Families and Communities Programme Communities for Children Facilitating Partner BANKSTOWN Community Strategic Plan

The Communities for Children Facilitating Partners (FP) Sub-activity

FPs are place-based and develop and facilitate a whole of community approach to support and enhance early childhood development and wellbeing for children from before birth to 12 years. FPs build on local strengths to meet local community needs and create capability within local service systems, using strong evidence of what works in early intervention and prevention as identified by the Families and Children Expert Panel. They collaborate with other organisations to provide a holistic service system for children and families. FPs fund other organisations (known as Community Partners) to provide services including parenting support, group peer support, case management, home visiting services and other supports to promote child wellbeing.

The Community Strategic Plan

The Community Strategic Plan (the Plan) supports FPs to set out a vision for their service area. It identifies the key needs and service gaps in the community, develops ways to better coordinate and collaborate and outlines priority areas and strategies to address need and improve outcomes for children and families.

The Plan should build on the extensive knowledge that FPs and their Committees have gained in working with their communities, often over long periods of time. This new Community Strategic Plan presents an opportunity to critically reflect on what is changing and what continues to be the strengths and challenges for your local community.

The Plan also reflects the Australian Government's commitment to civil society and an acknowledgement that it is only through everyone in a community working together that true change in outcomes and trajectories can be achieved. This includes governments, non-government organisations, academia, business and community members.

The Community Strategic Plan should be developed with the aim of achieving the Families and Children Activity Outcomes and the Communities for Children FP objectives. The objectives of the Communities for Children FP are outlined below, including the new objective around school transition and engagement.

- 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;
 - 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.
- 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.

Community Strategic Plan Guidance

All Facilitating Partners are required to provide a Community Strategic Plan by **1 April 2015** for each Service Area and will cover the period to 1 July 2019.

The Plan includes the following sections:

- 1. Communities for Children Facilitating Partner's Details
- 2. Community Informed Service Mapping
- 3. Community Engagement
- 4. Service Area Vision
- 5. Priority Areas

When developing your Plan, you should consider the following documents:

- Families and Children Guidelines Overview
- Communities for Children FP Operational Guidelines
- Your Families and Communities Programme Grant Agreement, especially Item B
- Families and Children Performance Framework
- · Families and Children Programme Logic, and
- State, territory and local government policies, plans and services

FPs will likely generate a substantial amount of valuable information as they develop their Plan. However, as part of the Department's commitment to reducing reporting requirements, FPs can limit responses to **one page per section** and **one page per priority area**.

The Plan 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 Grant Agreement Manager for review.

Please contact your Grant Agreement Manager if you need assistance developing your Plan or if you may have difficulty in meeting the due date.

Other useful information resources include:

- Factsheet on the Families and Children Expert Panel
- Factsheet on Collaboration
- Closing the Gap on Indigenous Disadvantage
- Closing the Gap: National Indigenous Reform Agreement
- The Toolkit for Indigenous Service Provision
- The Working and Walking Together handbook prepared by SNAICC
- The Engaging hard-to-reach families and children report by Natasha Cortis, Ilan Katz and Roger Patulny
- The Family Relationship Services Australia (FRSA) What Helps and Hinders, FRSA Linkages and Collaboration Project Report
- Interagency Collaboration by the Australian Institute of Family Studies
- <u>Promising Practice Profiles at the Australian Family Relationships Clearinghouse by</u> the Australian Institute of Family Studies
- Creating Conditions for Collective Impact

1. Communities for Children Facilitating Partner's Details

Facilitating Partner Details

Service Area Name	Bankstown LGA
FP Name	The Smith Family
FP Contact Name	Daphne Drew
FP Contact Title	Project Manager
Address	Suite 22, 1 – 5 Jacobs Street Bankstown
State/Territory and Postcode	NSW, 2200

Community Strategic Plan

Date Communities for Children Committee agreed to Community Strategic Plan	16 March 2015
Name of Facilitating Partner Authorising Officer	Sulabha Pawar National Manager, Government and Community Projects
Signature of Facilitating Partner Authorising Officer	

DSS Use

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

2. Community-Informed Service Mapping

Bankstown Communities for Children Facilitating Partner (CfC FP) site is located in the South West of Sydney and covers an area of 72.86 square kilometres. Bankstown's population stands at 196,574 as of 30 June 2013 (ABS Census 2013). A culturally diverse community, 55% of residents speak a language other than English at home. Aboriginal and Torres Strait Islanders represent a small component of the population at 0.8%. In 2011 over 11% of the population either did not speak English well, or were unable to speak English at all (ABS Census 2011). Many families do not meet the access criteria for free English classes funded through AMEP.

Compared with the State and National results, the AEDC data show higher levels of vulnerability in each of the five testing domains with significant increases in the social, physical and communication domains and a 2.4% increase in the number of children identified as vulnerable in two or more domains. The NAPLAN results for 2013 show 80% of students enrolled in the public school system were below the national average with schools in the north of the LGA scoring substantially below the national average. Low levels of education and minimal English skills prevent parents from assisting their children and many families do not have the capacity to pay for tutoring services. Homework clubs are not always available and cannot cater to the demand and differing levels of need.

Economic participation for families in Bankstown is seriously impacted by the unemployment rate. Bankstown has 15 of its 22 suburbs with unemployment rates above that of the State average (5.9%), with Mount Lewis at 15.4% and Villawood an astounding 21.7%. Factors contributing to these high rates include 51% of the population with no formal qualifications and a low (47%) year 12 completion rate (Census data 2011). TAFE outreach services for adult education ceased as at 30 December 2014, as the State Government has brought in changes to the TAFE system. Parents lack confidence and capacity to attend classes centrally located, with many community groups identifying poor knowledge and understanding of the public transport system as a major barrier. Access to childcare is an essential component for many families to enable attendance, however, many courses do not provide childcare and most families cannot pay childcare fees.

Consultations with families and service providers found disadvantaged and vulnerable families with young children do not access early childhood education and care services. This is due to their poor knowledge and understanding of child development and low levels of parenting skills, inability to pay and location/transport challenges. A corresponding impact then occurs on school results as well as causing lags in the identification of children who have additional needs and learning difficulties which, in turn, exacerbates their developmental delay.

Family safety is an issue with family violence rates and breaches of AVO's some 6% above the State average of 44%, according to NSW Regional Police data for domestic and family violence in Bankstown. The NSW Bureau of Crime Statistics (BOSCAR) and Research data show incidences of threatening behaviour and private nuisance in the Bankstown LGA increasing from October 2012 to September 2014, with a two year upward trend of 21.2%. Data from BOSCAR indicate alcohol is not a major factor in family violence statistics in Bankstown. Services offered do not cater for families who wish to remain in-tact nor do they

provide any counselling for the trauma suffered by the children. Consultations with community youth organisations, local school principals and community partners working with juvenile justice have revealed some families traditional parenting techniques support accepted practices of high levels of physical discipline for boys. This has led to aggressive and unacceptable behaviours, culminating in juvenile justice interventions. Preventing this would require considerable whole of family approaches, focussed relationship development and improved parenting knowledge and skills. As such there is a gap in this type of coordinated service delivery approach.

South West Sydney Area Health research has identified poorer health outcomes (children presenting with both health and development concerns), for children in lower socio-economic families, from migrant/refugee backgrounds and disadvantaged Aboriginal and Torres Strait Islander backgrounds. Consultations across the board revealed many families presenting with welfare issues, do not have knowledge of or access to good nutrition and healthy activities, and lack the capacity, including financial and transport capacity, to source and attend available services.

3. Community Engagement

Communities for Children (CfC) Bankstown commenced operation in 2012. CfC Bankstown FP covers the whole of the Bankstown local government area (LGA). The Smith Family as Facilitating Partner has engaged a Committee representative of the local community that has supported the planning and implementation of the initiative. Alongside the Committee, subcommittees and working groups have been formed to support initiatives and strengthen knowledge and processes. Those sub-committees have included an Aboriginal and Torres Strait Islander Advisory Group, a parents' sub-committee and a community partners' subcommittee. Each of these groups supported the extensive research and consultation process undertaken to develop the Bankstown Community Strategic Plan 2015 – 2019.

Consultations with families included surveys, with translation support for Vietnamese, Arabic and Chinese families and small group discussions at a number of venues including neighbourhood centres, schools, a child care service, and community halls. Surveys were returned from 188 parents and 51 children. Group responses and surveys were returned from 20 Non-government organisations (NGOs) and 16 individual interviews were undertaken with Government organisations at all levels, businesses including Woolworths, 5 real estate agents and local NGO's. Community partners undertook working groups over several months focussing on current needs and trends and seeking input from participants. Aboriginal and Torres Strait Islander information was provided through family event, individual interviews with Elders, the CfC Advisory Committee and NGO's working directly with Aboriginal and Torres Strait Islander families.

These groups were engaged to encourage comprehensive representation from the community including ensuring the voices of children and their parents' were heard. Businesses were engaged to broaden the previous CSP and promote the role businesses can play in the process of engaging and supporting vulnerable and disadvantaged families and their children within the CfC community.

A community forum was held where 37 attendees from the local community, representative of all the groups above, were provided with a summary scoping document of primary and secondary data collated to date, and with the assistance of a facilitator identified priority areas upon which the Bankstown CfC will focus over the 2015 – 2019 period.

Greater engagement with parents is envisaged though participation in community events, schools events, and community partner opportunities for children's voices to be heard. Strategies would include forums, group feedback and consultations before and after delivered activities. A continuing and successful strategy, able to encourage increased engagement in activities and experiences for both parents and children, involves sending text messages to parents.

A number of challenges have presented in engaging Committee members. Businesses have proven difficult with many not being able to appreciate how their input can enhance decision making and understanding for the Committee. Business engagement is undertaken to inform the business network of services available to the community, and to gain valuable insight and knowledge of the commercial sector in relation to economic participation for families and the community in general. Parents have been found to be reluctant to attend formal meetings finding smaller informal meetings less confronting and the Aboriginal and

Torres Strait Islander Advisory Committee are focussed on securing a permanent centre for their community (capital funding), which is outside the scope of CfC funding. Ongoing participation with the Aboriginal and Torres Strait community through currently provided services and activities and seeking increased opportunities for interaction is proposed.

Consultations have found environmental changes across the service sector have caused disconnectedness for agencies with some no-longer providing services and others having staff changes, relocations and restructuring to improve their outlook in this complex fiscally challenging time.

To ensure improved and enhanced ongoing engagement, new connections and links developed over the course of the consultation period will be strengthened and others continually sought. CfC FP staff will attend key inter-agency meetings and networks to forge strong relationships with community groups (e.g. Koori Interagency, Canterbury-Bankstown Migrant Services Interagency). Business engagement will be enhanced with attendance at Bankstown Councils Business Networking Breakfasts and presentations to the Australian Arab Business Council.

CfC FP staff will also engage in local School Community Hubs networking, seek to develop stronger relationships through Community Partners and local organisations and also at all levels of Governments actively participating in networks, organised events and local forums.

Attachment A: List of CfC Bankstown CfC Committee Members
Attachment B: CfC Committee Terms of Reference (TOR)

4. Service Area Vision

Bankstown – the community of choice where families are supported in raising happy, healthy resilient children with promising futures.

This vision is a composition of the input provided by families during the surveys undertaken that revealed parents had high levels of aspiration for their children, and the consultation process that culminated in the Community Strategic Forum where ideas for Bankstown's vision were explored.

Parents identified "success" as important for their children alongside a desire for them to lead "better lives". Many parents connected success to schools and teachers and many children also indicated that education was an avenue through which to pursue success, with some considering becoming Doctors and Lawyers. Other children dreamed of becoming artists and or sporting stars in a variety of sporting fields. Happiness was associated with being outside, playing with friends and spending time with family. Many children identified their family members and their teachers as the people who they most looked up to and admired.

Community Groups wanted to see a more connected and responsive Bankstown that supported and assisted parents in their roles in raising their children. Bankstown was to be the preferred place to raise a child.

5. Priority Areas

Priority Area One

Bankstown's children will have improved early childhood development and improved outcomes in primary years through better access to quality learning and care.

This priority area was identified early in the parent surveys and focus group sessions with community organisations. Early childhood services engaged to support community partner delivery of projects have identified a number of developmental concerns with young children. Vulnerable and disadvantaged parents do not access early childhood services for their children as cost, location and their low level of knowledge about the benefits of early childhood services prevent any access. Supported playgroups across the area identified that many children appeared behind in their development with speech and language delay prevalent.

Transition to school becomes a very stressful event for families, their children and the school. The delays encountered in identifying developmental concerns and developing programs to support the children and parents exacerbated developmental delays with speech pathologists working in Not for Profit (NFP) agencies reporting being overwhelmed by the demand. Schools reported frustration at the low engagement levels of families whose children they felt most needed help and support.

SWS Area Health has also identified that families who are lower socio-economically disadvantaged and from migrant or Aboriginal backgrounds often have children who present with health and developmental concerns.

NAPLAN results have been consistently poor over time. Children attending schools in the north were found to be below and significantly below the national average in 80% of the result categories. Parents reported that they were unable to help their children due to poor English and literacy skills. AEDC data also demonstrated that Bankstown had higher rates of vulnerability compared nationally, in all five of the testing domains, and has shown an increase in the number of children presenting as developmentally vulnerable in two or more domains.

Families and Children Activity Outcomes: Improved child wellbeing; Improved family functioning; Stronger family relationships; Increased parental capacity; Improved access to services for vulnerable and disadvantaged families and Improved child adult and family wellbeing.

Communities for Children FP Objectives: To improve the health and wellbeing 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 2. **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:

- 1. Funded Direct Service Delivery including provision of soft entry regular play activities in local venues designed to engage families and improve knowledge of early childhood developmentally appropriate activities, transitions programs delivered for families through partnerships with schools, after school tutoring or enhanced supported homework programs delivered in venues accessible in a number of locations, community awareness programs and regular opportunities for families to access speech and language professionals through place based early childhood activity programs.
- Facilitated Systems Improvement Community awareness programs designed to inform parents and extended families of the benefits of early childhood experiences and activities and early childhood assessments for developmental progression, events and forums, facilitating schools and community sector collaboration broadening/deepening an understanding of community.

Outcomes Measurement:

Early childhood speech and language assessment pre and post programs; professional observational assessments across developmental domains and age/stage appropriate milestones; mathematics/literacy/reading testing pre and post programs and staggered interviews (selective considered questions) with parents and teachers across timelines to measure progression; and quasi design comparative school progress measurement of children transitioning to formal schooling – groups would include children and families who have progressed through an intervention program against others who did not have that benefit and the DSS data collection method S.C.O.R.E.

- 1. Children 0 12 years and their families including extended families
- 2. Schools teachers, Principals and the DET
- 3. School Community Hubs
- 4. NFP's delivering programs
- 5. Professionals early childhood, speech pathologists, paediatrics.
- 6. Government departments and programs NSW Health, FaCS (e.g. Brighter Futures).

Priority Area Two

Bankstown parents, including young parents, will have enhanced knowledge and life skills leading to increased social inclusion, economic participation and stable home environments.

The lack of employment for many families contributes significantly to their levels of poverty and poor family wellbeing outcomes. The latest Government Senate report found poverty to be a major factor in isolation. Consultations with parents and community service providers found poverty was a major contributing barrier to social inclusion. Parents do not have the income levels to socialise and increase their sense of wellbeing and community engagement. In turn this can affect their ability to demonstrate and model positive behaviours and lessen their capacity to positively influence and provide good role models for their children.

Census data (2011) clearly identifies unemployment as a significant issue for Bankstown's population. In 2011 NSW had an unemployment rate of 5.9% which was 0.2% above the rate for Greater Western Sydney. In Bankstown, 15 of 22 suburbs were above this rate with 6 suburbs at or above 10% and of these Mount Lewis rated at 15.4% and Villawood at 21.7%. Suburbs with higher numbers of families with children 0 - 15 including single parent families, tend to also be those suburbs with higher rates of unemployment (Bankstown City, Revesby, Punchbowl, Chester Hill, Yagoona, Greenacre, Bass Hill). Several factors contribute to the unemployment rate including low levels of education; poor knowledge and skills in a number of areas including very poor English skills; poor organisational and financial skills and the inability to attend classes; even for those who do meet the AMEP criteria due to family responsibilities, capacity to pay and utilise transport links, lack of outreach services and a lack of knowledge about what is available, poor literacy skills and no or low recognition for overseas qualifications.

With the current government's planned changes to welfare payments, couples with children will lose 6.6% of their disposable income and single parents will lose 10.8% of their disposable income. This will place increased pressure on family units with NATSEM modelling of the impacts of the Senate Community Affairs Reference Committee Report (Dec 2014) identifying the largest negative impact nationally will be in the suburbs of Mount Lewis and Greenacre. Of the top 10 suburbs listed for the highest negative impact from the government's plans, 7 suburbs are in or part of the Bankstown LGA.

Consultations and surveys indicated that many parents in Bankstown, although keen for their children to live "better lives", had little aspirations of their own. Community groups identified that this combined with a lack of life skills, English, literacy and general knowledge has led to many parents placing enormous pressure on their children to act as interpreters and gobetweens. Community group consultations did reveal some parents had aspirations for themselves, however they were prevented from demonstrating them through a belief that doing so would in some way reduce opportunities for their children. Children identified both teachers and their parents as people they admired. Intervention and prevention opportunities into the current intergenerational cycle of poverty exist through the engagement of parents, so that they may become inspirational role models for their children, and demonstrate

aspirational behaviours, learning and achievement.

Families and Children Activity Outcomes: Increased economic engagement; Improved adult functioning; Improved family functioning; Improved child wellbeing; Improved community functioning; Increased personal agency; and Improved access for vulnerable and disadvantaged families.

Communities for Children 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:

1. **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 Activities examples: Learning activities that help parents improve conversational English, support better literacy, outreach services in local venues within walking distance for families to improve social connections, life skills and self-esteem support, community interest groups and skills programs, parent/carer focussed activities, experiences and events.
- 2. Facilitated Systems Improvement Direct funded, joint funded and non-funded activities;
 - a. Community capacity building training in culturally sensitive practise and empowerment strategies and services that support and strengthen engagement levels of families in programs and social inclusion.
 - b. Community and business awareness programs delivered through events and presentations to the community.
 - c. Community and business engagement supported volunteering programs and work experience opportunities.

Outcomes Measurement:

Pre and post surveys and interviews with participants, assessment and testing of skills within programs, program records of progress towards objectives for participants and acknowledgement of results, consistency in participation/attendance and increased participation rates in volunteering opportunities or apprenticeships/further training or securing employment and DSS S.C.O.R.E. data collection method.

- 1. Parents of children 0 12 years
- 2. Community NFP's delivering community programs and services
- 3. Government organisations and departments including Centrelink, TAFE, DET and Local Government
- 4. Local businesses, business networks and employers

Priority Area Three

Bankstown families will have increased parenting knowledge, understanding and skills leading to improved family functioning, safety, health and wellbeing.

Surveys, forums and community engagement identified a considerable lack of knowledge on behalf of parents in relation to parenting skills, relationship skills, nutritional and health knowledge and understanding. Parenting styles that included highly physical methods of discipline have created young people very vulnerable and susceptible to being targeted into gangs and criminal organisations. With limited services in this area interventions need to occur earlier, to prevent this increasing trend.

Family violence and domestic violence incidences in Bankstown are well above the State levels and over the course of the last four years 2011 – 2014 domestic violence reports have increased at a rate of 8.7% per annum. In Bankstown breaches of AVO's occurred in over 50% of cases against a 44% state average, and increased at a rate of 11.5% annually over the period 2011 – 2014. The trend for incidents of harassment, threatening behaviour and private nuisance has also seen a steady incline over the past two years in Bankstown, and well above the State average. Families are reluctant to engage in DV available services due to an emphasis placed on victims leaving and many are not willing to leave, therefore not eligible for the services. There are no services available for children suffering trauma as a result of family violence. NSW Housing advised that a major cause of homelessness for single parents (women) with children, many with additional needs, is domestic and family violence.

Interviews with business and community groups stated parents lack skills to manage their children's behaviours. Comments from business such as "trash the place" when referring to families whose children damaged stock and premises were indicative of a lack of parenting skills and poor understanding of acceptable public behaviour. Many community comments related to families "not disciplining" their children. Community groups also identified that parents lack knowledge and skills in relation to healthy eating and nutrition. Neighbourhood/Community centres noted that the provision of food vouchers produced complaints as many families with higher numbers of children could not budget or feed their families for the week over which the food voucher was to cover.

SWS Area Health has also identified that families who are lower socio-economically disadvantaged and from migrant or Aboriginal backgrounds often have children who present with health and developmental concerns. Surveys indicated that children don't have sufficient access to physically active programs and sports activities, often due to costs and location/travel challenges, and live in cramped overcrowded homes. Community Groups and Schools have also noted that families prefer their children remain close to home inhibiting their children's ability to have access to sports grounds and other opportunities/experiences that would benefit their wellbeing.

Children's and parent's responses to survey questions highlighted the high level of electronic use of Facebook, twitter and games, most often through mobile telephones, and the lack of understanding from children and parents of the safety risks this could entail. With this high

level of access and poor knowledge, current programs are not adapted to the level needed for a true understanding of the risks.

Culturally specific groups indicated a need across the sector to improve understanding and challenge negative stereotypes fuelled by the media which has led to segregation and isolation for Muslim families who fear others in the community. Some parents during forums also revealed racial tensions and negative feelings towards others in the community.

Family and Children Activity Outcomes: Improved adult functioning; Improved family functioning; Improved child wellbeing; Stronger family relationships; Increased parental capacity and Improved child, adult and family wellbeing.

Communities for Children 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:

- 1. **Healthy young families** supporting parents to care for their children before and after birth and throughout the early years;
- 2. **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.

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:

- Direct funded services Parenting programs, nutrition courses, physical health and wellbeing programs, sports programs, experiences and activities including after school and vacation care activities, trauma support programs and play therapy for younger children, healthy relationship programs for all family members, community awareness programs, personal safety and life skills programs, and cyber safety programs for parents and their children.
- 2. Facilitated Systems Improvement Funded, jointly funded and non-funded activities. Community capacity building through network supports and the provision of information across services for referral purposes, support for the development of effective referral systems, training for cultural awareness and sensitivity, best practise forums and community expo's and opportunities for service collaboration, diversity training, child protection training and coordination of child safety understanding across the services system.

Outcomes measurement:

Family member engagement in healthy relationship programs, psychological assessment pre and post interventions, surveys and interviews demonstrating new skills development, changed behaviours and knowledge, recorded increased and sustained participation rates in sports and other activities and follow up at intervals to ensure sustained improvements, positive changes in community perception (school, local, wider community) and use of DSS S.C.O.R.E. evaluation system recording.

- 1. Children 0 12 years and their families
- 2. Community providers
- 3. Government Services schools, police, FaCS, housing, juvenile justice, health
- 4. Community leaders
- 5. Other support NFP's

Priority Area Four

Enhanced sector capacity, cross sector collaboration and sector coordination leading to increased levels of access and engagement for families, their children and the community.

Surveys and interviews indicated that when families and children accessed services they believed engagement had improved their lives. Most identified that they would access further services if referred and when availability and access issues were not obstacles.

Community Partners have identified increased fathers engagement in father-child programs, improved relationships between fathers and their children; and parents have identified higher levels of wellbeing and positive impacts on confidence levels, self-concepts and self-esteem after participation in various programs.

Services and community groups highlighted that the multiple and complex needs of families often prevented access for many. Cost, travel issues, family responsibilities and knowledge of available services were factors identified. Community groups also indicated that staff turnover affected the delivery of programs with engagement and ongoing improvement often highly dependent on the level of trust and security developed between the participants and staff in service delivery. This level of trust builds with time. Staff turnover disrupts participant's levels of engagement and can ultimately negatively affect outcomes. A government based telephone referral service is provided, however, vulnerable and disadvantaged families require supported referrals for trust to be maintained and engagement to continue, therefore this service is not effective for many vulnerable and disadvantaged families.

For service providers and government agencies the changes across the service system meant connections were lost and services and contacts changed causing difficulty in referrals to appropriate services. FaCS and NSW Housing have both identified a loss of connection with services and supports previously utilised for very vulnerable and disadvantaged families with complex issues who are homeless.

Restructuring of many agencies both government and NFP has also contributed to the disruption in service provision and the inability of some programs to refer parents onto other appropriate services after funding losses and program closures. NFP's have commented on the competitive nature of funding and the adverse effects that has on collaboration and coordination of various services, each with expertise in different areas. This competition leads organisations to try to be everything to all families as opposed to several organisations working together and able to provide higher levels of support for families due to having expertise in a number of areas.

Family and Children Activity Outcomes: More cohesive communities; Improved community functioning; Increased positive community connectedness; Increased service integration and collaboration; and Improved access for vulnerable or disadvantaged individuals and families.

Communities for Children 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:

- Direct funded activities Outreach information programs and services, events in multiple sites across the LGA inclusive of celebrations, services forums and expos, training programs on collaboration and integration of services, formal and informal partnerships and collective impact assessment.
- Facilitated Systems Improvement Supporting networks and inter-agencies, participation and support for community events and celebrations, delivering presentations and information to businesses, NFP's and Government services; utilising electronic distribution networks for sharing information and training to support this use.

Outcomes Measurement:

Attendance data and follow-up feedback from participants in expos, events and training; positive examples of media coverage; records, interviews and surveys identifying improved knowledge and increased referrals across the services system; random surveys across services sector to assess status quo; medium term follow up to identify any increases in collaborations and integration of service delivery after training/presentations/forums/expos; S.C.O.R.E. data collation identifying increased referrals across the service system and access for vulnerable and disadvantaged families; and research projects.

- 1. Children 0 12 and their families
- 2. Community Services sector organisations
- 3. Government Agencies and departments schools, housing, health, Council
- 4. Networks and inter-agencies
- 5. Businesses