

The Impact of Early Childhood Hubs

Evidence Summary

Introduction

Australia's early childhood service system is complex and siloed, meaning that children and families, especially those experiencing socioeconomic disadvantage and hardship, are unable to access the supports they need to thrive. Those most likely to benefit are generally the least likely to access high-quality early years services¹.

Integrated service delivery has the potential to overcome these barriers and can respond holistically to child and family needs². By bringing together education, health, family support, and community services, integrated models enable a 'one-stop-shop' that can address the diverse needs of families in a coordinated way. This is particularly valuable for families³ who often face multiple, complex challenges that require support across different domains.

Beyond Australia, several other parts of the world have introduced integrated models for children and their families, including Canada, Chile, and the United Kingdom⁴.

Early Childhood Hubs (ECHs)

Early Childhood Hubs (ECHs) are a leading integrated model that can fill a major gap in the current early years landscape⁵. ECHs provide access to integrated, high-quality early learning services, developmental checks and child health services, family and parenting supports, allied health and other early intervention supports, as well as providing a space where children and families can come together to build social networks. They are configured to overcome many barriers to accessing and participating in early education and care (ECEC), outreaching to families and building trust, identifying and redressing developmental concerns and supporting families.

Integration within ECHs depends on what many refer to as 'the glue' or integration enablers: the people, systems, relationships and infrastructure that holds integration efforts together behind the scenes⁶. The "glue" includes trusted relational roles (like community facilitators or navigators), joint governance structures, shared referral pathways, and flexible funding that can respond to local contexts. Without intentional investment in these enablers, even co-located services risk operating in silos.

There are many types of ECHs, including hubs on school sites and hubs run by Aboriginal and Torres Strait Islander Community Controlled Organisations (ACCOs).

Evaluations have been undertaken across a range of Australian and international models that show significant impact of ECHs, in particular on delivering positive outcomes for children and families. Observations from practitioners and families attending ECHs further demonstrate the positive impacts of the model. There is, however, a need to continue investing in building this evidence base both to support their effectiveness and impact and build the case for scale.

This brief provides an overview of the key findings related to the efficacy of ECHs, including:

- Increased access to support for children and families, and referrals to other services
- Faster identification of developmental vulnerability
- Improved school readiness and transition
- Improved child health outcomes and educational outcomes
- Reduced hospitalisations, youth crime and removals into statutory care, and improved outcomes related to child safety and protection
- Improved collaboration between practitioners from different sectors
- For Aboriginal and Torres Strait Islander children, increased proportion of children getting age-appropriate health checks and increased participation of children who had previously not engaged with ECEC
- Return on investment, including significant social benefits.

Evidence: Supporting increased access to, engagement with and quality of services

Evaluations of ECH models have demonstrated their ability to increase families' access to support through services provided at hubs, and referrals to services such as child health and early intervention⁷. In addition, ECHs can support faster identification of developmental vulnerability, increased uptake of referrals and improved child health outcomes⁸. Research on integrated models such as ECHs shows that collaboration between practitioners from different services improves the quality of coordinated support provided. Shared professional development and regular communication enable a transdisciplinary approach that is responsive to each family's unique context and priorities. Families experience more seamless support when services work together behind the scenes⁹.

Integration also facilitates access and engagement. Co-locating services in familiar, convenient community settings reduces practical barriers for families, such as transport, with families able to keep multiple appointments in one location. Offering 'soft entry' points (such as playgroups or drop-in sessions) and informal pathways alongside formal services helps build trust and relationships with vulnerable families who may be reluctant to engage with the service system¹⁰.

Outside of Australia, research evaluations of integrated early years services have identified early identification of developmental issues and improved referral pathways¹¹, easier access to services¹² and reduced demand for later costly 'curative' therapies due to early intervention¹³. There is also evidence for these models supporting increased service collaboration¹⁴ and more opportunities to promote preventative practices¹⁵.

Evidence: Supporting children's health, wellbeing and development outcomes, as well as stronger families and communities

Evaluations of ECH models have shown their ability to bring about a reduction in hospitalisations¹⁶, youth crime¹⁷ and removals into statutory care, as well as support improved outcomes related to child safety and protection¹⁸. In addition, ECHs can help support:

- improved parent-child relationships¹⁹,
- improved school readiness and transition, and
- improved educational outcomes²⁰.

ECHs have also measured participating families' improved feelings of belonging and engagement in communities, contributing to overall improved quality of life²¹. Local integration of early years services contributes to stronger, more cohesive communities.²² When families connect with one another in welcoming spaces they can connect, learn and access support together, building resilience and feeling a greater sense of belonging. Schools can act as community hubs that link families to a wider web of local supports and opportunities²³.

International research has similarly identified benefits of models in other countries such as better child outcomes across developmental domains by five years of age²⁴ and improved navigation of the transition from childcare to school²⁵. Studies have demonstrated that these models can support improved home learning environments²⁶, positive engagement among parents facing additional adversity²⁷, and a reduced proportion of children in statutory care²⁸. Overall, these models bring about an increased sense of belonging for families new to an area²⁹ and better community cohesion, which positively impact the wellbeing of parents as well as their young children³⁰.

Evidence: Support for Aboriginal and Torres Strait Islander communities

Aboriginal and Torres Strait Islander integrated early years centres operate as ECHs and have existed in Australia for several decades. The centres play an integral role in building and strengthening the community and focus on addressing the needs of children and families in a context of cultural safety that actively respects and promotes Aboriginal and Torres Strait Islander identity. They are connected and trusted by their communities and part of efforts to close the gap³¹. Evaluations of one model, Aboriginal Child and Family Centres (ACFCs), found that they provide high quality and cost-effective early childhood education to Aboriginal children in a trusted, culturally safe environment. Furthermore, they are delivering early outcomes for Aboriginal children, families, and communities across the Human Services Outcomes Framework, particularly in education, health, social and community and empowerment³². ACFCs are effective in connecting with more marginalised parts of the communities, with estimates from four NSW-located ACFCs indicating that 78% of children accessing early learning at the centres had not accessed early learning services previously³³.

See further the work of [SNAICC – National Voice for Our Children](#), the peak body for Aboriginal and Torres Strait Islander children, which conducts significant policy, research and advocacy for a strong and sustainable Aboriginal and Torres Strait Islander community-controlled sector.

Evidence: Economic benefit of ECHs

Several research studies have attempted to calculate the return on investment of ECHs. A 2024 evaluation of The National Community Hubs Program (NCHP), a place-based and people-centred way of building connections and social and economic capital within culturally and linguistically diverse communities, found that the program provided \$65.7 million in social benefits for Australia.³⁴ This was valued as a social return of \$3.50 for every \$1 invested in the program. And a 2022 breakeven analysis of The Benevolent Society's (TBS) Early Years Places in Queensland explored how

engagement with the service could reduce early school-leaving was needed to break even³⁵. Data limitations prevented a comprehensive cost-benefits analysis and TBS indicated aspirations for a second phase with additional data to complete this important work.

International studies have also attempted to calculate the return on investment of programs. For the UK's Sure Start hubs, every £1 of net spending could eventually generate around £11 in benefits for the children who attended³⁶.

Conclusion

This evidence demonstrates the value in supporting the expansion of ECH models across Australia and embedding them within our child and family systems, especially in areas of high socioeconomic disadvantage. Ongoing research in this area will continue to build the strength of this case and advocacy for increased commitment to the strengthening and scaling of these initiatives.

To learn more about SVA's work in the early years, including on the ECH model, visit:
<https://www.socialventures.org.au/about/programs/nurture-together/>



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