

The Communities for Children jigsaw – All the pieces matter

Evaluation of The Benevolent Society's Communities for Children programs



Communities for Children (C4C) is a prevention and early intervention program which aims to improve children's health, safety and wellbeing in disadvantaged communities. This research snapshot presents the results of an evaluation of The Benevolent Society's C4C programs during 2005 – 2009 in the Rosemeadow and Ambarvale areas of Campbelltown and the Southern Lakes area of the Central Coast, both in NSW. The evaluation explored the impact of C4C on children and their families, as well as the effectiveness of the C4C model of service delivery.

The evaluation was led by the Social Policy and Research team of The Benevolent Society. A full report is available at www.bensoc.org.au.

KEY POINTS

- C4C increased the social connections of young families and reduced social isolation.
- C4C helped make the local communities more child-friendly.
- The availability, accessibility and quality of early learning and care services were also reported to have improved.
- Key to the successful engagement with families was that services and activities were offered on a universal basis, that is, to all families in the area with children under five, and that transport and childcare were provided.
- Harder to reach families were given additional attention through outreach and by the efforts of skilled staff working long-term to build trust.
- C4C played an important early intervention role by developing parents' confidence and increasing their support networks and access to local services.
- The area-focussed approach of C4C concentrated local energy and resources and brought communities and service providers together for a common purpose – the wellbeing of young families.
- The flexibility of the C4C model allowed participating local organisations (Community Partners) to adapt their services to local needs and strengths.
- C4C promoted collaboration between Community Partners, external stakeholders and parents. As a result, families received more holistic services than is typically the case.
- Effective collaboration was achieved by making partnership a guiding principle, by providing specific opportunities for collaboration and by focussing on a common goal. The networks and commitment of the Community Partners were also important.
- The characteristics of The Benevolent Society's approach as Facilitating Partner were felt to have been key to the successful collaboration; also its highly skilled community-focussed staff and long-term presence in the two areas.
- The C4C model – offering services on a universal basis, an emphasis on partnership and collaboration, flexibility, and an NGO playing the role of facilitator and coordinator of local services – could have much wider application in the delivery of community services.
- C4C could be strengthened by continuing as a long-term intervention, by the addition of more resources and planning for engaging hard to reach groups, and by long-term coordinated evaluation.

ABOUT COMMUNITIES FOR CHILDREN

The Communities for Children (C4C) program aims to develop protective factors for young children such as good antenatal and maternal health and nutrition, positive parenting and increased social connections. It was initially funded for four years (2005-2009) by the Australian Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) with the purpose of improving outcomes for families with children aged 0-5.

Local C4C programs were set up in 45 communities across Australia. In each of these communities, a non-government organisation (known as a Facilitating Partner) received funds to work with the community to identify the local needs of families with children aged 0-5 and to develop strategies and services to meet those needs. The Benevolent Society was the Facilitating Partner in two local C4C programs in NSW – in the Southern Lakes area of the Central Coast and in the Rosemeadow and Ambarvale areas of Campbelltown.

The Facilitating Partners distributed funding to and engaged local organisations (known as Community Partners) to deliver a range of activities in their communities such as home visiting, early learning and literacy programs, parenting and family support programs and community events.

FaHCSIA has recently extended the C4C program for another three years and has expanded the target

group to include families with children up to the age of 12. The local C4C programs in Rosemeadow and Ambarvale and Southern Lakes will continue.

A national evaluation of the program was undertaken by the Social Policy Research Centre at the University of New South Wales and the Australian Institute of Family Studies¹. It found that as a result of C4C, parents felt more effective in their role as parents, there was better engagement of families who had previously disengaged from early childhood services or were considered hard to reach, and there was an increase in service provision. It also found that fewer children were living in jobless households in the C4C areas.

THE AIMS OF THE EVALUATION

The Benevolent Society undertook an evaluation of the two local programs during 2005-2009. The aim was to inform The Benevolent Society, Community Partners and other stakeholders about the outcomes of C4C for children and their families, as well as the effectiveness of the C4C model of service delivery.

More specifically the evaluation aimed to:

- identify the key outcomes for the communities
- examine the process and impact of the Facilitating Partner/ Community Partner model
- examine the influence of C4C on service collaboration, families' access to activities and services, and
- identify good practice and lessons around sustainability and longer-term outcomes.

Acknowledgments

This evaluation would not have been possible without those who so generously gave us their time, experiences and views. Our thanks go particularly to the program managers Sue Ellis, Melanie Andrews and Carol Mackay; the managers, workers and volunteers at the Community Partners; the external stakeholders; and the families and children who shared their experiences of participation in the program. We would also like to thank Paul Bullen for his contribution.

The Benevolent Society

The Benevolent Society is Australia's oldest charity. Established in 1813 we have been caring for Australians and their communities for nearly 200 years. We are a secular, non-profit, independent organisation working to bring about positive social change in response to community needs. Our purpose is to create caring and inclusive communities and a just society.

¹<http://www.fahcsia.gov.au/about/publicationsarticles/research/occasional/Documents/op24/op24.pdf>

METHODOLOGY

The evaluation used a mixed methodology, with an emphasis on in-depth qualitative interviews with a wide range of stakeholders. It included:

- surveys of Community Partners and others involved in the initial planning and consultations, about the early program processes
- focus groups with Community Partners and parents
- interviews with project managers, workers and community participants in nine of the projects established as part of the C4C programs
- telephone interviews with external stakeholders
- an online survey of C4C stakeholders including Community Partners and external stakeholders, and
- analysis of other data sources including FaHCSIA reports and project evaluation reports.

THE FINDINGS

In 2008, the third year of the program, an estimated 13,000 people (children and parents) took part in C4C program activities across the two areas. Thirteen organisations, excluding The Benevolent Society, were formally engaged as Community Partners

Family outcomes

Stakeholders were consistent in their assessment of the outcomes which had been achieved by C4C, and of the key success factors.

Social connections

Increased social connections and reduced isolation among young families was commonly reported and was felt to have improved parents' mental health and ability to cope with the demands of parenting. This was achieved by ensuring that all activities were structured in a way that facilitated the development of relationships and networks among parents.

Parents were empowered as a result of their increased awareness of and engagement with local services, and through support and validation of their concerns. This was also achieved by ensuring that all activities adopted a strengths-based approach and by giving parents the opportunity to shape, design and steer activities.

Child friendly communities

Many stakeholders felt that C4C helped make the local communities more child-friendly. This was achieved through the development of child-friendly parks and play areas. It was also felt that there had been a reduction in fears about personal safety in some areas. Residents in one area, who had previously expressed fears about where they lived, came out of their homes to take part in a street based playgroup, made connections and encouraged other local families to participate.

Early learning and care

C4C was felt to have improved the availability and accessibility of early learning and care. The program not only increased the amount of early learning activities but families were also more likely to access them as a result of their increased knowledge and confidence and reduction in barriers to participation.

The quality of early learning and care was also felt to have improved. The development and provision of high quality early learning resources promoted and improved child-parent interactions. It also encouraged parents to take learning back into the home by equipping them with new skills, knowledge and support.



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Positive outcomes

The program was felt to have led to a range of positive outcomes for parents and children, including improved physical and mental health and improved child development.

While it is too early to assess the longer-term impact of C4C on child development, health and educational outcomes, parent-child relationships and child safety, the evaluation showed evidence of improved intermediate outcomes for families. C4C appears to have succeeded in playing an important early intervention role by developing parents' confidence and support networks and increasing their access to local services.

Engagement with families

Universal services

C4C activities were open to all families with children aged 0-5 and offered non-threatening 'soft' entry points. This model of universal service provision was considered to be a key success factor for engaging families. The universal approach promoted tolerance and acceptance, avoiding the stigma that is often attached to services targeted only at vulnerable families.

Outreach and additional support

Outreach approaches were successful in building families' familiarity with and trust in local services. The provision of childcare and transport was also crucial for maximising families' access to activities. Informal, familiar and relaxed settings where parents could bring children knowing they would be safe, encouraged participation. Once families had engaged with these services, particular needs requiring specialised (non-universal) assistance could be more easily addressed.

"It works well to begin with universal services and then provide particular support for those in greater need. Unfortunately people that require a lot of support tend not to access services specifically for them as they have to 'jump through hoops'"

Some groups in the community were more difficult to engage with due to various practical and psychological barriers. These groups included working parents, Indigenous families and families experiencing high levels of socio-economic disadvantage. A range of approaches were employed to engage these harder to reach groups, including outreach, development of the engagement skills of staff and investing time to build relationships and break down negative perceptions of services.

The C4C model

Area based approach

The C4C model itself (the combination of Facilitating Partner/ Community Partners and area-based approach) was seen as a key success factor of the program. Community Partners felt that the local area-based approach had led to improved coordination of services for families. The model raised the profile of families with young children in the community and brought a wide range of local organisations together to work towards a common goal. The strong focus on achieving agreed program outcomes was also important in helping keep the C4C programs on track.

"This program has allowed a lot of resources to be made available in this smaller area which has allowed that critical mass to be reached"

Flexibility

The flexibility of the model was considered to be a key contributor to the success of the projects. The program allowed the Facilitating Partner and Community Partners to pilot innovative approaches, adapt them as needed and to work with a range of organisations. The flexibility to alter the course of projects according to the local context was particularly appreciated by Community Partners. Some of the most innovative and 'risky' activities undertaken in the two C4C areas subsequently brought the most benefits.

Collaboration and partnership

With Community Partners

C4C resulted in improved cooperation and collaboration between local stakeholders and successfully brought together all key players that provide services to families with children aged 0–5. Community Partners collaborated through joint planning, sharing of information, advice and expertise and through publicising and referring families to other project activities. Community Partners were sometimes involved in the joint delivery of activities. Working in partnership enabled services to better mobilise skills and resources.

With parents & families

Parents and families participated at all levels – in providing input into how activities should be delivered, in helping to deliver activities and in management and decision making.

“The benefits of including parents are that they have local knowledge. Like for the playground - that was very specific to needs and you are able to get the detail right.”

“Sometimes professionals need a reality check...lay people can have fantastic ideas. More of that needs to happen at every level”

With stakeholders

Collaborative activities were also undertaken with a wide range of other stakeholders who were not designated Community Partners. These stakeholders offered in-kind and/or direct financial support and played a key role in publicising and referring families to C4C activities. The highest level of collaboration was with schools, pre-schools and childcare centres.

A direct benefit of this collaboration for families was that they received a more holistic service, as they could be readily linked to a range of different supports, as needed.

Respondents felt that there was a deeper level of collaboration than before which had helped create a stronger network of services in the communities.

C4C had facilitated this by:

- making partnership a guiding principle for all activities
- providing opportunities for collaboration through channels such as advisory committees
- providing the Facilitating Partners with funds to allow them to contract with Community Partners to undertake agreed activities
- a strong commitment from Community Partners, and
- building on pre-existing collaboration mechanisms.

“It’s real partnerships. That’s important, so we’re not competing against each other. We’re all in the same cause, after the same thing”

Collaboration with mainstream government agencies was more limited. Few partnerships were facilitated beyond those at the local level and communication with state level agencies, such as the NSW Department of Community Services, was very dependent on specific relationships and the commitment of the relevant government workers.

An NGO as community facilitator

Stakeholders reported that having an experienced NGO with an existing local presence acting as Facilitating Partner was important. The added value that an NGO, as opposed to a government agency, was able to bring was seen as:

- greater proximity to and familiarity with community issues and organisations
- greater ability to foster collaboration and the creation of a network of services, and
- a commitment to the use of collaborative processes, designed and implemented at community level.

The Benevolent Society’s approach as Facilitating Partner was also felt to be key to the successful collaboration. Characteristics of this approach included the Society’s highly skilled community-focussed staff and its long-term presence in the two areas.

IMPLICATIONS FOR POLICY AND PRACTICE

The success of the model

The evaluation found that C4C succeeded in enhancing social capital and community connectedness in both communities. The federal government should consider further expanding the C4C program to other disadvantaged areas. In addition, federal and state governments should consider utilising the C4C model in other settings and with other target groups such as young people, socially isolated older people and people with a disability.

The key elements of the C4C model which could also have wider application, were:

- offering services on a universal basis, plus the linking of families with particular needs to additional services and outreach to harder to reach families
- the local area focus
- the emphasis on partnership and collaboration
- flexibility, and
- having an NGO in the role of facilitator and coordinator of local services, with funding to support agreed activities.

Collaboration with government

The C4C programs were successful in building collaboration and partnerships between local service providers but collaboration with state government stakeholders was more limited. The impact of C4C is likely to be greater with the active involvement of all levels of government. The program should include a focus on the building of partnerships with relevant government agencies, during 2009 – 2012.

Harder to reach and more disadvantaged groups

The evaluation found that harder to reach groups could be engaged through a combination of active outreach, persistence and flexibility. However, some particularly marginalised groups remained reluctant to participate. This highlights the need for the federal government to factor in sufficient time for C4C

services to break down barriers and build confidence among these groups.

C4C now falls under the Community and Family Partnerships stream of the new Family Support Program, key target groups for which include 'significantly disadvantaged communities and families, especially vulnerable and at risk families and children'. Although C4C can be effective in reaching vulnerable and at risk families it should be seen as complementary to, not a replacement for, services that provide intensive support and case management to these families.

Long-term intervention

The Benevolent Society welcomes the decision to continue the C4C program for another three years. Establishing the necessary infrastructure, generating a good level of awareness and engaging with disadvantaged families takes time and is difficult or impossible to achieve with short-term funding. The results of this evaluation support other research and evaluation findings which suggest that in order to affect change within communities, interventions need to be long-term.

Continued investment in evaluation

The Benevolent Society welcomes the government's investment in evaluation of the C4C program to date. This should continue, at both national and local levels, in order to more effectively gauge the longer term impact of the program. There should be continued investment in local program evaluations in order to capture the rich variation in programs. Mechanisms should also be put in place to share lessons and draw collective conclusions from local evaluations.

C4C and social inclusion

The C4C model is consistent with the aims of the federal government's social inclusion agenda. It builds on individual and community strengths, is based on forming partnerships with key stakeholders, delivers tailored joined-up services, focuses on prevention and early intervention, uses an area based approach and promotes sustainability by building community capacity.