

# Engaging families:

## Building strong communication

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**Roslyn Elliott**

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Registered for posting as a publication—  
PP232100/00036

ISSN 1440-5148

ISBN 0-9751935-9-7

Printed by Goanna, Canberra

## Contents

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About the author	ii
Introduction	1
Why is family involvement important?	1
Starting the communication process	2
A process to promote shared meaning	3
Stage 1: Communication about physical and safety needs	5
Stage 2: Communication about belonging	8
Stage 3: Communication to build self-esteem	10
Stage 4: Communication about knowing and understanding	11
Stage 5: Communication based on self-actualisation promoting reciprocal communication	13
The process as practice	14
Conclusion	17
References	18

## About the author

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Roslyn Elliott has worked in the early childhood field for 30 years, and has an extensive range of experience in family day care, long day care and as a children's services advisor. For the last 13 years she has been a lecturer in the School of Education and Early Childhood Studies at the University of Western Sydney.

Roslyn's research has been particularly focused on how early childhood services and parents work together to give children the best possible outcomes. Her studies have shown that parents feel their voices are not heard strongly enough by early childhood staff, hence this RIPS booklet to encourage staff to work more closely with families and to provide a framework to achieve this.



## Introduction

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Partnerships are built on mutual trust and respect. They recognise and value the ideas and opinions of all parties and, in early childhood services, both families and staff need to work together to support young children's learning.

This book discusses the importance of sharing and combining information about the social and cultural values of families, and the hopes and expectations they hold for their children, together with the knowledge of educators about effective pedagogy to support children's learning. In doing so, strategies to promote such communication are identified.

### **Positive staff and family interactions lead to quality service provision.**

## Why is family involvement important?

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Early childhood services are relationship-based organisations, although such links are not always easily established between parents, children and staff (Bertacchi, 1996). According to Davies (1997), boundaries exist between staff and parent spheres of action and, while both are aware of the shortcomings of this situation, neither appear to know how to change it. Therefore, alternative approaches for sharing information need to be developed.

In early childhood contexts, both the family and educator possess valuable information about young children's abilities, interests, likes, dislikes and needs. Conversations between parents, children and staff are important to ensure both children's home and centre environments support learning and serve the child's best interests. Children's learning encompasses the knowledge they have of the world gained through all experiences at home and in their communities, in early childhood settings and through interactions with others. All childhood experiences reflect the values and mores of children's communities and broader society (Bromer, 1999; Coleman, 1997; Morrison & Rodgers, 1997; Powell, 1998).

The centre works in partnership with families to achieve continuity of care for children (QIAS Part A Goals, NCAC, 2001, p. 7).

Interactions and communications between children, staff and families are characterised by warmth, responsiveness and respect for individuals (QIAS Part A Goals, NCAC, 2001, p. 7).

The partnership between families and staff is characterised by an active exchange of information and mutual respect ... (QIAS Quality Area 3, NCAC, 2001, p. 30).

Staff create a happy, engaging atmosphere and interact with children in a warm and friendly way. (QIAS Principle 1.1, NCAC, 2001, p. 8 ).

When there is continuity in the care received at home and in the centre, children can develop security and learn to trust (QIAS Quality Area 3, NCAC, 2001, p. 30).

Family members are encouraged to participate in the centre's planning, programs and operations (QIAS Quality Area 3: 3.2, NCAC, 2001 p. 34).

Staff and families use effective spoken and written communication to exchange information about individual children and the centre (QIAS Quality Area 3: 3.1, NCAC, 2001, p. 30).

When families enrol their children in early childhood services, their initial concern is for children's wellbeing and safety. Once families establish in their own minds that their children are safe, well cared for and enjoy the service experience, they relax and begin to look differently at their children and services. They can then begin to explore program options in more depth and start to develop relationships with staff, other children and families attending the same service (Elliott, 2003).

The crux of family-focused early childhood provision is the quality of communications between families, staff and children. All parties should be able to engage in meaningful dialogues, but attaining this type of communication requires careful thought and attention. Families take time to feel comfortable with and develop trust in staff who work with their children.

Asking families about their values and child-rearing practices and then what child-related information and feedback they want is the first step in developing a responsive and supportive developmental environment. In a setting where staff invite and encourage parent contributions, and demonstrate their willingness to listen, parents will be more likely to share information.

Working effectively with families requires an ongoing commitment to the establishment and maintenance of solid, trustworthy relationships. Therefore, all parents' contributions need to be carefully nurtured and valued.

### Starting the communication process

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Staff can assist parents and children to settle into the service by initiating, promoting and sustaining ongoing reciprocal communications. Such communications enable a 'shared' approach to child care and education. This results in a continuity of values and practices between home and early childhood service contexts (NCAC, 2001; Workman & Gage, 1997). When information is shared, families develop a more comprehensive appreciation of what constitutes quality care and education, and staff are more able to respect and honourably incorporate families' interests and values into programs. As a result, program development and evaluations of services are cooperative enterprises that improve the quality of the care and education (Epstein & Sanders, 1998).

## A process to promote shared meaning

All parents have dreams and aspirations for their children, and early childhood services can play a key role in each child's future. It is for this reason that parents must be encouraged to talk openly and comprehensively about their children's development and learning, and to understand the purpose and content of developmental and educational experiences (Elliott, 2003).

There are five sequential stages of communication to achieve reciprocal understanding and engagement (Elliott, 2003).

- 1: Communication about physiological and safety needs
- 2: Communication about belonging
- 3: Communication about self-esteem
- 4: Communication about knowing and understanding
- 5: Communication based on self-actualisation promoting reciprocal engagement

These stages correspond to Maslow's (1968) hierarchy of needs, which explains how humans have identifiable levels of need that must be met for their total wellbeing and development of 'self'. These needs begin with (1) physiological needs (food, water, clothing); then move to (2) safety and security; followed by (3) affection; and then (4) belonging. Meeting all these needs leads to (5) self-actualisation (Maslow, 1968).

Staff respect the diverse abilities and the social and cultural backgrounds of all children and accommodate the individual needs of each child (QIAS Quality Area 2: 2.2, NCAC, 2001, p. 15).



These stages complement typical information-sharing methods and provide a framework to build strong, reciprocal family engagement. The five stages follow a cyclical process which extends over time in an ever-increasing spiral. Information and knowledge about children, families, staff and services is shared and accrued, leading to better understandings and appreciation of individuals within both home and early childhood contexts. Given that parents generally want to contribute to discussions but may be unaware how to initiate such interactions, the communication cycle provides a step-by-step process to achieve the desired reciprocal engagement (Elliott, 2003).

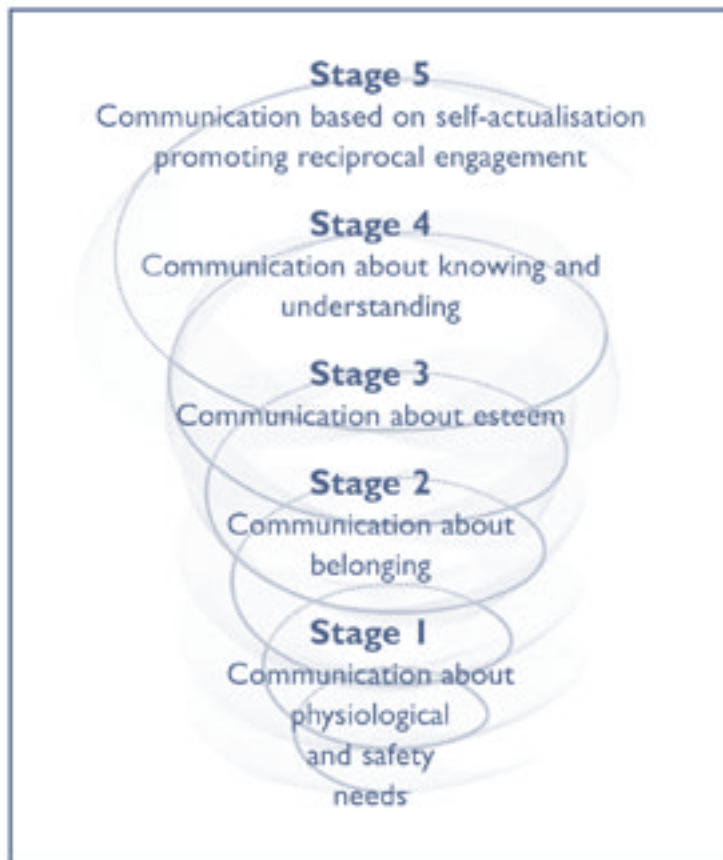


Figure 1. Model of Communication Accretion Spiral (Elliott 2003).

Partnerships with families are promoted by responsive staff (QIAS Quality Area 3 key concept, NCAC, 2001, p. 30).

Each stage of the information-sharing process corresponds to one of the five levels and provides the basis for the next stage of more complex and detailed communication. Over time, these communications and interactions build trust and mutual understandings between individuals and lead to the sharing of new knowledge between families and staff.



## Stage 1: Communication about physical and safety needs

A family's relationship with service staff begins at the time of enquiry and enrolment. Communication at this point sets the stage for ongoing interactions that will have significant consequences for all parties. It is here that Stage 1 of the communication cycle is established and parents and staff can begin a relationship. Ideally, this will develop to provide the best possible experience for both the child and family. If it doesn't, communication may be stifled with little further interaction or engagement, even after a child's commencement at the centre.

The enrolment process should be a two-way process designed to achieve two things. First, it should include explanation of the ways communication can occur, and highlight the importance of shared understandings of children's developmental needs. Second, it should explain how families can contribute to decision-making processes. Parents should be provided with diagrammatic and text information describing how the service is managed and how developmental programs for each child are planned.

The centre has an orientation process for all new children and families (QIAS Quality Area 3: 3.3, NCAC, 2001, p. 30).

Management consults appropriately with families and staff and written information about the centre's management is readily available to families and staff (QIAS Quality Area 10 Principle 10:1, NCAC, 2001, p. 114).

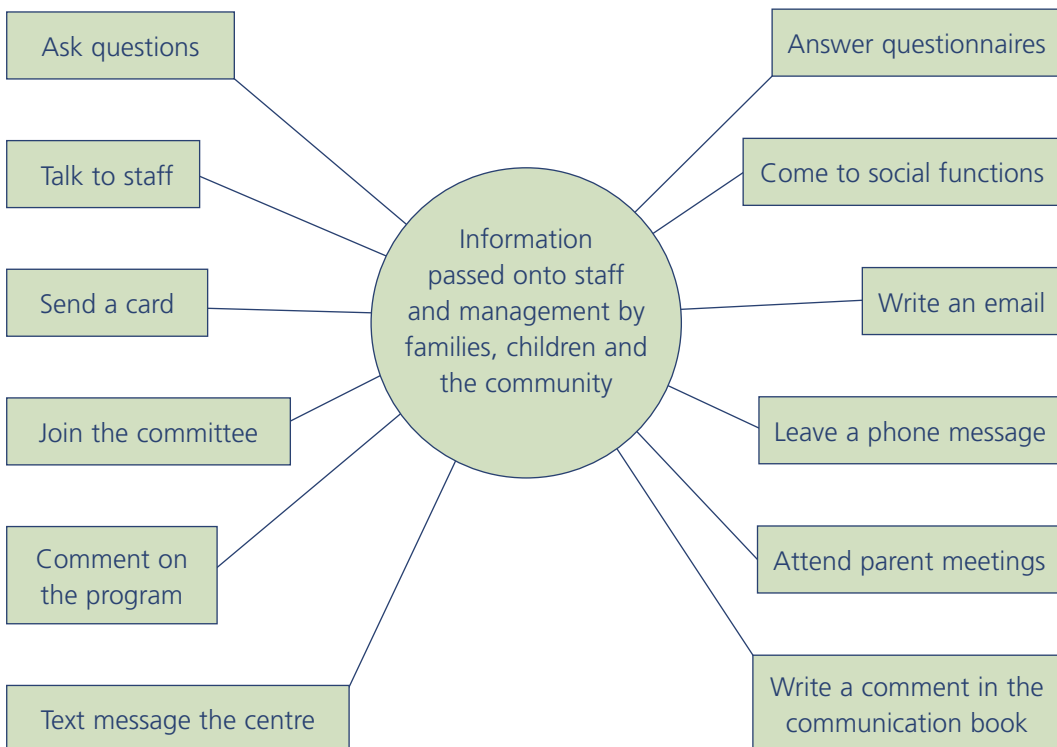
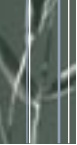


Figure 2. Information-sharing opportunities



As well as collecting and documenting pertinent information about the child's medical and health history, the enrolment discussion should also seek information about the family's values, interests and possible engagement with the service. Interpreters should be available for non-English-speaking families and written information translated into related community languages.

The focus of parents' initial questions usually relates to ensuring their children's health and safety is assured; they must feel assured that the information they provide will be treated with respect and confidentiality. Satisfactory communication at this stage ensures that parents feel secure and supported. Parents also need information explaining how the service operates and the opportunities available to them to become associated with, and contribute to, their child's care and education.

Staff need to discuss with each family how they can build a collaborative and meaningful relationship together which will benefit children. Over time, as families develop understandings about what is being asked of them, and through their input into shared dialogues with staff and other families, they are likely to contribute meaningfully to the service philosophy and engage in the development and evaluation of the curriculum.

Once children begin attending the service, intentionally-planned exchanges of simple greetings in community languages and purposefully-shared information between staff and parents at drop-off and pick-up times will complement documented information and begin building relationships. These relationships can then develop to the point where shared understandings become a characteristic of these interactions.

At first, the daily communications between staff and families tend to focus on the child's physical state. Parents' concerns about eating, sleeping/resting, toileting and settling into the service are primary, so responding to these questions is critical. Once parents are confident that their children are safe, the next stage of communications—related to the child's self-esteem—can begin.

Planning needs to address responsive ways for the centre to work in partnership with families (QIAS Quality Area 3 key concept, NCAC, 2001, p. 30).

The centre has written policies and procedures on child protection, health and safety; and staff monitor and act to protect the health, safety and wellbeing of each child (QIAS Quality Area 7: 7.1, NCAC, 2001, p. 78).

Contributions to the program by families is valued and acted on (Quality Area 5 key concept, NCAC, 2001, p. 45).

Culturally sensitive communications with children and families foster respect (QIAS Quality Area 2 key concept, NCAC, 2001, p. 15).

The various ways that families care for their children should be respected (QIAS Quality Area 2 key concept, NCAC, 2001, p. 14).

Staff interactions with children enhance all aspects of each child's development (QIAS Part A Goals, NCAC, 2001, p. 7).

The various ways that families care for their children should be respected. Culturally sensitive communications with children and families foster respect (Quality Area 2 key concepts, NCAC, 2001, p. 15).

## Stage 2: Communication about belonging

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Children, families and staff all share the same strong human characteristic of needing to belong and be loved. Meeting this need is essential if children are to attain the independence and sense of autonomy necessary to achieve their potential. This sense of belonging and connectedness is especially necessary for parents if they are to gain the confidence needed to contribute to services.

The second stage of the communication process is about building on what parents have learned about children's safety and wellbeing. At this stage, communications need to change form so that the information exchanged with parents is more personalised. The objective is for both parties to become more informed and knowledgeable about the child within each other's context. As the sense of belonging and being loved rarely develops at a first meeting, communication about this dimension must be honest, reciprocal and circular for it to unfold over time and be of value.

Staff need to initiate conversations and demonstrate to parents their professional interest and affections for the child, explaining their aim to build up a complete picture of the child to inform planning and link home and service experiences. Such conversations should demonstrate staff's respect for parents' needs and cultures and a desire to understand children's learning. Once communications occur at this level, staff can then begin to discuss aspects of a child's socialisation and interests. When staff information about each child is shared, parents are better able to communicate their insights about children's personality characteristics, strengths, interests, likes and dislikes.

Furthermore, when parents realise that the information they provide about home life, family friendships and interests, cultural/religious values and involvement in community events is important, they are more likely to share these details. Such exchanges place communications on a more personalised level, and convey a sense of genuineness and a desire to really understand and respect others' points of view.

Good communication channels make it easier for staff to seek additional information from families about their views or particular cultural/religious events they would like the service to embrace, celebrate or acknowledge. Insights into children's home experiences enable staff to develop greater understanding of children and provide better targeted developmental opportunities and interest-based experiences.

An important outcome of such communications is that it develops a shared appreciation of each child's individuality. Families' culture, religion, values, expectations and opinions are acknowledged, honoured and respected and their unique needs are supported as each child's sense of belonging within the service context is enhanced. Communications which are based on mutual respect and trust encourage both parties to see themselves and each other as valued contributors to children's care and education. Open discussions do much to allay many parents' anxieties about leaving their children in the care of children's services staff. More significantly, they engender a sense of community and belonging that embraces relevant cultural and social values and expectations.



There can be differences in the kinds of emotional expression that are valued by different families and cultures (QIAS Quality Area 1 key concept, NCAC, 2001, p. 8).

The centre works in partnership with families to achieve continuity of care for children (QIAS Part A Goal, NCAC, 2001, p. 7).

Children's self-esteem can be promoted by creating a positive environment (QIAS Part A Goals, NCAC, 2001, p. 8).

Respect shown for children will help overcome any inequities they may experience because of their gender, culture, ethnicity, abilities or other differences (QIAS Quality Area 2 key concept, NCAC, 2001, p. 15).

Staff guide children's behaviour in a positive way (QIAS Quality Area 1: 1.2, NCAC, 2001, p. 8).

Programs cater for the needs, interests and abilities of all children in ways that assist children to be successful learners (QIAS Quality Area 5: 2, NCAC, 2001, p. 44).

### Stage 3: Communication to build self-esteem

This next stage of communication involves sharing information about practices occurring within the dual contexts of centre and home. Intentional communication at this point helps staff and parents better understand each other's situation and promotes continuity between the service and the child's home.

Stage 3 communication should address esteem needs by promoting the exchange of individualised and specific information about the child within both home and service contexts. A sense of being loved and belonging goes some way toward the development of a healthy sense of self and positive self-esteem.

Slavin (1997) says that self-esteem is a reflection of the way we evaluate our own characteristics, skills and abilities as a result of the way we perceive we are valued by others. Positive self-esteem influences motivation for a range of learning and related tasks and impacts on the way people communicate with one another.

The value placed on ourselves by others is acquired as a result of prolonged interactions, where strengths, attributes and skills can be discerned, analysed and affirmed.

Good communication between staff and parents is essential for children's self-esteem needs to be met. Conversations about children's triumphs and each child's successes, as well as skills and strengths, help to build a rich picture of development. The everyday happenings and events in a child's life become part of the conversations across both contexts. Once parents gain such confidence in a centre they are better able to share and/or request information about parenting strategies, information about aspects of children's behaviour and seek the professional advice of staff about ways to encourage and help their child feel confident and motivated.

Parents who feel their opinions are valued and respected are likely to engage positively with staff, so that together both can promote each child's self-esteem. The more specific and better-targeted developmental programs that result from educators' increased knowledge of children's needs are likely to promote more confident, motivated and socially competent children who are better able to take risks.

## Stage 4: Communication about knowing and understanding

Stage 4 marks the next shift in the development of communications between staff and parents. Typically, parents are aware of their child on an intimate and intensely subjective basis, while early childhood staff have greater formal knowledge and experience which they use to understand all children. Newman and Polnitz (2001) refer to this as 'informed knowledge'. Hughes and MacNaughton (1999) explain that parents' perceived concept of 'expert knowledge' can create tension between families and staff. It is this tension that discourages parents from becoming involved in their children's early education.

At Stage 4, staff need to reach out and connect with parents to promote meaningful communications. Many parents are unaware of the purpose of the learning and developmental experiences planned in early learning programs, and educators must take the lead in initiating conversations to connect with families. Initiating and supporting conversations and providing feedback on children's experiences and outcomes is central to engaging and connecting families and learning (Elliott, 2003).

To start this conversation, staff should make a clear effort to discuss the centre's programs and encourage parents' questions about children's learning and planned educational experiences.

At Stage 4 the process of information-sharing and providing insights about children's learning and outcomes crosses the boundary separating the family and professional realms. Staff must recognise that while their professional opinions and knowledge are valuable (and indeed many parents stand in awe of educators) this knowledge must be specific to their children or it will lack meaning and/or relevance. Communication of this nature empowers parents, enabling them to contribute to longer-term educational decision-making.

Parents cross the boundary into the 'professional realm' when they express their desire for knowledge about the educational value of experiences provided for children and seek information about the philosophies underpinning events at centres. Parents are interested in the links between theory and practice, and the ways learning is planned and evaluated. Most parents want to maximise their children's learning potential and want to contribute to policy and decision-making.

The program involves all children actively in learning. The program includes both planned and spontaneous experiences (QIAS Part B Goals, NCAC, 2001, p. 43).

Staff and families use effective spoken and written communication to exchange information about individual children and about the centre (QIAS Quality Area 3: 3.1 key concept, NCAC, 2001, p. 30).

Family members are encouraged to participate in the centre's planning, programs and operations (QIAS Quality Area 3: 3.2, NCAC, 2001, p. 30).

Centre policies, goals, procedures and practices should be consistent with the centre's philosophy and should be well known to staff and families (QIAS Quality Area 10 key concept, NCAC, 2001, p. 114).

Program goals and plans should take account of the centre's philosophy and broad goals; observations of children's learning and wellbeing; information from families ... Evaluation provides information for further planning and improvement (Quality Area 5 key concepts, NCAC, 2001, p. 45).

To make this communication effective, staff must demonstrate that home experiences are valued and that new experiences in settings build on previous experiences. Parents need to know that their ideas are valuable, respected and necessary to support children's learning. Staff need to acknowledge parents' intimate knowledge of their children and seek their input. Such reciprocal engagement is likely to result in confident, motivated parents who contribute to program philosophy, goals, and planning and evaluation. Strong relationships can grow into true partnerships where both parties work together to provide the best outcomes for children. Parents are then armed with the type of knowledge to support their children's learning at home, and strengthen continuity and connectedness between service and home contexts.

The previous four stages of communication have shown how parents and staff can accumulate knowledge as they exchange information and build on existing knowledge. Reciprocal relationships are established as boundaries are crossed.





## Stage 5: Communication based on self-actualisation promoting reciprocal communication

Self-actualisation can occur only when staff and parents communicate and establish relationships built on mutual respect, honesty, trust and recognition of each others' valuable role in the learning process. Maslow (1968) explains how self-actualised people are individual and independent, are open and spontaneous, yet deep and democratic in their dealings and interactions, because they accept themselves and others. The positive outcome of parents' and staff communications result in reciprocal engagement and self-actualisation.

It is at this point that true partnerships are born and the best outcomes occur. Once parents and staff cross the invisible communication boundaries and barriers, and begin to share ideas and information, a sense of connectedness that enables more effective planning and decision-making can develop.

Most importantly, children benefit from strong partnerships between their homes and early childhood settings. When parents and staff work collaboratively to share responsibility for planning, programming and evaluation of programs, there is continuity of learning between service and home.

Communication for self-actualisation means that staff feel more confident about their professional judgement and professional knowledge. Self-actualisation also means that parents have a better understanding of the professional roles of staff.

Most importantly, communication for self-actualisation ensures that children are given the best opportunities to maximise their potential. Effective communication encourages the building of interpretive communities and the development of shared understanding (Rogoff, 1990): it promotes a culture of excellence. Such excellence reveals itself in standards of quality far in excess of those prescribed. In this case, 'quality' is exemplified by competent and ethical professional conduct and strong developmental and learning programs for children.

Family members are welcome in the centre and contribute their knowledge and skills to enrich the children's program (QIAS Quality Area 3, NCAC, 2001, p. 30).

Ongoing quality improvement, continuity of care and cultural sensitivity are promoted through:  
: Staffing practices; systematic monitoring of centre operations; families and staff contributions to relevant management decisions; and professional development of staff. (QIAS Quality Area 10 Part D Goals, NCAC, 2001, p. 113).

The physical and emotional wellbeing of children is protected and enhanced (QIAS Part C Goal, NCAC, 2001, p. 77).

Appropriate independence, self help skills, curiosity, problem solving, logical inquiry, mathematical thinking and originality of thought and action should be valued for learning and development to occur in balanced ways. (QIAS Quality Area 6 key concept, NCAC, 2001, p. 59).

## The process as practice

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To promote the kind of change which will ensure growth for both children and families and increase 'quality' in services, staff and families must work together toward a shared focus. Initial communications need to identify the primary concerns of both parents and staff about children's entry into services. Once these concerns are addressed, other areas of discussion can, and should be, raised. The adoption of strategies and practices which promote effective interactions enables communications to flourish and relationships to be forged over time. Mutuality of ideas, respect, shared concerns and understandings can emerge at any point and may be triggered by remarks, personalities, questions or expressions of interest. While some interactions result in spontaneous relationships, others take longer and require effort and commitment. This is likely to be the situation in early childhood settings where the dichotomous roles of service provider–client, professional–lay, teacher–parent role present a natural barrier to communication. Overcoming that barrier is essential to ensure excellence in quality and excellence in care and education for children in early childhood settings.

Mindful of the value of collaborative dialogue, any plan to increase and create effective communication processes must include:

- 1) a joint evaluation of current practices by collaborative partners;
- 2) planning priorities for action based on this evaluation;
- 3) implementation of new ideas and strategic plans, coupled with an openness to innovation and a willingness to consider new possibilities; and
- 4) reflection and review of the process.

(Modified from Pascal, 1999).

Reflection and review of any process involves a capacity for self-reflection which, according to Marieneau (1999), is marked by four key attributes. The first is that 'intentional self-assessment is a powerful instrument for learning from experience' (p. 143). The second attribute is that self-assessment strengthens a commitment to better practice and provides the motivation to continue monitoring attitudes and behaviours which ensure that better practice is maintained. Third, self-assessment enhances the higher-order thinking skills (setting and monitoring goals; seeking and offering feedback; enhancing problem-solving, decision-making and critical-thinking skills) needed for functioning in the workplace. Last, self-assessment fosters self-perception and authority which is demonstrated in a shift from an external to an internal locus of control (Marieneau, 1999).

With this in mind, reciprocal engagement develops as staff and parents build knowledge to support the dialogues between them. Such engagement enables both parties to begin to think about the issues involved in shared communication to develop shared understanding. Self-reflection by staff and parents is needed to consider complementary contributions to children's development. As collaboration develops, mutually-agreed goals and values are identified.

**One way information methods:** Many services use handbooks, newsletters, daily information charts and central bulletin boards to provide daily or quarterly information about the service to families. While these approaches to information sharing are important, many have in-built limitations, as they do not provide sufficient detail or explanation to families about how decisions are made.

**Central bulletin boards:** Central bulletin boards are yet another format for providing information to families. Whether this is general information to be passed on to all interested parents or specific emergency health information—such as a diagnosed case of measles in the centre, which may have implications for some children's attendance at the centre—the display of all information should be carefully considered and reflect community literacies and languages.

Ongoing quality improvement, continuity of care and cultural sensitivity are promoted through: Families and staff contribute to relevant management decisions (QIAS Quality Area 10 Part D Goals, NCAC, 2001, p. 113).



Effective management works in partnership with staff and families to create and sustain environments that foster learning and development of all children. Continuity of care is beneficial to children's learning and development and is fostered through effective management practices (QIAS Quality Area 10 key concepts, NCAC, 2001, p. 114).

## Listening to parents

The first step in engaging families is to actively listen to parents and then to acknowledge their ideas. This requires staff to move beyond the mere reporting and recording of information and knowledge about children's development and experiences, and to actively engage in dialogue with families.

## Provide evidence

Staff need to document and explain both the purpose and focus of the educational opportunities afforded children, and to show evidence of the processes implemented to address the service's values and goals. Furthermore, staff need to appreciate the benefits and necessity of reciprocal communication and see this as both a professional responsibility and benefit.

## Accumulated knowledge

Through interaction and communication, families and staff accumulate knowledge about children. An exchange of information about aspects of children's experiences within the home and service contexts leads to new understandings by building on what was previously known. As boundaries are crossed, reciprocal relationships are established. Positive outcomes for children start once families and staff share their knowledge. Communication for self-actualisation means that staff feel confident about their professional judgement and their status as holders of knowledge.

**Newsletters:** Newsletters enable service staff to pass on current information to parents. A well-considered and developed newsletter can be used to build a bridge between the child care centre and each child's home by bringing the centre to life. Detailing parent contributions to programs and sharing news about happenings in the centre can assist parents' understanding of programming decisions related to children's newly-developed interests. Newsletters should explain the purpose of programmed activities and excursions, as well as special activities, not simply report the 'fun' of these experiences.

The most important feature of communication for self-actualisation is that children are given the best opportunities to maximise their potential. Effective communication encourages the building of interpretive communities and promotes a culture of excellence. 'Quality' is exemplified by mutual respect, openness, generosity and genuine friendship on the part of all stakeholders in a shared approach to the care and education of young children.

## Conclusion

To promote the kind of changes in communication practices which will ensure social and cognitive growth for children, staff and families must work together toward a shared focus. As previously noted, effective communication is achieved by adopting strategies and practices which, rather than being linear in nature, are complex, multifaceted and interwoven. They need to build on, and be contingent upon, influential interactions between individuals. Some relationships take longer than others to develop and require extra effort and commitment. This is likely to be the situation in early childhood settings where the parent–professional dichotomy can present a natural barrier to communication. Overcoming that barrier is essential to ensure excellence in the care and education of young children.

**Handbooks:** Handbooks should provide families with sufficient detailed explanation of the different forms of family involvement and the contributions parents are invited make to the service. The identification of informal and formal processes of family contribution and participation in the development of the care and education programs should be clearly defined and should highlight how families are able to contribute in meaningful ways and to assist staff evaluate the programs provided.

The reciprocal engagement generated through the five stages of communication outlined in this book impacts positively on outcomes for children. Staff move beyond simply addressing children's basic needs of safety, health and wellbeing to that of promoting and providing developmental opportunities to enable all children to reach their fullest potential (Maslow, 1968). As a result, the links between the centre and home are strengthened. These intended interactions and communications will ultimately influence not only the 'quality' of early childhood settings but will contribute to the humanity of communities as children grow, develop and learn.



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Registered for posting as a publication—  
PP232100/00036

ISSN 1440-5148

ISBN 0-9751935-9-7

Printed by Goanna, Canberra