantaged backgrounds are guided by two primary principles:

- The Principle of Freedom – action is geared towards releasing the capabilities of children and towards promoting children’s own agency so that the child participates in achieving valued outcomes.
- The Principle of Prevention – action is geared towards preventing needs emerging that block development and well-being, and towards intervening early so that needs are met to enable development and well-being.

The principles of freedom and prevention are manifest in the following two programmes.

**The Early Childhood Care and Education programme (ECCE)**

The factors which contribute to effective early intervention for children at risk of socio-economic disadvantage have been established as: “early assessment and identification of risk; family partnership; timing, structure and intensity of the intervention; curriculum approach and delivery” (McGough *et al*, 2006, p.125). The ECCE programme is a two year prevention and early intervention service for children in their third and subsequent fourth year and their parent/carers. The ECCE service mirrors the aspirations of the Department of Education and Science (2005), by delivering an integrated, collaborative and focussed programme and adheres to *Síolta*, the National Quality Framework (Centre for Early Childhood Development and Education [CECDE], 2006) through attention to its principles and standards (some of which are highlighted further in the paper).
Furthermore, CDI looks to the emerging *Framework for Early Learning* (National Council for Curriculum and Assessment, forthcoming) by delivering a documented, broad-based, flexible curriculum which encourages children’s holistic development and learning and focuses on the themes of children’s well-being, sense of identity and belonging, communication, and facilitates children’s exploration and thinking.

An ECCE service will be delivered in each of the four areas of Tallaght West (Brookfield, Fettercairn, Jobstown and Killinarden) during the academic year. This innovative model of integrated delivery of services consists of three components for: children; parents/carers; and children and parents/carers together.

*For children*

A high quality education and care service operating within the principles of High/Scope will be provided for four hours and fifteen minutes per day. This will adopt a key worker system incorporating home visits which focus on children’s learning and their educational needs. The service will be supplemented by specialist primary health care support in the areas of speech and language development (as recommended by Ahsam, *et al.*, 2006) dental hygiene, nutrition, and psychological assessment/input. The children’s daily nutrition requirements will be met through two healthy meals. A Summer Programme will also be provided. The component for children relates to key standards of *Síolta* namely the rights of the child, environments (indoors and out), play, curriculum, health and welfare and planning and evaluation. Regarding the *rights of the child* children are seen as individual, competent agents in their own lives, capable of learning in
partnership with adults and other children. The environment (indoors and out) will be carefully planned to accommodate opportunities for children to experience choice, initiative, active learning and rest. In CDI children will learn through play while exploring a wide variety of accessible and natural materials mediated within the High/Scope curriculum and key experiences. Attention to children’s health and welfare will be paramount, addressed through assessment and the provision of nutrition. Valid, reliable, strengths based observation and assessment systems are an intrinsic part of the education process in CDI in enabling practitioners to reflect and develop child centred follow-up work plans through daily planning using Child Observation Records. Underpinning all of this is a desire for children to enjoy learning, to develop their creative, spiritual and moral capacities and to feel a sense of belonging and pride in Tallaght West. The service is concerned with children’s being as well as their becoming.

*For parents/carers*

“Valuing and involving parents and families requires a proactive partnership approach evidenced by a range of clearly stated, accessible and implemented processes, policies and procedures” (CECDE, 2006: 29). The specific parenting and educational needs of parents/carers will be facilitated through a dedicated worker. Training, information and advice on parenting and child development will be offered to parents to better support the learning and care of their children. Parents will also have: access to information, opportunities to engage in self-development and further education and assistance in forging social support networks. Open communication procedures (CECDE, 2006)
between work colleagues and between practitioners and parents in daily contact and focussed home visits will be implemented.

For children and parents/carers together

Focussed work on supporting positive interactions through observations, exploring transitions (both within and between services) and experiencing family days will be provided. The development of parent and toddler groups will be advanced for the younger siblings of those attending the service. As advocated by Siolta (CECDE, 2006) a transitions policy will be established, acknowledging the variety that exist – from home to service (and vice versa), from one part of the daily routine to the other and from the service to formal schooling. Identity and belonging will be supported through sharing of cultural information, menus, photos/artefacts, toys/cooking utensils, language/translations. Community involvement will be enhanced through: the audit of services; visits to local resources such as the library or the pool; integration with health services and the creation of fora further outlined.

Enhancing Quality through Integration and Training (EQIT)

High quality practice in early childhood services is repeatedly emphasised by practitioners and researchers (Siraj-Blatchford et al., 2002; Schweinhart et al., 2004; Sylva et al., 2005). While high quality provision promotes young children’s development and learning, and that of their parents, poor quality provision does not, and may in fact place children at risk (Sylva, 1993). The Enhancing Quality through Integration and Training programme has two primary objectives: 1) to achieve integrated services
broadly within Tallaght West; and 2) to enhance quality through an assessment and training programme for early years and after-school practitioners. The IQIT programme has three components.

*Achieving integration*

An Integrated Services Forum (ISF) comprising of regional managers and front-line staff from the Health Services Executive, the Department of Education and Science, the National Education Psychological Service, the National Education Welfare Board, and child and family services will focus on improving integration of health, education and family support services. The ISF will meet on a regular basis supported by CDI staff and external consultants as a ‘Reflective Practitioners’ Group’ with an emphasis on sharing information and developing stronger working relationships. A Communities of Practice Forum, comprised of early years and after-school practitioners in the area, will draw on the learning generated locally and within the new CDI services to establish a network of practitioners that will build a common approach to quality integrated service delivery.

*Assessment of needs*

An assessment of needs will be conducted to ascertain the information, support, training and professional development requirements of early years and after school services in Tallaght West. This is necessary to build a response to support and enhance the quality of existing provision, to give direction to the work of the two fora and ultimately to support the delivery of the overall CDI strategy in the immediate and forthcoming years.
Development of quality in existing services in Tallaght West

The development of quality in early years (EY) and after-schools (AS) services will be supported, through affirmative (strengths-based) inquiry, by two dedicated Quality Specialists (QS). This service is available to those EY and AS services that apply to CDI. If participants wish, the Specialists will support the production of portfolios of existing and future Quality Assurance Schemes. The role of the QS, as advocated by the Effective Provision of Pre-school Northern Ireland project, is regarded as the most effective way to ensure an emphasis on continuous improvement in services (Melhuish et al., 2006). Such a Specialist is able to support settings in: planning curricular activities; assessing children’s progress; assisting in the development of a self-improvement programme and action planning; and preparing children for the transition to compulsory education. The support provided must meet the needs of the children and staff. A strengths-based observation of the service in practice is conducted followed by a dynamic dialogue between the QS and staff within the service. This dialogue forms the basis for collaboration and the production of actions for positive change (French, 2005). The development of local learning will be supported throughout by the EY and AS fora established in 2005 who will continue their work to advise on the strategy.

A resource pool within CDI (membership of professional associations, journals) and an electronic bulletin board with a focussed quarterly newsletter on quality will be developed. The pertinent sections of the CDI services manuals will be disseminated. A quality enhancement training programme specific to CDI building on elements of the CDI services will be delivered and seminars on quality provided. Professional and
practical support will likely be required to link voluntary management committees to resources in the community to alleviate onerous employment and accounting tasks (French, 2005).

Conclusion

The CDI strategy involves: a community focused on positive outcomes for children regarding their learning, well-being and identity; a community wishing to develop local access to and experience of high quality services, following best practice and policy recommendations, which will be rigorously evaluated; a community determined to deliver improved service collaboration and integration; a community committed to training local providers; finally, a community dedicated to sharing its learning. From the outset CDI has consciously planned its approach to complement, support and benefit from articulated and emerging national policy objectives. The ECCE and EQIT are one of the first services in Ireland that follows Síolta (CECDE, 2006) guidelines, the DES (DES, 2005) aspirations and National Council for Curriculum and Assessment’s emerging curriculum framework. Not only does CDI want to demonstrably improve the lives of children in Tallaght West, we also want to discover whether the innovations developed locally will be useful to other communities living with the injustice of social and economic disadvantage in Ireland. Finally, we believe that if the design and implementation of the CDI model are demonstrated to work, it should be mainstreamed.

References


