Families and Communities Program Communities for Children Facilitating Partner Community Strategic Plan

Overview

The Community Strategic Plan (CSP) is developed by the Communities for Children Facilitating Partner (CfC FP) and Communities for Children Committee and sets out a broad vision for the service area, identifying community needs, priorities and key outcomes.

The CSP is organised into six sections:

- 1. Communities for Children Facilitating Partner's Details
- 2. Community Needs Assessment
- 3. Community Engagement
- 4. Service Area Vision
- 5. Priority Areas
- 6. Key stakeholders

It identifies the key strengths, needs and service gaps in the community, considers ways to improve coordination and collaboration, outlines priority areas and strategies to address need and improve outcomes for children and families, and identifies key community stakeholders.

The CSP builds on the extensive knowledge that Facilitating Partners (FPs) and their Committees have gained in working with their communities, often over long periods of time. It will consider opportunities for everyone in the community to work together to achieve true change in outcomes for children and families. This includes community members, service providers, governments, non-government organisations, researchers and evaluators, and business.

The development of the CSP presents an opportunity to critically reflect on the strengths of local communities, as well as any opportunities, challenges and emerging needs.

The CSP is a dynamic document that should be reviewed as new data becomes available or as you become aware of changing needs within the community. It should inform the development of Activity Work Plans.

Key dates and documents

All FPs are required to provide a CSP for each Service Area by **1 April 2022** covering the period **1 July 2022 to 30 June 2026**. You will also be required to provide a brief update on the progress of your CSP within your annual Activity Work Plan Report.

Your CSP needs to align with the <u>Families and Children Activity Outcomes Framework</u> (at **Appendix E** of the updated <u>Operational Guidelines</u>) and the Communities for Children Facilitating Partners objectives (see **Appendix A**).

Other key departmental documents that should inform your CSP include:

- Families and Children Program Guidelines Overview
- <u>Communities for Children Facilitating Partner Operational Guidelines</u>
- Your Communities for Children Facilitating Partners Grant Agreement
- Families and Children Access Strategy Guidelines

The Australian Institute of Family Studies (AIFS) <u>Families and Children Expert Panel Project</u> website provides a range of resources and supports that you may find useful should you require further guidance when undertaking your strategic planning processes.

The CSP must be developed in conjunction with your Communities for Children Committee and signed by an authorising officer in your organisation before is it submitted to your Funding Arrangement Manager for review.

Please note that CSPs may be submitted at any time prior to the submission deadline.

Indicative word limits have been applied to the template, however additional content may be provided as attachments.

Please contact your Funding Arrangement Manager in the first instance if you need assistance developing your CSP or you have concerns about meeting the 1 April 2022 submission deadline.

1. Communities for Children Facilitating Partner's Details

This section must be completed and signed before it is submitted to your Funding Arrangement Manager for review.

Facilitating Partner Details

Service Area Name	Raymond Terrace and Karuah
FP Name	The Smith Family
FP Contact Name	Natasha Reece
FP Contact Title	Project Manager – Communities for Children Raymond Terrace - Karuah
Address	Suite 5, 161 Maitland Rd, Mayfield PO Box 5, Mayfield
State/Territory and Postcode	NSW 2304

Community Strategic Plan

Date Communities for Children Committee agreed to Community Strategic Plan	10 December 2021
Name of Facilitating Partner Authorising Officer	Karen Russell National Manager Early Years and Government Programs
Signature of Facilitating Partner Authorising Officer	Karen Russell

DSS Use

Date of Submission to DSS	
Date of DSS approval	
DSS Delegate Name	
DSS Delegate Position	
DSS Delegate Signature	

2. Community Needs Assessment

Outline information about community needs and service provision below:

This Community Strategic Plan (CSP) is inclusive of Raymond Terrace (SA2), Karuah (State Suburb), Tanilba Bay-Lemon Tree Passage (SA2), Tea Gardens-Hawks Nest (SA2) and Salt Ash Public School as per the Service Agreement between The Department of Social Services and The Smith Family as Facilitating Partner. See

Appendix 1 for a map used to demonstrate the locations within the Communities for Children Raymond Terrace and Karuah (CfC RTK) Service Area. Seaham-Woodville (SA2) in the Service Agreement were not determined to demonstrate significant needs relative to the above areas across a range of indicators. However, Karuah (State Suburb) and Salt Ash Public School are discreet areas within Medowie-Williamtown (SA2) that showed significant need.

In preparing this Community Strategic Plan, CfC RTK undertook extensive community strengths and needs analysis through systems mapping, strength and asset mapping, population level data collection and community consultations. The process was governed by our *Communities for Children Committee* (CCC) and subgroup *CSP Steering Committee*.

The key outcomes from the 'Outcomes Framework for the Family and Children Activity' that CfC RTK will be looking to address include:

- Children and young people thrive;
- Adults are empowered;
- Family relationships flourish; and
- Communities are cohesive.

CfC FP has identified needs through data analysis and consultation with service providers and citizens which have been described below.

Children being safe at home and in the community

NSW BOCSAR (2021) data indicates that children in Raymond Terrace¹ are 3.2 times more likely than the NSW average to be the victim of a sexual offence. Research into child abuse indicates that statistically it is most likely that perpetrators are known to the victim and their family (AIFS, 2014). In addition, domestic assault is 2.3 times more likely to be reported in Raymond Terrace and 2.7 times more likely to be reported in Tanilba Bay than the NSW average (BOCSAR, 2021). A large number of sexual and domestic crimes go unreported due to the shame and sensitivity that may occur with these crimes, therefore it is likely the reality is that this is even more prominent than shown in BOCSAR statistics. In consultation children and young people identified that they feel safe at home, with friends and family and in some community places such as schools and sports clubs.

Being safe at home and in the community may also refer to having access to material basics. CfC RTK used a calculation that shows what is left for 'median' families a week after rent and food (using the **VHFB**²). It shows that families are left with a small amount for

¹ Raymond Terrace has the main Police Station and often crimes that occur across the entire CfC service area are reported or transferred through Raymond Terrace.

² Victorian Healthy Food Basket (**VHFB**) is a tool developed by Monash University to monitor the. affordability, availability and accessibility of a healthy diet. The healthy food basket is made up of a variety of 44 common household groceries to meet the nutritional requirements of four family types.

utilities, education, medical costs and similar, e.g in Karuah, this amount is \$142.75 (Appendix 2). Homelessness and food insecurity has become more prominent in the CfC service area due to rising living costs and stagnant incomes. This has led to an increasing population in the CfC RTK service area living in transient conditions e.g. in cars, tents, motels or couch surfing. These living conditions have a wide range of impacts on child and family wellbeing.

Department of Communities and Justice addresses child abuse and neglect through their Child Protection and Joint Investigation Response Team working with NSW Police. Port Stephens Family and Child Services (PSFANS) and Warlga Ngurra Women and Children services helps families to access emergency support and safety planning for women and children leaving domestic violence and provides programs such as 'Staying at Home, Leaving Violence' and 'Specialist Homeless Support' to address homelessness and domestic and family violence. The need outweighs the availability of services such as the above, and an identified gap includes a better early intervention/prevention response to gender-based violence and access to material basics. Community has also identified the need for local domestic and family violence emergency support for women and children, who are predominantly the victims of DFV. Currently in emergency situations these women and children would need to travel large distances to access this type of support.

Child development and engagement with education

The Australian Early Development Census (AEDC) identified that across the CfC service area 23% of children are vulnerable on one or more domains and 13% are vulnerable on two or more domains (AEDC, 2018). The locations that have the most children 'at risk' or 'vulnerable' across the five domains are Raymond Terrace and Tanilba Bay/Mallabula/Lemon Tree Passage³. Communication and General Knowledge and Physical Health and Wellbeing are the domains that may require the most support. Early Educators and Community Health Staff are concerned about children's speech, motor skills and social development since experiencing COVID-19, which created barriers to socialising and using public spaces as well as an increase in screen-time. 51% of families reported watching TV and movies more often than before COVID-19 (AIFS, 2021). Early Educators are also worried about the effects of ongoing inadequate nutritional intake on the development of children and see that barriers to adequate nutrition could be based in economic disadvantage or lack of parental knowledge and skill.

The Smith Family 'Attendance lifts Achievement' Report is a longitudinal study that shows that greater attendance at school leads to more positive results in school achievement, as well as post school engagement with work or study (The Smith Family, 2019). 58% of primary school students in the CfC service area attended school more than 90% of the time in 2019 (MySchool, 2021). Subsequently, attendance in traditional face to face school and early education has been impacted significantly over the past 2 years due to COVID-19, with the average student missing out on approximately 8 months of traditional schooling. Schools have been proactive to support engagement in at home learning by loaning electronic devices and ensuring paper packs are available to minimise barriers of digital exclusion. The

³ Note: that AEDC data for Karuah and Salt Ash Public Schools is not available and has been amalgamated with 'Medowie and surrounds' for data privacy reasons which also skews data for our purposes.

longer lasting social and economic impacts of COVID-19 could continue to impact children and family engagement with education and overall wellbeing outcomes (See Appendix 5).

Existing services such as Save the Children and KU Children's Services are taking a multidisciplinary, whole of family approach to identify early signs of developmental delay in children and support parents to recognise and address these at home and/or access the appropriate supports through referrals.

Parent skills and education

Educational attainment of parents is low, three out of ten adults in the CfC RTK service population have completed year 12 (ABS, 2016) and access to further study or education is difficult due to distances required to travel. In all CfC service locations, males are more likely to have accessed post-school study by up to 1.5 times (ABS,2016). 55% of the adult population in the CfC RTK service area have completed post-school study and a further 8% are currently in study. Young people in consultation highlighted that they would like there to be better local post-school opportunities for them e.g. training, scholarships and jobs.

In consultation responses to questions relating to *"what do you need more/better of?"* support with parenting skills and education was the most mentioned theme at 23 times (Appendix 3). Service providers also noted that parents and parenting capacity had a significant direct impact on children's wellbeing. Education and health service providers identified concern about the quality of information that parents are accessing to support their parenting. The concern is that there is a vast array of misinformation regarding health and development on the internet which can negatively impact a parent's capacity to access timely and evidence-informed support for their children.

Currently there are services through Save the Children, KU Children's Services, PSFANS, Thou Walla and Benevolent Society that provide soft entry parenting support and skills education in the early years through supported playgroups in some locations. Other services such as Interrelate, Family Action Centre and PSFANS provide direct parent skills and education support.

Parents on average surveyed at 3.4 out of 5 against "How confident do you feel accessing the support that you need for you and your family?" and 3.9 out of 5 against "How well do you understand the developmental needs of your children?". This suggests that most parents have a reasonably high level of confidence and understanding that can be leveraged to provide extra support.

Access to and navigation of appropriate services and child friendly spaces

Consultation with professionals and community members highlighted that there are many external barriers that make accessing required wellbeing, health, development and social services difficult. Appendix 3 demonstrates that in consultation better access to services was the second greatest need expressed by community.

Long waiting lists, physical isolation, lack of infrastructure and lack of adequate transport makes accessing speech and language services, NDIS, mental health support, physical health support and crisis support difficult. Through completing systems mapping (Appendix 4) it is evident that the service system is complicated and the pathways between services sometimes don't work as they should. Community responses in consultation also indicated that better access to child and family friendly spaces such as recreation spaces that cater to all ages, organised extracurricular activities and family events would boost overall child and family wellbeing. Empowering the community with good quality parenting information and when, where and how to access support services will improve navigation of the service sector and thus improve child and family outcomes.

There are currently service networks such as Port Stephens Child and Family Network, Karuah Interagency, and Port Stephens Interagency that exist to connect service providers with one another. Enhancing these networks to promote service cohesion and collaboration will hopefully support the way community members are able to access and navigate services, supporting an early intervention/prevention approach to child and family wellbeing.

COVID-19: COVID-19 is an emergent need that CfC FP will need to be proactive in addressing. This is a situation/event that is continuing to unfold in this community and policy is continuously changing. However, we do know that the socio-emotional and economic impacts of COVID-19 will be evident in the CfC service area for years to come. Appendix 5 shows a diagram that demonstrates the 'Four waves of the COVID-19 pandemic'. The 4th wave describes that mental health and trauma impacts, economic impacts and 'burnout' as related to COVID-19 will continue to exist in our community, longer than the pandemic itself. 26% of parents/carers who responded to a consultation survey indicated that COVID-19 led to increased stress, worry and anxiety in their family and household. Appendix 5 also shows a graph that demonstrates household impacts of COVID-19 that were found in consultation. These will have long term implications towards child and family wellbeing.

Strengths, assets and opportunities: This community demonstrated a tremendous amount of **resilience** in consultation responses. Community members were asked to give feedback on their family lives during one of the hardest community-wide COVID-19 lockdowns. Through the shared trauma that comes with that, respondents were able to reflect authentically on strengths in the community. This community is also guite vulnerable to the elements, regularly being affected by flooding and bushfires and other natural disasters. During these times the community spirit is high and supportive. A strength that came up in CfC asset mapping and community consultation is the **natural environment**; the CfC service area is a place with beautiful pristine beaches and waterways, bushland, wildlife and sand dunes. One parent told us that she loved where she lived for the connection to the beautiful natural environment, but she didn't want that to mean that her child missed out on opportunities that could be easily accessed in more urban towns. This community is proud in community and culture. Community members told us that most people who grow up here choose to stay (or return) to raise their own children. Aboriginal people are proud in culture. There are many Aboriginal Controlled Organisations and Community Leaders that promote inclusion and access for Aboriginal people in the CfC service area. There is an ageing population in the CfC RTK service area, particularly in areas such as Tea Gardens -Hawks Nest, which has the oldest average population in NSW. Across all CfC service areas, an opportunity to harness intergenerational relationships to enhance community connection and cohesiveness was identified.

Current service and service gaps

There are a number of gaps which CfC RTK will seek to address in this Community Strategic Plan;

Education and skill building for expectant and new parents; Time in utero and the earliest years of a child's life is formed by their parents/caregivers choices and environment and can have significant impacts on future outcomes for children (CCCH, 2017). In the CfC service area there are a number soft-entry parent education and skill building supports that are available across the community. There is an identified gap in parenting education and skill building available for expectant and new parents of children 0-2 years. In Australia, up to 1 in 7 new mothers and 1 in 10 new fathers experience Postnatal Anxiety and Depression. It can be estimated that due to systemic stressors such as lack of social support and high levels of financial and relationship stress this figure would be higher in the CfC RTK service area (PANDA, 2021). Adequate support and connection for new and expectant parents may be addressed through programmatic response and enhanced service sector collaboration. NSW Health Maternal, Child and Family Health programs will be a key partner in an approach that targets new and expectant parents.

Whole of family support; Traditionally mothers or female caregivers access parent and child services with their children, in CfC RTK females (including children) attend Community Partner activities twice as often as males. Mothers and female caregivers made up 95% of responses to community consultations. There is a felt need in the community for spaces that are for whole of family or that specifically target dads, grandparent carers or other caregivers. Single dads make up 20% of single parents in the CfC service area. Families are also increasingly in intergenerational living situations, so to improve wellbeing outcomes for children, a whole of family approach should be taken. CfC RTK hopes to address this gap through programmatic response and building service sector capacity and collaboration around this gap. The University of Newcastle is completing extensive research about how to engage fathers and male caregivers in parenting support activities. The Rivergum Grandparents as carers is a peer support group for grandparents who are carers of their grandchildren, this group expressed the need for more community support.

Service Sector Cohesion, Coordination and Collaboration; in CfC RTK service area, there are some infrastructural barriers to accessing services including long waitlists and long distances to travel, however, some barriers are more systemic such as lack of collaboration, cohesion and coordination of services including the difficulty in navigating pathways between services. In regional communities such as the CfC RTK service area services are often provided through outreach or via regional centres and this can be difficult for a community member to navigate. There are a number of interagency meetings in the region to support networking and connection between services, however, there is a need to facilitate a culture within local networks that aims to work together to improve outcomes for children and families and turn the curve on some of the key local complex social issues. In the Karuah Interagency we aim for a 'no wrong door' approach to service provision to reduce barriers to accessing service and so that community members can be moved through pathways of service as required.

3. Community Engagement

Outline your community engagement strategy below.

Community engagement exists on a continuum and in CfC RTK we aim to work in the involve – collaborate – empower domains (Appendix 7).

Community Strategic Planning: To complete this CSP, CfC RTK consulted with 189 community members and service providers. 25% of consultations were with Aboriginal and Torres Strait Islander people, 46 people were service providers, 20 were young people and 9 were dads or male carers. The main approaches that were taken include online surveys, 1:1 telephone interviews and community forums on zoom. Due to COVID-19 lockdown restrictions during this consultation process CfC FP looked to social media and leveraged relationships with Community Partners and other service providers to capture as many local voices as possible using telepractice engagement approaches. \$25 gift cards were given to parents/carers who participated in interviews to acknowledge and thank them for their time and sharing their context expertise⁴. A Child Participation Facilitation Pack was created to be implemented in preschools and other early childhood settings that was unable to be implemented due to constraints in time and resourcing particularly due to COVID-19. CfC RTK will look to use this resource again in the near future and ensure that plenty of time and support is given to implement these consultations.

CCC, Community Partner Forum and Children's Committee: CfC RTK has many regular opportunities to invite participation of service providers and community members through formal pathways such as the CCC and Community Partner Forums. Early in 2022 we will look to establish a 'Children's Committee' to build up civic participation, leadership and community ownership of children and young people.

Telepractice and Social Media Listening and Engagement: Continuing to be active on social media for engagement purposes will be an important aspect of keeping in touch with the local context, especially through times of uncertainty or when people aren't able to meet face to face (Tamarack Institute, 2017). In CfC RTK parents are highly active on social media through community noticeboard pages and similar. Continuing engagement in this way will continue existing engagement as well as engage with new people.

Community Engagement			
WHO	WHY	HOW	
Children and Young People	The United Nations Convention on the Rights of the Child clearly identifies that decisions being made about children should involve them (Articles 3,12 &13). In CfC RTK, it is important to us that children and young people have many opportunities to participate in civic life and are involved in decision making in	Childrens Committee Leveraging relationships with partners and service providers working with children and young people. Child Participation and Engagement Tool	

⁴ Context Expertise; refers to knowledge held by someone who is a resident of a place.

	our community.	Photo Voice		
		Community events		
Parents and Carers of Children 0- 12years	Parents and carers of children 0-12 years have deep insights to share about their lived experience. The ongoing involvement with parents and carers with lived experience will support CfC RTK to keep in touch with community strengths and needs and to try, test and learn from community ideas.	Leveraging relationships with partners and service providers working with parents/carers. Social media listening and engagement (Tamarack Institute, 2017) Surveys		
	The approach that we tend to take is to	Photo Voice		
	meet people where they are at by going into places of service, public locations and social media.	Community Events		
	CfC FP will continue to work on engagement strategies specifically to target dads/male caregivers and grandparents.			
Aboriginal and Torres Strait	Aboriginal and Torres Strait Islander people make up 7% of the population	Regular attendance at meetings Authentic Partnerships Deep Collaboration		
Islander parents/carers,	in the CfC RTK service area. Engaging with Aboriginal Controlled Organisations and community leaders			
children and				
community leaders; e.g.	will support self-determination of local Aboriginal parents/carers and children.	Relationships		
Local Aboriginal Land Councils,	CfC RTK aims to work in a culturally safe way and follows SNAICC's	Surveys		
Aboriginal Education		Photo Voice		
Consultative Group etc.	<u>'Creating Change through Partnership'</u> approach.	Community Events		
	Service Sector Engagement			
WHO	WHY	HOW		
Port Stephens Child and Family Network	Port Stephens Child and Family Network is the largest network dedicated to child and family services in Port Stephens.	Regular attendance at meetings Providing leadership and influence		

Karuah Interagency	Karuah Interagency is a service network specifically to support service sector cohesion and capacity building for service providers in Karuah. There is a broad range of membership.	CfC is the facilitator of this meeting so provides leadership and guidance Regular hosting of meetings (i.e. minimum 4 per year)		
Port Stephens Council	Port Stephens Council has an important role in community through the Community Engagement Team including their leadership of the Tilligerry Connect network and Port Stephens Interagency.	Regular attendance at meetings		
	The Community Engagement team are working on creating strategic plans specific to each location within the LGA, so CfC has been interested in what they have been hearing from community members and how we can support this.			
	The Tilligerry Connect network started in response to community activation during COVID-19 in 2020 and service providers began to meet to better understand the services available to community and what else was needed.			
Department of Education	School is a universal service. Because most children attend or are enrolled at school, Principals and school staff have a good idea of the trends in what is happening locally for children and families.	School Principal's Forum Regular meetings CCC		
Department of Communities and Justice	Commissioning and Planning Officers are engaged with community services and have extensive knowledge of the services that are available to disadvantaged children and families. Department of Communities and Justice often works with the most vulnerable people in our community.	Regular meetings		

4. Service Area Vision

CfC RTK asked community members in consultation to reflect on the vision for 2015-2019 and answer if it still resonated with them. 45% of respondents said 'no' that the previous vision no longer resonated with them, and others who answered 'yes', said that it was a great vision, but it felt unattainable due to the limited opportunities that they felt were afforded to them. Our new vision for 2021-2026 is:

"This is a strong community that values and supports all children and families to grow and thrive"

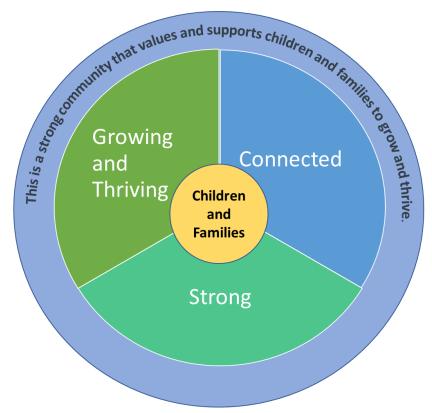
This vision was designed to reflect current community strengths and aspirations and honours that children and families are important members of the community that should be supported to succeed. We asked parents and carers to 'Imagine that all the children in your community had a good sense of wellbeing. What do you notice? What does the community look like?'. The themes that emerged are:

- The wider community is inclusive and all children, young people and families
- Children and families have a positive sense of belonging and connection to others
- Children and families have access to opportunities and supports they need to succeed in life

An option of three visions that reflect the above themes were given to CCC, CSP Steering Committee, service providers and community members and this was voted the most preferred vision.

In CfC RTK we refer to a holistic view of child and family wellbeing and the intention is that this vision captures this, as well as acknowledges the role that the community plays in shaping overall child and family wellbeing.

An infographic was designed to demonstrate how the vision and priorities interact with children and families:



5. Priority Areas

Drawing on the Community Needs Assessment and Community Engagement strategy, in this section, describe the priority areas that you need to focus on to achieve your vision.

Priority Areas are the areas that the community wants you to focus on. The priority area may be a particular target group (e.g. young parents), a service gap (e.g. parent education), or systemic issue (e.g. adult services being disconnected from children's services; low rates of literacy).

Priority Area One: Growing and Thriving

Growing and Thriving relates to children being safe at home and in the community; ageappropriate child development, access to quality early learning, positive school transition and engagement; and child and youth participation.

This is a priority area for CfC RTK given the importance of personal and community safety for children and families as evidenced by data on NSW Crime Tool BOCSAR (2021) and access to material basics such as housing and food security as highlighted in Appendix 2. Additionally, 9-10% of children attending schools in CfC RTK service area are in out of home care or kinship care arrangements. According to the ABS Census 2016, in the CfC service area 35% of preschool aged children attended preschool. Universal access to quality early childhood services can improve children's development and school readiness, as well as broader community level educational, social and economic outcomes. Educationally, the AEDC (2016) indicates that 23% of children in CfC RTK service area are vulnerable on one or more domains of early childhood development. The domains with the highest level of 'at risk' and 'vulnerable' children are 'Communication and General Knowledge', 'Physical Health and Wellbeing' and 'Social Competence'. Consultations showed that families value early education and those who currently access early childhood services see it as important for their family. In Term 3-4 2019 58% of Primary School aged children across the CfC service area attended school more than 90% of the time. The longitudinal 'Attendance lifts Achievement' report by The Smith Family highlights that school attendance directly affects students' educational outcomes and post-school engagement in work or study. Attendance in traditional face-to-face schooling has been disrupted by COVID-19 lockdowns and while schools say that engagement in home learning was good there is evidence to show that there are anticipated ongoing educational and social repercussions for children and young people.

Outcomes and objectives

Outcomes Framework Families and Children Activity: Children and Young People Thrive; Safe at home and in the community; Greater participation in decision-making; Optimal health and development; Positive engagement in education and training. Adults are empowered; Safe at home and in the community. Family relationships flourish; positive caregiver-child relationship; respectful relationships; Good conflict management. Communities are Cohesive: All community members are able to participate in decision making.

CfC FP Objectives: To improve the health and well-being of families and the

development of young children, from before birth through to age 12 years, paying special attention to: Early learning — provide access to high quality early learning opportunities in the years before school; provide early identification and support for children at risk of developmental and behavioural problems; assist parents with ways they can stimulate and promote child development and learning from birth; and School transition and engagement - support children and families to make a smooth transition to school and work with local schools to assist children and families with their ongoing engagement with school.

Strategies to achieve improved outcomes:

Funded direct service delivery by investing in activities that:

- Promotes protective behaviours and respectful relationship building in children and young people
- Use evidence-informed practices to improve age-appropriate child development and engagement in formal education settings
- Encourages positive caregiver-child relationships
- Supports a whole of family approach to growing up children
- Uses trauma informed and person-centred practice
- Provides authentic opportunities for children and young people to participate in decision making.

Facilitating Partner activities:

- Building capacity in professionals and the sector to recognise and respond appropriately to Domestic and Family Violence, housing insecurity and food insecurity.
- Sector and professional capacity building in 'The First 1000 days' and 'Thrive by Five' initiatives and;
- Building networks that work cohesively to address safety at home and in the community.

Relevant community assets, resources, strengths:

- Natural environment
- Existing education settings

Outcomes Measurement: Client outcomes measured through observation and surveys (pre and post service) as per DSS data collection; BOCSAR, ABS, AEDC and other education data at appropriate scales will measure contribution to change over time.

Key Stakeholders:

- Children aged 0-5 and their families; Children 0-12 and their families
- Aboriginal organisations and services
- Preschools, schools and child and family services
- Hunter New England Health (NSW Department of Health)
- NSW Department of Education (preschools and primary schools)
- NSW Department of Communities and Justice

Priority Area Two: Strong

Strong refers to supporting child and family physical and mental health; positive and respectful relationships; connection to culture and parent education and skill building.

Our community has experienced a collective trauma through in the COVID-19 pandemic and related lockdowns. In consultation 26% of parent/carer responses mentioned increased stress, worry and anxiety in their family due to COVID-19, and pre-COVID in 2019 45% of people in the Hunter New England Health District reported feeling medium to very high levels of psychological distress. Parents/carers highlighted that evidence-based mental health strategies such as counsellors and psychologists, mindfulness and yoga and physical health services were all difficult to access due to barriers in cost, travel and availability in the region. Service providers and parents told CfC FP that children's mental health is often directly related to their parents/carers mental health and that many children and young people have also had increased anxiety, stress and worry due to COVID-19.

In CfC RTK service area the prominent conversations about physical health are related to food security; which refers to the access, availability and utilisation of quality, nutritious and culturally appropriate food. A food security audit project from the Family Action Centre at the University of Newcastle found that families receiving government income supplements would be spending between 26.75% and 36.89% of their entire weekly income on food. In addition, just 4.5% of children aged 2-5 have an adequate daily intake of vegetables and 65% have an adequate daily intake of fruit.

CfC RTK acknowledges the cultural determinants of health described by the Lowitja Institute as culture, health and wellbeing, and that these are important to Aboriginal and Torres Strait Islander people. Cultural determinants of health are rooted in human rights-based approaches. CfC strongly believes in these principles and frameworks of knowing and being should be embedded in all the ways that we work with families, and that this should be as a result of strong, self-determined and Aboriginal community-led processes. CfC acknowledges the strong connection to land, sky, waterways and culture that Aboriginal people on Worimi country, and that Aboriginal controlled organisations and community leaders are best placed to guide. CfC RTK aims to take an 'empowerment' approach in working with Aboriginal people and organisations (Appendix 7).

In CfC RTK service population parents and carers have a strong voice that they would like more support with parent education and skill building. This relates both directly to parenting and family relationships as well as employment skills and post-school education. Service providers also noted that there is a gap for many parents in their parenting knowledge and skills relating to attachment, safety, mindfulness and managing difficult behaviours.

Outcomes and Objectives:

Outcomes Framework Families and Children Activity: **Children and young people thrive;** Positive mental health and wellbeing; Increased resilience; Strong connection to culture. **Adults are empowered;** Positive Mental Health and wellbeing; Increased resilience; Strong connection to culture; Greater participation in decision making; Improved self-efficacy and confidence. **Family relationships flourish**; positive parenting/caregiver practices; positive caregiverchild relationships; good communication; good conflict management.

CfC FP Objectives: To improve the health and well-being of families and the development of young children, from before birth through to age 12 years, paying special attention to: Healthy young families — supporting parents to care for their children before and after birth and throughout the early years; Supporting families and parents — support for parents to provide children with secure attachment, consistent discipline and quality environments that are stable, positive, stimulating, safe and secure;

Strategies to achieve improved outcomes:

Funded direct service delivery by investing in activities that:

- Favour early intervention approaches to improving wellbeing outcomes for children that prioritise knowledge and skill building in new and expecting parents
- Build capacity of parents to recognise and respond to developmental delays
- Promotes positive family relationships between caregivers and caregivers and children
- Encourages a whole of family approach to capacity building and is inclusive of all parents and caregivers including fathers/male caregivers and grandparents
- Supports strong connection to culture through connection to country, language, traditions and healing
- Includes parents/caregivers and children in decision making
- Builds skills in good communication, emotional regulation and conflict management.

Facilitating Partner activities:

- Provided opportunities for professional and sector capacity building in human-centred practices, evidence-based parenting programs and whole of family approaches.
- Building sector networks and responses to parent/caregiver support
- Provides access to evidence-based parenting information on Facebook Page

Relevant assets, resources, strengths:

- Parents love and care for their children the best way they know how, and want good future outcomes for them
- High levels of parental confidence in accessing support and knowledge of developmental needs
- Intergenerational households and families

Outcomes Measurement: Client outcomes measured through observation and surveys (pre and post service) as per DSS data collection; NSW Health Stats at appropriate scales may measure contribution to change over time.

Key Stakeholders:

- Children aged 0-5 and their families; Children 0-12 and their families
- Parents of children 0-12 and their families
- Aboriginal organisations and services
- Preschools, schools and child and family services
- Hunter New England Health (NSW Department of Health)
- NSW Department of Communities and Justice

Priority Area Three: Connected

Connected refers to good access to services, opportunities, promotion of inclusion, diversity and belonging in community. Children and families are connected with each other, intergenerational connections; and child friendly communities.

In a survey of parents/carers that asked *'where do you go when you need help"* it was identified that they primarily rely on family and friends when they need help. This provides an important insight into the way this community functions in terms of help-seeking and pathways to services. In CfC RTK this priority acknowledges that empowering the community with good quality parenting information especially how to access quality support services will improve navigation of the service sector and thus improve child and family outcomes. There is a role here for services to play in sector cohesion and collaboration and supporting of intergenerational relationships.

Many families CfC FP heard from live with developmental delays, disability or neurodiversity and those families in particular talked about the social isolation that they experience due to public spaces and services not being inclusive. Parents/carers also talked about barriers and difficulties in getting diagnoses for children before school, despite early recognition and support seeking due to long waitlists for relevant practitioners. Getting early intervention, particularly before starting school can improve a child's long term social, emotional, educational and physical outcomes (Raising Children Network).

Parents/carers and young people feel that in CfC RTK service area they miss out on opportunities relating to post-school options, allied and specialist health, and options of service providers due to the lack of availability, their location and barriers to travelling. Parents and carers told CfC FP that access and inclusion for all people in the community is their right and that the *"community should invest more in children and younger people"*⁵. This refers to a whole of community approach to enhancing identity, belonging and access.

Outcomes and Objectives:

Outcomes Framework Families and Children Activity: **Communities are cohesive;** Communities are safe; Communities are inclusive; communities understand issues facing children, youth and families; all community members are able to participate in decision making; services are accessible, appropriate and inclusive; services work together to support families; services have the capacity to respond to children's and families' needs. **Children and young people thrive** and **Adults are empowered**; strong connections to social supports and the community.

CfC FP Objectives: To create strong child-friendly communities that understand the importance of children and apply this capacity to maximise the health, well-being and early development of young children at the local level.

Strategies to achieve improved outcomes:

Facilitating Partner Activities:

⁵ Direct quote from parent/carer consultations

- Create platforms for ongoing authentic parent/carer and child participation through Children's Committee and Parents Forum.
- Enhance service sector cohesion, coordination and collaboration through networks and promote a collective impact approach.
- Sector and professional capacity building in the social model of disability and other inclusion practices

Funded direct service delivery by investing in activities that:

- Take a multi-generational approach to community cohesion and service delivery
- Prioritise ongoing professional learning, network membership and service collaboration
- Promote self-determination of Aboriginal and Torres Strait Islander people
- Are proficient in making warm referrals and service mapping

Relevant assets, resources, strengths

- Ageing population and opportunities for intergenerational activities
- Existing service networks that can be leveraged
- There is existing desire and willingness in the community to help others and a sense of community pride

Outcomes Measurement: Client outcomes measured through observation and surveys (pre and post service) as per DSS data collection; FP engagement surveys and Local Government measures at appropriate levels may also be useful to track change in relevant measures over time.

Key Stakeholders:

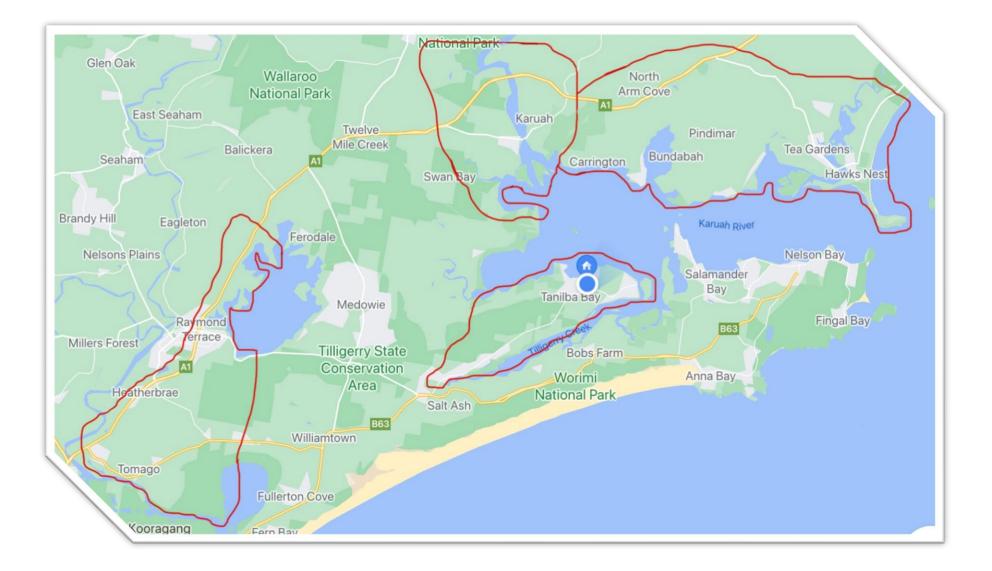
- Children aged 0-5 and their families; Children 0-12 and their families
- Parents of children 0-12 and their families
- Aboriginal organisations and services
- Preschools, schools and child and family services
- NSW Department of Communities and Justice
- Local Government i.e. Port Stephens Council and Mid-Coast Council

6. Key Stakeholders

In this section, you will provide details of key stakeholders, collective networks, partnerships or initiatives that will need to be engaged to support the implementation of the CSP.

Stakeholder	How the stakeholder will be involved		
Children and Young People	Service Users, Consultation, Childrens Committee		
Parents and Carers with Children 0-12years	Service Users, consultation, parent forum		
Aboriginal and Torres Strait Islander parents and community leaders	Service Users, consultation, parent forum		
Child and Family Services	Networking, partnerships, consultation		
TAFE and Universities	Networking, partnerships, consultation		
Early learning services and preschools	Partnerships in service delivery, consultation, sector capacity building		
Department of Education; Preschools and Schools	Partnerships in service delivery, consultation, sector capacity building		
Department of Communities and Justice:	Partnerships in service delivery, consultation, sector capacity building		
Port Stephens Council:	Partnerships in service delivery, consultation, sector capacity building		

Appendix 1. CfC RTK Service Area Map

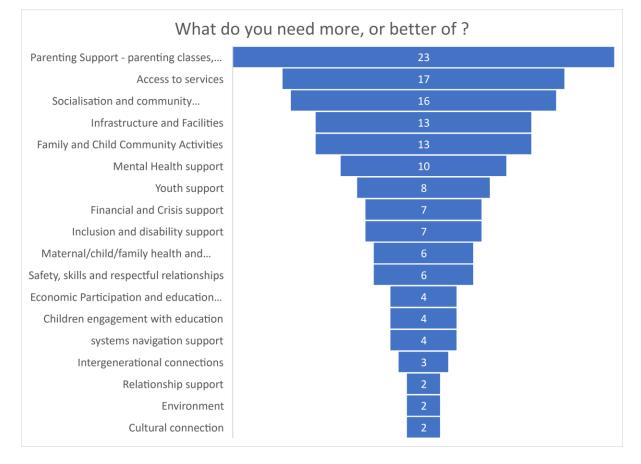


Appendix 2. What are 'median' families left with?⁶

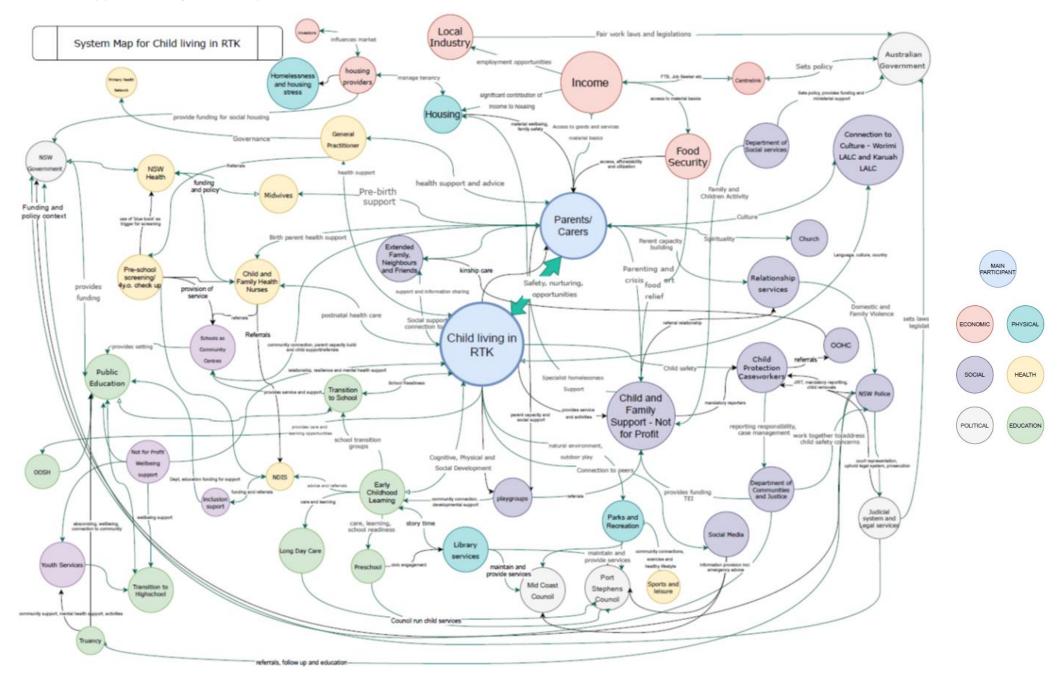
=	Raymond Terrace	Karuah	Tanilba Bay/ Lemon Tree Passage	Tea Gardens/ Hawks Nest	Salt Ash
Weekly median income– Weekly Rent – Cost of a Family Food Basket =	\$485.85	\$142.75	\$304.77	\$221.77	\$655.77

⁶ ABS Census (2016) Median Weekly Income per location – VHFB for closest grocery store – Median Weekly Rent for Port Stephens.

Appendix 3. What do you need more or better of?

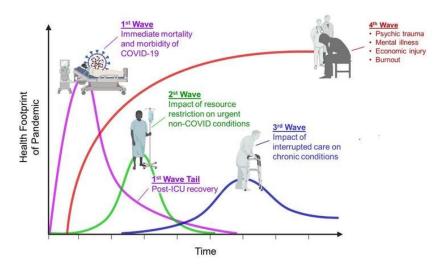


Appendix 4. Systems Map

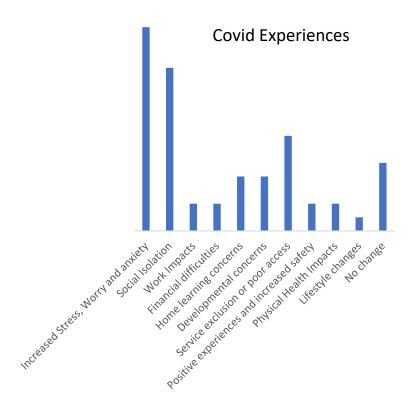


Appendix 5. COVID-19 Charts

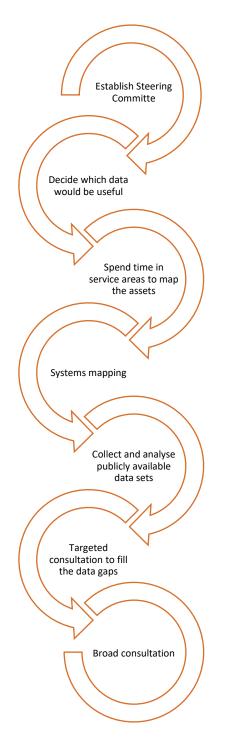
Health Footprint of Pandemic (Victor Tseng)

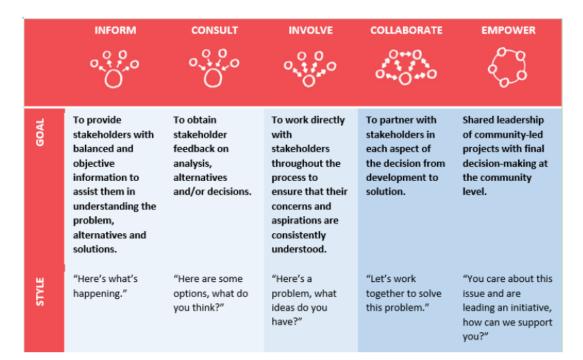


Results 'How has COVID-19 affected your family?" CfC Survey 2021



Appendix 6: Consultation Process





COMMUNITY ENGAGEMENT CONTINUUM

Adapted from the IAP2 Public Participation Spectrum