ECE Participation Programme Evaluation

Delivery of ECE Participation Initiatives: Baseline report

Report Commissioned by
Ministry of Education

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We appreciated very much the assistance of the participation initiative providers who generously welcomed us into their setting, enabling us to undertake interviews and organising families for us to interview. Participation initiative providers filled in questionnaires and distributed them to their coordinators. They took questionnaires to families within their initiative and supported them to complete the questionnaires. Their assistance enabled us to gather very useful information and to undertake in-depth interviews. We valued the willingness of families to take time to complete the questionnaire and to talk openly about their experiences and views, for it is ultimately the voices of families and children that will tell us how well the initiatives are working.

Within the Wilf Malcolm Institute of Educational Research, Maretta Taylor undertook coding and data capture. Bronwen Cowie was a member of the EWG (with authors of this report) and provided critical feedback, and Margaret Drummond undertook formatting of the instruments and report.
Executive summary

This report is of the first stage of an evaluation of the Ministry of Education’s (MOE’s) Participation Programme. This programme comprises of a package of six initiatives to increase participation in ECE in target communities where the greatest number of children without prior ECE participation live. The aim of the programme is to increase the number of children participating in quality ECE by 3,500 by the year 2014, and to prioritise communities with the greatest number of children who do not have prior ECE participation. Funding of $91.760 million was allocated for participation initiatives in Budget 2010.

MOE data shows lower participation rates for Māori and Pasifika children compared with European/Pākehā children nationally and in the target communities. There are proportionally more children aged zero to four years in the most deprived localities in New Zealand,¹ and children from these localities also have lower rates of ECE participation. Ka Hikitia sets a target for prior ECE participation of 95% Māori children starting school. Currently the figure is 90.3%. The Pasifika Education Plan targets for the period 2009—2012 had been reached in 2011 when data was gathered for the project. However, the Pasifika Education Plan targets for Pasifika children were revised for the period 2013-2017 and aim for the proportion of Pasifika children starting school who have participated in ECE to increase from 86.2% in 2012 to 98% in 2016. Priority children are deemed to be non-participating Māori and Pasifika children, and children from low socioeconomic communities.

The participation initiatives are:

- **Engaging Priority Families (EPF)**—intensive support programmes for 3 and 4-year-olds and their families, aimed at leading to enrolment in ECE, regular participation in ECE, support for learning at home and a successful transition to school.

- **Supported Playgroups (SP)**—certificated playgroups, with regular support from a kaimanaaki/playgroup educator in areas with low participation.

- **Flexible and Responsive Home-based Services (FRHB)**—aim to either expand existing services and community agencies into home-based ECE delivery or to transition informal care arrangements into licensed and certificated ECE environments.

- **Identity, Language, Culture and Community Engagement (ILCCE)**—support packages providing identity, language and culture professional support for clusters of services that have available child spaces and are not responsive to their community.

- **Intensive Community Participation Programme (ICPP)**—community-led participation projects established to address the specific reasons children are not participating in ECE.

- **Targeted Assistance for Participation (TAP)**—grants, incentives and partnership opportunities to help establish new services and child spaces in those communities where new child places are needed most and are not being created quickly enough.

The participation initiatives are being introduced in waves over 2010 to 2014. The targeting of particular initiatives within target areas is based on a needs assessment and local MOE knowledge.

¹ Based on comparison between Ministry of Health deprivation index and 2006 Census population data.
This evaluation report covers only the first stage of the Participation Programme, focused on initiatives started in 2010/2011. The main focus of Stage 1 was to examine how the participation initiatives were working early in their development to address barriers to participation and increase ECE participation for Māori children, Pasifika children and children in low socioeconomic areas where initiatives were operating. The initiatives were in their early stages and were not expected to have large numbers of children enrolled in them. There were limitations on the number of families who could be involved.

Later stages will include the initiatives that were started in 2010/2011 as well as others starting later. This report provides a baseline picture of participation against which change can be gauged, and of barriers and enablers to participation, whether and how the participation initiatives are reducing barriers, and the effectiveness of the programme to date. Subsequent stages will review and build on previous stages and shift in focus. Stage 2 will focus on responsiveness to the needs of the child and their family/whānau, responsiveness to child and family language and culture, and parent engagement in ECE. Stage 3 will examine ECE service quality, services engaging parents in ECE learning and services making connections between the child’s ECE learning and home learning. Stage 4 will evaluate how the Participation Programme and initiatives have contributed to learning outcomes for children and a successful transition to school. The role of MOE will be examined in each stage.

The evaluation is intended to support MOE decision-making and planning. It is being led by an Evaluation Working Group of MOE officials and University of Waikato staff. In this baseline stage, data was collected from five sources:

- MOE data on enrolments;
- interviews with MOE national and regional staff;
- a survey of all participation initiative providers and interviews with staff from a sample of each type of initiative;
- a survey of families engaged in the initiatives and interviews with families from three of the initiatives (SP, EPF, FRHB); and
- interviews with parents attending the Pasifika Festival and Polyfest whose children do not participate in ECE.

Key findings are as follows.

MOE’s provisional data shows the targets and number of children enrolled in ECE through five participation initiatives, their ethnicities and the age groups in which they fell. TAP is not included because few of the building programmes had been competed in these early stages. Already over 1,000 children have been enrolled in ECE through the initiatives within the target communities. The intended children and communities are largely being reached, although targets for overall enrolments have not yet been achieved.

Child enrolments as of December 2011 were predominantly through two of the five initiatives. Over half of all enrolments (52%) were in Supported Playgroups with the EPF initiative accounting for 38%.
Table 1: Overall enrolments in ECE from five ECE participation initiatives at December 2011

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Targets for 1st year</th>
<th>Enrolments</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>SP</td>
<td>415</td>
<td>535</td>
<td>128</td>
</tr>
<tr>
<td>EPF</td>
<td>875</td>
<td>394</td>
<td>45</td>
</tr>
<tr>
<td>ILCCE</td>
<td>40</td>
<td>88</td>
<td>202</td>
</tr>
<tr>
<td>ICCPPSP</td>
<td>700</td>
<td>7*</td>
<td>1</td>
</tr>
<tr>
<td>HB1</td>
<td>160</td>
<td>4*</td>
<td>2.5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2190</strong></td>
<td><strong>1028</strong></td>
<td><strong>47</strong></td>
</tr>
</tbody>
</table>

Note: Includes children currently enrolled and those who have exited to go to school or another ECE; excludes children registered in EPF but not yet enrolled in an ECE service.

* These numbers are very low because these 2 initiatives, ICCPP and HB1 had just started in 2011.

There were 394 enrolments in EPF of predominantly 3 and 4-year-olds, a group most likely to benefit from ECE. The 535 enrolments in SP were mainly aged zero to two years. Enrolments in SP and ILCCE had surpassed targets. EPF which requires much time to recruit families into ECE fell short of targets as expected. HB1 was still very new and the ICCPP initiatives had just completed their scoping phases. It was therefore too early to evaluate them in terms of changes in participation. There was an evident connection between the design of the initiatives, the timing for the development of each and the participation outcomes.

Overall the total number of Māori enrolments was higher than enrolments for other ethnicities, being nearly one and a half times greater than Pasifika enrolments, seven times greater than those of European/Pākehā and nearly nine times greater than Asian enrolments. EPF and SP each contributed around half of the total Māori enrolments, and half of Pasifika enrolments. Therefore the initiatives are reaching the target families (non-participating Māori and Pasifika, and socioeconomic). However, some MOE regional staff expressed caution about targeting too tightly—it could mean that some children who could benefit from the additional support provided by these initiatives to engage in ECE would not attend ECE prior to starting school. MOE staff felt that Māori children would be more likely to live outside designated areas than Pasifika children. Rural areas with wide geographic coverage often do not meet criteria but nevertheless families have need of support to access ECE and other services.

Community data and local knowledge are key factors in determining the nature and placement of initiatives, according to MOE staff. This is because community knowledge offers a locally informed perspective not only about local families (who may have recently moved into an area), but also about what provision might suit and support those families. This provision may not be those initiatives currently available through the Participation Programme. Some participation initiative providers and some families spoke of a mismatch between the initiative and what they thought should be offered, such as an integrated ECE centre instead of a Supported Playgroup and a centre-based ECE service instead of home-based delivery.

Often the main barriers to participation did not reside within the “priority family”, but within the ways in which the early years settings were organised, funded and provided. Main barriers identified by MOE staff, providers and families, prioritised in order of frequency, were:

- cost, high waiting lists and lack of transport;
- provision that does not meet needs of families in terms of hours and location, or is not responsive to culture and language aspirations; and
- personal barriers including shyness, lack of confidence, past negative educational experiences, family wanting to be “under the radar” of notice from government agencies.
Providers said that many families faced multiple barriers. Barriers of cost and unresponsiveness made it not possible for EPF providers to place children in some existing services, although some EPF and the ILCCE providers were able to work with services to encourage more flexible provision to meet family needs and offer different fee structures.

Providers used a range of strategies to find families and tailored the strategies to the distinctive composition of each community. All identified that they needed to have knowledge of the cultures, languages and beliefs of the “priority” families, and the community organisations, social and health services, schools and ECE services in each community. Providers emphasised the value of being in the community, knowing the community well, and being able to communicate with families in their home language. One of the strong tools in recruiting families was said to be “working collaboratively with other agencies that are working intensively with families in the home”, including health services. Connections were made with community organisations attended by families such as marae and local churches. Events attended by families, including sporting and cultural events and play days at the local school, were forums where families were recruited. Parents surveyed were usually directly invited by the provider to participate.

EPF was addressing the widest range of barriers. EPF providers knew the families well, spent time with them and were trusted. Their relationship enabled them to play a brokering role in terms of access to ECE, cost, transport, motivation and supporting families in housing and welfare issues. Indirectly, improving a family’s living situation can help address barriers to participation; for example, improving a family’s financial situation through cheaper housing can help address a cost barrier. EPF providers knew the ECE services in the community well and were able to help families work out what would suit them and support them to visit and enrol. The Early Learning Plan which all EPF providers were required to develop with the family was of some benefit in setting goals for children’s learning, but several parents who were interviewed and surveyed were looking for more direct support on activities they could do to help their child learn at home, whether or not they attended ECE. They wanted this from the EPF provider, which some were offering, and/or the ECE service their child was attending.

SP offered access to an ECE service that supported children’s socialisation, and gave advice with parenting. SP are valuable in communities where parents are wanting to stay with their children. Providers who offered health, welfare or educational services and had close relationships with organisations offering these services were able to provide wider family support. Parents whom we interviewed commented on the value of learning for themselves from participation in SP in areas as diverse as literacy, administration skills and parenting. However, some parents and providers pointed out limitations to the SP model, including the quality of playgroup education. Suggestions were made for SP to be just one of a range of ECE options provided from an ECE centre so that parents might choose the service most suited to them or move from a playgroup to a teacher-led ECE service. SP can play a valuable role as a stepping stone to moving into a licensed ECE service.

FRHB is generally provided close to where families live and can reduce barriers of accessibility to ECE and transport. FRHB educators and parents could be matched to ensure the provision was culturally suitable. Providers said that families who wanted their child in a home setting liked FRHB, and that some families who wanted to be “under the radar” of notice from government agencies also preferred FRHB. However, one of the small number of families interviewed (3) would have preferred a centre-based option but could not access this because of cost and waiting lists. Several of the seven FRHB providers who were surveyed said another type of provision was preferred by families, and two of the families would have liked parenting support from the coordinator themselves in their own home rather than support going to the caregiver.
The ILCCE initiative had started only four months before the evaluation data was gathered. Through a needs analysis and professional development, providers were working with specific centres to improve cultural responsiveness. Centres were selected by MOE on the basis that they were a cluster in a community with significant numbers of children not participating in ECE and had spare capacity, but those approached were not obliged to participate. Initial scoping was done to gain perspectives from community, families, staff and management. Providers who knew the community and delivered other initiatives in the community were able to use feedback from families in their ILCCE work. Providers’ focus included helping centres to make their environment a welcoming place for local families, professional development around language and culture, and supporting changes to centre operation and policies to reduce costs for families.

TAP-funded provision was also new. Building projects were not yet under way or barely completed. The main participation barrier the provision may address is access to local ECE provision in a community where participation is low. TAP projects are designed to be responsive to community needs and offer opportunity for new forms of provision to meet needs.

ICPP scoping had been undertaken in three areas, and the scoping providers gathered valuable information on barriers to participation, discussed above, and possible solutions. The next phase of the evaluation will show how ideas from the scoping are used in community action plans. A general sentiment was that a community consultation model would be valuable for all policy development and implementation. Through better planning processes throughout communities, MOE could match supply with demand and work more effectively. The range of Participation Initiatives allows some different solutions. However, planning also involves consideration of existing service operation and the mix of ECE services in each community being matched to need. Participants supported the idea of ECE services serving as community hubs for early education and a range of family support services, as is being provided through some TAP grants.

Overall, participation initiatives that were based in the community, had access to or provided a range of services (family support, ECE, cultural) and had well formed community connections, were able to use their networks to access families, support them in family issues and engage them in discussions about ECE. This community connectedness was key to the successful recruitment of families into ECE. Providers who were contracted to offer a number of initiatives could offer choice for families and use resources and knowledge gained in one initiative with another. The successful providers had a holistic view of families, seeing them not only as parents of preschoolers. Two characteristics of participation initiative staff stood out as critical. One is the “professionalism” and approachability of staff. The second is the cultural fit between the staff and families. This suggests that collectively within the participation initiative staff team, there needs to be a sound professional base, a range of expertise and cultural fit with families.
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1. Introduction

Ministry of Education ECE Participation Programme

As part of Budget 2010, the Minister of Education announced that the government would be implementing a package of new initiatives to increase participation in ECE in target communities with low ECE participation rates. Priority children are Māori and Pasifika children and children from low socioeconomic communities.

The ECE Participation Programme sits within:

- Government priorities for early education: Building opportunity for all, valuing families and reaching higher education standards;
- a Ministry of Education Statement of Intent (SOI) priority: “Increasing opportunity for children to participate in quality early childhood education”;
- Ka Hikitia—Managing for Success target of 95% of Māori children participating in ECE before school by 2012;
- the Pasifika Education Plan target of 2000 more Pasifika 2–4-year-olds attending ECE by 2012; and
- the New Zealand Disability Strategy themes of addressing diversity of need and promoting participation by disabled people in all areas of life.

In 2011, the Participation Programme included six individual participation initiatives, each in early stages of implementation.

Engaging Priority Families. These are intensive support programmes for 3 and 4-year-olds and their families, aimed at leading to enrolment in ECE, regular participation in ECE, support for learning at home and a successful transition to school. There are currently 21 Engaging Priority Families initiatives in Tamaki, South Auckland, Wairoa, Whangarei, Waitakere, Hamilton, Waitomo and Te Kuiti.

Supported Playgroups. Supported Playgroups are certificated playgroups, with regular support from a kaimanaaki/playgroup educator in areas with low participation. There are currently 29 Supported Playgroups in target communities in South Auckland, Tamaki, Kawerau, Huntly/Ngaruawahia and Whangarei.

Flexible and Responsive Home-based. There are two models of the Flexible and Responsive Home-based initiative. They aim to either expand existing services and community agencies into home-based ECE delivery or to transition informal care arrangements into licensed and certificated ECE environments. There are currently four Flexible and Responsive Home-based initiatives in Papakura and Tamaki.

Identity, Language, Culture and Community Engagement. These support packages provide identity, language and culture support for clusters of services that have available child spaces and are not responsive to their

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2 The Pasifika Education Plan targets for Pasifika children were revised for the period 2013-2017 and aim for the proportion of Pasifika children starting school who have participated in ECE to increase from 86.2% in 2012 to 98% in 2016.
community. There are currently three *Identity, Language, Culture and Community Engagement* initiatives in Tamaki, Waitakere and Kaikohe.

**Intensive Community Participation Programme.** These community-led participation projects are being established to address the specific reasons children are not participating in ECE. This is where substantial changes and cross-agency links are needed. There are currently three *Intensive Community Participation Programmes* in Tamaki, Waitakere and Kaikohe.

**Targeted Assistance for Participation.** This funding (of which there is three levels) will help to establish new services and child spaces by providing grants, incentives and partnership opportunities in those communities where new child places are needed most and are not being created quickly enough. Fifteen *Targeted Assistance for Participation* (TAP) grants were awarded in the past year.

The package of participation initiatives aims to strengthen priority families’/whānau/fānau knowledge of the benefits of early learning and provide opportunity for children to achieve “strong learning foundations including those required to support their future engagement in education. Strong learning foundations encompass: learning to respond to challenge and change; gaining knowledge of language and cultural tools; understanding individual rights and responsibilities; and building responsive and reciprocal relationships” (Ministry of Education, 1996).

The Ministry of Education (MOE) funded an evaluation of the Participation Programme to take place over four years. A team from the Wilf Malcolm Institute of Educational Research, University of Waikato, was selected to work with MOE to undertake Stage 1 of the evaluation and subsequent stages as agreed. An Evaluation Working Group (EWG) of MOE staff and University of Waikato researchers is leading the evaluation. The EWG is responsible for the high-level evaluation objectives and evaluation plans, with further roles and responsibilities being assigned during the evaluation.

**Evaluation overview**

The purpose of the evaluation is both summative in gauging the “success” of the Participation Programme approach and outcomes, and formative in guiding development.

The overall evaluation approach needs to reflect the innovative and trial nature of the programme. The evaluative work needs to provide formative analysis that can be used to guide the on-going development of interventions and support the qualitative analysis of the success of the programme’s strategic approach and outcomes for children/tamariki, families/whānau and communities. (Ministry of Education, RFP, 2011)

The EWG met several times in 2011, to discuss the intervention logic model developed by MOE to show the logic being applied to children achieving educational success through family involvement in the Participation Programme. The intervention logic model is given at the end of this introduction. The model framed the four stages of the evaluation and the focus within each stage. The 2nd, 3rd and 4th stages will review and build on baseline information from the previous stage, and extend investigation into new child, family and community outcomes that are of interest, alongside aspects of MOE’s role and way of working. The evaluation will provide summative information about how well the individual initiatives and overall programme are working to achieve intended outcomes. It is intended to generate understanding across target communities where the initiatives have been operating of why and how outcomes have occurred. Formative information will be helpful for refining and improving the initiatives and the overall programme, and understanding and developing the role of MOE and working relationships.
The first stage of the evaluation, which is the subject of this report, examines how the participation initiatives are working early in their development to address barriers to participation, and increase ECE participation for Māori children, Pasifika children and children in low socioeconomic areas where initiatives are operating. It offers some baseline data on parent engagement and participation in ECE and involvement in children’s learning of parents participating in the initiatives, and of responsiveness of the initiatives to family needs. Feedback from this stage will be used mainly to refine the individual initiatives and their delivery, and to strengthen working relationships within the communities where the initiatives are operating.

- **Stage 2** will take place from April 2012 to March 2013. It will review and build on Stage 1 findings. A focus in stage 2 will be gathering data on responsiveness to the needs of the child and their family/whānau, responsiveness to child and family language and culture, and parent engagement in ECE. The role of MOE, including its use of change identifiers, community involvement and interagency collaboration, will be examined. Working papers will be produced on responsiveness and the role of MOE.

- **Stage 3** takes place from April 2013 to March 2014. It will review and build on Stage 2 findings. The focus in stage 3 is on intermediate outcomes that are associated with learning outcomes for children. It will examine ECE service quality, services engaging parents in ECE learning, and making connections between the child’s ECE learning and home learning. MOE’s community approach, including the influence of a geographical approach, targeting and the packaging of initiatives, will be examined. Working papers will be produced on identity, language and culture, parent involvement and engagement with early learning, and community-level change.

- **Stage 4** takes place from April 2014 to May 2015. As for previous stages, it will review and build on the previous stage findings. Stage 4 focuses on evaluating how the Participation Programme and initiatives have contributed to learning outcomes for children and a successful transition to school. Working papers will be produced on learning outcomes for children/tamariki, provision of quality ECE, transition to school, Ka Hikitia goals and Pasifika Education Plan goals.

The evaluation will provide evidence at each stage of the levels reached in ECE participation and addressing barriers to participation, and on child, family and community outcomes associated with the focus for that stage. These levels and any changes in levels that occur over time will be related to the participation initiatives and the Participation Programme. Analysis of actions taken by and the views of MOE officials and participation initiative providers, and views and experiences of parents who are supported through the initiatives, will be used to explain why change has occurred or not occurred. The information from each stage may be used by MOE to amend or develop the programme and initiatives.

We began by collecting survey and interview data from MOE officials, participation initiative providers and parents in October 2011.
Evaluation questions

High-level evaluation questions are related to ECE participation, outcomes for children/tamariki, family/whānau and communities, provision of quality ECE, and the role of MOE. In essence these aim to find out about how well and in what ways the Participation Programme has contributed to enhancing each of these outcomes, and the role played by MOE in developing and delivering effective participation initiatives.

Table 2: Evaluation objectives, questions and stage at which data will be collected

<table>
<thead>
<tr>
<th>Objective 1: ECE participation for Māori children, Pasifika children and children in low socioeconomic communities. Data gathered in each phase, with in-depth focus in Stage 1 and Stage 2</th>
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<tbody>
<tr>
<td><strong>Evaluation questions</strong></td>
</tr>
<tr>
<td>1.1 How effective has the participation programme been in raising participation in high quality ECE?</td>
</tr>
<tr>
<td>1.2 How well do the initiatives and their underpinning approach work individually and together to address the main barriers to participation in areas where there is currently low ECE participation?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Objective 2: Improved learning outcomes for participating children/tamariki and family/whānau. Data gathered in Stages 2, 3 and 4. Some data in Stage 1 on parent engagement in ECE and involvement in child’s education will be gathered.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evaluation questions</strong></td>
</tr>
<tr>
<td>2.1 Have learning outcomes for participating children been improved?</td>
</tr>
<tr>
<td>2.2 How well do the initiatives support parents’ engagement in ECE?</td>
</tr>
<tr>
<td>2.3 How well do the initiatives support parents’ involvement with children’s education?</td>
</tr>
<tr>
<td>2.4 Have the initiatives been responsive to family needs for ECE?</td>
</tr>
<tr>
<td>2.5 Have each of the initiatives and the participation programme overall addressed issues of identity, language and culture in the communities where the initiatives are being undertaken?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Objective 3: Improved responsiveness to participating communities. Key focus in Stage 2. Data gathered in Stages 2, 3 and 4.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evaluation questions</strong></td>
</tr>
<tr>
<td>3.1 Have the initiatives been responsive to community needs for ECE?</td>
</tr>
<tr>
<td>3.2 How does the community involvement support the development of ECE services responsive to the needs of the local community, in areas where there is currently low participation?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td><strong>Evaluation question</strong></td>
</tr>
<tr>
<td>4.1 Have the participation initiatives contributed to quality ECE being delivered?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Objective 5: MOE approach. Data gathered in each stage.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evaluation question</strong></td>
</tr>
<tr>
<td>5.1 How did the role MOE played contribute to developing effective participation initiatives in areas of low ECE participation? Was the implementation of initiatives effective?</td>
</tr>
</tbody>
</table>
Layout of report

To answer the evaluation questions for Stage 1, the intervention logic model and research-based literature were used to develop measures to gauge levels of participation and barriers to participation. In subsequent stages, further measures and indicators will be developed to gauge ECE service quality and responsiveness, family engagement in early childhood education, family involvement with children’s education, child learning outcomes and successful transition to school.

Levels and changes in levels on participation and barriers to participation will be tracked over each of the four stages of the evaluation. Levels and changes in levels on other outcomes will be a focus in the 2nd, 3rd and 4th stages: parent and community engagement with ECE, responsiveness to needs of the child and their family/whānau, responsiveness to child and family language and culture (Stage 2); ECE service quality, and services engaging parents in ECE learning and making connections between the child’s ECE learning and home learning (Stage 3); learning outcomes for children and a successful transition to school (Stage 4).

Levels and changes in levels on outcomes will be analysed against

- the approach, role and actions taken by MOE and participation initiative providers;
- characteristics of children (ethnicity, family income levels); and
- participants’ explanations of the role played by the initiatives.

The evaluation questions will be addressed using both quantitative and qualitative measures.

The report starts with an outline of the methodology used. Chapters 3 and 4 present findings from the data gathered to address evaluation questions for Stage 1. Chapter 3 provides a baseline picture using MOE national data of the nature of participation for children in areas where initiatives are operating, set against targets from Ka Hikitia and the Pasifika Education Plan. It provides a description of the location of initiatives and the reasons for targeting particular areas. The enrolment of children in each initiative at this early stage in their implementation is discussed. Chapter 4 examines the main barriers and enablers to participation, and whether and how the initiatives are reducing barriers to participation. In Chapter 5, we provide a qualitative account of the nature and delivery of initiatives, barriers being addressed and how the initiatives are supporting engagement in ECE education. In Chapter 6, the discussion and conclusion, we synthesise the findings to address the main evaluation questions for this stage:

- How effective has the participation programme been in raising participation in high quality ECE?
- How well do the initiatives and their underpinning approach work individually and together to address the main barriers to participation in areas where there is currently low ECE participation?
- How well do the initiatives support parents’ engagement in ECE? How well do the initiatives support parents’ involvement with children’s education?
- How did the role MOE played contribute to developing effective participation initiatives in areas of low ECE participation?
Figure 1: Child achieved diagram

Child achieves early educational success

- Family values educational achievement and engages with their child's education
- Child and family effectively transition to compulsory schooling
  - Indicator
- School welcomes and values families and children and their ECE experience

Child is effectively engaged in ECE and achieves strong learning foundations

- Family understands and supports children's learning in ECE and at home
- Service provides quality ECE that meets the child's learning needs
  - Indicator
- Provides a high standard of education

Child is participating at a beneficial level

- Family prioritises ECE participation
- Service welcomes and values the child and their family/whānau
- Service is responsive to the needs of the child and their family/whānau

- Meets family and whānau requirements for quality of experience and education
- Meets child and family culture, language needs
- Meets family and whānau requirements for quality of premises and facilities

Child is enrolled

- The child's family values and seeks participation opportunities
- Service is accessible to the child and their family

- Service is affordable
- Service is available in suitable location
- Service is available suitable hours

Family/whānau well being (income/housing/health adequacy/relationships) enables early learning

Communities support ECE provision
2. Methodology

Purpose of the evaluation

The purpose of the evaluation is to

- determine the value of initiatives in increasing ECE participation;
- assess the effectiveness of the strategic approach and the individual initiatives;
- assess the extent to which the intended outcomes of the programme are being achieved; and
- build an understanding of the factors that have contributed to achieving change for children/tamariki, families/whānau and communities. (Ministry of Education (MOE), RFP, 2011, p. 3)

The evaluation is intended to support MOE planning and decision-making. As noted previously, the main focus in Stage 1, the first year of the evaluation, is on understanding more about barriers and enablers to participation, whether and how the participation initiatives are reducing barriers, and the effectiveness of the programme to date.

Table 3 sets out the Stage 1 evaluation questions, sub-questions, data sources and analysis.
### Table 3: Stage 1 evaluation questions, sub-questions, data sources and analysis

<table>
<thead>
<tr>
<th>Evaluation question</th>
<th>Sub questions</th>
<th>Data sources and analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 How effective has the participation programme been in raising participation in high quality ECE?</td>
<td>1.1.1 What is the nature of participation for children in areas where initiatives are operating? (e.g. enrolment, hours of attendance, regularity of attendance in 20-hours ECE for 3 and 4-year olds, starting age, duration of attendance).  1.1.2. Has there been an increase in ECE participation of - Māori children in areas where initiatives are operating? - Pasifika children in areas where initiatives are operating? - Children in low socioeconomic areas where initiatives are operating.</td>
<td>Documentation and data  MOE statistical data, participation initiative provider documentation.  Interviews  MOE regional staff.  Ka Hikitia national targets—95% Māori new entrant children participated in ECE by year 2012.  Pasifika Education Plan targets—increased numbers of 2 to 4 year-olds in licensed ECE (national target for 2012: 2,000 more than 2008 (9,103)).  Analysis  Quantitative data will be used to analyse percentages in reaching national targets for participation for Māori and Pasifika, and shifts in percentages participating in ECE in target communities, analysed by characteristics of children.</td>
</tr>
<tr>
<td>1.2 How well do the initiatives and their underpinning approach work individually and together to address the main barriers to participation in areas where there is currently low ECE participation?</td>
<td>1.2.1 What is the nature of the participation initiatives and their underpinning approach?  1.2.2 What is the role of MOE?  1.2.3 What are the main barriers and enablers to participation?  1.2.4 What barriers do the participation programme initiatives reduce? Which initiatives? How?  1.2.5 What barriers are the initiatives unable to reduce? How can the participation programme and participation initiatives be strengthened or enhanced?</td>
<td>Documentation  Programme design and selection documentation and reporting.  Surveys  Participation initiative providers, parents engaged in initiatives, services in initiatives.  Interviews  MOE regional staff.  Participation initiative providers.  Participating parents and whānau.  Non-participating parents/whānau.  Analysis  Barriers to participation will be identified through thematic analysis of survey and interview data from each source. Information will be used to inform programme design and refine initiatives.</td>
</tr>
<tr>
<td>2.2 How well do the initiatives support parents’ engagement in ECE? How well do the initiatives support parents’ involvement with children’s education?</td>
<td>2.2.1 What is the nature of the engagement and participation in ECE of parents engaged in the initiatives?  2.2.2 What is the nature of involvement with their children’s learning of parents engaged in the initiatives?  2.2.3 In what ways and to what extent have the initiatives strengthened or enhanced these aspects?</td>
<td>Surveys  Parents engaged in initiatives.  Interviews  Focus groups of parent engaged in the initiatives.  Analysis  Judgements will be made about parent involvement with children’s learning, and parent explanation of role played by initiatives.</td>
</tr>
<tr>
<td>5.1 How did the role MOE played contribute to developing effective participation initiatives in areas of low ECE participation? Was the implementation of initiatives effective?</td>
<td>5.1.1 What is the nature of the participation initiatives, and of MOE and community involvement in development and delivery of these (including use of change identifiers, community involvement, inter agency collaboration)?  5.1.2 How effective has the implementation of the initiatives been? In what ways could this be improved? For - services; - families; and - providers.</td>
<td>Interviews  MOE national and regional staff.  Documents  MOE publications about the Participation Initiatives.</td>
</tr>
</tbody>
</table>

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3 The Pasifika Education Plan targets for Pasifika children were revised for the period 2013-2017 and aim for the proportion of Pasifika children starting school who have participated in ECE to increase from 86.2% in 2012 to 98% in 2016.
A table with the objectives, evaluation questions and sub-questions for all four years of the evaluation is set out in Appendix 1.

**Evaluation design**

The evaluation design had to gather meaningful information about ECE participation of children from Māori, Pasifika and low-income families related to the participation initiatives and the overall Participation Programme. Information needed to be tracked over four years to see what changes and outcomes were occurring for children and families. The evaluation needed to be able to relate any changes found to the nature of the initiatives and MOE and community involvement in development and delivery of them.

One limitation is what we could report in terms of overall participation. MOE’s data shows the number of children enrolled in ECE through five participation initiatives, their ethnicities and the age groups in which they fell. But some initiatives were at an early stage so would not have been expected to have large numbers of children enrolled, and no TAP building programmes had been competed in the early stage so no numbers were available.

A second limitation is our access to parents. We were reliant on providers to help us contact families with whom they were working. We asked providers to distribute a survey and support parents to complete it and to invite parents to participate in an interview. Since the initiatives were new, providers did not always want to pass on an invitation to recently recruited parents to take part in these tasks. Providers who were working with non-participating families were not willing to interrupt their developing relationships by asking parents if they would be prepared to participate in the study. We had to find other ways to contact families whose children were not participating in ECE, and of those we spoke to, none had been involved in a participation initiative. We were able to find out from them what were the main barriers to participation, but not whether the initiatives would have made a difference in addressing barriers.

**Data collection**

Data was gathered from November 2011 to April 2012. University of Waikato researchers shared one day’s training about the purpose and background of the evaluation, interviewing and the interview schedules. Two researchers went together to undertake the first interviews. In general Māori researchers interviewed Māori parents, and Pasifika researchers interviewed Pasifika parents.

**Baseline MOE statistical data on participation and provision.** Statistical data was collected from MOE to provide an overall baseline picture of participation and the initiatives in all the areas in which initiatives were operating, as follows:

- MOE national data about enrolments and prior participation in ECE before starting school by year and ethnicity;
- MOE information concerning the targeting and provision of participation initiatives; and
- MOE data gathered about families participating in the initiatives by ethnicity.

**Baseline survey data on operation of initiatives, barriers and challenges.** All participation initiative providers, a sample of parents from SP, SPP, EPF and FRHB, and a sample of participation initiative service coordinators for EPF, HB, SP, SPP and ILCCE were surveyed to gather comprehensive evidence in the targeted communities of the nature and operation of initiatives, barriers and enablers to participation and challenges.
A survey of 38 participation initiative providers examined how the initiative finds out about and addresses barriers to ECE participation and encourages participation, the nature of these barriers, issues, challenges and recommendations. The survey was distributed electronically, and 29 of 38 responded.

A survey of 587 parents who were involved in Supported Playgroups, Engaging Priority Families and Home-based initiatives asked about:

- barriers they have experienced with respect to ECE participation;
- why and how they became involved in the participation initiative, whether and how the initiative addressed barriers to ECE participation, their engagement with the initiative and their views of the initiative; and
- any recommendations.

A paper survey was distributed through direct contact with participation providers, who encouraged parents to complete the survey quickly at the time of distribution. A total of 587 family surveys were sent to providers to distribute, collect and return: 510 of these were sent to EPF providers, 70 to Supported Playgroup providers, 13 to Home-based providers and four to a TAP3 provider. Of those returned, 56 were from families involved in the EPF initiative, 28 from Supported Playgroup initiatives and two from families involved in Home-based services. Overall this shows a 14.7% response rate with EPF responding at a level of 11%, Supported Playgroups at 40%, home-based at 15.4% and no response from the TAP3 families. This low response rate was mainly because providers preferred to take a face-to-face approach to distributing the questionnaire and were not able to contact many of the families in their initiative within the required timeframe. In addition, many initiatives were new, so that asking families to complete a questionnaire about the initiatives at this early stage was inappropriate. What we can report are the findings from a fairly small number of families (86) who completed the questionnaire.

A survey of 36 coordinators in services supported by participation initiatives i.e. Supported Playgroups, ILCCE cluster services, TAP services and Home-based services asked about:

- why and how they became involved in the participation initiative, barriers to ECE participation, whether and how the initiative addressed barriers to ECE participation, and their views of the initiative; and
- any recommendations.

Many providers at this stage in the projects did not have people working as coordinators. Thirteen coordinators responded to this survey: a response rate of 36%. Many coordinators had also filled in the provider survey and were asked not to fill in two surveys as this would have double counted them.

The demographic characteristics of families completing the survey and participating in interviews are set out below.
Table 4: Family numbers, ethnicities and income levels by participation initiatives

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Number of family surveys (n=86)</th>
<th>Number of children in families (n=138)</th>
<th>Ethnicities of children*</th>
<th>Income</th>
<th>Interviewed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engaging Priority Families (EPF)</td>
<td>56</td>
<td>95</td>
<td>NZ European = 5</td>
<td>Under $20,000 = 20</td>
<td>8</td>
</tr>
<tr>
<td>Total No of children in initiative = 821</td>
<td></td>
<td></td>
<td>Maori = 53</td>
<td>$20,000–29,000 = 14</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Pasifika = 46</td>
<td>$30,000–49,000 = 7</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Other = 16</td>
<td>$50,000–69,000 = 2</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>No response = 4</td>
<td>$70,000 and over = 0</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not sure = 11</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>No response = 5</td>
<td></td>
</tr>
<tr>
<td>Supported Playgroups including pilots (SP &amp; SPP)</td>
<td>28</td>
<td>39</td>
<td>NZ European = 8</td>
<td>Under $20,000 = 7</td>
<td>3</td>
</tr>
<tr>
<td>Total No of children in initiative = 894</td>
<td></td>
<td></td>
<td>Maori = 19</td>
<td>$20,000–29,000 = 6</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Pasifika = 16</td>
<td>$30,000–49,000 = 4</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Other = 6</td>
<td>$50,000–69,000 = 0</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>No response = 1</td>
<td>$70,000 and over = 2</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not sure = 6</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>No response = 0</td>
<td></td>
</tr>
<tr>
<td>Flexible and Responsive Home-based (FRHB)</td>
<td>2</td>
<td>4</td>
<td>NZ European = 4</td>
<td>Under $20,000 = 1</td>
<td>1</td>
</tr>
<tr>
<td>Total No of children in initiative = 6</td>
<td></td>
<td></td>
<td>Maori = 0</td>
<td>$20,000–29,000 = 1</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Pasifika = 0</td>
<td>$30,000–49,000 = 0</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Other = 0</td>
<td>$50,000–69,000 = 0</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>No response = 0</td>
<td>$70,000 and over = 0</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not sure = 0</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>No response = 0</td>
<td></td>
</tr>
<tr>
<td>*May identify with more than one ethnicity so totals will not equal number of children</td>
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<td></td>
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</tbody>
</table>

The overwhelming majority of people completing the survey were not in paid employment. For those involved with the EPF initiative, this was 46 respondents (82.1%), 23 (82.1%) for SP and both of the Home-based respondents. For those EPF respondents who were in paid employment, eight were in full-time employment and two in part-time. None of the SP respondents indicated they were in full-time work although two were in part-time and three did not respond. Most indicated they were receiving some kind of benefit. For EPF this was 46 (82.1%), Supported Playgroups 20 (71.4%), and both the Home-based respondents. The main benefits being claimed by EPF and SP respondents were Family Support and the Domestic Purposes Benefit. The number of non-indicative responses for this question was quite high with eight (14.3%) of the EPF responses indicating they didn’t know or not responding. Two of the SP questionnaires had no response to the question.

These patterns were also evident in responses to study being undertaken. Within the EPF respondents, 46 (82.1%) were not engaged in study, four were engaged in part-time study, five in full-time study and one did not respond. Within the SP respondents, 22 (78.6%) were not engaged in study, one was engaged in part-time and two in full-time study. Three did not respond. Neither of the respondents to the Home-based survey was currently in study.

Education levels and qualifications for the survey respondents were low with 30 (53.6%) of EPF respondents having no formal qualifications at all. This was 11 (39.3%) for Supported Playgroup and one for Home-based. The most common level of qualification for the EPF group was Year 11 (School Cert, NCEA Level 1) with nine (16%), six with Year 12 certificate (6th form, NCEA Level 2) three with Year 13 (7th form, bursary, NCEA Level 3), with the highest level of qualification being a certificate, apprenticeship or diploma, held by four people. Two indicated another type of qualification (not specified) and two did not respond. For SP this was two with Year 11 (School Cert, NCEA Level 1) four with Year 12 certificate (6th form, NCEA Level 2) two with Year 13 (7th form,
bursary, NCEA Level 3). Two held a certificate, apprenticeship or diploma and in contrast to the EPF group, three held a university degree with one having a doctorate. There were four non-responses.

**Baseline qualitative interview data on initiatives, Ministry role and parent/whānau experiences.** MOE national office staff from the Participation Programme implementation team and regional staff from Northern, Central North, Central South and Southern regions were invited to take part in an interview. The researchers followed advice from MOE about whom to interview in relation to each initiative and implementation in regions.

A sample of participation initiative providers and a sample of parents (participating in the initiatives) were invited to take part in an interview. The sample of participation initiative providers and parents were drawn from initiatives within the four regions where most are located. The sample of participation initiative providers for in-depth interview included at least two providers for each initiative, with the exception of the ICCP initiatives. The different and distinct nature of the ICCP initiatives, and the small number, means that interviews are needed at each stage with each ICCP initiative.

Providers were chosen by MOE and University of Waikato project leaders. They were purposively selected so as to gain the greatest possible coverage of each of the six different initiatives, the different target groups (Māori, Pasifika and low socioeconomic) and localities within large urban settings, suburban settings and rural areas. The sample included organisations which had responsibility for multiple initiatives of a different type and those with responsibility for a single type of initiative.

Table 5 sets out the type of organisation, locality characteristics, initiatives provided and number of interviews undertaken.
<table>
<thead>
<tr>
<th>Provider</th>
<th>Locality characteristics</th>
<th>Initiatives provided</th>
<th>Provider interview</th>
<th>Participating parent interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charitable trust</td>
<td>Pohutukawa&lt;br&gt; Ethnicity: 43.5% Pasifika, 37.9% European, 19.4% Māori, 11.3% Asian, 1.2% Mid Eastern/South American/African, 4.4% Other&lt;br&gt; Median income: $17,450&lt;br&gt; No formal quals: 38.9%&lt;br&gt; Unemployment: 10.4%</td>
<td>ICPP EPF</td>
<td>Yes (2)</td>
<td>Yes (4)</td>
</tr>
<tr>
<td>Pasifika health organisation</td>
<td>Punga&lt;br&gt; Ethnicity: 41.1% European, 27.6% Māori, 22.3% Pasifika, 17% Asian, 4.3% Mid Eastern/South American/African, 5% Other&lt;br&gt; Median income: $19,500&lt;br&gt; No formal quals: 37.2%&lt;br&gt; Unemployment: 9.9%</td>
<td>TAP1</td>
<td>Yes (1)</td>
<td>N/A</td>
</tr>
<tr>
<td>Charitable trust</td>
<td>Pohutukawa&lt;br&gt; Ethnicity: 43.5% Pasifika, 37.9% European, 19.4% Māori, 11.3% Asian, 1.2% Mid Eastern/South American/African, 4.4% Other&lt;br&gt; Median income: $17,450&lt;br&gt; No formal quals: 38.9%&lt;br&gt; Unemployment: 10.4%</td>
<td>HB</td>
<td>Yes (2)</td>
<td>No</td>
</tr>
<tr>
<td>Education trust</td>
<td>Nikau&lt;br&gt; Ethnicity: 59% European, 16.1% Asian, 15.3% Pasifika, 13.1% Māori, 1.6% Mid Eastern/South American/African, 8.4% Other&lt;br&gt; Median income: $26,100&lt;br&gt; No formal quals: 38.1%&lt;br&gt; Unemployment: 5.7%</td>
<td>ICPP</td>
<td>Yes (1)</td>
<td>N/A</td>
</tr>
<tr>
<td>Private home-based provider</td>
<td>Kahikatea&lt;br&gt; Ethnicity: 61.1% European, 26.6% Māori, 10.3% Pasifika, 8.2% Asian, 1.1% Mid Eastern/South American/African, 8.9% Other&lt;br&gt; Median income: $26,500&lt;br&gt; No formal quals: 32.2%&lt;br&gt; Unemployment: 7%</td>
<td>HB</td>
<td>Yes (1)</td>
<td>1 HB grandmother and father (together)</td>
</tr>
<tr>
<td>Private Māori training organisation</td>
<td>Suburb of Rata&lt;br&gt; Ethnicity: 71.5% Māori, 36.1% European, 5.9% Pasifika&lt;br&gt; Median income: $14,400&lt;br&gt; No formal quals: 51.7%&lt;br&gt; Unemployment: 20.5%</td>
<td>SP (2)</td>
<td>Yes (1)</td>
<td>1 SP grandmother and 2 mothers</td>
</tr>
<tr>
<td>Iwi-based health trust</td>
<td>Totara&lt;br&gt; Ethnicity: 60.1% European, 42.9% Māori, 3.1% Pasifika, 1.6% Asian, 0.3% Mid Eastern/South American/African, 9.5% Other&lt;br&gt; Median income: $26,500&lt;br&gt; No formal quals: 32.2%&lt;br&gt; Unemployment: 7%</td>
<td>ICPP EPF</td>
<td>Yes (1)</td>
<td>N/A</td>
</tr>
<tr>
<td>Provider</td>
<td>Locality characteristics</td>
<td>Initiatives provided</td>
<td>Provider interview</td>
<td>Participating parent interviews</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>--------------------------</td>
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</tr>
<tr>
<td>National teacher education provider</td>
<td>Kowhai</td>
<td>ILCCE</td>
<td>Yes (1)</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Ethnicity: 54.2% Pasifika, 22.9% European, 19.9% Māori, 15.3% Asian, 0.5% Mid Eastern/South American/African, 2.6% Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Median income: $20,460</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No formal qals: 36.4%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Unemployment: 9%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Private home-based provider</td>
<td>Suburb of Karaka</td>
<td>TAP3</td>
<td>Yes (1)</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Ethnicity: 56.7% European, 30.7% Māori, 6.6% Pasifika</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Median income: $19,900</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No formal qals: 27.1%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Unemployment: 9.1%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Māori professional consultancy</td>
<td>Karaka</td>
<td>ILCCE</td>
<td>Yes (3)</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Ethnicity: 65.5% European, 20.1% Māori, 4.2% Pasifika, 10.4% Asian, 1.5% Mid Eastern/South American/African, 10.6% Other</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Median income: $24,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No formal qals: 22.5%</td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Unemployment: 6.8%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Iwi-based organisation</td>
<td>Kauri</td>
<td>TAP3</td>
<td>Yes (1)</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Ethnicity: 68% European, 31.7% Māori, 2.7% Pasifika</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Median income: $20,900.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No formal qals: 31.9%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Unemployment: 6.5%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Iwi-based organisation</td>
<td>Totara</td>
<td>EPF</td>
<td>Yes (1)</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Ethnicity: 61.2% European, 35.8% Māori, 4.3% Pasifika, 4.4% Asian, 0.4% Mid Eastern/South American/African, 10.8% Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Median income: $23,900</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No formal qals: 28.5%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Unemployment: 6.5%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pasifika consultancy</td>
<td>Pohutukawa</td>
<td>ICPP</td>
<td>Yes</td>
<td>Yes 6 families</td>
</tr>
<tr>
<td></td>
<td>Ethnicity: 37.9% European, 43.5% Pasifika, 19.4% Māori, 11.3% Asian, 1.2% Mid Eastern/South American/African, 4.4% Other</td>
<td></td>
<td></td>
<td>3 x EPF 3 x SP</td>
</tr>
<tr>
<td></td>
<td>Median income: $17,450</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No formal qals: 38.9%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Unemployment: 10.4%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Māori trust</td>
<td>Rimu</td>
<td>EPF</td>
<td>Yes</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Ethnicity: 59% European, 16.1% Asian,15.3% Pasifika, 13.1% Māori, 1.6% Mid Eastern/South American/African, 8.4% Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Median income: $26,100</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No formal qals: 36.1%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Unemployment: 5.7%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Figures taken from 2006 census data. Some averages have been calculated to better reflect initiative areas.
The University of Waikato researchers sought advice from participation initiative advisers about who to interview for each initiative. In the case of multiple initiatives, more than one person usually needed to be interviewed to allow a focus on that initiative.

Interviews focused on the following information.

- **Interviews with MOE staff** and examination of MOE documentation to analyse the role of MOE, what information MOE has gained about barriers, how it has gained this information and how it has built the information into the design of initiatives to address specific needs, issues, challenges and recommendations.

- **Interviews with participation initiative providers** to examine in depth how the initiative addresses identified barriers and encourages participation, issues, challenges and recommendations.

- **Interviews with 14 parent/whānau** who were involved in a participation initiative about:
  - barriers they have experienced with respect to ECE participation;
  - why and how they became involved in the participation initiative, whether and how the initiative addressed barriers to ECE participation, their engagement with the initiative and their views of the initiative (probing from survey);
  - expectations families have of ECE for the child and for themselves;
  - their understanding about the effect of ECE;
  - their needs and aspirations for their children with respect to ECE, for themselves and for their home language and culture;
  - how well ECE services meet these needs and aspirations;
  - their involvement with their child’s education;
  - the desired state of ECE for the future; and
  - any recommendations.

We had originally expected parents would like to be interviewed in a focus group but in fact they preferred individual interviews. Parents were given a $20 Pak’nSave voucher in appreciation of their time and costs in participating.

- **Interviews with 13 parents** of children not participating in ECE. Interviews canvassed
  - barriers they have experienced with respect to ECE participation;
  - their experiences and views of the participation initiative;
  - their knowledge of ECE (knowledge of services in their area and understanding of what the purpose is);
  - views of the importance of ECE;
whether parents have aspirations and needs for their children in respect to ECE. In respect to their home language and culture. For themselves in respect to ECE. And if so, what these are;

whether there are barriers to participation in ECE and if so what. Whether a decision was made not to participate or why participation was discontinued; and

what factors would support families to participate in ECE.

We had hoped to recruit a sample of parents who had been invited by a provider to participate in ECE, but had decided not to. However, providers were reluctant to help us find such participants since they were often still working with these families. To capture the viewpoints of some non-participating families, researcher Telesia Kalavite and interpreter Orita Orenda Kalavite spent time interviewing families at both annual festivals, Pasifika and Polyfest, in Auckland. Our researcher was based at stalls within the festivals and actively approached people to see if they fitted the criteria for a “non-participating” family.

The Pasifika Festival, held on 9–10 March 2012, is an Auckland City Council-run festival celebrating Pacific culture including performances, stalls and cuisine and attracts more than 100,000 visitors. Our researcher was based at the TeachNZ stall and spoke to 10 families with children ranging in age from six months to four years who were not attending early childhood education. One of these families was disregarded in the analysis as they were not currently New Zealand residents.

Polyfest, held 14–17 March 2012, is hosted and attended by high schools from around New Zealand and the Pacific. It is a cultural and performing arts event celebrating Pacific culture and heritage. At this event, the researchers were based at the University of Waikato stall and interviewed three families with children not participating in ECE between the ages of two and four.

Parents were given a $20 Pak’nSave voucher in appreciation of their time and costs in participating.

A short background questionnaire asked for basic demographic information from both parent groups.

A copy of each evaluation instrument is available from the Wilf Malcolm Institute of Educational Research, University of Waikato on request.

Analysis
This is a baseline stage. The information gathered is largely descriptive, offering an analysis of levels of ECE participation, provision and the participation initiatives at the start of the Participation Programme in all localities, and providing qualitative data from different viewpoints about experiences of the participation initiatives and their rollout. It provides valuable analysis of parent views and experiences. The qualitative data is analysed thematically. In terms of the intervention logic model it will start to build a picture of family knowledge, information and motivation to participate in ECE, and service accessibility and responsiveness.

Analysis of baseline levels of enrolment and prior ECE participation rates are done in relation to the Ka Hikitia and Pasifika Education Plan targets and by the following child characteristics:

- Māori ethnicity;
- Pasifika ethnicity; and
- child age.
3. National picture of ECE Participation and Participation Initiative enrolments

MOE statistics on enrolments and participation prior to school entry can show national shifts over the period of the Participation Programme since data is collected from all licensed ECE services and families of school-aged children. This data would be expected to incorporate any family whose child had come into ECE because of participation initiatives, and into services using participation initiatives. The numbers reached for each initiative and the Participation Programme are relevant and were evaluated against the targets set.

In this chapter we provide a baseline national picture of MOE data on enrolments and on participation prior to school entry, set against targets from Ka Hikitia and the Pasifika Plan. This data is descriptive and will be used to gauge any changes in future years. By setting this picture against information that is collected from MOE, providers, parents and services in this evaluation, we can analyse some reasons for any change associated with uptake of opportunities offered by the initiatives.

We then go on to provide a description of the location of initiatives and the reasons for targeting particular areas. The enrolment of children in each initiative at this early stage in their implementation is discussed.

The chapter concludes with a short summary.

Participation—national picture

The number of enrolments of children aged two to four are provided here to indicate how they have changed from 2007 to 2011 and to measure them against the Pasifika Education Plan target for Pasifika children (2012). The figures provide a baseline for analysis against uptake of participation initiatives in subsequent evaluation years. Enrolments have increased from 2007 to 2011 for all ethnic groups, but at a faster rate for Asian children (37.5%), Pasifika children (29.9%) and Māori children (24%). The Pasifika Education Plan target was revised for the period 2013-2017 and aims for the proportion of Pasifika children starting school who have participated in ECE to increase from 86.2% in 2012 to 98% in 2016.

Table 6: Enrolments of children aged two to four in ECE by ethnic group, year and Pasifika Education Plan target

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Māori</td>
<td>26,654</td>
<td>27,921</td>
<td>28,908</td>
<td>30,974</td>
<td>33,046</td>
<td>24</td>
<td>11,103</td>
</tr>
<tr>
<td>Pasifika</td>
<td>8,510</td>
<td>9,103</td>
<td>9,492</td>
<td>10,253</td>
<td>11,061</td>
<td>29.9</td>
<td>11,103</td>
</tr>
<tr>
<td>European/Pākehā</td>
<td>91,552</td>
<td>92,110</td>
<td>91,455</td>
<td>96,291</td>
<td>96,357</td>
<td>5.2</td>
<td>11,103</td>
</tr>
<tr>
<td>Asian</td>
<td>9,162</td>
<td>10,293</td>
<td>10,943</td>
<td>11,594</td>
<td>12,596</td>
<td>37.5</td>
<td>11,103</td>
</tr>
<tr>
<td>Other/unknown</td>
<td>4,137</td>
<td>4,856</td>
<td>6,542</td>
<td>4,591</td>
<td>4,853</td>
<td>17.3</td>
<td>11,103</td>
</tr>
<tr>
<td>Total</td>
<td>140,015</td>
<td>144,283</td>
<td>147,340</td>
<td>153,743</td>
<td>157,913</td>
<td>12.78</td>
<td>11,103</td>
</tr>
</tbody>
</table>

Enrolments are not able to give an accurate measure of participation because they double or triple count children who attend more than one ECE service. As well, enrolments make more sense when expressed as a percentage of
the age group’s population. The most accurate population-based measure of participation is prior participation of new school entrants. However, these figures have their own limitations in not being able to capture younger children who come into ECE through participation initiatives until these children reach school age.

While ECE prior participation rates are lower for Māori and Pasifika children, growth for these groups has been higher than for other groups. Prior participation rates have increased 2.6 percentage points for Pasifika children, from 83.6% in 2007 to 86.2% in 2012, while for Māori children prior participation rates have increased 1.5 percentage points, from 88.8% to 90.3%, over the same period. By comparison, the overall participation rate grew from 97% in 2007 to 97.9% in 2012. Nevertheless, growth would be expected to be faster for groups that are not close to the threshold for participation. The increase was well short of the Ka Hikitia target for Māori children for 2012.

Table 7: Prior participation rates in ECE of children starting school by ethnic group, year and Ka Hikitia target

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Māori</td>
<td>88.8</td>
<td>88.7</td>
<td>89.6</td>
<td>89.3</td>
<td>90</td>
<td>90.3</td>
<td>95</td>
</tr>
<tr>
<td>Pasifika</td>
<td>83.6</td>
<td>84.4</td>
<td>85.1</td>
<td>85.9</td>
<td>86.1</td>
<td>86.2</td>
<td></td>
</tr>
<tr>
<td>European/Pākehā</td>
<td>97</td>
<td>97.2</td>
<td>97.3</td>
<td>97.7</td>
<td>97.8</td>
<td>97.9</td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td>96</td>
<td>95.3</td>
<td>95.6</td>
<td>96.3</td>
<td>95.9</td>
<td>95.6</td>
<td></td>
</tr>
<tr>
<td>Other ethnic groups</td>
<td>92.7</td>
<td>92.9</td>
<td>93.9</td>
<td>95.7</td>
<td>95.5</td>
<td>95.7</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>93.6</td>
<td>93.6</td>
<td>94</td>
<td>94.4</td>
<td>94.7</td>
<td>94.7</td>
<td></td>
</tr>
</tbody>
</table>

Proportionately more children starting school without prior ECE participation were located in the most deprived territorial authorities and Auckland wards. These territorial authorities were the Far North, Whangarei, Hamilton, Rotorua, Gisborne, Lower Hutt and Christchurch. The Auckland wards were Manukau, Manurewa, Mangakiekie-Tamaki and Waitakere. Deprivation was gauged using the NZ Deprivation Index 2006 (see the Ministry of Health website: http://www.health.govt.nz/publication/dhb-maps-and-background-information-atlas-socioeconomic-deprivation-new-zealand-nzdep2006).

Māori children starting school without prior ECE participation were living in a range of territorial authorities and Auckland wards, while most Pasifika children without ECE participation were located in the Auckland wards.
ECE enrolments through initiatives

MOE’s provisional data shows the targets and number of children enrolled in ECE through five participation initiatives, their ethnicities and the age groups in which they fell. TAP is not included because few of the building programmes had been competed in these early stages. The first ECE participation initiatives began in the second half of 2010, but many started after that date. Already over 1,000 children have been enrolled in ECE through them. Child enrolments as of December 2011 were predominantly through two of the five initiatives. Over half of all enrolments (52%) were in Supported Playgroups with the EPF initiative accounting for 38%.

Table 8: Overall enrolments in ECE from five ECE participation initiatives at December 2011

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Targets for 1st year</th>
<th>Enrolments</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>SP</td>
<td>415</td>
<td>535</td>
<td>128</td>
</tr>
<tr>
<td>EPF</td>
<td>875</td>
<td>394</td>
<td>45</td>
</tr>
<tr>
<td>ILCCE</td>
<td>40</td>
<td>88</td>
<td>202</td>
</tr>
<tr>
<td>ICPPSP</td>
<td>700</td>
<td>7*</td>
<td>1</td>
</tr>
<tr>
<td>HB1</td>
<td>160</td>
<td>4*</td>
<td>2.5</td>
</tr>
<tr>
<td>Total</td>
<td>2190</td>
<td>1028</td>
<td>47</td>
</tr>
</tbody>
</table>

Note: Includes children currently enrolled and those who have exited to go to school or another ECE; excludes children registered in EPF but not yet enrolled in an ECE service.

* These numbers are very low because these 2 initiatives, ICPP and HB had just started in 2011.

Overall the total number of Māori enrolments was higher than enrolments for other ethnicities, being nearly one and a half times greater than Pasifika enrolments, seven times greater than those of European/Pākehā and nearly nine times greater than Asian enrolments. EPF and SP each contributed around half of the total Māori enrolments and half of Pasifika enrolments.

Table 9: Overall enrolments in ECE for three ECE participation initiatives (EPF, SP & ILCCE) by ethnicity, at December 2011

<table>
<thead>
<tr>
<th>Initiative*</th>
<th>Māori n (%)</th>
<th>Pasifika n (%)</th>
<th>Asian n (%)</th>
<th>European/Pākehā n (%)</th>
<th>Unknown/Other n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SP</td>
<td>253 (49%)</td>
<td>194 (55%)</td>
<td>49 (84%)</td>
<td>43 (57%)</td>
<td>3 (13%)</td>
</tr>
<tr>
<td>EPF</td>
<td>234 (45%)</td>
<td>152 (43%)</td>
<td>2 (3%)</td>
<td>5 (7%)</td>
<td>1 (4%)</td>
</tr>
<tr>
<td>ILCCE</td>
<td>28 (5%)</td>
<td>6 (2%)</td>
<td>7 (12%)</td>
<td>27 (36%)</td>
<td>20 (83%)</td>
</tr>
<tr>
<td>Total</td>
<td>515</td>
<td>352</td>
<td>58</td>
<td>75</td>
<td>24</td>
</tr>
</tbody>
</table>

*No ethnicity-related data was available for other initiatives.

Overall, the greatest number of enrolments in ECE participation initiatives were for children aged zero to two years, with 413 (40%) of the overall total falling into this age group. The SP initiative contributed the highest number to these enrolments with 371 (90%) of this age group identified as enrolling in SP.

In comparison, predominantly three and four-year-olds were enrolled in ECE services through the EPF initiative. This is not surprising since this age group is the target for EPF. Three hundred and sixty-nine of the total 394 enrolments (94%) were three to four years old. All HB1 and ICPPSP enrolments were two years or younger. A quarter of ILCCE enrolments were in the youngest age group, another quarter was aged three years and nearly half had no age group identified.
<table>
<thead>
<tr>
<th>Initiative</th>
<th>0–2 Years</th>
<th>3 Years</th>
<th>4 Years</th>
<th>5 years</th>
<th>Unknown</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPF</td>
<td>13</td>
<td>246</td>
<td>123</td>
<td>1</td>
<td>11</td>
<td>394</td>
</tr>
<tr>
<td>SP</td>
<td>371</td>
<td>91</td>
<td>63</td>
<td>2</td>
<td>8</td>
<td>535</td>
</tr>
<tr>
<td>ICPPSP</td>
<td>5</td>
<td>2</td>
<td>7</td>
<td>35</td>
<td>88</td>
<td></td>
</tr>
<tr>
<td>HB1</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>ILCCE</td>
<td>413</td>
<td>364</td>
<td>193</td>
<td>4</td>
<td>54</td>
<td>1028</td>
</tr>
</tbody>
</table>

On average, children enrolled in ILCCE attended an ECE service for longer hours than children enrolled in ECE through other initiatives. Children enrolled through EPF attended between 11 and 20 hours, with children enrolled in SP attending no more than nine hours on average.

Enrolments in SP and ILCCE have surpassed their targets. Enrolments in ECE from EPF and HB1 fall well short of targets. These initiatives have not been operating for long, and big intakes of children would not be expected. MOE staff and providers told us that much work is needed to recruit families and encourage ECE participation.

All the information coming back is that there is a lot of front end work providers need to do in terms of engagement because ECE isn’t necessarily the first step. That might be Step 4 or 5. Some of the reports coming back from providers [are] that working for one child in the target community can take up to three to six weeks to see any change and often there is none. They might not come back.

(MOE regional staff)

In the Ministry we measure success based on targets. At the moment, none of our groups are meeting the targets because the targets are [after only six months]. Will they meet their full term targets? We think so. Do we think they’re successfully engaging with their communities? Absolutely, most definitely. (MOE regional staff)

**Provision and nature of initiatives**

The ECE Participation Programme seeks to increase participation in ECE particularly among Māori and Pasifika children, and children from low-socio-economic communities. Areas are chosen where the greatest numbers of children starting school without prior ECE participation live. The programme aims to enrol 3,000–3,500 additional children in ECE by 2014. Allocation of initiatives is decided through consideration of a ranking of priority Census Area Units (CAUs) to ascertain where the largest numbers of non-participating children are together with consideration of local knowledge and of the barriers to participation, and which initiative might best address these.

MOE’s Participation Programme Governance Group makes final decisions.

MOE staff recognise that using local knowledge (not just data) is necessary for making good decisions. This requires MOE staff to tap into community networks. For example, in Auckland the best source of local knowledge about children that are not attending ECE is said to be community leaders. Using local knowledge also means that nationally provided MOE data can be tested. For instance in one small town, MOE staff found the local school had filled in prior participation rates questions inaccurately. “It’s important to marry hard data with soft” (MOE regional staff).
The ECE Participation Programme is targeted to areas where the greatest numbers of children starting school without prior ECE participation live. It aims to enrol 3,000–3,500 additional children in ECE by 2014.
The Participation Programme trials a range of initiatives designed to address varying barriers to ECE participation and, because of the newness of these initiatives and the need to ensure that the programme reached the largest numbers of non-participating children, it was decided to target these initiatives to where the largest numbers of non-participating children were located.

MOE regional staff expressed caution about targeting too tightly—it could mean that some children who could benefit from the additional support provided by these initiatives to engage in ECE would not attend ECE prior to starting school. “Even though some figures do not show up in the data we know there is low participation” (MOE regional staff). Some MOE staff felt that Māori children would be more likely to live outside designated areas than Pasifika children. In addition, one regional MOE staff member stated that there were “very poor parts of the community filled with refugees and Māori and Pasifika not participating”.

The data captured about ECE participation comes from two sources—through the annual RS 61 census of all licensed ECE services and through information about prior ECE participation collected at school entry. Neither of these sources is considered to be reliable as the data collected at school entry is reliant on parents providing accurate information, and schools recording this accurately. In addition, children who attend more than one service are double counted in the ECE census thus masking the actual picture. The Early Learning Information (ELI) System currently under development will see children allocated a national student number and attendance reported electronically. This will include the duration and regularity of attendance and participation in ECE. This will provide information about numbers of children that can be used in planning for where initiatives might be placed.

Nevertheless, community data and local knowledge are key factors in determining the nature and placement of initiatives, according to MOE staff. This is because community knowledge offers a locally informed perspective not only about local families (who may have recently moved into an area), but also about what provision might suit and support those families. This provision may not be those currently available through the Participation Programme. The placement of initiatives has been decided by MOE based on its understanding of a community’s needs rather than emerging from the community itself. Some regional staff members said they would have liked the ICPP approach to have occurred in relation to provision of all initiatives. One comment was that the drive to get initiatives out in the first and second years was high but the question of what the community wanted was not fully known. A planned approach was favoured because “the scoping gets done first and then the initiative gets tailored around the information that comes from the scoping exercise”.

One approach, proposed by MOE staff, was to give communities funding (comparable to ICPP) and plan provision (a centre, transport or other support services) with them to suit their identified needs.

Say “find out what the needs are, come back and let’s put a group together, sit down and work out what we can do”, and because that funding isn’t just tagged to SP then you could do a SP here and a van there. And I can appreciate that nationally that might appear scary because there’s targets to meet about participation but I think communities have the solutions way more than we do. (MOE regional staff)

The range of initiatives made available to some communities is limited. MOE regional staff in two of the regions with large rural and isolated areas singled out rural areas as places where initiatives that are offered are limited and may not meet needs.

I think we’re going to be potentially challenged rurally. [For example] what people want is a licensed education and care centre in [the Bay]. It’s never going to be financially viable ... I think it’s a real challenge in rural communities where you’ve got smaller pockets of numbers. (MOE regional staff)
Reporting is another area that could be made more accurate and relevant to the aims of the broader programme. Currently, formal reporting is mainly about the numbers of children participating in ECE against targets. One issue in relying too much on numbers was identified by a regional staff member who said “A provider could fill contract numbers if they wanted, for example, by enrolling a child who may start ECE anyway at three years but is two years”. Two of the families whom we interviewed had already attended an ECE service before shifting to SP and FRHB respectively one of the EPF families had attended a home-based service whose coordinator left and another had the child’s name on a waiting list for ECE. Nevertheless, the EPF providers were able to facilitate enrolment in alternative centres for these two EPF families. Providers could be asked to report on prior participation for their families, but perhaps more important is that the ELI System, once implemented, will resolve this issue by enabling accurate information for individual children. A focus on numbers misses the Participation Programme’s emphasis on family engagement in ECE and in learning, although the monitoring of contracts offers a source of information. A view was that participation work is more than simply recruiting families and could be portrayed better and more comprehensively, for example, through the use of “good news stories”. MOE has attempted to do this, but has been constrained by privacy issues.

Summary

As a baseline, MOE data shows lower participation rates for Māori and Pasifika children compared with European/Pākehā children nationally and in the target communities. There are proportionally more children aged zero to four years in the most deprived localities in New Zealand, and children from these localities also have lower rates of ECE participation. Ka Hikitia sets a target for prior ECE participation of 95% Māori children starting school. Currently the figure is 90.3%. The Pasifika Education Plan targets for Pasifika children were reached in 2011. However, the Pasifika Education Plan targets for Pasifika children were revised for the period 2013–2017 and aim for the proportion of Pasifika children starting school who have participated in ECE to increase from 86.2% in 2012 to 98% in 2016.

At this early stage, the Participation Programme had increased participation in ECE by over 1,000 children in the target communities. Two initiatives, Supported Playgroups (SP) and Engaging Priority Families (EPF), are beginning to raise the number of Māori and Pasifika children engaged in ECE in the target communities. As at December 2011, there were 394 enrolments in EPF of predominantly three and four–year-olds, a group most likely to benefit from ECE. The 535 enrolments in SP were mainly aged zero to two years. Targets were surpassed for SP but fell short for EPF. Much time is needed to work with families to establish relationships and so, although EPF targets have not been reached, it is too early to expect big gains in participation. The other MOE initiatives were too new to evaluate in terms of changes in participation.

The targeting of initiatives is based on a needs assessment and local MOE knowledge. One caution is that a too closely targeted approach will miss children who are transient or who live outside the designated areas. Rural areas with wide geographic coverage often do not meet criteria but nevertheless have families with need of support to access ECE and other services. The need to tailor initiatives to local requirements was illuminated in some instances where the initiative on offer was, according to providers, not the preferred choice of some of the families who were using it and was not wanted by some families in the community who were not participating in ECE (particularly SP and FRHB). These considerations highlight the value of using local knowledge with the data in deciding initiatives.

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4 Based on comparison between Ministry of Health deprivation index and 2006 Census population data.
4. Barriers and enablers to ECE participation

A body of existing research evidence shows positive learning and development outcomes (cognitive, learning dispositions and social-emotional) of participation in high quality ECE services for children at the time of attendance and later through schooling and adulthood (Mitchell, Wylie, & Carr, 2008). Participation in high quality ECE can enable parents to build social and community networks and learn more about parenting. The gains for children and families interact to support and sustain each other and can be thought of as empowering. A key finding of the large-scale longitudinal Effective Provision of Preschool Education study in the United Kingdom (Siraj-Blatchford, 2004, 2009) was that working class children can “succeed against the odds” when the home environment promotes learning and the ECE service involves the parent in decisions about the education programme. The quality of the ECE service matters in terms of outcomes. In New Zealand, the Competent Children, Competent Learners study (Wylie & Hodgen, 2007; Wylie, Hodgen, Ferral, & Thompson, 2006; Wylie, Thompson, & Kerslake Hendricks, 1996) found that children who attended good quality ECE had higher scores on a range of competencies during schooling than those attending poorer quality ECE services.

During the last decade, a range of government initiatives were aimed at increasing ECE participation. Many were targeted initiatives or were fairly recent. MOE Promoting Participation Projects were established as pilot projects in 2002, initially for Māori and Pasifika families. The targeting was extended to families with low ECE participation from 2005. From 2002, MOE was offering advice and support for new services or to help (existing) services meet community need, providing space on new school sites for ECE services and undertaking ECE network analysis and planning. The Childcare Subsidy and 20-hours ECE for 3 and 4-year olds was expected to encourage participation by constraining increased costs to parents. The evaluation of Pathways to the Future: Ngā Huarahi Arataki (Mitchell, Meagher-Lundberg, Mara, Cubey, & Whitford, 2011) showed 20-hours ECE was having an impact on provision of services that were more responsive to family needs and on increasing the number of children, their hours of participation and parental decisions about participation. The suite of initiatives in the current Participation Programme was designed to offer a coherent and adaptable approach to addressing barriers to participation and encouraging engagement in education of families who are the focus of the policy. These are Māori, Pasifika and low-income families who are not currently participating in ECE, and include those described by MOE as “hardest to reach”.

This chapter uses data from interviews with participants, and responses to surveys of providers, service coordinators and families to provide views on barriers to participation and of whether and how the initiatives are enabling families to take part in ECE, engage in education and be involved in their child’s learning. In Chapter 5, we use detailed evidence from interviews to examine the nature and delivery of the initiatives individually and how well they are addressing barriers.
Barriers to participation

Perspectives of families participating in an initiative

Nearly half of the 86 families responding to the survey question asking them about barriers to ECE participation identified that they had faced barriers or difficulties that had made it hard for children in their family to take part (49%). Parents who said they had experienced barriers were asked to identify these barriers from a list of 16 items.

- Cost, high waiting lists and transport were the most frequently identified barriers.

- Not knowing what was available was the next most frequent difficulty, followed by location of the service and hours of operation.

- Personal reasons were slightly less—parents did not think ECE was important, felt shy, did not know anyone else, did not know how to enrol.

- Parents being transitory, the quality of the centre and the programme offered were the least frequent difficulties.
Figure 3: Parents’ identification of barriers to attending ECE (n=42)

<table>
<thead>
<tr>
<th>Number of parents who identified barrier (n=42)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>ECE costs too much</td>
</tr>
<tr>
<td>Too many children on the waiting list</td>
</tr>
<tr>
<td>Do not have transport</td>
</tr>
<tr>
<td>Did not know what was available in the area</td>
</tr>
<tr>
<td>The early childhood centre was too far away</td>
</tr>
<tr>
<td>The hours of the centre didn’t suit</td>
</tr>
<tr>
<td>Did not think ECE was important</td>
</tr>
<tr>
<td>Did not know how to enrol</td>
</tr>
<tr>
<td>Felt too shy</td>
</tr>
<tr>
<td>Did not know anyone else going to the centre</td>
</tr>
<tr>
<td>Poor quality of early childhood centres</td>
</tr>
<tr>
<td>Move around a lot</td>
</tr>
<tr>
<td>The early childhood centres were not welcoming</td>
</tr>
<tr>
<td>Child’s home language not spoken in the centre</td>
</tr>
<tr>
<td>Child does not need it</td>
</tr>
<tr>
<td>Other reasons</td>
</tr>
</tbody>
</table>

*Respondents could list more than one barrier
In response to an invitation to provide comment about barriers, 14 EPF families who were not yet participating in ECE gave a range of reasons. These tended to be a complex mixture, including access factors and a belief in children being at home with the parent. One parent identified cost, transport, and her own beliefs:

Finance: It’s hard to afford eight lunches, transport, bags, shoes, lunches, extra charges every week.
Transport: We rely on public and feet which has setbacks. Personal: They leave when they’re five. They should be home with me before. (EPF parent)

Another parent explained why being at home is important:

I like being a mother at home and teaching my kids the things they need to be learning. I love to watch my children grow and progress in the things that they learn. Through them staying at home I know and understand them more, it’s great to spend time with them too. (EPF parent)

Some of these families had very young children:

Too early to attend EC as am not keen for her to go until she’s 9–10 months old or when I’m on a course or working. (EPF parent)

**Barriers identified by families by ethnicity**

The following comparisons are made with the caveat that the sample size for each ethnic group is small. Another limitation is that some respondents identified their child’s ethnic group with more than one ethnicity, e.g., Māori/Niuean perhaps because parents were from different ethnic groups. In these cases, responses were counted twice, e.g., as Pasifika and as Māori for the example given. The comparisons need to be regarded as indicative only. A larger and representative sample would be needed for generalisations to be made. However, they are of interest for follow-up.

The four largest ethnicities identified by families for their children were Māori (n=41), Cook Islands (22), Samoan (20) and European (10), followed by Tongan (7) and Niuean (6). Because numbers are small, and responses given by Pasifika families were similar, we have combined the Cook Islands, Samoan, Tongan and Niuean responses into one category: Pasifika (n=55).

The main barriers for both Māori and Pasifika families were cost and transport, but Pasifika families were somewhat more likely to identify not knowing what was available or how to enrol, and affective reasons.
Table 11: Types of barriers encountered by ethnicity*

<table>
<thead>
<tr>
<th>Barriers identified</th>
<th>Percentage of Pasifika families (n=55) n (%)</th>
<th>Percentage of Māori families (n=41) n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not have transport</td>
<td>16 (53.3)</td>
<td>14 (34.1)</td>
</tr>
<tr>
<td>ECE costs too much</td>
<td>19 (63.3)</td>
<td>13 (31.7)</td>
</tr>
<tr>
<td>Did not know what was available in area</td>
<td>14 (46.7)</td>
<td>8 (19.5)</td>
</tr>
<tr>
<td>Could not enrol due to waiting lists</td>
<td>12 (40)</td>
<td>12 (29.3)</td>
</tr>
<tr>
<td>Too far to travel</td>
<td>10 (33.3)</td>
<td>6 (14.6)</td>
</tr>
<tr>
<td>Hours not suitable</td>
<td>6 (20)</td>
<td>4 (19.8)</td>
</tr>
<tr>
<td>Did not know how to enrol</td>
<td>6 (20)</td>
<td>5 (12.2)</td>
</tr>
<tr>
<td>Felt too shy</td>
<td>6 (20)</td>
<td>4 (19.8)</td>
</tr>
<tr>
<td>Did not think ECE was important</td>
<td>6 (20)</td>
<td>4 (19.8)</td>
</tr>
<tr>
<td>Did not know anyone else going</td>
<td>6 (20)</td>
<td>5 (12.2)</td>
</tr>
<tr>
<td>ECE centres were poor quality</td>
<td>5 (16.7)</td>
<td>3 (13.6)</td>
</tr>
</tbody>
</table>

Note the very small number of responses for each category and the need for caution in interpreting the table.

*Percentages in this table are calculated using the total number of families in the ethnic group.

Barriers identified by families by initiative

Of the families who responded to the survey, 65.1% (n=56) were involved in the EPF initiative. Supported Playgroup families accounted for 32.6% (n=28) and home-based 2.3% (n=2).

Table 12: Percentages of families who encountered barriers

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPF (n=56)</td>
<td>62.5%</td>
<td>37.5%</td>
</tr>
<tr>
<td>SP (n=28)</td>
<td>39.3%</td>
<td>60.7%</td>
</tr>
</tbody>
</table>

EPF as a group, as well as being the largest, also had the highest percentage of their families (62.5%) who said they had faced barriers when trying to access ECE. When asked what these barriers were, 33.9% identified transport followed closely by cost and waiting lists (both 32.1%).

SP parents had quite a different response. Only 39.3% identified that they had encountered barriers to accessing ECE. Of these, cost was the biggest factor (72.7%) followed by waiting lists and not knowing what was available. Centre quality, being too shy and not seeing ECE as important were all barriers to some SP families that were not mentioned by EPF parents.

Table 13 sets out the types of barriers that were encountered by those 46 families who said they experienced difficulties.
Table 13: Types of barriers identified by EPF and SP families.

<table>
<thead>
<tr>
<th>Barriers identified</th>
<th>Percentage of EPF families (n=56)</th>
<th>Percentage of SP families (n=28)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not have transport</td>
<td>19 (33.9)</td>
<td>2 (7.1)</td>
</tr>
<tr>
<td>ECE costs too much</td>
<td>18 (32.1)</td>
<td>8 (28.6)</td>
</tr>
<tr>
<td>Could not enrol due to waiting lists</td>
<td>18 (32.1)</td>
<td>4 (14.3)</td>
</tr>
<tr>
<td>Did not know what was available in area</td>
<td>12 (21.4)</td>
<td>4 (14.3)</td>
</tr>
<tr>
<td>Too far to travel</td>
<td>10 (17.9)</td>
<td>1 (3.6)</td>
</tr>
<tr>
<td>Hours not suitable</td>
<td>10 (17.9)</td>
<td>0 (0.0)</td>
</tr>
<tr>
<td>Did not know how to enrol</td>
<td>7 (12.5)</td>
<td>1 (3.6)</td>
</tr>
<tr>
<td>Felt too shy</td>
<td>6 (10.7)</td>
<td>2 (17.1)</td>
</tr>
<tr>
<td>Did not think ECE was important</td>
<td>6 (10.7)</td>
<td>2 (7.1)</td>
</tr>
<tr>
<td>ECE centres were poor quality</td>
<td>4 (7.1)</td>
<td>2 (7.1)</td>
</tr>
<tr>
<td>Move around a lot</td>
<td>4 (7.1)</td>
<td>1 (3.6)</td>
</tr>
<tr>
<td>Did not know anyone else going</td>
<td>4 (7.1)</td>
<td>4 (14.31)</td>
</tr>
<tr>
<td>Centres were not welcoming</td>
<td>3 (5.4)</td>
<td>0 (0.0)</td>
</tr>
<tr>
<td>Childs home language was not spoken</td>
<td>2 (3.6)</td>
<td>0 (0.0)</td>
</tr>
<tr>
<td>Other</td>
<td>7 (12.5)</td>
<td>1 (3.6)</td>
</tr>
</tbody>
</table>

*Percentages in this table are calculated using the total number of families in the ethnic group.

The differences in the responses of EPF and Supported Playgroup parents can likely be attributed to the age of children and the nature of the initiative in which parents were involved. EPF parents had three and four-year-old children, while the children of Supported Playgroup parents were mostly under three years. Cost may have been a lesser factor for EPF parents because of 20-hours ECE, whereas fees for under three-year-olds where parents want a place in licensed ECE services may be high. EPF providers play a brokering role in helping families to access ECE, so hours, travel and waiting lists are considerations that are perhaps more pertinent to them. Supported Playgroup providers have a service available in the community where the family is located.

Discussion of barriers for families participating in initiatives

Cost, high waiting lists and transport were the most common barriers for families who were signed up to the initiatives—whether we looked at the data by survey responses overall, ethnicity of family or type of initiative in which parents were involved. Comments about cost indicate that it can be broken down in a number of ways. The
cost of fees to attend a licensed service is a barrier, but so too is the cost of attending. Not having or not being able to afford transport is a barrier. Small costs such as bringing food to the service may be too much where a family has many competing demands on its income.

Aspirations for preschool children’s education

All of the families interviewed saw benefits in their child attending ECE. Most commonly mentioned being prepared for school and giving children the best start to their education. Alongside this was being able to socialise and mix with other children and to learn within and about their own culture. In general, parents wanted to attend a service that was well resourced with qualified, passionate teachers but was also affordable. A few comments focused around wanting a centre to provide food for the children.

Language and cultural considerations were prominent for Māori and Pasifika families. When asked what they needed and hoped for from ECE, most Māori and some Pasifika families spoke about wanting cultural aspects to be reflected in the service and the value of immersion and bilingual centres, alongside other learning opportunities. Language and culture did not take priority over other learning.

Just her learning how to speak, her learning how to read, all those sorts of things. learning to speak te reo, the outcomes of that ... I know at the end of the day it will have a good outcome. She will learn te reo. Get onto a marae, get up and speak. All that will happen. (Māori mother)

I like the home-based model and I think more of our Pacific families should have this model as it would be culturally appropriate for our children (Pasifika parent whose mother, a qualified ECE teacher, was running the ECE home-based provision)

While some Pasifika families interviewed regarded speaking Pasifika languages in the ECE service as valuable, they also wanted English to be spoken. For example, a Pasifika parent spoke about wanting her child to learn English in order to be able to get a job.

I like English [ECE centre] much better [than aoga amata] cos the Samoan, you can’t catch the job over here—you always speak English in the jobs over here. (Pasifika mother)

Two Pasifika families wanted English-speaking ECE services. One of these parents did not want her child in a bilingual or immersion centre because she herself would not understand them. She was Cook Islands and her partner was Samoan but she could not speak her own language (Cook Island Māori): “When they get older they can go learn the language.” She herself went to an English church, “that way I get a better understanding of everything I need to know, like them I reckon”. The other Pasifika parent said she wanted her child to attend “the mainstream [ECE centre] as they are well resourced”.

Two Pasifika parents spoke of a fear of unqualified teachers and the quality of care of their child within the ECE.

Only one who has studied, the other one has no qualifications or experience.... she yells at the kids and gives them a hard time. I am too shy to say something to [name]. (Pasifika parent)

Non-participating family perspectives

Twelve Māori and Pasifika families whose children were not participating in ECE were interviewed at the Pasifika Festival and the Polyfest held in Auckland during March 2012. The Pasifika families were from different Pacific nations.
Table 14: Ethnicities of interviewed non-participating families

<table>
<thead>
<tr>
<th>Ethnicity*</th>
<th>Number (n=12)</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Samoan</td>
<td>5</td>
<td>41.7</td>
</tr>
<tr>
<td>Tongan</td>
<td>4</td>
<td>33.3</td>
</tr>
<tr>
<td>Niuean</td>
<td>3</td>
<td>25</td>
</tr>
<tr>
<td>Maori</td>
<td>3</td>
<td>25</td>
</tr>
<tr>
<td>Cook Is.</td>
<td>2</td>
<td>16.7</td>
</tr>
<tr>
<td>Tuvaluan</td>
<td>1</td>
<td>8.3</td>
</tr>
<tr>
<td>Kiribati</td>
<td>1</td>
<td>8.3</td>
</tr>
</tbody>
</table>

*Families identified with more than one ethnic group so responses will total to more than 100%

Nine of these families had children under the age of three and six children aged three to four (some families had more than one child). However, of the six that had children aged three and four, two of these were in some form of ECE.

The employment status of the respondents was “not working” for the majority (eight) while four were in full-time work. Correspondingly, incomes were low with four families having an income of $20,000 or less; another four sat in the $20,000 to $29,999 bracket. Three of the families did not know their income while one indicated an income of more than $70,000.

Non-participating families’ aspirations for preschool children’s education

All parents who were interviewed had firm ideas about what they wanted for their children and what they felt early childhood education should provide for their children. For families of the older children in particular (three and four-year-olds), aspirations centred around getting a head start and skills for school (particularly reading/writing).

Pasifika parents spoke of how their own culture was part of the reason their child may not have been in ECE (grandparents cared for the child, not accepted in the family for the child to be out of the home until older or school age). Most of these families also said that they intended for the child to attend ECE before starting school.

On top of this, two families specifically mentioned that they did not trust a centre to care for their child, one going further and mentioning bad media coverage of ECE centres and the level of care.

Non-participating families’ knowledge of ECE

Many of the small number of non-participating parents who were interviewed were aware of ECE in their community with only two being unaware of what was available to them locally. Some families had investigated options but had encountered issues around cost and waiting lists. Having the chance to bond with a parent at home while they were still small was highlighted as important and families with younger children under two often made the comment that they would prefer their child to go once they were a little bit older and intended to enrol in ECE at that point. Pasifika families with children aged three to four years identified cost along with language and culture as the main reasons why they had not accessed ECE. They also said that they did not feel their child was ready. Two families stated they had been enrolled, but then removed the child because the child did not settle.

Discussion of barriers for non-participating families

Cost and waiting lists were also barriers for the Māori and Pasifika families who were not participating in ECE. Language and cultural considerations seemed to be prominent for these families who wanted to see their own language and culture reflected in the fabric of the ECE service. They also needed a service that they could trust with their children.
Provider perspectives of barriers

Provider responses showed a slightly different pattern. A possible reason for this difference may be that providers were asked to think about a number of families, while parents were thinking only of themselves. We gave providers a list of 16 items related to the main barriers that prevent families from participating in ECE in the communities in which they work. Figure 4 shows that, similar to parent responses, cost, transport and poverty were identified as the main barriers. Family transience is a highly rated barrier that was not identified by many parents. Perhaps families that are transient were not included in our sample (because they were not part of an initiative).

In the next bracket of importance for providers were a number of characteristics related to families’ knowledge, understanding and confidence. A range of characteristics of services themselves—whether they had waiting lists, whether they were responsive, their operating times and quality—formed the lowest rated cluster. Waiting lists and hours were more highly rated as barriers by parents. From their perspective, the ways in which hours fit with family needs and access when it is needed seem to be important factors.

Figure 4: Provider views of main barriers to participation in ECE
Provider views of how initiatives address barriers

Providers were asked what barriers their initiatives targeted. These varied according to initiative. Table 15 lists the main barriers targeted by each initiative.

Table 15: Barriers targeted by each initiative

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Main barriers targeted (in order of number of responses)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engaging Priority Families</td>
<td>Cost, Motivation, empowerment, goal setting and education, Transport, Support for families with other barriers, advocating on behalf (negotiation of hours, WINZ or housing support)</td>
</tr>
<tr>
<td>Supported Playgroup</td>
<td>Cost, Transport, Improving awareness of initiative</td>
</tr>
<tr>
<td>ICPP</td>
<td>Knowledge, understanding and perception of ECE, Support for families with other barriers, advocating on behalf (negotiation of hours, WINZ or housing support), Motivation, empowerment, goal setting and education</td>
</tr>
<tr>
<td>Targeted Assistance for Participation</td>
<td>Cost, Culture and Language within ECE centre</td>
</tr>
<tr>
<td>Home-based</td>
<td>Improving awareness of initiative</td>
</tr>
<tr>
<td>ILCCE</td>
<td>No comments given</td>
</tr>
</tbody>
</table>

Comments were made by EPF and SP providers on how their initiative worked to address barriers.

**EPF** targeted the broadest range of barriers, including cost and transport, motivation, support for families with housing and welfare issues, and help to choose and enrol in an ECE service.

All of them to varying degrees. Poverty has been assisted by helping with transport, some upfront payments offered for obtaining birth certificates, correspondence school fees. Some food parcels given out. Resources for play and learning provided. Brokering relationships between whānau and ECE centres/schools. Transience addressed by persistence of Kaiako in maintaining contact with extended whanau. Pick up and drop off at ECE centres. Whānau are sometimes reluctant to engage with ECE because of behaviour problems (with their tamariki,) they perceive will prevent [their] child/ren being welcome at ECE.

Sharing with Whānau the different types of ECE services available to them. Increasing Whanau’s understanding of the benefits of ECE and their tamariki’s consistent attendance at the service. Supporting Whanau to enrol and engage at the ECE Service of their choice. Negotiating fees and hours of attendance with ECE services (this isn’t always successful though, particularly private services). Referring Whanau to internal and external social services i.e. counselling, budgeting etc. Negotiating start dates with services with long waiting lists.

An empowering approach was taken to supporting families to choose and enrol in an ECE service.

Making the visits to ECE with the families, getting them to sit and actually ask the questions, prep their visits so they are the ones in control.
SP addressed barriers of cost and transport through provision of a free local service. It had wider purposes in building awareness and engaging families in education and community networks.

Cost, transport, increasing understanding of ECE and benefits for young children, community networks, visits and connects with local schools and ECE services, parent workshops, parent involvement.

Service coordinators' perspectives

There were 13 survey responses from service coordinators who work between providers and families, giving a different perspective once again. Eight of these were from Supported Playgroups, four from EPF and one from a Home-based initiative. When asked what they saw as barriers to participation, all but one mentioned cost or affordability as the major barrier to families accessing ECE. Two of the service coordinators specifically mentioned associated costs such as providing lunches, obtaining birth certificates, cost of transport as factors within this barrier while one detailed working with a community organisation to help get food and budgeting advice to help reduce the cost barrier.

The SP coordinators (n=8) also highlighted transport and location as the major barrier. Similar to providers, most coordinators said they felt that many families did not understand the importance of ECE or lacked knowledge of what a playgroup was. As well as this, the nature of the SP as a centre where parents have to attend with their child was mentioned in three of the responses, with parent preference for a “drop off” centre, rather than wanting to stay and interact with their child. Fears about the initiative—being scared and untrusting of it—were mentioned in three of the responses. Bigger factors or barriers were said to be social issues, personal issues and lack of confidence.

Most of the SP coordinators feel the initiative has reduced some barriers, mainly around providing a local, cost-effective or free service that parents can engage in. They are seeing more children attending more regularly and for longer as well as an attitudinal shift within the families. In all but one of the responses it is mentioned that parents are more involved in their child’s learning, showing that they are more aware of the value of ECE and are more involved in their child’s education. On top of this the SP coordinators are noticing support and bonding between families and the creation of strength within the community.

The EPF coordinators (n=4) highlighted similar barriers, including attitudes that ECE was not seen as important or valued. However, lack of cultural appropriateness and poor experiences around ECE were also mentioned. Three of the coordinators felt that they had reduced most or some of the barriers, although one felt it was too early to say. One point raised by two of the respondents was that they felt the barriers had now changed since the original ones were dealt with. These were things such as costs involved with obtaining birth certificates, being interested in ECE but unwilling to take part until they qualify for 20 free hours, health and behaviour issues of the children.

All of the EPF coordinators think that the initiative is beneficial for their communities, enabling them to work closely and be involved with the families, to build up trust and offset previous bad experiences. This in turn helps to engage and break down barriers. They all report that families are more involved in their child’s education with three of the four noting that more children are attending more regularly and for longer.

In contrast the single HB coordinator who responded felt that although more children are attending and families are more involved in their child’s learning, which are positive moves, the other main barriers the families originally faced (cost) in accessing ECE overall has not been shifted by the initiative.
Ministry of Education regional staff perspectives

Similar to other participants, Ministry of Education regional staff said the cost, waiting lists and transport were barriers to participating in ECE. But they also emphasised that unresponsiveness and inflexibility of existing services in terms of hours and cost structures as well as cultural unresponsiveness were barriers.

All the Ministry of Education regional staff identified cost as a major barrier. The 20-hours ECE was said to be a huge help, but even if ECE was free, costs were incurred for such things as transport and making lunches. Fees charged by licensed services could be too high for low income families. Some providers require families who want to access 20 hours ECE to enrol full time, and charge high fees for the additional hours thereby making the service unaffordable. The 20-hours ECE was not necessarily used as was intended.

I had an email from a parent, which articulated really clearly how desperate the parent was to access ECE for her child. The ones cheap enough had a waiting list, others were too expensive. The way service providers administer ECE is a barrier. They have to load up fees for hours outside the 20-hours. There’s inflexibility about responsiveness to the needs of families. You can come here but you have to access this, this and this. They are quite driven by money.

Some larger services have a minimum of two days enrolment but parents cannot afford it. These inflexible enrolment policies are a barrier. Some families have enrolled and got into debt. They will never go back. These were exclusively private centres.

Financing ECE was portrayed as being part of a host of wider issues that were problematic for some families, such as buying food, keeping clean, having adequate housing. In this context early childhood education fell down the priority order. “ECE is not a priority because there is so much else.”

Access in isolated rural communities was seen as a big issue. In Christchurch, difficulties in accessing ECE within the city had been exacerbated by the earthquakes. In one region, more and more services were funding transport.

It’s never going to go away. PPP [The Promoting Participation Project] identified transport; it’s never going to go away. Kōhanga have provided transport from day dot and now some of our services are saying we just have to provide transport. If we want to be a viable service this is the way to do it to get the children here, to help the families.

The cultural unsuitability of some available services was an issue identified by regional staff.

The closest service might be a huge corporate white looking service and families don’t want to go through the doors. There are big issues in [this region] with lack of responsiveness. There are very mono-cultural services which people don’t notice when they have lived here long term....

People are poor and if does not look like me, sound like me, or feel like me then I’m not going there.

Parents’ perceptions of what others might think could constitute a barrier.

One of the reasons the correspondence school was successful was you couldn’t see them. They didn’t know if you belonged to a gang family … so what a parent wrote to you or said to you on a tape was all they thought you knew so you only focused on the child so therefore your relationship was about the child. Going into a centre that opens you up for … like we know that a two-year-old child is likely to bite somebody or dong them on the head but if you’re a mum with a tattoo or your child’s rough or whatever and they dong someone you immediately feel more nervous than if you’re me whose child dongs someone.
Another standard barrier was considered to be **lack of knowledge** or appreciation. Even the term “early childhood education” may not be understood. Terms that are understood are “kindy” or “playgroup”.

Similar to views conveyed by some Pasifika families, MOE regional staff identified cultural reasons why Pasifika families might not want to use ECE. “There’s a first generation of Pasifika families who did not go to early childhood themselves so see no reason to put their own children there. A third generation do not see Pacific centres as being very good quality.”

**Recruitment and families becoming involved in the initiative**

**Provider perspectives**

In order for the providers to find out about the barriers that families faced when engaging with ECE, most (66.6%) said that they had engaged in discussions with families to achieve this. Around a quarter said they had used existing knowledge and observations of their community and existing databases such as those put together through the PPP programme. Other techniques used to find families were discussions with ECE providers, information gained through the enrolment process and through talking to those who were not enrolled, as well as working with other support services and information sharing within their own organisations. Some providers expressed frustration at knowing through “word of mouth” that there were families with non-participating children in the area, but gaining access to them was difficult.

Identification of families with young children who were not participating in ECE was done in large part by collaboration with other support services or the sharing of information within their own organisations (57.7%). Similar to this, 38.5% utilised community networks such as marae and churches. Direct approaches such as door knocking in the community and using word of mouth and referrals also made up a large portion (38.5% and 30.7% respectively). Advertising, open days and events provided good opportunities for connecting with these families, with just over 23% using these avenues. For some providers, prior knowledge of the community and databases built up through initiatives such as PPP were helpful (19.3%).

We asked how the providers engaged families in the participation initiatives. Respondents interpreted “engagement” differently. Some saw it as the practical process of first contact and enrolling the family into the initiative; others saw it as the emotional engagement and buy-in the family had to the initiative once they were enrolled which would ensure ongoing participation. However, in response to this question, just over 30% of providers saw providing information about the initiative as a way of getting engagement, followed by supporting or assisting families with other barriers and advocating on their behalf (26.9%), working with community networks (23.1%) and building rapport and trusting relationships (23.1%). Motivating, empowering and educating families along with visiting them in their homes were also identified (19.2% each).

When asked about important attributes for staff the majority (80.1%) of respondents identified personal qualities such as empathy, being non-judgemental, approachable, honest, respectful, persistent, professional and able to make decisions. Half of the respondents recognised cultural fit and the ability to speak the language of the people they were working with as important; 30.1% identified being a good teacher or having knowledge in the areas of ECE and child development; 26.9% saw passion, enthusiasm and motivation as important; and 23.1% of respondents said that staff already having ties and networks in the communities they were working within was beneficial.
In conclusion, it seems that Participation Initiatives that were based in the community, had access to or provided a range of services (family support, ECE, cultural) and had well formed community connections were able to use their networks both to access families, support them in family issues and engage them in discussions about ECE. This community connectedness was a key to successful recruitment of families into ECE. The providers had a holistic view of families, seeing them not only as parents of preschoolers. Two characteristics of participation initiative staff stood out as critical. One is the “professionalism” and approachability of staff. The second is the cultural fit between the staff and families. This suggests that collectively within the participation initiative staff team, there needs to be a sound professional base, a range of expertise and cultural fit with families.

Family perspectives

According to families, the most common way they became engaged in the initiative was to be invited by the providers with nearly half (47.7%) of involved families being recruited in this way. Referrals from friends and providers being visible in the community were common ways that families became aware of the initiatives with 14% and 12.8% respectively mentioning these. As well as friend referrals, families commented that they had been told about the providers by other family members, Plunket staff, Tamariki Ora nurses, social workers and organisations such as WINZ. The method that was least successful with the families was advertising. Just 3.5% stated that they had found out about and became involved in the participation initiative through responding to an advertisement.

Usefulness of initiative

Family perspectives

Nearly all the families (97.7%) who were involved with a participation initiative provider found this to be useful for helping them take part in ECE, with most finding it very useful.

Parents were asked to identify how the initiative was useful, how it helped their family and what were the best things about it.

EPF family responses

The assistance most commonly identified by EPF families was in finding an appropriate centre that met the family’s needs around cost, location and cultural fit.

Helped me find a kindy for a reasonable cost for my four-year-old and twin three-year-olds. (EPF family)

They were able to find out the cost for my local kindergarten and place my child on the waiting list for me, and also arrange for me to do a settling in period before he started. (EPF parent)

Also identified was the information given to families about the importance of ECE and the entitlements they have around the provision of education such as the 20-free hours provided by the government.

It has provided me with information about centres in my area and has motivated me to enrol my child. (EPF parent)

My child probably still be at home if I was not encouraged by an EPF worker to enrol her at preschool. (EPF parent)
On a more practical level, initiative providers have assisted with transportation, completed enrolments for children and negotiated placements, provided resources for homes and supported families with strategies and skills for their child’s learning and behaviour. Additionally they have helped with external issues such as referrals to specialists, budgeting, housing, food, clothing and connecting with other social services.

Help with enrolment with child, explained things that I didn’t understand, help with transport to enrol my child, very good advice when needed. (EPF parent)

Helping me look for the appropriate Kohanga. Helping me with the subsidies e.g., ECE, ELP Fees. Taking me to dental appointments for the children. (EPF parent)

By finding ways to accommodate our finance, transport and emotional barriers. Being supportive and encouraging and resourceful. (EPF parent)

**SP family responses**

Supported Playgroup parents were most likely to state that the provider had been useful in helping the child socialise with others and learn, and at the same time provide opportunities for the parent to meet and do things with other parents.

It has been a very positive experience. Meeting new mums, sharing experiences, doing craft activities, attending the Xmas parade and being part of the celebrations and new playmates for my daughter. (SP mother)

The children are starting to remember the school they are doing. Singing and counting, triangle, circle, square. (SP mother)

It has helped my girls a lot with their speaking, helping and just learning to share. (SP parent)

Several parents wrote about being assisted with behaviour management.

As a mother you get support by meeting other parents and seeing that it normal behaviour for your child. Kids learn through play how to share, reading, eating, playing, singing etc. My son has been going since he was six months and now he does all the actions to the songs (e.g., twinkle, twinkle) sits with others at the table to eat and I learn the right way to discipline, chair/corner. (SP parent)

I’m very passionate about my children’s playgroup as the coordinator of our playgroup helped me not give up as my three-year-old daughter was a very naughty child which was embarrassing. She just gave me a lot of loving advice, tips etc., which has helped me and my family in a big way as our daughter has fewer spats and it’s great for both of my children as well as myself. I class our playgroup as extended family. (SP parent)

Supported playgroup gave some whānau a little respite.

Involved with other children, a lot of things I don’t have in my home, also they ballroom korero Māori and by the time they come home they are due for a sleep and so am I. They are my great grandchildren. I get tired. (SP great-grandmother)

**HB family responses**

Only two Home-based parents filled in the survey. Each said they were helped by provision of resources.

Provided different play equipment. Where to find other resources. (HB parent)
How initiatives might be improved

We asked how the participation initiatives could be improved for the families involved. Many were very happy with what was being provided.

They are doing a great job. No need for improvement. (EPF parent)

Not to change. I’ve got nothing bad about them. Excellent service (wish I had known about them earlier). (SP parent)

Some EPF families wanted more frequent contact or the programme to be extended to younger children.

More times a week, [child] gets overly excited and he always asks for his teacher to come back over. (EPF parent)

Whilst one hour with EPF is great for my child on a weekly basis—I would love for my child to have an extra hour or two per week. (EPF parent)

I wish it was available to two-year-olds as I have a two-year-old at home with me. (EPF parent)

Supported Playgroup parents would like more of the same (more than one day a week for home-based coordinator visits) or improvements around facilities and resources. These included having more space, an outside space, a playground, more toys and books, qualified teachers and food provided.

More funding for toys, outings and our own facility. (SP parent)

Maybe an outdoor playground e.g., house, swing or slide. (SP parent)

That they supplied lunch. Some days it’s hard and my daughter can’t go to playgroup because she has no lunch. (SP parent)

If they were financially supported with resources and facilitator there would definitely be more attending. At the moment it gets boring for kids and adults. (SP parent)

A general suggestion was to provide more publicity about the programme.

More information to be advised to the public—in community centres, libraries, children’s ECE school, church groups (EPF parent).

Concluding comments were nearly all positive. Any negative comments were about the needs identified above for playgroups to have qualified teachers and better resources.

She never gave up on me. Even when I got a little Hoha!! She made me see the positives of preschool for all of us but never forced the issue. (EPF parent)

I really appreciate all the hard work the EPF has done for me and my family. Thank you all so much. (EPF parent)

Playgroup is awesome. (SP parent)

To me playgroup is very important because you get to stay with your child. Important to be a part of your child’s/children’s learning because the first five years of life is very important physically and emotionally. (SP parent)
Summary

The main barriers to participation are

- cost, high waiting lists and lack of transport;
- provision that does not meet needs of families in terms of hours and location, or is not responsive to culture and language aspirations; and
- personal barriers including shyness, lack of confidence, and past negative educational experiences.

EPF was addressing the widest range of barriers through playing a brokering role in terms of access, cost, transport, motivation and supporting families in housing and welfare issues. SP offered access to a service that supported children’s learning and socialisation, and gave advice with parenting. All the initiative providers were working in their own ways to encourage responsiveness to families.

The most common barrier, cost of ECE service provision, was being addressed for families using Supported Playgroups and through EPF providers negotiating affordable costs for families. Supported Playgroups provided a free local service. Cost reductions for families attending other existing ECE services that charge fees or donations were being negotiated by EPF providers, although this was not always successful. When cost reduction is reliant on advocacy from an organisation or individual and basic cost structures within ECE services are not changed, it is likely that cost will continue to be problematic for successive families. There are likely to be many families still unable to access ECE because of prohibitive costs who are not part of an initiative. For this reason, it seems that responsibility might be placed on ECE service providers for providing flexibility in hours of attendance so that families can choose the number of hours that are affordable to them (especially 20 hours “free”), and capping fees payable.

A few participation initiative providers and ECE service providers were addressing transport issues by providing vans available for transporting children. This resolved the issue of transport for families making use of the van but was not a widespread solution. If the ICCP groups are able to establish responsive, local ECE services where they are needed, needs for transport would be dissipated.

Some questions about the nature and mix of initiatives available for use within each community were raised by MOE regional staff, providers who were delivering only one initiative and parents who would prefer a different ECE service to be available from the one they were accessing. There were strengths in providers being recruited from the local community where they had their own useful community networks and often provided other family services through their own organisation or referrals. Providers who were contracted to offer a number of initiatives could offer choice for families. Providers used different gateways to recruiting children to ECE, sometimes working with the family on wider family support and gaining trust before discussing ECE and the value of participation. The providers who were successful in recruiting families employed staff who had sound professional expertise and matched their families in a cultural way. They had connections with marae and cultural organisations. What was important was that these attributes resided collectively within the Participation Initiative Provider staff team.
5. Nature and delivery of initiatives

In this chapter, we draw on data from interviews with MOE, providers and parents to provide a qualitative account of the nature and delivery of the initiatives, barriers being addressed and how the initiative is supporting engagement in ECE and with children’s education. We provide for each of the six initiatives—Supported playgroups (SP); Engaging Priority Families (EPF); Flexible and Responsive Home-Based (FRHB); Identity, Language, Culture and Community Engagement (ILCCE); Targeted Assistance for Participation (TAP); and Intensive Community Participation Programme (ICPP)—the following:

1. The nature of the initiative (summarised information from MOE).
2. The underpinning approach and how the initiative operates (for a sample of providers in this study).
3. Recruitment of families (provider practices).
4. Perceived strengths of the initiatives (MOE, provider and parent views).
5. Enhancing engagement in ECE and involvement in education (provider and parent views).
6. Barriers being addressed by the initiative (MOE, provider and parent views).
7. Experiences of families (Supported Playgroup and EPF families).
8. Factors contributing to effectiveness in addressing participation barriers (synthesis and findings).
9. How the initiative might be strengthened (MOE, provider and parent views).

Supported Playgroups (SP)

Nature of Supported Playgroups

Supported Playgroups are certificated playgroups that are provided with regular support from a kaimanaaki/playgroup educator. They have been established in areas with low participation. There are currently 29 Supported Playgroups in target communities in South Auckland, Tamaki, Kawerau, Huntly/Ngaruawahia and Whangarei.

The main emphasis for Supported Playgroups is on providing support from kaimanaki to strengthen curriculum delivery and engage families. A key MOE goal is to enhance the quality of ECE within Supported Playgroup provision. Other goals include raising awareness of what families can do for their child’s education and building strong community and social networks. Supported Playgroups are intended to be responsive to the environments in which each is operating. The operating model is open to change. For example, attendance requirements were amended in 2011 in some rural and isolated environments where families could not attend the playgroup five days a week.

Supporting playgroups for curriculum delivery is consistent with needs expressed by playgroup parents and whânau for regular access to good quality professional support and workshops in the community where the playgroup is located (Mitchell, Royal Tangaere, Mara, & Wylie, 2006a, 2006b). The “Quality in parent-whânau-led services” study found external professional support to be a key factor in contributing to higher levels of
quality (Mitchell et al., 2006b). The study found that having ECE qualified and experienced teachers among those delivering the education programme contributed to higher ratings of quality. If the kaimanaki/educator is able to contribute to professional learning and direct input in the programme, we would expect quality levels to be raised. This is crucial because higher levels of quality ratings are associated in the research literature with valued outcomes for children (Mitchell et al., 2008). In addition, a depth and range of professional support is associated with adults developing parenting skills.

Underpinning approach
In common, the three organisations providing Supported Playgroups where we held interviews were community organisations located in the localities they were servicing. To the extent that it was possible, the playgroups were developed to respond to the needs of their communities. They were adapted as they went along. Descriptions of their operation exemplify the wider networks into the community held by these providers, and the advantage for larger organisations offering a range of services in being able to work from a common philosophy and combine resources. These larger providers who offered a variety of social and educational services in addition to the Supported Playgroup made use of their other services in working with families. All the Supported Playgroup providers whom we interviewed offered a range of services.

Supported Playgroup Provider 1 is a Māori Tertiary Education Provider for adults and youth. It operates two Supported Playgroups and a “Toddlers Rock” (three days a week). The Supported Playgroup hours of operation are 9am to 1pm, Monday to Friday, 20 hours a week. Thirty-five children are enrolled. When it first opened, the playgroup started after 9am but “not a lot of people came”. After talking to whānau and finding they were sleeping through breakfast and lunch, the provider started supplying breakfast at 7.30. “Then some go home and get others for school. Then come back and see what happens.” In the director’s view, the strengths of playgroup are that parents are involved and that the playgroup is a “wrap around system”. The organisation assists people with housing, budgeting and cooking, and runs a community MAX project with MSD to get people into employment and training. It offers NCEA Levels 1 and 2 literacy and numeracy. The provider uses money from its business arm to buy food and resources for the playgroup.

Supported Playgroup Provider 2 is a Pasifika organisation. It has 12 Supported Playgroups (pilot) and offers professional development with all the groups together. According to the director, this model works well—finding ways for groups of services to combine is able to reduce pressures. This provider is also contracted to provide EPF and ICPP.

The organisation has lengthy experience in working on participation with Pasifika families and from 2002 held a Promoting Participation Project contract. It provides other participation initiatives (EPF and ICPP) as well. The organisation undertakes professional development for Pasifika ECE services. It has worked with Pasifika services on pre-licensing. It has a wider brief than ECE; for example, it developed resources for literacy and numeracy under a Home–School Partnership contract. It has run conferences for UNESCO and the Human Rights Commission.

Supported Playgroup Provider 3 is a Māori provider that aims to “reflect Māori culture and the traditional environmental knowledge” and to pass these on not only to the tamariki, “but also their whānau”. Its curriculum is about “the environment and culture and fun”, intertwined with outcomes for children to enable them to get a head start at school. The outcomes were identified by Year 1 primary school teachers in response to the question, “What would you love children to come to the table with when they first start school?” The provider has other initiatives (ILCCE and EPF). According to the provider, each initiative is able to strengthen others, such as use of the resources made for ILCCE and worksheets for EPF. New systems that work well are replicated.
Recruitment
All three providers used their networks within the community to recruit families whose children were not participating in ECE. Knowing the community and the community knowing them was said to be critically important.

Providers used a variety of approaches that enabled them to fairly quickly find families whose children were not participating in ECE. Providers established relationships with other services, community organisations, schools, doctors and ECE centres, and sometimes took referrals.

They did not limit themselves to where they were knowledgeable or their own community. Provider 2 spoke of not assuming that people know who you are and “going outside our comfort zone”. She described door knocking, going to shopping malls, seeing kids in backyards and talking to their family. Similarly, Provider 3 knocked on doors and gave out flyers. This provider approached Māori parents through kaumatua, who initially suggested going to parents direct. Then a message that ECE was free and culturally appropriate seemed to capture interests of these kaumatua and Māori whānau. Prospective families were recruited through these connections.

Once the Supported Playgroup was established, the families who were enrolled helped recruit more families.

Strengths
From providers’ perspectives the following characteristics were strengths that enabled their organisation to work well with families and children:

- Ways were found to draw on a range of resources and services from within the organisation and community networks.

- Providers held a deep knowledge of the local community. All three providers were located in their community and had worked there for a long time. “Staff have their own set of networks within the community.”

- The staff group was stable and had people with a broad mix of relevant experiences.

- Providers were matched to the community and reflected cultural values of their community in their work. A strong emphasis was placed on tikanga and te reo Māori by the Māori providers in predominantly Māori communities. These included environmental values and traditional Māori knowledge.

- Good relationships were held with Ministry of Education staff at regional and national levels. “We understand their structures and our obligations under the contract” (Provider 2).

Addressing barriers
Two main barriers are being addressed for families involved in Supported Playgroups.

Access to ECE
Supported Playgroups address barriers of access to ECE where the playgroup is located in a community where parents are willing to stay with their children. They are able to address barriers to participation in ECE in areas where there is limited provision. They are relatively easy to set up. If travel and transport is an issue, small groups can be provided over a range of areas.
They can offer ECE provision in areas where an ordinary playgroup is not sustainable and the playgroup needs to be flexible to accommodate parent needs. An example was a Supported Playgroup recently set up in Christchurch. The December 2010 earthquake raised a range of issues for parents whose patterns of ECE usage and needs changed. Ten ECE centres closed and 11 were suspended. Parents wanted their children close to home and school. Many became nervous about being separated from their babies. A Pasifika consultant identified a need for a one-stop shop with health and social services under one building, in a locality catering particularly for Pasifika families, who tended not to ask for help. In this community over 60 preschoolers were not attending ECE. A Supported Playgroup was quickly set up there, operating 20-hours contact time per week. Children may attend on different days, so not all 60 are there together at the same time.

Pathway into licensed ECE

Supported Playgroups may be the first step for families into a licensed ECE service. The pathway into ECE may be different for Māori and Pasifika families.

The Māori story is most likely that for the single young mums who were disenfranchised from education early on. Playgroups are a stepping stone into something different for their kids—if that works they go on to licensed centres. Supported playgroups provide sense of self.

Pasifika families are definitely led by strong traditional church leadership with one strong woman. Pasifika families tend to go straight to licensed centres and playgroup is their ‘nest’ until they get licensed. (MoE regional)

This view was expressed by MOE regional staff, and some providers commented that parents moved their children into formal ECE when their children were older. Parents participating in Supported Playgroups were not directly asked whether they regarded Supported Playgroups as a stepping stone to more formal ECE.

Enhancing engagement in ECE and community services

These Supported Playgroup providers were helping families make connections with a range of services in their communities. In some instances, making the community connections was the point of contact before the family enrolled in the Supported Playgroup. This seemed to open doors for involvement in ECE.

These providers conveyed a belief that their service could make a difference in children’s and families’ lives, and that children can do well given opportunities. For example, Provider 1 said her motivation was her “Passion for Māori success. For me it’s about Māori, Māori, Māori success”. Provider 3 said the initiative fitted with “who we are as an organisation. We’re dedicated to Māori development and culture, education, the environment”. A key point is that each of the three providers was working in a way that integrated services from within their own organisation and community networks with Supported Playgroup provision. This was a strength. On its own, the Supported Playgroup initiative would likely have had a lesser impact.

Perspectives on lives of some families were graphically portrayed. The two Māori providers talked of poverty, some violence, and drug and alcohol abuse, describing how these acted as barriers to participation.

Parent attitudes and parents’ experiences with education is a huge barrier to getting them to help their children participate. Their lifestyles, the parent lifestyles. Like you know, no child chooses how they grow up, it’s got nothing to do with them it’s the adults that are raising them so yeah, the parents’ lifestyles. The food, the drugs, and don’t get me wrong, I love to have a drink and all that sort of stuff but it’s just the social problems that these people have, the parents have, pass onto the children and you know, if you’ve got a mother that’s hung over and not getting out of bed till 11 o’clock in the morning then that means that the kids isn’t going to. It’s that simple. (Provider 3)
The problems of drug and alcohol abuse were recognised and at the same time seen as capable of being changed. Established relationships formed through the range of work undertaken within the community and the Supported Playgroups provision enabled Provider 1 to be directive with families about what needed to happen for the children to benefit in their learning and development.

Alcohol [is a barrier to participation]. The priority is not food, it is alcohol. It’s a huge problem. Terrible. Parents turn up—some are haurangi. I tell them off in te reo. I can tell them. “Hey, pull yourself together. Where’s the milk? Where’s the Weetabix? Get that booze off the table”. You have that relationship. (Provider 1)

Parents call their children “spoon and eggs”. I really get onto them for that. “Don’t put down your children, come on guys.” I tell them in te reo. English is harsh. It comes over softer in te reo. They know. It has an impact on the rest of their lives. (Provider 1)

Similarly, SP Provider 3 hoped that the work of the Supported Playgroup might help families establish some good routines for their children.

We’d like for it to overcome some of the parent stuff in regards to yes their experiences may have been what they were but if we can show them that it doesn’t have to be that way for their children, that would be great. And the lifestyle in regards to establishing healthy routine, practical routine. You get up, you have a wash, you get ready for something, you pack your bag, you go off to school. You know, those simple routines. (SP Provider 3)

Within the playgroups, generating a sense of belonging and well-being were conveyed as being foundational to other development. The providers’ examples offer reminders of the significance of the Family and Community principle and the Belonging and Well-being strands of Te Whāriki for this work.

We want the children to feel like they’re part of a club and we want the adults to feel like they’re part of a club. And then, that as they achieve things, the achievements are acknowledged and celebrated and I guess it’s that whole being a part of a group thing, being a part of something positive and learning to be proud of who you are. I think that’s probably the key thing. (SP Provider 3)

In this playgroup, parents were involved alongside their children. A provider who held a “kai day” each Wednesday where cooking is done or food prepared explained how the involvement of families led to integration between playgroup and home practices.

There’s no point in the children knowing all about it and how to do it if the parents don’t have the buy-in as well…. If they don’t participate themselves then you don’t get that follow through at home. You just get that struggle between being at home and being at school. (SP Provider 3)

Experiences of families

We interviewed two Māori mothers and a Māori great grandmother from Provider 1, and four Pasifika mothers from Provider 2. A fuller case study of a Supported Playgroup is set out in Appendix 2.

Māori parents’ experiences

SP Provider 1: The two mothers and great grandmother were recruited into the playgroup through various ways—one mother was encouraged to come by a relative, the other was invited when the CEO came and knocked on her door and said “come down”, and the great grandmother said she lived over the road and saw what was happening.
All three were very positive about the playgroup, its value in supporting their children’s development and learning, and teaching parents how to “teach our kids”. The playgroup provider offered educational services for adults and playgroup could support parents’ learning too. Playgroups enable social contacts for children and adults and are enjoyable. The mother of a three-year-old daughter and two school-aged sons explained what playgroup meant to her:

It’s enjoyable, everything is here for the girl. And there’s more for us, there’s adults for our kids, there’s parents as well, and we can pick up a lot of things, learn how to teach our kids and stuff like that. It’s really good. Yeah I quite enjoy us being here, it’s a lot of fun for me and my kid. My other kids, my sons, are all at school. There’s not much here during the day.

This mother preferred playgroup to a centre her child used to attend, highlighting more stimulating activities and a sense of comfort.

There’s more learning. She’s more comfortable being here. She really enjoys herself. The teaching’s not boring. Everything’s fun here. More things for her and for me too. I want to be here too. She loves it here.

[You said you were learning how to teach your kids. What sort of things were you learning?] Te reo, how to speak. I am the sort of person who likes to learn. I do need a lot of help with reading and writing, stuff like that.

The mother was undertaking a literacy course offered by the provider. These wider opportunities for the parent came after the child was enrolled in the Supported Playgroup through the Supported Playgroup provider responding to the mother’s interest in literacy learning and inviting her to attend the course. The provider was positive about the mother’s capabilities and was encouraging the mother to be a secretary for the playgroup.

The great-grandmother, who had taken custody of her granddaughter’s children, spoke of some improvements in communication that had occurred for her great grandchild through the playgroup experience:

Well my two little ones, my granddaughter she got into P. And I don’t know what else happened, but I think she locked them up and locked them away somewhere. Because every time I went to the loo at night time both of them would be sitting on the floor waiting for me. They couldn’t let me out of their sight. When we went to the zoo, [child] went on another van, and she screamed and screamed, so I got in the same van. They are not secure yet. Going to sleep with me until they know they are ready to sleep in their own beds. [Does that mean being here is helping them to be a bit more secure?] Oh yes. She never spoke before. Now she’s like a little parrot.... It is good for them. Been here since it opened.

Pacific mothers’ experiences

SP Provider 2: We interviewed four Samoan mothers whose children were attending the Supported Playgroup.

All four mothers gave as prime reasons for coming to this playgroup that it was free, convenient and culturally sound. One mother said it was within walking distance, and two others had transport provided by a relative. It is unlikely that they could have come without these supports.

The mothers all identified outcomes from playgroup for their child: learning new skills (which are a basis for later education), learning to socialise with other children and be independent, learning Samoan language, songs and culture, and better behaviour. Parents conveyed that they had developed new understandings about discipline:
At home they were naughty, but here they are taught to behave. Culture is always about discipline, but now there is better understanding.

It’s nice because the kids used to get smacked because they didn’t listen. Now they have been to school, they no longer get smacked because kids and parents have been educated.

[Child is] not so naughty now, I know how to deal with it and kids seem to calm down.

Children liked the playgroup: “Happy baby, happy mother.” One mother appreciated having a break from her husband.

Attendance depended on having transport for the two parents who were reliant on others for this. Two mothers said they sometimes did not attend if they had responsibilities such as at the church.

The main improvements parents would like would be to have qualified teachers (only one person was qualified), better resources and a “healthier environment”—more outdoor space and fresh air. One would like a canteen for food, library books and computers so that children could learn technology at a young age.

Three parents said they had taken their child to another ECE centre before this one. One had been in a kindergarten and moved to this area. She had liked its qualified teachers and resources, which were better than the playgroup’s. Another had withdrawn her child from an education and care centre after a month “because she did not trust the care”. The playgroup policy is for parents to stay with their child. However, not being able to leave her child is difficult because the mother could not look for work and needs the extra income. The third had pulled her child out of the previous ECE centre because she thought this playgroup is “more educational”.

Factors contributing to Supported Playgroup effectiveness in addressing participation barriers

In summary, there were four main factors that enabled these Supported Playgroups to work well in addressing barriers to ECE participation.

1. First, there was a cultural match between providers and families: Māori or iwi-based providers were working with predominantly Māori families and Pasifika providers were working with Pasifika families. An emphasis was placed on language and culture within the playgroup provisions. The families whom we interviewed valued accessing a playgroup in which their own cultural values and language were incorporated.

2. Additional value arose from providers delivering a range of other social and educational services. Families who came into the Supported Playgroup were able to make use of the additional services being offered by the provider, and so achieve gains for themselves. This may be particularly important for recruitment and engagement of families needing intensive support. There was value too in providers offering more than one participation initiative, such as EPF and Supported Playgroup, since experience gained and resources used in one were being made available to others.

3. All providers knew the communities well and made use of a wide range of community networks to recruit families and support them. They had strong relationships with schools and ECE services, health and welfare services, and government agencies. They recognised that other participating families were valuable in “spreading the word” about advantages of ECE.
4. The providers adapted the operation of their playgroups in response to finding out about what would suit families. Examples included adaptation of hours of operation to times that suited parents, provision of breakfast to meet children’s needs (paid for by the provider from their business arm funds), and adaptation of the curriculum to support children’s readiness for school.

**How the Supported Playgroup programme can be strengthened**

Supported Playgroup providers and parents described three main ways in which the Supported Playgroup Initiative could be improved.

**Employing qualified teachers**

Funding for employing a coordinator, who is required to spend 20 hours’ contact time with the playgroup, is $35,000 per annum. Playgroups would be enhanced by having qualified ECE teachers as coordinators but the level of funding is insufficient for their employment.

> If you are a qualified teacher and want to work in ECE you wouldn’t be a supported playgroup coordinator. (SP Provider 2)

> Part of the contract is to engage with parents about the value of early childhood education so if they are not trained teachers, it’s hard to do that. (Regional MOE)

These views that provision would be enhanced by employing qualified teachers were echoed by parents whom we interviewed.

**Developing provision responsive to community needs**

The Supported Playgroup providers had recruited families to their provision, but two of the three providers stated that there were many non-participating families who were not attracted to Supported Playgroups. This is an issue where playgroups are the main ECE service model available in a community. These providers wanted to be available to a wider range of families and said their preference was to develop provision appropriate to their community, which could include a playgroup element or a new way of working with families.

> If we were able to provide it would be some kind of hybrid between the two (education and care and supported playgroup). Not the same operation—two separate programmes. Allow parents to attend with children if they wanted to. (SP Provider 2)

> Provider 1 suggested a mobile ECE in a van that travelled to people’s homes instead of a playgroup in a fixed building. Have to get in the home because of the situation of poverty. Not coming out of their home. Just drive around, you’ll see booze on the tables even at this time of day, no kids around, kids inside, babies having babies. I say “Kia ora, your baby in ECE?”—No, not interested. Have to chase them up the road. Once they’re confident that will take about three months every day. They’ll see the vehicle there, the writing, kids, strong messages about education. Kai first. Kai before booze. Kai before drugs. Have that on the van.

> Also it will bring out neighbouring kids. Got toys there, play dough, they’ll come. It doesn’t have to be flash. Our vans and coming to homes get confidence up more and coming out more.

> MOE could recognise more the value of education in the home. Don’t just see value of education in the whare where they are not participating. Step outside box away from having in building. Education in the home. Take the education to the sink, to the bathroom, right down to changing nappies, cooking porridge, making toast. (SP Provider 1)
Interviews with families attending playgroup showed that playgroup did not meet some needs. One Pacific mother wanted to get paid work but needed to be at the playgroup with her child. Māori families interviewed indicated that many families in their community did not attend because of the requirement to stay with their child.

*Coordinated working*

An integrated or coordinated approach with schools, health and social services was seen as essential to working successfully with families. Through their own community networks and multiple services, providers were able to draw on their communities’ “funds of knowledge”. This could be extended formally. Provider 1 suggested that wider services could be offered from the playgroup base and that ECE could be more closely connected to school through every school having an ECE facility.

**Targeted Assistance for Provision (TAP)**

*Nature of TAP*

This funding is intended to help to establish new services and child spaces by providing grants, incentives and partnership opportunities in those communities where new child places are needed most and are not being created quickly enough. Fifteen Targeted Assistance for Participation (TAP) grants were awarded in the past year.

*Underpinning approach*

The two organisations where we held interviews were experienced and located in the communities they were servicing. The grants had been allocated following response to MOE’s call for proposals.

**TAP Provider 1** is a private home-based provider. The provider’s building, used for the home-based provision, was empty much of the time and located in MOE priority area. TAP funding was used to get the facility to a standard to meet licensing requirements. This included modifications to the building and outside area.

The new education and care centre is contracted to provide spaces for three and four year-old non-participating Māori and Pasifika children from the designated area for 20 hours per week. The provision is shared by a home-based playgroup in the morning. The education and care centre operates from midday and provides a free lunch. According to the provider, this timing should suit families—“Parents don’t have to rush out of bed, get children ready”.

The centre was new and only seven children were enrolled at the time of interview. The centre is staffed by an ECE qualified teacher and a reliever (who is of local iwi descent).

**TAP Provider 2** is a Pacific Health Trust already offering health, social work and nutrition services to Pacific people. It has received a TAPI grant to build a new centre in a priority area for three Pacific groups. Resource consent has just been gained so it will be six months before the centre is built.

The trust CEO said the centre would offer the opportunity to provide a good start in life for Pacific children based on the understanding that research shows that those children who go through ECE do better at primary school. If children have got the right attitude it helps a lot in later life. The hope is that the centre will improve the status of the Pacific community in New Zealand. The vision is to have an integrated service. Other services were to be nearby or linked in—doctors, nurses, Well Child checks, nutritionists and so on. The centre philosophy is a holistic one aimed at trying to develop the whole child, within which cultural and educational domains are woven. The CEO said the philosophy was a strength of their proposal.
A case study of TAP Provider 2 is provided in Appendix 3 to highlight the aspirations, planning processes and barriers encountered in the process of developing new provision.

**Strengths**

From TAP Provider 1’s perspective, a strength of the TAP initiative is that it enabled the facility to be brought up to a licensing standard. The centre offers opportunity for more children to access ECE, although enrolment numbers are not high at this early stage. The provider regards centre-based provision as a progression from home-based provision for older children because of opportunities offered for broader socialisation and other learning.

The funding will enable TAP Provider 2 to enact the exciting vision of a Pacific ECE centre, catering for Tongan, Cook Islands and Niuean families, from which integrated health, social services, education and culture will be offered. These developments are consistent with developments in Australia, United Kingdom and other OECD countries where ECE centres bring together a range of professional supports and opportunities for adults and children using inter-disciplinary teams (Corter et al., 2009; Press, 2012; Whalley & the Pen Green Centre Team, 2007; Wong, Press, Sumision, & Hard, 2012; Woodruff & O’Brien, 2005). These integrated approaches may be particularly successful in working with priority families who have multiple needs.

**Addressing barriers**

Two main barriers are potentially being addressed.

**Access**

Access to ECE for 3 and 4-year-olds is being provided in a community where participation is low (Provider 1) and will be provided for Pacific children (TAP Provider 2).

TAP Provider 1 has largely recruited children through connections with community organisations and recommendations from Plunket at the four-year health check. TAP Provider 2 has already done work on recruiting families through two social workers who went out into the community and identified parents whose children would come to the school. Churches and community health nurses were also involved. Part of the feedback is that children stay home for cultural reasons, and if children are sick, the family wants to look after them. These considerations will be addressed within the new centre through providing ECE with teachers fluent in the home languages of the families and knowledgeable about the cultures, and emphasising health care.

**Cost**

Cost as a barrier is being addressed by TAP Provider 1. The service is entirely free. Families are not required to pay for more than 20 hours as happens in some education and care services. Free lunches are being offered.

**Enhancing engagement in ECE and community services**

TAP Provider 1 has connections with other providers in the area and uses these to find out about non-participating families. She gave examples of children learning skills—to count, write their names, hold a pencil properly, to use table utensils, to kick a ball. The centre gives out homework for parents to do with their children.

**How the TAP provision might be strengthened**

TAP Provider 1 was the only provider interviewed whose ECE service was open. It was rather too soon to gain a picture of how the TAP provision might be strengthened. However, this provider had some views on aspects she could improve within her service, and how the policy might be clarified or adapted.
Within her own provision

- TAP Provider 1 thought her own provision could be enhanced through employment of Māori and Pasifika staff, who would be reflective of the ethnicities of the children. The number of enrolments was slow to increase. This provider thought MOE could play a stronger role in recruitment by providing public messages of the value of ECE.

Within the TAP funding policy

- TAP Provider 1 recommended that it should be possible to use TAP funding to cover transport costs. Although there is a bus stop outside TAP Provider 1’s centre, travelling by bus is a cost for families. TAP Provider 1 said it was unclear what happens if families want to enrol their children in a TAP-funded centre but live out of the designated CAU. She thought targeting particular children in a particular area can impose arbitrary exclusions and be stigmatising.

Engaging Priority Families (EPF)

Nature of EPF

These are intensive support programmes for Māori, Pasifika and low socio-economic status families and whānau in the most vulnerable situations whose children are not participating in ECE and who, without intensive support, are unlikely to do so. It aims to lead to enrolment in ECE, regular participation in ECE, support for learning at home and a successful transition to school. There are currently 21 Engaging Priority Families initiatives in Tamaki, South Auckland, Wairoa, Whangarei, Waitakere, Hamilton, Waitomo and Te Kuiti.

Underpinning approach

We interviewed five providers funded through the Engaging Priority Family initiative. Two were Māori organisations (one of these iwi-based), one a business consultancy, one a Pasifika organisation that was interviewed in relation to the Supported Playgroup Pilot, and one a church-based trust. Each provider was highly experienced in working with children and whānau and in education. In addition to EPF, their range of services was broad.

EPF Provider 1 (Māori organisation)—Family Start, PAFT, EPF, previous MOE Promoting Participation Programme, range of social and educational services

EPF Provider 2 (Māori organisation, iwi-based)—Parent-led ECE centre, teacher-led ECE centre, iwi base

EPF Provider 3 (business consultancy)—Previous MOE Promoting Participation Programme, Supported Playgroup

EPF Provider 4 (Pasifika organisation)—Previous MOE Promoting Participation Programme, Supported Playgroup Pilot, ICPP

EPF Provider 5 (church-based trust)—Previous MOE Promoting Participation Programme, family support, Social Work in Schools, parenting programmes, two early childhood education services

Families are recruited through the understanding of and connections these organisations have with their local communities.
We have to learn about our communities [each distinct cultural practices, languages, beliefs, religions]…. First we have to build that relationship with families, cos they’re not going to hand over their stories and their children to us until they know who we are and what we’re about. (EPF Provider 4)

We’re getting those through engaging with Social Service agencies. We’ve also done some door knocking as well and that’s been really good because we’ve been able to identify children who we wouldn’t necessarily pick up through any other service because they’re not engaged with any other services, they’re kind of just keeping under the radar because that’s how they like to be. So we’ve been door knocking we’ve picked up a few families, pretty much half our families, through there. (EPF Provider 3)

All five providers offer family support in a range of ways (e.g., budgeting, health, food, benefit entitlements, parent education) as well as focusing on education. They know the ECE services and programmes in their communities and take a variety of approaches to encouraging participation. A strong message is given about the value of ECE, for example through play days and promotion days, and through talking with families:

There’s one word I use quite a lot with my families out [community] way—I always say to my families “Do you know what the answer to poverty is?” They say “What is it?” and I say “Education” and they say “Not”. I say “It’s true”. And I go on to explain to them how … I share that a lot with my families that while it didn’t work for them as parents now being teenagers, don’t let the children go through that.… My conversation always caters to what they know and need to know. (EPF Provider 5)

Providers took a strength-based approach to their work with families, and where possible drew on families’ funds of knowledge.

Support families to go to centres to ask the right questions. Get parents to open up and tell you what they want. Finding their voice. (EPF Provider 2)

I’ve found that if you concentrate on the problem then that’s all you are going to see is the problem, so I’ve looked at the strengths of the family—what they are actually doing well—and honed in on one—might be a vege garden at the back that feeds the family. That gets the conversation going and speeds up the relationship with the family.... Once they realise that’s education and learning then you can go from there. (EPF Provider 5)

It’s just trying to keep everything positive is the biggest thing. That and praise is a huge thing for our parents, just praise them, praise them, praise them otherwise you’re not going to get anywhere. And then we’ll do the same to the parents. Sometimes we’ll sit there and go “When I gave you a hi-five how did that make you feel?” “Oh, pretty cool.” “Well just imagine how cool your kid felt for doing that” and we’re all about the power of praise. (EPF Provider 2)

Strengths
From providers’ perspectives, the following characteristics were strengths that enabled their service to work well with families.

The staff team were culturally matched with the families with whom they were working. Staff were of diverse ethnicities, and held strong connections with marae and churches (in Pasifika communities). Iwi-based coordinators in Māori communities and Pasifika coordinators in Pasifika communities were able to connect with families from a common cultural understanding.
Interagency and community working was a platform through which providers could access appropriate and wide ranging support for their families. Through such networking, providers were able to offer a wider range of family supports than would have been possible through one organisation alone.

One of the strong tools is working collaboratively with other agencies that are working intensively with families in the home. Cos if you try to do it on your own it’s really difficult. (Provider 5)

Staff took an empowering approach, concentrating on the strengths residing in families. They supported families to take actions and responsibility for themselves as they were able to do this.

A “success” story from one provider

This was a whānau that I picked up last year. They were a high-risk whānau, she had six babies five and under, she’s just had a new-born and there was a lot of family violence going on in the home as well. So I was able to place three of her tamariki into kōhanga and we were just having a korero one day and she said I think I’ll go to kōhanga with them as well. I said “You might as well, give you something to do and take baby along”, and they were going consistent for three to four months and we were doing a follow up with her on the four months, went over to her whare and her whare was just immaculate, it was beautiful, she just had this glow about her and I said “Gosh, what’s changed?” and she said “You know what, it’s been the kōhanga”. She’s been going every day, she learnt this new language, she’s felt really really connected and involved with the kōhanga and participation was really good and even the family violence had stopped because of it. And the dad was driving the van. He offered to drive the van and then the couple, that little family were getting out and fundraising, because T’s a Ta Moko artist so he said “I’ll do a free Ta Moko, do a raffle for the kōhanga and the prize can be a free Ta Moko”. That was just from them, their ideas. That family, it changed their whole whānau dynamic. Three to four months the family violence stopped, they were dropped from a high-risk family to a non-priority family from Child, Youth and Family. So that’s just really good. They’re not on their radar any more. Family’s happy, kids are happy, heaps of laughter. (EPF Provider 3)

An iwi-based provider attributed some Māori families “losing their way” to their loss of connection to whakapapa. This provider used their own centre to empower children and families through reclaiming their whakapapa and developing a curriculum to reflect te reo me ona tikanga (language and traditional knowledge). The kaupapa of the curriculum embodied their connection to their iwi that was culturally significant to their whakapapa and as a means to whakamana the families.

I go back to whakapapa and how important that is for these kids to know their whakapapa and be empowered by that. And I think I was when I was a child, I was empowered by the fact that “Yeah, my tupuna was a chief and he did this and he did that and that’s a lot of the things we’re trying to instil in our tamariki as well as the place that we’re in ..., our centre because this is where we’re based, that’s what we try and filter through to our tamariki. This centre here actually has its own tailor made curriculum. It’s an [iwi] based curriculum so everything they learn, their literacy and their maths, is all throughout. (EPF Provider 2).

Addressing barriers

The EPF contracts are not solely focused on ECE participation. They include components of establishing relationships with families, supporting families to engage with ECE and their children’s early learning, and supporting families to effectively transition to school. Providers work with families through the transition. Stories from providers about the EPF initiative seemed to suggest that it was capable of addressing a wider range of issues than some other initiatives, perhaps because of these multi-pronged objectives and its openness to a range of solutions. The main barriers that EPF could address were:
Access to ECE

EPF providers were able to help families with 3 and 4-year-olds access ECE. The national statistics show 394 families recruited through EPF have enrolled in an ECE service.

Providers used a range of strategies to find families and tailored the strategies to the distinctive composition of each community. All identified that they needed to have knowledge of the cultures, languages and beliefs of the target families, and the community organisations, social and health services, schools and ECE services in each community. Providers emphasised the value of being in the community, knowing the community well and being able to communicate with families in their home language. One of the strong tools in recruiting families was said to be “working collaboratively with other agencies that are working intensively with families in the home”, including health services. Connections were made with community organisations attended by families such as marae and local churches. Events attended by families, including sporting and cultural events and play days at the local school, were forums where families were recruited. One comment was that once the provider was known and “in” with families, their service spread through word of mouth.

Providers identified specific barriers for each family and worked on addressing these first.

- **Cost** as a barrier could not be addressed directly by the provider since costs are determined by individual services. However, providers took a broad view of supporting families in their living situations as well as encouraging access to ECE. Examples were given of providers using their contacts with Housing New Zealand to help families to get state housing, of advising families of benefit entitlements and helping them access their entitlements, and of budgeting advice. In relation to ECE, providers knew the cost structures of the ECE services in the community and discussed these with families. On the whole, 20-hours ECE removed much of the costs of donations or fees for the 20 hours. Some private education and care centres required enrolments to be full-time, so the nominally free 20 hours was counteracted by large fees charged outside of these times.

- **Transport** was sometimes offered by the EPF provider as a way of supporting families to attend ECE. One provider commented that this was regarded as a short-term help until the family saw ECE as valuable. EPF providers told families of ECE services that provided transport as part of their discussion of what each service in the community was like.

An example of support to address barriers of cost and transport was offered by the iwi-based provider (EPF Provider 2), who was able to use its own parent-led centre and its education and care centre for EPF families. The parent-led centre, a Supported Playgroup, was free and provided transport. Parents were asked only to bring a piece of fruit or biscuits for shared kai. The centre has inviting activities for parents as well as children, which helps “get the parents motivated to get there”. There is flexibility for parents to enrol for the days they want. These children often move on from the parent-led centre to the teacher-led centre.

- **Availability of ECE services.** There were not always suitable ECE services available where and when they were needed. This is described by one provider as “a pressing issue”. Some EPF providers commented on negative attitudes held by ECE managers towards EPF families.

**Negative parental attitudes about education**

Providers spoke of parents having negative experiences of education. They worked sympathetically to help parents move on from these in their attitudes to their child’s education. Providers showed families small tangible things they themselves could do to support their child’s learning.
Especially from my teaching background I know that parents used to get a bit freaked out when you do … there’s a five-year-net test when they first come to check their ABC’s, the simple things and you’d say “I did a little test on your son today” and it freaks them out, you see their face just tense up straight away. I think as teachers we need to ease up on that because we might just think it’s an easy test but “TEST. Ding, ding, ding” goes off in a lot of parents and they say “Was it ok? I hope she’s not going to be like me, pulled out of school …” and then if there is a gap, what I envisage doing although I’ve not got there yet, if there is a gap in their 5-year-net test or whatever test they’re doing in they’re saying that their numeracy’s not so good, what can I do to fill it at home and that’s where I want to be for those whānau. “Ok, there’s a gap there, this is what we’ll do, we’ll make up a little learning plan…” just to give them the support so it’s not like “Oh no, he can’t count” and that’s all they think is “Oh no, oh no what am I going to do, I don’t know what to do.” Bridging those gaps between centres and schools. (EPF Provider 2)

Through taking an empowering approach to working with families, providers were able to help overcome feelings of inadequacy.

**Family support**

Each provider was able to support families in a range of ways and had contact with government agencies and community organisations.

**Enhancing engagement in children’s learning**

EPF providers developed an “Early Learning Plan” with each family aimed at helping the family identify steps for achieving goals for the child and family. In this way they supported families to take charge of their own goals and hooked parents in through seeing their own child succeed.

I find that if I get them engaged and get them excited, once you see that little spark, once their child learns something so small and the parent, you’ve made that a little goal on their little chart and they’ve achieved something, … the parent, you see them kind of light up and I think “I’ve gotcha, I’ve got you, you’re excited about your child’s learning, you know how clever he is now don’t you?” And give them praise as well because without your parent helping this tamaiti, because I don’t go in and teach him all the time, he actually might not get that and it might be so small and then they realise how easy it is, it’s not a big scary thing. I think they come with this thing that it’s like high school and it’s scary and it’s going to happen all over again and I’m so scared for my baby. But once they see something so small like mixing flour and water together and how much fun and how much new words they learn because they said the word mixing and they said “What does mixing mean mum?” or slimy or textures, there’s so many things that’s can come out of something simple. I think once they see how simple it can be and how rewarding it can be for their tamaiti, they get the reward themselves and that’s really cool for us to see too, a parent buzz out. So I really think you’ve got to get that parent hooked and then I find that their engagement with their tamaiti actually picks up a little bit. (EPF Provider 2)

This provider demonstrated to parents ways in which to support their child’s early learning, but later gradually withdrew her own active role modelling and encouraged the parents to do things for themselves.

Then I try to pull back a little bit and instead of sitting down and giving this child a lesson in front of mum which I usually do and then leaving them the resources, I’ll just verbally tell them “I think these are good ideas” or instead of giving them the play dough I’ll start to give the recipe for play dough so I try to show them how to do it not to do it for them. (EPF Provider 2)

This provider emphasised the power of praise for children and for parents too. The provider emphasised interest-based learning and that the parent knows their child better than anyone else in the world.
Experiences of families
We interviewed three parents from EPF Provider 4 (Pasifika organisation) and four parents from EPF Provider 5 (church-based trust). All these parents had had three or four-year-old children. A fuller case study of an EPF family is set out in Appendix 2.

Provider 4 parents (Pasifika organisation)
Two of the Pacific parents got to know about EPF through contact with the coordinator and the third was referred to the EPF service through living in a house for new immigrants.

The children of all three are now attending general education and care centres after barriers had been overcome. Two parents said the main barrier to attending ECE was not having transport. Their children are given a lift to ECE. “If it wasn’t for the coordinator I could not take the child to school, because of transport.” Cost was another barrier—20-hours ECE had overcome this, although one parent said she would like her child to go for longer but could not afford to pay outside the 20 hours per week. This parent said cost was a reason why other families did not attend.

All three parents had aspirations for their children to do well at school and in later life. One parent thought ECE had helped her child socialise, read and paint. This parent had also learned a lot from the ECE service supervisor about eating healthy food and how to manage behavioural issues such as going to sleep on time. She helps her child with reading.

Parents praised the quality of resources, facilities and teaching. The only criticism was from a parent who would like less play and more structure. Nevertheless, this parent saw ECE as making a difference in relation to her oldest son who was now doing well at school. In future, she would like her child to attend a Tongan ECE service because learning his Tongan language and culture was so important and would enable him to communicate with his grandfather.

Provider 5 parents (Church-based trust)
One of the four parents interviewed had already enrolled her child on a waiting list for ECE (EPF Parent 1) before she became involved in EPF. Another had attended a home-based service but the caregiver had left (EPF Parent 4). The coordinator encouraged this parent and the other two parents to enrol their children (EPF Parents 2 and 3).

Two parents (3 and 4) were given pamphlets about the service while out in the community, talked to the provider, filled in their details and were visited by the coordinator at home. The other two had connections with the provider through family and friends.

There were various reasons why these families were not participating in ECE. The two parents who had already been involved with ECE needed support to find a service that suited them.

- EPF Parent 1, who already wanted her child to attend ECE, said there were no places available at the kindergarten she wanted her child to attend, but the child’s name was on the waiting list for it. The EPF coordinator helped by “going to look at places” and found a place for the child at another kindergarten, while the parent waited for another place in the original kindergarten to become available.

- The EPF provider found an education and care centre for the child of EPF Parent 4 when the home-based caregiver left. A social worker from the provider’s organisation made a referral to the EPF coordinator after discussion with the parent. This parent was also helped to access food banks.
The mothers of the two children who were not enrolled and had never accessed ECE had views that their children were better off at home.

- EPF Parent 2 felt the children would be safer at home.
  
  I rather them beside me than anywhere else—I feel like it’s not safe out there for them. The kindys are all right, it’s not them it’s just me. I don’t want to be apart from the kids. I feel like if something happens out there in the world it will be hard for me to get them. Whereas, if something happens and they’re here with me it’s better. (EPF Parent 2)

- EPF Parent 3 liked the child being at home and did not know about the value of ECE.
  
  Cos I liked him staying home with me. I enjoy them being around me and I know where he is. But I didn’t realize—I didn’t like school eh…. I was too lazy—that’s the honest truth—I was just a damn lazy mother to take him to preschool. [Interviewer asked what she knew about preschool] Nothing not until I went down the road.

Cost was another main reason why these parents were deterred from enrolling their child.

  I heard about [education and care centre], it was the best—they really looked after the kids. You don’t take anything, just a spare change of clothes. I went there one day to check it out, stayed there the whole day to see what they do and that—yeh—it was good. But they really expensive—$150 a week for one. So no thank you and that’s about it. I gave up. (EPF Parent 2).

Consistent with cost being such a main consideration, provision of transport and ECE being free were key factors in decisions about which service to attend.

  I asked for something close cos of the walking distance and there was that one then she said there was a free ride—you know they come and pick up the children—so that made it more you know—I jumped on board from that one. Then there was the government [funding]—so I took on my free hours—it was something like 80 bucks a week on top of my free hours if you were going to have your full hours. So I just thought I could have half of them. There was another one up there suggested but it was the drop off and the pick up that worked for me. (EPF Parent 3)

Personal attributes of coordinators enabled them to build relationships, communicate and support families. Three of the parents talked about the persistence, encouragement and work of the coordinator in prompting their decisions and helping them with their children.

  I thought she was quite cool—she was easy to talk to, easy to open up to. She was so determined to get me on—“It’s going to feel good when your son goes.” I am like mmm. “You know you can take a break.” He’ll learn something. She was quite outgoing—staunch. She texts me and she comes over—makes appointments—says better be home. (EPF Parent 3)

  Often I struggle for the food they come and help me go to the Salvation Army. (EPF Parent 4)

One parent had been taken to look at a number of ECE services and eventually enrolled in the Correspondence School.

  She keeps talking to me, encouraging me—we can go out—she gives me a chance to go out and have a look at some. She always makes a date when we can go. But it’s just me—I say I’m busy or I don’t hold my appointments very well with taking them to school. So then she suggested to me that Correspondence programme and that’s what we are doing now—now I am doing this and I am thinking about my boy and he is getting older and he needs to be at a centre so I am going to try and look for one [laughs]. (EPF Parent 2)
A consistent theme in parents’ aspirations for their children was for them to be learning, particularly counting and writing. Parents wanted to support their child’s learning, and to be shown how to do this. They were interested in hearing more from the teacher/educator about what their child learned in ECE.

These parents saw a place for their home language and culture within the ECE service, but held differing views about the emphasis to be placed on it. The two Pasifika parents wanted English-speaking services so that their children had a strong foundation in English language, while the Māori parent interviewed was keen for her son’s language and culture to be used.

EPF Parent 1 liked the children learning about New Zealand Māori, singing waiata and learning about different cultures. She did not like her child using scissors, which they were not allowed to use at home. This parent had a keen interest in fostering her child’s “learning”, but the examples she gave suggest that the learning that occurs in ECE was not being conveyed to her. She thought the children at kindergarten “are just doing their own thing” and that “the only time they learn” is at mat times. This parent liked her child to practise her ABC and counting at home where she herself “could see”. She wanted her child to have a head start at primary school. Her main recommendation was for the provider to show her activities she could do at home with her child. She had a friend doing the HIPPY programme, which she thought was good.

While the two Pasifika families interviewed regarded speaking Pasifika languages in the ECE service as valuable, they also wanted English to be spoken. A Samoan parent, (EPF Parent 4) spoke about wanting her child to learn English in order to be able to get a job.

I like English [ECE centre] much better [than aoga amata] ’cos the Samoan, you can’t catch the job over here—you always speak English in the jobs over here. (Pasifika mother)

Her first language was Samoan, which she spoke at home so the children understood.

EPF Parent 2 wanted an English-speaking ECE service. She did not want her child in a bilingual or immersion centre because she herself would not understand them. She was Cook Islands, and her partner was Samoan but she could not speak her own language (Cook Island Māori). “When they get older they can go learn the language.” She herself went to an English church, “that way I get a better understanding of everything I need to know, like them I reckon”.

A Māori mother, EPF Parent 3, wanted her child “to learn his Māori culture” and also English. She was critical that the ECE centre had “too many cultures going on there to confuse the child and so many languages”. She thought the focus should be on her child’s own Māori culture. Like EPF Parent 1 her main interest was in her child’s learning and she wanted the centre to tell her about this rather than “He’s really good and had a good day”. Like EPF Parent 1, this parent wanted to take part in activities with her son, such as singing.

Factors contributing to EPF effectiveness in addressing participation barriers
In summary, five main factors enabled these EPF providers to work well in addressing barriers to ECE participation.

First, the providers had extensive knowledge of the cultures, languages and beliefs of the target families, and had formed close connections with the community organisations, educational, social and health services, and government agencies in each community. The knowledge and connections were used in recruiting families and supporting families over a range of issues. These providers were able to help families in areas as diverse as housing, benefit entitlements, budgeting and counselling, as well as accessing ECE. Indirectly, improving a
family’s living situation can also help address some barriers to ECE participation; for example, improving a family’s financial situation through cheaper housing can help address a cost barrier. It may be easier for parents to attend to a child’s educational needs after basic needs for housing, good health and food are taken care of.

The providers’ knowledge of ECE services in the community enabled them to speak authoritatively with families about the match between particular ECE services and family needs and aspirations. Providers played a facilitating or brokering role in some instances, such as offering transport and going with a parent to view a service or enrol a child.

Similar to SP providers, there was a cultural match between EPF providers and families, and providers were able to communicate with families in their home languages. Personal attributes of coordinators contributed to their capacity to form strong, enduring and trusted relationships with families.

The Early Learning Plan was of some benefit in setting goals for children’s learning, but several parents were looking for more direct support on activities they could do to help their child learn at home. They wanted this from the EPF provider and/or the ECE service their child was attending.

Finally, providers varied their support to families according to individual circumstances and the phase the family was at in relation to the provision. It was common for providers to offer intensive support initially, and to withdraw the support gradually as families became equipped to do things themselves. This approach enabled families to take control themselves.

How the EPF initiative might be strengthened

Ensuring access to local ECE services

All EPF providers interviewed said that there is a need to ensure a suitable centre is provided within the community that is able to take a child who is recruited through EPF. The main issue was that the kind of ECE service that parents want in their community may not be available to them because of long waiting lists. The cost of ECE is another issue that prevents some parents from using a service.

We’re finding some of the whānau are wanting kōhanga but they’re unable to get into kōhanga because they’re maximum capacity or the majority of the kōhanga are charging. And I mean that’s just out of our hands.

Finding a centre that’s close, that’s in the community. For example [name suburb], they’ve got one kindy and they’re always chokka, so it would be good to have another centre that’s in the heart of the community that they’re able to walk to and be involved with.

The TAP grants and ICPPs are two participation initiatives designed to support ECE provision in target communities. These may over time reduce undersupply: any changes will be analysed as the evaluation progresses. One provider was hopeful that the ILCCE would enable general ECE services to support Māori families’ preferences for a culturally responsive centre.

With a family that want kōhanga, obviously we do offer that option and put them on the wait list but unfortunately that wait list could be like a year long. So we try and talk with our families and give them as best option as possible. So, for example, our other colleague is doing ILCCE project with a couple of centres and so we’ll probably take that particular family and let them into a centre that she’s working with. Because she’s doing the mahi with that centre they’re probably still going to get that kaupapa, kōhanga kaupapa that they’re looking for even though it’s not fully emerged but they’re getting it that way and then we’ll probably do some stuff at home through the Early Learning Plan to encourage that.
One provider had encountered resistance from existing services to the EPF families.

Not all of the ECE centres, but some of them probably could be a bit supportive towards the initiative. Find that some of them say, “Oh, we don’t have time for that”.

The Phase 2 evaluation will explore this issue further.

**Cost and transport**

EPF parents identified cost as a barrier to access and to attending for more than 20 hours. The enrolment policies of some corporate private centres required children to be enrolled for a full day or more than 20 hours and pay fees beyond a “free” or “nearly free” allocation, putting these centres out of reach of low-income families. Providers whom we interviewed said that cost was a major barrier that they could do little about, apart from telling families about fee structures and costs of ECE in their community, and parent entitlements to subsidies and benefits. The extension of free ECE was promoted as one solution.

One of the things is we’re all pushing participation in early childhood centres, you push school and you make school free so why if you’re pushing this thing, participation in ECE well, let’s take away the cost for that. If it was simple that’s what I would say. (EPF Provider 2)

Closely linked to low income was families not having transport to get to an ECE centre. Some providers arranged transport as a short-term measure or put families in contact with ECE services that offered this.

**Transience and relocation**

Families meeting criteria for EPF are sometimes transient and hard to keep in touch with. EPF providers might be encouraged to use means to keep in contact with families who move, for example through obtaining an alternative contact person at the time of enrolment. However, if the family moves outside the target community to a community where participation initiatives are not being implemented, they will be lost to the programme as it currently operates.

Others may have come into the area recently and be away from their home area that they know and understand. They may be Māori families who are not from that area.

A lot of them aren’t from [local iwi], they’re not from this area. I’ve got some from Ngāti Awa, Ngāti Porou just from everywhere, they’re not our typical [local iw] whānau. Who else? And I think that’s because in [local iwi] they know the place, they know where they’re going to send their child because they’ve thought or they’ve lived here and they’ve had experience or they’ve heard things from places. But when you move you don’t know “Where’s the good places? I’ll send them to aunty Joss up the road because I know….” A lot of those children that have come from town are non-participating kids. (EPF Provider 2)

**Time**

All providers commented on the length of time that it takes to work with “priority families”. Key challenges were said to be working through complex issues with families before ECE participation could even be considered.

We’ve got some families who are going through some huge stuff and it’ll probably be months before we can engage that baby into care because of the big stuff they are going through which is family violence, drugs and alcohol, Child Youth and Family are involved and then the kids are getting uplifted and then put back and then uplifted again ... and it’s just unfortunate that education is having to take a back step because we are having to sift through all of this….
Another pressure was from contract arrangements which were said to provide too short a time for completion of the first Early Learning Plan. If the provider rushed to do the plan quickly to meet the requirements, the parent did not have ownership of it. “Then it’s not their plan but mine.”

Enhancing quality and language and culture provision within local services
An iwi-based EPF provider thought that in order to cater well for Māori children, the quality of ECE centres and te reo and tikanga Māori needed to be strengthened in general, bilingual and immersion ECE services. Her view was that the iwi was providing good quality bilingual ECE. She said that some general ECE services needed to go beyond tokenism in te reo and tikanga Māori.

What are you feeding to our Māori and Pasifika tamariki that’s not just “Māori day” and “Pasifika day” because I’m Māori all the time not just for one day. (EPF Provider 2)

Ministry of Education support
One provider said she thought the Ministry of Education could have provided more support at the beginning through talking about the EPF initiative to organisations and ECE services in each community. Since EPF was a brand new initiative, she thought that it would have been helpful for MOE to talk about it on a deeper level with ECE services so that a greater understanding was built and the provider was seen as working alongside MOE.

Identity, Language, Culture and Community Engagement (ILCCE)
These support packages provide identity, language and culture support for clusters of services that have available child spaces and are not responsive to their community. There are currently three Identity, Language, Culture and Community Engagement initiatives.

Nature of ILCCE
The current ILCCE initiatives are run in urban localities.

One ILCCE is contracted to an organisation providing ECE teacher education and professional development, with the contract under the purview of the academic leader for professional development programmes. A team of professional development facilitators work with the academic leader to conduct the professional development in centres. The second ILCCE provider was a previous PPP [Promoting Participation Project] provider and is contracted to provide other participation initiatives. ILCCE was said to fit in well with the other initiatives, with past knowledge and previous relationships with centres providing a platform for community engagement.

ILCCE initiatives differ from other participation initiatives in that they focus on professional development of staff in ECE centres where there are high numbers of hours available although participation in the locality is low. The aim is to increase centre responsiveness to their communities and indirectly increase community participation. For ILCCE initiative providers the aim was said to be to improve responsiveness to Māori and Pasifika children and whānau. ILCCE providers work with ECE centre staff to increase their focus on local community.

It focuses really on the centres becoming responsive to the community so it’s slightly different to all the other initiatives which work directly with families. This is supposed to have an indirect effect. Our understanding is that if a centre is responding to the community, has a presence in the community, is seen as visible active agent in the community, then parents in the community will know about it and the centres will be their first choice.

By being responsive to their community, they’re going to get more enrolments, if the families are happy they’re going to recommend to other families, “Take your kids here”, they’re going to learn a bit more about their culture and identity and they’re really good, they engage with the community and it’s just a snowball effect.
The Ministry of Education selected the centres providers work with. All were identified as having hours available. Most are classified as corporate centres and are part of a national chain. The intent was to have providers work with a cluster of between five and eight centres. Initially one ILCCE provider had six but is working with four. The licences in one case merged so two centres became one and another centre opted out due to staffing issues. The second ILCCE provider is working with five centres.

The second provider noted that while a pool of centres was invited to participate in the initiative, a number declined. The key reasons for not participating were said to be financial, with centres that did not opt to join the initiative concerned that there would be costs associated with the professional development.

In addition to staff in the centres, one ILCCE provider is currently working with a regional director, with a view to potentially disseminating professional development wider than the initial cluster. However centre leadership, the managers and supervisors are seen as key in leading the move toward community engagement.

"It’s centre leadership—supervisor and manager—they lead community engagement—if they live locally then they make those connections but if that’s not happening the organisation as a whole doesn’t support it. Engagement is not led from the organisation level."

ILCCE providers report to MOE on how centres respond to three indicators or rubrics. These rubrics, developed by MOE, measure or identify progress in the beginning, at the mid-point of the initiative and at the end in terms of cultural responsiveness. They are based on Ka Hikitia, the Pasifika Education Plan and community engagement. Each rubric comes with a rating scale.

**Work with centres**

Initial scoping was done in gaining perspectives from community, families, staff and management. Having more than one participation initiative had benefits in enabling information gained from families in one to be used in the other. One of the ILCCE providers was also an EPF and SP provider. The ILCCE coordinator said she was able to use information from EPF families who had been into the ILCCE centre to feed back to centre staff.

"[The coordinators] will bring their families into centres to have a look around and it’s quite good that we can talk at work and say “What’s your family think of that centre?” and the family might say, “Oh it didn’t feel very friendly” or “The people didn’t really look after us”. And I can go to the centre and say, “We had some families that did come and have a look at your centre and they were a little put off by that the staff didn’t show them around.” (ILCCE coordinator)"

The ILCCE coordinator was able to provide quite quick feedback, whereas the interviews with families in the centres took time to arrange. Knowledge about centres could also be used in the initial selection of which centres might benefit most.

One ILCCE provider spoke of their professional development approach as two-pronged, gathering information from the community to feed back into professional development while also working with ECE centres around their engagement with the community using appreciative inquiry. Work with centres involved discovery or brainstorming to find out how they engage with community and where they gather their knowledge, followed by the dream or visualising what centres see engagement could be like in the future, then the intent is to look at how the dream or visualisation could be stretched or implemented in reality using exemplars.
The above ILCCE provider has conducted a survey of the community in both English and in the language of the largest Pasifika population in the community around the ECE centres they are working with in order to shape the work they will undertake with the centres. One of the objectives in working with ECE centres in the ILCCE initiative is to look at enrolment policies and how these can best support increased participation from local communities.

They can re-think on sessional or a few places for 20 hours and things like that that reflects their commitment to increasing participation in the community.

The second provider works one-on-one with centres either at staff meetings or within the centre around making environments more inviting to local families, including work around te reo, culture and pronunciation of community languages. The provider spends half an hour once a week with centres. Role modelling good practice was said to be particularly effective.

I do a lot of mat time with the centres and that’s so the staff can model off it. We spend a bit of time with the staff brain storming around what they want to achieve, what they want to get out of the project and all of them have said we want more resources.

**Strengths**

The two providers identified the following strengths.

- Providers have expertise and experience in professional development. The initiative is a good fit with organisational mandates. Providers have capacity to undertake professional development with ECE services, knowing factors that contribute to increased participation, such as providing a welcoming service, meeting cultural aspirations of families and offering flexible enrolment policies. The providers understand the kinds of professional development that are effective in provoking change that will address the interest of non-participating families.

- Providers have previous relationships with ECE services in the community they are working in. They do not have to spend time establishing these relationships and so can address issues about non-participation more quickly. These seemed to be already aware of factors in specific ECE services that constituted barriers to participation and were able to identify and work with these.

- For one provider the ILCCE work was complemented by work on other initiatives. An advantage was that the provider could convey information about reasons for non-participation straight from families to the ECE service. These are strong messages that are hard for ECE services to deny.

  We saw it as complementary in that we’re working with the whānau on one hand [on EPF] and we’re working with the centres on the other hand … with the EPF I can pretty much get the information straight way [from families visiting centres] and talk to the centre managers and the staff and say well this is the feedback we’ve had and….

- Facilitators are bilingual and have in-depth cultural knowledge of the communities they are working in. This is particularly important for encouraging participation of Māori and Pasifika families. We have found throughout this study that these families are more likely to relate to ECE services that incorporate their own cultural values and languages (where appropriate), The facilitators’ understandings can support ECE services to develop their own understanding.

- Good relationships are held with Ministry of Education staff.
• There is buy-in from centres and a willingness to change. MOE Best Evidence Synthesis on effective professional development in ECE settings (Mitchell & Cubey, 2003) found it was important for professional development to start with participants’ own aspirations, skills, knowledge, and understanding, and recognise the context for learning. In addition the programmes needed to introduce new ideas and provide opportunity for participants to question their experiences and views, and not simply validate them. This process was often assisted by an external facilitator.

   I think it’s the attitude they’ve all taken is it’s good to have an extra pair of eyes come in and look at our centre from a different perspective.

Issues
ILCCE providers found that the hours made available by centre managers for them to undertake professional development were largely between 3.30pm and 6.00pm in the afternoon. This is not a useable time for teachers/educators and managers to be involved because it is during the time that full day services are open for children.

Cost of ECE has been found to be a major barrier to families using ECE centres. Centres involved in the ILCCE initiative had fee-paying structures based on full day and full week participation, a barrier to participation for families who want to enrol part-time. There was no flexibility for children to be enrolled for shorter hours. It is costly for families of 3 and 4-year-olds to enrol full-time as the extra 20 hours is not covered by the 20-hours ECE policy. In addition centres offering 20 hours had supplementary payments so the 20 hours were not actually free.

   One provider noted that access to and cost of transport was an issue in families using the centres in the ILCCE initiative.

       A lot of whānau who have no cars or just one car and whoever’s working uses that and they can’t afford to bus their kids or too far away from the centre to walk so transport’s a big issue.

Buy-in to the professional development was said to be an issue. One provider noted that it was a challenge to shift practice and policy in centres that are part of a large corporate entity since policy was developed at a national level. Budgetary aspects, such as the cost of teacher release time, require ongoing negotiation. The second provider commented on the differences in perspectives between management and staff and the need to negotiate around these differences.

Another challenge was said to be the amount of time taken to set up the initiative, including gathering information and consents and getting buy-in from all parties before beginning to work on practice. With just 18 months to work on changing practice, the set up had taken almost a quarter of the time.

Some teachers were said to lack understanding of what quality looks like in an ECE programme through lack of exposure to good teaching role models and no mentoring.

       Teachers’ exposure, how they’ve been mentored—if they have not had the good fortune of engaging with highly effective centres how do they know about it?

Lack of understanding of and familiarity with different cultures was said to be an issue. ILCCE facilitators said centres had limited numbers of staff with cultural knowledge, Pasifika and tikanga Māori. One provider noted that the whānau they worked with would be more comfortable sending their children to centres where Māori staff members were employed.
The mindset’s probably there because what I’ve found with the centres is that it’s based around confidence, around any cultural aspect that’s not familiar to the person whether it’s Māori, Pasifika, Asian, Indian whatever, if they’re not familiar with it, they’re not confident with it so the mindset is quite set on … if you’re European you’re only going to familiarise with your own culture and it’s changing that mindset to accepting that … there’s indigenous people to New Zealand, it’s Māori, we’re bi-cultural and multi-cultural so it’s trying to get people to accept that and embrace it.

Other barriers to engagement impact on local knowledge:

1. High staff turnover and consequent loss of community knowledge.
2. Lack of knowledge around community resources.
3. Teachers and families with no local connection. Some families drop off and pick up children on their way to and from work and do not live in the community.

There is one centre that leases space from a church but none of the children from the parish come to that centre. That is because it is a business relationship—they haven’t bothered to build a relationship with the community and the church knows about the centre but no relationship … very insular way of being. What adds to it is the parents who have children at the centre also do not live locally so they do not have a connection. Drop off and pick up children on way to and from work—like a little island. Teachers are also not from the community. Going to be a big challenge—centre with highest spaces available—challenge to open those doors.

Through feedback from families in the community, providers have identified one of the key barriers to participation as the lack of welcome for parents when they approach an ECE centre.

While parents have indicated they would value their language in the centre and it makes them feel valued it isn’t necessarily the factor that will get them through the door—it is more that the teacher will smile at them, individually address them, invite them in, share with them what the child’s day has been like, what the child’s weekend has been like—find out—and generally warmly extend the families’ engagement with the centre.

Success

With the ILCCE initiative having started just four months previously, providers commented that it was still too early to share success stories. Nevertheless, in the participating centres, the staff were said to be keen to take part and have begun a self-review of the current level of engagement with parents and with the community. Providers also noted the following:

Centres becoming more responsive to families and whānau identity:

One of our centres, I’ve noticed participation has been very good, particularly from Māori whānau and it’s purely because of the centre manager and the changes that she’s made to the philosophy of that centre and how she’s responded to those families in that community.

One of the centres has taken it up [work facilitating relationships between centre and families] in lots of different things. They’ve created recipe books where they invite families to send in their traditional recipes and they have a cook that does all the food for the kids so she might pick out recipes from the book every now and then.

One centre that I worked with that there wasn’t anything inviting about the entrance, they’ve changed, they’ve put the greetings up, they’ve put little woven patterns around the wall and they said
what can we do for Pasifika? ... they’ll make their back wall a cultural wall and it will reflect every family in their centre, and they’ve started to ask families “What do you think we should put on our cultural wall for Samoan families?” So they get … they’re interacting more in terms of showing them that they’re trying to reflect identity within their centres so that’s been good.

Centres responding to family and whānau needs, i.e. regarding transport and the cost of fees:

I must say the transport has been awesome. So we’ve got two centres offering transport now and one of the centres has three vans, they started with one and now they’ve got three because so many families took up the transport option.

And the 20 free hours … four of our centres have gone on to the 20 free hours now. I mean that was probably an organisational thing because previously … one of them was [Name] organisation and one of them was [Name] organisation. Previously they [the national organisations] had policy where they couldn’t offer that but they’ve managed to change the management perspective and responded to community.

Ways were found to work with centres that had limited availability. One provider who engaged with teachers online to continue discussions had been effective in working around lack of teacher release time.

Enablers to participation

First and foremost, in order to encourage participation, the environment needs to be welcoming and to reflect the families and whānau in the community so that families can identify with it.

I went in and explained to one centre the concept of whakama and they had no idea what I meant. They were all Indian or Asian. I said when you have a Māori family that comes in, how do you greet that family? … they just said we go out and say hello, have a look around the centre … Whakama … it goes beyond shyness and when you have a Māori family that comes in probably the best approach is to say hello, check if they want a cup of tea or water or something and take them around the centre and show them the centre and explain the different aspects of the centre because they’re not going to want to walk around your house and have a look around, and if you just say hello and go and look yourself it’s like well, how much do you care about that person. And they’re like oh, we didn’t think about that because they’re just so used to being busy—got to stay here because the ratios will go down if I leave the floor.

ECE centres could develop local and cultural knowledge through building relationships with other ECE centres in the locality, particularly language immersion centres and kōhanga reo. Providers noted that improving visibility rather than operating in a silo, by building relationships with local services, was essential to understanding who the community comprises of.

Responsiveness to family circumstances and needs is important. Providers had some success in encouraging managers to change their enrolment policies to become more flexible and responsive to families with non-participating children, e.g., offering a few places for just 20 hours, or other part-time options according to family need.

How ILCCE might be strengthened

Providers made a number of suggestions about how ILCCE might be strengthened.

Identification of increased participation due to work by the initiative provider may be an issue, i.e. roll numbers are a tenuous measure as increases may or may not be due to the initiative. A preferable measure would include qualitative information gathered through parent and teacher interviews. This could be used to provide a context for MOE enrolment data.
The Ministry could use information from the RS7 to fulfill the requirement that ECE centres provide participation data on a monthly basis, including hours of enrolment for each child. This would reduce the time facilitators take in checking this with centres and reduce the paperwork for centres, supporting a focus on the professional development itself.

More clarity in terms of links to Ministry personnel, who to contact for information and what area of expertise the personnel have, e.g. if looking for advice on Māori or Pasifika, knowledge of who is the contact person would support providers and be valuable information for them to pass on to ECE services.

It would be useful to have Ministry compile and publish local information they have on local iwi including names and contact details and list of local kōhanga again with contact details. This would offer a resource for providers to pass on to ECE services that lists valuable people and organisations that the services might work with in a reciprocal way. Providers were encouraging such connections to be made. It would need to be kept up-to-date.

More professional development programmes on cultural understanding, including the opportunity for marae visits, made available widely, would offer a foundation for ILCCE work to build on.

There needs to be increased availability of Māori and Pasifika resources including books in a range of languages.

Increased and compulsory content on culture and language in teacher education courses was a final recommendation.

**Intensive Community Participation Programme (ICPP)**

**Nature of ICPP**

These community-led participation projects are being established to address the specific reasons children are not participating in ECE. According to the Ministry of Education, these projects

… are established in communities with the highest need. Communities with the lowest ECE participation require a community-based approach to address the specific reasons why children are not participating in ECE. Families often face a number of barriers to participating in ECE, and substantial changes may be needed to encourage and enable participation. Ideas to increase participation in ECE will come directly from the community with the Ministry of Education and other agencies working in support to ensure the best use of Government funding. (Ministry of Education, 2012)

Three ICPP projects began in 2010/11 in the Waitakere, Kaikohe and Tamaki communities. An additional project began in Hastings in 2011/12, after the Phase 1 data was gathered.

The projects began with a scoping phase aimed at identifying the needs and barriers to ECE and solutions to increase participation. University of Waikato researchers interviewed the people who undertook the scoping for the three established projects. Since then, the scoping phase of the Tamaki and Waitakere ICPP has been completed. An action plan based on the recommendations from the scoping report is in development for the Waitakere project. The Tamaki project is currently implementing actions from the scoping report. The final report from the community scoping phase is currently being finalised for the ICPP in Kaikohe.
Underpinning approach

We interviewed Scoping Providers from organisations undertaking the community scoping phase in Waitakere, Kaikohe and Tamaki. These Scoping Providers all took considerable steps to undertake research from an appropriate cultural lens, and to feedback and invite community participation.

**ICPP Scoping Provider 1** is a Māori health trust located in the community it is scoping. The trust undertook a formative evaluation and promised findings would go back to the participants. “People are fed up with a top down approach.” Hui were held in local communities to establish ICPP groups. All participants were Māori and knowledgeable about ECE and community. The group met monthly. It took a kaupapa Māori approach to the study, enabling voices of participants to be heard through focus group discussions and interviews, particularly focus groups of whānau who did not get to ECE. Stories were told. The ICCP group tested questions with whānau. It always reported back. A draft report has been written and was submitted to MOE in May 2011. The report makes some recommendations.

**ICPP Scoping Provider 2** is involved in part of a larger urban regeneration programme. The larger programme is based on community development principles and involves cross-sector working. This ECE project is specifically around ECE participation in the target community. The provider organisation is a church-based trust that is contracted to provide other MOE participation initiatives. We interviewed the coordinator of ICPP and the Director of Social Services. They each had extensive connections themselves within the area and relationships with ECE and family services. A previous scoping exercise had been undertaken through Families Start (now Early Learning Programme), which pays through MSD an early learning payment for children 18 months to three years, and entitles them to 20-hours ECE. However, provision does not match needs—“The problem is there are no places in ECE.” Results of a subsequent survey showed that “none of the ECE knew what the other was doing”. The organisation is funded to provide a coordinating role.

Feedback to the coordinator was about families being approached two, three, multiple times by multiple people so families were feeling completely overwhelmed.

The main feedback from the exercise has been that there are still not enough ECE centres, not enough information is available for parents, and some centres have their own rules around 20-hours ECE that require parents to pay charges and to pay for more than 20 hours. A strategic plan has been written. Funding is available through MOE for new initiatives.

**ICPP Scoping Provider 3** was asked to work with a community action group and undertake the scoping. The community action group included some agencies not actually working in the area and did not include families so the provider set out to make contact with families, initially through the schools. The three primary schools were most useful in offering information and finding families. The provider interviewed families, including some that were not participating in ECE. The provider made contact with key stakeholders by email, interviews, survey and group meetings. Following consultation, a confirmatory survey with proposed solutions was circulated within the community. An additional exploratory survey was circulated through school and other networks as a way to explore key issues with non-participating families.

One issue was that the geography of the area made it difficult for families to access ECE. A motorway cut across the community, and the steep streets made walking with children too difficult.
The provider said another key issue was that services were not coordinated.

[...]

For example, a kindergarten and playcentre were sited on school grounds, but the playcentre was only operating two days a week. An overture to rent the playcentre for a Tuvaluun playgroup was initially accepted but then rejected.

A third major issue was cost: the public perception of 20 hours free was that it would be free “but that was certainly not how they were delivered”.

A report has been written but had not been released at the time this Phase 1 evaluation was done.

**Barriers**

These providers all said the most pressing barrier for low-income families in their communities is the cost of ECE. In one locality, it was said that privately owned centres are very expensive and penalise families if they are five minutes late, requiring payment at a specified rate per minute (“a dollar or something even if you couldn’t help it”). Associated with cost, mainly in rural communities, is not having transport to get to ECE.

Other barriers are:

- insufficient provision of the kind families want - many families have specific requirements in terms of language and culture, te reo and tikanga Māori were said to be important for many Māori families, and services are not responsive to families;
- sometimes provision is being used by people outside the locality and local people are unable to get a place;
- some parents thought ECE participation would affect their benefit. They might still have partners and wanted to operate “below the radar”;
- there is an information issue—families do not always know about subsidies; and
- transitory families, who move around may not settle long enough to attend.

**Strengths**

MOE and Scoping Providers identified a number of strengths of ICPP.

The main strength is the ways in which ICPP is set up to be run from a flax roots level. Through the scoping phase and community relationships, it can find a story of what parents and families really think. It is evidence based.

The ICPP has not been set up to establish any particular initiative, so is open to developing in response to community need. The ICPP community project that follows from the scoping phase will have a budget and discretionary fund and should know what the community wants. A joined-up approach, working with the ECE sector and working with organisations will all be encouraged. The ICPP has capacity to move away from the market approach to ECE provision that has resulted in gaps and duplications in services, to planning and collaboration. Scoping Providers were positive about the approach. “I’m surprised by MOE. Really pleased they
are doing this.” (ICPP Scoping Provider). The ICPP approach was viewed by one Scoping Provider as a little similar to whānau ora because of its emphasis on consultation and empowerment. “It is about liberating whānau. They have been pushed, punched, whatever. They have lived under a type of racist system.”

**How ICPP might be strengthened**

Participants made a number of suggestions about how ICPP might be strengthened. One central issue at the time data was collected was the disconnection between the findings of the scoping report and action to improve provision. The main suggestion from Scoping Providers was for MOE to release and support follow-up on the findings of the scoping. However, since the data for Phase 1 was collected, reports have been finalised for Waitakere and Tamaki and these communities are in different stages of developing or implementing action plans. Kaikohe is still awaiting MOE finalisation of its report, over a year since the report was completed—a source of frustration for that Scoping Provider.

A general sentiment was that a community consultation model was valuable for all policy development and implementation. Participants supported an ICCP model being used more widely.

MOE policy could connect more with needs of the community, in policy and monitoring. This may be unrealistic, but if MOE is committed not to do a top-down approach that’s what will need to happen. (ICPP Scoping Provider)

Some MOE regional staff expressed frustration that the aim to get the participation initiatives out was so high in the first two years that consideration of community needs was not as thorough as it could have been. These staff members would have liked careful planning following a process of investigating community needs and using evidence for community planning, somewhat like ICPP.

Often our response to what we find out is completely not funded. (MOE regional staff)

A common view was that through better planning processes throughout communities, MOE could match supply with demand and work more effectively. Planning would also involve consideration of existing service operation and the mix of ECE services in each community being matched to need. Participants supported the idea of ECE services serving as community hubs for early education and a range of family support services. An issue emerging from consultations with parents is their desire for operating times to meet family needs, rather than fixed hours set by many ECE services that require children to attend for sessional or full-day hours. In addition, a particular criticism was levelled at the fact that some services (private corporate services were singled out) do not allow children to be enrolled only in the “free” 20 hours per week, but require attendance beyond that time, and fee payment from parents for extra hours. This situation puts these services outside the means of many low-income families.

Services need to be flexible in the times that they offer. They should not be able to require parents to sign up for 30-hours ECE in order to get 20 hours. (ICPP Scoping Provider)

One suggestion was for MOE to step in to intervene where buildings are on government-owned land to ensure these are fully utilised.
Flexible and Responsive Home-based Services (FRHB)

Nature of Flexible and Responsive Home-based Services

ECE Participation initiatives which focus on home-based care for ECE children (Flexible and Responsive Home-Based Care initiative—FRHB) are in localities where ECE participation has been identified by the Ministry of Education as low for Māori, Pacific and/or low socioeconomic families. Initiatives included in the evaluation are in large urban areas where participation had been identified as low for these populations.

Some MOE regional staff commented that this initiative came out of families wanting people to come to them, like HIPPY and PAFT, rather than home-based.

There is a huge group who don’t leave their babies under two, but who want to see someone who can show them things about how babies learn.

Underpinning approach

We interviewed two organisations providing FRHB. Both providers were experienced in home-based service delivery and had well-established processes in place to do so. The delivery of the FRHB initiative was said to be a “natural fit, as it was where [providers] were working anyway”. Ministry of Education staff said that requirements for FRHB provisions were to be culturally responsive, but no Pacific or Māori providers responded to the call for proposals. Both providers were connected to their communities.

HB Provider 1 employed kaiako to work in the community, overseen by a project coordinator. This provider said that there was a need for her organisation to reach more Pacific families. Both providers had community networks. Connections with social services, government agencies, schools and community events were used to reach families.

HB Provider 2 employed community support workers to deliver the initiative and a “visiting teacher” to work with families on educational content. “The community support workers are like the connectors in the community—very community based and connecting people.”

The FRHB initiative comprises two models. Model 1, which has one caregiver to four children, was described by providers as focusing on recruiting Māori, Pacific and/or low socioeconomic children aged zero to five who were not participating in ECE, or had not participated for at least three months. Model 1 is covered by the Home-Based Care Orders and ECE regulations. It was described as similar to HB Provider 1’s established programme, but with flexibility around fees.

At the moment we have a family who are trialling enrolment and we are negotiating $3.60 an hour for the educator and the fee for the family who doesn’t meet subsidy requirements is $4.05 but we are negotiating that. (HB Provider 2)

Model 2 was described as focusing on identifying non-formal care arrangements in the target communities, often children in the care of whānau, family or neighbours. There is one caregiver to four children.

Model 2 is a family that is already providing private care—with another child in the family environment. At the moment we have one where grandma is looking after her grandchildren and there’s another relation coming into the house. (HB Provider 2)

Model 2 was said to be aimed at transitioning informal care arrangements into formal care and education arrangements, often home-based care services that are covered by the Home-Based Care Orders and ECE
regulations. This was to be achieved by mentoring informal caregivers into a more educative role. Where families do not want care in a home, they were referred to other ECE services.

Task is to go out to the targeted area to promote, employ some educators, and caregivers that they could run the programme. Also to find young ones under five who have not been to a preschool before. It’s one caregiver to four children and they educate them in their own home. (HB Provider 2)

Overall, the aims of the FRHB initiatives were portrayed as

- to engage families in ECE. Community support workers were to be the key to connecting families with ECE, with the focus on flexibility: “What parents want and need and that caregivers are able to provide this”;
- to promote understanding of ECE;
- to identify non-participating children aged zero to five (MOE focus was said to be 3 to 5-year-olds); and
- to recruit caregivers, aged 17 years and over, to provide home-based care services. Two of the current caregivers recruited by HB Provider 1 had ECE qualifications and experience.

Delivery of the FRHB initiative fitted well with the providers’ philosophies of supporting communities in need and was an opportunity to work alongside or provide an educational approach in conjunction with social services when working with parents.

Already doing it … it was a way to be more focused on a community in need. We see ourselves as experts in home-based care. It was an opportunity to trial something different in communities we were already in and believed were doing a good job alongside our social services. (HB Provider 1)

Strengths

From providers’ perspectives the following characteristics were strengths:

- Providers are familiar with the nature of home-based care and experienced in provision of this. Thus, they have processes in place to support caregivers in providing both care and education in the FRHB initiative.
- The community approach works well, with community workers with networks in and family links to localities connecting with families from the same localities, building trust through pre-existing links in communities.
- Reciprocity of information exchange with other initiative providers in the target localities and with other agencies and services was an important factor in finding and identifying families with a child not participating in ECE and essential in meeting families’ needs for ECE.
- It’s about being responsive—not what can you do for us but what can we do for you. [We say] Have you thought about being a caregiver or educator or your child benefitting from being in…? (HB Provider 2).
- Placement of families in FRHB services improved accessibility of care for families, particularly large families with no transport.
Providers noted that while it was early days in establishing the FRHB initiative comment could be made on success in terms of successful engagement of some families. Comments included that once families were clear that the aim was to help the child rather than criticise their parenting, they became more engaged and open to participation. A few of the changes made included:

- families have changed food habits, e.g., the baby is no longer fed V energy drink; and
- areas of play are set up where there were none previously.

**Addressing barriers**

**Access to ECE**

Providers identified three main barriers that FRHB services could be reducing. FRHB is provided close to where families live and barriers of accessibility to ECE and transport can be reduced by placing children in these services. Where cost is an issue for children aged under three years, FRHB providers may be able to reduce this through negotiation of fees (Model 1) or provide it at no cost (Model 2).

FRHB is a preferred choice for those families who like their child to be in a home setting. These may be families who have babies at home and families who have a preference for culturally suitable care where the caregiver and family can be matched. Some families like FRHB because they want to be “under the radar”. According to FRHB Provider 2, the family may feel they are more likely to be noticed in a centre-based setting.

Nevertheless, FRHB was not the preferred choice of some of the families who were using this provision, according to some families interviewed and some FRHB providers who were surveyed about their provision. Lack of ECE places and long waiting lists in the target localities for those families wanting ECE other than FRHB services, particularly in language immersion centres, and those centres families were said to “feel comfortable in” (welcoming, inclusive services) are barriers to accessing centre-based ECE. The cost of ECE, particularly in corporate ECE and when services charge optional charges over and above the 20-hours ECE or require full-time enrolment are a real problem. For some families any cost was said to be too much.

**Enhancing engagement in ECE and community services**

It takes time to build relationships with families, but according to FRHB Provider 2, once families realise the provider is there to help the child rather than to pass judgement, they become more engaged in their child’s education. The coordinator/kaikako visited the FHRB caregiver at home, provided ideas on how to document learning and discussed what the children had been doing and how learning could be supported and extended. Note however, these discussions were held with the caregiver rather than the parent. It was the caregiver who was supported directly.

These providers had extensive understanding of social services, housing agencies and health services within their community and could put families in touch with useful services and organisations.

The trickle-down effect of FRHB came through caregivers modelling ECE for family and neighbours in the localities and contributing to improved understanding of ECE. HB Provider 1 talked about how understanding had been extended to others in the community through a caregiver who had been recruited for Model 2, the caregiver model.

The caregiver has her sister there as support and sometimes you will go in and there’s quite a few adults and they’ve come to have a look and see what she is doing with the children. (HB Provider 2)
Experiences of families

Interviews with families were hard to arrange because the provisions were very new. In addition, one provider’s coordinator had recently left and just been replaced. We interviewed one Pasifika mother from HB Provider 2 (“Educator” Model 1), one Pasifika mother from HB Provider 2 (“Caregiver” Model 2), and one Pākehā father and grandmother from HB Provider 1 (“Caregiver” Model 2). Their experiences were somewhat different.

**FRHB 1 (Educator’s model)**

**Pasifika mother:** HB Provision 2 was started in December 2011. The mother was encouraged to take her son to the home-based ECE by the coordinator. Her two-year-old attends one hour a day, two days per week.

> My barrier for my son’s ECE is transport and cost because I have to pay $4 for his school so that is why I only take him for one hour twice a week. (Pacific mother)

The mother thought the best way of helping overcome barriers was to organise transport and offer free ECE.

The mother has five other children, only one of whom had attended ECE. She noticed a difference between the achievement of her son who had ECE experience and her children who had not. She said it was important for providers to create awareness and encourage “our people” to participate. Home-based ECE was viewed as good for zero to three-year-olds, but after that this mother thought children “have to attend mainstream centres as they are well resourced”. Her ideal ECE would have good teachers, good resources and be free. The mother had been thinking of taking her two-year-old to a Tongan ECE centre but was not sure if that was good for her son or not since it “is only a Tongan one”. She had questions about whether the Tongan ECE centre was the same as a mainstream ECE centre and was not sure which could be more beneficial to her son. She did not know much about centre-based ECE in the community.

The mother had little involvement with her son’s home-based ECE education, but said that she made sure her school-aged children had what they needed for school. She identified benefits of ECE for her son—that children would achieve better at school, and for herself—that she would be free to do more work at home.

**FRHB Model 2 (Caregiver model)**

**The Pacific mother** from HB Provider 2 is the daughter of the teacher who runs the home-based service. The teacher is a fluent Tongan and Tuvaluan speaker and is ECE qualified. The children are three of the mother’s children and another child who is a blood relation. So this home-based provision is a grandmother looking after three grandchildren and another child who is related.

According to the mother, HB Provider 2 visited the ECE centre where the grandmother was teaching, and that one child was attending.

> [They] sold us the idea of home-based ECE and we like the idea so we started this ECE here at home.

The provider said that when the programme was explained, the grandmother was interested.

> But as soon as we mentioned that the parents were going to pay her for her grandchildren she said “Na—I’m not going to do that”. And that’s when we introduced the caregiver model. She can educate them without any pay and she is willing to do that. That is what is happening in our Pasifika communities—we don’t pay anyone in our families to look after our children. Part of our culture that we don’t pay our sisters to look after our children.
From the mother’s perspective, the arrangement is very good.

My mum with her experience in ECE liked this very much. I am very comfortable knowing that my children are very safe with mum at home, less worry for me. I know that they are well cared for.
(Pacific mother)

The mother said the home-based model was ideal for Pacific families because it is culturally appropriate - “This is not a scary way of involving our kids in ECE”. She stated her wish for more Pacific people to have training and to prefer this model. She thought the provision was well resourced. The main effect of taking part in ECE would be to:

help my children be successful in their education throughout. It will develop them intellectually to become better people in the society in the future. It will help them to fulfil their dreams in life.

Pākehā father and grandmother: A father and grandmother from HB Provider 1 were interviewed. There were three children in this family aged five, three and two years. The five-year-old is at school, and the three-year-old at kindergarten.

The father had had a break-up with the children’s mother, whom he said had P, cannabis, alcohol and mental health problems. The children had been in CYFS care for nine months and had been put into the grandmother’s care under section 101. The father had initially lived with the grandmother until a house next door had come up. The father said he gave the grandmother respite care, originally supervised but now unsupervised. He said it took “time to show I was a fit capable parent and not the problem”. There had been a possibility of incarceration but this had not eventuated, although there was a curfew on the times he could leave the property.

The father had been concerned about “where the children were at socially and developmentally”. He became involved with Provider 1 in December 2011 when he saw a flyer at the WINZ office. “I saw that [provider] thing and rang them up, and made a few inquiries.”

He said the provider had provided good information about how to handle behaviour management problems.

The kids had been through a lot, were acting out a bit. They had been removed from us, were quite aggressive to each other and us, didn’t know where they were coming from.

The coordinator had given lots of books and advice, coming into the house with toys for children and helping with any issues. The grandmother had been given a camera and encouraged to take photographs—she was enjoying this. The father was involved in his children’s education—he engaged [the provider], took his daughter to school, spent time at kindy, took a daughter to gym, and took the children to places like an animal farm where they can get some stimulation. He regarded the aim of ECE as being “to see children develop and see what their strengths and weaknesses are and what you can do about them”.

The father’s main recommendations were for more contact time with the provider. “Some months a lot is happening.”

The grandmother “would actually like to see the child go to daycare to mix with other young children. To give her the chance to socialise with other young children. That’s a big thing.” She had put the child’s name down at a centre but had to get CYFS approval. CYFS would pay for fees.
The father valued preschool as giving children a good start. He said more support should be given to low socioeconomic families who do not have money for resources. He regarded the main barriers to taking part in ECE for low-income families as being high waiting lists and cost. The oldest child had been put on a priority list at 4½ which enabled him to get into kindergarten when he first came home. The three-year-old was transitioned quickly into morning kindergarten five days a week. Kindergarten was free.

How the FRHB service might be strengthened

Participants described three main ways in which the FRHB initiative could be strengthened.

**Parenting workshops to support recruitment of parents**

One provider who had some difficulties in recruiting caregivers noted that parenting workshops would be useful when engaging with families who potentially could be caregivers for Model 2. In addition, parenting workshops had been suggested to MOE as a way forward with potential caregivers who had been identified as needing some further education around behaviour management.

It may be that parenting advice and support outside home-based provision could reach a wider group of parents. This could be organised from existing centres so that these centres are strengthened to offer an integrated approach and a pathway into formal ECE.

**Funding**

There was said to be a clash between what is required to work as an educator in Model 1 and cultural norms. Providers commented on the challenge they faced convincing Pacific and Māori grandparents working as caregivers to accept payment for care, that is, Model 1, thus limiting the possibility of transition from the caregiver model to an educative model.

The criteria for Model 2, intended as a transition model, presents certain barriers to resourcing for caregivers working in Model 2, the caregiver model. There is funding for community worker wages but no child funded hours. As one provider commented:

> We can provide bigger things like paint, easels and water troughs and things like that but in Model 2, this one, there has to be an expectation that she go out and get some resources of her own like crayons and paper. We are going to provide her with paint but I think she wanted crayons—it has to be a bit of a two-way thing.

Uncertainty around continuity of funding is an issue facing providers. With the establishment of relationships within communities so time-costly, providers face issues reaching targets prior to funding ceasing.

**Child age and policy intent**

The age of the children targeted for the FRHB initiative is birth to five years. Many families believe that children should be at home with their parents until two years of age. The policy intent is for a focus on participation of three and four-year olds, which is not reflected in the FRHB policy.
6. Discussion and conclusion: addressing the evaluation questions

In this concluding chapter, we emphasise the caveats to this study. We then draw on MOE national data, and data gathered from the participants in our study, to address the three evaluation questions:

- How effective has the participation programme been in raising participation in ECE?
- How well do the initiatives and their underpinning approach work individually and together to address the main barriers to participation in areas where there is currently low ECE participation?
- How well do the initiatives support parents’ engagement in ECE? How well do the initiatives support parents’ involvement with children’s education?

Two caveats are emphasised. The study is the first stage of a four-year evaluation of MOE Participation Programme. Data was collected when many initiatives were fairly new and some providers were at an early stage in recruiting families. Only limited changes in participation might be expected because providers need time to develop relationships with families and find out about their aspirations. Only one of the TAP-funded building projects had been completed and it was very new.

We were also limited in our access to parents whose children were not enrolled in ECE or who had been approached but declined to participate in an initiative. Apart from families enrolled in the EPF initiative who were not yet participating in ECE, providers were not able to put us in touch with these families. Two of our researchers spoke to families at the Pasifika Festival and PolyFest, but that was the extent of our evaluation with non-participating families. It is crucial to hear about the views and experiences of non-participating families since these may be different from those of participating families.

How effective has the participation programme been in raising participation in high quality ECE?

Research-based evidence indicates that two to three years of ECE participation in good quality ECE before starting school is beneficial for children (Sylva, Melhuish, Sammons, Siraj-Blatchford, & Taggart, 2010). This baseline stage for the evaluation study reported on MOE national statistics about participation for Māori and Pasifika children and in areas where the initiatives are operating. The national data offers information that can be used to track change over the evaluation period but it is too early to gauge effectiveness or expect to see shifts that might be attributable to the Participation Programme. Nor did we gather evidence about the quality of ECE services. This information will be a focus in Stages 3 and 4 of the evaluation.

As a baseline trend, national data show that in the last five years participation for Māori and Pasifika children has increased at a faster rate than for Pākehā/European children, but still falls well behind the participation levels of Pākehā/European children. The targets set in the Pasifika Education Plan for Pasifika children’s ECE participation were met in 2011. Since then, the Pasifika Education Plan targets for Pasifika children were revised for the period 2013–2017 and aim for the proportion of Pasifika children starting school who have participated in ECE to increase from 86.2% in 2012 to 98% in 2016. Prior ECE participation of Māori children starting school is almost five percentage points short of the 2012 Ka Hikitia target of 95% for children starting school.
As the Participation Programme makes a difference, we would expect to see changes in future levels of participation within the communities where the initiatives are operating, and evidence from parents, providers and MOE staff that the initiatives are a key factor in encouraging participation.

Early and emerging findings suggest that two initiatives, Supported Playgroups and Engaging Priority Families, are beginning to raise the number of Māori and Pasifika children in the target communities who are attending ECE. EPF is reaching three and four-year-olds, a group most likely to benefit from attendance at ECE if it is of high quality. Supported Playgroups are reaching children under three years of age whose parents stay with them at the playgroup.

The approach taken by MOE in deciding on location of the initiatives was to undertake a needs assessment of Census Area Units (CAUs) where the greatest numbers of children without ECE participation live. The needs assessment was supplemented by local knowledge held by regional MOE staff. Participation initiatives are then targeted to priority areas. Proportionately more children starting school without prior ECE participation were located in the most deprived territorial authorities and Auckland wards. These territorial authorities were the Far North, Whangarei, Hamilton, Rotorua, Gisborne, Lower Hutt and Christchurch. The Auckland wards were Manukau, Manurewa, Mangakiekie-Tamaki and Waitakere.

The targeting of initiatives to these communities will reach a substantial number of children without prior ECE participation, if the initiatives succeed in recruiting non-participants. However, some participants in this study offered cautions around a too tightly targeted approach. At this stage, the approach will miss children who are transient and move in and out of target areas, children living outside the designated priority area who nevertheless are not participating in ECE, and communities with many non-participating families that have not been designated as a priority. Rural communities where families are dispersed over a wide geographical area may not be identified as priority areas.

MOE data and local knowledge has been a prime determinant of the nature and placement of initiatives. Nevertheless, some questions about the nature and mix of initiatives available for use within each area were raised by some MOE regional staff, providers and families. The initiative did not always match what families wanted, such as those wanting a “drop-off” centre when a Supported Playgroup was available. Providers put forward constructive ideas about the value of offering choices of service type within a single hub, and a Pasifika provider is using a TAP grant to develop an integrated centre with access to health and social services. Internationally, there is increased focus on the provision of integrated child and family services that bring together interdisciplinary teams to provide a range of professional supports to children and families. These have been shown to strengthen and support outcomes for children and families.

A view from some participants was that even more local decision-making could be used in the design and choice of which initiatives are deemed appropriate. Rather than allocating nationally determined types of initiative, an alternative for discussion is to extend the idea of Intensive Community Participation Projects so that a local action group works with ECE services, local families and regional Ministry staff to develop unique plans for that locality. These ideas are consistent with the recommendations of the Quality Public Early Childhood Education project (May & Mitchell, 2009) in which a coalition of national organisations with an interest in early childhood provision developed an agreed vision and some long-term goals and strategies towards strengthening community-based provision. Amongst its recommendations were to “explore new forms of provision that foster collaboration between services, share co-locations and provide flexible services that incorporate different operations in a single service or can be relocatable” (p. 4). It recommended collaborative relationships in planning for ECE provision at local and national levels.
How well do the initiatives and their underpinning approach work individually and together to address the main barriers to participation?

The evaluation showed family aspirations and needs for ECE to be complex and varied. The main and most frequently occurring barriers to accessing ECE for Māori, Pasifika and low-income families are when local services are too expensive, not offering the hours that families want, not accessible because of high waiting lists or too far away. These were identified by all participants—families (participating and non-participating), providers, service coordinators and MOE regional staff. The cost of fees to attend a licensed service and inflexible enrolment policies is a barrier that some providers have worked with ECE services to address. Although recent studies have shown the very positive impact on affordability of 20-hours ECE and access for three and four-year-olds (Mitchell, 2008; Mitchell et al., 2011), the intention of 20-hours ECE to offer free or almost free education is being subverted by some ECE service providers who put up fees outside the 20 hours and are rigid about families having to use extra hours. Similar practices were uncovered in the evaluation of Pathways to the Future: Ngā Huarahi Arataki (Mitchell et al., 2011). These are unintended consequences. Some providers were taking small steps to change enrolment and fee-charging practices. One ILCCE provider reported getting management to begin offering 20-hours ECE (a change in management decision) in response to the needs of the community. Another ILCCE provider encouraged the management of an all-day centre to rethink enrolment policies to offer some 20-hour free places EPF providers knew about the cost structures of individual services in their locality and although they were not able to change costs were able to advise parents of costs and support parental decisions about where to enrol. These findings suggest that some responsibility could be reasonably placed on service management.

The smaller costs of attending a service, such as providing food, being able to afford transport or having transport, were being addressed by some providers. A TAP-funded centre was offering free ECE for 20 hours and providing lunch. Provision of transport is being offered by some providers with results in terms of getting children to attend, such as an EPF provider using a van to transport children and to take parents to appointments such as with welfare agencies. Transport is a deciding factor in whether to participate in ECE for some parents. The TAP initiatives and the Supported Playgroup initiative are both providing ECE services and/or expanding places in communities where there were many children not participating in ECE before starting school. The ICPP initiatives had only recently had scoping reports completed.

Another main barrier is the nature of locally available ECE provision. It was common for most Māori and some Pasifika families to want their own language and culture to be reflected in the curriculum. Pasifika families were likely also to want English to be a focus. Most families wanted an ECE service to be of good quality and a place where they and their child felt welcome. These findings reinforce the importance of finding out about family aspirations and needs in a community context. If ECE provision does not match and uphold these aspirations, it is unrealistic and perhaps not desirable to expect families to attend.

ILCCE is charged with offering professional development to enhance responsiveness to language, culture and identity, but the programme is not nationally available and its spread is confined only to centres where there is a willingness to accept the professional development services. The evaluation of Pathways to the Future: Ngā Huarahi Arataki (Mitchell et al., 2011) found the uptake of high quality professional development, usage of assessment resources, and employment of qualified teachers in teacher-led services interacted to support and sustain high quality provision and a curriculum open to drawing on the “funds of knowledge” (Gonzalez & Moll, 2002; Gonzalez, Moll, & Amanti, 2005) of all participants. Similar to findings here, some management in the strategic plan evaluation study refused their staff permission to take up professional development in working time. Other ways in which providers are encouraging responsiveness to language and culture is through their own provisions, such as Supported Playgroup provision, the provisions established by an iwi-based EPF provider alongside its participation initiative, and through provision established through TAP grants. TAP grant buildings
may take a very long time from acceptance to building through required planning and resource consent processes, as was shown in one of our case studies, but have potential to be responsive to local communities.

Personal reasons such as shyness, not knowing other people, not having information about services in the area and not knowing how to enrol featured as another range of barriers. Local providers who were from the local community seemed able to build relationships to help address these barriers. We noticed the efforts made to generate a sense of belonging and wellbeing, such as the SP provider wanting “the children to feel they are part of a club, and the adults to feel they are part of a club”. The providers’ examples highlight the significance of the Family and Community principle and the Belonging and Wellbeing strands of Te Whāriki (Ministry of Education, 1996) for this participation work.

The study found each participation initiative was individually addressing somewhat different barriers. ILCCE, SP and TAP were working to foster or develop culturally responsive provision that is attractive to families who want their own cultural values and practices to be integrated within the curriculum. EPF and FRHB providers used their local cultural knowledge in their work with families. ICPP scoping report providers undertook research from an appropriate cultural lens.

The EPF initiative targeted the broadest range of barriers, including cost and transport, motivation and support for families with housing and welfare issues. EPF coordinators played a brokering role in respect to ECE access. EPF families spoke eloquently of being supported by the EPF coordinator in these ways.

Supported Playgroups offered access to an ECE service, supported children’s learning and socialisation and offered families support with behaviour management and respite. It was a pathway into a licensed ECE service for some children, but its limitations were that it did not appeal to families who did not want to stay with their children.

Flexible Responsive Home-based Services did offer access to ECE and support for families in relation to parenting. They suited families who wanted their children to be in a home setting, families who did not want to be visible in a public centre and some who wanted their child to be in a cultural setting similar to their own home. Nevertheless, FRHB is not the preferred choice of some families who were using it because they could not access a centre-based ECE of their choice.

The underpinning structure common to initiative providers whom we interviewed was that the organisations themselves were community organisations located in the communities they were servicing. They reflected community cultural values in their approaches and work. Some were iwi-based; others were Pasifika organisations; others were Pākehā/European. These providers conveyed a belief that their work could make a positive difference in the lives of children and families to whom they were committed. They already held established networks with providers and services in the community and played a brokering role in respect to putting families in touch with these. An advantage for some larger organisations was that they held a contract to deliver a number of initiatives, or ran their own ECE, adult education or health services. In this way providers themselves acted as a lynch pin in linking initiatives to work together to meet community needs. These organisations could connect families with appropriate services, combine resources and offer some choice of provision for families.
How well do the initiatives support parents’ engagement in ECE? How well do the initiatives support parents’ involvement with children’s education?

Interviews with families suggest participation in Supported Playgroups and with FRHB and EPF coordinators are supporting parents to become involved in ECE and with their child’s education. Some barriers arising from negative experiences from parents’ own education are being addressed and parents have taken a first step to enrolling their child in an initiative or ECE. Parent comments indicated behaviour management skills were being learned, some families had changed to healthy food habits, the value of play was being understood better, and some parents were learning not to put down their child. The initiatives were contributing to parents’ involvement in children’s education through a variety of mechanisms:

- FRHB educators had support for children’s learning from coordinators, which in turn could be passed on to families. However, comments indicated that some parents wanted advice for themselves rather than to have their child cared for by another person who was receiving support for education.
- Supported Playgroup providers were offering opportunities for families to learn through role modelling and being encouraged by coordinators, and from being in the playgroup.
- EPF parents completed an Early Learning Plan with the provider, setting goals for themselves and their child. Nevertheless, some parents were looking for more direct support on activities they could do to help their child learn at home. They wanted this support from the EPF provider and/or the ECE service their child was attending.

No information is available about the quality of ECE provided—this will be a focus in a later stage. Nevertheless, it was notable that a few practices mentioned by parents that had been learned through a participation initiative, such as isolating a child in a corner as a form of discipline, are not constructive means to encourage the child to think for themselves. The longitudinal *Effective Provision of Preschool and Primary Education* project in the UK found:

> The excellent settings adopted discipline/behaviour policies that involve staff in supporting children in rationalising and talking through their conflicts. In other words a more problem solving approach was adopted. (Siraj-Blatchford et al., 2003, p. vi)

Some criticism came from MOE staff, providers and parents that the SP and FRHB model is that an ECE qualified teacher is not employed in these ECE provisions. One of the structural characteristics of a good quality early childhood service supporting child outcomes is that the adults working with children hold early childhood teacher qualifications.

Qualified teachers are likely to draw on their knowledge and experience of children and pedagogy to offer the kinds of cognitively challenging adult–child interactions that are linked with gains for children. The NICHD ECCRN (The National Institute for Child Health and Human Development Early Child Care Research Network) study (2002) using structural equation modelling, found a mediated path from structural indicators of quality (teacher qualifications and staff: child ratios) through process quality to cognitive competence and caregiver ratings of social competence. These authors suggest that “more caregiver training may lead to better interactions between children and adults, while lower ratios may lead to more interactions” (NICHD ECCRN, 2002, p. 206).

Arguably, qualified teachers are critically more important in working with children and families from the communities involved in the Participation Programme.
Conclusion
Early in the roll out of the Participation Programme gains were being made. Two initiatives, Supported Playgroups and Engaging Priority Families, had made a good start in recruiting non-participating families. Supported Playgroups had surpassed its targets for recruiting families. Engaging Priority Families, an initiative that works over time with the most vulnerable families, had recruited half its targets. Other initiatives were too new to evaluate in terms of participation gains because they had just been established when the data was gathered, or in the case of most TAP projects, building projects had not been completed.

Some of the barriers reside in the services themselves and the way they are operating, and providers were making some progress in addressing these with a few individual ECE services. This occurred where providers encouraged management to make operating hours more flexible to meet needs of these families, where costs were reduced and transport was provided.

But the barriers and multiple issues families have are very challenging. It is unrealistic to expect early childhood education to address the fact that a proportion of children under five live in the most economically deprived households in New Zealand. Family transience is another barrier that cannot be addressed by a single provider. Reliance on a coordinator to support families with external issues, such as happens with the EPF initiative, cannot offer all families such benefits and is dependent on the coordinator being available. The findings discussed here suggest that provision of accessible, free, responsive and local ECE services that meet family needs could offer a key means to encourage participation for these families. In isolated communities where access is problematic, provision of transport offers one way to enable children to attend ECE. The complexity and variety of family needs and aspirations, and the importance for families of connecting with external services and agencies suggests integrated centres and providers like some in this evaluation offering a range of services for children and families and connections with external agencies are valuable provisions.
7. References


## 8. Appendix 1: evaluation objectives, questions and sub-questions

<table>
<thead>
<tr>
<th>Objective 1: ECE participation for Māori children, Pasifika children and children in low socioeconomic communities. Data gathered in each phase, with in-depth focus in Stage 1 and Stage 2</th>
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<tr>
<td><strong>Evaluation question</strong></td>
<td><strong>Sub questions</strong></td>
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</table>
| 1.1 How effective has the participation programme been in raising participation in high quality ECE? | 1.1.1 What is the nature of participation for children in areas where initiatives are operating? (E.g., enrolment, hours of attendance, regularity of attendance in 20-hours ECE for three and four year olds, starting age, duration of attendance).  
1.1.2. Has there been an increase in ECE participation of:  
- Māori children in areas where initiatives are operating?  
- Pasifika children in areas where initiatives are operating?  
- Children in low socioeconomic areas where initiatives are operating?  
1.1.3 Are outcomes “value for money”? |
| 1.2 How well do the initiatives and their underpinning approach work individually and together to address the main barriers to participation in areas where there is currently low ECE participation? | 1.2.1 What is the nature of the participation initiatives and their underpinning approach?  
1.2.2 What are the main barriers and enablers to participation?  
1.2.3 What barriers do the participation programme initiatives reduce? Which initiatives? How?  
1.2.4 What barriers are the initiatives unable to reduce? How can the Participation Programme and participation initiatives be strengthened or enhanced? |

<table>
<thead>
<tr>
<th>Objective 2: Improved learning outcomes for participating children/tamariki and family/whānau. Data gathered in Stages 2, 3 and 4. Some data in Stage 1 on parent engagement in ECE and involvement in child’s education</th>
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<tbody>
<tr>
<td><strong>Evaluation question</strong></td>
<td><strong>Sub questions</strong></td>
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</table>
| 2.1 Have learning outcomes for participating children been improved? | 2.1.1 How well do the initiatives support children’s learning in ECE and in school?  
2.1.2. Have learning outcomes for a successful transition to school been achieved?  
2.1.3 Have the goals of Ka Hikitia been achieved? The goals are:  
- continue to increase Māori children’s participation in ECE;  
- improve the quality of EC experiences and education services attended by Māori children;  
- strengthen the quality of provision by Māori language ECE services; and  
- improve transitions to school.  
2.1.4 Have the goals of the Pasifika Education Plan strategy been achieved? The goals are  
- increase Pasifika children’s access to and participation, in ECE that prepares them well for school;  
- increase the quality of ECE experiences for Pasifika children;  
- increase effective engagement of Pasifika parents in early learning and ECE services in ways that are effective for children’s learning and responsive to parents’ and children’s cultures and languages; |
| 2.2 How well do the initiatives support parents’ engagement in ECE? How well do the initiatives support parents’ involvement with children’s education? | 2.2.1 What is the nature of the engagement and participation in ECE of parents in the initiatives?  
2.2.2 What is the nature of involvement with their children’s learning of parents engaged in the initiatives?  
2.2.3 In what ways and to what extent have the initiatives strengthened or enhanced these aspects? |
2.3 Have the initiatives been responsive to family needs for ECE?

2.3.1 What is the nature of family needs for ECE?
2.3.2 What processes are used to identify family needs for ECE?
2.3.3 How do the initiatives respond to these needs for ECE?

2.4 Have each of the initiatives and the participation programme overall addressed issues of identity, language and culture in the communities where the initiatives are being undertaken?

2.4.1 What does responsiveness to identity, language and culture look like?
2.4.2 What evidence is there that responsiveness has increased for
   - families?
   - ECE services?

Objective 3: Improved responsiveness to participating communities. Key focus in Stage 2. Data gathered in Stages 2, 3 and 4.

Evaluation question | Sub questions
--- | ---
3.1 Have the initiatives been responsive to community needs for ECE? | 3.1.1 What is the nature of community needs for ECE?
3.1.2 What processes are used to identify community needs for ECE?
3.1.3 How do the initiatives respond to these needs for ECE?

3.2 How does the community involvement support the development of ECE services responsive to the needs of the local community in areas where there is currently low participation?

3.2.1 What is the nature of community involvement?
3.2.2 What evidence is there that community involvement has supported responsiveness for
   - families?
   - ECE services?


Evaluation question | Sub questions
--- | ---
4.1 Have the participation initiatives contributed to quality ECE being delivered? | 4.1.1 What is the quality of ECE services provided by the initiatives and accessed by children through the initiatives?
4.1.2 What are the shifts in quality and reasons for these?

Objective 5: Ministry approach. Data gathered in each stage

Evaluation question | Sub questions
--- | ---
5.1 How did the role MOE played contribute to developing effective participation initiatives in areas of low ECE participation? Was the implementation of initiatives effective?

5.1.1 What is the nature of the participation initiatives, and of MOE and community involvement in development and delivery of these (including use of change identifiers, community involvement, inter agency collaboration)?
5.1.2 How effective has the implementation of the initiatives been? In what ways could this be improved? For
   - services;
   - families; and
   - providers.
9. Appendix 2: case studies

Supported Playgroup case study (SP Provider 3)

Based in a suburb of a regional town, this Supported Playgroup is located on the grounds of the local primary school. With one paid kaimanaaki and operating out of a pre-fab building, it has 28 enrolled children although numbers attending day to day fluctuate greatly. The playgroup is open for children four days a week and staff use Monday for planning. The SP is one of three initiatives (EPF, ILCCE and SP) provided by the organisation which has strong community links and is dedicated to Māori success.

The SP coordinator finds that their non-participating children in the community are predominantly Māori (which matches the surrounding demographic). The main barrier to participation in ECE is described as stemming from parents’ poor experiences with education and a reluctance to re-engage with this setting, regardless of understanding of how it would benefit the child. The SP coordinator identifies social and lifestyle factors such as poverty, unemployment, drugs and alcohol as common factors hindering attendance to ECE.

… it’s just the social problems that these people have, the parents have, pass on to the children and you know, if you’ve got a mother that’s hung over and not getting out of bed till 11 o’clock in the morning then that means that the kids isn’t going to. It’s that simple.

The cost for families attending is also an issue. Even though the Supported Playgroup is free to attend, the associated costs of transport and providing a lunch is often too much for the families and has an impact on numbers attending on particular days (often Tuesday).

Recruitment of families for the initiative has primarily been achieved by knocking on doors, flyer drops and actively going into the community and talking to people about the Supported Playgroup. The organisation staff have worked closely with services such doctors, school, social support services and kaumatua groups to build relationships and encourage referrals and participation in the playgroup. Surprisingly, they found it hard to build a relationship with the local kaumatua groups, who initially asked why they were not talking to parents of the children instead. This was a contradiction to the “expected” way the family hierarchy would work, with elders being an influential decision-making force. This provided insight regarding the generational breakdown that had occurred in this community and provided another level of challenge to education and recruitment of non-participating families.

Of key importance to the SP is the belief that it is not simply enough to attract and enrol children, but that there is a need to actively engage the whole family or whānau and create a change in attitude towards education as a whole. Within their target community are many parents who have had poor experiences of education. Despite understanding the benefits, they are often reluctant to engage in ECE. One of the aims of the SP is to help show these parents that their children do not have to have the same experiences, a factor that has also influenced the building of their curriculum. The SP has found that the initiative having no cost for the families has helped to enable initial engagement. However they are mindful that long-term engagement is required and have used the “free” aspect of the initiative to facilitate the building of relationships and gain trust within the community.

Key to these relationships and community trust has been the selection of their full-time qualified teacher. She has very strong ties to the local community and her authentic, non-judgemental, empathetic approach has been critical in the success of the SP so far. The provider coordinator identifies this:
She has young children herself so she’s a parent and she’s got that authenticity about her. She’s believable because what she’s actually teaching, and especially the overarching tikanga and the culture stuff, you can tell that she lives that, it’s not just something that she’s learnt from a book and it’s vital for those people, absolutely vital.

Connection to the community was also crucial in the curriculum development. The SP grounded this in reflecting the cultural values of the people they aimed to engage (predominantly Māori) as well as tailoring it to help reduce some of the attitudinal barriers found in the community. This enables the SP to provide fun and active learning that reflects tikanga and traditional environmental knowledge with the aim of engaging the whole whānau rather than just the child.

The SP uses a more structured approach than other playgroups to help provide a transparent, non-threatening environment where parents and caregivers know what is happening on a given day (such as kai day or preparing for school) and allows them to prepare or choose certain days that fit with family needs and interests (sometimes at a basic level of knowing the kids will be fed). Being on the site of their local primary school has also had a number of benefits for the SP. They have built a strong relationship with the school and have used the Year 1 teachers to help in the curriculum development to help achieve competencies needed for school. Having a more structured approach also allows them to utilise some of the primary school facilities:

- Having the relationship with the school means that we have access to that Year 1 class and we’re able to do more with the children, Thursday’s our preparing for school day. So they can go to the school library, they learn about how to behave in a library, that you be quiet in a library, that you don’t run in the library. There’s all those little bits and they may seem basic but the feedback has been fantastic.

It is not just the facilities provided by the primary school that has proven to be important. The SP has also found the strong relationship beneficial in providing them with support when working with the families they are trying to engage. The school, with its long history of working with the targeted families, has been able to reassure the SP that families not turning up is a culture of the community rather than being indicative of the SP’s appeal.

Overall, the SP has tried to foster a safe, non-threatening, positive approach towards ECE in their community.

What we aim for it to be is like a clubhouse. We want the children to feel like they’re part of a club and we want the adults to feel like they’re part of a club. And then that as they achieve things the achievements are acknowledged and celebrated and I guess it’s that whole being a part of a group thing, being a part of something positive and learning to be proud of who you are.

Teaching parents to be involved with their children’s learning, to praise and be positive, to have structure and routine, to be proud of their children and themselves is a big part of the ethos of this SP. To change attitudes and lifestyles to foster long-term change is as much a part of this initiative as is getting numbers through the door.

You’ve got to celebrate your wins and they may seem quite small but they’re actually quite huge to us. The fact that on any given day four or five parents or caregivers will text to say “I can’t come today” or they’ll ring the 0800 number and leave a message here. That’s a huge thing, that’s some sort of indication that 1) We’re interested, 2) we know it’s kind of important and we need to call in. We’re taking the initiative and calling in and that’s cool too.
ECE TAP provision case study (TAP Provider 2)

The following case study describes the planning of ECE provision by a TAP provider, including the reasons for the provider’s interest in delivering such an initiative and the barriers encountered along the way.

The participation initiative is the collective development of an ECE service for Pacific families, in particular Tongan, Cook Island and Niuean families. Two Pacific organisations have formed a trust to conduct the work associated with the development of two new ECE centres for 50 Tongan and 50 Cook Island families respectively. These centres will be located alongside an existing one for 25 Niuean families.

The location of the centres was decided in conjunction with the Ministry of Education and based on Ministry figures identifying the location where the highest numbers of Pacific children were not participating in ECE.

The provider said that their key interest in establishing the ECE centres was to improve life chances for children from their Pacific communities while supporting the development of cultural identity.

We see the opportunity to provide a good start in life for the Pacific children especially Cook Islands and Tongans and the earlier we start the better for these children. Research has proved that those children who go to ECE start ahead of those children who didn’t go, in primary level. That’s why we went into it. It’s an area we will persist and try to build more schools as a service to our community, to improve the status of our Pacific … community in NZ. It’s a way of trying to lift the standards.

The provider’s interest was underpinned by a philosophy of community development. The aim was to have integration of services, education, health and social services in order to develop the whole child for the betterment of future populations.

We [one of the Pacific organisations] have other services here—doctors, nurses, social services, Well Child and we will all try and integrate those services and deliver to the school [the ECE]. We have a Pacific nutritionist here and we have a gardening project, growing vegetables and things like that. So all that we will try and deliver to the school, do a little gardening project there, the Pacific nutritionist will have a programme with the children trying to teach them how to eat well, to avoid diabetes, heart problems, and things like that. We will try and develop the whole child, so when they grow up, if you’ve got the right attitude it helps a lot.

Families with children not participating in ECE in the provider’s community were identified by staff working for the provider through contacts in Pacific churches and through other Pacific networks and connections.

We did have two social workers who went around the community and identified parents whose kids could come to the school. There are also some [Pacific] churches and we got families through that. Our service began to be interested in school because our nurses went out into the community, they went out on projects like Well Child, asthma, youth at risk and it was through them that they found out there were young kids staying at home.

The provider said that issues, or barriers, preventing families from their Pacific communities taking children to ECE were transport issues, the cost of services and limited awareness of the importance of ECE for children’s learning. The provider also noted that some Pacific families in their community were not legally resident in New Zealand and parents were fearful of being identified.

Financial barriers and maybe a lot of them are not resident, they are overstaying here. I know the law has just changed and it doesn’t matter but still—I guess parents are worried about them being known by any person.
To me it’s the cost of transport and there is no public transport as such.

If people are convinced ECE is a priority for their kids they will forgo other things. They will do everything to make sure their kid goes to the school and go without some of the other things. I think having that mentality in parents is really important. There are still some people who are not convinced and that is why some of the kids are not [going to ECE].

It’s funding really that is the main problem for families…. There is two key things … if they [the government] can increase the budget to cover transport and also some food. Those are the elements to provide a really good quality education. Then people won’t be out of pocket to take their kids to school just pick up their kids, take them there, educate, feed them, take them home.

The provider noted that considerable delays had occurred regarding the construction of the new centres, caused by bureaucratic procedures relating to development of the new Auckland City Council.

We were told there was a piece of land in Manurewa, it’s a recreational area. Then we had to go through a lot of steps, this was since 2008, we started and formed a Trust, since then trying to get the piece of land, just got the land from the council now [took four years]. We received the funds this year, had to wait. One of the reasons was the change in the super city, back and forth, had to go back to square one. Started with the local council and had to put it in again, the lease was under processing from the local council. It has now been approved and we did the ground breaking on Friday. So we even started the building plans although waiting for the approval for the land.

While awaiting approval the Provider had, as well as developing plans for the actual building, begun developing operational processes, so that once the buildings were in place the centres could open. Staff were being employed, families enrolled and policies and curriculum developed.

We are working with Signature Homes, that’s the preferred builder of the Ministry. They [Signature Homes] have been designing the school and they will build it for us.

We are working, our committee, on curriculum, operational, we have already selected the principal and the teachers so as soon as the building is finished, we will move straight in. The documents are ready. We are already asking parents to come and register.

**EPF parent case study (EPF Parent 2)**

The following case study describes the way in which a parent of two pre-school children, the oldest aged three years, was supported by an EPF provider to engage with ECE.

Initial contact was made with the parent in a local shopping mall. Following the parent indicating interest in talking about participation in ECE, a community worker made visits to the family home.

I was shopping at the shopping centre and there some ladies going around giving out pamphlets and one handed one to me—I just gave my details to her and next minute X [community worker] came … [to my] home.…

She asked questions like if I want to put them in school and that but I had those issues that I didn’t want them to go. She kept coming and kept encouraging me that school is good for the kids and also a break for me.

The parent said that the issues, or barriers, preventing her taking her children to ECE were a fear of her children not being safe, as well as the cost of ECE, in particular being able to afford the type of ECE she considered to be
good for her children. Not being able to enrol for just the 20-hours free ECE at some services was also an issue as this increased the potential cost of attending.

I don’t want to be apart from the kids. I feel like if something happens out there in the world it will be hard for me to get them; whereas if something happens and they’re here with me it’s better.

To me … it was the best [a centre she had looked at]—they really looked after the kids…. I went there one day to check it out, stayed there the whole day to see what they do and that it was good, but they really expensive, $150 a week for one. So no thank you.

I just want him [the three-year-old] to go for that 20 hours but they don’t allow you, they want you to do more—no thank you.

The ongoing support from the EPF community worker was said to be key to the parent deciding to enrol her oldest child in ECE, at this point the Correspondence School, while she continued to look for a centre she was happy with.

So what happened then—she keeps talking to me, encouraging me … she gives me a chance to go out and have a look at some. She always makes a date when we can go. But it’s just me—I say I’m busy or I don’t hold my appointments very well with taking them to school. So then she suggested to me that correspondence programme and that’s what we are doing now—now I am doing this and I am thinking about my boy [the three-year-old] and he is getting older and he needs to be at a centre so I am going to try and look for one.

The parent commented that the conversations she had with the community worker helped her to understand what her children would gain from participating in ECE.

It’s just her encouragement and that helps me even though she’s not here I still think about what she’s been saying about what’s good for the kids … it’s the learning for them that is good. Being with other kids is even better and it gives you time out. So listening to other people’s experiences and listening to her encouraging me it all makes sense and I just gotta do it. I like it I got what she was talking about—been working with her two to three months.

When asked what she expected from an ECE service the parent talked about interactions with the children and good supervision:

I like to see them get along with the kids, like a one-on-one with the kids they did not let anyone out of their sight—you know if they are doing things they shouldn’t do there’s always an eye there somewhere—you know someone catches it.

The parent, whose children are Samoan and Cook Islands, did not want a bilingual or immersion Pacific centre.

I prefer Pākeha ’cos then they understand it, what’s going on. Whereas our language they don’t know—maybe they can learn but I prefer they go to the English one only ’cos I don’t speak the language at home.

The parent was clear that she would like to take time to settle her child in any new setting.

His first couple of days or his first week or so I would like to sit in a corner where he can’t see me but I can see him and see how he is and if he can go without me for a day or half a day just till he gets used to it.