Case Study Two: Improving outcomes for Aboriginal children and their families.
Introduction

This is the second in a series of case studies that share learning from an evaluation of the Greater Shepparton Communities for Children program. These case studies are intended to be the learning focus for the program’s ‘community of practice’ – the practitioners, managers and leaders involved in the program. Through knowledge sharing, discussion and collaborative problem-solving, the community of practice can help drive meaningful change that lasts.

This case study focuses on aspects of the program that relate to improving outcomes for Aboriginal children and families in Greater Shepparton.

The contents of this case study...

- defines the Program’s rationale why we’re doing it p 3
- explains what the Program is doing p 4
- explains how it is addressing Closing the Gap p 5
- outlines what has been achieved p 6
- includes two first person stories of significant change p 7 & 8
- outlines lessons, challenges & next steps p 9

Methods used

The Most Significant Change Technique is an evaluation method using first person stories of change. It is a very effective way to listen to community people’s experience of a program.

Case Study is a document that considers one element of a program so that learning can be undertaken (this document).

Community of Practice is a gathering of practitioners who come together to learn how they can improve their practice.
The rationale - why we’re doing it

The Communities for Children Program has a vision that all families and children in the City of Greater Shepparton have the opportunity to develop and grow in a supportive and nurturing community. To achieve this vision the Greater Shepparton Communities for Children Strategic Plan 2015-19 has identified six priority areas.

Priority 3 ‘Closing the Gap’ is to:

- improve outcomes for ATSI children and their families
- build the capacity of ATSI families through parenting and other skills
- promote active engagement approaches with ATSI families

<table>
<thead>
<tr>
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<th>Higher-than-average Indigenous population</th>
<th>Outcomes for Indigenous families are significantly lower than for the broader population</th>
<th>High unemployment among indigenous persons</th>
<th>Low participation by ATSI Children in maternal and child health assessments</th>
<th>Very high level of out-of-home care</th>
<th>OOHC Placement of ATSI children was identified as a significant social issue during stakeholder consultations</th>
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|                          | 3.63% compared with 0.74% statewide       | 34.2% of Indigenous households are single parent                                           | 20.5% as a percentage of the total labour force | 51.6% of 3.5-year-olds in 2014-15                                               |                                  | 3.63% of Indigenous households are single parent

3.63% compared with 0.74% statewide
What the Program is doing

This is the CfC program’s theory of how it will achieve its vision and intended outcomes.

It presents three pathways:

Pathway 1 in Pink: targeted direct service delivery by CfC Community Partners.

Pathway 2 in Orange: Improving the sector through collaboration.

To achieve these CfC undertakes Pathway 3 in Blue: Communities for Children members and partners collaborate with each other.

Within this effort is focused on 6 priority areas Purple.

[Diagram of Greater Shepparton Communities for Children Theory of Change]

Vision: That all families and children in the City of Greater Shepparton have the opportunity to develop and grow in a supportive and nurturing community.
How the Program is addressing Priority Area 3: Closing the Gap

The program funds projects across the three pathways relating to the C4C Priority Area 3: Closing the Gap (see theory of change on page 4)

Pathway One (direct service delivery)
Funding for ‘Strong families – Smooth Transitions’ project
This project is run by Lulla’s Children and Family Centre (Lulla’s). Lulla’s provides a child care and kindergarten service to the ATSI community.

The project incorporates a ‘wrap around model’ which targets marginalised and vulnerable children and families, brings them into the Centre and supports them through key transitions. The project has been driven by the following activities:

Employment of Family support worker
- Targeted support for at risk children and families
- Arranges specific agency visits and referrals for families to services such as SCOPE, ECIS, Maternal and Child Health
- Approaches families in a culturally appropriate way

Weekly meals night
- Provides families with healthy food, social connections and culturally appropriate support

Focused support on transitions
- Six activities have been provided to run with St Georges Rd Primary School
- Families are supported during children’s transition to seven regional schools

- Constitutes a focus of the family support worker
- Delivery of ‘Drumbeat: building resilience through rhythm’ program Evidenced-based program using hand drumming to foster improved levels of personal and social confidence and develop social skills for disengaged children.
- Targets ‘at risk’ children aged 3-12 years
- Three staff trained to deliver sessions
- Five sessions delivered so far, with more planned

Annual Health Day
- An ATSI community event focused on improving health and wellbeing
- Includes free child immunisations

Pathway Two
Improving engagement among funded partners
A number of the funded partners have committed to improving their engagement with the ATSI Community and deliver services in a way that is more culturally safe. The partners are striving to improve ATSI People’s access and participation. In doing so they’ve developed their own cross-cultural access plans.

- Aims to increase participation by Indigenous children and families in:
  - the maternal and child health service
  - supported playgroups
  - kindergarten
  - primary school

The Closing the Gap Collaboration Working Group explores ways to improve ATSI access and participation in services. It involves key stakeholders and is Aboriginal led. They have developed a program logic and action plan, and intend to:

- deliver professional development in culturally inclusive practice for the Early Years sector
- review CfC Access Plans and make recommendations
- Pilot Key Worker model
- Develop Educational packs for parents
- Implement linkage strategies between key services (eg. MCH first home visit and RAC/Lulla’s)

The working group is planning for professional development on cultural awareness and safety for CfC partners, stakeholders and other service providers. This is scheduled for 2017.

The Facilitating Partner and Aboriginal leaders of CfC support and endorse the formation and ongoing work of the group.
What’s been achieved

Pathway One
High participation and reduced social isolation

High participation
- 300 ATSI children and parents have been supported by the ‘Lulla’s Strong Families – Smooth Transition’ project.

Reduced social isolation
- Participants reported a greater sense of social inclusion
- The service is reaching isolated families through improved communication and home visits
- Participants reported experiencing genuine social interaction and a sense of value
- The ATSI Community is getting improved access to and participation with health services – “the annual Health Day is good to share information about Rumbalara Co-op and adults are getting health checks too”.

Pathway Two
Improved engagement among partners

Lulla’s has collaborated with other CFC partners and stakeholders in a number of ways:
- Regular contact with Rumbalara Family Services and with Community Health at GV Health, Early Childhood Intervention Service
- MCH nurse is working with the Family Support Worker and is performing home visits
- Best Start has funded a playgroup that commenced in term 4 at Lulla’s
- RAV are running Tuning into Kids and Exploring Together, evidence based programs at Lulla’s
- All partners have developed cross cultural access plans.

Pathway Three
Collaborative answers to challenging issues

There is clear evidence of increased collaboration that is focused on Closing the Gap. A number of the Aboriginal people interviewed highlighted this as the most significant outcome from their perspective:

‘I have got to say – one of being inclusive to their thinking around people that make up communities particularly to ATSI. It has been a whole new experience for me to be working with groups like this - as one group - this is a collective, it is really nice’. [ATS I 01]

Having a shared focus for action is highly valued.

For example, one Aboriginal respondent stated:

‘... also now it's like we are a valued member of C4C project considerations – anything that they see that might present us with a position to work together. Nice to sit around the table where every one is saying it would be nice to have every ATSI child immunized in the region. We have all the stakeholders at the table and we saw them thinking how they could do it within their own resources. It should have been something that we should have been doing years ago. We are doing it as a collective – that is what is on the table at the moment and I think that is brilliant’. [ATS I 01]

A number of the collected stories emphasised the collaborative spirit in which work is undertaken. They identified key steps including: having a common goal, placing value on the collaborations and the importance of relationships being built and strengthened as the foundation.

The targeted, collaborative approach of CFC is inspiring other collaborations:
- Rumbalara with Save the Children
- Lulla’s with a number of Primary schools for transitions from Kinder to Primary school

“We have children that are vulnerable at the centre, out of home care – it is more than basic child care and Kinder. It is about working with the parents, those that don’t have enough food, we assist with food, working with the children and the parents, checking that things are going really well, that the family is OK, providing respite for parents. The program has a multi functional purpose, staff make referrals to RAV if there is a family violence issue. The contribution by CFC has enabled us to do a better job”.

[ATS I 02]
Story #1: Consistent enrolments and attendance

I was informed by the Centre Director that a position had been funded as a Family Support Worker and that Aunty Jane would be in this role. I became involved in my professional capacity as a Kindergarten Teacher, but also accessed personal support from Jane for myself and my son who attends the centre. Jane has built strong relationships in our community, so this makes it easier to approach her about a families issue.

For you what are the most important changes that have resulted from the introduction of the Family Support Worker at Lulla’s?

- We have greater access to reach families
- Having a key point of contact for assistance with often complex issues
- Having someone with a solid knowledge of local service supports and how to access these
- I think we have strengthened relationships with our community (Children and families).
- Increased enrolment and consistent attendance of the children
- Having this support gives me and the staff a greater opportunity to impact the children’s development and school readiness

From these changes which do you think is the most significant?

Before Jane commenced in the role we had significant issues with getting regular attendance of children and the numbers were really inconsistent. With the resources we had before Jane came on board we had little capacity to follow up on issues identified with families and could not engage in home visits to support these families often struggling. The biggest change I have seen is that we have increased enrolments and a far more consistent attendance with our children. Getting enrolments is easier now as Jane has strong ties and relationships within the community as trust and respect already existed.

When Jane started in the role this gave us greater strength as a team and we could reach the children and families in our community. The increased attendance and growth in numbers meant that we could focus on the children’s developmental needs with more consistent opportunities and where issues were identified in families Jane could support them and help them to access the supports they need to function better and look after their well being. We had many children previously where basic needs like food were a struggle and families were often too embarrassed to say anything. This is much better as they will approach Jane or she them to offer support and assistance. I personally had some struggles of my own with a separation. This had a great impact on me and my son’s life and Jane helped us and linked us to the right people for help, which made a very difficult time far more bearable knowing I wasn’t on my own and was getting help without judgment.

Overall I think having Jane in this role is very important and see lots of benefits for the centre and our community. Being able to teach these children and support these families makes such a difference in their lives now and into the future. The benefits I see are wide ranging, such as;

- a stronger focus on children’s development and identification of barriers
- improving school readiness
- stronger relationships with community
- greater access to service supports
- bolstering the speed of progress towards better outcomes for the children
- greater strength as a team

Why is this significant to you?

Because it is the greatest outcome I can see. It is significant to me as it means I can do my job better and the support provided to me made a challenging time in my life a little easier.
Story #2: Racism Stops with Me

I became involved when I started to bring my son along to day care. A carer told me about the Wednesday night meals and I came along and have been attending every Wednesday since.

For you what have been most important changes that have resulted from the meals night?

The Opportunity to see family that I wouldn’t usually see and build these relationships and as a result I feel more a part of the family (son’s father’s family attend meals)

Before the dinners I would rarely see family. We would only see each other at family gatherings which were not often and more formal. At the dinners it is easier to have a yarn and talk about what is happening in each other’s lives and share advice with each other. I’ve been able to build relationships that wouldn’t have happened when we only see each other once or twice a year. And the times we did see each other were in a formal environment and there were only more formalities spoken. At the meals we talk more about our lives. Now instead of cousins just saying hi down the street or a passing hello we will stop and talk for ten or fifteen minutes. It’s building better relationships. When we’re all put in one spot with food then everyone talks and is happy. It is a night to be thankful for. I don’t have to run around like crazy to feed the kids and I can have a night off.

Why is this significant to you?

Because family and community is important. It’s also closing gaps. I’m white but don’t feel pigeon holed here. I feel accepted into the Koori family and community. It’s important to me for my son to know there is always support for him. With a strong family he can always have them to turn to. He has aunties and uncles to turn to if he needs help. I also want him to become someone that can be relied on for support. I want him to do right by his family and elders and for them to be proud. And I want him to want that.

When you’re more involved and closer with community and family you are more accountable and you raise a more respectful generation. It’s very different for me to raise a son and not just a son but an aboriginal son in the right way. I want to raise him right and with the knowledge of both heritages. By being accepted here, not black or white or indifferent. It’s like the ‘racism stops with me’. If we can get together with no black or white my son can see us get along and love each other. When relationships build up then you just see family. There is no reference to black or white it’s just family. I feel it’s a step towards closing the gap.
The following summarises the analysis and observations produced during the December 2016 Community of Practice.

Lessons

Engagement and participation improve if service providers are considered culturally safe. Five years ago, Indigenous families did not seek services outside those provided by Aboriginal Centres. The work of the Program is correlated with ATSI families seeking assistance from providers in the broader community that have become more ‘cultural safe’.

Holding ‘events’ can assist as a means of improving program reach and engagement. The Annual Health Day succeeded in not only improving immunisation rates among children – adults also sought health checks. The event also created an opportunity to share information regarding the Rumbalara Aboriginal Coop’ health programs and services. The success of the Health Day presents an opportunity to expand and include more people and service providers.

Relationships are vital to the success of the Program. Throughout the stories it was evident that good relationships are vital and need to take place in a number of different settings. Part of being culturally appropriate is the building of personal relationships.

Cultural safety is and needs to come from both ends assisting that ‘bridge’ between services and through transitions. ATSI children and families need to be supported all the way through services and transition points in the health and education journey.

Collaboration is strong and getting stronger between ATSI organisations themselves and between ATSI and non ATSI services. There is a sense that we are walking alongside rather than telling and instructing.

Having the ‘right’ person in place to build strong relationships and go above and beyond is vital for the success of this type of program. The family support worker individualises services, tailoring them to at-risk families’ needs.

Challenges & opportunities

- What is the impact upstream from the programs? Can we see results of this early years investment in later years of education of these children? The challenge is to be able to see and measure this.
- Securing sustainable support for the wraparound model at Lulla’s. There is a challenge inherent to understanding and communicating the concept of a ‘wrap around model’ its importance to vulnerable children and families.
- How to build on initial progress in relation to adopting a more collaborative approach
- How to help all partner services become culturally safe

Next Steps

- Consider how to ensure ‘Lulla’s wraparound model’ receives sustainable ongoing financial support.
- Continue to collect evidence of the success of the ‘Lulla’s wraparound model’ and its impact on children as they move through education
- Seek to have the ‘wraparound model’ recognised as an ‘evidence-based program’ by the Institute of Family Studies
- Consider how CfC can help precipitate systemic change that will ensure this model is supported and implemented more broadly.
- Consider CfC’s potential to assist the ATSI community in helping define the concept of best-practice Indigenous out of home care