

Introducing new Stronger Families and Communities STRATEGY PROJECTS

I N T R O D U C I N G

Collingwood Community Information Centre

The Collingwood Community Information Centre, formerly the Citizen's Advice Bureau, is part of the Community Information Victoria (CIVic) Network. We are located in the Collingwood high-rise public housing estate. It is the first information centre based in the City of Yarra and believed to be the only community information centre located on a public housing estate and primarily operated by residents. The Collingwood public housing estate is home to more than 1650 people living in high-density housing, comprising three high-rise tower blocks, more than 350 walk-ups and townhouse-styled properties. The estate is located just three kilometres from Melbourne's central business district close to all amenities. The community living here originate from more than fifty countries of birth, with forty per cent nominating a language other than English spoken at home.

Why is this project needed?

The Collingwood Community Information Centre was conceived as a result of a study by Jesuit Social Services in 1999, where an expressed need by the community for access to local information and shared community space was paramount. Collingwood Estate was an area of concern already known to workers and more importantly to residents living here. Specifically, when measured against the state mean, data revealed Collingwood experiencing an unemployment rate 286 per cent higher; almost three times the level of

single parent families; more than double the occurrence of disability support pensioners; and a crime rate per capita 453 per cent above the state average (Victorian Department of Human Services DHS; www.neighbourhoodrenewal.vic.gov.au).

Neighbourhood Renewal initiatives around community participation, employment and training, and working groups focusing on local issues, corresponded with the need for an information and community hub to provide an access point for these areas.

What we are trying to do?

We are trying:

- to have an information service established by local residents, for local residents, in order to create ownership of the space and a stronger sense of community.
- to provide a drop-in service-delivery model that reduces social isolation.
- to develop positive partnerships with the local community, all levels of government, community agencies and businesses. We currently enjoy regular donations from businesses such as Dilmah Tea, Flowers Vasette, One Umbrella Food Rescue Program and have an ongoing partnership with Kenard's Self Storage and Home-Ground Services to provide a free furniture service.
- to increase employment and training opportunities for local residents. Of the 34 public housing residents that have undertaken accredited training to volunteer as an information worker, 80 per cent have gone on to secure paid employment; enter tertiary education, and/or community leadership

In this section, readers are introduced to a selection of projects funded under either the *Local Answers* or the *Invest to Grow* strands of the Stronger Families and Communities Strategy. These projects have recently commenced. All projects provided a response to the same questions.

positions – an excellent outcome for the participants, but challenging for the Centre which relies on trained volunteers!

- to provide a welcome process for new residents to the estate.
- to become an Incorporated Association by end of June 2005.

How are we doing it?

Jesuit Social Services auspiced the project and secured an initial 18-months funding through the Australian Government Department of Family and Community Services' Stronger Families and Communities Strategy's *Local Answers* initiative. The Collingwood Centre has a Steering Committee made up of local residents and agencies. Current members include six residents and representatives from Jesuit Social Services, North Yarra Community Health, Home-Ground Services, Office of Housing, City of Yarra, Community Information Victoria (CIVic) and Brotherhood of St Laurence. This Committee is supporting the Collingwood Community Information Centre in the process of becoming an Incorporated Association with pro bono assistance of Middleton Lawyers, expected to be completed by July 2005.

In June 2002, a co-ordinator was employed 19 hours per week to recruit local residents and establish the new service. A second worker was employed 12 hours per week in January 2003 to provide support for the volunteers. In July 2004 the workers increased their hours to 38 and 19 hours per week respectively, in response to the rapid increase in numbers of people accessing the service. In addition, we have a local resident employed through the Youth Employment Scheme for Neighbourhood Renewal based at Collingwood Community Information Centre. Our trainee is rapidly developing business administration skills and has become an invaluable member of the Collingwood Centre team.

Along with our core business of Community Information service provision, the Collingwood Centre has branched out to accommodate the following services in response to community need and resident initiatives:

- **Communications Service:** mediated access to free phone, fax, copier and internet use.
- **Employment and Training Opportunities:** maintaining a "Want a Job Wall" displaying local employment and training opportunities; provide resume template, assistance with job applications and references where appropriate. RMIT also delivers accredited volunteer training onsite.
- **Tax Help and Baby Bonus Assistance Program:** local residents accredited by the ATO, volunteer to complete Tax Returns and Baby Bonus Applications for local residents.
- **Centrelink Services:** Centrelink has an outpost located at the Collingwood Community Information Centre twice a week.
- **HomeGround Tenancy Service:** Tenancy advice worker based at the Centre twice a week.
- **New Residents' Welcoming Process:** new residents are given a voucher to receive a free "welcome kit" from the Collingwood Centre. The kits are made relevant to each household. Where possible, translated information is provided and contents are discussed with bi-lingual volunteers. New residents are also invited to a monthly Welcome Lunch prepared by a local resident.
- **Free Recycled Furniture Service:** Kennard's Self Storage (formerly Access Self Storage) provide space to the Collingwood Centre at a greatly discounted rate which is paid for by HomeGround Transitional Housing Manger. The Collingwood Community Information Centre co-ordinates the inventory and fax regular updates to the local Emergency Relief Network. We are pursuing funds to purchase a van to assist with removals.
- **Free Recycled Clothing Service:** Beginning as a result of donations from staff family and friends, it has exploded into a successful community enterprise. Volunteers ensure the clothing is maintained and in good condition.
- **Financial Information Service:** Our volunteer Financial Information worker provides advocacy with utility companies and other debt collectors as well as providing practical budget assistance and referral. We recently received funding from the Department of Justice Consumer Credit Fund to run workshops around debt, credit, legalities around loan schemes and pawn shops. The volunteer will now conduct workshops in conjunction with the City of Yarra Financial and Crisis Counselling Service.
- **Collingwood Conversation Lecture Series:** In 2004 these lectures were conducted fortnightly with the focus around themes of anti-discrimination. In 2005, they have a broader focus of public health and wellbeing, and more general community information that promotes greater community connectedness and understanding.

How has the community responded so far?

- Through the support of local residents, community agencies, businesses and all tiers of government, the Collingwood Community Information Centre has established

itself as an integral part of the Collingwood Housing Estate and broader City of Yarra community, in a relatively short period of time. The City of Yarra acknowledged the Centre's work with the "Community Service of the Year Award" in January 2004.

- On a daily basis we are assisting a similar number of men and women; people of every age; of diverse ethnic backgrounds including Indigenous Australians and asylum seekers; residents who have lived on the estate for decades, as well as new residents who have just moved in. Through this environment of diversity the Collingwood Centre achieves harmony, acceptance and mutual respect. The Centre's greatest strength is the egalitarianism that has eventuated between all people accessing the space.

- The Collingwood Community Information Centre continues to achieve a near perfect satisfaction rate (November 2002 – May 2005). From statistical information collected, 37 people were assisted in our first full month of operation (December 2002). This has increased significantly to 856 people assisted in April 2005. Our success continues and we have recently updated our data collection so we capture the amount of new clients and ethnicity more comprehensively. A new resident volunteered the following anecdote in response to the service:

"We came here with nothing except the clothes from the car and within two days of moving in, CCIC have helped us a great deal. Now it's our 5th day we have a fully furnished place for us and baby to sit, eat, sleep and feel totally comfortable in. We would like to thank CCIC and the staff and everyone that supports the CCIC. You have let our dream come true. Happy, healthy family. Thank you" (Young family that had been living in their car, March 2005).



What did you learn from the first phase of the Stronger Families and Communities Strategy?

We recognised the value in pursuing partnerships with all levels of government and local business, as well as community members. We identified through comprehensive feedback mechanisms that we had to keep the project relevant to the community's needs in order to promote community ownership necessary for our success and sustainability. By improving our methods of data collection, we have been able to draw a clearer picture of who we are assisting and identify any

gaps in our service delivery. We also realised that celebration of achievements (both individual and collective) is essential in sustaining our enthusiasm and positive energy to drive us and succeed into the future.

The Collingwood Community Information Centre would like to thank all past and present volunteers who are the roots of the Collingwood Community Information Centre tree; JSS and members of the Steering Committee, including NYCH, HomeGround and CIVic; Families and Communities Strategy; Department of Justice; Office of Housing; the City of

Yarra; Neighbourhood Renewal; Centrelink; and the ATO. Business support from Kennards Self Storage, Flowers Vasette, Dilmah Tea, One Umbrella Food Rescue Program, National Australia Bank, Safeway, Microsoft, AXA, and the numerous people who have so generously donated clothes, books, toys and household items – thank you one and all!

For further information please contact: Co-ordinator Kellie Nagle. Emails: kellie.nagle@jss.org.au. Phone: (03) 9416 4494. Alternatively please contact: volunteer Support Worker, Samara Hodson. Email: samara.hodson@jss.org.au

Through the Looking Glass – A community partnership in parenting

The Through the Looking Glass project is based in a community child care setting in Noarlunga, in the outer southern metropolitan area of Adelaide. The project came out of a pilot project based at a community child care centre in Thebarton, in inner western metropolitan Adelaide. It commenced in 2002, with two-year funding under the first phase of Stronger Families and Communities Strategy. In 2004 the project continued with funding from the Department of Education and Children's Services. The part of the project funded under *Local Answers* commenced in September 2004 and is funded for two years. We were successful to win a tender to extend the project, which will be run in three child care centres in Adelaide, and one is Brisbane and Perth. We use the same name, Through the Looking Glass, for all the projects.

Why is this project needed?

It is well documented that early parent-child relationships have a significant impact on educational, mental health and welfare outcomes in the short and long term. Early intervention can promote positive and secure parent-child attachment relationships which in effect can promote wider positive outcomes.

Social isolation is a risk factor for poor attachment outcomes. Many high-risk families are reluctant to use health and welfare services due to past experience or fear. However, child care is a non-stigmatised setting which most families are happy to engage with. For high risk families it is important to provide services in settings that they feel comfortable with and are likely to engage in.

What are you trying to do with this project?

The overall aim of the project is to provide intensive psychosocial support and child care as a package for high risk families in order to develop and support more secure attachment relationships between parent and child.

The project supports families and parents with young children 0 to 5, with a particular focus on 0 to 3 years of age. We recognise that effective early intervention improves health, safety and wellbeing outcomes at community and individual family levels. The priority area for the project is to support the early parent-child bonding through supporting the parent to address significant barriers in their ability to nurture and bond with their child and increasing and developing family social networks.

The project also recognises the complexity and barriers for child care staff in providing sensitive and responsive care and education experiences in the early years. Whilst the project focuses on specific families, the learning that occurs for child care staff can be

applied to all children and families. The project brings together the areas of health, education and child care and re-orientates existing services so that they act more cohesively as a system of services geared to meet the needs, particularly the attachment needs of children and their families.

How are you going about it?

The main principles on which the project is based are:

- transcending silos of health, education and social services;
- utilising a non-stigmatised, accessible, universal settings;
- providing good in-service training; and
- a focus on process and relationships.

There are a number of components of the project that interrelate. These are:

- the child care provided within a primary caregiver context;
- the link between the clinician and the child care staff;
- the weekly group program;
- the involvement of fathers;
- individual counselling and support;
- provision of training on attachment in the child care context; and
- developing partnerships.

Each program runs for 18 weeks. The mothers attend a weekly two-hour group, in which there is considerable discussion on attachment. Activities are undertaken and videos are viewed.

The group has an educational and therapeutic purpose. The focus of the group is on the parent-child relationship although the development of supportive relationships in the group is also encouraged.

The children are not present in the group. The child attends child care whilst the parent attends the program. The child can have up to two days of child care. The child care is an integral component of the project. The relationship the primary caregiver develops with the child and parent plays a key role in developing a positive relationship between the parent and child. Research shows that a child having an alternative attachment figure acts as a protective factor for children in high risk family situations.

Additionally, the relationship between parent and primary caregiver has positive outcomes, in terms of helping the parent experience a positive, supportive, non-judgmental adult relationship.

It was decided to keep the group solely for mothers (who are generally the primary attachment figure) because of group dynamic issues, and the social capital building goals, which encourage supportive relationships amongst the mothers. However, we are very aware of: the importance of involving the fathers in the project so as they feel valued and not excluded; the need to support couples in their parenting; and for the fathers to develop a support network. The mothers who have partners have also explicitly stated that they want their partners to be included in a meaningful way in the project. We have done a number of things to facilitate this:

- group sessions with the fathers, covering key ideas and presenting Circle of Security and Circle of Repair;
- photo-voice – giving them disposable cameras to take photos that capture key concepts of Circle of Security;
- a “You are so Beautiful” Video; and
- encouraging fathers to attend the General “Dad’s” sessions at the child care centre.

There are specific goals around training of child care staff so as to support them to assist families with complex needs. These goals are to:

- increase confidence in working with complex families;
- increase confidence in communicating with parents about their children; and
- increase understanding of children’s challenging behaviour in the child care context.

The training is ongoing, beginning with some initial “theoretical input” and opportunity for discussion followed by the establishment of action learning projects. This facilitates greater reflection by the child care staff on their own work, and the role they play in the relationship with the children with whom they work. This is also consistent with the reflection we are asking the parents to do.

There is one clinician employed for half the week to work explicitly on the project. Each child participating in the project has a primary caregiver. A child care worker from the centre involved in the project co-facilitates the group with the clinician.

How has the community responded to the project so far?

There has been a very positive response from the community in Noarlunga. Services are making referrals and training has been provided to services in the community. This has resulted in a community of services working with families with young children with common approaches. Feedback from participants (families) has been very positive. To date there has been no formal evaluation of service providers. However there has been considerable interest in the approach we are utilising.

What did the project learn from the first phase of the Stronger Families and Communities Strategy and develop into this round of funding?

A lot! The format of the training of child care staff was a significant learning. Whilst it was important to have some formal theoretical input, we learnt that it was essential that there were opportunities for action learning. We learnt that child care staff often had an understanding of the theoretical concepts but found it difficult to translate this into practice in their relationships with the children.

The importance of the primary caregiver and the clinician working in partnership was highlighted, and ways of doing this are constantly being developed.

The pilot project demonstrated that overall mothers’ anxiety and depression reduced and they were less stressed. However, we were unable to determine whether the parent-child relationship had improved or what the outcomes for the children were. We are looking more closely at these outcomes for our current project.

Healthy Start: A national strategy for children of parents with learning difficulties

Healthy Start is a joint three and a half year initiative of the University of Sydney and the Victorian Parenting Centre, funded under the invest to grow initiative. Each Australian state and territory is taking part and

adapting the strategy to suit existing programs and meet local needs.

Why is this project needed?

Around 40,000 Australian children under five have a parent with learning difficulties. Without appropriate support these children are at risk for poor birth outcomes, accidental injury, serious illness, developmental delay and behavioural disorders. One

in three will be removed by child protection services. Evidence-based practice delivered by well trained and properly resourced human service workers is critical to a sound investment in the future of the growing number of these young Australians.

It has been difficult for families to get the learning support they need and to date there has been little



support for the practitioners who work with these families.

Research tells us that with appropriate education and support, parents with learning difficulties can learn, adapt and overcome parenting difficulties and create safer, more supportive environments for their young children.

What are you trying to do with this project?

Healthy Start aims to better resource the practitioners and organisations who support these families – and in turn to create safe, stimulating and supportive environments for young children. Healthy Start will nationally:

- set up a network to provide more support to practitioners and families.
- roll out two evidence-based home learning programs for parents with learning difficulties, namely, Parenting Young Children – promoting positive parent-child interactions and child care skills, and Healthy and Safe – an Australian Parent Education Kit equipping parents with child health and home safety knowledge and skills.
- trial two innovative programs for parents with learning difficulties, namely, a Health Care Tool Kit to promote the health and wellbeing

of pregnant women; and The Supported Learning Program, to enhance community connections, support networks and self-advocacy skills of mothers.

How are you going about it?

Healthy Start will be based on an active network of practitioners across Australia to facilitate the exchange of ideas, information and advice. To help achieve this, a Healthy Start Leader will be appointed in each state and territory. These leaders will recruit practitioners and key stakeholders into the Healthy Start Network. They will also help establish and support learning hubs in their state. Healthy Start learning hubs are clusters of individuals and agencies. These could be based on geography, region, local services, roles, projects, interests or pre-existing links or networks. Hubs will be connected and supported online via email, newsletters and a website, and will enable sharing of knowledge between practitioners, agencies and service workers.

How has the community responded to the project so far?

Healthy Start began in April 2005. The project team are currently consulting with key stakeholders around Australia

about embedding Healthy Start into existing service networks. There has been a very positive response from the field, with many key stakeholders already signing up to the network by contacting the project team at healthystart@vicparenting.com.au (for people in Tasmania, Victoria, South Australia, Western Australia, and the Northern Territory) and at healthystart@fhs.usyd.edu.au (for people in New South Wales, Queensland, Australian Capital Territory).

What did the project learn from the first phase of the Strategy and develop into this round of funding?

Under the first phase of the Strategy, the Victorian Parenting Centre was funded to conduct the project *Development and implementation of systems of supports for parents with a disability*. This work generated enormous interest in Victoria and other parts of Australia and many of the key recommendations from this project are being implemented in the current project. Specifically, *Parenting Young Children* (VPC 2003) a home-based parent education program, being disseminated via the Healthy Start initiative, was developed and trialled with funding from round one of the Strategy.

Rural Beginnings project

The Rural Beginnings Project expands the existing Kurrajong Early Intervention Service's model of early intervention to include therapy and family support to families who have a child with delays in two or more areas of their development. The project is located in nine local government areas around the regional city of Wagga Wagga, New South Wales. The Project is based on the existing successful early intervention model of therapists, special educators and family support workers, working together in a co-ordinated trans-disciplinary team. Between 60 to 70 families each year in the nine local government areas in the region will be supported through this project with over 120 families provided with a service over the duration of this project.

Why is this project needed?

Before the Rural Beginnings Project commenced, families living in rural areas in the Riverina who had children with disabilities or delays in their development, had limited access to local therapy and family support at the most crucial time of their child's and their own lives. Services were either not available to them locally, or were at best spasmodic, with one of the major difficulties being attracting and retaining therapists in rural areas. The Project has sought to develop a workable service model to address this difficulty. It operates on a "hub and spoke" model. Early education staff are located in rural centres with responsibility for a cluster of local government areas. The therapy resources and family support workers are located in a regional centre (the

"hub") in Wagga Wagga and travel out to the smaller rural centres and villages in the local government areas to provide services. The "hub and spoke" model also applies to the attracting and retaining of therapists. The Rural Beginnings Project employs qualified senior therapists across speech pathology, occupational therapy and physiotherapy disciplines (the "hub"). These senior therapists provide peer support, training and supervision for new graduates and other therapists who travel out to the local government areas to provide services.

Whilst it is only early days for the project, we now have families in the nine local government areas receiving equitable access to quality early intervention services that are delivered in their local community. Children are receiving consistent paediatric therapy



Shelley, our Speech Pathologist working with Jacinta one of our children from Coolamon



Sarah, our Speech Pathologist in Tumut, working with Jessica.

that is already making a significant difference to their children. Changes to family's general wellbeing because of Kurrajong Early Intervention Service's holistic family-centred approach are also noticeable.

What are you trying to do with this project?

Rural Beginnings Project is working on establishing a best practice model for delivering equitable access to early intervention services (particularly paediatric therapy and family support) for rural and remote families. The project is also trialling the "hub and spoke" model for the recruitment and retention of therapy staff in regional, rural and remote areas.

The ultimate aim of the Rural Beginnings Project is to add to the evidence base of what works in delivering essential early intervention services to children with disabilities/delays in their development and to their families that could be adapted to other rural and regional areas throughout Australia. The Rural Beginnings Project will also allow Kurrajong Waratah's Kurrajong Early Intervention Service to support other similar early intervention services operating in rural areas of Australia through the development of a training package - Working together in trans-disciplinary teams.

How are you going about it?

Three outreach early intervention teams have been developed. These teams have responsibility for the families in a cluster of local government areas. Wagga Wagga is the resource centre for the therapists and the Family

Support Resource Unit which are part of the teams. Two service centres have been established in two of the main outreach areas to act as smaller "hubs" to provide a base from which to operate. Each team comprises a Special Educator, a Speech Pathologist, a Physiotherapist, and Occupational Therapist. The Family Support Resource Unit (Psychologist and Family Support Workers) operates across all the teams working through family issues, co-ordinating services and linking families in with local services within their local community. Families receive a program consisting of early learning groups, individual sessions at either home or at the centres depending on the needs of the individual child and their families. The team also works closely with other local early childhood settings to co-ordinate the programs for the child and family.

How has the community responded to the project so far?

The response from families and the local community has been overwhelmingly positive. Families are very relieved to finally have early intervention services in their local communities. Local Shire Councils and service providers have been very welcoming of the Rural Beginnings Project and to Kurrajong Early Intervention Service. Our team members are thoroughly immersed in their outreach work and really enjoying the opportunity to work with families in their local communities.

This project has a strong research component, which aims to add to

the evidence base of the projects effectiveness. Charles Sturt University's Centre for Rural Social Research is conducting an independent evaluation of the Rural Beginnings Project. The evaluation plan is underpinned by Action Research principles. Over the four years of this project the University's evaluators will monitor staff, parents and other service providers to allow ongoing continuous improvement of the project.

The Australian Government's support through the Stronger Families and Communities Strategy, Early Childhood - Invest to Grow initiative - is greatly appreciated. The Rural Beginnings Project is a project that will not only make a difference for families who have a child with a disability or delays in their development living in the Riverina area but it will also contribute to the evidence-base on early intervention service delivery in rural and remote areas nationally.



Donalee, our Physiotherapist in Temora, is fitting Josh for his wheel chair.



Jose, our Occupational Therapist working with Charlie, one of our children from Tumbarumba

