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Responding to disaster

The tsunami tragedy in Asia has brought children and families into sharp focus over the past few weeks. The continuing devastation caused by the tsunami has reminded the world of the vulnerability of humanity and especially the needs of children and the families and others who care for them.

Child-focused organisations quickly set up websites to help families and professionals deal with distressed children in countries far away from the devastation. Parents and others were concerned about how to provide comfort, reassurance and stability for children whose closest encounters with the disaster were on TV. The horrors experienced by the millions involved in the disaster were almost too awful to comprehend.

The many international organisations involved in relief efforts for children and families—such as CARE, the Red Cross, Save the Children and UNICEF—sprang into action. Just as quickly, bogus organisations appeared on the Internet to scam money from unsuspecting donors. Worst of all were reports of the child traffickers who attempted and probably succeeded in abducting dislocated and orphaned children for sale into slavery and prostitution. Our history shows that special consideration must be given to child protection in relief efforts or children suffer.

Rebuilding schools and early childhood centres will be a massive effort and one where Australia's experience and proximity to the region will be invaluable. This has already started with organisations like the Australian Council for Educational Research taking a leading role.

Unfortunately, disasters like the tsunami strike all too frequently, although fortunately not on such a huge scale. Local and family tragedies such as accidents, bushfires and floods can be just as frightening and powerful in the micro-worlds of children. Just after the tsunami, the huge rain and snow storms in California caused considerable destruction and death. The TV images of people buried in mud slides, rushing water and debris, and cars being swept away were frightening. From the TV images alone, it was difficult to comprehend the scale of a disaster.

Today, images of disaster cases are streamed into our homes 24-hours a day and differentiating between them—without an adult knowledge of the world—is difficult.

Young children should not be watching news unsupervised. They need help to interpret images. Parents and caregivers should watch children's reactions and talk about the events with them. Some parents don't let children watch any news at home. The danger in this is that they will see news reports somewhere and this is likely to be really frightening without any previous experience in how to interpret them and without parent guidance and support.

A somewhat comforting thought is that young children's view of the world is less rigid than ours.

While disasters such as the twin towers, the Bali bombings and the tsunami shake our view of what the world should be, children's views are more plastic and not so well formed. They can be more open to alternatives. Frightening as these disasters are, they do happen, and regularly. Wars, natural disasters, death and destruction happen around the world on a daily basis. Global communications have brought them all to our homes. A less comforting view is that children might become desensitised to such horror and destruction given the daily diet of world-wide horror.

The National Association for the Education of Young Children (NAEYC) is probably the best starting point for information on helping children deal with disasters. Good publications are:

Discussing the news with 3- to 7-year-olds: What to do?

Helping children cope with violence

What happened to the world: Helping children cope in turbulent times

When disaster strikes: Helping young children cope

These are available at the NAEYC website: www.naeyc.edu.au. Other resource material can be found on the Child and Youth Health website: www.cyh.com.

Child care rebate

On the local front, the introduction of the promised 30 per cent child care rebate has been welcomed by many, but there is a sting in the tail. It now seems that the 30 per cent will come as a tax refund after tax returns have been submitted, not as a reduction in weekly fees. So children might well have left child care before parents see any money. Capping the rebate at \$4,000 a year per child came as a shock, especially for parents using expensive full-time care in capital cities. With full-time child care fees starting at \$16,000 plus per year, \$4,000 a year or two down the track won't be much help.

Less well understood, is that the 30 per cent child care rebate doesn't apply to families whose children attend preschool or kindergartens. So many parents, especially those who work part-time and use preschools for child care and early education, are still paying huge fees with no possibility of fee relief.

There is also the concern that the rebate will cause child care fees to rise and that it will not be indexed. The 30 per cent rebate is aimed at reducing child care costs for families. Lower costs usually result in increased demand. But because child care supply is limited, the supplier can charge a higher price to meet demand. So child care fees may well rise.

Tempering this demand is a trend for families to seek other child care options. While centre-based child care is scarce and many are concerned about its quality, families and especially more affluent families can access other options. More affluent families can afford for mothers to 'stay-at-home' or work part-time. They tend to have more flexible and family-friendly work places and they can afford a combination of nannies, preschools and early learning centres to meet child care needs.

The care/education divide

As I've mentioned previously, our two-tiered early childhood care and education system is problematic. We're in danger of developing welfare-oriented child care where quality is limited by what can be paid for by government fee subsidies and a second, independent early education system run by not-for-profit organisations or attached to private schools. Nationally, most preschools charge substantial fees. More affluent families can afford to by-pass child care centres and use only the educationally-oriented preschools and kindergartens.

We already have a care/education dichotomy that is enshrined in policy, funding and regulation. The danger is that current funding policies will further divide care and education services.

World-wide, every report on early childhood education and care highlights that quality is costly. Qualified early childhood educators are expensive to train and employ. Yet quality depends first and foremost on the capacity of staff and their ability to structure rich, elaborated interactions and learning environments for children.

Early Childhood developments

As we move into another new year, it will be interesting to monitor developments in the early childhood field. Nationally and in each state and territory, there are various reviews and initiatives underway. Later this year, the Early Childhood Australia conference in Brisbane will bring together early childhood care and education leaders from around the country and the world.

Throughout the year *Every Child* reports on movements in early childhood education and raises the issues that confront and challenge those who work with young children and their families. In this issue, our articles on tackling childhood obesity, childhood wellbeing, managing challenging behaviours, mental illness and fathering are all both topical and important.

As always, we welcome your input so please phone or email us with your comments, suggestions and story ideas.

A handwritten signature in black ink that reads "Alison Elliott".

Alison Elliott

Editor

■ Guest Statement

A promise to Australia's CHILDREN:

A guest statement from the Parliamentary Secretary for Children & Youth Affairs, Sussan Ley

THE CHILDHOOD SHOWS THE MAN AS MORNING SHOWS THE DAY.

— JOHN MILTON, ENGLISH POET, HISTORIAN AND SCHOLAR 1608-1674.

Since 2000, the Australian Government has been overseeing a 'quiet revolution' which has been changing the way the nation is looking after its children. At the heart of this is a focus on early childhood and the family unit that supports it.

Through the Stronger Families and Communities Strategy (SFCS), the Australian Government has invested a massive \$700 million in strengthening Australian children, their families and communities, through programs which will continue to reap benefits for the nation in the years to come.

The Strategy focuses on early intervention, prevention and capacity building to support and strengthen Australian families and communities. The key aim is to give communities help in developing local solutions to local problems.

It is not about throwing money at a program using a 'top down' approach but rather, giving communities the tools to get the jobs done themselves. More than 660 local projects were funded in the first stage. Almost one quarter of the programs were in Indigenous communities and more than half were in rural and remote communities. Part two of the strategy (\$365 million between 2004 and 2008) is focusing even more on the early childhood years.

The government has made an unprecedented commitment to early childhood initiatives through SFCS. Next year the government will move to finalise a National Agenda for Early Childhood with state and territory governments.

The National Agenda is an ambitious plan to link together and expand the work that governments, service providers, non-government organisations, academics, communities and families are already doing to improve the lives of children.

The Agenda proposes a holistic approach to childhood development, which puts children at the centre of social and economic decision-making. The Agenda has a vision for Australia as a place where young children are valued and have equal opportunities to be all they can be, now and into the future.

Work is progressing on an agreed framework for the Agenda in negotiations with the state and territory governments so that it truly reflects a national commitment and guides coordinated action to improve the life chances of young children and their families.

Our approach is influenced by local and international research, which leaves no doubt that the early years of a child's life will directly influence its future educational, career and health outcomes. Research shows that early childhood (birth – five) is a time when the child's brain is rapidly developing and the foundation for learning, behaviour and health over the life course is set.



There is growing evidence that well-targeted early childhood interventions can and do make a real difference.

Children need good nutrition and to be cared for in a nurturing and stimulating environment, and children who do not get a good start in life may experience problems in childhood that often extend into adult life.

Early behavioural and learning problems may lead to poor educational outcomes followed by poor employment prospects, low earning capacity, welfare dependence and poor health.

Indeed, increasing childhood obesity and significant rises in the rates of asthma and juvenile diabetes among children are some of the health challenges facing Australia, further emphasising the need for early childhood programs and promotion of healthy lifestyles.

'Our approach is influenced by local and international research, which leaves no doubt that the early years of a child's life will directly influence its future educational, career and health outcomes.'

Getting it right in the early years can also help avoid future reliance on welfare, substances misuse and becoming entangled in the criminal justice system. During extensive consultations with experts and parents on a National Agenda, we found effective early childhood intervention is not just about helping children – it is about supporting

parents, neighbourhoods and the wider community to give children the healthy start they need.

The SFCS has also helped to develop a social coalition, which has the potential to achieve community benefits beyond the scope of childhood assistance. The Government believes sound social policy can only be developed and delivered in partnership with business, communities and individuals.

This social coalition is critical to the development of new opportunities for families and communities beyond those generated by economic growth. All parties have a role to play in generating opportunities.

United States studies say that early childhood development programs are cost-effective and bring benefits for the child, family and community. It is estimated that between US\$4 and US\$25 is saved in the longer term for every US\$1 spent on prevention and early intervention.

Identified cost savings were: improved productivity, reduced spending on income support, preventable illness and costs to the criminal justice system.

As parents, we all know that our children are the greatest gift we will ever receive. It is important that as communities and families, we do not break faith with the hope of every child to have a positive childhood and be happy.

Sussan Ley

Parliamentary Secretary for Children & Youth Affairs

Letters to the Editor

Every Child readers are invited to express their responses to articles published within this quarterly magazine—passionate, opinionated, but well-considered letters are strongly encouraged. By publishing a diversity of opinions (which are not necessarily those of Early Childhood Australia), we hope to provide a forum which promotes professional growth, creativity and debate in the early childhood field. By encouraging letters, we would like to build a community around *Every Child*, where readers are involved and engaged. *Every Child* is for you—so let us know what you think!

Please send your letters, marked 'Every Child' to either: PO Box 7105 Watson ACT 2602 or by email to: publishing@earlychildhood.org.au

The tsunami/earthquake disaster in southern Asia

The recent tsunami has had a profound, direct effect on the southern Asia region, as well as causing grief and distress all around the world. Early Childhood Australia urges the public to support the innumerable children who have been affected by this natural disaster.

There are many aid agencies who have set up tsunami relief funds. A comprehensive list can be found at: <http://www.abc.net.au/news/newsitems/200412/s1273434.htm>. One agency, Save the Children, is a non-profit organisation who focus specifically on assisting children throughout the world. Further information can be found at: [http://www.savethechildren.org.au/\(Aus\)](http://www.savethechildren.org.au/(Aus)) and [http://www.savethechildren.org/\(US\)](http://www.savethechildren.org/(US)).

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Dr Colin MacDougal, Lecturer in Public Health, Uni. of Adel.

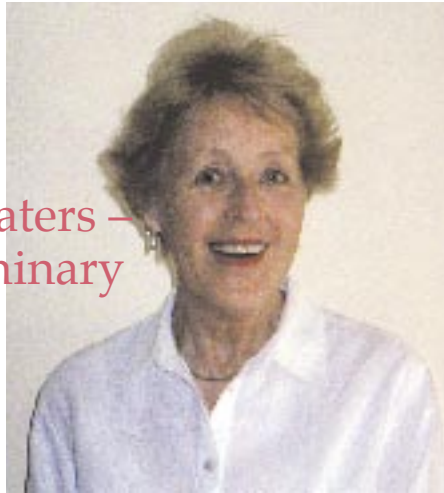
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Cool Kids Music



Q & A

Interview with Joan Waters – an early childhood luminary



1. What drew you to the area of early childhood?

When I was a teenager, our minister's wife (an ex-kindergarten teacher) asked me to help with the young children in the Sunday School. Seeing my pleasure and interest, she suggested that teaching might be a good career choice for me. I received several scholarships, which enabled me to leave the small country town where I was brought up and begin training in Melbourne.

2. Name two of the most memorable experiences you've had, whilst being in the early childhood sector.

The first one is a day at the Three-in-One program in Singapore. Based on the ground floor of a public housing apartment building, it provides services for preschool children (two-six), primary school children (seven-12) and senior citizens (55+). The experience convinced me that senior adults, working alongside child development professionals, provided a richness of experience not found in other centres.

The second was as OMEP World Vice-President, welcoming over 900 delegates from many countries to the OMEP Congress in Melbourne in 2004. OMEP is the World Organisation for Early Childhood Education. The Congress was a great opportunity to be with like-minded professionals, to learn about their concerns, their successes and their struggles – and to show them our Australian programs.

3. You've written a book about the great women in the early childhood field – tell us about this. Did it shift your view at all on the work women do in early childhood?

During the second wave of feminism in the 1970s, many books were written about pioneering work by Australian women in politics, sport, law, medicine and the arts. There seemed nothing about the women whose vision and stamina established our profession. My book [*With passion, perseverance and practicality*] was an attempt to fill this gap. As I researched their individual stories, I was particularly struck by the broad social justice perspective shown by our 'foremothers', and the energy and compassion they brought to their work. The period following WWII was marked by extraordinary optimism and enthusiasm for social equality and national

cohesion, and a multi-disciplinary approach to early child development, now seemingly lost. I believe it is important that we who follow have a collective understanding of our history, as it can inform thinking and action in these present challenging times.

4. What are the issues you're most passionate about right now?

I am concerned that even in a wealthy nation like Australia, many children are not accorded their rights, and that we have no Federal Children's Bureau or Children's Commissioner. In spite of our government's official support for the UN Convention on the Rights of the Child, children still suffer the effects of parental unemployment, gambling, drug and alcohol abuse. There are still children without adequate health and education services. There are still children imprisoned in detention centres. Still challenges to children's rights arising from the gene and embryo research programs. I would like to see many more early childhood educators take an active public role in advocating for children's basic rights – by speaking out, writing, networking, lobbying, protesting – on behalf of all children.

5. What inspires you about early childhood?

If you mean children in the period birth-eight years, then I'm inspired by the spontaneity of most young children and their ability to 'live in the moment'. If you mean the early childhood care and education profession, then I'm inspired by the carers, teachers and academics who continue their work in spite of poor salaries and conditions, because they appreciate the importance of the early years.

6. In your own childhood Joan:

a. What was your most magical experience?

The day the letters on the paper made sense. Our town didn't have a Public Library until some years after I left, but the Mechanics Institute had a dusty collection of books for

borrowing and our church library also had a children's lending section. I was probably one of the most frequent borrowers at both these places, reading adult and children's books without discernment.

b. Who did you most want to be?

For some years my heroine was Grace Bussell, a Western Australian girl who saved more than forty passengers from drowning when their ship was wrecked off Cape Leeuwin in 1876. I read her story over and over in the Victorian Reader Fourth Book, and imagined myself riding my horse into the swirling surf and returning time after time with grateful survivors clinging to the saddle (I had not seen the sea at that time, and indeed, still have not ridden a horse!). Later, Edith Cavell became the object of my fantasy play. My mother told me the story of the English nurse, matron of a Belgian hospital during World War 1, who was arrested by the Germans, charged with having helped 200 Allied soldiers escape to Holland, and was executed. I think I was inspired by bravery, but I'm pleased to say I've not had to demonstrate it!

7. When it comes to the education of Australian children, particularly in the early years, what do you think children most need, and what would you like to see more of?

Well-educated and well-paid teachers. I think we must eliminate the distinction between care and education by having some kind of graduated training system. While I studied in Pennsylvania, I had several periods of work in child care centres. All the staff members were called teachers – Level 1, 2, 3 etc. and paid according to their qualifications. Almost all were taking courses at night and in the summer to improve their knowledge. The daily program was a seamless whole, no such thing as a couple of hours of 'education' surrounded by periods of 'care.' Why couldn't this work in Australia? We have discussed this issue for many years, but seem to be unwilling to surrender our professional territorial boundaries.

8. Who are, or have been, the most influential people in your career?

First, Janie who showed me the possibilities in early childhood education. Then teachers like Frances Derham and Eileen Edwards; advisers such as Jeannie Sutherland and Beth Stubbs; writers like Lilian Katz and Loris Malaguzzi; and of course, hundreds of children whose lives I've shared for a time!

Joan's book *With passion, perseverance and practicality* was published by OMEP Australia in 2002.

The Early Childhood Australia Code of Ethics

THE ETHICS OF CONNECTIONS

Wise moral decisions will always acknowledge our interdependency: our moral choices are ours alone, but they bind us all to those who will be affected by them. So deciding for yourself what's right or wrong does not mean deciding in isolation.

(Mackay, 2004, p. 242)

When the Code was adopted, there was considerable discussion about whether or not having a code of ethics confirmed professional status for the sector. While this discussion was inconclusive, it did serve to generate debate and to heighten awareness of professional issues.



History

In 1989, a group of visionaries decided that it 'was time' for the national early childhood association – then known as the Australian Early Childhood Association (AECA) – to have a code of ethics. Their vision was achieved after wide-ranging consultations with the field over a 12-month period. In 1990, the AECA (now Early Childhood Australia – ECA) formally adopted its *Code of Ethics*, which many believed was a significant point in the history of the early childhood profession in Australia. The early childhood profession in New Zealand and in the USA also engaged in similar professional activity during this period.

Contexts for current interest in ethics

It is possible to identify considerable community interest in ethics across many different fields, including education, business and medicine. Community values concerned with professional conduct have changed as issues are debated and newly-shared understandings are developed. What was tolerated or condoned 20 years ago would now be condemned as unethical.

In the field of early childhood education, the work of international early childhood researchers such as Moss (UK), Dahlberg (Sweden), Rinaldi (Italy), Dalli (NZ) and locally, Kennedy, Newman, Pollnitz and

Woodrow have provided provocations that have stimulated discussion and debate. The 2001 *Australian Journal of Early Childhood* themed edition on ethics in early childhood education and the decision by the ECA National Executive to review its *Code of Ethics* are examples of the current interest in ethics.

Should we have a code?

There are those who argue against the need for a profession to have a code of ethics. Their arguments are based on the premise that ethical behaviour is a matter of individual ethical or moral autonomy and therefore codes are irrelevant and unnecessary. The opposite position argues that in professions such as early childhood, groups as well as individuals make ethical choices and a code of ethics can provide the context for that type of decision-making. In addition, those in favour of codes of ethics claim that individuals do not make judgements in an ethical vacuum, as individual ethical decisions affect others because of the nature of our interdependency.

What are codes of ethics?

Codes of ethics can be described by identifying what they are not. They are not, for example, the same as traffic regulations or the rules for a library user. These types of rules or regulations do not allow for the user's interpretation and are generally rigid in the way that they are applied: you were either late returning your books or you were speeding or you were not. The ECA *Code of Ethics* does not provide specific answers to ethical dilemmas as a book of procedures does. Instead, it signposts ethical alternatives for discussion.

Why have an ECA Code of Ethics?

Early childhood professionals are expected to work in partnerships with children and families which require considerable professional skills and understandings. Ethics are involved in these partnerships because the relationships are based on value choices. Values such as being respectful in the development of partnerships with families are embedded in the ECA *Code of Ethics* – which confirms their importance to the profession and families. Young children cannot choose the professional who will care for them in the same way that an adult

'Values such as being respectful in the development of partnerships with families are embedded in the ECA Code of Ethics – which confirms their importance to the profession and families.'

can choose which doctor to visit. This places the early childhood professional in a context of power and the child in a position of vulnerability. The *Code of Ethics* reminds the profession of these positions and the need for them to be taken into account.

Features of the ECA Code of Ethics

There are several features of the ECA *Code of Ethics* embedded in the document. The commitments within the Code are presented in a positive and personal way: 'I will' rather than 'You shall'. This positive approach supports the idea that the Code is not a 'rule book'. A further feature of the Code is that it is inclusive of all members of the Association whose qualifications, experiences, nature and places of work vary considerably. This inclusivity reminds everyone that ethical conduct is not the prerogative of the highly qualified or the most experienced. The Code also exposes the scope and complexity of our work as early childhood professionals to the members and the wider community. Value commitments to ethical relationships feature in the Code. This focus on relationships reflects the profession's concern for the importance of developing partnerships with families and children.

A timely review

It was the intention of the original *Code of Ethics* working party that there would be an ongoing review process so that the document remained relevant for contemporary professional contexts. ECA's decision to implement a review is timely for several reasons. Current and emerging theories in early childhood education and in the area of professional studies provide new perspectives on the child and family and on education, care and professionalism. These ideas need to be considered in the review of the Code. For example, the Code's principles focus on the child as an individual, independent and autonomous person, but more recent theories focus on interdependency and the idea that

children learn in collaboration with others rather than on their own. While the Code's focus on commitments to ethical relationships is important, these relationships are formed in order to provide the best foundation for children's learning and development. In highlighting relational commitments, the Code does not provide guidance on the ethical choices involved in the development of the learning environment, which includes the types of experiences provided, how the children's learning will be assessed and what will be considered as learning. In professional studies, current theories on leadership and the ethics of care for example, provide new insights for consideration in the reviewing of commitments in the Code.

Conclusion

Codes of ethics cannot be a substitute for debates and deliberation on ethical issues or the ethics in issues, but they can act as a catalyst or provide the context for the discussion. For example, a staff team in an early childhood service could consider a principle in the ECA *Code of Ethics* as a discussion 'starting point' at their regular staff meetings. They might select a principle which connects with a problem or issue they are dealing with, or alternatively, they could choose a principle to generate new understandings or to challenge a taken-for-granted practice. Codes of ethics cannot guarantee ethical conduct, but they may make it more difficult for someone to continue to act in breach of their profession's Code—especially when the profession or an individual member alerts them to the breach. Codes of ethics can help guide professionals as they deliberate on the ongoing question: What ought I to do?

Dr Anne Kennedy

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Monash University

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Reference

Mackay, H. (2004). *Right & Wrong*. Sydney: Hodder.

Further information about the Code of Ethics agenda is available at http://www.earlychildhoodaustralia.org.au/code_of_ethics_agenda.htm

Getting your copy of ECA's Code of Ethics

Early Childhood Australia sells the *Code of Ethics* as a laminated poster for \$13.95.

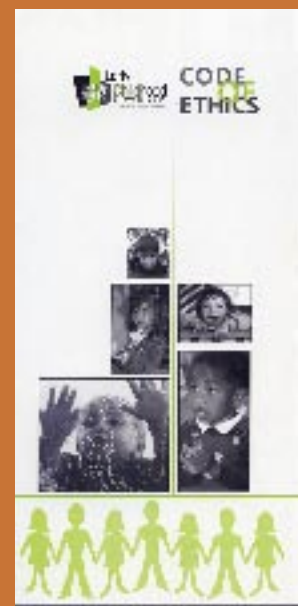
You can also purchase the *Code of Ethics* pack, which includes:

- **Professional ethics: The issues (Australian Journal of Early Childhood Volume 16, Number 1, 1991)**
- **Our code of ethics at work**
- **Getting ethical: A resource book for workshop leaders**
- **A Code of Ethics poster**
- **Ethics in action: Introducing the ethical response cycle**
- **ECA Code of Ethics brochure.**

The Ethics pack is priced at \$49.95.

To make a purchase, call Early Childhood Australia on:

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WHAT TO PACK

Chris Sarra – principal of Cherbourg State School, runs through the list of essentials for teachers when heading to an Indigenous community



As the summer holidays come to an end, most teachers and children are contemplating a return to school. Some teachers have to pack their bags and move to new schools, and some have to pack to move to new communities. This year, several teachers are packing their bags to commence 2005 teaching at Cherbourg State School in Queensland. Cherbourg State School is an Indigenous community school, and this would get some wondering about whether or not there is something different they should pack into their teaching bags. It is hoped that this article will provide some insight into the 'essential items' teachers should bring in order to be successful in an Indigenous community school. This information is not terribly scientific, but rather is based on very practical advice given to new teachers to Cherbourg State School over the last six years. Given the good progress of the school in that time, it seems quite valid.

'If you were sent to teach in our school, you would also be required to bring with you a sense of boldness. As we say, if you always do what you always did, you will always get what you always got. It is time that we got something different in Indigenous education.'

Firstly, it might be good to start with what *not* to pack. You should not worry about packing in an extensive knowledge of Indigenous culture and Indigenous cultural issues. In fact, it doesn't even matter if you have never met an Indigenous person. You must, however, be prepared to pack this in when you get to the community. It is crucial to develop an understanding of where children are coming from if we are going to develop a productive teaching and learning relationship. Like many schools in the country, a teacher must be prepared to get out of the classroom, out of the school, and into the community. As I have said to teachers coming to Cherbourg, there is no university, or professional development session, or textbook, that can provide a meaningful insight into the context of Cherbourg and its children. The only place one can get such an insight is in the Cherbourg community itself.

Teachers should also leave well behind any sense of belief that underachievement, school absenteeism and poor behaviour is somehow an 'Indigenous

thing', because it certainly is not. Often though, many teachers have found it easier to explain such issues by laying the blame on the cultural and social complexities of Indigenous children and their communities. In our school, teachers made significant progress by refusing to point the finger outwards, and rather, reflecting inwards and asking themselves the hard questions like, 'What is it that I'm doing that is contributing to such underachievement and what is it about my classroom that I must change to improve outcomes, attendance and behaviour?'

These are daunting questions and sometimes it's easier to think, 'Well if they are not going to make an effort, why should I?' The answer is this: we, as educators, have a responsibility to be in a relationship with these children; therefore it is clearly incumbent upon us as professionals to ask such difficult questions and respond to what we discover.

So what *do* we pack then?

Here are a few items that are 'absolute essentials'. They are quite simple, yet quite complex.

First and foremost, we must pack in *the belief that Indigenous children can learn* and achieve the same educational outcomes as any other child from any other school. If we genuinely do not have this belief, then, quite frankly, we should not be going in the first place.

We should also pack in *high expectations* of the Indigenous children we will teach. Implicit within this is high expectations of ourselves as educators and what we can achieve with our children. As Michelangelo said:

Having high expectations and not achieving them is much less tragic than having low expectations and achieving them.



Even if you aim for the moon and miss you still land amongst the stars!

In Indigenous communities and their schools, it's always crucial to pack an *open mind*. Often the students will be quite different to what many educators are accustomed to, and we must be careful that we don't measure them with the yardsticks that we use to measure non-Indigenous communities. As new teachers to Cherbourg quickly discover, the children are extremely inquisitive about their personal lives and ask many questions that non-Indigenous children wouldn't think to ask. Many teachers have been disarmed by little dark faces with big brown eyes looking up and asking questions like:

Have you got a woman/man?

How many kids have you got?

How come you haven't got a woman/man?

As you will discover, there is no hint of malice in such questions, but rather a genuine curiosity about you and, more importantly, a process of 'sussing you out', to see just how receptive you are to them.

We should also be open minded enough to embrace Indigenous education workers as co-teachers in our classrooms with a wealth of knowledge about the children and the community context. Such knowledge is of potentially more value than the knowledge we bring in with our flash tertiary degrees. Sadly this is one mistake that many new teachers make, particularly when both schools of knowledge, when blended together, make for an extremely powerful teaching and learning combination.

If you were sent to teach in our school, you would also be required to bring with you *a sense of boldness*. As we say, if you always do what you always did, you will always get what you always got. It is time that we

got something different in Indigenous education. As principal of our school, I tell my teaching colleagues that I would rather see them try something different and fail, than do the same thing over and over to get the expected results that we know are questionable. I would also prefer to see teachers that are prepared to completely throw their planning out and start again if they know it is just not working. This is a hard, but essential thing to do sometimes.

Actually, teaching in any Indigenous community is really hard work. The most crucial nexus though is always the teacher-student relationship. If the relationship is mutually respectful and positive, and each knows where the other is coming from, then there is significantly enhanced scope for learning. In fact, sometimes it's as simple as: if a teacher decides that a child will learn, the child will learn.

So there you have it. A few simple, yet complex things to pack on your way to an Indigenous school. It is worth reiterating these 'essentials': a belief that Indigenous children can learn; high expectations; an open mind; and a sense of boldness. (It wouldn't hurt to throw in some professional integrity, lots of passion, and preparedness to do 'whatever it takes' to make that thing go 'clunk' inside a child's head.)

On reflection, these are things that a great teacher would pack, regardless of where they are going. So if you're a teacher packing to go to an Indigenous community, don't go there to 'save', to nurture a sense of victim status, or to feel sorry for Indigenous children. Go there to enjoy the privilege that it genuinely is. And most importantly, go there to be a great teacher.

Chris Sarra

Principal
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Museums:

'Do it for yourself' professional development opportunities

Do you remember the first time you ever went to a museum? I have a memory: a huge black bear, stuffed and moth eaten, towering over me from the top of a long stairway leading up to a dimly lit room, crammed with cases full of birds' eggs and butterflies – a veritable 'cabinet of curiosities'. Each summer my grandfather would take me to this museum and I would always look forward to seeing the old bear with a mixture of pleasurable anticipation and fear. I didn't know it at the time, but this was a wonderful gift from my grandfather. Acquiring the museum habit early can have lasting effects:

One of the best predictors of whether or not an adult will go to a museum is whether or not she was taken to museums by her parents when she was a child (Falk, 1998, p. 39).

For too many adults, museums have played no part in their own childhoods or, if they did, the memory is a negative one. These experiences mean they are less likely to use museums as sites for children's learning. If this was your experience, you need to try again. Museums have changed! The time has passed when museums and art galleries seemed to be designed only for an 'elite' crowd. Australian museums are full of surprises and interesting things to do. If you take the time, there are endless opportunities to develop your professional knowledge-base (Kelly, 2002).

Early childhood educators are often accused of focusing more on the process than the content. Working with the youngest of children, we have little problem 'staying ahead' of them in terms of content knowledge. But this lack of daily challenge, requiring us to reflect deeply on discipline knowledge, can stifle professional curiosity.

'Museums have changed! The time has passed when museums and art galleries seemed to be designed only for an "elite" crowd.'

Many early childhood educators may also feel the pressure to focus narrowly on getting children 'ready' for the next stage. This orientation obscures the

value and potential of exploring the fascinating 'content' questions children bring to their everyday activities. We may also feel excused from dealing with these questions because of a belief that children will encounter and address them thoroughly in their more formal years of school. When we are asked why caterpillars turn into butterflies, or why this heavy thing floats and that light thing sinks, we may be tempted to provide an easy, superficial answer. Museums offer a wealth of information and access to the debates surrounding these kinds of questions, giving educators the confidence and knowledge-base to pursue them with children in more depth.



Here is a short list of reasons why you should treat yourself to a 'do it for yourself' professional development opportunity – an opportunity awaiting you in a nearby museum:

- Museums often provide 'Eureka' type experiences (Hein, 1998): those 'Aha!' moments when you finally, fully understand something that has eluded you for years.
- Museums offer access to knowledge and ideas at the 'cutting edge'. Experts in history, art, science, biology and so on are employed by museums to make their knowledge accessible through carefully constructed exhibits.
- Familiarity with museums makes it much more likely that you will feel comfortable about taking children on museum excursions and do so in a way that leaves a lasting, positive impression. An enjoyable museum excursion can set the stage for children's lifelong enjoyment of these valuable community resources.
- A mutual learning relationship with your local museum will benefit both your own and the museum's programs. Museum staff are keen to learn more about early childhood 'ways of doing things', an expertise that you can offer them, ensuring more specific and appropriate provision for this age group and for your group of children (Fasoli, 2002).
- Perhaps the most productive thing you can do is take a guided tour of your local museum, or explore the exhibits on your own, before your first visit with a group of children. Go through the museum with the sensibilities of a newcomer. Hunt for those activities and practices that will seem new to your children (Piscitelli & Anderson, 2001). When you have had a first-hand and direct experience with these new kinds of learning spaces, you will be in a much better position to help children learn from them.

Lyn Fasoli

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Regular

MANNERS MAKETH MAN

– WILLIAM OF WYKEHAM (1324-1404)

Manners are constantly changing, from one century and generation to the next: a handshake was originally meant to show that men were not carrying a sword or dagger in their hands; men still tip their hats because once, knights in armour lifted the visors of their helmets up to show their face; some of us may remember when a man almost always got up on a crowded bus and gave his seat to a woman. Certain manners do survive from one decade to the next because manners make life easier for everyone.



Minding your Ps and Qs

Manners – young children's social learning

The Social Affairs Unit in London talks about the value-conflicted society we live in with regards to justice, honesty, civility, democratic process and respect for truth; and therefore the need for manners education. We know, as social beings, that we cannot get along by ourselves and must interact with each other. Manners help us do this in ways that stop us from hurting each other, acting as polite conventions of social behaviour. Put simply, manners are based on custom within a cultural context. They are the consideration of others with common sense.

As parents and early childhood educators, we must avoid seeing young children as lacking in desirable skills and characteristics in relation to manners and polite conventions. Rather, we should see them as where they are right now. The classroom/playroom setting can be viewed as a miniature world where numerous and varied situations arise everyday. Knowing what to do and when to do it can help build children's self-confidence and help them to feel good about themselves. Children are not born with manners. Instead they are born with an 'in-built' desire to please, and so must be taught how to behave with politeness and courtesy. We as early childhood educators have a responsibility to gently guide children along this path. Basic good manners are not elitist – they are necessary everywhere. Reinforcing good manners contributes to

building children's self-esteem as long as expectations mesh with the child's age.

What role do children's services and schools play then as moral educators – when many children get little moral teaching from their parents? Or when value-centred influences such as extended family and the churches are absent from their lives? Children learn best through imitation. They model their behaviour on those around them. As educators, we need to model good manners to very young children: 'please', 'thank you', 'excuse me', 'I'm sorry', 'may I?' should be used around young children. We need to praise young children as they begin using manners with each other and the adults around them. Gentle suggestions and quiet reminders are both effective ways to reinforce what the children are learning through imitation.

Non-verbal cues are among the most important signals people send out about their feelings. We need to help parents understand that most times, a child is not impolite if they do not make eye contact and greet you on arrival. Instead, they are perhaps merely struggling with the transitional moment between home and child care/school. We also need to understand and respect cultural differences in relation to manners, especially in relation to greetings and table manners. In addition, certain cultures and ethnic groups condition their children not to look adults directly in the eye because this feels disrespectful.

There needs to be more talk between parents and early childhood educators about expectations concerning manners, and support in understanding how children learn manners and what to expect from very young children. Expecting a two-year-old to chew with their mouth shut is almost impossible as they will not have the understanding or physical coordination to comply. By four or five however, they should be able to understand the reasoning behind such a rule. Young children learn at a rapid rate – but until they cognitively understand the reasons for courtesy, they will need many gentle reminders.

Parents have many opportunities to reinforce manners through their everyday life at home – as role models, at meal times, telephone calls, birthday thank yous, public outings etc. These will reflect the established values that are important to them as individual families.

Young children are not being deliberate in their lack of the use of manners, but just need more time, more praise, and more role-modelling by the important adults in their lives.

We in children's services and schools can support children when we understand our own values and customs in respect of manners. We can then learn to respect and understand children.

'Expecting a two-year-old to chew with their mouth shut is almost impossible as they will not have the understanding or physical coordination to comply.'

Learning common courtesies and manners – the social norms – will prepare children to feel confident and comfortable as adults to live in any place in our complex world. That must be our goal. This learning begins with very young children and continues throughout life as a shared goal between parents and educators. Manners must not be confused with respect. As early childhood educators, it does not matter what children call you, it's how you relate to each other that's important. Giving children authority, respect and confidence – that's manners.

Judy Radich

President

Early Childhood Australia

Values education? It depends

'Values education', 'character education', 'virtues education' – choose your terminology. Values are 'in' these days. Our politicians want values to be taught in schools, and so do the majority of parents. State and territory departments of education have formulated sets of 'core' values for schools, and we now have a Draft National Framework for Values Education.

Discipline in schools is a growing challenge. Studies indicate that at least a third of all teachers quit teaching within three years because of problems with behaviour management (Charles, 2002, p. 4), and we all know about continued delinquency and teenage drug and alcohol abuse. It is clear that our younger generation can only benefit from being taught values as directly and as early as possible. Or is it?

Not necessarily. To be upfront, perhaps the opposite is the case. Let me take you into an Australian primary school I was at recently:

It is Monday morning and the whole school is gathered for assembly. 'Congratulations to our students of the week,' the principal announces into a scratchy microphone. 'These students have all made an effort and shown good manners.' Later, in a classroom, a teacher asks what you must do when you want to say something. 'Put up your hand!' the children reply in unison.

Unfortunately, examples such as these were the *only* examples of values education I witnessed over a long period. In other words, values education in that particular school was based on the traditional-instructional teaching model, which sees students as vessels into which the teacher pours knowledge and information. So, what then of the unambiguous body of research telling us that children learn best when they can construct their own knowledge?

Those in favour of the traditional model might argue that 'constructivism equals anarchy', where 'anything goes' and there are 'no objective facts or realities'. Constructivism, however, contends that it does not matter how true or factual something is to the teacher if there is nothing that makes it true or factual to the child – who has not had the opportunity to experience, digest or, indeed, *re-construct* a fact or truth.

A hexagon has six sides. This is not up for negotiation. The question is: will this fact merely be 'imparted' to students, or will an opportunity be created for students to build a hexagon out of concrete materials and thus to experience the fact first hand? This is the difference between the traditional transmission model and constructivism. It is a question not of relativism versus a core curriculum but of whether students are given opportunities to learn the core curriculum through inquiry – physically and emotionally, as well as cognitively.



My point is not that this isn't well understood these days with regard to acquiring knowledge in general. It is that, if we have largely accepted that acquiring knowledge best comes about when we engage children in experiential and critical inquiry, how is it that so much of our values education still resembles the outdated teaching model of transmission? Values education may be high on the agenda, but it seems that—in our well-intentioned fervour—we easily revert to the old habits of behaviour modification and didactics.

Alfie Kohn (1997), the influential American thinker and educator, also argues this. He believes that true values cannot be imparted via behaviour modification but must be co-constructed via a 'community of inquiry'. He thinks behaviour modification, based as it is on conformity, is counterproductive to the bigger picture of developing learners who can think for themselves and who are originals rather than pawns. My argument, on the other hand, is that the one does not exclude the other. Any early childhood educator will attest to the need for some form of behaviour modification when dealing with young children. We cannot expect young children to rationalise appropriate behaviour only from within. Behaviour modification is as needed as constructivism. It depends on how it is done.

To make behaviour modification work, it helps to have a deeper understanding of its true goal. Behaviour modification creates rules and structures that keep everyone safe. It allows children to develop second-nature knowledge. Students in primary schools must know their times tables. They need to have good manners. Yet the ultimate goal of behaviour modification is that students learn their times tables and have good manners not because they have been told to, or to get a gummy-bear, but because of the value of these things to social contexts and personal development.

Teachers can only achieve this goal, of course, if they understand this. Without such an understanding, all they will ever be able to do when using behaviour modification is ... modify behaviour! In contrast, with a sound understanding of the above, teachers are able to transcend the form and in fact use the form to highlight its purpose. An understanding of the true goal of competitiveness is analogous: with it, a teacher can help children transcend the

'It is clear that our younger generation can only benefit from being taught values as directly and as early as possible. Or is it?'

form. As a classroom teacher, I often played on one of the children's soccer teams and would always clap and cheer when the other side scored a beautiful goal or even won the match, showing that one could be happy for others in defeat. The children picked up on this and started to display the same attitude. There is nothing wrong with competition per se – only when it eliminates the possibility of community. One does not exclude the other. It depends on how you do it.

How children are taught, and with what goal in mind, is as important as what they are taught. If behaviour modification is only concerned with conformity (as some proponents would have it), it can only succeed on one level – the immediate level of behaviour. If, on the other hand, there is room for critical thinking and reasoning about the required behaviours, and alternatives are explored and understood, then we have a chance of getting children to develop their thinking alongside their behaviour.

I hear the anti-relativist say, 'But that sets our generic and established core values up for rejection, which would be a defeat of our accumulation of cultural values, norms and knowledge!' No! It

'Values are "in" these days. Our politicians want values to be taught in schools, and so do the majority of parents.'

allows our 'core' values to be reinvented, reconstructed and thus become part of the learner, rather than something imprinted onto his or her consciousness.

Equally, while it cannot be said that the horror of Nazism is relative, for a true grasp of it you would have to read Anne Frank's diary and watch WWII films—including, some might argue, the controversial *Der Untergang*, said to depict the 'human side' of the Nazi elite—exploring the issue with an unbiased and critical mind, which is a principle of constructivism.

To sum up, we should not be fooled into the belief that values education is simply drilling in a set of prescribed values. Research has shown on more than one occasion that an over-emphasis on extrinsic motivation tends to erode intrinsic motivation (Kohn, 1997). If what is emphasised primarily is 'good' behaviour, with little or no interrogation of what that means and why, there is reason to think that it will actually counteract what we are hoping to achieve – people with inner values, virtues and character. Such internalisation does not come about through reinforcement alone but through doing, feeling and thinking.

Dr Thomas Nielsen

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Dr Nielsen has a particular interest in combining notions of holistic and constructivist teaching, in order to cater for the whole person – hands, heart and mind. His book *Rudolf Steiner's pedagogy of imagination: A case study of holistic education* was published by Peter Lang in 2004.

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Coming out of the *dark* Children of parents with a mental illness



Paola Mason was six when she hid under her parents' bed as men in white coats took her naked mother away. She was six when her mother came home from shock therapy glazed with medication, six when her dad was working seven days a week, six when childhood ended. She would be a teenager before she realised that her mother had schizophrenia.

Like her co-workers at Children of Mentally Ill Consumers (COMIC), Paola now calls herself an 'adult child' of parents with a mental illness. She experienced what it is like to have childhood needs neglected, what it is like to carry the invisible weight of these unfulfilled needs. Needs unidentified by those responsible, invisible to those in a position to lift the burden.

As a child Paola went to school, to the doctor, to the local day care centre. Instead of being recognised by one or more of these services as the child of a mentally ill parent who needed support, she slipped through unnoticed. How do you recognise children like Paola if you don't know how they present? Just as mental illness does not always have the give-away signs of other disabilities, families of the mentally ill do not always limp with the weight placed upon them. 'There are some times that I feel resentful. I was the oldest and so I was the carer. My sister went on to higher study but I was never supported or encouraged to pursue further education. I am really proud of my sister', Paola says.

The services Paola came into contact with did not ignore her; they simply did not recognise her as a child affected by her mother's mental state. Services recognise children who are very quiet and reclusive or very loud and demanding. They react to these visible symptoms. It is the less visible situation at home that causes such symptoms to recur and grow. With information, services are better equipped to link children's behaviour with its root cause.

Elizabeth Fudge, project manager of the Children of Parents with a Mental Illness (COPMI) initiative, has helped raise the importance of making information resources available to those working with children. 'Not all children of parents with a mental illness will experience difficulties as a result of their parent's ill health. The combination of genetic inheritance, a range of relationship factors within the family and the psychosocial adversities often associated with mentally ill adults, however, appears to increase risks to their offspring – for example, of psychopathology, medical problems, behavioural problems and suicidality', she says.

These increased risks mean the universal need to be nurtured in a consistent, trusting environment, where both child and family have access to information, must be delivered to all children. These are essential components in all children's lives no matter what their situation.

Paola is proud to identify herself as an 'adult child' who struggled to gain visibility and resilience. She talks openly about her experience in the belief that increased awareness and education will shine a torch on children who may be at risk today, who should be supported to build resilience. Paola believes information that would have helped her understand her mother's behaviour would have made a difference to her childhood. 'I saw *One Flew Over the Cuckoo's Nest* where that Indian character is walking around with his eyes rolling back in his head. Well that was my mum. She had had shock therapy and that was why she was behaving the way she was,' Paola says. Information about her mother's illness would have relieved Paola of the pressure of thinking that this was what all children had to cope with. Information would have meant she could answer kids saying, 'You know that girl's mum's crazy' or relatives saying, 'You know she's only good for a bullet'. With information, Paola would not have had to wait until she was a teenager watching a movie for the 'penny to drop'.

Elizabeth Fudge makes the point that children should not have to collapse for people to notice they are stumbling through a problem, blind. Fudge says the principles and actions of the COPMI project, developed for services and people working with children of parents with a mental illness, are already having a positive effect. The 'dark corners' that these children disappear into are decreasing.

Through the education of children and their service providers VIC CHAMPS (a pilot program funded by VicHealth), beyondblue and Mental Health branch, children are being armed with a torch to lighten the dark corners and signal a need for help. Rose Cuff, coordinator of the project, says the information they give children does not fill a gap; rather it replaces explanations that children make up when a reliable source cannot be found. 'The thing is that if a child doesn't understand something in their life they make something up, they fill in the gaps in their knowledge. If mum is angry or upset they think they have done something wrong. If mum and dad are fighting it is because they've made them angry', she says.

This, she explains, is why an important part of the VIC CHAMPS program is about allowing children to learn together about mental illness, how it affects their parents' behaviour and how to be prepared for situations that could arise. Children's ability to cope with a situation should not be understated, she says, providing they are equipped with age-appropriate information. 'Children need to know what to do in a crisis situation. It is rather like a bushfire plan.

You put all the measures in place in winter or spring, so that when it gets hot the plan is there ready', she says.

As part of the program, children take part in activities to gain an understanding of various mental illnesses and what symptoms someone who is affected may show. She explains one game that is used to show children the difficulties experienced by someone with schizophrenia. One child sits in the middle of the group and is interviewed by a peer while two other children whisper in the interviewee's ears. 'Afterwards we get feedback from the person who was interviewing them and they might say, "she was laughing and it was really weird and hard to understand her"'. According to Cuff, it's all about filling

in the blanks. If children know more they're less likely to see it as their fault. 'It can greatly improve the relationship between parent and child because when you remove the blame it can radically improve the relationship. It's like everything – death, sexuality – talking about it takes the burden away. So like anything, when you talk about something it often takes the cloud away', she says.

Paola has come to terms with her mother's schizophrenia. She has learnt to love her mum, hate her illness and accept them both. 'I was resentful that I didn't have a normal mum to just sit down and talk to: I couldn't ask her about periods or childbirth. But I'm not resentful of my mum. I don't like the illness. I differentiate between the two mums that I have, the one that is ill and the one that's not. I love the mum that says really amazingly beautiful things sometimes', Paola says. 'People can live with a mental illness and they can live in a resilient manner.'

'Adult children' of parents with a mental illness like Paola and her COMIC co-workers also demonstrate that children can find and live with resilience too.

Jen Reid

Jen is a freelance writer and journalism student at the University of Technology, Sydney (UTS), with a specific interest in social justice and early childhood issues. This article recently won 'Best Undergraduate Print Feature' at the UTS Journalism awards and has been selected to represent UTS at the Ossia Awards held by the Journalism Education Association.

For further information, resources or useful contacts related to mental illness, visit:

The Children of Mentally Ill Consumers (COMIC) website at:

<http://www.howstat.com/comic/Home.asp>

The Beyondblue website at:

<http://www.beyondblue.org.au>

The Child and Youth Health website at:

<http://www.cyh.com/Default.aspx?p=1>

'As a child Paola went to school, to the doctor, to the local day care centre. Instead of being recognised by one or more of these services as the child of a mentally ill parent who needed support, she slipped through unnoticed. How do you recognise children like Paola if you don't know how they present?'

Thoughts on fatherhood



A personal account

As a 'forty-something' father of three (Jeremy eight years, Daniel five years, Alyssa 15 months), the opportunity to reflect upon and comment on my views on fatherhood has been a rather unique and enlightening experience. To begin by saying that the past eight years has been a challenge would be an understatement. It has been a time of self-discovery, self-doubt and at the same time, great rewards—but always, very, very little sleep!

Family has always been an integral part of my life. My parents, being of proud Greek heritage, have always emphasised the importance of the family unit no matter what. So it was as certain as day follows night that I would someday settle down and, of course, become a dad. In fact, images from the film *My Big Fat Greek Wedding* were not too far off the mark (except for the Windex). I have now been happily married for almost 10 years to my gorgeous wife, Samantha.

I will be honest and say that *nothing* really prepares you for being a dad: not parents, not your spouse, not baby help books, not baby videos, nothing! These helpless little people are all so unique, so fragile, so tiny,

and yet so very special. If men are from Mars, and women are from Venus, then babies are a life form from a galaxy far, far away.

I can recall with our first child, Jeremy, asking myself how I was ever going to cope with the change in routine from a house of order and quiet to one of chaos and disorder with miles of drying nappies flapping from the Hills Hoist. From just being my wife and I, to my wife, our baby and I, in addition to sharing my new family with 'my other baby'—my PhD. The change from 'normal sleep' to a series of ill-defined catnaps

'I will be honest and say that nothing really prepares you for being a dad: not parents, not your spouse, not baby help books, not baby videos, nothing!'

dominated the first year, along with bruising to my ribs when my wife would *subtly* tell me it was my turn to get up and tend to the baby in the middle of the night. Selective hearing I must say just did not seem to be a viable nor appreciated defence.

There would be times when I was at my wits end wondering if my child would ever stop crying. The frustration of having done everything 'by the book' (i.e: nappy; bottle; burping, then repeat) yet being hit with volleys of what seemed to be endless hours of crying, followed by even more crying. There was just simply no off-button, a major flaw in the DNA matrix. Yet somehow these

moments, though difficult at the time, are now just a distant memory.

But despite all of this, and despite all other adversities along the way – both now and in the future – my kids and my wife are the most precious things to me and I will always be there for them. Without them I am nothing. I appreciate that I am still at the 'early stages' of the parenting cycle but no matter what, no matter how tough things get, no matter where my kids end up once they have grown up, they will always have a home and a family and a dad that loves them very dearly. That is something they can bank on.

Jerry Maroulis

Senior Lecturer
Faculty of Education
University of Southern Queensland





Bringing fathers to family services

Men are noticeably absent in most of the places children spend their time these days. Our nurseries, primary schools and child care centres are staffed almost entirely by women. Over time, these institutions have developed a culture that is based around women and mothers. While this is understandable, given the fact that mothers are usually the primary caregivers, it has meant that men have been progressively – if inadvertently – alienated from being involved in these places. This is a real loss for the children, and something of a puzzle too. Ask staff if they want more father involvement and there is a chorus of ‘Yes please’. The same goes for the dads and the mums. Everybody wants it to be different, yet things don’t change. Or do they?

Five years ago the Engaging Fathers Project, based in the Family Action Centre at the University of Newcastle, set out to show that dads could be actively involved as fathers, and thereby benefit the entire family. The project is part of an international initiative covering more than twenty countries from Morocco to Peru. The Newcastle project is unique: our focus is on family services.

Based on previous work in men’s health and boys’ education, we started from this basic fact: if you want dads to be more involved with their children it is no use asking ‘What is wrong with the dads?’ Instead the question should be ‘What could we change to make dads *want* to come in here?’

‘Ask staff if they want more father involvement and there is a chorus of “Yes please”.’

The project started with schools and child care centres. A team of working fathers were engaged in the project, working

alongside the staff to run fathers’ breakfasts, father-son and father-daughter activity afternoons and ‘Smokos’.

The ‘Smokos’ were held in the school playground, usually under a tree. Nobody smoked of course; instead the men drank tea and coffee and talked—about their kids and how they were doing. The topics varied but usually included the issues of child protection and fathers’ roles at the school. As a result, more men volunteered, not just for laying concrete or ‘Working Bees’ but for classroom help.

That was a big lesson for us. When the men trooped in, the teachers were pleased to see them, but the question was asked: where were they going to find the time to adapt their program for these novice dads? In our enthusiasm to get dads in the gate we too had underestimated how thoroughly our ‘family’ services are conditioned for mums.

In this case the solution seemed clear. We employed a literacy specialist (female) to help us develop teacher-friendly programs so that when schools approached dads, teachers would have ready-made resources to work with.

We also learnt to work from strengths. Staff in child care centres found that asking dads in to talk about something they already knew about (gardening, pets, fishing) thrilled the kids and built up a positive role for men in the centre. At the same time, a Network Group for men working in early childhood (named ‘Blokes can do it as well’) raised the profile of men generally in child care and provided a contact person for fathers to talk to.

In the Indigenous community, young Aboriginal dads teamed up with the project to develop a DVD featuring Indigenous dads doing their thing with their children. The ‘Strengths and Skills of Indigenous Dads, Pops, Uncles and Brothers’ was designed, filmed and edited by the young men. The five-minute sequence set to an Archie Roach song regularly brings audiences to tears.

The success of the project can be seen in the way that family services have changed to include dads more in their children’s lives from birth to secondary school. At a time when there is increasing recognition that fathers should be involved, having models that work with dads is an important step.

Richard Fletcher

Team Leader

Engaging Fathers Project

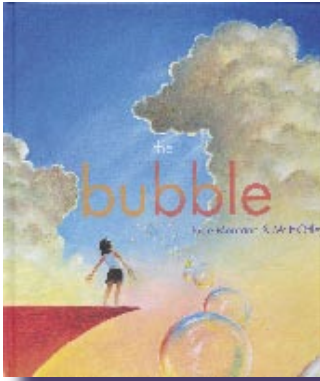
University of Newcastle

Richard is also the author of *Bringing Fathers In Handbook: How to engage with men for the benefit of everyone in the family*. This handbook contains templates, sample letters, brochures, cards and instructions for planning and managing father-related events, examples of successes and struggles, discussion of key issues and skill-building exercises.

The Handbook is available through The Engaging Fathers Project, The University of Newcastle, University Drive, Callaghan NSW 2308

Ph: (02) 4921 8739, Fax: (02) 4921 8686 or Email: men-and-boys@newcastle.edu.au

www.newcastle.edu.au/engagingfathers



the bubble

**Josie Montano and
Matt Ottley**

Lothian Books (2004)

ISBN 0734406843

RRP: \$26.95

This is a story about a young girl called Aditi. She is feeling sad and melancholy; her world doesn't feel lively. The bubble takes her on a journey through an atmosphere of sadness. She travels through a world filled with wonder – which looks different and mysterious. There are faces carved in rocks; her shadow; and skeletons. They seem to be travelling in the middle of nowhere. The illustrations make you feel you are inside the book. The colours are dark and grim to show she is sad, and change to being nice and colourful at the end of the story to show she becomes happy. The writing is put in different places – like the bubble, in a book or in the sky – and the colour of the writing suits the background pictures. All these things together make it a great book to read.

Laura Marshall

Seven years old

The bubble is a special book. Originally written by Josie Montano at the age of ten, she returned to it after establishing her career as a children's author and it has all the marks of a work in waiting. Reminiscent of Shaun Tan's *The Red Tree*, this book deals with the issue of child depression. Written from the child's perspective, it employs the metaphor of a bubble to convey the distortions of reality the main character experiences as she deals with complex and uneasy emotions. The reader accompanies the child through a labyrinthine journey of overwhelming sadness, confusion and loneliness that slowly reaches a point of resolution when she is 'delivered into a place of renewed awakenings'. Surreal landscapes filled with visual references to Munch and Dali provide the perfect backdrop to this storyline. They help bring to life the sense of alienation and isolation that often accompany grief or depression and in this way offer young children a vehicle to explore some of the more difficult and unresolved feelings they may experience. Importantly, *The bubble* also validates these emotions by giving them a voice and offers hope through the resolution at the end of the story.

Jane Page

Centre for Equity and Innovation in Early Childhood

Faculty of Education

University of Melbourne



Adele Jaunn

Lothian Books (2004)

ISBN 073440624

RRP: \$26.95

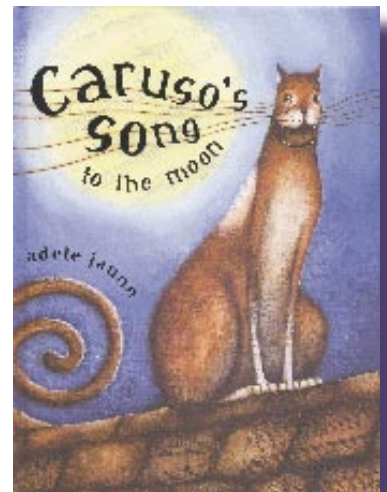
This is a humorous tale of a cat's desire to sing to the moon. The story revolves around the feline's nightly attempts to serenade the moon, which are continually interrupted by unsympathetic neighbours. Caruso finally gains the musical reputation he believes he deserves when his singing wakes his family in time to save them from a fire that is ravaging their house. It is only then he can take a bow to an appreciative audience and earn the right to sing undisturbed. Adele Jaunn's illustrations bring Caruso's character to life and add much humour to the storyline, as his whiskers form ledger lines for the notes he is singing and his tail turns into expressive treble clefs. There is also comic relief in the use of a small mouse that appears on most pages of the text and accompanies Caruso on his musical journey. In terms of the writing, Jaunn playfully employs the tool of alliteration – so as each note is sung, it is further brought to life through the punchy text. *Caruso's song to the moon* would make a lively addition to an early childhood and early primary library.

Jane Page

Centre for Equity and Innovation in Early Childhood

Faculty of Education

University of Melbourne



BIG ART *small viewer*

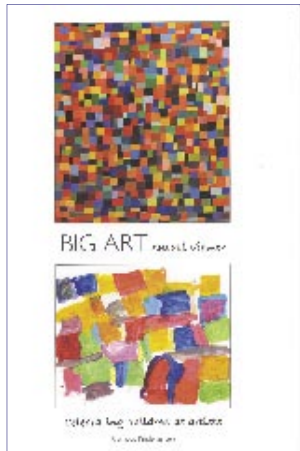
celebrating children as artists

Megan Gibson

Campus Kindergarten (2003)

ISBN 0186499679

RRP: \$39.95



This beautifully designed book documents the rich collaborative journey of children from Campus Kindergarten and staff from the University of Queensland (UQ) as they explore contemporary Australian art at the UQ Art Museum. The project culminates in an exhibition of the children's artistic responses to the works they viewed at the museum.

This project challenges ideas that many of us hold about gallery and museum spaces. The perception

of museums as sacred spaces exclusively for intellectual adults is stripped away. The museum becomes a creative, engaging space for children where they can explore, experiment, move, play, think, talk and create.

The image of children as competent viewers of contemporary Australian art is also challenging and exciting. In this respect, the book is an invaluable resource for early childhood educators. As we explore the book's pages, we join the journey of the children and staff. We discover new and provoking ways to explore art with young children. We also discover how to access museums and galleries in a way that is deeply meaningful and beneficial to young children.

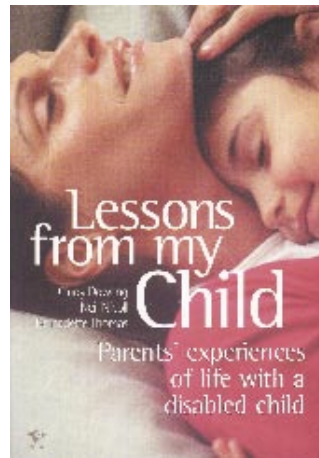
The skilful documentation of the project reveals how adults can reflect on the art with the children and provide opportunities for children to respond to the art with their own image-making. The results are breathtaking.

Big art small viewer is an essential book for early childhood libraries. It helps to fill the deep gap in literature that addresses the contemporary use of galleries and museums by young children. It also addresses the often ignored area of visual literacy. This project effectively demonstrates ways to help children (and adults) gain a deeper understanding of the cultural diversity and richness of contemporary Australian art.

Kari Winer

Faculty of Education

University of Southern Queensland



Lessons from my Child

Parents' experiences of life with a disabled child

Cindy Dowling, Neil Nicoll and Bernadette Thomas

Finch Publishing (2004)

ISBN 1876451548

RRP: \$24.95

Lessons from my child is a compilation of real stories from all around the world, written by real parents and carers of children with disabilities. Each of the parents have a unique story, highlighting the variety of emotional responses to having a child with a disability. The book explores areas of grief, denial, anger, depression – but also acceptance, empowerment, marriage, family and friends, love and joy, spirituality and laughter. Parents talk about their various expectations of life with a disabled child and the realities facing them as their children grow older. The cumulative impact of sleepless nights, endless tears, having to tell the story over and over, fear, and generally high levels of frustration with families and the general community on a daily basis, are described in many of the stories.

This book is about journeys, big and small. Life-changing journeys of emotions and personal growth. Readers will develop a greater understanding about the many dilemmas facing parents in their efforts to be 'just like anyone else'. Above all, readers will be uplifted by the insights of these parents and their unique perspectives on raising a child with a disability.

Lessons from my child also includes professional advice as a precursor to each chapter. This advice, written by a psychologist, explains and defines the topic, assisting the reader to think about and understand the implications of the stories that follow.

I would highly recommend this book as a 'must read' for anyone involved with or interested in children with disabilities and their parents. The stories provide excellent insights that will assist professionals and policy makers to develop a greater understanding of the issues facing parents of children with a disability.

June McLoughlin

Director

Early Childhood Centre for Community Child Health

Primary school physical education:

Far from realising its potential



The importance of physical activity in the early years

Recent studies have shown that Australian children are less active, less physically coordinated and skilled, and less fit than ever before. A number of factors have contributed to this poor health profile. Children's physical activity levels have progressively decreased as the consumption of energy-dense foods and the popularity of sedentary activities (i.e. TV, computers, Internet) has increased. Other social, environmental and personal safety issues have also contributed to childhood inactivity. For example, children's opportunities to be physically active are increasingly inhibited by:

- parents who do not want their children to walk or ride to school;
- parents who are less willing to let children play unsupervised;
- an increase in families where both parents work; and
- poor quality physical education (PE) programs in the primary school.

One of the consequences of the increasingly inactive lifestyles of children has been their susceptibility to coronary heart disease risk factors including high cholesterol, diabetes, high blood pressure and obesity. Alarming, childhood obesity has been described as a major public health issue in Australia with the prevalence of obesity in children aged seven to 15 years tripling in the last 10 years (Magarey, Daniels, & Boulton, 2001).

In order to prevent the onset of these risk factors, children need to be provided with the opportunity to be sufficiently and frequently active. Recent guidelines recommend that children engage in at least one hour of physical activity daily. At least 10 to 15 minutes of this daily activity should be of moderate-to-vigorous intensity. Many Australian children are not involved in sufficient physical activity to accrue health benefits. Similarly, few children voluntarily engage in moderate-to-vigorous intensity activity.

Extensive research has demonstrated a multitude of benefits for children from involvement in physical activity. Aside from an enhancement of risk factor profiles, research has supported a positive association between physical activity and improved social, psychological and physical wellbeing. Participation by children in supportive programs of physical activity has the potential to improve self-concept and self-esteem.

The importance of PE in the early years

Childhood is a crucial phase in the development of health-related behaviours. There is a growing body of knowledge which asserts that adult health has its origins in behaviour established during childhood. For instance, it has been acknowledged

that participation in physical activity during childhood increases the chances of participation in physical activity as adults. As the largest reduction in physical activity occurs as young people leave high school and move into adulthood, it is imperative that physical activity habits are developed among children during their primary school years.

As such, schools represent an important setting for influencing children's physical activity behaviour. Primary schools have an ideal opportunity to encourage the development of positive attitudes and practices towards leading an active lifestyle via the delivery of quality PE. Participation in PE lessons may be one of the only opportunities some children have to be physically active. One of the key aims of PE is to develop in children the knowledge and skills needed to lead active and fulfilling lives.

Furthermore, PE can make a unique contribution to the educational experience of all students and may support physical, psychomotor, cognitive, emotional and social development. While some criticise PE as lacking credibility as an academic subject, Shephard (1997) concluded that students' ability to learn and improve academic skills could be enhanced by receiving extra PE lessons.

One of the strongest arguments for quality primary school PE rests with the fact that it is the most appropriate forum for the development of fundamental motor skills (for example running, skipping, throwing, catching, kicking, etc.). The primary school years are the most appropriate time period for children to learn and refine their motor skills. Motor skills are considerably more difficult to learn during the 'growth

spurt' years or adolescence. Proficiency in fundamental motor skills is imperative for sustained participation in physical activity as it provides the foundation for practising and improving more difficult skills commonly used in sports. Without motor proficiency, children find it extremely difficult to experience success and enjoyment in many physical and sporting activities and may choose not to be active or place themselves in situations in which they risk failure. If you don't know how to throw or catch, would you feel enthusiastic about playing cricket or softball or netball or any of a number of sports that involve hand-eye co-ordination?

Competency in performing motor skills appears to be a major reason for children playing sports, while the failure to improve is a primary reason for dropping out of sport. Feeling incompetent in performing motor skills can lead to low self-esteem, self-consciousness, a dislike for physical activity and an avoidance of sport-related activities altogether. One study found that children with poor motor skill ability were less active, played less on large playground equipment, and spent less time in social interactions with their peers (Bouffard et al., 1996). Evidently, it is crucial that children are taught how to perform motor skills in primary school PE.

So what is happening in primary school PE?

Australian children's declining levels of activity and motor skill competence suggest many PE programs are not developing children's physical potential. In many primary schools, decisions regarding the delivery of PE programs are left to the discretion

of the classroom teacher. However, many teachers have difficulty meeting the demands of teaching PE due to feelings of inadequacy, low levels of confidence, inadequate training and a lack of time and interest. Unfortunately, a teacher's negative attitude can adversely influence students' attitudes towards physical activity, physical activity behaviour, self-esteem and overall PE experience.

'...it has been acknowledged that participation in physical activity during childhood increases the chances of participation in physical activity as adults.'

A lack of PE teaching confidence is often reflected in the delivery of inappropriate lesson content and generally leads to one of two undesirable outcomes:

1. Teachers will avoid teaching PE.
2. PE lessons will merely consist of playing a 'game' (such as t-ball).

While it is obvious that outcome 1. prevents students from achieving important outcomes, the consequences of outcome 2. are probably more severe. These types of 'PE lessons' are generally large-sided team games where the teacher acts as a 'supervisor' rather than a 'teacher'. Little is actually taught to students in terms of motor skill development and only a few children are active at any one time. Additionally, for many students, it represents an experience where they find out how uncoordinated they may be, which can have harmful effects on their self-esteem. Feeling inadequate in front of your peers can be particularly embarrassing.

Subsequently, a child's enthusiasm to want to repeat such an experience is weakened and a dislike of physical activity may result.

So what can be done in primary school PE?

It seems the effectiveness of PE is based on a teacher's commitment to PE. The logical assumption is that more favourable levels of outcome attainment will be realised by students if they experience lessons implemented by competent and confident teachers who are committed to teaching PE. It is apparent that more support needs to be provided to teachers (via improved pre-service and in-service training) or the employment of specialist PE teachers made a priority. Given the importance of positive and early physical activity experiences for children, the quality of PE programs in the primary school must be improved.

Dr Philip Morgan

Lecturer in Education

University of Newcastle

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Domestic violence in our communities

Most people in Australia will have seen the Federal Government's recent television advertising campaign, which depicted domestic violence as one of a range of issues described as 'Violence Against Women'. The government took this initiative because violence against women is recognised as a very significant problem in our society. In Australia, research shows that at least one in three women will experience domestic violence at some time in her life. We also know that one in four Australian children will witness physical violence against his or her mother.

The government's advertising campaign focused on the physical aspect of domestic violence – but many women and children who have grown up with violence in the home will tell you that other aspects can be as bad, if not worse. Physical domestic violence never stands alone. The other aspects of domestic violence that may be present are emotional, social, financial and sexual abuse.

These different aspects of abuse form a pattern of one partner having power and control over the other. Sometimes there is no physical abuse, but it is still domestic violence if one partner's self-esteem is being eroded or the partner is made to live in fear. You can be fearful of threats to harm others, of not having enough money to feed the family, of losing your mind, of never being good enough – as well as the fear of being attacked physically. Domestic violence is caused by one person's need to feel they have control of their partner and is always the responsibility of the person doing the abusing. As well as having detrimental effects on the victim's/victims' health, we know that children who are raised in situations where there are such unhealthy relationships are affected in many ways.

Effects on young children

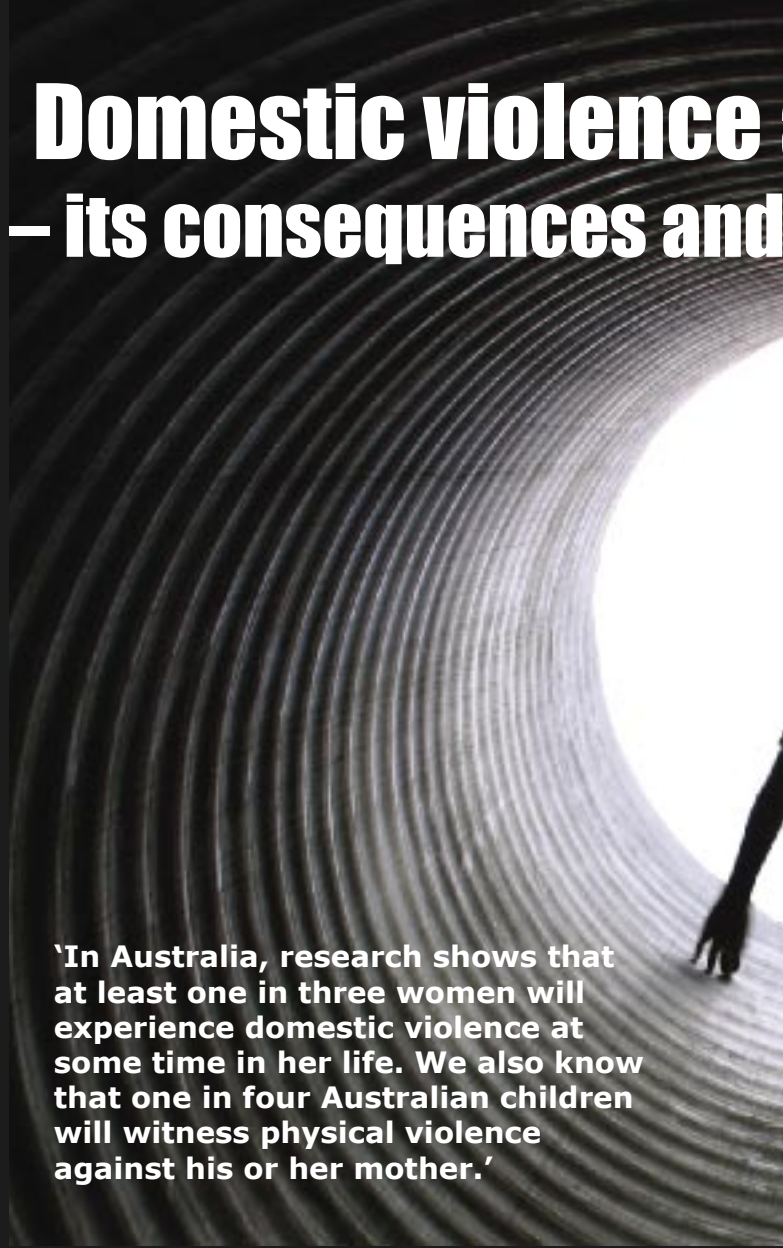
The effects of domestic violence on children are wide-ranging and differ depending on the age of the child. Babies have been found to suffer from feeding and sleeping difficulties, excessive crying, anxiety and irritability as a result of living in a home where there is domestic violence. Other babies may become very passive, wary of new people or have delayed mobility from the lack of an environment that feels safe.

Preschoolers, because they lack the mental and emotional maturity to understand what domestic violence is about, may blame themselves and suffer emotional distress with feelings of guilt, shame and worry. They may appear to be anxious, immature, unable to concentrate or to play constructively. Sometimes a young child who has witnessed domestic violence will be overly aggressive and/or have a reduced ability to empathise with others. Alternatively, some children will be especially 'good', compliant or withdrawn.

When exposure to domestic violence has been prolonged, symptoms that are similar to those suffered by adults who have post-traumatic stress disorder may be evident and the child may have flashbacks, numbing, increased arousal, confusion and fearfulness.

Of course, young children suffer from such symptoms for a variety of other reasons as well. Yet given the high prevalence of domestic violence, it is essential that witnessing abuse at home is considered a possible cause when a child is displaying one of the behaviours described above.

Domestic violence – its consequences and



'In Australia, research shows that at least one in three women will experience domestic violence at some time in her life. We also know that one in four Australian children will witness physical violence against his or her mother.'

Domestic violence and attachment

In the past few years, much has been learned about babies and young children's need for attachment. Many agencies are promoting the need for primary caregivers to be able to provide a secure base and a safe haven. It is seen as essential that the child be able to explore and be welcomed back to safety. In homes where there is domestic violence, it may be very difficult for the primary caregiver (usually the mother) to provide a safe haven when safety is not available to them. Depression or fear—well-documented effects of domestic violence—may mean that the primary caregiver is unable to be available emotionally for the child. Or it could be that the primary caregiver is afraid to let the child explore for fear of 'trouble' if the child is noisy, disruptive or breaks something/gets hurt.

The person who is abusing may also be a confusing or fear-inspiring figure, unable to provide a consistent secure base and safe haven for the child. If the child can't feel safe, it may mean that the child's sense of self and independence is undermined. He/she may not learn to take risks or may not be able to experience success in a safe and secure setting. The young child who lives with domestic violence may consequently be clingy, and may display regressive behaviour.

and young children what you can do



Of course, where there is physical violence there is also the risk of the child being hurt accidentally through trying to intervene or by being in the way. Sometimes the presence of domestic violence indicates that there is also physical and/or sexual child abuse. There is a growing awareness that the witnessing of a physical assault by children is abusive in itself. Even children who are not present when abusive outbursts occur are aware of tension, fear and unhappiness as they witness the effects of violence on those around them.

What can you do?

If the coercive, controlling behaviours that constitute domestic violence stop, or the family separates so that the children are no longer exposed to the abusive behaviour, the children can begin to heal. Therefore, encouraging parents to seek help from appropriate agencies may be the best way you can help the children. You may also want to report the domestic violence to the local child welfare departments. In some states, it is a Mandatory Notifier's responsibility to report incidents where children witness domestic violence.

- Whether the children are still living with domestic violence or not, as a supportive adult you can provide experiences that will promote the development of self-esteem. We know from studies

of resilience that mastery of a skill and/or positive attention from any person who is significant in a child's life, can build a child's ability to cope.

- You can also demonstrate and make clear that violence is not acceptable. You may be in a position to teach problem-solving techniques that offer alternatives to the win/lose scenarios that the child sees at home. This way the child finds out that there are other ways of resolving conflict in their own lives.
- At home the child may be too fearful or he/she may not be encouraged to talk about feelings, therefore any game or strategy that gives permission to explore feelings and any opportunities to normalise emotions can be helpful. In this situation, acknowledging a child's emotions supports their right to feel.
- If there is any opportunity at all, let the child know that violence at home is not their fault. Children need to be freed from the guilt they so often carry when the home is not a safe place.

Everybody's business

Throughout history, domestic violence has thrived behind closed doors while seen as a 'family matter' which is no-one else's business. It has only been in the last 30 years that the detrimental effect of domestic violence on individuals and communities has begun to be recognised. Until now, the effects on and needs of the children have been generally overlooked by the broader community. However, anyone who works with, knows or befriends children can play a part in helping children who have experienced domestic violence. Just as they can assist them in reaching their full potential – despite what has happened.

Fiona Buchanan

Centre for Parenting, Child and Youth Health

Children's, Youth and Women's Health Service, South Australia

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Considering the 'whole person': Wellness and wellbeing in early childhood contexts

There are many alluring images presented to us through advertising, the media and our own imaginations of peaceful, beautiful environments. Places where pampering, rest and enjoyment are the underlying themes. Times where there is warmth in connectedness and relationships. We easily slip into a sense of balance, even calm control, as we take in these images.

Why do we desire such experiences?

It is one of the contradictions of our lives. On the one hand there is technology, knowledge and growing expectations that encourage us to work at a frantic pace, while seduced by the belief that we are being more productive and thus valuable. On the other hand, we seek opportunities to nurture our sense of wellness and wellbeing.

Unfortunately, sorting the contradictions and seeking the balance for ourselves usually results in dividing our lives into timetabled events rather than finding wellness and wellbeing in each part of our daily lives: work, home, family, community and personal interests.

What is 'wellness and wellbeing'?

Currently there is an even greater focus on attaining wellness for individuals in healthy communities. The highest standard of health is 'a state of complete physical, mental and social wellbeing and not merely the presence or absence of illness' (The World Health Organization). Using a model of the six dimensions of health provides greater scope for assessing and supporting individuals and communities. Determining wellness-status by our responsiveness to physical, emotional, social, mental, spiritual and environmental dimensions of life includes dimensions that readily link to one's ability to achieve wellbeing in a changing environment.

Children and adults alike have the fundamental right to enjoy the highest attainable standard of health. However, achievement of wellness for all is not possible – nor is it easy. Access and equity are determined by a person's situation within socio-economic, political and geographical boundaries. Additionally, for children the achievement of wellness and wellbeing is even more problematic. Children have little control over their environment, their food and lifestyle choices, and the models of wellness that surround them.

Wellness and wellbeing in early childhood contexts

Children are active members of contemporary society – both influencing and being influenced by society. Childhood is an important time in itself, rather than just preparation for adult life. When considering the wellness and wellbeing of young children, adults have a great deal of power to respond to children's needs and to influence each child's experience of the present and therefore the future. Skills for coping with a technology-oriented future that is very different to the present are only part of the package necessary for achieving wellbeing as a child and adult. We must acknowledge the 'whole person', adult and child, in our interactions with children.

The notion of the 'whole child' is based on the humanistic tradition that integrates the mind and the body and the quality of the relationships between people. Teachers of young children have traditionally included areas of social, emotional, cognitive and physical development in their planning and evaluation. More recently, the fundamental role of relationships in good early childhood teaching and service provision has been emphasised.

Wellness and wellbeing are goals, particular philosophies, and ways of living that will present in different ways in different settings. Wellness and wellbeing is also a curriculum area that can be embraced through child-centred and emergent curriculum approaches. Achieving wellness and wellbeing for children and adults involved in early childhood contexts is about actualising individual potential in all areas which are traditional to early childhood curriculum. Embracing the complete notion of wellness and wellbeing will also push the boundaries of traditional curriculum areas.

How healthy is the early childhood context?

Responding to health and safety requirements for children and staff is a huge task, but not nearly as complex as the task of striving for the wellness and wellbeing of each individual. Being complex does not mean we should avoid the task; rather we might need to take this on in small steps.

Relationships are key to any early childhood service. Inclusion of children, staff and families in providing for wellness and wellbeing should not be difficult. Accepting the relationships and interactions between people and with the environment as a process rather than a product is the beginning.

Emergent curriculum approaches encourage environments where children's interests shape the experiences with the guidance of knowledgeable adults. Emergent curriculum approaches provide greater opportunities to explore a range of experiences that are important to children and adults (staff and children's families). In this child-centred situation there are opportunities to nurture child and adult senses of wellness and wellbeing simultaneously.

A beginning teacher provided a set of fabric and container resources for a group of toddlers. When asked by the other staff

'The notion of the "whole child" is based on the humanistic tradition that integrates the mind and the body and the quality of the relationships between people.'

what she wanted the children to do with the resources, she replied that she just wanted them to explore and use them in ways that they wanted. In her journal she recorded, 'It was very rewarding to see the interactions it encouraged. It allowed staff to interact with children in an unrushed manner, as they were all exploring and there was no end result in mind. Both adults and children were learning and valuing the quality time together.'

Questions to ask about the wellness of our curriculum

- Whose voice is heard in the developing curriculum?
- Are children and staff involved in experiences that push the boundaries of traditional curriculum and consider the whole child? For example, experiences related to power and identity or sexuality in childhood, including everyone's skills and interests.

- Do children and adults observe and question notions of fairness within their own daily lives?
- What is the natural environment we share with children and staff?
- Are there opportunities to develop 'a oneness' with the natural environment?
- What opportunities are there for child and adult identities to be shaped by extending a sense of self in relationship to the world of nature and the social world?

Leaders of groups, rooms and services plan for environments for children in great detail. The inclusion of provisions and opportunities for adults, alongside those for the children, enrich the experiences of all involved. This might include resources such as adult-sized furniture but also a focus on the interests, strengths and needs of adults. There are tasks to be completed by staff that cannot be ignored, but involvement in authentic experiences with children is the most important role to be played. In addition, families' opportunities for feelings of belonging and connectedness with their early childhood services contribute to their sense of wellbeing.

'She's always planned for me staying for a chat – that makes me feel comfortable about leaving him [my son].' (Parent speaking about family daycare caregiver).

Finding wellness and wellbeing

Children need time, space and people. Adults also need time, space and people. Adults in the early childhood sector work with children to embrace life. Making sense of the world together is the greatest opportunity to nurture wellness and wellbeing.

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All jobs are different. But when Marnie Horyniak started her job as governess on an outback cattle station in the Northern Territory, she couldn't begin to imagine how different it would be from her previous child care positions in Melbourne.

Marnie is a governess on Mallapunyah Springs Station in the Northern Territory. Her classroom is now a huge 4000-plus square kilometre property, a day's drive south of Darwin and five hours from Tennant Creek. She has charge of two children: Dannielle and Joe, who are students at the School of the Air.

The path that led Marnie to the Northern Territory is typical of that taken by many young women in the early childhood sector who seek new challenges and experiences. Marnie completed a Child Care Certificate 3 and was working casually in Melbourne child care centres, wondering how she would ever find a full-time position and manage on the low pay earned by child care workers. 'I was certain that I loved children, but I wanted to do something different', Marnie said.

Seeking better opportunities and with a taste for adventure, Marnie advertised for a governess position on an Internet employment site. She had almost forgotten about her advertisement, when she received an email response from Dannielle and Joe's mother, Kerry. Sometime after the usual pre-employment processes, Marnie found herself flying to the Territory to meet the family.

Because Mallapunyah Springs Station is so remote and isolated, Kerry suggested Marnie trial the position for a term. If it didn't work for both parties she could return to Melbourne. Marnie was excited but apprehensive. Would she be able to manage so far from friends,

OUTBACKADVENTURE: Profile of a governess

family and support networks? How would she cope with the 40- to 45-degree heat?

The first weeks at the station were a very steep learning curve. 'I arrived in the "build up"', Marnie said, 'the hottest and most oppressive time of the year. It's the lead up to "the wet". But I did cope and I love it'.

Marnie's role is to supervise and guide Dannielle and Joe's school work. The children are students at the School of the Air and their curriculum is prepared by teachers at the school. They are part of the 'world's largest classroom'.

The Internet is central to linking Dannielle and Joe with their School of the Air teachers and classmates. 'School runs from 8 am to 2.30 pm with a short "smoko" [recess] and one hour for lunch. As well as the usual academic subjects, we do sport, art, music and recorder. And lots of reading. The School of the Air sends

out equipment, books and art supplies', said Marnie.

Outback children are not as isolated as they used to be. Satellite communications bring teachers and children together in a virtual sense and

children and teachers also meet face-to-face at regular School of the Air gatherings. Three times a week, for 45 minutes, the children are linked to their School of the Air teacher. In these sessions they see their teacher over the satellite connection and can interact on a one-to-one basis.

The children get to visit their classmates in Katherine and attend swimming schools and other activities. 'They had a Christmas concert and were excited about seeing all their friends', said Marnie.

Of the many new skills Marnie had to learn, not all were education-related. Living and working on a remote cattle station requires many special skills. Dealing with mosquitos, sandflies, snakes and locusts were the first unusual challenges. The second was using a gun. This is a necessity on an isolated cattle station. 'The first time was quite hard', said

Marnie, 'but I practised shooting a big termite nest and got the hang of it. Now I feel quite confident.'

When I met Marnie she wasn't quite so confident about another major cattle station skill – horse riding. But she was planning to have riding lessons on her summer holiday in Melbourne and surprise her outback family with her riding skills in the new school year. Riding is important if Marnie wants to join station and family activities. Several times a year, the family goes on a cattle muster and Marnie hopes to ride well enough to join this event. Everyone is away for several days camping out and rounding up the cattle.

Life on the station has opened Marnie's eyes to a new way of life...waiting for the Flying Doctor from Townsville, riding in the helicopter with the children's father and participating in local parties and get-togethers.

'Of the many new skills Marnie had to learn, not all were education-related. Living and working on a remote cattle station requires many special skills. Dealing with mosquitos, sandflies, snakes and locusts were the first unusual challenges.'

But the best experience for Marnie has been the people. 'The family is lovely and everyone works together. Kerry is wonderful', she said. 'And there are lots of social events with bands and music. We go to

the women's and children's days at Barclay Homestead a four-hour drive away. Everyone loves these days.'

'Meeting up with the jillaroos from other stations has also been fun', she continued. And then of course, there was the meeting of 'someone special', which has also helped Marnie settle in.

An early childhood qualification opens many doors to adventure all over the world. The governess experience is Marnie's first time away from Melbourne. She could have sought a similar position overseas but thought it was important to see Australia first.

'I'm so happy and so different now. I'm not the Marnie that left. My friends won't recognise me!'

Alison Elliott

Feverpitch

Senior medical staff at the Women's and Children's Hospital in Adelaide explore the childhood condition of fever, and how it relates to the controversy surrounding the use and advertising of pharmaceutical drugs for young children.

While fever is one of the more common conditions of infancy, its clinical significance and the treatment options for it engenders passionate debate amongst health care providers. These controversies in turn promote parental confusion, anxiety and, unfortunately, the overuse of medications. This brief overview of fever summarises the philosophy and approach of the Women's and Children's Hospital (Adelaide) and has been endorsed by the Drug and Therapeutics Committee and the Paediatric Emergency Medicine consultant medical staff.

An elevation of normal body temperature is considered to be a potentially beneficial physiological response, which activates important immunological (infection-fighting) body defence mechanisms. However, fever may be associated with undesirable outcomes for the child including discomfort, dehydration and seizures. Fear of such a serious outcome as febrile seizures has contributed to what has been described as 'fever phobia' among parents, carers and health care professionals. This exaggerated response has resulted in proactive, well-funded advertising campaigns which promote the need for pharmacological treatment of fever.

A further point of contention is at what temperature should antipyretics (drugs to reduce temperature) be administered? The literature and surveys of health care providers reveals a wide range from as little as 38°C to greater than 39.5°C. What is probably more relevant is not the exact temperature, but what responses the child exhibits. A child may be extremely uncomfortable at a temperature of 38°, while higher temperatures in another child may have no significant detrimental effects.

The philosophy of this hospital is to emphasise that a fever in itself need not be a concern and, in particular, the use of medications may

be unnecessary and merely expose the child to potential drug toxicities – plus the 'fight' that often accompanies the administration of medicines to young children! The cause of the fever needs to be considered and may require assessment and investigation by an appropriate medical practitioner. Obviously, if the child has other symptoms such as being sleepy, has a rash, has persistent vomiting or diarrhoea, appears to be in pain or causes any major worry to the parents, medical review is essential.

Although fever in itself is not harmful, non-drug approaches can be used to reduce any discomfort or distress the child may be exhibiting. Simple approaches such as dressing the child lightly or removing most of the clothes will allow body cooling. Do not use cold baths as these may induce shivering and actually increase body temperatures, thus increasing the child's discomfort.

Adequate intake of fluids is important, especially since fever may increase the usual loss of fluids. Encourage the child to drink. Persistent vomiting or refusal to drink, especially in young infants and babies, requires medical review.

If drug therapy is indicated to reduce the temperature, which medication should be selected? In spite of claims and counter claims relating to the efficacy and toxicity of the two commonly-used agents (paracetamol and ibuprofen), there is little, if any, clinical difference between these two agents. Aspirin should not be used. The policy of this hospital is to recommend paracetamol as the first line agent if any antipyretic drug is indicated. This does not infer that ibuprofen has less efficacy, but merely reflects our long clinical experience with paracetamol. Any medication has the potential to cause toxicity, and paracetamol or ibuprofen are not exceptions. Although very uncommon, excessive and repeated doses of paracetamol may cause liver toxicity. Ibuprofen has been associated with acute bleeds, breathing difficulties in patients with a history of asthma and acute renal (kidney) toxicity. Ibuprofen should only be used with caution, or avoided altogether, in patients with asthma, renal disease or if dehydrated.

The critical issue is that neither drug should be given in doses higher than the maximum daily dose nor should regular, repeat doses be given for more than 24-48 hours without medical review – or sooner if the child's condition deteriorates. While it is imperative that excessive dosing does not occur, it is also important to avoid underdosing. Individual doses of oral paracetamol should be 15mg/kg given four to six times in 24 hours, while ibuprofen requires a dose of 10mg/kg given every six to eight hours. Ensure that you have an accurate measuring device for the dose. There is no evidence to support either alternating dosing with paracetamol and ibuprofen every two hours nor for combination therapy – such practice merely exposes the child to potential toxicity from two drugs instead of one! Finally, we should be clear in our expectations as to what the actual effect of these antipyretic agents on the temperature will be. Onset of effect is not immediate due to their mechanism of action, and only modest falls in high temperatures will be realised – false expectations of rapid and dramatic falls in temperature may result in excessive dosing.

The use of these agents as analgesics (pain relievers) has differing implications. In the treatment of pain associated with some soft tissue or bone injuries, ibuprofen may have clinical advantages over paracetamol.

Australian children are subjected to an overuse of medications to treat fever. Many parents consider agents such as paracetamol to have almost miraculous properties in calming, sedating and lifting the mood of children. As health care providers, we have a responsibility to balance such beliefs with facts on, for example, the real clinical significance of fever and the appropriate role and use of antipyretic drugs.

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Tackling childhood obesity

Children who are overweight are likely to become overweight adults (Koletzko et al., 2002).

Australia, like other western and some developing nations, has witnessed an alarming increase in childhood obesity in recent years (Popkin & Doak, 1998). Between 1985 and 1995, the prevalence of overweight Australian children almost doubled and that of obesity almost tripled (Magarey et al., 2001). It is estimated that approximately one in five Australian children are now either overweight or obese (Booth et al., 2001). Furthermore, 25 per cent of obese six-year olds will become obese adults and 75 per cent of obese 12-year olds will remain obese (Koletzko et al., 2002). Persistent childhood overweight and obesity has a substantial impact on health, through changes to the cardiovascular system (raised blood pressure, high cholesterol levels, and glucose intolerance) (Reilly et al., 2003; Sorof & Daniels, 2002; Koletzko et al., 2002), as well as altered liver functioning, reduced mobility, muscle and bone disorders and changes in normal growth and development patterns (Aye & Levitsky, 2003; Reilly et al., 2003).

In a society preoccupied with food, it is clearly not healthy or popular to be overweight. Obesity stigmatises young children even before adolescence (Schwartz & Puhl, 2003; Fitzgibbon, 2004). When shown drawings of children of different sizes, children rank their obese classmates as the least desirable playmates (Zametkin et al., 2004). Obese children and adolescents have a more negative body image than their peers and frequently believe they are personally responsible for having caused their obesity (Zametkin et al., 2004). Adults are not immune from stigmatising overweight children and are likely to believe they are untidy, more emotional and lack self-control compared with normal weight children (Koletzko et al., 2002; Zametkin et al., 2004). The longer term impact of these societal values is reflected in poorer outcomes for income and educational attainment, marital status and mental health amongst overweight and obese children and adolescents (Reilly et al., 2003).

Obesity is a consequence of an overall positive energy balance maintained over time. That is, the energy consumed exceeds the energy expended (Koletzko et al., 2002). While a complex interplay of genetic, psychological and environmental factors contributes towards the onset and maintenance of obesity (Fitzgibbon, 2004), the rapid rise in obesity is believed largely environmental, related

to living in surroundings that allow easy access to food and little requirement for exercise (Jain, 2004). Traditional prevention and treatment of obesity focus on the responsibility of individual children and their parents. Parents are held responsible for feeding their children and made to feel guilty about their child's weight (Jain, 2004). Although this remains a popular approach, it is increasingly recognised that obesity is not simply a health issue afforded by personal choice. It is more a problem that crosses cultural, social, educational and environmental boundaries (Waters & Baur, 2003). People are free to make choices only from those options available to them, and their physical, economic and social environments shape those choices (Milio, 1998). Attempting to treat or prevent obesity, without providing supportive environments that encourage healthier choices, is unlikely to succeed.

In contrast to obesity, the prevention and treatment of health issues, such as tobacco consumption and road safety, comprise a combination of educational, legal and environmental strategies that are now well understood and accepted by the majority of the

community (Schwartz & Puhl, 2003). In the prevention of unintentional childhood injury, parents and carers of young children willingly make modifications to the home environment, such as the installation of safety latches on cupboards, electrical circuit breakers, gates at the top and bottom of stairwells and fences around swimming pools. Outside the

family home, local parks, walking paths, day care facilities, and even aquatic centres are now designed and marketed on the basis of a safe environment. Changes in the physical environment are further supported by government legislation and public education campaigns aimed at ensuring parents are aware of how to minimise their child's exposure to the risk of injury.

If our environment shapes our choices, consider then, that from the time children are two years of age, they are the targets of advertising for a multitude of foods. They are exposed to thousands of food advertisements per year, which are mostly for fast foods, lollies, sugared cereal and soft drinks (Ashton, 2004). An Australian study of television commercials during children's viewing periods found 99 per cent of advertisements shown were for these types of 'high calorie' foods (Zinn, 2004). Advertising to children has an adverse effect on food preferences, purchasing behaviour and consumption (Ashton, 2004), that is why the food industry is one of the top two or three advertisers (Schwartz & Puhl, 2003). In one study, a group of nine- and ten-year-old Australian children believed that Ronald McDonald probably knew what was good for children to eat (Hammond et al., 1999). Beyond advertising, the number and location of 'fast food' restaurants, placement of confectionery in shops, contents and location of vending machines and access to 'soft drinks' provide opportunities to convert the media advertising into consumption. While the media and popular culture promote poor foods, parents are responsible for providing nutritious foods. Yet parents are equally susceptible to the same pressures as everyone else to eat unhealthily (Schwartz & Puhl, 2003).

In addition to an environment that encourages poor food choices, most people opt for sedentary behaviours rather than physical activity.

(Epstein & Roemmich, 2001). When provided with a choice between equally accessible options, children and adults tend to choose the more sedentary activity (Epstein & Roemmich, 2001). On average, Australian children watch three to four hours of television per day, have multiple televisions in their house and about one third have a television in their bedroom (Neumann, 2001, Ridley, 2002). Television viewing, combined with DVD movies, game consoles and computer use, occupy potentially more of a child's time than attending school (Stanger & Jamieson, 1997). While 60 per cent of Australian children are involved in organised sport, they only participate on average in one activity, once a week for approximately one hour (Neumann, 2001). The link between these activities and obesity is now clear. Those who engage in the most sedentary behaviours as children are most likely to be overweight and remain so into adulthood (Hancox et al., 2004).

Long-term success in treating and preventing obesity will require the combined action of many government departments and engage community leaders, health professionals, teachers and families (Catford, 2003). For parents and carers of children wanting to create a more supportive environment for healthier choices, there is strong evidence that even small changes can have a positive and lasting impact on children's behaviour. Suggestions for creating supportive environments to treat or prevent obesity include:

- Reducing access to sedentary behaviours through a reduction of television sets in the household, their removal from children's bedrooms (Saelens et al., 2002; Waters & Baur, 2003) and limiting all electronic-based media use to less than two hours per day.
- The provision of and access to balls, bats, racquets, bicycles and outdoor spaces, providing alternative options to sedentary behaviours (Saelens et al., 2002).
- Reducing the number of meals eaten in front of the television, as well as increasing the number of family meals per week (Zametkin et al., 2004; Saelens et al., 2002; Schwartz & Puhl, 2003).
- Avoid 'fast food' meals, particularly for young children. If 'fast foods' form part of the family dietary pattern, they should be limited to once a month.
- Promoting healthy food choices should start as early as possible (Schwartz & Puhl, 2003).
- Children need approximately 10 exposures to new foods to accept them and learn to prefer new foods as they become more familiar with them (Schwartz & Puhl, 2003).
- Children are also more likely to eat foods that teachers, parents and peers are eating. Have fresh fruit available and visible when children choose food (Zametkin et al., 2004; Saelens et al., 2002; Schwartz & Puhl, 2003).
- Parents and carers can be powerful role models for their children. Their attitudes and behaviours are strong predictors of childhood behaviours. Changes that affect the entire family are more likely to succeed than those focused on modifying only the child environment.

For changes to the family environment to be sustained, reinforcement by the wider community is required. Recent initiatives to increase physical activity during school, provide funding for a national after-

school physical activity program and discussions around restrictions on television advertising to children, recently announced by the Federal Government, are hopefully the beginning of efforts to treat and prevent obesity through a combination of educative, legislative and environmental approaches.

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Children, who spend a considerable part of their waking day in unchallenging, alienating environments—dominated by artificial lights and human-created materials—often react by acting out with what adults perceive as challenging behaviours. In contrast, more natural environments are stimulating and at the same time have a calming effect.

The physical environment therefore plays a key role in influencing children's behaviour. There are several factors to consider when designing a new environment for children or improving an existing one. These can be divided into a number of categories:

- size and shape;
- light, orientation, air quality and acoustics;
- materials;
- nature; and
- spaciousness.

Size and shape

Building regulations are generally tailored to suit adults' needs and requirements, rather than those of children, who are smaller and have different space needs. They seek out 'cave-like spaces to get into and under – old crates, under tables, in tents ...'(Alexander, et al., 1977, p. 928). So when we consider the needs of children, we should plan for discrete spaces contained within larger areas. The activity taking place will dictate the size and proportion of the space required. For instance, listening to a story does not require the same physical space as movement activities.

Indoor spaces should be contained, with access limited to one or two doors at the most. A space that is not contained and defined and has access from several sides, invites cross-traffic that interferes with the activity within that space. Large spaces with no defined sub-spaces, on the other hand, invite running and loud behaviour.

Light, air quality and noise

Light

The critical period for developing vision is during the first 24 months of life, and this must be taken into consideration when choosing lighting for child care services. Ideally, light should enter the room from the north. This meets environmental requirements (saves lighting, heating and cooling) and at the same time provides for a more pleasant temperature and quality of light. In addition, children can observe the sun as it travels across the sky, which gives them a sense of time and orientation.

If, however, a centre requires artificial light, it is important to consider the choice of light sources, light intensity and light quality. The two most common types of light sources are fluorescent light tubes and incandescent filament lighting bulbs.

Fluorescent lighting is useful for general orientation and the energy-saving long-life tubes are economical and environmentally-friendly. However, this kind of light is alienating if it is the only source of light. It flickers almost imperceptibly but constantly, creating disturbance which can have a negative effect on children's wellbeing, and therefore, on their behaviour. In addition, fluorescent lighting creates distorted colours. As children develop their sight in the early years of their lives, the choice of light sources is particularly important.

Incandescent and halogen lighting are more friendly for constant use. Lighting up a particular area can also be used to define a space, in the same way that mats are used to define a particular activity area, and focused where children need it. This kind of light also creates shadows to orient children to shapes and objects, mimicking natural sunlight and a more natural colour, in contrast to most fluorescent tubes.

Air quality

It is well known that the weather affects mood and behaviour. The inside climate can be controlled and stabilised through the use of natural cross-ventilation. Ventilation also helps to neutralise the build-up of positive ions, which tends to heighten tension. Perhaps child care workers may not be aware of ions or of what causes tension build-up inside, but they know when to take the children outside as a response to the build-up of too much boisterous energy.

Managing challenges Is the environment



Although airconditioning is thought to add to positive ions, it is useful in extreme temperatures – an increasingly common occurrence due to global warming. Choose air-cooled air conditioners, as some water-cooled systems have been shown to be associated with Legionnaires' Disease.

Noise

There are two main categories of noise:

- External noise, which reaches us from passing traffic, building sites or industrial plants. External noise can be reduced through the use of insulation and double glazed windows.
- Internal noise, that is generated by children, adults, air-conditioning and kitchen noise. Noise is reflected from hard surfaces such as glass, ceilings, walls and floors without floor covering. Large spaces create their own problems, as there are no walls to prevent noise from travelling. Noise can be very unpleasant and disturbing, and adds to children's aroused state. Noise inevitably invites escalating vocalisation, increasing the already high noise level.

At particular risk are the under twos, as the hearing of these children is at a critical stage of development. It is particularly important that they have an opportunity to

Challenging behaviour: Environment a factor?



experience silence and soft sounds during their day. Although busy children are not generally very noisy, inside noise created by a group of boisterous children has been measured at an average of 73 decibels, with individual screeches reaching 95 decibels (Brian Marston, Consulting Acoustical Engineer, personal communication, 4 May 2004). When this is compared to heavy traffic noise, which measures at around 85 decibels, the need to address inside noise has to be acknowledged. Noise can be reduced by introducing noise-absorbing surfaces and materials such as carpets, curtains, soft furniture and if necessary, acoustically-treated ceilings.

'The critical period for developing vision is during the first 24 months of life, and this must be taken into consideration when choosing lighting for child care services.'

Materials

New materials are constantly being introduced into the marketplace without adequate research on their long-term impact. For instance, lead and asbestos have been used extensively in the past, but have since been shown to have detrimental effects on human health. More recently, copper arsenic treated logs, used extensively

in playgrounds, have been identified as a risk to both children and adults. Some plastics create static electricity, and certain plastics can have an adverse effect on health. As we may be unaware of how new materials can harm us later in life, a discerning child care professional should consider all materials used in a centre with possible risks in mind.

As a rule of thumb, one should consider using natural materials where possible, and stay away from artificial materials, particularly certain plastics and glues. For instance, linoleum flooring, made predominantly of natural materials, can be used in preference to vinyl flooring. Linoleum flooring can now be obtained in an abundant choice of colours and patterns and is an environmentally-friendly product, which can be easily recycled.

Nature

Children's sensory experiences are important to their development. Access to and contact with the natural environment and fresh air creates opportunities for such experiences. Safe use of water, for instance, has a soothing effect. Besides water, the outdoor environment should also contain plants, bushes, rocks, trees, wood, grass, insects, animals (e.g. chickens), shade and shelter.

Flowers and plants are important aesthetic and environmental features and their presence helps children experience wonder and develop a healthy relationship with nature. When considering plants, ensure that only non-poisonous plants are used. Concerns about attracting insects such as bees, can be addressed through sensible choice of location.

Many a child has been distracted and soothed when saying goodbye to parents, with a visit to the fish tank or to see other pets. A natural environment includes animals, and teaches children about stewardship as they feed and look after them. Although pets may be an added responsibility for the busy child care worker, they work marvels for challenging children, who, even when they find it difficult to relate to other children, may form attachments to animals, and thus aid development of empathy and emotional intelligence.

More than 'adequate' space

Generous outdoor spaces in child care settings reduce challenging behaviours in

children, yet most centres adhere only to the current minimum outdoor environment space requirements. This limits the service to the installation of artificial grass and soft fall, because children wear down the grass in such crowded spaces. More than 'adequate' space is therefore needed for the provision of play spaces with natural environments.

A final word about environments is the need for stimulating programming. If the environment is boring, whether it is because of unnatural materials or ill-defined spaces or lack of stimulating educational provisions, the outcome is the same – an increase in challenging behaviours.

Viggo Knackstredt & Mimi Wellisch

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A statement of respect and commitment to Indigenous children and families

Early Childhood Australia (ECA) acknowledges Aboriginal and Torres Strait Islander people as the original inhabitants of Australia and recognises their culture as part of the cultural heritage of all Australians.

We acknowledge and regret the loss of family, cultural identity, lands and waters, languages and communities by Aboriginal and Torres Strait Islander people that resulted from the invasion of Australia by peoples from other places. In particular, we acknowledge the findings and support the recommendations of 'Bringing Them Home', the report of the Human Rights and Equal Opportunities Commission Inquiry into the Stolen Generation.

We are sorry for the ongoing suffering, loss and continued hardships faced by Indigenous children, families and communities today.

We are committed to reconciliation and recognise:

- the significance of the home cultures of Indigenous children to their identity and sense of self worth;
- the need for communities, environments, services and interactions to positively reflect and promote these identities and cultures and to support their growth in new generations of Indigenous children; and
- the importance of all Australians knowing and understanding the histories and current realities of Indigenous people, and the need for all Australian children to grow up in a society that acknowledges and addresses this past and present.

To demonstrate our ongoing commitment to reconciliation, Early Childhood Australia will:

- actively seek involvement of Indigenous people in all aspects of ECA activities, by developing reciprocal links with Indigenous organisations with a commitment to work together on advocacy and action around issues including young children and their families;
- actively challenge insensitive and biased attitudes, practices and behaviours. This may mean:
 - ensuring that current and future practices, publications and policies throughout the organisation are respectful of Indigenous cultures, acknowledge current realities, and are proactive in supporting and acknowledging the many examples of community resilience;
 - including social justice and reconciliation issues in ECA's media campaigns and by public comment on relevant issues and events; and
 - sponsoring awareness-raising activities such as reading groups, guest speakers, research reviews, professional development training and newsletter articles.

It may also involve other responses and activities of local relevance, including that each ECA branch actively seek and disperse information relevant to its local Indigenous histories to inform practice and understanding.

ECA will actively promote this commitment to all ECA members in all branches around Australia and encourage them to fulfil it.

The need for this is clearly underpinned by the overwhelming evidence that Indigenous children continue to be less healthy and have less positive life chances than other Australian children. This situation, noted at local, national and international levels, needs urgent attention. Strategies implemented to date have mostly failed to make substantive changes to the outcome for these children and this impacts on our collective capacity to uphold the Convention on the Rights of the Child and nurture the wellbeing of all children.

ECA draws attention to this *Statement of respect and commitment to Aboriginal and Torres Strait Islander people* and in doing so urges those committed to these ideals to translate these words into action. Prescribed actions are difficult to articulate and often mean local insights are overlooked. Instead, ECA suggests that consideration be focused on the following:

- Building relationships – this will take time, often many, many years, and a strong commitment to persevere despite, at times, substantial difficulties.
- Seeking local answers. What will work in one community may not work in another. Have conversations and make connections with local Indigenous people to develop respectful ways of learning and working together.
- Making the effort to act with integrity and in collaboration is better than doing nothing. Decisions are not always easily made nor directions clear but all actions are learning opportunities.
- The process is just as important as the action. All actions must be undertaken with respect, patience and humility.
- Taking time to listen. Listening is often more important than talking.

Invitation for ECA branch action

- Find out who the traditional owners are in your local area.
- Find out about significant events in Indigenous history – locally and nationally.
- Promote achievements and celebrate outstanding work that supports the wellbeing of Indigenous children and their families.
- Publicly and accurately acknowledge land owners at appropriate ECA gatherings.
- Invite traditional owners or their delegates to do 'Welcome to Country' at ECA formal gatherings. Remember that this is not to be undertaken by others.
- Increasing awareness of the issues for Indigenous children and their families.
- Share this information with your members.
- Place Web links on branch sites.

Having committed to this statement, we will review our action and celebrate our achievement at each ECA National Council meeting.

Pam Cahir

National Director, Early Childhood Australia

Copies of other ECA policies are available at www.earlychildhoodaustralia.org.au

'We acknowledge and regret the loss of family, cultural identity, lands and waters, languages and communities by Aboriginal and Torres Strait Islander people that resulted from the invasion of Australia by peoples from other places.'

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