



Response to the Legislative Council Select Committee Inquiry into Options for Tasmanian Child and Family Centres

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Submission prepared by

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Introduction

The Centre for Community Child Health (CCCH) at the Murdoch Childrens Research Institute is pleased to contribute to the Tasmanian Legislative Council Select Committee inquiry into options for Tasmanian Child and Family Centres.

Tasmanian Child and Family Centres (CFCs) have received widespread interest since their inception. This interest is often focused on understanding how CFCs in Tasmania embarked on new ways of working that support improved outcomes for children. Central to these new ways is an attempt to genuinely engage communities in planning, designing and operating CFCs. The work of CCCH in leading the Learning and Development Strategy between 2009 and 2015, funded by the Tasmanian Early Years Foundation (TEYF), was critical to building and supporting new ways of working with parents and communities.

CCCH is proud to be associated with CFCs through its work with Tasmanian communities, the TEYF and government departments in the planning, establishment and operation of CFCs. MCRI continues to provide supervision, mentoring and training support to initiatives operating within CFCs such as the Family Partnership Model, Empowering Parents Empowering Communities (a peer led parenting intervention), and one on one telephone support for CFC personnel.

Background

The establishment of CFCs continues a long-held focus in Tasmania on early childhood and the early years. Tasmania responded in the late 1990s and early 2000s to the growing international research and evidence around the neuroscience of early brain development. Further influence came from initiatives in Canada, the USA and the UK demonstrating evidence of the long term effectiveness of intervening early in the critical first years of life (e.g. Shore 1997; McCain and Mustard 1999; Shonkoff and Phillips 2000).

The Tasmanian Whole-of-government Policy Framework for the Early Years saw the establishment of the Tasmanian Early Years Foundation (TEYF) in 2007. The TEYF was instrumental in the development of CFCs, proposing the current model to Government following extensive research into the justification and impact of similar models nationally and internationally.

In partnership with the TEYF and Tasmanian Government, the CCCH led two key initiatives during the CFC planning and establishment phases. These initiatives, the Learning and Development Strategy and Action Research Project were pivotal in supporting the practice and service change required to effect improved outcomes for children and families.

Supporting change for better child outcomes

When announcing the CFCs in 2009, the Tasmanian Government aimed to ‘...fundamentally re-engineer early childhood services...’ (Tas Gov., 2008). Changing the way services are delivered to improve educational, health and wellbeing outcomes for children is not achieved simply through new buildings and co-locating services. It requires shared understanding, a shared vision and a new culture of service delivery between services and local community (Prichard et.al., 2015). A new culture that puts genuine community engagement at the forefront of a more accessible, collaborative and joined up service system.

In 2009 the then Tasmanian Early Years Foundation recognised that in order to move toward new ways of designing and delivering services, there was a need for a concurrent strategy to support the rollout of Child and Family Centres. The ensuing Learning and Development Strategy (LDS), designed and implemented by CCCH, worked with and alongside the CFC initiative.

The LDS was facilitated in partnership with the Tasmanian Government and concurrent to the implementation of the CFC model across twelve Tasmania communities. By bringing together services and community members from the very start of the CFC project, in each community, the LDS aimed to build genuine community engagement in the co-design and co-production of place specific service approaches that supported improved outcomes for children and families. Parents were heavily involved in in the design, building and governance of the CFCs.

The strong focus CFCs have on genuinely engaging with parents/community members is complemented in the way services are required to do things differently. Finding effective ways to engage different service providers in a more collaborative way of working, both with each other and with families and communities, is an ongoing goal of CFCs (Prichard et.al., 2015).

To sustain this respectful approach requires more than a horizontal integration of shared understanding between services and practitioners working directly with families. Policy and governance of the same organisations (the vertical) must ensure a culture of respectful engagement and locally responsive service approaches are maintained in the CFC communities. This requires ongoing investment in authentic interpersonal connections between both the traditional consumer (parent) and deliverer (practitioner / service) whereby they become partners in practice for the benefit of children.

We know change is not easy. Change requires long-term support to prevent services and individuals snapping back to old ways of working that leave children and families unable to access the services and support they require.

There is evidence that the process followed in developing the CFCs was effective in engaging vulnerable parents who would otherwise have had little involvement with early childhood services.

Cate Taylor's report found that, while it was too soon to show if the CFCs improved child outcomes, there was evidence that they had...

'a positive impact on parents' use and experiences of services and supports for young children. Parents provided evidence that Centres were successfully engaging, supporting and working with families to give their children the best start in life. Parents experienced Centres as welcoming, respectful and inclusive places that were helping them develop positive child, family, school and community connections.' (Taylor et.al., 2015 p.14)

The work of the LDS to support and embed change during the first six years of the establishment and early operation of CFCs was critical (McDonald et.al., 2015).

Conclusion

Current external interest in the Tasmanian Child and Family Centres is largely the result of CFC success in genuinely engaging with community and building a more coordinated, joined up service delivery model to improve outcomes for children in communities characterised by distinct disadvantage.

The changes required to sustain these new ways of working together are complex and require long-term change support mechanisms to accompany the shift in traditional practice. Communities, services, managers and policy makers require a shared understanding of desired outcomes for the health and wellbeing of children. This comes from shared discussion, skills development and training (Taylor et.al., 2015).

An expansion of CFCs in Tasmania would be positive step for families and communities currently without the benefit of the CFC model. We must ensure the many lessons arising from the planning and establishment of the first twelve Centres are applied and improved during such an expansion.

The Learning and Development Strategy was the primary change support mechanism during the planning and establishment of the first twelve CFCs. A further rollout of CFCs in Tasmania will require a similar strategy to be built into project planning. The CCCH continues to be proud of its work with the Tasmania CFC's and would welcome the opportunity to assist in this task.

A concluding paper of the CCCH work with Tasmanian CFC's, 'Supporting Tasmania's Child and Family Centres: The journey of change through a learning and development strategy' can be accessed [here](#).

References

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Contact for further information

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