Early Childhood Engagement of Culturally and Linguistically Diverse Communities

VCOSS Submission to the Parliament of Victoria’s Legal and Social Issues Committee Inquiry

October 2019
The Victorian Council of Social Service is the peak body of the social and community sector in Victoria.

VCOSS members reflect the diversity of the sector and include large charities, peak organisations, small community services, advocacy groups and individuals interested in social policy.

In addition to supporting the sector, VCOSS represents the interests of Victorians experiencing poverty and disadvantage, and advocates for the development of a sustainable, fair and equitable society.

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A fully accessible version is available online at vcoss.org.au/policy.

VCOSS acknowledges the traditional owners of country and pays respect to past, present and emerging Elders.

This document was prepared on the lands of the Kulin Nation.
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Introduction

VCOSS welcomes the opportunity to provide a submission to the Legislative Assembly Legal and Social Issues Committee’s Inquiry into Early Childhood Engagement of Culturally and Linguistically Diverse Communities.

The Victorian Council of Social Service (VCOSS) is the peak body for social and community services in Victoria. VCOSS members reflect the diverse community services industry and include large charities, peak organisations, small community services, advocacy groups and individuals interested in social policy. VCOSS supports the industry, represents the interests of Victorians facing disadvantage and vulnerability in policy debates, and advocates to develop a sustainable, fair and equitable society. This submission draws on the insights and expertise of VCOSS members, including organisations that provide ‘soft entry points’ to early years services, to build engagement and trust of vulnerable families and members of diverse communities.

Victoria is a vibrant multicultural state with a rich history of welcoming and celebrating different communities and cultures. VCOSS acknowledges in its submission that culturally and linguistically diverse (CALD) communities are not homogenous and are comprised of many unique languages, cultures and traditions. VCOSS also acknowledges that different stages of settlement of people from CALD communities will impact their needs and experience in engaging in early years services.

That said, it is a universal truth that engagement in early years services can build social connection and contribute to thriving communities. For example, when families feel socially included they are more likely to experience better health¹.

Participation and engagement in early years services such as maternal and child health and early learning can be the gateway to building social connection, developing important life skills, and accessing a broader range of services. This is a particularly important window - children’s brains undergo rapid development in the first five years of their life². It’s a key moment in time where foundations for later learning and good life outcomes are built.

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But children from CALD families, including refugee families, are less likely to attend some early years services such as maternal and child health\(^3\). Consequently, where children experience risk or vulnerability, they are less likely to be identified early\(^4\).

More than 25 per cent of Australian children have a language background other than English - a growing number. Early language learning benefits cognitive development. However, if children are not proficient in English, they are more than 90 per cent likely to be developmentally vulnerable in their preschool years\(^5\). Starting school without the skills to excel can have life-long impacts and contribute to a higher risk of disengagement from school, long-term unemployment and poor mental health outcomes\(^6\). Socio-economically disadvantaged children are also more likely to experience developmental vulnerability\(^7\), with reports showing children from refugee families and CALD families more likely to live in lower-income households and disadvantaged areas\(^8\).

VCOSS notes that community sector organisations are embedded in communities and have long standing relationships with community members. As such, these organisations are ideally placed to build trust and engagement with CALD families. There is an opportunity for government to leverage these relationships.


Recommendations

Increase awareness and access of services

- Build on existing community and social capital to increase awareness of early years services
- Better integrate knowledge of early years programs in settlement services
- Fund a ‘community connector’ or ‘peer workforce’ model
- Provide organisations and communities with funding to meet the full costs of volunteering management and support
- Consult with CALD people who experience multiple forms of intersectionality to understand how they feel culturally safe
- Support families experiencing vulnerability who may be facing cost or eligibility barriers to access affordable early years services
- Ensure every child can access early childhood education, regardless of where they live or the time of year

Culturally safe and appropriate services

- Provide community service organisations with affordable and accessible cross-cultural training as well as training in cultural safety
- Make trauma-informed approaches training affordable and accessible
- Integrate the use of bicultural and bilingual workers in mainstream services
- Develop pathways for people from diverse backgrounds to work in the community services industry through workforce development activities
- Provide accessible resources to address language and literacy barriers

Services as community hubs

- Increase collaboration between services to promote ‘hubs’ and soft access points
- Embed co-design with service users for place-based responses
- Fund service navigator positions
- Create spaces for parents to build connections by participating in group settings
- Ensure services are run in culturally safe and familiar places such as shopping centres and libraries
- Invest in greater collaboration between outreach services to reach places where families gather
Adequate and flexible funding

- Build in more funding flexibility to ensure services have the time they need to build trust and relationships
- Extend funding contracts to seven years
- Provide additional funding for interpreters
- Increase base funding for early years management to reflect the cost of running a service, including increasing levels of administration
- Increase the Kindergarten Fee Subsidy
Engaged communities

RECOMMENDATIONS

- Build on existing community and social capital to increase awareness of early years services
- Better integrate knowledge of early years programs in settlement services
- Fund a ‘community connector’ or ‘peer workforce’ model
- Provide organisations and communities with funding to meet the full costs of volunteering management and support
- Consult with CALD people who experience multiple forms of intersectionality to understand how they feel culturally safe

Access to and participation in services is the first step to ensuring CALD members of the community are engaged in early childhood services, however, engagement should also provide enrichment and social inclusion and be built upon foundations of trust and strong relationships. When families feel socially included it can lead to greater access and participation in services and have significant health benefits, however CALD communities are at particular risk of social isolation\(^9\). Parental engagement in a child’s learning can foster a positive learning environment and set children up for success\(^{10}\).

Families at different stages of settlement will have different experiences in engaging with early years services and may face different challenges. Families on refugee visas or asylum seekers may feel distrust in government institutions and data collection. There may also be cultural differences and understandings of services such as the benefits of early childhood education, while some families may not be aware of services at all. VCOSS members report some families who receive the Commonwealth Status Resolution Support Services payment or those who had a payment cut off can feel mistrust in engaging with formal structures because of their inability to enroll in kinder, access employment or mainstream services.

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Conversely, families who are not from a refugee background or who are part of more established communities may not experience these concerns.

**Build on existing social capital and connection**

Many established and emerging diverse communities have a wealth of existing cultural and social capital that should be harnessed. Word of mouth, hearing about a positive experience with a service from a community member, or learning about programs from community leaders are trustworthy and powerful avenues that already exist.

The power of these informal structures should be recognised and leveraged to increase awareness of early years services. Families who do not have relatives or extended networks in Victoria often rely on other families from the same community or community leaders for support and information. This is especially the case for families experiencing vulnerability, for whom trust is paramount.

Volunteers and existing trusted communication networks should be utilised to raise awareness of the benefits of services for mothers with newborns and early learning such as playgroup and kindergarten. These networks should also be integrated into settlement services and community organisations where people go to feel connected.

**Case Study:**

*One early childhood educator leverages the deep community connections of a Vietnamese community leader to speak about the benefits of early childhood learning via community radio. Having the message delivered by trusted community leaders via a trusted medium (a Vietnamese-language program on a community radio station) raises awareness in a way that is culturally safe. The medium also promotes word of mouth, which is an impactful strategy in CALD communities.*

**Support volunteer management**

CALD communities contribute substantially to their own communities and society more broadly through informal volunteering, including through providing peer support for newly arrived refugees. Peer support models and volunteer matching can help connect families to their communities, build confidence, and increase awareness of important services.

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Government must recognise that volunteering is not free. Volunteers require recruitment, supervision, training, reimbursement of costs, risk assessment and registration. In many communities, VCOSS members report an over-reliance on a limited pool of volunteers, risking burn-out or fatigue. This is particularly prevalent in rural and regional areas. The enormous contributions volunteers make benefit the community in many ways, but requires funding to support.

Funding should be made available to enhance existing community capital through supporting volunteers or formalising existing relationships to harness the lived experience and cultural understanding of volunteers from diverse communities.

Examples such as peer workforce models that employ people with lived experience to assist service users by using recovery-orientated, person-centred, and trauma-informed care\textsuperscript{12}, or community connectors that tap into existing trusted relationships\textsuperscript{13} should be considered.

Case study:

“Our work with volunteer leaders in the community enhances trust in the service Gateway Health is able to provide. When community see us consulting with those the community see as leaders, it enhances the trust that we respect existing social structures. For example, when applying for a grant, the community leaders may be called upon to select a steering committee rather than Gateway Staff selecting from those individuals they know of. As we follow these protocols, the community trust us, our brand and our outcomes.”

Gateway Health, Albury-Wodonga 2019

**Celebrate Victoria’s rich cultural diversity**

Opportunities should be created for CALD families to share aspects of their culture to build social inclusion and connectedness. Bilingual story time with traditional nursery rhymes, show-and-tell or a presentation from family members are all ways of creating better understanding, appreciation and acceptance in an early learning setting not just for CALD children but for whole communities.

\textsuperscript{12} Peer Work Hub, *Employer’s guide to implementing a peer workforce*, 2016.

\textsuperscript{13} Swinburne University of Technology, ‘Making Community Connections’, Swinburne University of Technology, 24 August 2018.
Engaging with community leaders and community organisations to build social inclusion in celebrations such as annual Harmony Day, or running regular culture clubs and celebrating important cultural festivals can build social inclusion and connectedness.

**Recognise intersectionality**

VCOSS acknowledges that people who experience intersectional discrimination face additional barriers to accessing mainstream services. For CALD families who experience language and cultural barriers, the intersection of gender identity, sexuality, or disability can present further challenges to engagement and access of early years services.

People from refugee backgrounds are more likely to live with disability due to experiences of conflict, torture and displacement and require additional support to fully participate in society\(^\text{14}\). When support is not available and people remain excluded from mainstream society, multiple forms of intersectionality can manifest in mistrust in institutions. Trust has been identified as a key component of encouraging and maintaining engagement of CALD communities in early years services.

Diverse communities experiencing multiple forms of intersectionality need to be consulted about ways in which they can feel culturally safe when engaging in services.

**Ensure costs are not a barrier to participation**

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VCOSS members report residency status as a barrier to accessing services without incurring significant costs. For families who are vulnerable or cannot meet those costs, both care givers and children risk increased social isolation and poorer health outcomes. For example, international students who rely on private health insurance are unable to claim on

pregnancy-related healthcare within their first 12 months of arrival in Australia, limiting affordable access to health care and perinatal services\textsuperscript{15}.

Many rural and regional areas rely on seasonal migrant workers. For communities to thrive, their families need to be safe and healthy. Vulnerable families should be supported in accessing affordable and appropriate services. The Victorian Government has already committed funding to support asylum seekers on bridging visas who were cut off from Federal Government payments. The Victorian Government should extend funding support to other vulnerable members of the community who cannot access affordable early years services.

Provide universal access to early childhood education

Universal access to early childhood education should mean that children are able to enroll and attend their local provider regardless of where they live and the time of year.

Transience is a challenge for families in accessing early childhood education. When a family moves their place on a waiting list is not transferred to a new area, they may have moved after enrolments have finished or cut-off dates have passed, or kindergartens may be full. This becomes more complicated for CALD families who face additional barriers such as language, understanding and navigating systems, or those who need soft entry points to begin engagement. While the Government’s Pre-Purchased Places go a way to ensuring some vulnerable children have access to kindergarten if they miss enrolments or move during the year, VCOSS members report vulnerable children from CALD families continue to miss out once these places are filled by other families.

Children who move in and out of care can also experience physical access issues and further disruption if they are unable to continue accessing the same service based on where they are being provided care.

VCOSS members highlighted the importance for some CALD families in having a positive first experience with a service, especially where a family may not feel a service is suitable for them or they lack the understanding of the complexities of a system, or experience vulnerability. Physical access barriers such as zoning, postcode eligibility, or kindergartens being full, a family missing the enrolment period or not understanding that there is an enrolment period, can all lead to a negative experience and reduce future engagement in a service.

CALD families in rural and regional areas can face further constraints in significant scarcity of available kindergarten services and places in suitable and accessible areas.

Case Study:

There are people in the community who do not know about kindergarten, including migrants who work in the agricultural sector. Children need to be enrolled by the time they turn one and parents need to provide a birth certificate. Enrolment forms are 20 pages long and can only be completed via the internet. Bendigo now manages the kindergarten enrolments. Places are scarce and children are being placed at kindergartens in outlying towns but with no means of transport. The low rate of kinder participation means some children starting school are unable to sit still and are just not ready. These children are missing out on early education and there is a need for a special program in Prep for these children.’

Culturally safe services

RECOMMENDATIONS

- Provide community service organisations with affordable and accessible cross-cultural training as well as training in cultural safety
- Make trauma-informed approaches training affordable and accessible
- Integrate the use of bicultural and bilingual workers in mainstream services
- Develop pathways for people from diverse backgrounds to work in the community services industry through workforce development activities

Services need to be responsive and flexible as well as welcoming and safe. This can be done by both improving the cultural competency and inclusiveness of organisations as well as increasing the diversity of the workforce. When services and workforces do not have embedded understandings of different cultural practices, CALD families can feel culturally unsafe and unwilling to engage in early years services.

At times, the evidence-informed guidance provided by Australian allied health professionals can differ from generations of cultural practice – one example is co-sleeping. There can also be different understandings of disability and associated with this, there can be stigma in identifying disability. If families feel their cultural practices are dismissed or disrespected, they may disengage from support, and their children miss out on valuable supports.

VCOSS members report that newly arrived CALD families may not understand the concept of disability and can have particular stigma around mental ill health\(^\text{16}\). If topics are not addressed in a way that is culturally safe, one family member or an entire family unit may oppose accessing a service.

Victoria receives approximately one third of the country’s refugee intake\(^\text{17}\), and many newly arrived refugees have suffered trauma. Community service organisations need training in


\(^{17}\) Victorian Government Department of Health and Human Services, *Refugee and asylum seeker health and wellbeing*. 
trauma-informed approaches to help prevent and address mental and physical illness, and social and relational difficulties. Effective services for this group can develop trust and understanding for newly arrived refugees accessing services.

Specialised workforces would benefit from training from workers within their profession to support the practical navigation of cultural competency training, i.e. maternal and child health nurses could receive training from a nurse in cultural competency as part of ongoing professional development and cultural competency training.

Developing organisational cultural competency should be a core continuous quality improvement process. All workers should be required to undertake cultural competency training and trauma-informed approaches training, to help them understand cultural differences and engage respectfully with culturally diverse families.

**Grow the bicultural and bilingual workforce**

Bicultural workers and bilingual workers can help bridge the gap between families and services and build connection. Bicultural workers can also encourage engagement of particular communities when they can see their culture and language being reflected in early years services. Successful examples of the use of bicultural workers include in supported playgroups and in kindergartens to help orientate new children and their care givers. Using bicultural workers in a specific space or for a specific period of time can be the bridge to trust, engagement and connection for some families. However, for others, building trust and engagement can take longer and families would benefit from the integration of bicultural workers as permanent team members in early years services.

Cultural diversity in the workforce is a significant asset to an organisation and can help build cultural competency across an organisation and feed into better understanding of access needs and inclusion. It can also improve levels of teamwork, performance and client service through a broadened base of knowledge and experience.

For example, VCOSS members have identified a gap in bilingual speech therapists and insufficient training meant children did not always understand the speech therapist working with them in English. Interpreters were also not aware of relevant terminology creating further disruption. Research has also found early identification of developmental issues may not be recognised for some CALD children when delays are mistaken with the challenges of learning a new language18.

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Families need choice and flexibility in the kind of service most appropriate for their needs. The needs and solutions in supporting CALD families to engage can change depending on different stages of settlement and geographical challenges. Members reported that while some families felt a bicultural worker or culturally specific playgroup enhanced their engagement and increased attendance of their child to a service, others reported that having a multicultural playgroup fostered greater social inclusion.

Community-led programs are proven ways of upskilling parents and caregivers from CALD families to grow the diverse workforce, while building engagement in their child’s learning. Programs like the Home Interaction Program for Parents and Youngsters (HIPPY) focus on the importance of parents and caregivers as first teachers, and provides the opportunity for some parents to receive training and employment. VCOSS members report high retention rates in the program among diverse families and caregivers feeling a sense of community in the program from the building a team from different cultures, with parents building their capacity to become tutors or coordinators.

VCOSS members also identify supported playgroups as another model that enables caregivers from CALD families to thrive in a supported environment, to go on to build their skills and training, contributing to a diverse workforce.

Another powerful strategy is investing in a diverse workforce. Pathways for people from diverse backgrounds to work in the community services industry should be more intentionally developed, including in early years services, through workforce development activities.

Provide accessible information and resources

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Resources should be accessible for all families. When caregivers have limited English or low levels of literacy in their first language, inclusion and engagement can be a barrier when the majority of materials are in written format. VCOSS members note families may have difficulty

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19 Brotherhood of St Laurence, Hippy Australia, Training and Employment.
obtaining relevant information about their child’s kindergarten activities or other appropriate services, and language can act as a barrier for teachers and educators to have informal conversations that build relationships and provide updates. Many families struggle with inaccuracy of translated materials and would benefit from visual ways of communicating\textsuperscript{20}, or through video resources made in other languages. There needs to be a move away from reliance on written resources to break down accessibility barriers.

For example, VCOSS members report that parents are often interested in engaging in English classes but it’s difficult if advertised in English, or that they miss out on the opportunity to build relationships through “school gate chatter” and informal conversations when there are not alternate accessible avenues.

Books that are translated into a home language can also foster greater inclusion of families in supporting their children. Parents reading to young children can have significantly positive impacts on the development of cognitive and reading skills, laying the foundations for success in later life\textsuperscript{21}.


\textsuperscript{21} Victorian Government Department of Education and Early Childhood Development and the Melbourne Institute of Applied Economic and Social Research, \textit{Reading to Young Children: A Head-Start in Life}.
Collaborative and coordinated systems

RECOMMENDATIONS

- Increase collaboration between services to promote ‘hubs’ and soft access points
- Embed co-design with service users for place-based responses
- Fund service navigator positions

Support the development of community hubs

VCOSS members report having a hub model can make access and engagement to a range of services easier for CALD families who may experience accessibility barriers, be unaware of available support, or lack the confidence to seek help. The integration of services in one place can promote collaboration between professionals working for the interests and wellbeing of children, can provide a soft entry point for families into a range of services, and can break down physical access barriers for families who do not have access to public transport or cars.

Where co-located services in one physical space is not achievable, collaborative hub models are a great way of structurally approaching cooperation and can be built on networks and open doors. Community hub models help promote a sense of belonging, greater connection within families, social inclusion and stronger relationships with staff. Collaborative hub models can provide an easier service access pathway and extra support for vulnerable families.

Community hubs should build on existing community networks (formal and informal) infrastructure and partnership platforms. They must reflect the different needs, priorities and supports of each different community.

Enabling factors for community hubs working well include embedding a bicultural or bilingual worker, and using place-based responses.

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Place-based approaches develop and implement community-driven local solutions to build resilience and social capital as well as achieve health and well-being outcomes. Place-based responses enable a greater understanding of what CALD communities value and the experience of cultural barriers, to embed solutions into design.

Developing and enhancing engagement and partnerships with diverse communities should be key aspects of all community hubs. Co-design and place-based responses are particularly important in rural and regional areas, where communities are place-based in nature.

Case Study:
In adopting the ‘Our Place’ model that integrates schools as community hubs, Doveton College is a place-based initiative that addresses structural causes of disadvantage and has a single entry point into early learning, school, adult learning and community spaces.

Doveton College has a diverse and often vulnerable student population with more than 50 nationalities and languages spoken within the school. There are also a significant number of students who have experienced trauma and require wrap-around supports such as formal mental health plans.

“[Doveton College] provides a wide range of wrap-around educational and allied health supports including baby college, maternal and child health services, play groups, medical and allied health services, engagement programs for children and adults, and adult learning opportunities...

Our Place provides participants with a whole of family learning focus.”

Doveton College has successfully seen improvements in the social connectedness of communities, improvement in children and family’s health and well-being, as well as children and family engagement in learning, social opportunities and skills and employment.

(Gregory McMahon, Strategic Director at Doveton College, Royal Commission into Victoria’s Mental Health System Witness Statement, July 2019)

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23 Our Place.
Fund service navigators

VCOSS members noted systems are complex and hard for those working within them and as such present significant barriers for people from CALD communities who do not have a good understanding of early childhood education. Different terminology, types of services and different gateways for accessing a service all add to confusion. VCOSS members also report that many organisations are already facing financial constraints and additional workloads for staff and do not have the capacity to provide the intensive support some families need in filling in enrolment forms or linking in to other services. Having a funded service navigator would remove the difficulties CALD families face in understanding which services provide particular supports and help overcome barriers to complex enrolment processes.

A funded service navigator role also acts as a soft entry point, meaning that when CALD families try to engage in a service, they are supported at the time they are ready and do not fall through the cracks. VCOSS members report that services being responsive and available at the time a family makes contact to build a connection is vital in engagement. If there is a delay in responding or returning a phone call, the family’s phone number may have been disconnected, may have changed, or their needs may have changed and an opportunity to connect is lost.

Engage people where they feel safe and comfortable

RECOMMENDATIONS

- Ensure services are run in culturally safe and familiar places such as shopping centres and libraries
- Invest in greater collaboration between outreach services to reach places where families gather
- Create spaces for parents to build connections by participating in group settings

Utilising space where care givers naturally gather (like kindergarten drop off) is a great opportunity for care givers to meet and cultivate relationships. When the right space is available, care givers can organically gather to create new opportunities, build social ties, share information, and encourage leadership and capacity building. This can increase feelings of social inclusion and enhance the engagement of families in their child’s learning.

Accessible and safe spaces for care givers to gather can provide opportunity for sharing and celebrating diverse cultures and facilitate learning new skills based on the aspirations of the group.
Promoting engagement and accessibility can be done through innovative means such as running playgroups in familiar environments where there is an absence of stigma attached. This can be especially important for families who may be experiencing family violence and have restricted movements, families who are unaware or do not identify with services (i.e. this is not for my family), or families who have limited social connections or limited English.

For example, Brimbank City Council runs a Shopping Centre playgroup that is informal, does not have a limited number of places, and has a bicultural worker. This informal setting can be a family’s first positive interaction with a playgroup setting and develop to engagement in more regular attendance of a program.

Services that work with mums and babies or young children can provide key foundations for building trust and early identification of risk or vulnerability. Some members of CALD communities who experience vulnerability including refugees and some newly arrived families may have traumatic backgrounds and experience higher levels of mistrust in institutions. These families need additional support in understanding and accessing services and would benefit from greater collaboration between outreach services. This means having greater coordination between community organisations so that outreach services go where families already gather.

Outreach services can be especially valuable for families experiencing family violence or mental ill health as there can be stigma associated with accessing services that are easily identifiable. Outreach workers can engage with families discreetly while building trusting relationships in safe spaces. Building relationships between staff across community organisations to better understand and facilitate outreach services is needed.

Brimbank City Council has a maternal and child health outreach bus. The bus is parked in familiar and accessible community settings, and families who might be attending a picnic in the park, visiting a childcare centre or shopping centre can access a consultation on a drop-in basis. As transport and disengagement have been identified as ongoing issues for CALD families, an outreach service such as a maternal and child health bus could be supported by a bilingual staff member to reach families where they are most comfortable.

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A sustainable and well-funded community service industry

**RECOMMENDATIONS**

- Build in more funding flexibility to ensure services have the time to build trust and relationships
- Extend funding contracts to seven years
- Provide additional funding for interpreters

**Provide organisations with sustainable and flexible funding**

VCOSS members reported more secure funding, and greater flexibility would help them be responsive and reflect the time and work it takes to build trust and relationships with vulnerable members of CALD communities.

Insufficient and inflexible funding can undermine trust and progress especially where trauma is present, and in some cases can cause unintended harm. It can take workers months or even years to build secure and trusting relationships with people. Short-term contracts, changes to funding guidelines and competitive tendering processes risk undermining these relationships. Short-term funding contracts also makes it difficult for organisations to retain skilled workers. Insecure employment forces workers to seek out more secure opportunities elsewhere, destroying the relationships they have built with communities.

The Productivity Commission suggests seven-year funding agreements would help community organisations be more sustainable and effective.\(^{27}\)

Funding models need to support complexity and accommodate extra time, including for maternal and child health nurses. Flexible funding means community organisations can be more responsive to their community’s needs, fill an identified gap, or fund a specific service, such as a bilingual support worker. VCOSS members reported that current funding models make it difficult to provide assertive outreach to engage vulnerable families. Community development is also undervalued, and difficult to secure funding for.

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As one VCOSS member said, “If you apply a cultural lens, it takes time to build trust. Then we build it, we aren’t resourced to continue working with you, and trust is further shaken. Trust concept doesn’t fit the model.”

Access to appropriate interpreters during peak periods was also raised as an issue. CALD families and services providers need access to appropriate interpreters to build trust and provide support. Funding should be provided to train sufficient interpreters to meet demand in peak periods.

Case Study:
“I worked with a woman who developed gestational diabetics and had to seek a Diabetes Educator. We don’t have one and her husband almost forbid the Insulin as it didn’t come as a request of Gateway Health.

Due to the complexity of the pregnancy, this woman had to have many scans to monitor growth (large babies are often a complication of Gestational Diabetes). The number of medical appointments and medical intervention was sometimes overwhelming for this woman. In contrast, her previous three pregnancies in Kenya, involved seeing a Doctor once or twice then birthed and returned home.

This pregnancy was different… it was the building of trust in a working relationship built with the client, as well as her husband, their children and extended family. The MCHN will be involved with the family [but the way my role is funded] does not permit me to be there past 6-8 weeks. However, this family, like other families will ask me or others who work in this space to help them with various factors in their life. My colleagues and myself do what we can”.

Gateway Health, Albury-Wodonga 2019

Increase base funding for early years services

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Early childhood learning should be appropriately funded to ensure all families have equal access and opportunity. Some CALD families including refugees, face additional challenges and disadvantage such as trauma and need additional support in accessing and staying engaged in early childhood education.

Over the past ten years a suite of regulatory changes (including positive introductions such as lowered child-to-teacher ratios) have not been met with increased funding, threatening provider viability. A recent report showed 66 per cent of community kindergarten providers surveyed did not believe they could continue to provide services for the next two year period without an increase in funding. Provider viability can be further threatened when a kindergarten has a significant percentage of its places filled by Kindergarten Fee Subsidy recipients. At its current rate, this fee subsidy does not adequately replace the parent fee and families in receipt of the Kindergarten Fee Subsidy may be more socially disadvantaged and be less able to contribute to organising fund-raisers to try and bridge the gap.

VCOSS member organisations report increasing administration costs that are not reflected in additional funding, and staff facing larger workloads and undertaking unpaid overtime as a result. At the same time, organisations are increasingly being relied on to provide vulnerable or disadvantaged CALD families extra support in completing enrolment forms or Child Care Subsidy payment eligibility requirements, to try and keep families engaged.

VCOSS members noted that many communities have ‘hidden disadvantage’ and as a result have limited capacity and may not have the same funding, collaboration and staffing as other communities with more visible or higher levels of disadvantage. Funding needs to reflect the spread of vulnerability and acknowledge the challenges that accompany engaging small pockets of highly disadvantaged groups.

Increasing the base funding for services to reflect the growing costs of providing an early learning service is vital, not only to ensure provider viability, but so services can continue to invest in professional development and training for their staff. When organisations are not funded to meet the costs of running a service, money is taken from staff training and leadership development budgets. Training is where strong inclusive cultures begin and if services are unable to maintain professional development for their staff due to insufficient funding and time, staff and communities miss out on the opportunity to build stronger relationships and community engagement.

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