



# Promising Practice Profiles

<b>Project title</b>	<b>Partnerships in Early Childhood (PIEC)</b>
<b>Project practice</b>	<b>The PIEC program uses generalist centre-based children’s services to foster attachment relationships between children and caregivers (parents and teachers), to enhance children’s social and emotional development. The program also provides support for parents, including better access to services and reduce social isolation.</b>
<b>Project undertaken by</b>	The Benevolent Society, NSW
<b>Start date</b>	July 2005
<b>Focal areas</b>	<ul style="list-style-type: none"><li>• Supporting families and parents</li><li>• Early learning and care</li><li>• Healthy young families</li></ul>
<b>Issue</b>	<p>National and international research shows that providing a range of early childhood interventions delivers positive outcomes, in particular for disadvantaged children. Research shows that:</p> <ul style="list-style-type: none"><li>• childcare settings play a significant role in family and community life—often they are the first place families turn to when they need help;</li><li>• early childhood staff have considerable expertise in working with families, but often need extra support and assistance to work with parents around sensitive issues;</li><li>• families often need support to build community connections and networks with other families to reduce isolation;</li><li>• early intervention in a childcare setting can help vulnerable children to form positive attachments with peers and significant adults, paving the way for a successful transition to school; and</li><li>• quality early childhood programs can reduce the effects of disadvantage for disadvantaged communities.</li></ul> <p>The program is designed to train and support staff at centre-based children’s services to increase their understanding of children’s behaviours from an emotional needs perspective, which in turn improves their ability to support high need children and their families.</p> <p>A second dimension of the PIEC program is meeting the needs of families who are isolated from “normal” community engagement. While the PIEC program is a universal service (i.e., operating in mainstream childcare settings), it targets high-need areas and those of significant disadvantage, such as Wyong and Campbelltown. Childcare staff in these areas report difficulty in meeting the needs of parents and children, feeling ill-equipped to respond adequately. In some instances, childcare services were the first point of request for extra support by these families in need. Working with families in centre-based children’s services offers a non-stigmatising environment and supports children and families’ community connections.</p> <p>The intervention model addresses the need to support children to develop their social and emotional skills, prior to commencing school, before negative patterns become entrenched.</p>

---

## Program context

The Benevolent Society (TBS) is Australia's oldest charity, a secular organisation that has been supporting vulnerable and disadvantaged people since 1813. Our purpose is to create caring and inclusive communities and a just society. We believe that building stronger communities and building resilience and social connection is the best way to reduce social and economic disadvantage. TBS works with individuals and communities across NSW and in south-east Queensland. More than 750 staff and 900 volunteers work together to support over 10,000 children and adults each year in metropolitan, regional and rural areas.

The Benevolent Society works in partnership with Wyong Shire Council, Campbelltown City Council, KU Children's Services and Lady Gowrie Child Centre to deliver the Partnerships in Early Childhood Program (PIEC). PIEC operate in 14 long day care centres and preschools (referred to hereafter as centre-based children's services) in three regions within NSW.

PIEC recognises the critical role that centre-based children's services play in the lives of children, families and communities. Centre-based children's services provide an ideal environment for engaging families with parenting issues and are often somewhere families turn to when they need assistance. PIEC builds on the existing strengths, skills and resources of major child care providers to promote strong, healthy relationships between children, childcare centre staff, families and communities. PIEC is designed to benefit all children, families and staff at the participating centres. It builds on the existing strengths and relationships of universal services to improve the quality of early education and care provided to children and families, including disadvantaged children and families.

PIEC achieves this by placing a child and family worker in the centre-based children's services to train and support staff to increase their understanding of children's behaviours from an emotional needs perspective. This, in turn, will improve the ability of staff to support all aspects of children's development and assist families with their parenting. PIEC is a preventative program with a strong focus on children's social and emotional development. It fosters attachments between carers and children, parent and children, and children with their peers. The child and family worker can also assist families with all aspects of parenting and act as a resource person and "bridge" to support services and programs within the local community.

Staff receive training and ongoing support from PIEC staff so children experience more predictable and supportive care. This occurs in an organisational change model. Staff are introduced to new concepts and language, supported to implement new practices which transform relationships between staff and children. The PIEC program also extends the services provided to parents. Parents can access parent education sessions (mornings/evenings), informal parenting gatherings and individual support and counselling. These strategies are regarded as an important tool in increasing parenting confidence, reducing social isolation and developing their own informal social and support networks.

PIEC runs supported playgroups, open to all families in the local community and generally conducted in a community facility. The playgroups incorporate play-based learning and other activities that promote child development and positive parent/child interactions. Access to childcare services is enhanced for children not currently enrolled by establishing trust in the system.

PIEC relies on developing local partnerships with service providers and strengthening existing infrastructures. By partnering with childcare centres, local councils and other existing service providers, the program will lead to better integration across community services in the future.

---

## Practice description

PIEC offers a suite of activities that respond to the needs of the local community and the needs of the children, families and staff in each centre-based children's service. Strategies include:

- placing a family worker or psychologist at the centre-based children's service;
- providing staff with hands-on training and supervision;

- supporting organisational change through introducing new concepts and language;
- focussing on the important daily transition moments for children, parents and staff;
- increasing access to supported playgroups and Parents Connect groups in the local community;
- individual support and counselling for parents; and
- parenting information sessions.

#### **Placing a family worker or psychologist at the centre-based children's service**

One worker is assigned per centre. They spend an average of 10–14 hours per week at each centre. The role of this family worker or psychologist is to work with staff, children and families to identify and support high-need children and families. They undertake a range of activities from observations of children using the PIEC Framework, video interactional analysis, development of intervention strategies for staff to support all aspects of children's development, individual parental consultations, facilitation of referrals to other agencies, and home visits to families where necessary.

#### **Providing staff with hands-on training and supervision**

Staff are trained and supervised in understanding children's behaviours and relationship needs. The PIEC program has developed a series of training modules that are sequential in their nature using the materials from the Circle of Security program from which are underpinned by attachment theory and practice. They are presented 4–8 times per year. The program is flexible in the delivery to suit the partner organisations (e.g., 1–2 hour blocks). The program utilises the context of the centre to meet the worker's need for better meeting the needs of children and families.

Supervision varies from centre to centre. Some centres organise release of their staff for 30 mins per week to talk about their focus children and their developmental needs. Other centres use group supervision time at staff meetings where they present children and families using the PIEC Framework to develop strategies to improve support of children's developmental needs. The use of video recordings to track children's development over time is increasingly being used in the centres and as a tool for reflective practice sessions.

#### **Supporting organisational change through introducing new concepts and language**

Organisational change occurs through introducing new concepts, language and centre based practices (e.g., Playspaces) to support transforming relationships between staff, children and families.

#### **Focussing on the important daily transition moments for children, parents and staff**

The project recognises that daily transition moments are critical events. The establishment of Playspaces is a targeted strategy to focus on and support these transitions, such as the children's arrival at and departure from the centre. Playspaces involve staff being seated in a designated area during certain times of the day to transition between activities. These Playspaces are designed to create a more predictable environment for children during transition times and increase the reflective capacity of the staff to better meet the needs of individual children.

#### **Increasing access to supported playgroups and Parents Connect groups in the local community**

The project supports a range of supported playgroups and connecting groups, open to families from the centre and also to families living locally whose children are not enrolled at the centre. PIEC has commenced new playgroups in some areas and supported existing playgroups in others. Where the playgroup is new to the area, staff advertise the group through

---

the child care centre and local area. It takes time for these groups to establish. The informal atmosphere of the local community contributes to these groups being successful, as does the ability of the PIEC worker to engage with the needs of the parents. Responding to these needs might involve inviting a community nurse to a session, or provision of appropriate materials for stimulating play. Established playgroups have been successful as the PIEC worker has been able to resource the playgroup with additional information for parents and to provide linking support to service networks as needed.

The Parent Connect Groups usually operate in the child care or preschool centres. These are usually coffee mornings for informal gatherings for parents to connect with other parents. The role of the PIEC worker is usually to facilitate engagement and meet any needs that arise out of the group. For example, one of the groups identified that fitting a baby seat in the car was difficult. The PIEC worker organised the Road and Traffic Authority to come to the centre and check all the parents' cars for correct fitting of seats. This establishes the centre as a community "hub". Some parents have formed informal childminding networks from these Parent Connect Groups.

### **Individual support and counselling for parents**

This occurs in the participating centres, depending on the suitability of the space. Some parents make formal appointments to see the PIEC workers, others do this at the moments of drop offs and picks ups of children. PIEC workers are flexible in the delivery of this support and it is determined by the parents. Some parents arrange to discuss their support needs by phone, others request a home visit. The counselling and support is not intended to be long-term. The PIEC worker will refer more long-term counselling needs to other service providers often making the appointments with the family or initiating the contact as per the requests of parents.

### **Parenting information sessions**

Parent information sessions focus on the needs and strengths of parents. These information sessions and playgroups use the same attachment concepts to help parents to develop a greater understanding of their children's behaviour in addition to increasing their social capacity and community connectedness. They also assist parents and staff to develop a common language regarding children and their development. PIEC staff also work intensively with families in addressing specific needs and facilitating access to services and support.

---

## **Research base**

The PIEC program is based on the ideas developed by Marvin, Cooper, Hoffman, and Powell (2002) in the "Circle of Security" intervention and incorporates Ainsworth's ideas of a "Secure Base" and a "Haven of Safety" (Ainsworth, Blehar, Waters, & Wall, 1978).

Bowlby's theory of attachment and human development outlines that children need a secure base to support their exploration of the world and provide reassurance when they return (Bowlby, 1988). Attachment relationships develop through warm, nurturing, responsive and consistent patterns of interaction between children and caregivers. If children do not feel secure in their relationships with the adults in their environment, their ability to understand and regulate their own emotional state and to relate to adults and their peers will be hindered. This can lead to delayed or underdeveloped emotional and social development (Hughes, 1998).

Securely attached children feel confident in the availability of their caregiver when needed, and so develop a sense of self-competence. Secure attachment relationships have been shown to be predictors of social competence, better relationships with teachers and decreased likelihood of behaviour problems (Wartner et al., 1994). Children who have secure relationships with their childcare teachers and caregivers display more competent interaction with staff and more advanced peer play during the early years. These outcomes are sustained well into the second grade (Howes, 2000; Ladd & Burgess, 1999).

---

The development of the PIEC model is based on research showing that high quality interventions focusing on the development of secure relationships between childcare staff and children are linked to improved outcomes for high risk children (Shonkoff & Phillips, 2000; Yandell & Hewitt, 1995). Bowlby's work focused on mother-child attachment relationships, but children typically form more than one attachment relationship, and may form an attachment with a familiar caregiver in child care. Relationships and attachment in child care settings have been associated with quality of the child care setting, interaction with peers and social competence (Zenah, Stafford, & Rice 2005). Attachment theory has been applied to child care settings, hypothesising pathways between the quality of child care, attachment relationships and social competence.

Howes, Phillips, and Whitebrook (1992) found that pathways move from the regulatable quality of childcare settings (such as adult:child ratios), to the process quality of settings (such as appropriate caregiving and developmentally appropriate activities), to children's relationships with teachers (securely attached) and peers (social competence). The PIEC program intervenes in the process quality of childcare settings to improve relationships with teachers and thereby social-emotional regulation of children.

Attachment relationships are to be supported through changing staff knowledge and understanding (i.e., through supporting them to think about children's behaviour in terms of need rather than control) and changing staff behaviour (through encouraging practices that make them more predictable and available to children). Secure attachment relationships are linked to high quality child care.

In addition to fostering secure attachment relationships, PIEC aims to support families with all aspects of parenting. This will be done through connecting isolated families and linking them to other parents at the centre and appropriate local services. This will lead to improved family capacity and resources and an increase in social and community connectedness. In order to support parents and families in this way, groups such as supported playgroups and parent information and education sessions are run in some centres; and information and referral to services are offered to parents who need it. Early childhood services are emerging in the research literature as having a positive impact on family members other than the child attending, and an impact on building family resilience through the provision of processes, opportunities and relationships (Duncan et al., 2005).

The PIEC program also aims to connect parents to each other, the service network, and to the broader community. High levels of social capital and community connections have been shown to have a positive influence on a range of individual and community level outcomes. For example, research has found positive associations between social capital and positive socio-economic consequences such as family functioning, poverty alleviation, health, and wellbeing, quality of life, education and academic achievement, employment, and reduction in crime levels (ABS, 2002; Kim, Subramanian, & Kawachi, 2006; Terrion, 2006; Maeroff, 1998; Vinson, 2007). The influence of social capital is also evident across various aspects of mental and physical health.

The PIEC theory of change is that building staff capacity and encouraging them to think about child behaviour in terms of social and emotional need will lead to staff being more predictable and emotionally available. The program similarly supports parents in being more predictable and emotionally available to their children, and also supports them in gaining access to services and supports they need. Children will become more securely attached and externalising behaviour problems will decrease, with long-term benefits.

---

## Outcomes

At the midpoint in the evaluation, the main areas where changes are occurring as a result of PIEC are:

- improved relationships between children and caregivers (parents and centre staff);
- strengthened children's social-emotional development;

- increased comfort and positive experience of children of childcare or preschool settings;
- increased parents access to information and support; and
- increased parents' connections to the community.

## Evidence of outcomes

An external evaluation was undertaken of the program in 2006 by the Social Policy Research Centre of the University of NSW. The evaluation consists of four components: impact evaluation; process evaluation; performance based monitoring; and cost effectiveness. The verification of the outcomes resulting from the implementation of PIEC is summarised from this more detailed evaluation. Information was collected from staff and families using surveys and interviews.

The data collection instruments used in the outcomes evaluation include a number of standardised scales based on those used by the Longitudinal Study of Australian Children (LSAC). Information was collected at three time-points: the beginning of the program (i.e., T1: March 2006), the middle (T2: November 2006) and at the end (T3: October and November 2007), although T3 data is still being analysed and is therefore not included in this profile.

Data were collected from parents and staff in the 14 child care centres involved in PIEC. The possible sample for the evaluation was every child aged 12 months and over, who attends a centre two days or more a week. Data were only collected for children whose parents had given written consent. At baseline (T1), data were collected from staff for 516 children. This compares to data collected for 472 children for T2 (91.5% of the original sample). In relation to each score used, we tested whether receiving responses from the same respondent in T1 and T2 resulted in significantly different scores from those who did not fill in the previous survey. In addition to these sensitivity tests, the staff responses consistently had more respondents who had filled in the previous survey than those who had not. For the parent responses, in particular, the overwhelming majority of respondents (around 94%) had previously filled in the questionnaires for the child in question.

The evaluation measures summarised below focus on the key domains where changes occurred (as described above in "Outcomes" section) including: improved quality of relationships between staff and children, and between parents and children; children's social and emotional development; quality of the childcare setting; and access to information and support. Key changes in outcomes are outlined below.

### **Improved quality of relationships between staff and children AND parents and children (i.e., attachment relationships)**

Two scales were used to assess *the relationship between staff and children* and *the relationship between parents and children* and to measure any changes in the attitudes and perceptions of adults from limit setting and managing behaviour to a focus on developmental progression. The Pianta's Student-Teacher Relationship Scale is a self-reported assessment of staff's perceptions of the quality of their relationship with the children. Parents complete the Child-Parent Relationship Scale (Pianta, 1992).

At T1, the majority of staff reported positive and effective relationships with the children however, over time there was a significant increase in staffs' rating of the closeness of their relationships with individual children (T1: 42.8 – T2: 43.7,  $p < .05$ ).

Parents at T1 reported higher levels dependency in their relationships with their children compared with staff. Over time, parents reported a reduction in dependency (T1: 13.3 – T2: 12.5,  $p < .05$ ).

In one area, there was a significant reduction in the number of staff reporting high conflict in their relationship with a child over time (T1: 16.3 – T2: 9.6,  $p < .05$ ).

---

### **Strengthened children's social and emotional development**

Two scales were used to measure changes in children's social and emotional wellbeing. The Brief Infant Toddler Social Emotional Assessment (BITSEA) is completed by parents and staff for children aged 12 to 36 months (Briggs-Gowan et al., 2004). The Strengths and Difficulties Questionnaire (SDQ) is completed by parents and staff for children aged three years and over (Goodman, 1997, 1999).

PIEC focuses on the development of secure relationships, which it is anticipated over time, will influence the social and emotional development of children. Although at baseline most children's social and emotional development was not problematic, over time staff indicated positive changes in the overall social and emotional development of children and the way children interact with their peers. For children under 3 years there was a significant increase in the level of competency across all areas (T1: 14.6 – T2: 15.9,  $p < .05$ ). Over time there was a significant reduction in the total difficulties scores reported by staff for children over 3 years across all areas (T1: 20.2 – T2: 13.8,  $p < .10$ ). There was a significant decrease in the number of children over 3 years, reported by staff, as being in the abnormal range for peer problems, across all areas over time (T1: 16.8 – T2: 11.7,  $p < .10$ ).

### **Increased comfort and positive experience of children of the childcare or preschool setting**

PIEC also aims to improve the quality of children's early learning experience. One way to assess this is by asking caregivers' or teachers' how comfortable the child is in the child care centre or preschool. The Leiden Inventory of Wellbeing was used as a measure of quality of the centre-based children's services by looking at the child's interactions with staff, other children, and with the play environment (Schipper et al., 2004). There was a significant increase in the staff's overall rating of how comfortable children were in the centres or preschools (T1: 57.7 – T2: 59,  $p < .05$ ).

### **Increased parental access to information and support**

PIEC also provides support to parents via information, individual and group sessions and opportunities to meet other parents. Over time, there was a significant increase in the number of parents accessing support from the PIEC worker. The most helpful information and skills parents had gained from the PIEC worker were how to play with their child and how to improve their child's development. Parents also indicated changes in a positive direction in some areas of parenting including giving their children a reason why rules should be obeyed and enjoying doing things with their children.

Overall satisfaction with the PIEC program was high, with the majority of staff rating all components of PIEC as useful or very useful (ranging between 52%–74%).

### **Process evaluation**

In addition to collecting data to assess the level of outcomes achieved by the project (particularly for parents and children), the evaluation team also undertook a process evaluation that sought to assess the organisational and service changes resulting from the program.

The process evaluation was conducted in six sites, two in each of the three areas and involved interviews with key personnel from the partner organisations and the Benevolent Society ( $n = 11$ ), children's services staff and directors ( $n = 22$ ) and parents ( $n = 10$ ). A total of 43 interviews were conducted between August and December 2007. The interviews focused on the development and implementation of the program. Overall, the interviews revealed that considerable changes seem to have resulted from the implementation of PIEC, although it varies from site to site depending on the demographic characteristics of the families and children and the emphasis placed on the different components of the PIEC program.

One of the key changes was an increase in staff capacity to reflect on and describe children's social and emotional development. In most sites the introduction of the PIEC program has led to an increase in staff's reflective capacity and the language used in relation to children's social and emotional development. One staff member commented:

I think it means that we're a lot more mindful of children's social and emotional stability and how to achieve that and we're consciously thinking and how we can meet this throughout the day and that's made us a lot more mindful. (Child care/preschool staff)

For some staff, the introduction of Playspaces have meant they have a greater capacity to observe the children and focus on their needs as they move in and out of activities. One staff member commented:

... when we're sitting down in the Playspaces we can actually have a wide view.. and then we can detect any situation that may come up...we can cover a smaller area because the other person on the other side is covering that area. (Child care/preschool staff)

One staff member noticed that the staff seemed less stressed as a result of the introduction of Playspaces:

I've noticed people aren't as stressed in my room, it's a little bit more calm because the kids are settled and we're settled and vice versa and we know that at that time, it doesn't matter what else is happening in the centre, this is our time, it's quite a nice, relaxing start to the day and throughout the day. (Child care/preschool staff)

In the area where the PIEC program has focused more directly on linking families with the service system staff noted that they now were more aware of the range of services available to support families in the local area. As one director commented:

Our referrals now, instead of bouncing somebody and they [external service provides] say they can't help you, we're making more meaningful referrals because the [PIEC worker] took the time to go round and meet everyone in the local area. (Director)

**Policy analysis**

The Partnerships in Early Childhood (PIEC) project is a positive example of a prevention/early intervention project. The PIEC program, at the midpoint of the evaluation, has demonstrated that it is showing promising results in improving attachment relationships, improving children's social and emotional development, improving children's experience of childcare, supporting parents with parenting and high satisfaction rates from participating partners. It is also proving to be a cost effective model of intervention with an approximate cost of \$644 per child per year.

**Evaluation**

The Partnerships in Early Childhood (PIEC) project was submitted for consideration for the Promising Practice Profiles (PPP). The project was assessed across a range of criteria relating to how the service results in positive outcomes for children, families and communities. The submission was peer reviewed and validated as evidencing promising practice. More information on the PPP selection process may be found at:

<http://www.aifs.gov.au/cafca/ppp/pppprocess.html>

The Partnerships in Early Childhood (PIEC) project has been externally evaluated by the Social Policy Research Centre, UNSW, using a range of data collection strategies.

**Project related publications**

The Benevolent Society. (2006). *Partnerships in Early Childhood Service Model*. Sydney: The Benevolent Society.  
 Thomson, C., Valentine, K., Longden, T., & Harrison, L. (2007). *Partnerships in Early Childhood Program. Interim evaluation report*. Social Policy Research Centre, UNSW, Sydney.  
 Thomson, C., Valentine, K., & Longden, T. (2005). *Evaluation plan: Partnerships in Early Childhood Project*. Social Policy Research Centre, UNSW, Sydney.

---

## References

- ABS. (2002). *Discussion paper: Social capital and social wellbeing*. Australian Government Publishing, Canberra.
- Ainsworth, M., Blehar, M., Waters, E., & Wall, S. (1978). *Patterns of attachment: Psychological study of the Strange Situation*. Hillsdale, NJ: Erlbaum.
- Bowlby, J. (1988). *A secure base: Clinical applications of attachment theory*. London: Routledge.
- Briggs-Gowan, M., Carter, A., Irwin, J., Wachtel, K., & Cicchetti, D. (2004). The brief infant-toddler social and emotional assessment: Screening for social-emotional problems and delays in competence. *Journal of Pediatric Psychology, 29*(2), 143–155.
- Dolby, R. (2007). *The circle of security: Roadmap to building supportive relationships* (Research to Practice Series). Canberra: Early Childhood Australia.
- Duncan, J., Bowden, C., & Smith, A. B. (2005). *Early childhood centres and family resilience*. Wellington: Centre for Social Research and Evaluation/Te Pokapū Rangahau Arotaki Hapori.
- Goodman, R. (1997). The Strengths and Difficulties Questionnaire: A research note. *Journal of Child Psychology and Psychiatry, 38*, 581–586.
- Goodman, R. (1999). The extended version of the Strengths and Difficulties Questionnaire as a guide to child psychiatric caseness and consequent burden. *Journal of Child Psychology and Psychiatry, 40*, 791–801.
- Howes, C. (2000). Socio-emotional classroom climate in child care, child–teacher relationships and children's second grade peer relations. *Social Development, 9*, 191–204.
- Howes, C., Phillips, D., & Whitebrook, M. (1992). Thresholds of quality: Implications for the social development of children in centre-based care. *Child Development, 63*(2), 449–460.
- Hughes, D. (1998). *Building the bonds of attachment*. Northvale, NJ: Jason Aronson.
- Kim, D., Subramanian, S., & Kawachi, I. (2006). Bonding versus bridging social capital and their associations with self rated health: A multilevel analysis of 40 US communities. *Journal of Epidemiology and Community Health, 60*:116–122.
- Ladd, G. W., & Burgess, K. B. (1999). Charting the relationship trajectories of aggressive, withdrawn, and aggressive/withdrawn children during early grade school. *Child Development, 70*, 910–29.
- Maeroff, G. (1998). *Altered destinies: Making life better for children in need*. New York: St Martins Press.
- Marvin, R., Cooper, G., Hoffman, K., & Powell, B. (2002). The Circle of Security Project: Attachment-based intervention with caregiver-preschool child dyads. *Attachment and Human Development, 4*(1), 107–124.
- Pianta, R. C. (1992). *Student–Teacher Relationship Scale*. Charlottesville, VA: University of Virginia.
- Schipper, J., Ijzendoorn, M., & Tavecchio, L. (2004). Stability in center day care: Relations with children's well-being and problem behavior in day care. *Social Development, 13*(4), 531–550.
- Shonkoff, J., & Phillips, D. (eds.). (2000). *From neurons to neighborhoods: The science of early childhood development*. Washington D.C: National Academy Press.
- Terrion, J. (2006). Building social capital in vulnerable families. *Youth & Society, 38*(2), 155–176.
- Vinson, T. (2007). *Dropping off the edge the distribution of disadvantage in Australia*. Canberra, ACT: Catholic Social Services.

---

Wartner, U., Grossmann, K., Fremmer-Bombik, E., & Suess, G. (1994). Attachment patterns at age six in South Germany: Predictability from infancy and implications for preschool behaviour. *Child Development*, 65(4), 1014–1027.

Yandell, M., & Hewitt, L. (1995). Relief daycare: A role in preventing child abuse, the case emerging from the literature. *Children Australia*, 20 (3), 5–10.

---

**Contact**

Greg Antcliff  
Tel: 02 9339 8024  
Mobile: 0407 487 051  
Email: grega@bensoc.org.au  
PO Box 171  
Paddington, NSW, 2021

---

**Website**

[www.bensoc.org.au](http://www.bensoc.org.au)

---

**More information**

More information on the Partnerships in Early Childhood (PIEC) and Promising Practice Profiles can be found on the Communities and Families Clearinghouse Australia website.



**Communities and Families Clearinghouse Australia**

Australian Institute of Family Studies.  
Level 20, 485 La Trobe Street, Melbourne Vic 3000.  
Tel: (03) 9214 7888. Fax: (03) 9214 7839.  
Email: [cafca@aifs.gov.au](mailto:cafca@aifs.gov.au).

[www.aifs.gov.au/cafca](http://www.aifs.gov.au/cafca)