

## USE AND INTEGRATION OF EARLY CHILDHOOD SERVICES: INSIGHTS FROM AN INNER CITY COMMUNITY

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### ABSTRACT

This paper presents some of the findings from a study that explored parental usage and perceptions of a range of early childhood services that were provided in an inner city suburb of Brisbane. Using the theoretical base of social capital, parents (n = 167) from six services were surveyed to elicit information about access to, and use and expectations of, a range of services for families and young children, as well as possible approaches to linking these services. Analysis of data revealed consistency across the different groups of parents in terms of what they looked for in care and education services and widespread agreement that stronger linkages between services would enhance support to families and young children. There were also numerous suggestions as to how service integration could be realised.

### Background to the study

The importance of effective early care and education services is widely recognised. This recognition stems from a growing body of research that attests, not only to the immediate benefits of effective services for children and families, but also to longer-term societal and economic benefits (Ball, 1994; McCain & Mustard, 1999; Pascal, Bertram, Gasper, Mould, Ramsden & Saunders, 1999; Schweinhart & Weikart, 1997). To politicians and business leaders, quality care and education services are pivotal to the production of a stable, well prepared workforce for the future, who will ultimately provide the foundation for long term success in an increasingly competitive global market (Dahlberg, Moss & Pence, 1999).

Unfortunately, however, many services remain under- or unutilised by families. In Australia, recent government reports have documented widespread dissatisfaction surrounding service provision. The current system has been found to be inflexible and out of touch with the needs of contemporary families (EPAC, 1996; the Senate Inquiry into Early Childhood Education, 1996; the Queensland Child Care Strategic Plan, 1999). For many families, services are inaccessible, irrelevant or inappropriate, fragmented or constraining. Furthermore, the nature of many services that are available to families is often unknown.

The need for effective care and education services, however, is more critical than ever. Families today are experiencing dramatic lifestyle changes. Family poverty and sole parent families are increasing, so too is the proportion of families in which both parents work. In addition, the nature of work itself has changed. Brennan (1999) estimates that, due to substantial increases in part-time and casual work, overtime and non-standard forms of employment such as contract work, seasonal work, on call work, and shift work, only one-third of all workers now work a standard week with fixed starting and finishing times. This *new world of work*, she adds, requires adjustments by both children and parents.

In response to these challenges and the perceived shortcomings in service provision, many government departments are now looking to service integration as a way of ensuring better access to and delivery of services to families. Although reasonably new to Australia, service integration has a long history in the United States. There, attempts to integrate services date back to the previous century in response to inequities experienced by the poor and needy.

More recently, programs such as the Head Start preschool program have been successful in providing integrated health, education, social services, and parent education for low-income families. Similar attempts at integration are also underway in the United Kingdom, where significant government funding has been dedicated to the development of Early Excellence Centres. These feature a variety of linkages, some between early childhood centres and social services, child care and health services, and early education and community agencies (Pascal, et al. 1999).

In Australia too, there is widespread interest in the potential of service integration. Writers such as Hurd, Lerner and Barton (1999) maintain that integrated support may help to alleviate the stresses associated with family poverty and increase the capacity for family empowerment. This potential is now recognised and articulated in numerous social and family policy documents from government departments across the country. In Queensland, for instance, the mission statement outlined in the *Strategic Plan 2000-2003* for the state's Department of Families is

*to lead, coordinate and advocate for the planning and provision of enhanced high quality integrated human services, as well as the development of community infrastructure and networks in a manner that is accessible, promotes participation and is responsive to the diversity of communities* (p. 1).

While integrated service provision is not new, current thinking is distinguished by a need to conceptualise integration within a theoretical framework. A precursory glance at recent government policies reveals that the growing interest in integration stems from the notion of building family and community capacity through the generation of social capital. Stone (2001:1) explains that in Australia and elsewhere, social capital is seen as a way of *stemming the tide of perceived community decline and the widespread distrust associated with it*. Similarly, Woolcock (1998) maintains that it is social capital that enables families and communities to *get by or get ahead*.

Stone and Hughes (2000:20) succinctly define social capital as *the networks of social relations characterised by norms of trust and reciprocity*. The essence of social capital, they add, is *quality social relations*. According to Coleman (1988) communities high in social capital are those that have dense and complex relationships, accessible and helpful information networks, clear-cut norms and sanctions about behaviour, perceived opportunities for advancement, and perceptions of stability in the community. Fegan and Bowes (1999) believe that such communities provide numerous potential benefits for children because children and their parents are supported by relationships with people outside of the immediate family. In effect, these people serve as resources to the family. For instance, Brooks-Gunn (1995) notes that mothers may receive more information and have greater access to information, via the networks discovered through interaction with parents and staff at a program that her child attends. Coleman (1988) explains that communities with low social capital, on the other hand, are characterised by lack of social networks. This lack of access to resources that community links provide can result in non-involvement in the community, alienation, loneliness, low self-esteem, intolerance, lack of motivation, and vulnerability for family members (Fegan & Bowes, 1999).

At the core of social capital, then, is the community. Schorr (1997) explains that building community capacity through the establishments of links and networks addresses the developmental needs of individuals, families, and organisations within a neighbourhood.

Writers such as Jack and Jordan (1999) are not alone in their belief that the social capital of communities directly impacts on children's welfare. In a 2000 report by the Commonwealth

Department of Family and Community Services, social capital was identified as one of five key family resources used to determine social and family well being and functioning.

It is clear that most models of service integration have not been designed with all families in mind. Instead, initiatives have tended to follow a deficit approach in that they target low-income families with problems and limited access to services. Additionally, service integration models have been characterised by a top down approach that does not always reflect community needs. What differentiates our view of service integration is that it has the potential to benefit a wider cross section of families than has been the case, providing it is underscored by community consultation. There is a compelling rationale, therefore, for a study such as this.

### **Aims of the study**

In light of literature the main aims of the study were to:

- identify the types and location of services used by families with young children;
- investigate the specific features of services that parents consider important when choosing a particular service;
- identify the reasons for using particular services;
- explore parental views surrounding the adequacy of available services and how such services might be improved; and
- describe parental attitudes concerning the integration of services and how such integration could be achieved.

## **METHOD**

### **Subjects and Procedure**

Subjects for the study comprised a sample of parents who were currently utilising one of the six early childhood services that had agreed to participate in the study. Each of these services was located within a kilometre of each other in an inner city suburb. The services comprised two childcare centres, one playgroup, two kindergarten preschools, and one primary school. Of the 500 questionnaires that were distributed, 167 were completed. This represents a return rate of 33.4%.

After initial consent was received from personnel in each of the settings, questionnaires were left with staff in the centres and schools for distribution to parents. Questionnaires were supplied envelopes for return to the Centre for Applied Studies in Early Childhood, QUT.

### **Measure**

Due to the large number of potential respondents, a survey questionnaire was used to collect data. The questionnaire, comprising 27 items, was designed to reflect the specific aims of the current study. Accordingly, the questionnaire elicited responses about the types and location of services used, the specific features of services that are considered important, the reasons for using particular services, views surrounding the adequacy of available services and how such services might be improved, and attitudes concerning the integration of services and how integration could be achieved. In addition, demographic data about the families were collected. These data provided insight into parental occupations, study commitments and educational levels, family income, number and ages of children, and particular characteristics of families such as cultural identification. The questionnaire featured mainly select-response items, although several open-ended questions were also included.

### **Data Analysis**

Data were coded and analysed using *SPSS for Windows*. Frequency statistics were used to identify patterns or trends among the responses. Chi-square analysis was performed to identify significant relationships between variables.

## **RESULTS**

### **Demographic characteristics**

Around 20% of the parents who responded to the survey lived in the immediate area in which the six services were located. Around one third (33.5%) of respondents resided in neighbouring suburbs situated within a two-kilometre radius of this service locality, while another 32% resided in a radius 3-8 kilometres from the locality. The remaining 14% lived more than eight kilometres from the service locality. More than half (56%) of the families had resided in their suburb for 3-10 years.

The mean number of children within the families was 1.95 (SD = .87). In 84% of families, both parents lived in the household. Sixty percent of mothers and 83% of fathers in the study were currently employed. Of these parents, 63% and 70%, respectively, worked regular hours. Twelve percent of families were on incomes less than \$20,000 per year, while 28% were on incomes greater than \$80,000 per year. Sixty-seven percent of mothers and 60% of fathers were educated to university level. In contrast only 7% of mothers and 12% of fathers were educated to only year 10 (Junior high school certificate) level. Twenty-three percent of mothers and 13% of fathers were currently involved in further study. More than two thirds of these parents indicated that their study hours were flexible.

In more than six percent of families, English was a second language. Around three percent of families each included a child or an adult with a disability. A further one percent each of families were of either Aboriginal or Torres Straight Islander descent or were international students/temporary residents. Another four percent of families indicated that they identified with more than one of the aforementioned groups.

### **Services currently used**

Parents were asked to select from a range of options grouped under health or care and education, to indicate which services they currently used. Of the health services, 92% used a family doctor, 47% used a dentist, 27% used a maternal and child health service, and 26% used a paediatrician. The school nurse or dental service was used by 23% of families, 11% used some kind of therapist, while another 8% of respondents indicated that they used other services including specialists such as psychologists, optometrists and chiropractors, and naturopaths, surgeons, and social workers.

A wide range of care and education services was utilised by the families. More than 46% of the sample used childcare services, 40% used a playgroup, 35% used a state school and 26% used a community kindergarten preschool. Less frequently used services included a state preschool (17%), outside school hours care (16%), nanny or person in own home (13%), vacation care (12%), private care in someone else's home (9%), private school (8%), family day care (4%), and a neighbourhood centre (.6%). A further 5% of parents indicated that they made use of other services including Sunday school, toddler gyms, swimming classes, and occasional babysitting.

More than 62% of the respondents with children under school age used more than one care and education service for their child or children, compared with 45% of respondents with children of school age. Many of these parents used more than two services, some used as many as five. The reasons given for using more than one service were varied but tended to

cluster into child or parent benefits. Benefits for the child accrued from exposure to, or stimulation from, different activities and situations, and socialisation with others. Benefits for parents, especially mothers, included time alone or with friends and time for other family members. For many working parents, however, the use of multiple services was necessary because of perceived inadequacies or limitations associated with individual services. For instance, some parents made use of both childcare and preschool services, explaining that preschool programs were of higher quality but were limited in their hours/days of operation. Hence, childcare services were used as a supplement to preschool. In 54% of families, friends or relatives also helped with childcare.

As mentioned earlier, only around 20% of families resided in the immediate area. To gain insight into why the remaining parents used the services in the area under investigation, parent's work or study locations were considered. With the exception of parents using the playgroup (only two hours each week), it was revealed that most parents worked or studied in the area where the services were located or travelled through the area on their way to work.

### **Features of childcare, kindergarten or preschool, or school**

Parents were asked to select from 15 items or features, three that they looked for when selecting services across the three different settings. These options included location to home or work, diversity or quality of program, parental involvement, community reputation, small size of service, and links to community or local services.

As can be seen in Table 1, features that determined the selection of services remained reasonably consistent across the three settings. The quality of educational program was the most frequently noted feature across all settings and was something that appeared to assume greater importance as children grew older. Convenience to home and community reputation also figured strongly in parent's minds and, like quality of educational program, were features that parents seemed to value more as their children grew older.

The notable variation in responses among parents across the different settings was the importance accorded to the diversity of the program by parents of school aged children, and the importance accorded to the availability of facilities by parents of the two groups of younger children. Almost half (48%) of the parents surveyed indicated that diversity was a factor in determining the selection of a school, compared with 24% and 28% of parents of children aged 0-3 yrs and 3yrs to school age respectively. Facilities, on the other hand, were cited as an influential factor less frequently as children grew. While 52% of parents with children less than three years of age compared with only 33% of parents with school aged children, cited facilities as influential.

Other features that parents sought when selecting the services included parental involvement (25% parents with children 0-3yrs, 24% parents with children 3-5yrs, 20% parents with school aged children) and approach to behaviour management (20% parents with children 0-3yrs, 22% parents with children 3-5yrs, 24% parents with school aged children).

### **Reasons for using child care, or kindergarten or preschool**

Parents were asked to indicate why they utilised childcare services for their children aged three or less, or why they utilised childcare, kindergarten or preschool services for their children aged between three years and school age. From the 10 options provided, parents were required to nominate three. Table 2 illustrates the three most frequently cited reasons for using these services.

As can be seen in the table, the opportunity to play clearly underpins why many parents utilise services for children not yet attending school. Eighty-three percent of parents with children less than three years of age and 80% of parents with children aged three years to school age utilise childcare, kindergartens and preschools so that their children can play.

As children grow in years, there appear to be subtle changes in the reasons for using different services. For instance, 71% of parents who use childcare for their child aged less than three years cite work commitments as the reason for using the service. In contrast, only 31% of parents who use child care, kindergarten or preschool services for children aged three years to school age cite work commitments as a reason (not shown in the table). As children matured, there was a notable emphasis for the need to promote learning and prepare for school. Preparation for school was cited by 76% of parents using services for children aged between three years and school age, (but only 9.3% of parents using services for children aged three years or less). Likewise, considerably more parents of children aged between three years and school age cited promoting learning. Other frequently cited reasons for using the services included study commitments and support with child rearing.

### **Satisfaction with services**

Overall most parents indicated that the current services available to their family met their needs. Of the parents with children up to three years of age, 86.4% were satisfied with services. Similarly, 76% of parents with children aged three years to school age and 89% of parents with school-aged children were satisfied with the level of services.

Despite these encouraging percentages, however, one quarter of parents commented on how their needs were not being met. Examination of comments made by parents revealed that dissatisfaction centred on a number of key issues, namely affordability, access, flexibility, and curriculum. In relation to affordability, some parents commented that childcare was costly. Access issues related to long waiting lists, lack of proximity to other services, lack of availability or lack of choice of services. For some parents, a lack of flexibility was problematic. Inflexible operating hours created difficulties for dropping off and collecting children. Some working parents commented that half-day programs (in kindergarten and preschool) were unhelpful. These parents noted that they supplemented half days with childcare but had to pay for a full day because there was no available occasional or casual care. Dissatisfaction with curriculum encompassed responses referring to a lack of visual or expressive arts, limited choice in sport activities, or lack of age-appropriate activities.

### **Importance of and types of links between services**

There was widespread agreement among the parents surveyed that links between services would be beneficial to families with young children. More than three-quarters (79%) of the 143 parents who responded to the question agreed that stronger links would improve support to families and children. In contrast, only 19% of parents surveyed disagreed with this view.

There was immense variety in the responses from parents concerning the nature of linkages. Most frequently mentioned was the need to link a range of services with kindergartens and preschools. Half of the parents who regarded stronger links as beneficial, noted this need. Almost as many parents (45%) saw a need for linkages between schools and a range of services, while 28% noted that links between childcare and other services was needed. The types of links that parents selected to some extent depended on their current, and to a lesser extent, future usage of specific services. For instance, linkages between playgroup and other services were noted frequently among parents who, at the time, were involved in a playgroup. Not surprisingly, parents who did not use playgroup services at the time, rarely made this

suggestion. Overall, there was a perceived need among parents for a range of medical services (doctors, dentists, nurses, therapists) to be better connected to a range of education services.

In relation to the types of strategies that could facilitate service linkages, parents were asked if they like the idea of services located in one building, services located near one another, or services connected through an information or referral centre. All three options received wide support. More than 93% of parents indicated that they would like to see the development of an information or referral centre while 92% also liked the idea of services being located near each other (but not in the one building). Around two thirds (66%) of the parents also favoured the location of services in one building. Interestingly though, more than one third (43%) of the respondents indicated that they objected to this type of service linkage. In contrast, only eight percent of parents indicated that they did not want services located near one another, or services linked by an information or referral agency.

Eighty-seven percent of parents who agreed that stronger links would improve support, also offered suggestions about the possible linkages of services. For example, one parent noted that first time mothers would benefit from greater links between health care nurses, doctors and counsellors. A number of parents commented on the need for stronger alliances between education and health sectors. Some of the suggestions were to provide or increase visits by nurses or health workers and dentists to care and education services, particularly schools and preschools. Several parents noted that these professionals could take a more active role in educating children about health issues. In relation to the location of services one parent proposed that services be placed in convenient facilities such as shopping centres, meeting or library buildings. Another parent suggested that services could be provided through a virtual centre accessible via the Internet.

### **Relationships between variables**

To identify any relationships between different variables, chi-square analysis was performed. A number of predictable relationships based on income were evident. For example, high-income families were more likely to use the services of a paediatrician and a nanny. The relationship between higher income and increased satisfaction with services was also not unexpected. Less anticipated were relationships between family income and some of the features of care and education services that appealed to parents. For instance, parents in the highest income group were less likely to note community links and parental involvement but, more likely to note reputation of service as determining features. On the other hand, lower income parents were more likely to cite community links, parental involvement, program diversity, and religious or cultural support as desirable service features.

Noteworthy too, was the relationship found between satisfaction with services and the perceived need for integration of services. Those parents who described why services did not meet their current needs were more likely to support the notion of service integration.

### **Discussion**

The families surveyed in this inner city area appeared to share similar beliefs regarding what they looked for in care and education services. Consistently valued across the different settings were quality and or diversity of the education program, convenience to home, community reputation, and facilities available. Most parents were well-educated, employed and earning reasonable incomes. In the majority of families, both parents lived in the same household and accessed services using their own transport. Few families identified with groups that are typically considered disadvantaged due to ethnicity or disability.

Despite their relative well being, more than a quarter of the parents voiced their dissatisfaction with current service provision. Dissatisfaction stemmed primarily from

inflexibility due to limited operational hours and lack of access due to long waiting lists or non-existent services in the local area – the same issues highlighted in previous studies (EPAC, 1996; the Senate Inquiry into Early Childhood Education, 1996; the Queensland Child Care Strategic Plan, 1999). In this study, almost two thirds of families comprised two working parents and around one third indicated that they worked irregular hours. As Brennan (1999) noted, the demise of the standard working week requires adjustments on behalf of parents and children. Clearly, though, adjustments to service provision are equally necessary.

In light of parental dissatisfaction, it was not surprising that the majority of families were receptive to the idea of service linkages. Both the number and the diversity of suggestions made by parents could be considered testimony to their enthusiasm for some kind of service integration. Parents' ideas tended to be shaped by their current or projected needs for instance, those with school-aged children were more likely to propose linkages that connected schools with other services. In contrast, parents with younger children often expressed a need for services linked with playgroups or childcare centres. Additionally, the three approaches to the delivery of integrated services that were outlined in the questionnaire were all supported. However, the most favoured approaches were that of an information or referral centre and the placement of services so that they were near one another. Many recommended that services be accommodated in or near shopping centres or other community spaces. Therefore, while more convenient ways of accessing services or information about services was important to families, perceptions surrounding how that convenience could be realised were very much determined by the unique requirements or circumstances of individual families.

A common theme to emerge from the responses was the need for health professionals to play a greater role in all education services, particularly in schools. Importantly, this role was considered to be more than diagnostic with health personnel actively promoting health education among children.

Several items in the questionnaire provided insights related to social capital. While it was not the intention of the study to measure social capital or assess community capacity, it was possible to see how community networks fulfilled particular functions for families. In this study, networks assisted parents in choosing care and education services for their children by validating those services. For many parents, particularly those on higher incomes, community opinions of services were instrumental in the selection of services. Interestingly, though, families on higher incomes were less likely than families on lower incomes to nominate community links as a determinant in their selection of care and education services. It is possible that the more affluent in our society are less in need of the potential support that community networks can provide.

## CONCLUSION

In short then, parents look for services that are of high quality, have a variety of facilities, are close to home, and have a sound reputation in the local community. While most parents appeared satisfied with the services that they accessed, clearly, there is room for improvement in the provision of care and education for young children. Many parents continue to find services inflexible and seem unaware of or unable to access services that might better meet their needs. The idea of providing integrated services, either through a referral centre or the co-location of facilities within the community had widespread appeal for families. So too did the linking of a range of services with schools, kindergartens and childcare centres. The importance of community links appeared to be particularly salient for families on lower incomes, while community reputation was especially significant to more affluent families.

Community networks, therefore, could be construed to be of value to families at both ends of the socioeconomic spectrum.

Although the provision of integrated services will never be a panacea for improving support to families, it may help to improve access to, awareness of and confidence in available services. If governments are truly committed to strengthening families and communities through the building of social capital, however, initiatives must be responsive to individual needs. Undoubtedly, the key to this is genuine and ongoing community consultation.

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TABLE 1

#### FEATURES DETERMINING SELECTION OF SERVICES ACROSS THREE SETTINGS

Service	Feature
Childcare for children under 3	Quality educational program 52%
	Available facilities 52%
	Convenient location to home 33%
	Centre hours and reputation 32%
	Quality educational program 76%
Childcare, kindergarten or preschool for children 3-5yrs	Convenient location to home 51%
	Available facilities 45%
	Reputation 32%
	Quality educational program 82%
School	Convenient location to home 62%
	Diversity of school program 48%
	Reputation 37%

TABLE 2

#### REASONS DETERMINING USE OF CHILD CARE, OR KINDERGARTEN OR PRESCHOOL

Service	Reason
Childcare for children under 3	Opportunity for child to play 83%
	Parent work 71%
	Promote child learning 59%
Childcare, kindergarten or preschool for children 3-5yrs	Promote child learning 85%
	Opportunity for child to play 80%
	Prepare child for school 76%