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**Evaluation of Promoting Early Childhood
Education (ECE) Participation Project**

Report to the Ministry of Education

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**EVALUATION OF PROMOTING EARLY CHILDHOOD EDUCATION
(ECE) PARTICIPATION
PROJECT
FINAL REPORT**



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Executive summary

This report contains the findings from an evaluation of the processes and outcomes of the Promoting Early Childhood Education (ECE) Participation Project. It is abbreviated throughout this report to PPP. The data reported provide: a picture of the operationalisation of the programme in different contexts; identification of the factors that are important in supporting effective implementation across communities; and information on the effectiveness of the programme in achieving the intended outcomes, including increased participation.

The qualitative data gathered in the course of this evaluation indicates that, in communities where PPP was operating, families who might not otherwise have been participating are now participating in ECE. However, it is not possible to draw conclusions about the degree to which families have been retained.

The Promoting Participation Project and objectives

Aim of PPP

The PPP originally aimed to lift the participation of targeted communities (in particular Māori and Pasifika) in quality ECE services, at least to the level of the general population in order to reduce ethnically-related disparities (Ministry of Education, 2005a). The primary goal being to ensure that, *“every child has the opportunity to participate in quality ECE, by assisting communities to address barriers resulting in non-participation in ECE, by children who might otherwise participate”* (MOE, 2005a). PPP was originally intended to be targeted solely on Māori and Pasifika, however, during the implementation, the focus on Māori and Pasifika was *“widened to include other groups with low ECE participation, including low-income and refugee families”* (MOE, 2005a, p2).

Pilot PPP

Between 2002 and 2004, four pilot PPP schemes were established, contracted to Māori Trust Boards and within iwi partnerships on the basis of Memorandums of Understanding with MOE established in the late 1990s. This was a response to those iwi organisations calling for the need to determine their own strategies and come up with solutions by Māori for Māori. Trust Boards’ visions were to unify their Nations. To achieve this, the plan was to support their people to be healthy and educated, economically vibrant, underpinned by a thriving ‘Te Taiao’ (environment).

Key evaluation objectives

The key objectives of the evaluation were:

- To determine the outcomes that have been achieved through PPP.
- To determine the factors that support or inhibit the implementation of an effective PPP.
- To determine whether PPP is sufficiently broad and flexible to allow implementation in ways that best suit each community.

Evaluation design, sample and data gathering processes

The evaluation employed largely qualitative methods with interviews with key programme participants being the primary source of data. Interviewed were:

- Nine PPP providers, four Māori, three Pasifika and two pilot programmes from four MOE regions (Northern, Central North, Central South and Southern).
- Staff from 20 ECE services where children had been enrolled.
- Ministry of Education personnel involved in implementing the PPP (9).
- Both participating families (32) and Pasifika families who had chosen not to participate in PPP (5)¹.
- Key stakeholders involved in the pilot programmes were also interviewed; two coordinators of puna kohungahunga²; an Ahuru Mowai Born to Learn³ facilitator; and members of the pilot communities (a Parents As First Teachers (PAFT) worker and two school principals).

Other methods were:

- Document analysis, used to supplement the information gained in interviews.
- Quantitative data on participation in ECE were examined to provide a context for the analysis of PPP data.

Key findings

Outcomes achieved through PPP

In line with policy intent, PPP programmes were sited predominantly in low socio economic communities with low ECE participation, with a few programmes targeting a small population group within a wider geographic community. Within communities, the availability of ECE services varied widely. In some cases, PPP providers had established ECE services, like playgroups, in order to meet community need.

Māori and Pasifika participation in ECE

- National PPP data suggests that the degree to which targets were met varied widely across MOE regions.

¹ All non-participating families were Pasifika as, unfortunately, requests to interview non participating Māori families were not able to be met. This was due to a number of reasons including families not being available on the days the researchers were working in the areas.

² Māori immersion playgroups.

³ The education curriculum used in Parents As First Teachers and Family Start.

- National PPP data shows that from June 2004 to May 2006, 2836 children had been introduced to ECE by PPP providers.
- Data on participation, as described in evaluation sample milestone reports, were in several instances, incomplete. It is however possible to say that overall the PPP providers in this evaluation were making progress towards meeting targets for introduction and enrolment.
- Families participating in ECE as a result of the work of PPP providers were largely Māori and/or Pasifika or of more than one ethnicity

Nature of participation

- According to most provider reports, participation met the stipulated requirement of ‘consistent attendance for a minimum of 9 hours per week over a 3 month period’. However, providers did not report the degree to which participation was sustained.
- A variety of ECE services have been accessed by Pasifika families (e.g., kindergarten, care and education centres, language immersion centres) and by Māori families (e.g., kohanga reo, puna reo, puna kohungahunga, kindergarten and care and education services).
- Most Māori and Pasifika providers aimed to place children in ECE environments that delivered ‘culturally appropriate’ learning environments. This meant different things to different providers: For some Māori providers, this equated to a total immersion programme based on kaupapa Māori, while for others this corresponded to an environment that supported Māori tikanga and second language learning. Still other Māori providers defined this as, an environment developed by Māori for Māori. For most Pasifika providers, a culturally appropriate environment related to a total immersion programme in the language of the particular ethnic group involved. Most providers did offer families a choice of ECE, in line with the intent of PPP; a few did not.
- Although outside the targeted age group, many children placed in ECE by PPP providers were under 3 years of age. Participation by younger siblings of children recruited through PPP appears to account for some of this; however, the identification of and enrolment of children under 3 would seem to be inconsistent with policy intent which was to focus on participation for three and four year olds

Non-participation

Five Pasifika families who had decided not to participate in ECE after input from PPP providers were interviewed. Non participating families noted a wide variety of supports offered to families by providers to encourage them to participate including assistance to access subsidies, information on the benefits of ECE participation for families and children, transport, and advice on child management. Reasons given for non participation included:

- Cost of attending ECE (fees or koha, food and appropriate clothing).
- Lack of transport.
- Health problems.
- Lack of confidence in ECE services to adequately provide cultural knowledge and differing beliefs around the appropriate age at which a child should attend ECE.

- Reasons given for families discontinuing participation included:
- Cost of attending ECE (fees or koha, food and appropriate clothing).
- Lack of transport.
- Lack of time.
- No further need for child care.

Growth in community capacity

Growth in community capacity appears to have been facilitated through work undertaken as part of PPP. In some instances, communities had worked together to support the establishment of ECE services where gaps were identified. Other aspects relevant to community capacity building attributed to PPP include:

- Increased parental skill levels and confidence (e.g. management and administration skills through involvement in puna reo).
- Increased awareness of ECE options in the community.
- Increased participation in the workforce and an associated improved financial situation.
- Greater awareness in the community of the value of ECE.
- Increased organisational capacity amongst providers.
- In one Pasifika community the PPP was the catalyst for the establishment of a network to raise the awareness of ECE amongst families. The network comprised prominent people from the community, including teachers, parents and extended family members, who actively promoted ECE. The community involvement in the governance and management of the network, and the development of a succession strategy, ensured the sustainability of the network.
- Increased confidence and capacity in Māori and Pasifika language and cultural practices.
- Increased human resources for ECE in communities due to parents studying for and attaining ECE qualifications.

Unintended outcomes

A number of outcomes outside those which were the focus of the PPP intervention were identified. These were as follows:

- The opportunity for MOE regional staff to access information from the community about the community.
- Pasifika providers identified the need for trained Pasifika ECE educators, and potential candidates amongst families, encouraging the development of a trained ECE Pasifika workforce for their community (in line with the goals of the ECE Strategic Plan).

- Improved MOE regional office internal communication processes through working across MOE teams to enable PPP work to be carried out (e.g. the establishment of playgroups).

Factors supporting or hindering the implementation of effective PPP

Success factors

Several factors were identified through the evaluation as key to successful provision of PPP provider work.

- PPP providers and fieldworkers who were known to and trusted by the community. This was assisted, particularly where Māori were concerned, when the organisation was whānau-based and close knit, and where fieldwork was undertaken face-to-face.
- PPP providers who established links with ECE within their communities and with government agencies. This assisted identification of non participating families and afforded providers the knowledge and contacts necessary to undertake their work. Where providers held other government contracts in addition to PPP, this appeared to support their community knowledge and facilitate networking as well as contributing to their levels of credibility and trust within the community.
- Pasifika participation in ECE was supported by activities that facilitated cultural connectedness (e.g. linking of families into ECE services supporting language immersion or with Pasifika educators) and by fieldworkers of the same cultural background as the families, who spoke the language of the family, as this assisted communication.
- Similarly, for Māori families, having access to ECE environments that supported Māori cultural practices and language was an important factor. A whānau environment such as that offered by puna and playgroups was an effective way of introducing families to ECE and encouraging participation.
- PPP workers having an ECE background and/or extensive knowledge of ECE in order to ensure promotion of the benefits of ECE services suited to families.
- Assistance with transport to ECE services supported placement of and retention of families.

Barriers to success

The key factors identified through the evaluation as barriers to successful implementation of PPP were:

- Lack of appreciation of the value of ECE on the part of the families.
- For some Pasifika families lack of understanding of the child-centred approach used in New Zealand ECE meant that the benefits of ECE were not fully appreciated.
- A lack of responsiveness to the needs of Māori and Pasifika families on the part of some ECE educators in non-Māori and non-Pasifika services. ECE educators may benefit from support around working with Māori and Pasifika families.
- Poverty and related social and economic demands on families. In some instances, community-based ECE offered a more financially-viable option for families.

- Transience of families and the use of aliases and different surnames making it difficult to locate families.
- A poor range and/or quality of ECE services in some communities impeded placement of identified families.
- In some cases the quality of buildings and associated facilities, especially where puna were concerned, restricted participation.

Replication of effective PPP approaches

Several approaches adopted by PPP providers which were effective in promoting participation and appear able to be replicated were:

- In Pasifika communities, a community development approach operated, which involved collaboration between providers, and the extended community, to educate families about and promote participation in ECE.
- Two related approaches were identified for Māori providers; an iwi development approach and an individual family approach. Both approaches were underpinned by the same philosophy and overarching goal – Māori development – although the focus and enactment of this differed. The iwi development approach focussed on Māori iwi development and PPP was a means of introducing families into language immersion or bilingual ECE contexts. This approach is likely to be replicable where similar iwi organisations exist. The individual family approach focussed on family needs first matching families to the type of ECE best suited to them. This approach may be replicable in similar urban contexts.
- A further approach, seemingly replicable in both Māori and Pasifika contexts, involves the use of puna and playgroups as an initial step in encouraging participation in ECE.

Was PPP sufficiently broad and flexible, allowing implementation in ways that best suit each community?

Overall, it appears that PPP has been implemented in a broad and flexible manner in response to the particular needs of the communities.

Key features of PPP work were:

- Providers building and maintaining relationships in their communities with ECE services and with families.
- Providers maintaining credibility with MOE and communities.
- MOE regional office support for the efforts of providers by managing national operational expectations and the expectations of community organisations around the PPP work, providing capacity building and instigating forums for information sharing and networking.

- Flexibility of approaches to engage parents. This often required intensive intervention to engage low socio economic families, with complex needs.

According to MOE regional staff and PPP providers the main issues impacting on PPP work were:

- Limited hours to work with families.
- The intensive nature of the work required.
- The large geographical areas covered by some providers which limited the time they had with families.
- Provider isolation.
- Organisational instability in some PPP provider organisations.
- Targets difficult to achieve.

Ways in which PPP activities could be improved

Ways in which MOE regional staff and PPP providers suggested PPP work could be further improved included:

- National coordination to support consistency in PPP work and to enable replication of approaches or strategies that worked. That is, to ensure that information is communicated across PPP communities (e.g. through hui or networked e-mails), and to enable sharing of ideas and problem solving strategies.
- The ECE sector should continue to be informed about PPP in order that parties concerned are aware of what is happening in the community.
- Exemplars of success stories and issues reflecting the enormous diversity and difference amongst PPP communities would be useful in supporting providers in their work.

Conclusion

The qualitative data gathered in the course of this evaluation indicates that, in communities where PPP was operating, families who might not otherwise have been participating are now participating in ECE. However, limitations in the system for collecting data from providers, gaps in provider data, and variable strengths of provider reporting preclude the evaluation from being able to reliably determine the degree to which PPP has been associated with an increase in participation, or to draw conclusions about the degree to which families have been retained.

An important strength of PPP was its ability to accommodate the different philosophies of providers and the associated modes of programme delivery. PPP was focused on and driven by the needs of families and communities in working to engage families and children in ECE and so sufficiently broad and flexible to allow implementation in ways that best suit each community.

1.0 Introduction

This report contains the findings from an evaluation of the processes and outcomes of the Promoting Early Childhood Education Participation Project (PPP). The data reported provide a picture of: the operationalisation of the programme in different contexts, identifying the factors that are important in supporting effective implementation across communities; and information on the effectiveness of the programme in achieving the intended outcomes, including increased participation. The intent is to evaluate the implementation and effectiveness of the programme.

1.1 Background

The Promoting Participation Project (PPP) was underpinned by a series of government initiatives where the focus was on improving educational outcomes for Māori and Pasifika peoples and low income families.

In the late 1990s ensuring successful educational outcomes for Māori and Pasifika peoples had become a key priority for the New Zealand government. The Māori Education Strategy (first published in 1999 and referred to in 2005b, p8) and the Pasifika Education Plan (*Ko e Ako 'a e Kakai Pasifika*) (1996) were developed following consultation between Māori, Pasifika peoples and government. These documents outlined the goals, strategies and targets by which it was intended educational outcomes for Māori and Pasifika peoples would be raised. The goals in terms of ECE were to increase the numbers of Māori and Pasifika children enrolled and also to support the growth of high-quality ECE education by Māori for Māori and by Pasifika for Pasifika. The following specific targets were set:

- To increase Māori participation in ECE to at least 65 percent by 2006 as measured by enrolments of 0-4 year olds (The 1999 Māori Education Strategy, 2005b).
- To increase Pasifika participation by at least 200 4 year olds and 220 three year old children annually, in order to match national levels by 2005 (*Ko e Ako 'a e Kakai Pasifika*, 1996).

At the time the Promoting Participation Project (PPP) was first introduced, in 2000, as part of the government's *Closing the Gaps* package whereby education, social service and employment initiatives were targeted at building the capacity of Māori and Pasifika communities, 174, 245 children were enrolled in ECE services. However, only 18.5 percent of these children were Maori and 6.2 percent were Pasifika, (Pitopito Korero, 2001). In May 2001 the first contract round of the Promoting Participation Project (PPP) was put in place to help reduce these disparities. In the 2001 Census, 25.9 percent of the under 5 age group identified as Māori and 12.6 percent as Pacific. It should be noted that these the percentages include those specifying more than one ethnic group.

PPP was originally intended to be targeted to Māori and Pasifika, however, during the implementation, the focus on Māori and Pasifika was “widened to include other groups with low ECE participation, including low-income and refugee families” (MOE, 2005a, p2).

Development of a Strategic Plan for ECE

At the same time as Government strategies focusing on educational achievement for Māori and Pasifika were being developed, a strategic plan to outline the future direction for ECE in New Zealand was also being formulated. This was preceded, in the late 1990s, by a national survey of child care in New Zealand that found

that “ECE services did not consistently meet the needs and aspirations of Māori and Pasifika whānau and parents or families of children with special educational needs”. In addition “rural families often had little choice and faced barriers of distance and cost” (Department of Labour & NACEW, 1999, p 42).

Following this, in 2000, a working group to develop a 10-year Strategic Plan for ECE was appointed by the Hon Trevor Mallard, Minister of Education (ECE Strategic Plan Working Group, 2001). The purpose was to provide strategic goals and a framework for ECE policy in New Zealand. In reviewing policy directions, the Government had established two broad aims for ECE in the future:

- To improve access to, participation in, and quality in ECE.
- To reduce disparities in participation in quality ECE between Māori and non-Māori, and Pasifika and non-Pasifika children.

Pathways to the Future: Ngā Huarahi Arataki, the 10-year strategic plan for ECE was published in 2002, (MOE, 2002) and highlighted the government’s vision “for all New Zealand children to have the opportunity to participate in quality early childhood education, no matter their circumstances” (p1). The three overarching goals of the strategic plan are:

- To increase participation in quality ECE services.
- To improve the quality of ECE services.
- To promote collaborative relationships.

The strategies developed to increase participation in quality ECE services were designed to:

- Focus on communities where participation was low, in particular Māori, Pasifika, low socio-economic and rural communities.
- Be driven by the needs of individual communities.
- Increase the Government’s role in facilitating access to quality ECE services.
- Support ECE services to be more responsive to the needs of children, parents, families and whānau.

Government intentions included collaboratively supporting the establishment of community-based services by Māori for Māori and by Pasifika peoples for Pasifika families, operational support for targeted services, increasing the supply of ECE and improving the responsiveness of services to their communities.⁴

⁴ The new participation initiatives are network co-ordination and an increased role in network management, advice and support, capital funding, and the design and build scheme.

1.2 The Promoting Participation Project

Aim of PPP

The Promoting Participation Project (PPP) originally aimed to lift the participation of targeted communities (in particular Māori and Pasifika) in quality ECE services, at least to the level of the general population in order to reduce ethnically-related disparities (Ministry of Education, 2005a). The primary goal being to ensure that, “*every child has the opportunity to participate in quality ECE, by assisting communities to address barriers resulting in non-participation in ECE, by children who might otherwise participate*” (MOE, 2005a). As noted earlier, the focus widened from one on Māori and Pasifika three and four years olds, to include children from low-income and refugee families and those living in rural and isolated communities.

How does PPP work?

PPP is an “*information and brokerage intervention*” (Ministry of Education, 2005, p2). PPP works by targeting communities with low ECE participation often also with high Māori and Pasifika populations. Providers are contracted from within these communities in order to support “*local solutions to local reasons for non-participation in ECE*” (MOE, 2005a, p2). The Ministry of Education also provides some input into PPP through its own staff. These staff had previously provided PPP through the Early Childhood Development (ECD), prior to its integration into the Ministry.

Following a Ministerial Review of targeted policies and programmes carried out between November 2004 and April 2005, Cabinet decided that the focus of PPP be changed to communities of low participation in ECE, regardless of their ethnicity. The policy intention was that PPP providers work with any non-participating families they identify in targeted communities who would not otherwise participate in ECE.

An important assumption underpinning the potential success of PPP is that providers from within the PPP communities can use their networks to identify non-participating families, address the reasons for non-participation and support families to participate. To achieve this, PPP providers need to be able to access effective community networks through which they can identify non-participating children. However, finding appropriate providers within communities to achieve this can be an issue, as evidenced in the 2004/05 contract round, when finding “*appropriate providers*”, with both ECE knowledge and strong community networks, particularly in the populations on which there is a focus, was one of the contributing factors in an under-spend on PPP in 2004/05 (MOE, 2005a).

The work undertaken by PPP providers was to be essential to the Government’s goal of increasing participation in ECE for Māori and Pasifika children and low income families.

Selection of PPP regions nationally

Regions where PPP was to operate were selected from those identified, using national MOE statistics, as having low rates of participation in ECE. Selection was based on two key criteria:

- Non-participation data (Territorial Local Authority data, information from the RS7 funding form used by ECE services, and national statistics on ECE participation collected about all 5 year olds on entry to school).

- Make-up of communities, e.g. those which were predominantly low socioeconomic, had high deprivation, and /or had high proportions of Māori, Pasifika, or refugee families.

Changes in population size were also taken into consideration as was the capacity of ECE services to accept further enrolments. In addition staff in regional MOE offices networked within the Ministry and externally with runanga and other key organisations to become informed about levels of participation and the profile of ECE in their regions.

Contract guidelines

In 2004 the Ministry of Education reviewed contracting processes. The current contracts outline the following outputs for delivery of PPP (MOE, 2005):

- Relationship building and profiling ECE services and locations.
- Identifying non-participating children.
- Families and children are supported and introduced to appropriate ECE services.
- Support and retention of children and families.

Contracts are managed through regional offices of the Ministry of Education. All contracts include specific targets with respect to the number of Māori and Pasifika children identified, supported and retained in ECE services. Targets are determined by the Ministry of Education in collaboration with relevant providers and takes into account the activities and outcomes to be delivered by the provider, including the number of children and families in the community who may potentially benefit from PPP.

Contracted PPP providers are located in both the North and South Island, but predominate in the North Island where they are located in all the main cities and in several regions. Some contracts cover wider geographical area than others.

Variations to contracts

Variations to contracts were initiated for the 2004 to 2005 contracting rounds in that MOE offered to extend the contract times from June until 31 December. Variations to contracts were negotiated with providers individually, with some providers choosing to extend the contract time in order to achieve their targets, and others taking the opportunity to increase their targets⁵.

Thus the length of contracts for those providers involved in this evaluation varied, beginning anywhere from June 2004 to February 2005 and finishing between June and December 2005.

⁵ Information sourced from regional MOE interviews

1.3 Pilot PPP⁶

One of the responses to the voice of Māori calling for the need to determine their own strategies and come up with solutions by Māori for Māori and the government's intention to build capacity was the establishment of pilot PPP. Between 2002 and 2004, four pilot PPP schemes were established, contracted to Māori Trust Boards and within iwi partnerships on the basis of Memorandums of Understanding with MOE established in the late 1990s. Trust Boards' visions were to unify their Nations. To achieve this, the plan was to support their people to be healthy and educated, economically vibrant, underpinned by a thriving 'Te Taiao' (environment). For the Trusts, PPP and other ECE contracts such as Ahuru Mowai, a parenting programme, were seen as one means of making critical changes in terms of their peoples' wellbeing. These programmes enabled the Trusts to deliver services that would support the development of healthy whānau/hapu/iwi. Participation in ECE was seen as an integral aspect of achieving healthy families.

The negotiated outcomes for the PPP pilots were two pronged. In particular, for the Trust Boards, establishing puna kohungahunga and increasing participation was part of a wider overall iwi vision and strategic plan to determine their future direction. For the pilots, PPP was just one of a number of education strategies being implemented to increase whānau/hapu/iwi health and well-being.

⁶ Information on the establishment of pilot PPP was sourced from the pilot provider case study findings.

2.0 Methods

2.1 Definitions of key terms

Key terms sourced from the agreement to provide services between PPP providers and Ministry of Education

ECE service

An ECE service, for the purposes of this project, encompasses the full range of education and care centres, kindergartens, ngā kōhanga reo, playcentres, playgroups and home-based care schemes. It includes licensed and chartered and licence-exempt services, collections of licensed and chartered early childhood centres or umbrella organisations.

Quality ECE

A quality ECE is defined by the Ministry of Education (2005) for the purposes of this project as either a licensed and chartered ECE services, or a license-exempt service that is registered with the MOE, provides a broad-based education programme approved by the MOE; and meets regularly within the requirements for license-exempt groups.

Provider

A provider, for the purpose of this project, refers to an organisation that has been contracted by the Ministry of Education to provide PPP.

Non-participating children

Non-participating children were children not enrolled in or attending a quality early childhood education service and who would not otherwise attend without intervention from the provider, or intervention resulting from participation in a Parent Support and Development programme.

ECE advocacy and support

ECE advocacy and support includes provision of information and advice or promotional or educative activities that have been delivered to parents, families, groups or local communities. Provider's role may include facilitation or hosting of or delivery to meetings, hui, community forums, promotional stalls, and dissemination of information to families/whānau.

ECE placement

ECE placement constituted one non-participating child being enrolled in a *quality* ECE service and attending that service. Placement is counted from the first day of attendance at that service. Registration on a waiting list was not counted as a placement.

2.2 Key objectives of the evaluation

This report provides information to address the key objectives of the evaluation, which were:

1. To determine the outcomes that have been achieved through PPP.
2. To determine the factors that support or inhibit the implementation of an effective PPP.
3. To determine whether PPP is sufficiently broad and flexible to allow implementation in ways that best suit each community.

2.3 Specific evaluation questions

Specific evaluation questions, each with sub-questions, were asked in order to address the three objectives of the evaluation. The full list of questions and sub-questions are in Appendix C.

Evaluation questions related to each objective were:

Objective 1

- Has there been an increase in participation of children in ECE in areas where PPP has occurred (for Māori, Pasifika, and groups other than Māori or Pasifika)?
- What is the nature of participation for those children recruited into ECE through PPP?
- Has the capacity of community groups been built through PPP?
- What are the unintended outcomes of PPP?

Objective 2

- How effective are PPP providers in identifying non-participating Māori and Pasifika children?
- What factors contribute to the successful identification of Māori and Pasifika children not participating in ECE services?
- What are the barriers (for PPP providers) to the identification of non-participating children?
- How effective are PPP providers in supporting the engagement of Māori and Pasifika families and children with ECE services?
- What other factors contribute to the successful engagement of Māori and Pasifika families and children with ECE services?
- What are the barriers to PPP providers supporting the engagement of Māori and Pasifika families and children with ECE services?

- How effective are PPP providers in supporting and retaining the engagement of Māori and Pasifika families and children with ECE services?
- What other factors contribute to the successful retention of Māori and Pasifika families and children with ECE services?

Objective 3

- How is PPP operationalised/implemented at a national level?
- How is PPP operationalised/implemented at a local level?
- What are the characteristics of PPP communities?
- How is participation monitored and reported?
- How has participation of families and children in ECE been sustained over time?
- What has contributed to the retention of families and children in ECE services?

2.4 Evaluation design

A process and outcome evaluation was conducted for the PPP programme in order to ascertain the effectiveness of the implementation of the programme and its effectiveness in achieving participation outcomes.

The evaluation design, outlined in Table 1 shows the data sources used to answer the key evaluation questions which were developed in collaboration with the Ministry of Education. The evaluation employed largely qualitative methods with interviews with key programme participants being the primary source of data: PPP providers, staff from ECE services where children had been enrolled, Ministry of Education personnel, and both participating families and families who had chosen not to participate in PPP. Document analysis was used to supplement the information gained in interviews. Quantitative data on participation in ECE were also examined for trends. The national participation data for PPP were collected with the support of personnel at MOE.

Māori and Pasifika members of the research team were employed to undertake data collection with Māori and Pasifika participants.

Table 1: Evaluation design: evaluation questions by data sources

Objective 1: What outcomes can be (have been) achieved through PPP <ul style="list-style-type: none"> • How effective is PPP in terms of its objectives: • Has PPP resulted in an increase in Māori and Pasifika participation in ECE 	
Evaluation question	Data source/s
Has there been an increase in Māori and Pasifika participation in ECE in the PPP areas. Is there an increase in participation of children in ECE areas where PPP have occurred? What is the nature of participation for those children recruited into ECE through PPP?	Interviews: PPP providers ECE services MOE regional PPP provider documentation MOE statistical data
Has the capacity of community groups been built through PPP? What are the unintended outcomes of PPP:	Interviews: PPP providers ECE services Families MOE regional
Objective 2 How best can PPP outcomes be supported What factors support (or not) the implementation of effective PPP?	
Evaluation question	Data source/s
How effective are PPP providers in identifying Māori and Pasifika children not participating in ECE? How effective are PPP providers in supporting the engagement of Māori and Pasifika families and children with ECE services? How effective are PPP providers in supporting and retaining the participation of Māori and Pasifika families and children in ECE services? What other factors contribute to success? What are the barriers?	Interviews: PPP providers ECE services Families MOE regional
Objective 3: Is PPP sufficiently broad and flexible to allow implementation in ways that best suit each community?	
Evaluation question	Data source/s
How is PPP operationalised/implemented at a national level? How is PPP operationalised/implemented at local level? What are the characteristics of PPP communities? How is participation monitored and reported? (How) has participation of families and children in ECE services been sustained over time and what has contributed to retention?	Interviews: PPP providers ECE services MOE regional PPP provider documentation

2.5 Methodologies

Case study approach

The evaluation adopted a case study methodology as the evaluation was an in-depth exploration of a programme that is individualised to providers. That is, while the overall objectives of PPP apply to all providers, the ways in which individual providers achieve these aims was expected to differ. A case study approach provides a method that will capture individual differences across providers, the diverse ways in which the programme was operationalised by the various stakeholders, and the unique variations across programme settings (Creswell, 2003; Patton, 2002).

Māori and Pasifika research approaches

Māori and Pasifika researchers on the evaluation team carried out the evaluation processes and practices with Māori and Pasifika providers, ECE services, and families. These are described in the relative sections below. This ensured the evaluation approach was appropriate with reference to the Treaty of Waitangi, and to Pasifika peoples in New Zealand.

The interviews were carried out by the two teams using the research approach most appropriate to the two ethnic groups. The impact of this on the reported findings was minimised as both teams used the same interview schedules and received the same instructions regarding the conduct of the interviews. Thus any differences in the nature and scope of the data collected can be attributed to individual variation between participant groups and indeed participants themselves in terms of their ability or willingness to respond.

In addition the processes as described show that there were more similarities than differences in the ways interviews were conducted. The common features being:

- Both interview teams had members who were bilingual and were able to clarify the interview terminology to respondents where necessary in order to promote an understanding of what was being asked and ensure consistency of responses.
- An emphasis on relationship building.
- Respect for participants.
- Collaboration between research teams and providers in the setting up of interviews.
- Use of agreed cultural practices as outlined in the following approaches.

Interviews with Māori and Pasifika participants were transcribed and written up separately by the Māori and Pasifika teams. Interview findings were analysed inductively⁷ in relation to evaluation objectives using thematic analysis to draw out similarities and differences between providers. The analysis of findings by the Pasifika research team was overseen by a senior member of the evaluation team who had also supported the Pasifika team

⁷ The process of working from raw data to develop broader themes.

throughout the data collection. The Māori research team's cultural processes were overseen by a respected cultural advisor.

Kaupapa Māori methodology

The gathering of information from Māori for the purpose of evaluation of the Māori PPP providers was conducted within the constructs of Kaupapa Māori research methodology.

Kaupapa Māori is “*a theory and an analysis of the context of research which involves Māori and of the approaches to research with, by and/or for Māori*” (Smith, 1996, p100). A Kaupapa Māori approach does not exclude the use of a wide range of methods but rather signals the interrogation of methods in relation to cultural sensitivity, cross-cultural reliability, useful outcomes for Māori, and other such measures. As an analytical approach, Kaupapa Māori is about thinking critically, including developing a critique of Pakeha constructions and definitions of Māori and affirming the importance of Māori self-definitions and self-valuations. Contemporary expressions of Kaupapa Māori theory have been summarised by Graham Hingangaroa Smith (1990, p204) in the following way:

A Kaupapa Māori base (Māori philosophy and principles) i.e. local theoretical positioning related to being Māori, such a position presupposes that:

- The validity and legitimacy of Māori is taken for granted.
- The survival and revival of Māori language and culture is imperative.
- The struggle for autonomy over our own cultural well-being, and over our own lives is vital to Māori survival.
- It is important to note that Kaupapa Māori based research is conducive with an approach to research that is ethical, systematic and rigorous.
- When research of this nature is conducted with Māori the most culturally appropriate process is ‘kanohi ki te kanohi’ (i.e. face to face contact) or hui (meeting). Within this context consideration is given to ensuring that appropriate cultural practises are adhered to prior to; during and post the actual interviews.

Smith's definition of Kaupapa Māori provides a framework that validates a Māori worldview and therefore allows Māori the opportunity to gather information in a culturally acceptable way.

The research process

At the six sites visited (four non-pilot and two pilot sites) by the researchers the evaluation process included:

- Interviews with the Māori provider.
- The collection of PPP documentation from the provider.

- Interviews with staff from at least two ECE services where children had been placed through PPP (Note that in the case of the Pilots this differed in that the team interviewed whānau who were involved in the establishment and implementation of puna kohungahunga.).
- Interviews with at least four whānau members who were involved in PPP.

However the degree to which this was achieved varied due to circumstances beyond the researchers' control.

The research process required many phone conversations to the selected Māori providers based at the six sites across Aotearoa to organize and set up the visits and interviews with key staff and community members. This process began in October 2005 and continued until the completion of all visits to sites and interviews in August 2006.

The responses to this evaluation varied from provider to provider. Some were willing to work with the team in every possible way while others were more cautious, requiring more information or more conversations to enable them to make some connection with the researchers. The relational aspects in the latter Māori settings seemed at times to be rushed as opposed to more formal whakatau/powhiri settings. It was our experience that connections and relationship building were best forged with the providers when the researchers were able to make a meaningful connection through some form of whakapapa and/or professional linkage.

Interview process

When research of this nature is conducted with Māori the most culturally appropriate process is '*kanohi ki te kanohi*' (i.e. face to face contact) or hui (meeting). Within this context consideration was given to ensuring that appropriate cultural practises as outlined above were adhered to prior to the commencement of actual interview. This was the process for the all those people who participated in the PPP evaluation.

Visits to Māori providers to arrange site visits and interview times were organised via email and telephone conversations. At each site the Māori researchers participated in a whakatau (welcoming ritual) process which included mihimihi and a kai (food) at the end of the proceedings. The researchers used the core questions as guidelines for the interviews, further questioning assisted in gathering and/or clarifying information given by the interviewee. All those who were interviewed were happy to have their conversations recorded. Most of the interviews were conducted reo Pakeha with the reo Māori used occasionally. One interview was conducted fully in reo Māori.

Māori researchers needed to have a reasonable knowledge of reo Māori and tikanga (Māori cultural beliefs and protocols) to support building relationships, with the Māori participants, in a relatively short space of time. Whakapapa ties and/or professional links proved advantageous when these relationships were being built, as they supported the information gathering and interviewing process. To acknowledge the value of whānau time and input, koha, in the form of food or petrol vouchers, were given to those who had participated in the interviews.

While the best attempts were made between the Māori providers and the researchers to have all interviews and discussions set up weeks before arriving in their regions, more often than not the researchers encountered changes (that were unavoidable) in the interviewing schedules on the day that they arrived. At times whānau members were unable to attend their interviews due to illness, sick children and tangihanga. The team also encountered similar issues with key community and staff members. The team was unable to do anything about this situation other than accommodate the situation.

Impact of process on data

The issues noted above, and the particular nature of the PPP sites, determined the quantity and quality of data gathered (via interviews and documentation) and so determined the nature of the writing about each site. For example a Māori provider in an urban area had been engaged in PPP for almost four years. The provider began by establishing a playgroup which they then developed over that period of time into a bilingual ECE centre as, need, placement, and community support increased. As a result of the timeframe over which this occurred, and the ability of those concerned to participate in the evaluation, the researchers were able to access a wealth of data.

By contrast another Māori provider in a rural area had, at the time of the evaluation, only been a PPP provider for six months. They were ‘newcomers’ and were still getting their heads around the project, for example, how to implement PPP in their extensive region, and the reporting process required by Ministry of Education. The data from this provider reflects their recent entry into the project. Their focus during the first six months was on developing a database of early childhood centres in their region and promoting PPP amongst Māori in one area, where places were available in established ECE services.

Evaluation of a Māori provider in the MOE Southern region presented a number of issues that were not fully comprehended until the team were onsite. At the time of the evaluation this contract had been completed. The original coordinator was no longer employed with the organisation that had the initial PPP contract and original families from this project were not easy to locate due to the transient nature of many of these families. Further, relationship building between the team and the original coordinator was a much lengthier process and resulted in additional unscheduled trips to interview participants by the researchers. It is clear that the retrospective nature of the evaluation at this site impacted significantly on participants’ ability to engage in the evaluation process.

Another Māori provider’s region was extensive, spanning surrounding rural districts as well as the city the provider was located in. Provider’s research of the Māori community had indicated that there was a preference for their children to have knowledge of their whakapapa, local tikanga and tribal affiliations. The provider responded to the community’s desires by actively promoting Māori families to participate in ECE via the kohanga reo sector.

For both iwi pilots, participating in the PPP programme was critical in meeting education objectives that were highlighted in their iwi strategic plans. PPP and other educational initiatives were viewed as strength based opportunities. Both iwi Trusts Boards were (and continue to be) committed to improving the quality of life for iwi members and other Māori living in their region at the whānau level knowing that access to educational opportunities is a key transformative and life improving agent for Māori.

In order to maintain a firm alignment to kaupapa Māori research, while simultaneously holding true to the integrity of the research, it was our intention that this research tell the stories of those who willingly participated in this evaluation process. For the purpose of this report all the data gathered were presented back to the people to ensure that representation of their accounts and the ‘kaupapa’ were accurately reflected.

Pasifika Methodology

Pasifika education research design, methods and approaches are informed, first and foremost, from within Pasifika world-views. Pasifika approaches to research aim to be responsive to changing contexts for Pasifika peoples. Pasifika research methodology is underpinned by Pasifika cultural values and beliefs, and is conducted in accordance with Pasifika ethical standards, values and aspirations.

The methodology in the Pasifika strand of this research was qualitative in nature and design, using semi-structured interview questions and established principles and practices for research with Pasifika peoples (Anae et al, 2002; Health Research Council, 2004). The overarching principle was that relationships are the foundation of all ethical conduct in research. It was accepted that within the context of relationships all significant ethical decisions, actions and practice in this research would occur. Therefore, the development, cultivation and maintenance of principled relationships or ‘relationship conduct’ were integral to the methodology of this research and its ethical practices.

The centrality of relationships directly reflects Pasifika perspectives. Several guiding principles for forming/maintaining ethical research relationships with the Pasifika peoples in this study were present in the research methodology, including:

- respect;
- cultural competency;
- meaningful engagement;
- reciprocity;
- balance;
- rights; and
- capacity building.

Interview process

Prior contact was made via an initial letter and/ or e-mail introducing the PPP evaluation project, followed by telephone conversations and further emails. Interviews were conducted and organized in a semi-structured manner. Each interviewer had a core set of questions. Where appropriate, further questioning was permitted in order to probe meaning and to clarify facts. Most of the interviewees were comfortable with the use of tape recorder. All others had their contribution recorded in writing during the interview. Cultural protocols were adhered to with the use of heritage language and with the practice of a prayer at the beginning of sessions. The interviews were conducted predominantly in English. The use of a Pacific Nation language from time to time to clarify terminology of the research questions ensured a clearer understanding of what was being asked.

The researchers’ awareness of cultural knowledge of Pasifika protocols, values and beliefs enabled the formation of a trusting relationship. This helped to reduce the formality so that the interviewee felt comfortable to share. Establishing commonalities within our Pasifika experiences developed respect and an openness for them to share in response to the questions.

In closing the interviews the Pasifika protocols in terms of reciprocity practices were adhered to, in particular, through the gifting of vouchers and food. The sharing of a meal comprising food from both the interviewer and interviewee was appropriate in some cases and the acceptance of their hospitality was customary.

This strand of the PPP evaluation was characterised by the active involvement of Pasifika peoples (as researchers, advisors and stakeholders) and demonstrated that Pasifika peoples are more than just the subjects of research. In this way this project contributed to the building of the capacity and capability of Pasifika peoples in research, and

contributed both to the Pasifika knowledge base and to an expanded understanding of factors affecting participation in Early Childhood Education.

2.6 Sample

Providers

In September 2005 nine PPP providers were selected, in consultation with the Ministry of Education, National Operations to serve as the sample for this evaluation. Providers were selected across four MOE regions, in order to provide geographical difference, and to provide a range of provider types. Also taken into account was the size of the contract and recruitment to-date. In addition, the logistics of travelling between providers within regions was also taken into consideration.

Another of the criteria was that these providers had to have been contracted in mid 2004.

A letter of invitation was sent to each provider inviting their participation in the evaluation. They were then contacted by telephone or email to confirm participation. Providers included six Māori organisations contracted to provide the PPP and three Pasifika organisations (the total number of Pasifika organisations operating as PPP providers during this contract round). Of the original six Māori providers selected, three were unable to participate. In one instance a person key to provision of the contract passed away suddenly and a decision was made to withdraw this provider from the evaluation at this time. In two instances a decision was made to withdraw providers from the evaluation by the Ministry due organisational issues associated with the particular providers.

A further two Māori organisations, contracted in January 2005 to pilot changes to PPP were also invited to take part. These pilot providers were included in the sample in 2005.

As a response to the withdrawal of the three Māori providers over 2005 a decision was reached in 2006 in collaboration with the Ministry of Education to replace two of the three providers who had been unable to participate. One Māori and one non-Māori organisation were invited and agreed to take part in the evaluation. However, organisational issues meant that the non-Māori provider did not participate.

In total nine providers were included in the evaluation. The original intention was to have a total of 11 case studies consisting of 9 non-pilot and 2 pilot programmes. However the number of non-pilot providers was reduced by two as described above. Provider ethnicity and Ministry region are shown in Table 2.

Table 2: Provider by region and ethnicity

MOE Region	Māori Provider	Pasifika Provider	Pilot Providers	Total
Northern	2	1		3
Central North		1	1	2
Central South	1	1	1	3
Southern	1			1
Total	4	3	2	9

Provider contact details were supplied to the researchers by the Ministry of Education and in the first instance the PPP providers were informed of the evaluation by the Ministry of Education.

ECE services

ECE services where providers had placed children and families were also invited to take part in the evaluation. Twenty ECE took part in total, six where Māori providers had placed children and eight where Pasifika providers had placed children. The Māori research team also interviewed parents from six puna established through pilot PPP. The type of ECE services selected by PPP providers are shown in Table 3.

Table 3: Type of ECE services selected by PPP providers

PPP provider	Language immersion/.bi lingual	Kohanga reo	Puna/ Playgroup	Kindergarten	ECE Education & Care	Total
Māori	1	2	1	1	1	6
Pasifika	5		1	1	1	8
Pilot PPP			6			6
Total	6	2	8	2	2	20

Process employed to identify ECE services

The evaluation team obtained the names of ECE services through the PPP providers. The processes used to select the ECE services varied both between and within PPP provider types as shown in the following descriptions.

One Pasifika provider located in the MOE Northern region used a relatively formal process supplying the evaluation team with a short list of ECE services they had placed children with, so that the team could select a minimum of two ECE services. As both services were language immersion services, the evaluation team's selection criteria included that there was a difference in ethnicity in order to capture the different groups this provider was recruiting into ECE. The other two Pasifika providers provided the names and contact details for particular ECE services in their region, two in one instance (a care and education centre and a language immersion playgroup) and four (two language immersion services, a playgroup, and a kindergarten) in another. Eight ECE services nominated by Pasifika providers took part in the evaluation. Of these services one had been established by the provider as part of the PPP work and another was run by the organisation contracted to carry out the PPP work but established prior to PPP. All ECE services were invited to participate by the researchers. In the first instance a letter inviting participation was sent. This was followed up with a telephone call to discuss the evaluation and organise the interview times.

The Māori providers supplied the names of six ECE services in total all of whom participated. These providers organised the interviews for the research team, providing space for the conduct of the interviews and making the initial contacts for the team. In an urban location in the MOE Northern region all the children were placed at the bilingual ECE established by the provider so the team was introduced to staff from the ECE by the provider. In the MOE Central South region where the provider's focus was on placing children in kohanga reo, two kohanga were selected by the provider. As highlighted earlier, in the MOE Southern region, there were some issues, largely due to the retrospective nature of the evaluation at this site, which limited accessibility. Thus the team was only able to access one ECE, an education and care centre. In a rural location in the MOE Northern region the provider

had been contracted just six months earlier, and had only placed a few children. This provider organised for the team to speak with staff from two ECE services, one of which they had been involved in establishing.

Both Māori and Pasifika providers linked the research teams with ECE services they had either established as part of PPP or that they were involved in running. In those instances where the research teams conducted interviews at ECE established and/or run by the providers this was seen as most appropriate as the establishment of the ECE had been integral to PPP outcomes.

It should be noted that the researchers had little control over the selection of ECE services and therefore it is not known to what degree those services who participated are representative of ECE in the areas.

Families

Both families who had participated in ECE and those who had either discontinued or decided not to participate in ECE were also invited to take part in interviews for the evaluation. Their participation in the interviews was voluntary. The evaluation team sought the help of providers in contacting families to ask their permission to be approached about an interview. Providers held the names and contact details of both participating and non-participating families. PPP providers were particularly helpful in contacting families with many taking the time to inform families about the evaluation and fieldworkers often accompanying and introducing the research teams to families, particularly non-participating families.

Five families who had either discontinued participation in ECE or decided not to participate were interviewed. All were families identified by Pasifika providers as, unfortunately, requests to interview non participating Māori families were not able to be met. This was due to a number of reasons including families not being available on the days the researchers were working in the areas and the difficulty of locating these families. Those who were interviewed included both parents and grandparents, and represented a range of Pasifika ethnicities; Samoan, Tongan and Niue, as well as one person who identified as Māori with a Samoan husband. Participants were asked about their contacts with the PPP provider, what they knew about ECE services in their areas and their reasons for non-participation.

Prior to conducting interviews the voluntary nature of participation was explained to participants and informed consent obtained.

2.7 Data sources for qualitative data

Interviews

A collaborative process involving MOE staff and the evaluation team was used to develop the interview schedules for this evaluation. This provided an assurance that there was a shared understanding regarding the focus of the evaluation and content of the interviews.

Face-to-face interviews were conducted with the nine providers (see Table 2). The number of those taking part in each provider interviews ranged from two to five. In some cases these were conducted as group interviews and in other cases interviews with individuals, depending on the preference of those taking part.

Face-to-face interviews were also carried out with a total of 21 staff from the ECE services (see Table 3).

Family members (parents and grandparents) of children placed in ECE services by PPP providers also took part in a brief interview about their experiences of PPP. Interviews took place at their location of choice either their home or at the ECE service. Some family members were interviewed individually while others took part in a group discussion as they were more comfortable with this format.

Fourteen Pasifika family members (from 14 separate families) whose children were placed and retained in an ECE service by PPP were interviewed. A member from each of the five families where the decision had been made not to participate or who had discontinued participation was also interviewed. Nine whānau members (from eight separate whānau) participating in ECE through PPP were interviewed as well as a whānau member from each of eight families now participating in puna established through the two pilot PPP providers. In addition the Māori research team interviewed a whānau member from two families using the transport scheme established by the pilot PPP. Thus, in total, members of thirty-seven families were interviewed, representing the experiences of 55 children. Where families were participating in ECE due to PPP the experiences of 22 Pasifika and 26 Māori children were reflected. Seven children were represented in the interviews with non participating families.

Table 4: Number of families interviewed by ECE service type

PPP provider	Language immersion/ Bilingual ECE	Kohanga reo	Puna/Playgroup families	Pilot transport to kindergarten	Discontinued/ non-participating	Total
Māori	2	4	2*			8
Pasifika	11		3+		5	19
Pilot PPP			8*	2		10
Total	13	4	13	2	5	37

* Puna family members were also ECE educators. + 2 of the 3 families attended a language immersion playgroup.

Two coordinators of puna kohungahunga (one in each pilot PPP) and one Ahuru Mowai facilitator were interviewed about the Pilot PPP. In addition three members of the community were interviewed about the pilot PPP, a PAFT worker and two school principals.

Nine other key informants were also interviewed, including regional Ministry of Education PPP coordinators (2), an ECE network coordinator, an ECE contracts coordinator, ECE managers (4), and the pilot programme coordinator.

Interviews were largely carried out between December 2005 and May 2006. Interviews with the pilot providers and the provider contracted in 2006 took place from mid June to early August 2006 as it was important to give them as long as possible to become established before involving them in an evaluation.

Documentation

Analysis centred on all milestone reports, numbers one to six, sent by providers to the Ministry. The date of the last report for those providers contracted until December 2005 ranged between December 2005 and February 2006. The reporting outlined progress against specific contractual outputs and targets set by the Ministry of Education for PPP as deliverables: relationship management including contacts made with local ECE services; identification of non-participating children; and enrolment and retention of children in ECE. The milestone reports also clarified any issues or risks arising and how these were handled. Some additional documentation not included

in the milestone reports such as regional MOE reviews and regional templates, was received when interviews were conducted.

2.8 Data analysis

The data analysis approach involved:

- Descriptive analyses of quantitative data on participation in ECE. Data sources; MOE ,ECE participation data, PPP provider milestone reports were summarised and presented in tables
- Qualitative analyses of interview data. Stakeholder interviews were written up and interviewees were sent a transcript of their interviews to allow them to check for accuracy. A general inductive approach similar to that described by Thomas (2003)⁸ was used in analysing the data. This facilitated the identification of links between the research objectives and the summary research findings. While in the first instance analysis of Māori interview data was carried out by the Māori research team, and similarly Pasifika data was analysed by the Pasifika research team the overall approach followed was that multiple readings of the transcripts were undertaken by members of the teams and individual interpretations were discussed with the wider research team in light of the research objectives.
- Descriptive analyses of PPP documentation. All milestone reports were explored for responses in relation to evaluation objectives in order to inform particular questions. The evaluation team looked for clarification around the nature of participation in particular. The responses were compared to those stemming from interviews. The evaluation team also attempted to compare and contrast the participation outcomes reported in provider milestone reporting to the figures provided by MOE from the PPP data base.

⁸ Thomas D.R. A general inductive approach for qualitative data analysis
<http://www.health.auckland.ac.nz/hrmas/resources/Inductive2003.pdf>

3.0 Key Findings

In this section we present an analysis of the data collected from interviews with PPP providers, educators from a selection of those ECE services where children were placed through PPP, and some of the families involved in PPP both those participating and those who either chose not to participate or discontinued their participation in ECE. Also included is an analysis of programme documentation and national participation data.

The section is structured around the key evaluation objectives which directed the interviews and the document analysis. Results are presented under headings that reflect these. The document analysis and national participation data provide a national and regional overview.

We begin the discussion of findings with an overview of PPP communities sourced from interviews with MOE staff, PPP providers, and ECE educators.

3.1 PPP communities

PPP communities were sited in areas within MOE regions that were predominantly low socioeconomic communities that had low participation in ECE services. The PPP communities involved in the evaluation varied considerably in terms of geographical area covered, with, for example, one provider covering both South Auckland and West Auckland due to the geographical spread of their targeted ethnic community, while other providers worked within more limited geographical boundaries. PPP communities were sited in areas that were both rural and urban. Urban communities were predominantly Pasifika. Rural communities were predominantly Māori with clusters of Pasifika communities in some regions.

The availability and accessibility of ECE services was described by both MOE staff and providers as varying widely across PPP communities, with greater choice available in some areas than others. Similarly, accessibility varied due to a range of reasons that were different according to locality and included:

- High waiting lists.
- Cost (affordability for families).
- Lack of ECE services that were responsive to Māori and Pasifika families.
- Limited choice (e.g. just one type of service in a community).
- Numbers of children too low to make for a financially viable service.
- Lack of parental means to get to the service (i.e., transport).

MOE staff also commented on the limited availability of services for under 2's as an issue. While this age group was outside the PPP policy intent, with its focus on three and four year olds, many providers were nevertheless identifying and placing younger children.

In some instances, providers had worked with MOE staff to establish ECE services, such as playgroups, in order to meet the need for ECE places, particularly for those families with both older and younger children.

MOE staff also commented that there was a need, in some instances, to raise the level of qualifications of teachers in some teacher-led ECE. One of the beliefs underpinning PPP, and expressed in the Early Childhood Strategic Plan (2002, p9), is expressed in the goal that “*children develop and enhance strong early learning foundations through participation in ECE*”. Achieving this is enabled through access to quality ECE. This means, according to the Early Childhood Strategic Plan (2002, p11) having teachers, ratios and group sizes that support quality, quality practices in teaching and learning, as well as, teachers who are responsive to children from all ethnic backgrounds.

Summary

Communities in which PPP programmes are sited include both urban and rural regions and differ in terms of geographical size, with some PPP providers covering large areas. As intended, PPP programmes were sited predominantly in low socio economic communities with low ECE participation. Within communities, the availability of ECE services varied widely. In some cases, PPP providers had established ECE services, like playgroups, in order to meet community need. An important issue highlighted by some MOE regional staff was the need, in some communities, for increased access to quality ECE services led by qualified teachers.

3.2 Outcomes achieved through PPP

This section of the findings addresses the following key questions: Has there been an increase in Māori and Pasifika participation in ECE in PPP areas?; what is the nature of participation for those children recruited into ECE through PPP?; has the capacity of communities been built through PPP?; and were there any unintended outcomes from PPP?

We begin the discussion of findings with a national overview of ECE participation data to provide a context for the evaluation sample data on ECE participation. A picture of the trends in national participation rates in ECE for Māori and Pasifika children is presented. Following this a summary of the data collected by PPP providers, including the nature of participation is provided. Provision of this context sets the scene for the findings from PPP providers and families and regional MOE interviews on outcomes achieved through PPP.

3.2.1 Data sources on participation

The aim of PPP is to increase participation in ECE within targeted communities. PPP targets communities with a low ECE participation rate, regardless of ethnicity. Targeting to communities is the responsibility of MOE. Decisions are made by MOE on the basis of ECE participation data, as well as local and background knowledge on the availability of effective PPP providers. The need for PPP is specifically measured by data relating to ECE participation of children prior to beginning school. The contract targets set for PPP providers vary according to the specific need in the different communities (MOE, 2005a)

Evaluation data sources include different types of ECE participation data mainly sourced from MOE. These data help present a picture of the levels of participation in ECE for Māori and Pasifika children. While it is not possible to conclude that any increases are due to participation in PPP what we do have are sources that illustrate the national trends in participation rates for Māori and Pasifika children and provide a context within which the PPP data can be discussed. Participation data sourced from PPP provider reporting around achievement of target outputs is also described.

Data sources illustrating national trends are:

- National new entrant participation in ECE data. Source for data is: <http://www.edcounts.edcentre.govt.nz/indicators/engagement/dsau16.html>.

Sources of PPP participation data for the evaluation sample were:

- Provider monthly reports
- Provider quarterly reports
- Provider database
- National database

Limitations of data sources

There are a number of limitations associated with the data sources on which the analysis has been based. For example the PPP data sourced from MOE on progress made towards targets for the 2004 to 2005 financial period is incomplete.

Document analysis of provider milestone reports highlighted the gaps and inconsistencies in the type of data collected. Report content, despite relating to the expected outputs, was variable across providers, in particular around the characteristics of children identified and placed. While this does not necessarily reflect inaccuracy per se, this does mean that the data has only limited use for the purposes of this evaluation. For example information on the age of children identified and enrolled, was only available from some providers.

3.2.2 Has there been an increase in Māori and Pasifika participation in ECE in PPP areas?

The discussion on participation rates begins by presenting a brief outline of the ethnic and age-related trends in national participation rates in ECE. This provides the context in which PPP was operating and enables some comparison of PPP and national rates.

National trends in ECE participation

Ethnicity

The data presented in Table 5 show the proportion of Year 1 primary students who attended ECE before coming to school, during the period 2002 to 2005. Participation rates for both Māori and Pasifika have increased between 2002 and 2005. However the data show that the NZ European new entrants continue to have the highest rates of participation with 97.7% attending ECE in 2005 compared to 89.9% for Māori and 84.5% for Pasifika. While the timeframe represented by these data coincides with the implementation of PPP it is not possible to state to what extent PPP contributed to the increase in Māori or Pasifika participation.

Table 5: Participation in ECE of new entrant school students, 2002 – 2005

Ethnicity	2002	2003	2004	2005
	%	%	%	%
NZ European	96.6	97.4	97.6	97.7
Māori	86.5	88.4	89.3	89.9
Pasifika	79.4	83.4	84.7	84.5
Asian	92.1	92.4	94.1	95.1
Other	86.6	88.9	89.4	89.9
Total	92.3	93.6	94.1	94.3

Note Excludes foreign fee-paying and NZAID students and Health Camps. The number of students with unknown attendance has been excluded when calculating participation rates. Source: MOE website: Education Counts

Age

Enrolments for children in licensed ECE services have steadily increased for all age groups since 2001 as shown in Table 6. The two year old age group shows the greatest increase (n=3628), followed by the one year old age group (n=3391).

Table 6: Enrolments by age in licensed ECE services at 1 July

Age	2001	2003	2005
0	5,547	6,332	6,576
1	16,809	18,282	20,200
2	27,067	29,582	30,695
3	47,749	49,724	49,037
4	53,878	54,642	56,098
5 or More	1,454	1,611	1,915
Total	152,504	160,173	164,521

Note: Double counting occurs when a child is enrolled in more than one service

While enrolments for all age groups have increased, the greatest increases have been for the under three year age group.

Progress towards PPP targets

The following data provides a picture of progress towards achievement of PPP targets, using data collected at a national level on PPP and that collected by PPP providers.

National summary of PPP data

Data in Table 7 indicates progress towards achievement of PPP targets for the July 2005 – May 2006 period. Nationally, by May 2006, 1,334 children had been introduced to ECE services. This represented 42% of the target to be achieved by June 2006. At this time Māori providers had met 36 percent and Pasifika providers 61 percent

of their target. The degree to which targets were met varied widely across MOE regions, and in only two instances were targets achieved. In both cases this pertained to Pasifika targets, specifically, Central North MOE region (130%), and in Central Southern (112%). The data indicates a need to better understand why providers' appeared to be having difficulty in meeting targets and this issue will be addressed later in the report.

Because 2004 to 2005 contract commencement dates varied between and within regions, where contracts were extended MOE carried unmet targets into the 2005 to 2006 contracts. Thus the revised (actual) 2005 – 2006 targets include the number of children introduced to ECE in the 2004-2005 contract period (see figures marked with * in column 2, Table 7, 'national summary'). The summary of data indicates that 1, 502 children had been introduced to an ECE service during the June 2004 to July 2005 period and that around 50 percent were Māori and 50 percent Pasifika.

Table 7: Progress against PPP targets– Children introduced to ECE services

Children introduced to ECE service	Actual contract target numbers for July 2005 – June 2006	Progress as of -May 2006	
		N	%
Northern			
Māori	881	274	31%
Pasifika	593	256	43%
Total	1,474	530	36%
Central Northern			
Māori	323	165	51%
Pasifika	30	39	130%
Total	353	204	58%
Central Southern			
Māori	1,028	369	36%
Pasifika	165	185	112%
Total	1,193	554	46%
Southern			
Māori	147	46	31%
Pasifika			
Total	147	46	31%
National summary			
Māori	2,348 (739*)	854	36%
Pasifika	788 (763*)	480	61%
Total	3,136 (1,502*)	1,334	42%

* = number of children introduced to an ECE July 2004 to June 2005.

The totals in Table 7 above are the national total numbers of children introduced to ECE through PPP. Families introduced to ECE through PPP might have contacted or visited an ECE service, and may have participated in ECE but were not necessarily formally enrolled. Not all families introduced to ECE will have gone on to be

enrolled in ECE, or to have participated for a sustained period. Some families may have chosen not to enrol in ECE, others may not have found a service that meets their needs.

Progress of the evaluation sample

The following tables show data on participation as described in PPP provider milestone reports however in several instances data were incomplete or missing. Table 8 shows the total number of children placed/enrolled and supported and retained in ECE services by PPP providers participating in the evaluation during the 2004 to 2005 contract period. While in most instances PPP providers reported that they had achieved their initial targets set for 30 June 2005 this was not always supported by the data presented below. In some cases providers had variations to contracts in which target numbers were increased. As the data in Table 8 reflect performance against the original contracted targets and not the revised targets, this could be the reason some providers appear to have substantially exceeded the initial targets.

Table 8: PPP provider participation data

PPP Provider type	Chn placed/ enrolled during 2004-2005 contract period	Chn supported and retained	Targets for support and retention of children as of 30/6/05*
Pasifika 1	63	+	70
Pasifika 2*	39	38	20
Pasifika 3*	312	275	200
Māori 1*	105	68	30
Māori 2*	+	178	130
Māori 3*	52	43	35
Māori 4**	19**	2	**

Note: Data has not been included where contracts are not yet finished; final targets were higher due to variations of contracts; * these providers had variations to their contracts; ** Māori 4 is a 2006 contractor so figures were for the six months until 1 July 2006; + missing or unclear data in provider reports.

With respect to the Pilot PPP providers, reporting against targets was incomplete as providers had not reached the end of the contract periods. Target figures indicate that some progress has been made towards reaching targets. For Pilot 2, whose contract period was close to ending it appears that the target may not be met. Pilot 1, however, has until February 2007 to meet their target (see Table 9).

Table 9: Pilot PPP provider participation data

PPP Provider type	Non-participating tamariki identified	Puna established & supported+	Chn placed/ enrolled during 2005-2006/7 contract period	Whānau receiving Ahuru Mowai
Pilot 1 **	93 (target 100)	3 (target 4)	44 (target 80)	16 (25 chn)
Pilot 2 **	72 (target 100)	3 (target 4)	43 (target 70)	4 (7 chn)

** Pilot 1 contracted until 1 February 2007; Pilot 2 contracted until August 2006 – targets included establishment of puna. Pilot 1 figures sourced from April 2006 reporting & Pilot 2 figures sourced from June 2006 reporting.

Summary

- National MOE data on ECE participation provides some indication that Māori and Pasifika enrolments nationally have increased between 2002 and 2005. However ECE participation rates for these groups remain considerably lower than those for New Zealand European.
- National PPP data suggests that the degree to which targets were met varied widely across MOE regions.
- Data on participation as described in evaluation sample milestone reports were in several instances incomplete. However, it appears that progress was being made towards meeting targets.

The next section of the report draws on MOE interviews, case studies and provider milestone reports, to determine outcomes achieved through PPP. This includes the nature of participation for children recruited into ECE through PPP and outcomes for families themselves. These sources have also been used to determine how monitoring and reporting of PPP reflects outcomes; whether the capacity of community groups has been built through PPP; and whether there were unintended outcomes from PPP.

3.2.3 The nature of participation for those children recruited into ECE through PPP

We begin by examining the nature of participation for those children recruited into ECE through PPP.

PPP provider reporting

As the format of provider reporting was inconsistent it is not possible to describe in detail the characteristics of all children identified and placed by PPP providers. For example while all providers reported on identification of and placement of children in ECE services not all non-pilot providers gave details of the ages of children. Where this was done some gave the ages of children who had been identified and others of the children who had been placed in ECE services and yet others of children who had been retained. Reporting on ethnicity was similar with some recording the ethnicity of children who had been identified, some the ethnicity of children who had been placed and others both. A few providers made comments on the ethnicity of families and children but did not specify for each child.

Provider reports show that where the ages of children were reported, the children identified and the children who attended ECE services as a result of PPP were generally aged three years or under with many children younger than two years of age. Some of the children identified as non-participating were less than three months old. Participation by younger siblings of children recruited through PPP does account for some of this. For the two providers where this information is available, participation by younger siblings accounts for, in one instance, 15 percent of the under three year olds listed as retained in ECE and in the other instance 19 percent of those placed in ECE. The identification of and enrolment of children for PPP would seem to be inconsistent with policy intent which was to focus on participation for three and four year olds

PPP stakeholder perceptions

According to Pasifika PPP providers, the families they worked with were predominantly Pasifika, and included Niue, Tongan, Samoan and Tuvalu families, as well as a number of families of mixed ethnicity, for example Cook Island and Palagi, Samoan and Māori, or Indian and Samoan. The Māori PPP providers worked predominantly with Māori families but also worked with some Pasifika families in their communities. As with the Pasifika PPP providers, the Māori PPP providers worked with some families of mixed ethnicity.

The type of ECE service where children were placed by Pasifika providers included kindergarten, and ECE care and education centres and a variety of Pasifika language nests supporting a range of Pasifika ethnicities. Māori providers too placed families in a range of ECE services, kohanga reo, puna reo, puna kohungahunga, kindergarten and education and care services. In one region, the provider focused on placing Māori children from rural communities in kohanga reo. Where possible, most Māori and Pasifika providers said they aimed to place whānau in ECE environments that delivered a culturally appropriate learning programme. For some Māori providers this meant a programme that was kaupapa Māori based (based on a Māori world view and total immersion), or a programme developed by Māori for Māori (e.g. the puna reo). For other Māori providers, this meant a programme that was responsive to Māori families, for example, supporting tikanga (e.g. practices such as karakia before meals) and recognition of Māori language. For many Pasifika providers, a culturally appropriate service equated to a total immersion programme relating to the particular Pasifika ethnic group.

While at times it appeared that families might have been directed or encouraged to engage with a particular service, PPP providers did report that their role was to provide information to allow families to make a choice. As a provider who generally introduced families to kohanga said:

“They decide for themselves, that is their choice. I know by and large the choice will be for kohanga, but at the end of the day the choice has to be theirs”.

For their part, the families interviewed for this evaluation were generally very comfortable with the choices offered to them, and particularly the availability of services involving language immersion.

It is interesting to note that a high proportion of children placed in ECE services through PPP were under three years of age. Data on children’s ages was reported by four providers. Two providers reported on the ages of children who had been retained. Of these 70 percent and 90 percent of the total, respectively were under three years of age. One provider reported on the age of the children at the time of placement, 57 percent of the total was under three. The fourth provider recorded the age of the child at the time it was identified as not participating in ECE. In this case 51 percent of the children were under three. This was outside the intended target group of three and four year olds. Interestingly this does reflect national trends (see p46) which show that while enrolments for all age groups have increased, the greatest increases have been for the under three year age group.

Some of the reason for the higher than expected number of under three year old children being placed may be due to the concurrent placement of younger siblings of older children, particularly at puna and playgroups, where younger children may be more easily accommodated. Provider records, where available, to some extent, supported this assertion. Specifically, for the two providers where this information was available, participation by younger siblings accounted for, in one instance, 15 percent of the under three year olds listed as retained in ECE and in the other instance 19 percent of those placed in ECE. However, many of the under three year olds placed in ECE did not appear to be associated with an older sibling. In the case of one Pasifika provider, around two thirds of all the children placed were under three years of age, with a third being under two. Perhaps further explanation may be found in the observation made by some MOE staff, particularly those in urban areas, that there was an escalating

trend in providers placing children in care and education centres in response to increased maternal participation in the work force. As one MOE staff member said, *“There has been some emphasis on families going back to work so providers have been looking for full day services”*. If this is so, it might be expected that many of these children would be younger than three. However it was not possible to ascertain this from the available data.

Finally, for the purposes of the project, the criteria for participation was defined by the MOE in PPP contracts as consistent attendance at ECE for at least 9 hours a week over a three month period (unless otherwise agreed by MOE regional offices). It was noted in provider reports that this condition had been met. However, the degree to which participation was sustained was not reported.

Puna and playgroups were established when providers identified gaps in ECE availability. While many MOE staff did comment that establishing puna and playgroups was positive in terms of building capacity a number noted that some work was required to ensure these were quality services.

3.2.4 Outcomes for families

Perceptions of participating families

Families talked about the positive outcomes for them resulting from participation in ECE. These highlighted their changed perceptions of what ECE could achieve for them as families and for their children’s learning, and included:

- Knowledge around the importance of socialisation for their children (e.g. improved confidence and an expanding range of activities other than TV watching).
- Improved children’s behaviour (e.g. children being task-focused, respectful of and listening to their parents).
- Learning about the Pasifika or Māori language and culture.
- Learning about kaupapa Māori and bilingual education.
- Developing management and administration skills to self-manage puna reo and puna kohungahunga.
- Families trusting that other adults can provide learning opportunities for their children.
- Family involvement in ECE leading to parents appreciating the importance of ECE as a learning environment for their children and wanting to train as ECE educators (with encouragement from PPP providers).

The impact on children’s behaviour and learning through participation in ECE was a particularly important outcome for parents. The comments made evident that parents’ appreciation the value of ECE was increasing. The following comment by a Pasifika parent reflects a number of other parents’ comments:

“I have watched how my children have changed when they come home. They do things for themselves and without being asked. When I ask them to do things they are willing.... The children

have learnt so much. Since they have been here my children can write, read, sing, and say memory verses. There has been a big change”.

The importance of learning about Pasifika or Māori language and culture was also highlighted in comments from parents. In one Pasifika PPP community, it was particularly important to some parents involved in a playgroup that their children learn the values important to Pasifika, such as, respect for their family. These parents said that participation in ECE was very positive for the whole family because their children’s behaviour had improved, that is, they had learnt to “*respect*” their parents and other family members. Parents talked about the developments in their children’s language and social skills since they had been attending the playgroup saying:

“They come and talk with new words and they know how to share with other kids” and they know how to play with other toys”.

Parents from one of the Māori communities talked about the benefits of attending kohanga reo, noting that participating in the kohanga supported learning about Māori culture for both themselves and their children. They talked about the learning programme encouraging a high level of reo fluency, the fact that the environment was safe and nurturing, as well as being an educational space where the children learned to socialise with their peers and adults. As one parent said:

“It is safe and nurturing for all tamariki. Having access to the kuia is a real ‘treasure’ in terms of tikanga and te reo”.

It could be expected that families’ perceptions of the outcomes of participation in ECE services would be influenced by the degree of involvement parents and caregivers had. For the families interviewed levels of involvement varied. Some parents worked at centres, mainly language immersion centres or playgroups, others were on ECE Committees, and still others took part in fundraising, working bees and so on. Only a few families had little or no involvement other than taking their children and receiving newsletters and other information from the ECE service. The relatively high levels of involvement by these particular families may be due to the type of ECE they had been placed at, predominantly parent-led and/or language immersion centres where family involvement was strongly encouraged. In addition provider records show that the use of parent-led and language immersion ECE centres was common for many families placed by PPP providers. However, while it appears that this level of involvement with ECE services was a feature of PPP, it is not possible to confirm this as such information was not available for all families.

Some of the parents said that as a result of their involvement in ECE they could now see themselves joining the workforce. A few were actively looking for employment with the chance to go to work seen as potentially benefiting their families financially.

Three of the parents (mothers) who were associated with the Pasifika providers were working at ECE services run by the providers and one was a parent educator at a playgroup. Their work was a direct result of these parents being identified as non-participating and the fact that the PPP providers made repeated visits to encourage their attendance at ECE. With respect to Māori, the majority of the parents spoken to in the course of the evaluation were actively involved in ECE services, although only one, a mother involved in a puna reo, specifically associated her involvement with PPP.

For a few, having access to childcare meant that they were able to have personal time to do daily activities while their children were well cared for. As one parent said about her child attending ECE “*that just gives me a break as well”.*

For some parents, the support they received from PPP providers, in terms of advice and information, was a substitute for extended family support, in particular, in those families where there was some alienation, either due to differences in religious beliefs, or where distance from family was an issue. As one parent said:

“Without them, you know, we don’t know what we’re doing, we just stay home and maybe with my kids watch TV all the time, without them, I’ll never get this opportunity to go back to study”.

Perceptions of PPP providers

PPP providers noted that, over the time they had carried out this work, they had seen the regularity of children’s attendance improve, and appreciation of the value of ECE increase throughout communities. As one Pasifika provider said, it was good to hear families:

“Talking about their thing at preschool and how they run and all that”.

Both Māori and Pasifika providers talked about how PPP had changed the lives of families they had worked with, improving their life chances. As one Māori provider said, there have been the:

“Ones that have gone [to ECE] because they have had their babies in ECE, they have been able to go and do courses and they have wanted to do stuff to get off the DPB –to get qualification. They wanted to do much more for their babies, but they couldn’t because their baby was at home with them”.

“I touched on a family that had four children under five, and she did not have the energy to look at ECE. She was classic, needed time out. She had been in the refuge, her partner was inside. Her and I took the kids together to centres and she found one that was good for her, really good support, and to meet other people. She didn’t really live outside her own circle. She didn’t have ties to anyone else,she was blind in one eye because of the abuse. When she had children in ECE she decided she was going back to school”.

Summary

With regard to the nature of participation, families participating in ECE as a result of the work of PPP providers were largely Māori and Pasifika or of mixed ethnicity. A variety of ECE services have been accessed by Pasifika families (e.g., kindergarten, care and education centres, language nests) and by Māori families (e.g., kohanga reo, puna reo, puna kohungahunga, kindergarten and care and education services). Most Māori and Pasifika providers aimed to place children in ECE environments that delivered ‘culturally appropriate’ learning environments. This meant different things to different providers: For some Māori providers, this equated to a total immersion programme based on kaupapa Māori, while for others this corresponded to an environment that supported Māori tikanga and second language learning. Still other Māori providers defined this as an environment developed by Māori for Māori. For most Pasifika providers, a culturally appropriate environment related to a total immersion programme in the language of the particular ethnic group involved. Families were generally satisfied with the ECE choices that they had been offered.

Although outside the targeted age group, many children placed in ECE by PPP providers were under 3 years of age. Participation by younger siblings of children recruited through PPP appears to account for a small proportion of this. Further, while working families were not the target audience for PPP, it is possible that a greater demand

for care and education services due to mothers re-entering the workforce may partly account for the large number of under 3s being placed.

According to most provider reports, participation for most children supported and retained met the stipulated requirement of ‘consistent attendance for a minimum of 9 hours per week over a 3 month period’.

A variety of outcomes for families were identified. Generally, these related to a better appreciation of the benefits that accrue from participation in ECE for their family and for their children’s learning. Some of the benefits noted included: greater appreciation of the advantages of socialisation for their children; improved child behaviour; increased cultural knowledge and Māori/Pasifika language development; and management and administration skill development for those families involved in puna reo and puna kohungahunga. Other outcomes noted included greater confidence among parents to seek work resulting from their involvement in ECE, increased time to pursue other activities or, simply, have time out from parenting duties. Still others noted reduced isolation and better access to advice and support through increased connectedness to adult networks in lieu of extended family networks. Overall, improved life chances were highlighted as a key outcome for families.

Perceptions of non-participating families

In order to understand the impact of PPP on families it was important to understand why some families decided not to participate. The following represents the views of those families (all Pasifika) who had made the decision not to participate in ECE despite input by PPP providers.

Contact between PPP providers and families

As with the participating families, PPP providers initially contacted families either by phone or through visits to their homes, meeting them at church or, in one case, the PPP provider met with the parent in town. In the smaller communities, families said they were acquainted with the fieldworkers through attendance at the same church or family connections. Families said that the fieldworkers contacted them several times over an extended period of time, to see how they were coping and to give them information about enrolling their children.

As with the participating families, it was important to these families that the fieldworker was able to speak their language. One parent who was not Pasifika said she liked that the fieldworker was able to speak Samoan to her husband and English to her. She said that she felt “*included*”.

Non-participating families’ knowledge of ECE in PPP communities

Knowledge of ECE amongst non-participating families varied, with some families knowing little, and others aware of a wide range of services in their communities. Some families were able to name the different types of ECE services, including kindergarten, immersion services and childcare centres, while others named just the centre at which it had been suggested they enrol. It should be noted that due to the small number of non-participating families interviewed it is difficult to draw any conclusions from this finding.

Factors associated with encouraging participation in ECE

All the non-participating families said that the PPP fieldworkers worked very hard to encourage them to participate in ECE but that despite this they chose not to participate. The type of support that fieldworkers offered families included:

- Help to organise subsidies.
- Information about the benefits of ECE and books to read on parenting.
- Transport to visit ECE services and the offer of transport to the ECE centre should they enrol.
- Support with children, such as, advice on toileting and behaviour.
- Toys and resources for children's play including such things as a sandpit shade

Generally the non-participating parents considered that everything possible had been done to help them get involved in ECE. When asked why, in light of the seemingly positive experience these families had had with PPP, they had not participated, some talked about the associated costs (e.g., food and clothing) and lack of transport as a barrier. However, it was clear that, for one parent, had these barriers been removed, it was unlikely they would have chosen to participate anyway, as there appeared to be a general lack of willingness to do so.

Others felt that their child was too young to participate. For example, a grandparent felt she was better placed to pass on cultural knowledge to her grandchildren than was the centre. She was a trained teacher and had chosen to stay home to look after her granddaughter and to teach her the language. She had visited the pre-school centre but was not sure her granddaughter would be adequately cared for there. She commented on the minimal cultural knowledge being shared in the centre:

“She is too young and this is the quality time with my granddaughter. They can change her nappy and wipe her bottom but she learns from me and the quality”.

This grandparent was able to identify many different types of ECE in her community and had been involved in ECE with her children and older grandchildren. She considered around four years of age to be a suitable age to start a child in ECE.

Others expressed concerns related to the quality of ECE, and factors related to the health of the child or family members, or poverty, such as an inability to afford the clothes the caregiver felt were required for the child to attend ECE. Such concerns were expressed by another grandmother who said she did not enrol her grandchildren at an ECE because there were too many things for her to overcome. She talked about difficulties with transport, her health and the children being sick, the cost of getting clothes for the children, and the cost of fees. This grandparent was unwilling to share these issues, possibly due to embarrassment, and so was unable to get the help she needed. As she said, *“It's private, my business”*.

Reasons families who had discontinued ECE gave for non-participation

The three Pasifika parents whose children (N=4) had been enrolled at an ECE service and were no longer participating said that they had stopped participating for a range of reasons. One parent said she had finished a course she had done and so wanted to stay home with her child. This parent said that when she got work she would look at taking her child to an ECE service again, but that the cost while not working, even with the subsidy, was too high. Another family said that they could not afford the cost of having to pay on days they did not attend. These families also mentioned having no transport to get to ECE.

One of the parents who had discontinued attendance said she had been encouraged to enrol in an ECE training course and had done so. This parent was also involved in missionary work and said that, at this time, she did not have the time to attend the suggested ECE so had discontinued her child's participation. The PPP provider had

offered to pick up her child but this parent declined saying that her child had the company of other children at home.

One parent who had previously had her child at a kindergarten had withdrawn him because she was unhappy with the teachers, in particular the way they disciplined her child. Other parents had previously used ECE services for older siblings but were not currently using a service.

Summary

Pasifika families who had declined to participate in ECE had had contact with PPP providers, and, in rural communities, were often well acquainted with the providers. Non participation did not appear to be due to lack of effort on the part of providers, with non participating families noting a variety of supports offered to families by providers to encourage them to participate. These included; assistance to access subsidies, information on the benefits of ECE participation for families and children, transport, advice on child management, and the provision of toys and other child-related resources. Reasons for non participation included a range of issues, from costs and lack of transport, to health problems, to lack of confidence in ECE services to adequately provide cultural knowledge and differing beliefs around the appropriate age at which a child should attend ECE.

Reasons for discontinuing participation included cost, lack of transport, lack of time, and no further need for child care.

3.2.5 Has the capacity of community groups been built through PPP?

Raised community awareness around ECE and the escalating profile of ECE due to work carried out by PPP providers was considered a key outcome of PPP by MOE staff. This was said to be obvious, firstly, through feedback MOE staff received from communities, and, secondly, where communities had worked together to support the establishment of puna, playgroups and new centres.

MOE regional staff also mentioned the following evidence of capacity building:

- Increased parental skill levels and confidence as a result of participation on ECE committees and involvement in the establishment of puna and playgroups.
- Māori families participating in puna reo reported an increased confidence with the reo, particularly those who had felt too shy to take part in kohanga reo due to their lack of facility with the language.
- Māori families who were not committed to the kaupapa of kohanga reo chose other centres for their children. That is, through PPP they became aware of other options.
- For some families PPP meant that parents were able to return to the workforce which resulted in improved financial circumstances for these families.
- Increased capability amongst PPP providers as a result of experience gained in managing PPP contracts.

In areas where ECE capacity was either low or inadequate, MOE staff said it was important that, PPP providers had people who were both experienced and qualified in ECE, and had the knowledge and skills to coordinate the

establishment of playgroups and puna. It was also useful, as some providers in this evaluation had done, to first establish puna, and then progress this to a licensed and chartered ECE service.

The ways in which capacity was strengthened and developed was dependent on the particular situation or community. In one instance, where work was undertaken by a PPP provider within a Pasifika community using a community development approach⁹ the PPP was a catalyst for the establishment of a Pasifika ECE “network” set up to promote the value of ECE within the Pasifika community. The community was said to, over time, have taken on the responsibility for “spreading the message” on the importance of ECE. The ECE “network” involved people throughout the community, teachers, parents and extended family who because of their position within the community were able to raise the level of awareness around the value of ECE. The involvement of the extended family was said to be necessary as these family members (e.g. grandparents) often took on the childcare and so their appreciation of the importance of ECE was a factor in changing community attitudes regarding participation. MOE staff said:

“In terms of the Pasifika community development model, one of the strengths was they (the network) were able to show [to the wider Pasifika community] instances of kids who had gone through the schooling system and were successful. They could trace the children through from language nests and have them as role models when they held fono.....Also the Pasifika model has the buy in of key elders – leaders, church leaders. That goes a long way towards the success of the project....This community is now pushing for a licensed ECE...talking about purpose building. Their expectations are high”.

MOE staff also said this Pasifika community had strengthened the governance and management aspect of their ECE network. This included having a succession strategy in that, by involving a large and diverse group of people, there were people who could step up when others moved on. That is, the approach was sustainable due to having the people necessary to continue the work. Further and more generally, organisational capacity amongst providers was seen to increase as a result of developing collaboration with other community groups and work in ECE. Working in these areas meant an increased community profile for the providers. In addition, fieldworkers became more confident in their ability to work with other ECE services and other organisations.

Building cultural and language capacity for Pasifika and Māori families and children was seen as an important component of the PPP work by both Pasifika and Māori providers. Support and advice by Pasifika for Pasifika to promote the use of the Pasifika languages and ethnic practices (e.g., the gifting of food), and by Māori for Māori to support whānau into an ECE situation where they were “nurtured” in their learning around tikanga and te reo, was seen as central to the success of PPP. It was felt that such approaches promoted an environment in which families felt supported and increased the likelihood of their involvement in ECE. The families themselves endorsed these approaches which resulted in them feeling comfortable in what, for many, had previously been perceived as a foreign environment.

Another example of the extent to which PPP has resulted in increased capacity within communities is where families’ involvement in ECE has provided the opportunity to gain a qualification as an ECE teacher. In

⁹ The community development approach in this instance the Pasifika ECE network fits the community development model outlined by Barbara Kahan (2006/2007). It is an approach where community members come together to identify their own priority issues and their own solutions, working together to implement solutions. Government (regional MOE) provides support for community-based efforts and nurtures community leaders, without directing or controlling.

particular, language immersion playgroups and centres appeared to play an important role in providing this platform for families by enabling them to become familiar with ECE in a culturally familiar and non-threatening environment.

Pilot PPP community capacity

The pilot PPP providers saw PPP as a strategy that would increase community capacity, encourage the development of healthy and educated individuals ultimately contributing to healthy iwi/tribal nationhood. This was reflected in the experiences of the parents interviewed who had relied heavily on the provider to model what was required to run a puna kohungahunga knowing that in the future they would be self managing, determining their own organisational structure and programme delivery. In this way the pilot PPP providers appear to be contributing to the development of capacity in these communities although as the pilots have only recently been established evidence of this is only beginning to emerge.

Summary

Growth in community capacity appears to have been facilitated through work undertaken as part of PPP. In some instances, communities had worked together to support the establishment of ECE services where gaps were identified. Other aspects relevant to community capacity building attributed to PPP include:

- Increased parental skill levels and confidence (e.g. management and administration skills through involvement in puna reo)
- Increased awareness of ECE options in the community
- Increased participation in the workforce and an associated improved financial situation
- Greater awareness in the community of the value of ECE
- In one Pasifika community the PPP was the catalyst for the establishment of a network to raise the awareness of ECE amongst families. The network comprised prominent people from the community, including teachers, parents and extended family members, who actively promoted ECE within the community. The community involvement in the governance and management of the network, and the development of a succession strategy, ensured the sustainability of the network.
- Increased organisational capacity amongst providers
- Increased confidence and capacity in Māori and Pasifika language and cultural practices
- Increased human resources for ECE in communities due to parents studying for and attaining ECE qualifications.

3.2.6 Unintended outcomes of PPP

MOE staff, PPP providers, ECE staff and families were asked whether they considered there to have been any outcomes due to PPP that were other than those intended.

MOE regional staff said that PPP also provided the opportunity for them to access information about the community which they might not otherwise get to hear about. In addition, internal communication processes had improved through working across MOE teams to enable PPP work to be carried out for example, the establishment of playgroups.

PPP providers and ECE staff said they did not see any of the outcomes described above as unintended. However it was clear from comments made by some providers (Pasifika) that they were thinking strategically regarding Pasifika development. They identified the need for trained Pasifika ECE educators, and potential candidates amongst families, and encouraged these people to begin training. The result was the development of a trained ECE Pasifika workforce, for their community (in line with the goals of the ECE Strategic Plan). While this may have been an intended outcome for these providers in terms of developing the Pacific community it was outside the government's intended outcomes for PPP.

3.3 Factors supporting or hindering the implementation of effective PPP

This second section of the findings examines the factors that supported and hindered the effective implementation of PPP. The findings look at factors influencing successful identification, engagement and retention of Māori and Pasifika children not previously participating in ECE. In particular, the findings address whether community-based organisations are best placed to identify and address local barriers to participation in ECE.

3.3.1 Factors that support implementation of effective PPP

We begin the discussion by outlining factors perceived by evaluation stakeholders as key to provision of successful PPP. Findings were sourced from MOE interviews; interviews with PPP providers, and Māori and Pasifika families taking part in this evaluation.

Factors key to provision of successful PPP provider work

Contracting the right type of organisation to work as a PPP provider was said by MOE staff to be essential to the success of PPP, as was having the right type of fieldworker to work within the particular community. MOE staff said that both providers and fieldworkers needed to be known to, and trusted by, the community and able to work in an appropriate manner with that particular community. For example, (according to an MOE ECE coordinator) to work successfully with Māori communities it was said to be important that providers were “*small and whānau-based*” and worked face-to-face “*because Māori like the close knit*”. To support engagement, it was said to be essential that providers were able to “*get parents to understand about ECE*” and to “*broker relationships*” between families and ECE.

In addition, demonstrated, strong links, both with ECE within their communities, and across government agencies, were also essential to the success of providers identifying individual and groups of families who were not participating in ECE. Providers often had strong links to ECE, for example, those working for them had been affiliated with kohanga reo in the local area, or a member of a Pasifika advisory board who also had wide ranging connections with Pasifika communities.

Most of the providers had close links to health and welfare agencies also and were said to be providing support above and beyond that which they were contracted to do. As one MOE person said about families in their PPP community:

“Families have different needs - [there’s] a lot of stuff to get out of the way before they can focus on [the] children –entails a huge amount of work connecting in with the right social services”.

Another MOE staff commented on the extent of the work undertaken by the PPP provider in their area:

“Although it sits outside their contracts to give support in areas outside education, providers offer continual support – where families will accept this”.

It would appear that going the extra distance, as described, is viewed as a critical part of effectively supporting engagement and an essential aspect of maintaining credibility as well as links in the community.

Many PPP providers were said to be involved in more than one government contract that involved working with families and young children, such as PAFT and Family Start. Presumably, this situation affords providers with the knowledge of their communities necessary to support their PPP work and contributed to the credibility and trust held by PPP providers within their communities, factors noted above as important to PPP work. Moreover, this situation seemingly ensured strong links prevailed with other organisations.

Other factors identified by MOE staff as related to the successful implementation of PPP were:

- Centred on ascertaining individual solutions for families.
- Educating families about the value of ECE. This was often initially achieved through families’ involvement in playgroups.
- Providing families with the information on which to make considered choices about the best ECE for them.
- A focus on support and advice for families around ECE enrolment (e.g. how to access a Childcare Subsidy)

Identification of non participating families

Māori and Pasifika PPP providers used their extensive community networks to identify non-participating families in their communities. The community knowledge that providers had, and the diverse ways in which they were able to network, enabled the successful identification of these families.

Pasifika PPP providers said that a good source of referrals was word of mouth amongst the Pasifika parents themselves. As one provider said *“parents influence the other parents”*. Another Pasifika provider talked about the *“snowball effect”* where if one family is enrolled in an ECE then that family will encourage others to go. As highlighted above the credibility of the PPP fieldworkers with families was said to be very important. If they were credible then the word spread amongst families, facilitating access to others. Another way Pasifika providers found useful for identifying families was when community events occurred. On such occasions Pasifika families tended to *“bring everyone”* enabling fieldworkers to capture details of families not known to them to follow up later.

Pasifika PPP providers often reported having a wide range of long standing, pre-existing networks within the Pasifika community. One provider worked with 12 different organisations under the umbrella of one organisation so networks were there within their own overall organisation. These links increased their likelihood of identifying non participating families. Other means of recruiting families were: through Pasifika radio, through other programmes such as a CYF youth programme that PPP team members worked for, and through newsletters and flyers.

Māori PPP providers used similar means to identify non-participating children in their communities. Providers used a range of community networks to identify non-participating children, including contacts in other organisations working with families with young children, such as Plunket, PAFT and Family Start. Māori PPP providers said they had contacts in local primary schools and other different community organisations and groups. Providers generally had extensive networks, including ECE networks that they used to identify families where children were not participating in ECE.

As with Pasifika providers, some Māori providers were part of organisations that undertook contracts other than PPP relating to families with young children, such as PAFT and Waipuna (working with young mothers). These were a source of information on non-participating children.

Tamariki were also identified through ‘word of mouth’ using whānau links.

Other means of identifying non-participating children, used by Māori providers, included newsletters and flyers. Some Māori providers also used hui and two providers surveyed the community in order identify non participating families.

Key factors supporting participation in ECE

For Pasifika providers, the major factor in successful participation outcomes was said to be their work supporting cultural identity amongst Pasifika communities. This involved introducing families to ECE services that included language immersion, or non-Pasifika ECE that had Pasifika educators who could support Pasifika families. PPP providers also employed fieldworkers with whom families could identify culturally and who could communicate when necessary in the own language. PPP providers said that being able to speak the Pasifika language of the family was essential in helping families to understand why they should take part in ECE and in enabling communication and information sharing in general.

Providers were clear that for them, working with their own people meant that they were inclined to empathise with, and consequently go beyond, contractual requirements to provide support. In the words of one provider “*This is Tongan work for Tongan, that’s why we’re successful*”. Being Pasifika also meant that providers were visible within their own communities and so, either associated with, or were known to, families.

A feature of the Pasifika community, said to be important by one PPP provider, was the growing movement for Pasifika peoples to set up and run their own ECE services or language nests with their own culture and language as a foundation for learning. The provider described this as “*A growing desire to decide their own future rather than Palagi making those decisions*”.

In addition, in one of the Pasifika communities, families often sought to attend ECE services where other family members or people from the same Pacific nation village were attending. In some instances, this meant they travelled some distance to attend the same ECE. The provider said that “*our people tend to be selective in their*

attitude to centres” and that “the concept of family is very strong in centres”. For the provider therefore it was important that they understood and took into account these familial links in order to better facilitate the PPP work in identifying and supporting families by where possible introducing them to ECE where they had connections.

For Māori providers the success of PPP was said to be the result of their ECE backgrounds and their thorough knowledge of their communities. It is interesting to note that the providers’ backgrounds sometimes appeared to have influenced the range of ECE centres that families were introduced to (e.g. those with strong association with kohanga tended to focus on kohanga).

Another important factor in the success of PPP was the leadership from the PPP provider in ascertaining the needs of the community and determining the nature of the service best suited to meeting these needs. For example, one provider conducted a needs analysis and found that, for many of the non-participating parents in that community, the total immersion experience of kohanga reo was an intimidating experience for their young parents who felt embarrassed that they did not have the tikanga or te reo. This provider established a puna reo (bilingual ECE) which then enabled parents to become involved at a level with which they were comfortable.

Some Māori providers noted the importance of knowing the families and their needs and knowing the ECE services and matching them, for example, understanding whether a family was able to travel to an ECE, whether the fees are affordable, whether the operating hours met the family needs, and whether the philosophy of the ECE and family matched. As one provider said:

“I make a point of making my families comfortable and knowing they feel safe...trying to make them know whatever centre I take them to its going to be a good one for them....Once they are in there and they are happy, I know I’m not going to get a phone call to say I want to move”.

Providers considered that the better the match, the greater chance of retaining families in ECE. To this end, the majority of Māori providers introduced families to ECE programmes delivered by Māori for Māori, including kohanga reo, puna, and in one instance a puna reo. Where families were introduced to non-Māori ECE, providers were careful to check that ECE were responsive to Māori families, that is, that the ECE acknowledged the importance of a bicultural environment through the use of reo and tikanga.

For all Māori providers both pilot and non-pilot, iwi connections and iwi development were fundamental to their PPP work. Provider commitment to Māori development meant that the PPP work was seen as integral to increasing whānau/hapu/iwi capacity. An example of this was the puna reo, established by a PPP provider (non-pilot) for families in the community, which had then become the nucleus for other Māori educational developments in the greater community. This had contributed to; employment of a number of women who then enrolled in tertiary education, a te reo group formed to support staff and parents learning Māori.

Māori providers also spoke about the importance of a “*non-threatening*” ‘whānau ECE environment, where parents and children are able to participate together to encourage Māori families to participate in ECE. Puna and playgroups were seen as especially suited to introducing Māori families to ECE. Parents could attend with both children over three, as well as with younger siblings, while being prepared for attending an ECE centre in the future, becoming accustomed to the payment of koha, separating from their children and understanding other obligations or expectations they will have to meet, such as bringing food. To this end, puna and playgroups were seen as providing a ‘*stepping ground*’ to involvement in any ECE centre where parents would leave children.

As for Pasifika, an essential element to success was the ability of providers to work with the community. For Māori this meant working through local iwi and whānau connections, as well as with the ECE community in the PPP catchment. Important pre-existing networks within provider communities included:

- whānau links so children could be identified through word-of-mouth;
- links with other Māori organisations (e.g., Māori Women's Welfare League, local marae);
- contacts in local government agencies such as regional MOE and Work and Income (for information on the Childcare Subsidy);
- other organisations working with families with young children, such as Plunket and PAFT; and
- ECE networks (including the Kindergarten Association, Kohanga Reo National Trust, Playcentre Association).

The point was also made that with the increasing numbers of families of more than one ethnicity it is becoming important to the success of PPP work for providers to be able to work cross-culturally.

From the perspective of families, cultural affinity was an essential aspect in supporting participation by Pasifika families in ECE. All Pasifika parents commented on the importance of their own language (that spoken in the home) to discussion with the PPP provider as well as at the ECE centre they used. Many of the parents had made a concerted choice to attend a language immersion ECE as they were keen for their children's home language to be supported. The opportunity to attend an ECE service with a familiar language and culture (e.g. a language immersion centre or a service where staff spoke the language and supported the maintenance of cultural practices such as chants and games particular to the ethnic group) was very important to these families. Having the shared language and the cultural familiarity promoted by the language immersion ECE centres provided a sense of belonging, a core strand of Te Whāriki, the ECE curriculum. In addition, for some parents, the fact that the ECE was connected to their church was important. As one person said *"I feel comfortable here, these are the teachers my kids see every day, and on Sundays"*.

Like providers, parents also talked about the importance of supporting their own Pasifika people by participating in ECE where their language and cultural practices were maintained. As one parent said *"I think that's an important job to support my people"*.

For all Māori families, having access to ECE environments that supported Māori cultural practices and language was a key factor in participation. All Māori families consciously chose ECE environments that supported Māori tikanga and language. Some families chose a total immersion ECE where their children could learn, speak and play in Māori. For these families, one of the key priorities was for their children to be able to culturally identify with their Māori heritage. One kohanga parent said she had always wanted her children to know their whakapapa, to know they are Māori and where they come from. For her, participation in kohanga reo provides an educational space within her own tribal area where her children can learn who they are in a context that holds a Māori world view.

Other families who did not speak the Māori language chose a bilingual service, which provided a *"non-threatening"* environment for the parents, and where the language could be learnt and their Māori heritage was supported. When parents chose to use non-Māori ECE services, one of the criteria was that Māori cultural

practices and language were evident. As one parent said about an ECE she had moved her children from due to inappropriate cultural practices:

“Their structure clashed with our ways. They let kids on the tables. For us that means they’re jumping on the tables at home”.

Receiving home visits from providers was another key factor supporting participation, as they provided an opportunity to build a relationship with the fieldworker and so discuss issues with someone who is familiar and understands the cultural situation. For some Māori families involved in PPP, the support of the provider was said to be critical in preventing isolation. Many were single parent families, unemployed with limited financial and physical resources. In some cases the provider was the only visitor that a whānau would have in a week. Families’ involvement in parent-led ECE also helped to reduce social isolation, and built their levels of confidence. For example, one parent who described herself as a very shy person prior to starting at ECE, said that staying at home with her children meant she had lost her ability to relate to other people. Since her participation in ECE, she said she had *“become more confident and assertive and they can’t shut me up”*. Reduced isolation, confidence building and the development of culturally attuned relationships with PPP fieldworkers would all appear to have contributed to participation in ECE by these families.

Many Pasifika families valued the opportunity to discuss their children’s behavioural problems with PPP providers and receive advice on matters such as toileting. One parent, a new immigrant, said, *“I want somebody [to] come over to my house and talk about my family and my children”*. This parent also said that the information they were given regarding health services was very helpful. Such supports encouraged participation.

The provision of transport to and from ECE services was another factor central to both Māori and Pasifika families’ participation. Many families said that being transported and accompanied by the PPP provider to the ECE to enroll was important, both in terms of supporting families as they familiarised themselves with a new environment, and in actually getting them there. In many instances, Pasifika providers, when enrolling families, matched them with ECE services that had vans to pick up and drop off the children. In one small community a provider would occasionally pick up and drop off children themselves. Most kohanga reo had vans so families could be picked up and dropped off. The transport arrangements (a subsidised taxi) organised by a Māori pilot provider as part of their contract was very successful in encouraging families’ participation and attendance at a kindergarten in the PPP area.

Other issues related to support for implementation of effective PPP

Three PPP providers commented on the number of children they had been contracted to identify, engage and retain in ECE, noting that the set targets were unrealistic. While they acknowledged that variations to the targeted numbers had been made to their contracts prior to the end of the contract period, they reported that they would have preferred to have been consulted on the targets before the start of their contracts. According to MOE, providers were all given an opportunity to comment on proposed contracts before they signed them.

Summary

Several factors were identified as key to successful provision of PPP provider work. Amongst these was the need for PPP providers and fieldworkers to be known to and trusted by the community in which they operate and work in a manner appropriate to that community. This was assisted, particularly where Māori were concerned, when the

organisation was whānau-based and close knit, and where fieldwork was undertaken face-to-face. Another important factor was for PPP providers to have established links with ECE within their communities and government agencies as this assisted identification of non participating families and afforded providers the knowledge and contacts necessary to undertake their work. Where providers held other government contracts in addition to PPP, this appeared to support their community knowledge and facilitate networking as well as contributing to their levels of credibility and trust within the community.

Both Māori and Pasifika providers relied on their extensive community networks to identify non participating families. In addition, having cultural links with communities (e.g. being aware of and attending cultural events) was an effective way of accessing non attending families.

Participation in ECE was supported by activities undertaken by providers that facilitated cultural connectedness, for example, for Pasifika families, linking families into ECE services supporting language immersion or with Pasifika educators. It was helpful too for fieldworkers to be of the same cultural background as the families and to speak the language of the family as this assisted communication. Participation in ECE, by Māori families, was assisted where Māori PPP providers had ECE backgrounds and a sound knowledge of their community. Moreover, responsiveness to the needs of the community and ensuring that families were able to access the type of ECE best suited to them were important considerations in assisting participation. A whānau environment such as that offered by puna and playgroups was considered to be an effective way of introducing families to ECE and encouraging participation.

For Pasifika families, cultural affinity was an essential aspect supporting participation in ECE. Language and cultural familiarity, when interacting with providers and within ECE services, was a key feature of participation. Similarly, for Māori families, having access to ECE environments that supported Māori cultural practices and language was an important factor in participation. In addition, reduced isolation, confidence building and the availability of culturally attuned, supportive relationships provided through contact with PPP providers and ECE services contributed to participation in ECE by these families. Assistance with transport to ECEs was a practical way in which participation was encouraged.

3.3.2 Barriers to success for PPP

Lack of appreciation of the value of ECE

MOE staff and PPP providers across all regions agreed that the greatest barrier to participation in ECE was a lack of appreciation by families of the value of ECE. Providers were generally unanimous in their views that in order to improve the motivation to participate and to change parental attitudes more parent education was needed. Social events were suggested as a way to bring Pasifika families together in order to then educate them about ECE. Using the space in schools was one suggestion while another was to hold community cultural events, and yet another to get the Pasifika church ministers to promote ECE. However, providers generally considered that it was difficult to get families to appreciate the value of ECE before they had participated. The first step in achieving this was getting the families to attend ECE, getting them into the routine of attending and “*building their confidence*”. While providers spent considerable time explaining the value of ECE prior to participation, it would appear that appreciation of the value of ECE was more a consequence of participation rather than a pre-cursor to participation. This was particularly clear where both Māori and Pasifika providers established playgroups and puna to step families through the process of being involved in ECE in an environment that was comfortable,

familiar and parent-led. Some providers then transitioned families to a teacher-led ECE centre. This transition model was very effective in building parental confidence, and appreciation.

By contrast, for some Pasifika families, lack of familiarity with ECE in the New Zealand context presented a barrier. According to Pasifika providers, parent education was particularly important when introducing some families when the child-centred approach taken in New Zealand ECE was unfamiliar to families used to a structured and teacher-centred approach common within Pacific Nation communities. The approach taken in New Zealand ECE needed explanation so that these families understood the teaching approach and the benefits to their children in terms of learning.

Competing family needs

The issue of poverty was identified, by both MOE staff and providers, as impacting on parents' ability to appreciate the value of, and engage with, ECE. In several cases, participation in ECE was "*competing [with other] family needs,*" such as social and economic survival, or when families were receiving multiple interventions and PPP was seen as extraneous.

Poverty was said to be a major issue facing many of the Māori and Pasifika families in PPP communities. As one Māori provider said:

"It is really the social status that our whānau find themselves in, the economic situation.... The ability to sometimes discipline themselves to get out of bed ... If it is some distance, the car may not be going or not registered".

For some non-participating families, the fees (even the most minimal), the cost of transport, and the provision of food and/or clothing associated with attending ECE, created barriers in terms of affordability. One Māori PPP provider commented that, in urban areas, community-based ECE were the more financially friendly option for families as their fees were lower. This provider focused on introducing families to this type of ECE.

Responsiveness of ECE to Māori and Pasifika families

Both MOE and providers said that, in some instances, one of the barriers to families participating in ECE was the need for greater responsiveness by ECE educators in non-Māori and non-Pasifika ECE to the needs of Māori and Pasifika families. That is, it was said that some ECE environments did not reflect or consider the cultural aspirations or traditions of families. In these instances, families felt neither welcomed nor comfortable. One Pasifika provider talked about the feedback they had received from families who had started at an English-medium ECE then discontinued in order to enrol at an ECE where there were Pasifika staff. This provider said that some of the families found the English-medium ECE environment difficult to adjust to as they did not understand what was required of them in the ECE context and/or, at times, did not feel welcome. This would suggest a need for greater support for ECE educators around working with Māori and Pasifika families.

Transience

Both providers (Māori and Pasifika) and MOE regional staff said that transience of families was an issue impacting on PPP work. Transience of families meant that families were difficult to identify in the first place and

even harder to retain in ECE. When families were introduced to an ECE and the provider went to visit them, they had moved on. As one provider said:

“It was not uncommon to place the children and follow up and find they’ve gone”.

Pasifika providers also talked about the use of different surnames or aliases for the same child, depending on which member of the extended family children were residing with. They said this, combined with transience, made them especially difficult to track.

Other barriers to families participating according to MOE regional staff and PPP providers included:

- Limited choice of ECE to suit families’ requirements (e.g. limited bilingual ECE for Māori families not wanting total immersion programmes).
- Quality of ECE buildings and facilities (e.g. centres in bad repair or poorly maintained).
- The number of available placements.

Supporting and retaining families and children in ECE

According to PPP providers the main barriers facing them in supporting and retaining families in ECE included:

- Lack of transport for families, both rural and urban, to attend ECE regularly.
- The quality of buildings for puna (puna located in schools tended to have better facilities)
- Maintaining puna despite fluctuating numbers.

PPP providers noted that, while they were able to address some of the factors they had identified as barriers to supporting and retaining children and families in ECE services, some barriers were beyond their control to address. For example, while the issue of transport was being addressed by many providers, particularly Pasifika and pilot providers, and by many ECE services, this was at a cost to providers and ECEs, and was not seen to be sustainable in the absence of extra funding. Similarly the absence in some communities of suitable, affordable buildings in which to establish puna and playgroups was an ongoing issue.

Pilot providers often found it difficult to maintain the numbers of families participating in puna. Again, it was believed that erratic attendance was associated with the poverty faced by many of these families, which resulted in social and economic problems that precluded or made participation very difficult. Despite this, providers strove to keep puna open for families, regardless of the low numbers, in order that they had the option to attend when they could.

Parents/caregivers were asked what could be done to help families to continue their involvement in ECE until their children went to school, in addition to the support they were already receiving. Like providers, parents identified poverty as a barrier to participation. Three parents, each with more than one child attending ECE, said the degree to which their children could participate in ECE was limited by the financial cost to them. These families, despite receiving a Childcare Subsidy to help meet costs, found fees associated with attending ECE prohibitive. However, most families who participated in the evaluation said that there were no real barriers. They

were satisfied that they had the necessary support when needed, and said that they now understood that attending was important for their children's future opportunities in life.

Summary

A significant barrier to the success of PPP in engaging Māori and Pasifika families in ECE was lack of appreciation of the value of ECE. However, for non-participating families, appreciation of the value of ECE first requires participation. Education alone appears insufficient. Getting such families to first attend less formal, familiar and socially supportive contexts, such as those represented by puna and playgroups, appeared to support the development of an appreciation of the value of ECE. In this way, parents were directly exposed to the benefits of ECE for themselves and for their children in a comfortable and sociable environment and were more inclined then to take advantage of other ECE services.

For some Pasifika parents, education was required when introducing them into some ECE services to prepare them for the child-centred approach taken in New Zealand ECE so they understood the teaching approach and the benefits to their children in terms of learning.

A further barrier to participation was poverty and related social and economic demands on families. In some instances, community-based ECE offered a more financially-viable option for families.

Greater responsiveness to the needs of Māori and Pasifika families on the part of some ECE educators in non-Māori and non-Pasifika services would reduce barriers to participating in these services experienced by some families. Professional development for ECE educators around working with Māori and Pasifika families would improve responsiveness.

Transience of families and the use of aliases and different surnames make it difficult to locate families, acting as a barrier to the success of PPP. Other barriers included; unavailability of the type of ECE of choice and poor quality ECE facilities.

The main barriers to retaining families were lack of transport to attend ECE regularly, the quality of buildings in some cases, especially where puna were concerned, and maintaining sufficient levels of participation to ensure puna are able to operate. Transport issues were able to be addressed in the short term by providers and/or ECE services, but this would not be sustainable in the absence of extra funding. Efforts were also being made to keep puna operating despite low attendance at times. Where possible, puna were established in local schools to take advantage of quality facilities. For some families, the most significant barrier to retention in ECE was their ongoing ability to meet the costs.

3.3.3 Replication of PPP approaches

When asked whether the processes they saw as successful in promoting participation in ECE were replicable across communities, MOE regional staff and providers generally said that, due to the differences within communities, this would not always be feasible. However the overarching framework may be replicable.

The community development approach, (Refer to Section 3.2.5, p 59), identified as a useful approach for Pasifika communities involved providers working with the extended community to promote the value of ECE and encourage participation. This general approach was viewed as replicable by MOE in three regions, both for Pasifika and other ethnic groups (e.g., refugee groups), although it was noted that the particular approaches taken

would need to be appropriate for the particular ethnic group in question, taking account of individual cultural structures and processes.

In regard to Māori PPP providers, two overarching approaches emerged from the findings in this evaluation. One approach had as its focus Māori iwi development. In this approach, PPP was seen as one means among several of achieving whānau/hapu/iwi/tribal health and well-being. The following quote reflects this model and philosophy:

“[This umbrella organisation] was a branch of marriage guidance years ago, the Māori component, and they saw the need for Māori to govern Māori processes...that’s where we sit at the moment, not just looking at counselling now, but all services, social services, health and education...Everything that we do is linked in a way. We try to work holistically and we do bring in other people where we see the need, we work collaboratively with our Māori organisations around us and some of the Pakeha organisations.”

In this approach, PPP is seen as a vehicle for achieving Māori development through the introduction of families to language immersion or bilingual ECE contexts within iwi jurisdiction. Several of the Māori PPP providers participating in the evaluation operated within such an approach and it is assumed that PPP could operate within such a framework wherever similar iwi organisations existed.

The other approach that was seen to be operating in an urban context by one Māori provider, while underpinned by a similar philosophy, focused more closely on identifying the needs of individual families and matching them with the ECE context that best met these needs.

Another aspect of PPP, discussed previously, that would appear to be replicable in either Māori or Pasifika contexts, is the use of puna and playgroups as a means of introducing families to the notion of ECE. This transition approach appeared to be very effective in building parents’ confidence in, and appreciation of, ECE.

Summary

Several PPP approaches were identified that appear replicable. In Pasifika communities, a community development approach operated, which involved collaboration between providers and the extended community to promote and educate participation in ECE. This general approach would appear to be replicable in other Pasifika communities as well as in other ethnic groups, although the particular approaches taken within the approach would need to take account of the particular ethnic group concerned. Two related approaches were identified for Māori providers; an iwi development approach and an individual family approach. Both approaches were underpinned by the same philosophy and overarching goal – Māori development – although the focus and enactment of this differed. The former approach focussed squarely on Māori iwi development, and PPP was a means of introducing families into language immersion or bilingual ECE contexts. This approach is likely to be replicable where similar iwi organisations exist. The latter approach focussed on individual families’ needs first, matching them to the type of ECE best suited to them. This approach may be replicable in similar urban contexts. A further approach, apparently replicable in Māori and Pasifika contexts, involves the use of puna and playgroups as an initial step in encouraging participation in ECE.

3.4 Was PPP sufficiently broad and flexible, allowing implementation in ways that best suit each community?

3.4.1 Implementation of PPP

Findings relating to the implementation of PPP were obtained in interviews with MOE staff, PPP providers (Māori and Pasifika), ECE educators at ECE services where previously non-participating children had been placed, and families, both those who were participating in ECE due to PPP, and those who had discontinued or chosen not to participate despite PPP intervention.

Selection of PPP providers

MOE regional staff said that, in many instances, in the 2004-2005 contract round, PPP providers were approached directly and invited to take on a PPP contract. MOE regional staff said that, as organisations with the capacity to take on PPP work were not plentiful approaching potential providers in this way was considered necessary. Selection was done by MOE staff at a national and regional level (including staff working with Māori and Pasifika contractors) based on their knowledge of potential providers and perceived capacity of the organisation to achieve the work. The majority of organisations had histories of contracting with either MOE or other government agencies. MOE regional staff interviewed prospective providers and reviewed organisational documentation relating to management and governance and financial accounting. MOE in one region held hui for Māori and Pasifika organisations at which they gave a presentation on PPP and invited applications from potential providers.

PPP provider selection criteria

MOE regional staff said that until recently, there had been no national criteria regarding selection of providers. One MOE regional office said they had developed their own manual and set of contract guidelines for contractors and MOE staff to follow. A set of national guidelines has however been developed for use from 2006 onward. For the 2006 contracts, the selection process changed. Prospective contractors were required to respond to an RFP and the process was formalized, for example, in one region a selection panel was convened. Although not formalised, the criteria used by regional MOE in selecting providers for the 2004-2005 PPP contracts appear to have been similar, with the emphasis placed on the ability to achieve the work in their communities. It was also considered important that providers have good internal communication processes so that there was a shared vision as to the purpose of PPP. The selection criteria supported government intentions as outlined in the ECE Strategic Plan (2002, p10), where the aim was to work with Māori and Pasifika to “*uncover the barriers to participation and develop strategies to foster greater involvement*” (p10). Māori and Pasifika PPP providers would play an important role in determining outcomes for Māori and Pasifika in terms of ECE participation.

Criteria for selection of providers include:

- Providers known to have an extensive knowledge of and networks in the communities in which they were being asked to work.
- Strong community standing (e.g., reputable and credible).
- A track record of working with families with young children and/or ECE services in their community so that goals and philosophies were aligned with the work to be carried out.

- A good track record with previous contracts (e.g., PAFT contracts).
- Sound business and management skills.

In terms of the operation of PPP, it was important that local needs and issues were taken into account (i.e. that the operationalisation was suited to the context). Relationship-building and collaboration with other community organisations was said to be essential to achieving these project outcomes.

Pilot providers

In the case of the pilot PPP, iwi aspirations were a key driver of the PPP initiative and both providers had Memorandums of Understanding with MOE. For the providers, establishing puna kohungahunga to increase participation was part of a wider, overarching iwi vision and strategic plan to determine their future direction. The pilot PPP was just one of a number of education strategies being implemented to increase whānau/hapu/iwi health and well being.

Operation of PPP regionally

MOE regional staff said that the operationalisation of PPP differed from region to region because the implementation strategies were designed to take into consideration local needs and issues. MOE regional staff said one of the strengths of PPP was that it was not ‘*one size fits all*’. The project allowed for negotiation of contracts according to the levels of participation in different regions, as well as other factors, such as distances to be covered in order to carry out the work. Variations to contracts were said to be essential, firstly, to cater for differences in context and secondly, to allow for amended targets where targets based on participation data were found to be unrealistic.

Interviews with PPP providers revealed this need for flexibility. For some providers, the work was undertaken around other work and other commitments, such as running an ECE, other MOE contracts, or church obligations.

When asked to talk about how PPP was operating in their regions, MOE regional staff said that the main thrust of provider work was in the building of relationships within the communities and with families. This was said to be central to achieving outcomes for PPP that is, identifying non-participating families and children, and engaging families in ECE. At the same time, the operational approaches varied considerably in order to fit the contexts within which they were working.

MOE regional staff described their role as one of a “*middle man*” managing national operational expectations and the expectations of community organisations around the PPP work. MOE regional offices also reported that they carried out considerable capacity building with the community organisations involved in PPP in order to support them to undertake the work. It was noted, however, that this could only happen to the extent that the resources, both in terms of staff and time, were available to do this. In addition, ECE forums held by MOE were said to be a useful means of informing communities about the range of MOE services operating in their areas. These forums were also a means of strengthening relationships with providers, disseminating information and providing networking opportunities.

Providers also said that credibility was an essential factor, both during the MOE selection process, and in terms of their ability to carry out the work with families and ECE services. Credibility was said to be based on whether providers had:

- A positive profile and good working relationships with MOE, particularly regional MOE.
- Established networks with a range of community organisations and within their respective Māori and Pasifika communities.
- A good knowledge of ECE and good relationships with ECE services in their communities.

The features outlined above mirrored those described by MOE.

The importance of good relationships between PPP providers and ECE services was considered key to the smooth operation of PPP work. For example, for Māori providers, the development of good relationships and clear lines of communication between all parties was important in providing a pathway forward for whānau to engage in ECE. Similarly, for Pasifika communities where the understanding of the structure of ECE differed, it was important that the families knew and trusted the word of the provider as families ventured into a world unfamiliar to them. In both Māori and Pasifika communities, provider credibility with families was essential to the effectiveness of PPP, with participating families often spreading the word about the provider to other families in the same community.

According to Pasifika providers, they adopted a two-pronged approach to their PPP work. In addition to being a placement agency, they saw their role as that of an advice and support agency for parents and sometimes for ECE services. Further, providers said they often worked as a mediator between these two parties, negotiating participation to the satisfaction of both (e.g. regarding payment of fees, transport, etc). However, some ECE services were not clear about the actual role of the provider in terms of promoting participation, tending to view them as being there for advice and support about ECE.

All Māori PPP providers/coordinators who participated in the evaluation had strong ECE backgrounds in ECE services, including kohanga reo. All said they utilised their ECE networks to identify non participating families and build relationships with ECE centres. In some instances, there were strong pre-existing relationships through either their own work in the ECE sector, or through whānau members. In other instances, PPP work was communicated to groups at iwi hui, tangihanga and other events, as well as through whānau connections. According to pilot PPP coordinators and puna kohungahunga coordinators, their strong community presence and professional expertise was important to the establishment of puna.

The work engaged in by PPP providers' often involved concentrated efforts in order to engage families. MOE regional staff said that PPP work for the 2004 to 2005 round was carried out, in many instances, with families that were requiring intensive support for a range of social issues. There was a perception from many MOE regional staff that the first sweep of contract rounds had captured the families that were easier to identify and place in ECE. However, as the evaluation was a snapshot of the implementation of PPP at one time point, this perception can not be explored further. Issues of poverty, poor education, limited access to transport, transience, and families struggling to make ends meet meant that some providers often needed to network with other agencies in order to support families as a whole, with PPP work just one of several interventions taking place. Both MOE regional staff and providers said that work with these families could take a disproportionate amount of the contracted PPP work time. While PPP required providers to have extensive community networks in order to identify non-participating families, the extent of the work undertaken with multiple agencies to introduce, support and retain families in ECE, was perhaps unanticipated.

The issue of families being hard to engage was mentioned by both MOE regional staff and PPP providers. As one MOE staff member said, to place the children takes "*intensive work with families [that] require several visits at*

home and at the centre and that's both before and after enrolment". Or, in the words of one provider, continuation of support and retention of families requires "*lots of energies by all parties, PPP and ECE services*".

According to MOE regional staff the main issues facing providers in their work with families included:

- Limited hours for providers to work with families and large geographical areas to cover.
- Providers working in isolation.
- Instability within some PPP organisations.
- Limitations in participation data resulting in targets that were difficult to achieve. The types of issues included the historical nature of the data on which targets were based, and an apparent mismatch between participation targets and ECE capacity in some communities.

Providers' perceptions of contractual targets

There was a general consensus amongst PPP providers that the focus on numerical targets as outcomes meant that important successes achieved through the PPP work were not adequately recognised. Providers felt that the work undertaken achieving community and whānau involvement in ECE, promoting the value of ECE to families, and other community development work triggered by the project were essential to achieving the targets and that greater attention should be given to these outputs. Providers perceived payment for outcomes as "*skewed towards [bottoms] on seats*". While the numerical targets were the main reason for PPP, providers considered that the work undertaken in order to achieve targets that was not registered within reporting requirements (e.g. transporting children, going to WINZ and HNZ, accessing food and clothing for families), was therefore not being recognised and should be prioritised, although they were unclear how this might be achieved. However, in the interests of replication, such operational information should be captured.

Summary

Operationalisation of PPP differed according to local needs and issues. In order to meet the needs and conditions of local communities, the project allowed for contract negotiation. This flexibility was essential to take account of issues identified around contracted targets, where levels of participation possible within communities were found to be lower than anticipated, and to take account of the geographical area covered, as well as workload and other commitments of the provider. Approaches taken by individual providers varied according the particular contexts and communities in which they operated. In sum, it appears that PPP has been implemented in a broad and flexible manner in response to the particular needs of the recipient communities.

A key feature of provider work involved building and maintaining relationships in their communities and with families. MOE supported the efforts of providers by managing expectations, providing capacity building and instigating forums for information sharing and networking. Maintaining credibility with MOE and communities was a critical aspect of provider work, as was maintaining good, working relationships with ECE providers. Pasifika providers saw their role as one of providing advice and support as well as placing children in ECE. Māori providers all had backgrounds in ECE and used their ECE networks to identify children and facilitate relationships with ECE. The work engaged in by PPP providers required flexibility on their part to do what was necessary in order to fully engage parents. This often required intensive intervention to engage low socio economic families with competing needs and was often extremely time costly for providers. The main issues facing PPP providers,

according to MOE staff, included; limited hours to work with families and large geographical coverage areas, provider isolation, organisational instability and unrealistic setting of targets due to such things as the historical nature of data, and participation data not being linked to ECE capacity.

Other implementation issues

MOE staff highlighted the importance of having a national overview to support consistency in PPP work and to enable replication of models or strategies that worked. That is, it was considered important that information was communicated across PPP communities (e.g. through hui or networked e-mails), that would enable sharing of ideas or problem solving strategies. National coordination was said to be necessary for effective coordination across PPP communities. At the same time, it was stressed that ideas should fit with the different contexts in order to promote community ownership of the project. It was also noted that it was imperative that the ECE be informed about PPP in order that all concerned parties are aware of what is happening in the community. For example providing brochures and information on PPP, produced at a national level, to providers and families would mean that all communities were receiving the same information about ECE.

MOE staff also suggested that exemplars of success stories and issues reflecting the enormous diversity and difference amongst PPP communities would be useful in supporting providers in their work. Exemplars would provide initial direction as well as reassurance that providers were carrying out the work as intended.

Families' experiences of contact with PPP providers

Families who were participating in an ECE service due to intervention by a PPP provider were asked about the way they were approached to take part in ECE and any other contact following their enrolment at an ECE. For Pasifika families the type of initial contact varied across providers. In smaller communities, providers tended to use a face-to-face approach, including door knocking "*[The fieldworker] came to my house and knock on my door.... She came and find me*" and 'conversations' at church. Where providers covered a wider geographical area initial contact was more likely to be by phone, followed by a visit to the families' homes.

In most cases, fieldworkers made multiple visits to the home or conducted several discussions at church, to let families know about ECE and the benefits of this for the children before families decided to enrol their children. All families reported that follow up contact by the fieldworker occurred, either through home visits or contact at church.

Some of the Pasifika parents interviewed worked at an ECE service run by a PPP provider. These parents had become involved with the service as volunteers prior to the licensing of the ECE service. One had stayed as a staff member, and another as a volunteer parent help, throughout the licensing processes. For these parents, contact was clearly ongoing.

Pasifika families were generally highly satisfied with the contact they had with PPP providers. The personal approach, taken by PPP providers, was much appreciated by these families.

Māori families said they were initially approached informally, for example, during a community hui, while attending tangihanga or just out in the community. Most of the Māori providers used everyday situations or community events to engage families in conversation in order to find out whether they were participating in ECE

or not. They also followed up referrals received from other family and parenting programmes in their communities such as Parents as First Teachers (PAFT).

Most families said that the initial contact was followed up by a visit from a fieldworker to their home. Families associated with one particular provider said they were asked to complete an information sheet about their family and their needs, which were used by the provider to identify the services in their community which best, matched these. The provider would then take the family to visit these ECE centres. As described by one family “*She [the provider] took us around the whole tiki tour. She picked us up and took us to all the centres*”.

In the case of the puna, these were established as a result of community need. When it had been established through community networking and hui that there was sufficient whānau interest, a suitable venue was located and whānau applied for funds to resource puna.

The comments made by families who participated in the evaluation, about the ways in which they were recruited to ECE, suggests that they were very comfortable, with both the way the fieldworkers communicated with them, as well as with the information provided to enable them to make a decision around participation.

Pasifika parents commented on the friendliness of fieldworkers. The following comment from one parent is typical of the personal comments about fieldworkers:

“She has a happy smiling welcoming attitude”.

Many parents said that they liked that they were given the choice about when to enrol their children in ECE, while also learning about the benefits of ECE for both their children and themselves. Particularly appreciated by one parent was the time and opportunity for both her and her husband to make the decision together about enrolling their children, in conjunction with information from the provider. A Māori parent who enrolled her child at a Pasifika centre said that she liked that the fieldworker gave her information and time to decide whether a Pasifika centre or a kohanga reo would be the preferred option.

Families’ understanding of the role of PPP providers

Māori and Pasifika parents taking part in this evaluation generally understood that the role of the PPP fieldworker was to get families and children to participate in ECE. Māori families also talked about the support they received to engage with their kids and help them become less isolated as important aspect of PPP work.

Some parents commented that they liked the informal approach taken by the fieldworkers although they said they knew there was a purpose to the visit. As one Pasifika person said:

“It was like an everyday talk but there’s a main point to that talk”.

Māori and Pasifika families’ knowledge of ECE in their communities

The extent of knowledge about, and contact with, ECE services, other than those they were currently enrolled in, varied amongst Pasifika families. Some parents could name some of the Pasifika ECE services associated with their churches or in their community. Others could name ECE services that other family members either worked at or used. Only some of the Pasifika parents were able to identify different types of ECE in their area such as kindergarten and kohanga reo, as well as Plunket playgroups.

Māori families also differed in the extent of their knowledge around ECE. Some families had little knowledge and had never engaged with ECE previously. These were generally young, first time mothers. Others knew about kohanga reo as they had participated themselves. They had little or no knowledge about other forms of ECE. Their knowledge was based on a tradition of participating in kohanga reo.

What Māori families liked about the PPP provider approach

Whānau Māori generally felt that the provider was interested in their child's education and well being. They said that this made them feel like someone really cared. According to the families, it was important that Māori PPP providers either had pre-existing, or built an ongoing relationship with them. Whānau talked about their confidence increasing during the recruitment and engagement process. The following story is typical of those told to the Māori research team by a parent introduced to ECE by a Māori PPP provider:

Tui was referred to the PPP Coordinator through her association with PAFT who felt at the time that Tui's daughter was ready to attend ECE. The first contact with the PPP was when the fieldworker visited Tui bringing with her an assessment form to use to help determine what it was Tui was wanting for her daughter. The next contact occurred about a week later, when the fieldworker picked Tui up and they visited three ECE within her area. Once Tui had chosen a centre the fieldworker helped her to apply for a childcare subsidy. The fieldworker accompanied Tui to her daughter's first day at the centre. After Tui's daughter was settled in the Early Childhood centre, the fieldworker visited her at home and at the centre to ensure that everything was okay and that there were no problems. The Coordinator continues to maintain contact with Tui via an occasional phone call.

For Tui, her daughter attending ECE has meant that she is able to get on with her study towards, a National Certificate in Employment Skills which is preparing her to go back into the workforce. Tui felt that this would not have happened without the support of the PPP worker.

Summary

Different approaches were used by providers when contacting families. Pasifika providers in smaller communities approached families informally by door knocking or holding conversations at church. Māori providers similarly used informal approaches, taking advantage of everyday situations and community events (e.g., hui, tangihanga) to begin talking to families about participation in ECE. Multiple visits or conversations with families were usually required before families would engage. As a way of flexibly engaging families and in response to community need, PPP providers helped to establish puna or playgroups. In general, parents appeared to be very satisfied with the contact and communications received from providers.

The expressed knowledge of ECE services varied, both for Māori and Pasifika families, with some families having limited knowledge of ECE services other than that in which they were involved.

Families understood the role of providers as encouraging participation in ECE and appreciated the effort and support provided, particularly in reducing their isolation. In general, they appreciated the interest that had been shown in needs. Good relationships with providers were integral to their participation in ECE.

4.0 Final thoughts and issues for consideration

In this, the final section of the report, we present our final thoughts and issues for consideration.

It is important to note that, due to the limitations associated with the quantitative data sources, it is not possible to make a definitive statement about increased participation due to PPP. What is possible, based on the rich descriptions obtained through the interviews with MOE staff, providers, ECE educators, and families, is to identify factors associated with effective implementation of PPP.

Implementation approaches

A significant strength of PPP was its ability to accommodate the different philosophies of providers and the associated modes of programme delivery. As identified earlier these can be broadly described as a community development approach, as adopted by most Pasifika providers, and the two related approaches, an iwi development approach and an individual family approach as implemented by Māori providers.

Where PPP was being delivered from a ‘by Māori for Māori’, or, ‘by Pasifika for Pasifika’, stance and where providers were also involved in the delivery of an ECE service, this appeared to have implications for the range of ECE services to which families were exposed. In most cases, the associated iwi or community development approaches meant that families were more likely to be introduced to language immersion or bicultural services. While this outcome is understandable considering that community consultation conducted by some providers had identified these types of services as desirable and providers had responded by establishing such services where these did not exist, it also means that these particular service options were more likely to be promoted by providers over other options. This may not represent a problem for these communities. Indeed, families reported being satisfied with the choices presented to them. However, this may be of concern in the future should community needs change. It is therefore suggested that community needs be monitored on an ongoing basis. One means of monitoring this would be to, review, over time, the retention of families in quality ECE in PPP communities.

Some providers were situated within umbrella organizations which held multiple contracts to deliver health and education services for example iwi and church based organizations. While, in general, this appeared to enhance providers’ ability to deliver PPP it was to a large extent dependent on the way in which the umbrella organization operated. Where this worked well was where collaborative relationships existed and staff shared common goals. However, there were examples where despite being part of one of these organisations, the PPP provider worked independently without a lot of support.

Age of children being recruited

This evaluation found a disjunction between PPP policy intent and practice with respect to the age of children being introduced to ECE, with significant numbers of children under three participating. This presents somewhat of a conundrum, because, on the one hand it might be argued that by enrolling children under three, providers are restricting the number of placements available to children in the target age group. On the other hand if the focus is on family involvement in ECE then in order to maximize participation it may make sense to enroll younger siblings. However, as long as ECE services, in areas where PPP is operating, remain limited it is suggested that PPP providers redirect their focus on the target age group.

Factors impacting on the success of PPP

As might be expected, the degree to which PPP was successfully implemented varied, with some of the providers originally selected to participate having to be withdrawn from the evaluation for operational reasons while others struggled to meet their contracted targets. There were a number of possible reasons for this. The first relates to the accuracy, timeliness and relevance of the data in the national database, used to set targets. Another relates to the fact that some providers participating in the evaluation had been contracted to PPP for three or four years and were working in the same communities. It is suggested that perhaps within these communities, there are two categories of non participating families, those who, once identified and given the information and a little encouragement, were readily engaged and another group of families who because of their multiple and or complex needs were less easy to engage. It is possible that in some communities, where PPP had been operating for some time and/or where targets were not being met, that the families in the former category had in the main been identified and placed. This meant that as time passed families who took considerably more time and effort to place predominated. This is because such families often had social issues that needed addressing before they were ready to contemplate participating in ECE. Further, poverty played a significant role in some families' perceptions of their ability to participate in ECE. A number of families reported their inability to meet the costs associated with attending ECE, such as the fees and transport costs. It is anticipated that if this is a significant barrier, then this will be largely ameliorated by the introduction of 20 hours free ECE for all three and four year olds in 2007. However, the evaluation findings point to the need to address such issues so families feel able to make decisions on participation without the restrictions imposed by poverty.

A further issue which may impact on the success of PPP is the definition of what constitutes quality ECE. There is a disparity between the definition of quality as set out in the ECE Strategic Plan and that applying to PPP, with the PPP definition seemingly placing the emphasis on the structural, easily identified aspects of a quality service. As some concerns were expressed about the level of qualifications held by those running some of the ECE services, it would seem to be important that PPP providers are also aware of criteria associated with quality teaching and learning, and these are taken into consideration when placing children.

Finally there is the issue of the lack of availability of places in ECE. Without available ECE capacity, particularly that which is appropriate to families' needs, the goal of furthering ECE participation will be impeded. While puna and playgroup are supporting participation there is also a need for ongoing facilitation by qualified educators to ensure that quality education is achieved.

Positive outcomes

Irrespective of whether PPP providers reached their contracted targets, the qualitative data gathered in the course of this evaluation indicates that, many families in PPP communities who might not otherwise have been are now participating in ECE.

To this end, several providers, in the absence of suitable services in their communities, developed their own puna and playgroups. This was not a contractual requirement other than for the pilot programmes. It appears that this was an initiative which helped the transition into formal ECE, and offered a non-threatening environment in which the socialisation of families could occur, and the value of ECE learnt. However, as these services are predominately parent-led if they are to survive then it is important that ongoing support and advice is available to the families involved.

One of the goals of PPP was to build capacity within communities and the evidence presented in this report shows that this was being achieved in a number of different ways. In addition to involving families in parent-led services, perhaps the most obvious was, where parents who had been introduced to ECE were now training to become ECE educators themselves, or, were studying or in employment. There was evidence of some of these in all PPP participating in the evaluation.

Finally, while it is beyond the brief of this evaluation, it would seem that a costing analysis of the programme could be of value. This is raised as it is currently unclear to what extent this programme represents value for money. In the course of the evaluation it became obvious that significant resources, in terms of time and effort, were being invested by providers in engaging and retaining some families. This often involved frequent protracted visits to the family home and often the provision of transport to and from the early childhood facilities. It would appear that in some areas there may have been cross subsidization occurring, such as sharing of vehicles and other resources. That is, where providers held a number of contracts, that one or more of these might have been supplementing the PPP programme. Thus, on the face of it, it would appear that the financial outlay per enrolment might be greater than it appears. While this is not necessarily a bad thing, it is important that where this occurs, it should be acknowledged as not all providers had the capacity to supplement PPP in this way. It would also seem important to monitor retention over time, that is, to ascertain whether, once families were engaged, the children attended an ECE service regularly until they were enrolled at school. It is the evaluator's view that if the resources expended result in long term retention, then the costs may well be justified.

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APPENDIX A: Interview schedules

Interview schedules:

Interview schedule for MOE staff

Interview schedule for PPP providers

Interview schedule for ECE staff

Interview schedules for families

Interview schedule for MOE – pilot sites

Interview schedule for PPP pilot sites

Interview schedule for ECE (pilot sites)

Interview schedule for pilot site families.

Interview Schedule for MOE staff

Note: This interview schedule is conducted as a semi-structured flexible interview. The questions may be varied depending on the responses of the interviewee. The questions below are guidelines for topics to be covered, not a standardized interview schedule.

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, has been asked to carry out an evaluation of the Promoting Participation Project (PPP). The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operationalisation and Implementation of PPP

We'll begin by looking at the operationalisation of PPP at a national/regional level

1. Can you begin by telling me how you selected the regions for PPP?
2. How did you select PPP providers? (what criteria were used?, were there any issues?)
3. How is the Promoting Participation Project operating in your regions (nationally). (*How is PPP operating at different sites in your region?, How do they identify non-participating children?, profile ECE, place chn, build relationships etc*)
4. What type of support/information does MOE provide for PPP Providers? (Could this be improved in any way?)
5. How does MOE monitor the participation of those children who have been placed in ECE services? (How frequent is this?)
6. Can you comment on the effect of contractual targets on the way PPP providers have carried out PPP? (*Improvements & how?*)

Characteristics of PPP communities

7. Can you briefly tell me about the community/communities in your region? What are the key characteristics: (*Ethnicity?, Socioeconomic?, Levels of employment?, Geographical distances? Etc & ECE services – accessibility and availability?*)

Identifying, engaging, retaining non-participating children

8. What processes or activities work 'best' in *identifying* children not participating in ECE services? (*What works best in engaging/placing, and retaining?*)(*across ethnicities?*)
 - Can you comment on whether these activities replicable across communities?
9. How can these things be strengthened or developed?
10. Other than PPP providers what or who could help with the successful engagement/placement of those Māori and Pasifika children not participating in ECE? (*and retention?*)
11. What do you see as the barriers to *identification* of those Māori and Pasifika children not participating in ECE? (*What are the barriers to engaging/placing and retaining children?*)
12. How can these barriers be addressed? (*and by whom?*)

Outcomes

- 13 Has there been an increase in participation by children in ECE as a result of PPP? (*Ask for data on this by ethnicity*)
 - Are there any factors other than PPP that could have contributed to this increase?
- 14 What is the nature of participation for those children recruited into ECE by PPP? (*Also ask for the data – by ECE service type?, Family type, single parent etc?, Hours of attendance?, Frequency of attendance?, Age of children?*)
- 15 Has the capacity of communities been built as a result of PPP? In what ways has this happened? What evidence is there that capacity is increased?
- 16 Please describe any other outcomes, unexpected or otherwise that you consider PPP has contributed to?
- 17 Do you have any further comment?

Thank you for your time.

Interview schedule for PPP Providers

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, has been asked to carry out an evaluation of the Promoting Participation Project (PPP). The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operationalisation and Implementation of PPP

- 1 Can you tell us how you were selected to be a PPP provider?
 - Why do you think your organisation was selected?
 - Can you briefly tell me about your organisation and the backgrounds of those working for you?
- 2 How is the Promoting Participation Project operating at your site?
 - *How do you go about identifying children not taking part in ECE?*
 - *How did you find out about families?*
 - *How were families approached? (How well did this work?)*
 - *How do you profile ECE services in your region?*
 - *How is information gathered on whether local ECE can accept families?*

Identification of non-participating children

- 3 What works 'best' in *identifying* children (Māori/Pasifika) not participating in ECE services?
- 4 Were there any difficulties in identifying those children not taking part in ECE?
- 5 What were those difficulties?
- 6 How can you as a PPP provider deal with these?
- 7 What would you do differently /what could be done about these issues?

Placement

- 8 Can you tell me how your organisation has networked with local ECE providers?
- 9 How are relationships with local ECE developed and maintained?
- 10 What do you do to support families to enrol in ECE services? (How do you go about placing children in ECE services?)
- 11 Were there any difficulties in identifying those children not taking part in ECE?
- 12 What were those difficulties?
- 13 How can you as a PPP provider deal with these?
- 14 What would you do differently /what could be done about these issues?

Retention

- 15 How do you support (have you supported) families and children staying in ECE services over time?
- 16 What factors contribute to families (Māori/ Pasifika) wanting to continue to participate in ECE services?

- 17 Can you tell me why you think these things are working?
- 18 What is it do you think that stops families wanting to take part?
- 19 Were there any difficulties in retaining families in ECE?
- 20 What were those difficulties?
- 21 How can you as a PPP provider deal with these?
- 22 What would you do differently /what could be done about these issues?

Monitoring/reporting/information & support

- 23 Can you tell me about the monitoring and reporting processes for this project and how that works? (Also ask for comment on adequacy of MOE monitoring?)
- 24 What type of support/information is provided by MOE to your organisation around PPP?
 - *How effective has this been?*
 - *In what ways could support be improved?*
- 25 Can you comment on the effect of contractual targets on the way in which your organisation has carried out PPP?
- 26 Do you consider contractual arrangements be improved? In what way?

Characteristics of PPP communities

27. Can you tell me about the community /communities you operate in? What are the key features?
28. What ECE services are available in your area?
 - *Are they accessible?*
 - *Are they available to all?*
 - *Can you comment on local ECE capacity (e.g. appropriate fit to community)*

Outcomes

Now thinking now about outcomes:

29. Has there been an increase in participation by children in ECE as a result of your work? (*If yes and relevant ask about the characteristics of the families and children – e.g. socioeconomic, & ethnicity (if relevant)*)
 - *Is there anything other than PPP that could have contributed to this increase?*
30. Where were children placed? (*what type of ECE*)
31. Why were they placed there?

Capacity building

32. What difference has PPP made? Has the capacity of the community been built as a result of PPP? In what ways has this happened?
 - *Have there been changes for ECE services? In what way?*
 - *For families? How?*
33. What are the key things about your operation that contribute to the successful participation of families and children in ECE?

34. Can you comment as to whether the way you have carried out the PPP work could be replicated in other communities?

35. Can you tell me about any other outcomes, unexpected or otherwise that you think PPP has contributed to?

Thank you for your time

Interview Schedule for ECE Staff

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, has been asked by the Ministry of Education to carry out an evaluation of the Promoting Participation Project (PPP).

PPP was introduced in 2000 as part of the government's Reducing Disparities package. The aim was to increase participation of Māori and Pasifika children in early childhood education (ECE). In 2002 there was a review of PPP contracting processes which led to changes in the management and contracting of providers. In October 2004 new and existing providers were given new contracts. Providers are now being contracted to:

- Profile ECE services and build collaborative relationships;
- Identify non-participating Māori and Pasifika children;
- Support families to engage with ECE services;
- Support and retain the participation of families and children with ECE services.

The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operationalisation and Implementation of PPP

We'll begin by talking about how PPP operates

1. Can you tell me about your relationship/ any contacts between PPP and your service?
 - How did the PPP provider gather information on your service?
 - What happened when children were placed in your service?
2. How did providers build a relationship with your service/network with other local ECE providers?
 - What has worked well and why?

Identification

3. Do you think there are any issues for PPP providers in identifying Māori/ Pasifika families and children not participating in ECE?
 - If yes - What do you think makes it difficult for PPP providers?
 - How can PPP providers deal with these difficulties?
 - What do you think PPP providers can do differently?
 - If no – why not?

Placement and retention

4. How were families supported by the PPP provider when they were placed in your ECE? What happened?
 - Do you think there were any difficulties?
 - What were those difficulties?
 - What could be done differently /what could be done about these issues?
 - What things would you like to see more of from (*name of provider*)
5. How were families supported by the provider to stay in your service?
 - Do you think there were any difficulties?
 - What were those difficulties?
 - What could be done differently /what could be done about these issues?
 - What things would you like to see more of from people like (*name of provider*)

Monitoring

6. How has the PPP provider monitored the participation of those children who have been placed in your service?
- How has this happened?
 - How has your ECE service monitored participation?

Characteristics of PPP communities

7. Can you tell me about your community? What are the key features?:
8. What other ECE services are offered in your area?
- *Are they accessible?*
 - *Are they available to all?*

Outcomes

Now thinking now about outcomes:

9. Has there been an increase in participation by children in your ECE as a **result of PPP**? (*If yes ask for details about the characteristics of the families and chn – e.g. socioeconomic & ethnicity - if relevant*)
- *Is there anything other than PPP that could have contributed to this increase?*
10. What difference has PPP made? Has the capacity of the community been built as a result of PPP? In what ways has this happened?
- *Have there been changes for your ECE service? In what way?*
 - *For families? How?*
11. What do you see as the key things about the PPP project that support the successful participation of families and children in ECE?
12. .Can you tell me about any other outcomes, unexpected or otherwise that you think PPP has contributed to?

Thank you for your time

Interview Schedule for Fully Participating Families

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, have been asked by the Ministry of Education to carry out an evaluation of the Promoting Participation Project (PPP).

PPP was introduced in 2000 as part of the government's Reducing Disparities package. The aim was to increase participation of Māori and Pasifika children in early childhood education (ECE). In 2002 there was a review of PPP contracting processes which led to changes in the management and contracting of providers. In October 2004 new and existing providers were given new contracts. Providers are now being contracted to:

- Profile ECE services and build collaborative relationships;
- Identify non-participating Māori and Pasifika children;
- Support families to engage with ECE services;
- Support and retain the participation of families and children with ECE services.

The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operation of the PPP project

- 1 Can you tell me about the type of contact that you have had with the PPP provider (*name*)?
 - *Who contacted you?*
 - *How did they find out about you?*
 - *What happened?*
 - *Were there any difficulties?*
 - *What did you like best about the way you were approached to take part in ECE? What sort of things happened that you liked? Why?*

- 2 Has there been any more contact with (*name of provider*) since your child/ren started at ECE?
 - *If not –do you know why not?*
 - *If yes -How has this happened? How often?*
 - *What did you like best about what happened?*
 - *What did you not like?*

Knowledge of ECE in PPP communities

- 3 Can you tell me about the different types of ECE services are offered in your area?
 - *Are they easy to get to?*
 - *Can everyone go to these?*

- 4 Had your family ever been in contact or had anything to do with any other ECE service before? If yes: Which one? What happened?

Things supporting or not supporting participation

5. How useful has the PPP provider been in supporting and keeping your family taking part in ECE? In what ways? Why? Why not?
6. What would help your family to continue to be involved in ECE until (child's name) goes to school? *What could get in the way of this happening?*

Outcomes

7. Can you tell me how long you have been coming to (the ECE)?
How many hours do your child/ren come here and how often?
How are you involved in the ECE?
8. What has the fact that your child takes part in an ECE service meant for you as a family?
What can you do that you did not do before?
What has happened?
9. Can you tell me if there have been any other ways *has (provider name)* has helped your family and child other than those you've talked about already?
10. Have you got anything else you want to share with me about taking part in ECE that you think is important?

Thank you for your time

Interview Schedule for Families Contacted but Who Did Not Participate

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, have been asked by the Ministry of Education to carry out an evaluation of the Promoting Participation Project (PPP).

PPP was introduced in 2000 as part of the government's Reducing Disparities package. The aim was to increase participation of Māori and Pasifika children in early childhood education (ECE). In 2002 there was a review of PPP contracting processes which led to changes in the management and contracting of providers. In October 2004 new and existing providers were given new contracts. Providers are now being contracted to:

- Profile ECE services and build collaborative relationships;
- Identify non-participating Māori and Pasifika children;
- Support families to engage with ECE services;
- Support and retain the participation of families and children with ECE services.

The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operation of the PPP project

- 1 Can you tell me about the type of contact that you have had with the PPP provider (*name*)?
 - *Who contacted you?*
 - *How did they find out about you?*
 - *What happened?*
 - *Were there any difficulties?*
 - *What did you like best about the way you were approached to take part in ECE? What sort of things happened that you liked? Why?*

- 2 Has there been any more contact with (*name of provider*)?
 - *If not –do you know why not?*
 - *If yes -How has this happened? How often?*
 - *What did you like best about what happened?*
 - *What did you not like?*

Knowledge of ECE in PPP communities

- 3 Can you tell me about the different types of ECE services are offered in your area?
 - *Are they easy to get to?*
 - *Can everyone go to these?*

- 4 Had your family ever been in contact or had anything to do with any other ECE service before? If yes: Which one? What happened?

Things supporting or not supporting participation

5. What would help your family to get involved in ECE?

Outcomes

6. Following contact from (*provider's name*) did you get in touch with an ECE service at any time?
 - *If no, why not?*
 - *If yes, which service?*

- *Did you make any visits to the ECE service?*
- *If yes - What happened?*

7. Why did you decide not to participate? What were your reasons?

8. Have you got anything else you want to share with me that you think is important?

Thank you for your time

Interview Schedule for Families who Discontinued Participation in an ECE service.

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, have been asked by the Ministry of Education to carry out an evaluation of the Promoting Participation Project (PPP).

PPP was introduced in 2000 as part of the government's Reducing Disparities package. The aim was to increase participation of Māori and Pasifika children in early childhood education (ECE). In 2002 there was a review of PPP contracting processes which led to changes in the management and contracting of providers. In October 2004 new and existing providers were given new contracts. Providers are now being contracted to:

- Profile ECE services and build collaborative relationships;
- Identify non-participating Māori and Pasifika children;
- Support families to engage with ECE services;
- Support and retain the participation of families and children with ECE services.

The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operation of the PPP project

- 1 Can you tell me about the types of contact that you have had with the PPP provider (*name*)?
 - *Who contacted you?*
 - *How did they find out about you?*
 - *What happened?*
 - *Were there any difficulties?*
 - *What did you like best about the way you were approached to take part in ECE? What sort of things happened that you liked? Why?*

- 2 Has there been any more contact with (*name of provider*) since your child/ren started at ECE?
 - *If not –do you know why not?*
 - *If yes -How has this happened? How often?*
 - *What did you like best about what happened?*
 - *What did you not like?*

Knowledge of ECE in PPP communities

- 3 Can you tell me about the different types of ECE services are offered in your area?
 - *Are they easy to get to?*
 - *Can everyone go to these?*

- 4 Had your family ever been in contact or had anything to do with any other ECE service besides the one you stopped going to? If yes: Which one? What happened?

Things supporting or not supporting participation

- 5 How useful was the PPP provider (*name*) in supporting your family to take part in ECE? In what ways? Why? Why not?
- 6 What would help your family to stay involved in ECE?

Outcomes

6. Why did you stop going to the ECE you were enrolled at?
7. Can you tell me if there have been any other ways *has (provider name)* has helped your family and child other than those you've talked about already?
8. Have you got anything else you want to share with me about your experiences with *(name of provider)* that you think is important?

Thank you for your time

Interview Schedule for MOE - Pilot sites

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, have been asked to carry out an evaluation of the Promoting Participation Project (PPP). The evaluation includes two sites where a different approach is being piloted. The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operationalisation and Implementation of PPP

1. Can you begin by telling me how the sites/organisations were selected to take part in the pilot? (*what criteria were used?*)
2. What is it that PPP pilot providers have been asked to do? (What are they contracted to do?) (*How do they identify non-participating children?, profile ECE, place chn, build relationships, carry out Ahuru Mowai, look at transport solutions etc*)
3. What type of support/information does MOE provide for PPP pilot providers? (Could this be improved in any way?)
4. How does MOE monitor the work of the pilot- PPP providers e.g. monitoring of participation of children who have been placed by the pilot sites, monitoring of Ahuru Mowai?

Characteristics of PPP pilot communities

5. Can you briefly tell me about the community/communities in the pilot regions? What are the key characteristics: (*Ethnicity?, Socioeconomic?, Levels of employment?, Geographical distances? Etc & ECE services – accessibility and availability?*)

Identifying, engaging, retaining non-participating children

6. What processes or activities do you see as working 'best' for the pilot sites in *identifying* children not participating in ECE services? (*What works best in engaging and retaining families?*)
 - Can you comment on whether these activities are replicable across communities?
7. How can these things be strengthened or developed?
8. Other than PPP providers what or who could help with the successful engagement/placement of those Māori and Pasifika children not participating in ECE? (*and retention?*)
9. What do you see as the barriers to *identification* of those Māori and Pasifika children not participating in ECE? (*What are the barriers to engaging and retaining children?*)
10. How can these barriers be addressed? (*and by whom?*)

Outcomes

11. Has there been an increase in participation by children in ECE as a result of the PPP pilots?
 - Are there any factors other than PPP that could have contributed to this increase?
12. What is the nature of participation for those children recruited into ECE by PPP? (*Ask for any data – single parent etc?, Hours of attendance?, Frequency of attendance?, Age of children?*)

- 13 Has the capacity of communities been built as a result of PPP? In what ways has this happened? What evidence is there that capacity is increased?
- 14 Please describe any other outcomes, unexpected or otherwise that you consider the pilot PPP scheme has contributed to?
- 15 Do you have any further comments?

Thank you for your time.

Interview schedule for PPP Providers

Note: This interview schedule is conducted as a semi-structured flexible interview. The questions may be varied depending on the responses of the interviewee. The questions below are guidelines for topics to be covered, not a standardized interview schedule.

- Ensure everyone has received an information sheet
- Explain the purpose of the interview.
- Obtain written consent.
- Let interviewee know how long the interview is likely to take and check that they are ready to begin.
- Discuss confidentiality.
- Ask interviewees whether they have any questions.

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, has been asked to carry out an evaluation of the Promoting Participation Project (PPP), involving both non-pilot sites and pilot-sites. The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operationalisation and Implementation of PPP

- 1 Can you tell us how you were selected to be part of this pilot PPP programme?
 - Why do you think your organisation was selected?
 - Can you briefly tell me about your organisation and the backgrounds of those working for you?
- 2 As a PPP pilot provider what has your organisation been asked to do? (What are you contracted to do?)
- 3 How is the Promoting Participation Project operating at your site?
 - *Identifying children and families not taking part in ECE*
 - *Establishing ECE services/puna in your region*
 - *Supporting and retaining tamariki and ensuring Whānau participation*
 - *Delivery of Ahuru Mowai*
 - *Looking at solutions to transport barriers (Hauraki only)*

Identification of non-participating children

- 4 What works 'best' in *identifying* tamariki not participating in ECE services?
- 5 Were there any difficulties in identifying those children not taking part in ECE?
- 6 What were those difficulties?
- 7 How can you as a PPP provider deal with these?
- 8 What would you do differently /what could be done about these issues?

Puna- establishment and ongoing maintenance

- 9 Can you tell me how your organisation has gone about establishing and maintaining puna?
- 10 Were there any difficulties in either establishing and/or maintaining puna?
- 11 What were those difficulties?

- 12 How can you as a PPP provider deal with these?
- 13 What would you do differently /what could be done about these issues?
- 14 What do you do to support and encourage families to take part in puna/ECE?
- 15 How have you networked and built and maintained relationships with local ECE community based services?

Support and retention

- 16 How do you support (have you supported) families and children staying in ECE over time?
- 17 What factors contribute to families wanting to continue to participate in ECE?
- 18 Can you tell me why you think these things are working?
- 19 What is it do you think that stops families wanting to take part?
- 20 Were there any difficulties in retaining families in ECE?
- 21 What were those difficulties?
- 22 How can you as a PPP provider deal with these?
- 23 What would you do differently /what could be done about these issues?

Solutions to transport barriers (For Hauraki only)

- 24 Can you tell me what things you have done to look at the issue of the transport barriers relating to participation in ECE?
- 25 What solutions do you see as feasible in supporting safe transportation for tamariki and families to take part in ECE?

Monitoring/reporting/information & support

- 26 Can you tell me about the monitoring and reporting processes for this project and how that works? *(Also ask for comment on adequacy of MOE monitoring, as well as their own quality assurance programme?)*
- 27 What type of support/information is provided by MOE to your organisation around PPP?
 - *How effective has this been?*
 - *In what ways could support be improved?*

Characteristics of PPP communities

- 28 Can you tell me about the community /communities you operate in? What are the key features?
- 29 What ECE services are available in your area?
 - *Are they accessible?*
 - *Are they available to all?*
 - *Can you comment on local ECE capacity (e.g. appropriate fit to community)*

Outcomes

Now thinking now about outcomes:

- 30 Has there been an increase in participation by children in ECE as a result of your work?
 - *Is there anything other than PPP that could have contributed to this increase?*

-
- 31 Can you tell me about the effects of delivering Ahuru Mowai in your community? *(has this had an impact on participation in ECE)*
- 32 What do you see as the outcomes related to the establishment and maintaining of puna in your area? (e.g. ECE established, improved ECE, more appropriate ECE for Whānau, better quality ECE etc)

Capacity building

- 33 What difference has PPP made? Has the capacity of the community been built as a result of PPP? In what ways has this happened?
- *Have there been changes for ECE in the area? In what way?*
 - *For families? How?*
- 34 What are the key things about your operation that contribute to the successful participation of families and children in ECE?
- 35 Can you tell me about any other outcomes, unexpected or otherwise that you think PPP has contributed to?

Thank you for your time

Interview Schedule for ECE Staff – Pilot sites

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, has been asked by the Ministry of Education to carry out an evaluation of the Promoting Participation Project (PPP).

PPP was introduced in 2000 as part of the government's Reducing Disparities package. The aim was to increase participation of Māori and Pasifika children in early childhood education (ECE). In 2002 there was a review of PPP contracting processes which led to changes in the management and contracting of providers. In October 2004 new and existing providers were given new contracts. Providers were contracted to:

- Profile ECE services and build collaborative relationships;
- Identify non-participating Māori and Pasifika children;
- Support families to engage with ECE services;
- Support and retain the participation of families and children with ECE services.

In some sites around New Zealand a new approach is being piloted where providers are, in addition to the above criteria, asked to establish and maintain puna, work with families with children under 3 years of age, and look at solutions to barriers such as transport which work against families participating in ECE.

The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operationalisation and Implementation of PPP

We'll begin by talking about how PPP operates

1. Can you tell me about your relationship (contacts) with the PPP provider and your service?
 - What has worked well and why?

Identification

2. Do you think there are any issues for PPP providers in identifying Māori/ Pasifika families and children not participating in ECE?
 - If yes - What do you think makes it difficult for PPP providers?
 - How can PPP providers deal with these difficulties?
 - What do you think PPP providers can do differently?
 - If no – why not?

Support and retention

3. How were families supported by the PPP provider when they were placed in/introduced to your ECE? What happened?
 - Do you think there were any difficulties?
 - What were those difficulties?
 - What could be done differently /what could be done about these issues?
 - What things would you like to see more of from (*name of provider*)
4. How were families supported by the provider to stay in your service?
 - Do you think there were any difficulties?
 - What were those difficulties?
 - What could be done differently /what could be done about these issues?
 - What things would you like to see more of from people like (*name of provider*)

Monitoring

5. How has the PPP provider monitored the participation of those children who have been placed in/come to your service?
 - How has this happened?
 - How has your ECE service monitored participation?

Characteristics of PPP communities

9. Can you tell me about your community? What are the key features?:
10. What other ECE services are offered in your area?
 - *Are they accessible?*
 - *Are they available to all?*

Outcomes

10. Has there been an increase in participation by children in your ECE as a **result of PPP**? (*If yes ask for details about the characteristics of the families and chn – e.g. socioeconomic & ethnicity - if relevant*)
 - *Is there anything other than PPP that could have contributed to this increase?*
13. What difference has PPP made? Has the capacity of the community been built as a result of PPP? In what ways has this happened?
 - *Have there been changes for your ECE service? In what way?*
 - *For families? How?*
14. What do you see as the key things about the PPP project that support the successful participation of families and children in ECE?
15. .Can you tell me about any other outcomes, unexpected or otherwise that you think PPP has contributed to?

Thank you for your time

Interview Schedule for Fully Participating Families – Pilot sites

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, have been asked by the Ministry of Education to carry out an evaluation of the Promoting Participation Project (PPP).

PPP was introduced in 2000 as part of the government's Reducing Disparities package. The aim was to increase participation of Māori and Pasifika children in early childhood education (ECE). In 2002 there was a review of PPP contracting processes which led to changes in the management and contracting of providers. In October 2004 new and existing providers were given new contracts. These providers were contracted to:

- Profile ECE services and build collaborative relationships;
- Identify non-participating Māori and Pasifika children;
- Support families to engage with ECE services;
- Support and retain the participation of families and children with ECE services.

In 2005 the Ministry of Education decided to pilot a new approach where providers were contracted to establish and maintain puna, work with families with children under 3 years of age, and look at solutions to barriers such as transport which work against families participating in ECE.

The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operation of the PPP project

1. Can you tell me about the type of contact that you have had with the PPP provider (*name*)?
 - *Who contacted you?*
 - *How did they find out about you?*
 - *What happened?*
 - *Were there any difficulties?*
 - *What did you like best about the way you were approached to take part in ECE? What sort of things happened that you liked? Why?*
2. What do you know about Ahuru Mowai (Born to Learn)? (If targeted to be part of this programme ask what this involves e.g. visits, group meetings. Also ask what they liked best and if there were any difficulties)
3. Has there been any more contact with (*name of provider*) since your child/ren started going to ECE?
 - *If not –do you know why not?*
 - *If yes -How has this happened? How often?*
 - *What did you like best about what happened?*
 - *What did you not like?*

Knowledge of ECE in PPP communities

4. Can you tell me about the different types of ECE services are offered in your area?
 - *Are they easy to get to?*
 - *Can everyone go to these?*
5. Had your family ever been in contact or had anything to do with any other ECE service before? If yes: Which one? What happened?

Things supporting or not supporting participation

6. How useful has the PPP provider been in supporting and keeping your family taking part in ECE? In what ways? Why? Why not?
7. What would help your family to continue to be involved in ECE until (child's name) goes to school?
 - *What could get in the way of this happening?*

Outcomes

8. Can you tell me how long you have been coming to (the ECE)?
 - *How many hours do your child/ren come here and how often?*
 - *How are you involved in the ECE?*
9. What has the fact that your child takes part in an ECE service meant for you as a family?
 - *What can you do that you did not do before?*
 - *What has happened?*
10. Can you tell me if there have been any other ways (provider name) has helped your family and child other than those you've talked about already?
11. Have you got anything else you want to share with me about taking part in ECE that you think is important?

Thank you for your time

Interview Schedule for Families Contacted but Who Did Not Participate - Pilots

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, have been asked by the Ministry of Education to carry out an evaluation of the Promoting Participation Project (PPP).

PPP was introduced in 2000 as part of the government's Reducing Disparities package. The aim was to increase participation of Māori and Pasifika children in early childhood education (ECE). In 2002 there was a review of PPP contracting processes which led to changes in the management and contracting of providers. In October 2004 new and existing providers were given new contracts. These providers were contracted to:

- Profile ECE services and build collaborative relationships;
- Identify non-participating Māori and Pasifika children;
- Support families to engage with ECE services;
- Support and retain the participation of families and children with ECE services.

In 2005 the Ministry of Education decided to pilot a new approach where providers were contracted to develop provision of ECE in your community.

The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operation of the PPP project

- 1 Can you tell me about the type of contact that you have had with the PPP provider (*name*)?
 - *Who contacted you?*
 - *How did they find out about you?*
 - *What happened?*
 - *Were there any difficulties?*
 - *What did you like best about the way you were approached to take part in ECE? What sort of things happened that you liked? Why?*
- 2 Has there been any more contact with (*name of provider*)?
 - *If not –do you know why not?*
 - *If yes -How has this happened? How often?*
 - *What did you like best about what happened?*
 - *What did you not like?*

Knowledge of ECE in PPP communities

- 3 Can you tell me about the different types of ECE services are offered in your area?
 - *Are they easy to get to?*
 - *Can everyone go to these?*
- 4 Had your family ever been in contact or had anything to do with any other ECE service before? If yes: Which one? What happened?

Things supporting or not supporting participation

9. What would help your family to get involved in ECE?

Outcomes

8. Following contact from (*provider's name*) did you get in touch with an ECE service at any time?
 - *If no, why not?*
 - *If yes, which service?*
 - *Did you make any visits to the ECE service?*
 - *If yes - What happened?*
9. Why did you decide not to participate? What were your reasons?
9. Have you got anything else you want to share with me that you think is important?

Thank you for your time

Interview Schedule for Families who Discontinued Participation in an ECE service.

Introduction

The Centre for Child and Family Policy Research, Te Ara Tupuranga, have been asked by the Ministry of Education to carry out an evaluation of the Promoting Participation Project (PPP).

PPP was introduced in 2000 as part of the government's Reducing Disparities package. The aim was to increase participation of Māori and Pasifika children in early childhood education (ECE). In 2002 there was a review of PPP contracting processes which led to changes in the management and contracting of providers. In October 2004 new and existing providers were given new contracts. These providers were contracted to:

- Profile ECE services and build collaborative relationships;
- Identify non-participating Māori and Pasifika children;
- Support families to engage with ECE services;
- Support and retain the participation of families and children with ECE services.

In 2005 the Ministry of Education decided to pilot a new approach where providers were contracted to develop provision of ECE in your community.

The evaluation will help the Ministry to understand how well PPP is working, what can be achieved by PPP, how PPP outcomes can best be supported, as well as what can be done to make the project more effective. We are particularly interested in your comments on the implementation processes of PPP and your thoughts and opinions on the effectiveness of the project.

Operation of the PPP project

- 1 Can you tell me about the types of contact that you have had with the PPP provider (*name*)?
 - *Who contacted you?*
 - *How did they find out about you?*
 - *What happened?*
 - *Were there any difficulties?*
 - *What did you like best about the way you were approached to take part in ECE? What sort of things happened that you liked? Why?*
- 2 Has there been any more contact with (*name of provider*) since your child/ren started at ECE?
 - *If not –do you know why not?*
 - *If yes -How has this happened? How often?*
 - *What did you like best about what happened?*
 - *What did you not like?*

Knowledge of ECE in PPP communities

- 3 Can you tell me about the different types of ECE services offered in your area?
 - *Are they easy to get to?*
 - *Can everyone go to these?*
7. Had your family ever been in contact or had anything to do with any other ECE service besides the one you stopped going to? If yes: Which one? What happened?

Things supporting or not supporting participation

8. How useful was the PPP provider (*name*) in supporting your family to take part in ECE? In what ways? Why? Why not?
9. What would help your family to stay involved in ECE?

Outcomes

10. Why did you stop going to the ECE you were attending?
11. Can you tell me if there have been any other ways *has (provider name)* has helped your family and child other than those you've talked about already?
12. Have you got anything else you want to share with me about your experiences with *(name of provider)* that you think is important?

Thank you for your time

APPENDIX B: Evaluation questions and sub-questions by objective

Objective 1: What outcomes can be (have been) achieved through PPP	
<ul style="list-style-type: none"> ▪ How effective is of PPP in terms of its objectives: ▪ Has PPP resulted in an increase in Māori Participation in ECE ▪ Has PPP resulted in an increase in Pacific Participation in ECE 	
Evaluation question	Sub questions
1.1 Has there been an increase in Māori participation in ECE in the PPP areas. 1.2 Is there an increase in participation of children in ECE areas where PPP have occurred? <ul style="list-style-type: none"> ▪ For Māori ▪ For Pasifika ▪ Groups other than Māori or Pasifika 	1.1.1 What evidence is there participation has increased? 1.2.1 Is there an increase in ECE participation of: <ul style="list-style-type: none"> ▪ Māori children? ▪ Pasifika children? ▪ Non-Māori and non-Pasifika children? (subjective to data availability) 1.2.2 How does this increase compare with ECE participation in on PPP areas?
1.2 What is the nature of participation for those children recruited into ECE through PPP?	1.2.1 How does participation differ by: <ul style="list-style-type: none"> ▪ ECE service type? ▪ Family type? ▪ Māori children? ▪ Pasifika children? ▪ Hours of attendance etc? ▪ Frequency of attendance? ▪ By age of child?
1.3 Has the capacity of community groups been built through PPP? <ul style="list-style-type: none"> ▪ Providers ▪ Families ▪ ECE services 	1.3.1 In what ways? What evidence is there that capacity is increased for: <ul style="list-style-type: none"> ▪ Providers? ▪ Families? ▪ ECE services? 1.3.2 In what ways? To what extent?
1.4 What are the unintended outcomes of PPP: <ul style="list-style-type: none"> ▪ Children ▪ Families ▪ ECE services ▪ PPP providers ▪ Other 	1.4.1 What other outcomes, unexpected or otherwise has PPP contributed to? For: <ul style="list-style-type: none"> ▪ Children ▪ Families ▪ ECE services ▪ PPP providers

Objective 2 How best can PPP outcomes be supported	
▪ What factors support (or not) the implementation of effective PPP?	
Evaluation question	Sub questions
2.1 How effective are PPP providers in identifying Māori and Pacific children not participating in ECE?	2.1.1 What process or activities work 'best' in identifying children not participating in ECE services for: Māori ; Pacific; and for what reasons? 2.1.3 Are these activities replicable in other communities? If yes, in what situations/contexts; and if no, why not?
2.2 What other factors contribute to the successful identification of Māori and Pacific children not participating in ECE?	2.2.1 How can these be strengthened or enhanced? 2.2.2 Excluding PPP providers, what or who could contribute to the successful identification of Māori and Pacific children not participating in ECE?
2.3 What are the barriers (for PPP providers) to the identification of Māori and Pacific children not participating in ECE services?	2.3.1 How do PPP providers: <ul style="list-style-type: none"> ▪ Address these barriers? ▪ Manage these barriers? 2.3.2 What barriers (to identification) are not able to be addressed by PPP providers? Can they be addressed by other means?
2.4 How effective are PPP providers in supporting the engagement of Māori and Pacific families and children with ECE services?	2.4.1 What process or activities work 'best' in supporting the engagement of families/children with ECE services for Māori ; Pacific; and for what reasons? 2.4.2 Are these activities replicable in other communities? If yes, in what situations/contexts? If no, why not?
2.5 What other factors contribute to the successful engagement of Māori and Pacific children with ECE services?	2.5.1 How can these be strengthened or enhanced? 2.5.2 Excluding PPP providers, what or who could support the engagement of Māori and Pacific children with ECE services?
2.6 What are the barriers to PPP providers supporting the engagement of Māori and Pacific children not participating with ECE services?	2.6.1 How do PPP providers: <ul style="list-style-type: none"> ▪ Address these barriers ▪ manage these barriers 2.6.2 What barriers (to supporting engagement) are not able to be addressed by PPP providers? Can they be addressed by other means?
2.7 How effective are PPP providers in supporting and retaining the participation of Māori and Pacific families and children in ECE services?	2.7.1 What process or activities work 'best' in supporting retention of Māori and Pacific families and children in ECE services? For what reasons? 2.7.2 Are these activities replicable in other communities? If yes, in what situations/contexts and if no, why not?
2.8 What other factors contribute to the successful retention of Māori and Pacific children with ECE services?	2.8.1 How can these be strengthened or enhanced? 2.8.2 Excluding PPP providers, what or who could support the retention of Māori and Pacific children with ECE services?

Objective 3: Is PPP sufficiently broad and flexible to allow implementation in ways that best suit each community?	
Evaluation question	Sub questions
3.1 How is PPP operationalised/implemented? At a national level?	3.1.1 How did MOE select providers? 3.1.2 How were PPP areas selected? 3.1.4 What information/support do providers receive from MOE? <ul style="list-style-type: none"> ▪ How effective has this been? ▪ In what ways could this support be improved?
3.2 How is PPP operationalised/implemented? At local level	3.2.1 How is the PPP operating at different sites? 3.2.2 How have non-participating children been identified? 3.2.3 What processes/means do providers use to profile ECE services in their region? 3.2.4 How is the placement of children in ECE carried out? 3.2.5 What activities or processes have been used to build relationships with local ECE providers? 3.2.6 How is information gathered on the capacity of local ECE to accept/enrol families?
3.3 What are the characteristics of PPP communities?	3.3.1 What are the key characteristics of communities where PPP has been implemented? <ul style="list-style-type: none"> ▪ Ethnic composition? ▪ Socioeconomic? ▪ Availability and accessibility of ECE services?
3.4 How is participation monitored and reported?	3.4.1 How has participation been monitored? <ul style="list-style-type: none"> ▪ By MOE? ▪ By Providers? 3.4.2 How has PPP (including participation) been reported on? What sort of information has been reported on? By: <ul style="list-style-type: none"> ▪ Providers? 3.4.3 What effect has the focus on contractual targets had on the operationalisation of PPP? 3.4.4 In what ways could contracting arrangements be improved?
3.4 (How) has participation of families and children in ECE services been sustained over time?	3.4.1. What type of activities/processes have been used to support families to engage with ECE services? 3.4.2 In what way could these be improved?
3.5 What has contributed to their retention?	3.5.1 What ways or means have been used to support ongoing participation by families over time?