Mid Murray Family Connections

Community Accountability Plan 2016

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Mid Murray Family Connections – Collective Impact Initiative

Who are we?

The Mid Murray Family Connections (MMFC) Collective Impact initiative was formed in response to the 2012 Australian Early Development Census (AEDC). The Census highlighted the Mid Murray region as having the second highest proportion of developmentally vulnerable children in South Australia - 1 in 3 children. This collaboration of government and non-government agencies and passionate community members, servicing and/or living in the Mid Murray Council district, has been working together towards improving the wellbeing of children in the region.

The group recognises that this is an extremely difficult task that requires shared responsibility from all sectors of the Mid Murray community, as well as long term commitment from all stakeholders, to produce large scale and long lasting results.

This Population Plan reflects MMFC's commitment to support families so that children's wellbeing is prioritised across all developmental stages. This will ensure that children are provided with the best start in life. The plan follows the Result Based Accountability™ (RBA) Population Accountability methodology and has been developed with the input of a wide range of community stakeholders.

The purpose of this Population Plan is to guide the work of the MMFC Collective Impact Initiative. It clearly states the desired outcome, the indicators that will be used to measure progress as well as the strategies to be explored and implemented. As a living document, the Population Plan will require periodic review and adjustment, as progress is made.

Contents

Population

Children 0-8 years of age in the Mid Murray council region.

Result

Children in the Mid Murray enjoy positive wellbeing and are emotionally mature.

Why focus on Emotional Maturity?

We decided to focus our efforts on targeting the **emotional maturity** domain in order to reduce the number of 'developmentally vulnerable' and 'at-risk' children and reverse the trends. We know that by beginning work on this domain there will be a flow-on effect that will impact the other developmental domains as well.

The Experience of emotional mature children

'Emotionally mature children in the Mid Murray Council region will show empathy, resilience, and will be focused, proactive, positive problem solvers'.

We will use the RBA framework to guide our actions.

About Results Based Accountability

The Results Based Accountability (RBA) framework provides a disciplined way of thinking and taking action that communities can use to improve the lives of children, families and the community as a whole. RBA uses a data-driven, decision-making process to help communities get beyond talking about problems to taking action to solve them. RBA starts with ends (the results you want to achieve) and works backward, towards means (programs and actions).

Once the desired Results have been agreed, a range of Indicators that can provide benchmarks and measure progress need to be identified. In this case, **MMFC has identified four, age-focused Results that will contribute to achieving the overarching outcome of improved wellbeing and emotional maturity.**
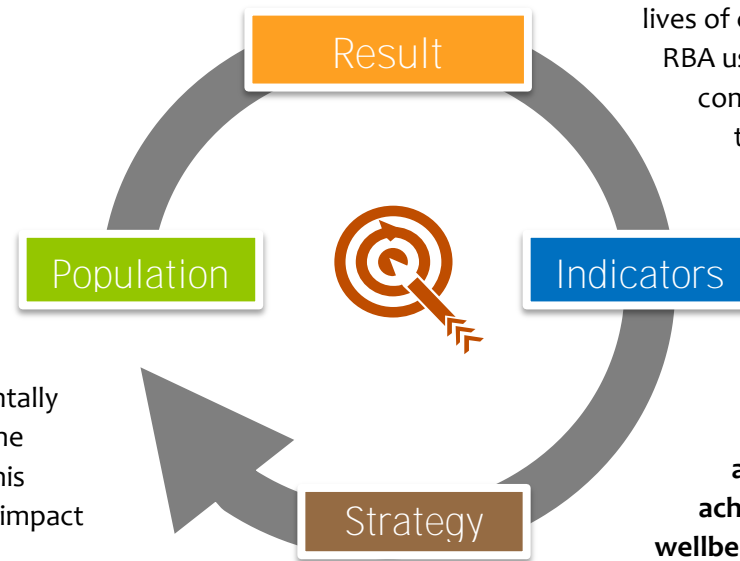
Result Areas:

1. **Children and their caregivers share strong attachment**
2. **Children are emotionally resilient**
3. **Children are engaged learners**
4. **Children and their caregivers are safe and supported**

Indicators associated with these Results areas are detailed on the pages following.

To build attachment and resilience, 1000 days at a time.

Age group: 5 to 8 years

Result Area 3: Children are engaged learners.

Age group: Conception to 2 years

Result Area 1: Children and their caregivers share a secure attachment.

Age group: Conception to 8 years

Result Area 4: Children and their caregivers are safe and supported.

Age group: 2 to 5 years

Result Area 2: Children are emotionally resilient.

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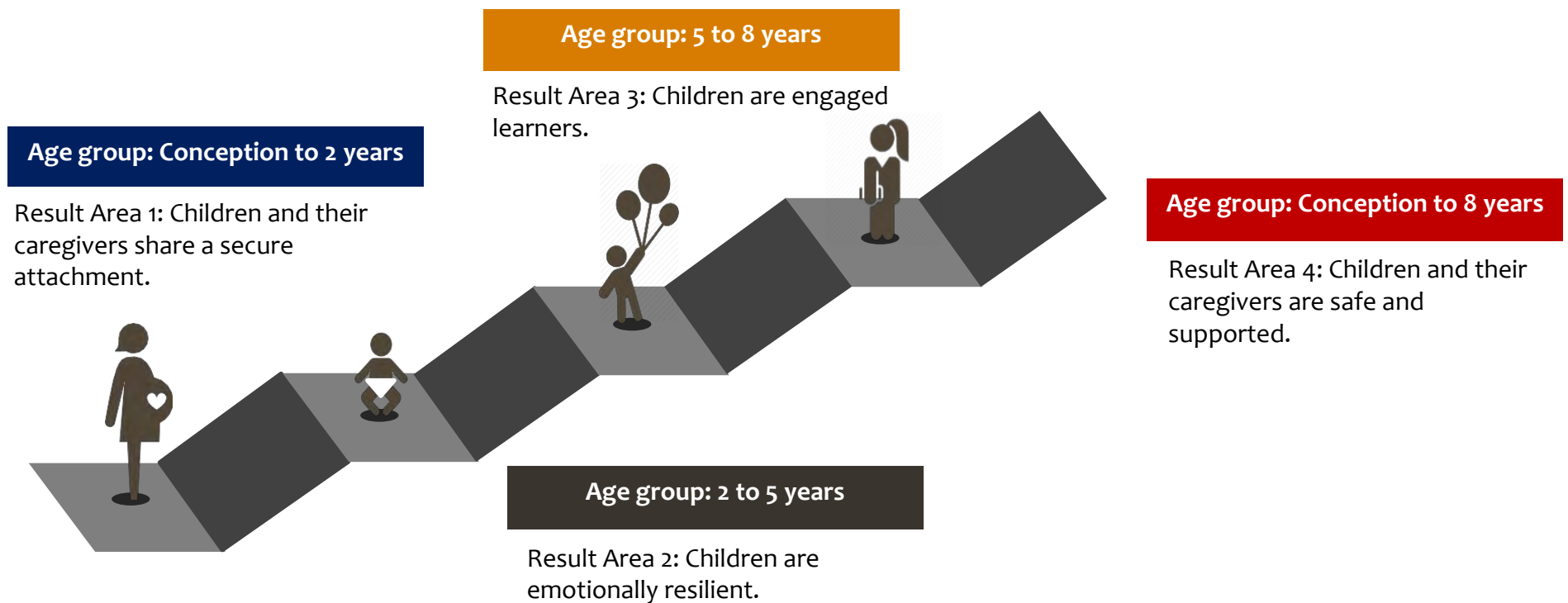
Story behind this indicator

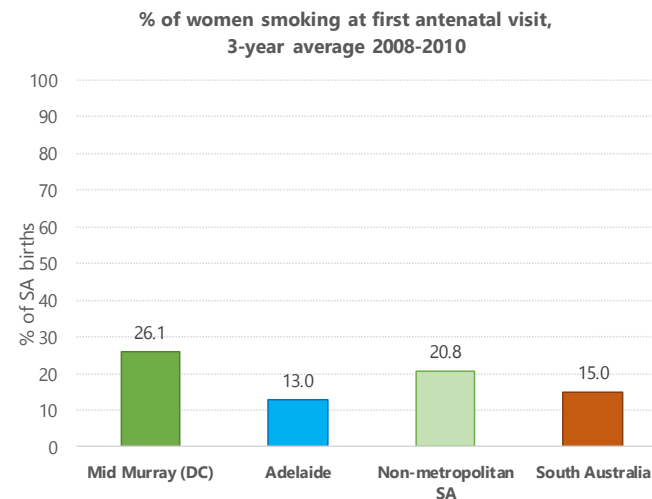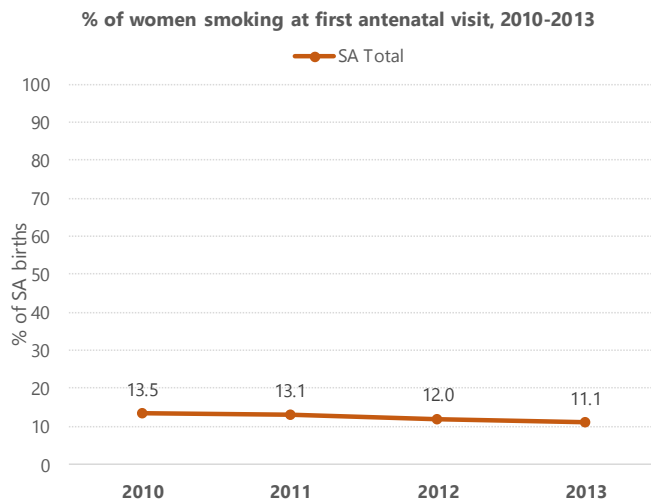There has been clear advice from experts in the field of early childhood development that smoking in pregnancy is one of the best proxy indicators for attachment between children and their mothers. It is generally measured in two ways:

- Mums-to-be who adopt a child-centred attitude will quit smoking when they find out they are pregnant.
  - Mums-to-be who have the social support to be child-centred throughout the pregnancy will continue not to smoke and others will quit smoking as the pregnancy progresses.

Please Note: data on smoking in pregnancy are collected as one of a range of indicators around pregnancy and births. MMFC is working with Together SA to access the rolling-averages data over time and for a more recent period.

SA Health's annual *Pregnancy Outcomes* report provides state-wide data and the graph below left shows the steady improvements in South Australia's results in recent years. The graph bottom right shows that, using a 3-year average to allow for small area analysis, Mid Murray's smoking rate in pregnancy is significantly higher than the state average. **Contributing factors** include:

- The **lower socioeconomic** profile of the region.
- **Reduced access to pregnancy information**, programs and supports close to home, **aggravated by limited public transport**, above average numbers of one-car families and the costs of running a car.

% of women smoking at first antenatal visit, 2010-2013

— SA Total

	2010	2011	2012	2013
	13.5	13.1	12.0	11.1

% of SA births

**% of women smoking at first antenatal visit,
3-year average 2008-2010**

% of SA births

Mid Murray (DC)	Adelaide	Non-metropolitan SA	South Australia
26.1	13.0	20.8	15.0

Result Area 1 - Children and their caregivers share a secure attachment – Age group: Conception to 2 years
Indicator: Percentage of women smoking in pregnancy.
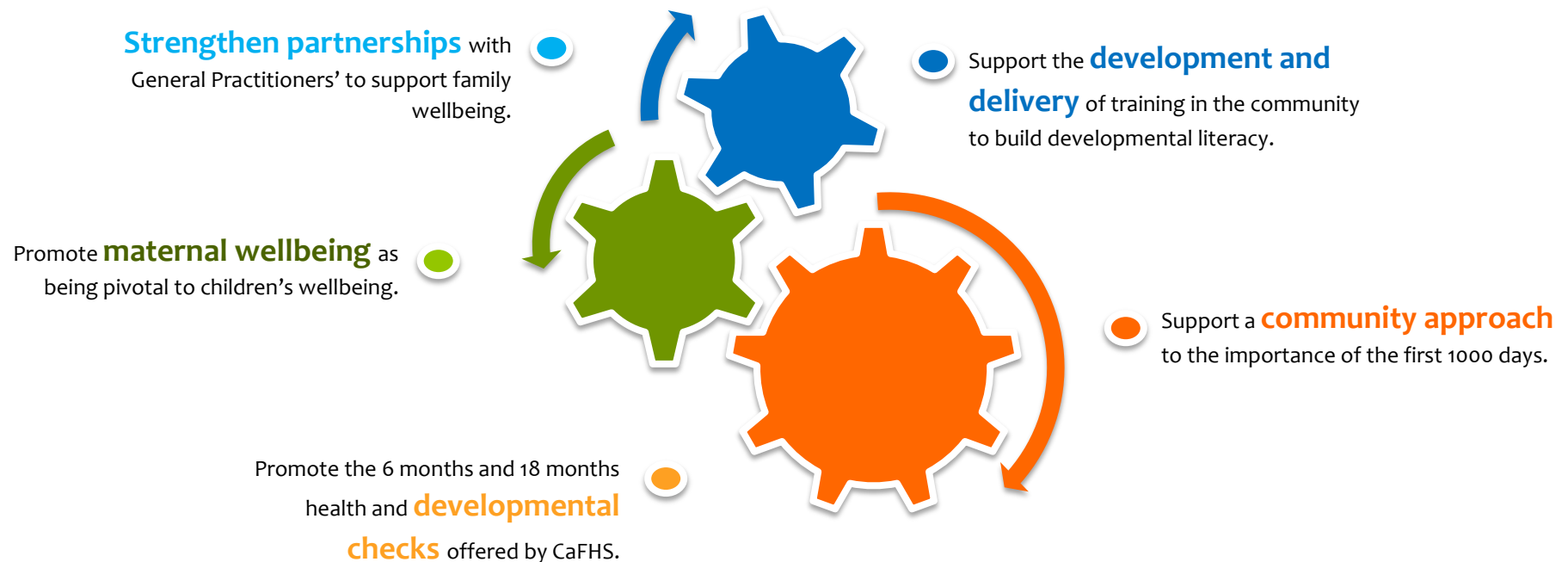
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Some **strategies that could work** to support families having access to information which promotes and enhances attachment between children and their caregivers include:

- Support a community approach to the importance of the 'first 1000' days being pivotal to outcomes for children.
- Support the development and delivery of training packages, which midwives could deliver at ante-natal courses to first time parents.
- Support the development and delivery of training across the region to build developmental literacy among health, allied health, teachers, social service workers, etc.

Partners who could help:

- GPs
- Practice nurses
- SA Health midwives
- CaFHS
- Murray Mallee Community Health service
- Murray Mallee General Practice Network

Top Current Strategic focus

Strengthen partnerships with General Practitioners' to support family wellbeing.

Support the **development and delivery** of training in the community to build developmental literacy.

Promote **maternal wellbeing** as being pivotal to children's wellbeing.

Support a **community approach** to the importance of the first 1000 days.

Promote the 6 months and 18 months health and **developmental checks** offered by CaFHS.

Result Area 2 - Children are emotionally resilient – Age group: 2-5 years

Indicator: Playgroup, preschool/kindergarten and other non-parental care attendance enrolments in the Mid Murray region.

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% of Mid Murray children assessed on the AEDC who had non-parental early childhood education and/or care*

- Playgroup — 61.8%, 88.8%, 95.8% (Preschool or kindergarten values: 61.8%, 88.8%, 95.8%)
- Playgroup: 25.0%, 21.1%
- Family day care: 9.2%, 2.5%, 1.4%
- Centre-based day care: 7.9%, 0.0%, 15.5%

Legend:
- Playgroup
- Centre-based day care
- Family day care
- Preschool or kindergarten
- Trend (Playgroup)
- Trend (Day care)
- Trend (Family day care)
- Trend (Preschool or kindy)

Years: 2009, 2012, 2015

Please Note: the AEDC data is being used as an interim indicator while detailed and more accurate data on playgroup and pre-school attendance across a wider age group are being sourced and analysed at a local level.

*Includes only children where teachers knew they had a non-parental early childhood education and/or care experience in the year before entering school.

Source: AEDC Community Profile 2015 for Mid Murray, SA

Story behind this indicator:

- **Data:** This is OK data and a starting point but it does not provide a full picture of what is happening in the region..

- **Limited regional knowledge:** Data does not provide full picture of what is happening across the whole region.

- **Trans-region school attendance:** Some children attend schools outside the Mid Murray Council region: 22 schools contributed to the AEDC assessments on 71 MMC children in 2015.

- **Day care types:** Three options for day care, in Mannum only: Rural Care at kindergarten; two types of family day care. Some other day-care options in other pre-schools across the region (attached to primary schools).

- **Reduced number of playgroups:** Numbers of playgroups in Mid Murray have declined. A Playgroup now runs through Mannum kindergarten with up to 20 families attending. Small towns may have no formal opportunities.

- **Domestic violence:** This is a major issue across the community, which isolates women and children.

- **Limited access to services:** Due to the cost of running a car, or no car; some families may not receive any services. Limited public transport.
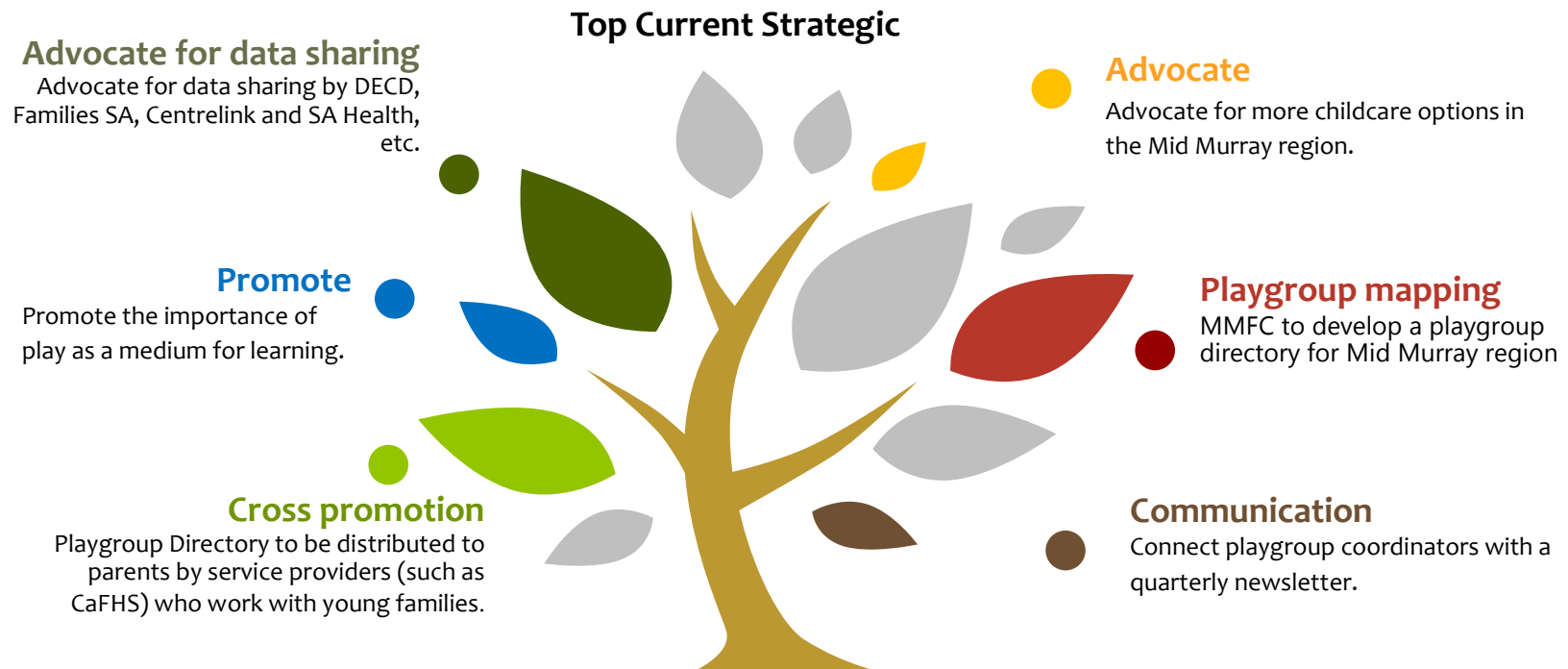
Some **strategies that could work** to support an increase in children attending non-parental care in the Mid Murray:

- Advocate for and promote childcare opportunities in the community, as its benefits for children are clearly stablished (evidence based knowledge).
- Promote attendance at playgroups, kindergyms, toy libraries across the Mid Murray region.
- Work with Playgroups SA to offer support to existing/emerging playgroups across the Mid Murray region.
- Develop an electronic list of services by location specifically for the Mid Murray region, highlight and promote service delivery in the region.
- Form partnerships and collaborate with new DECD 'Wellbeing Social Workers' to be based in schools. (Need to establish if they will visit families at home).
- Promote data sharing agreements, which would be beneficial for planning and partnerships.
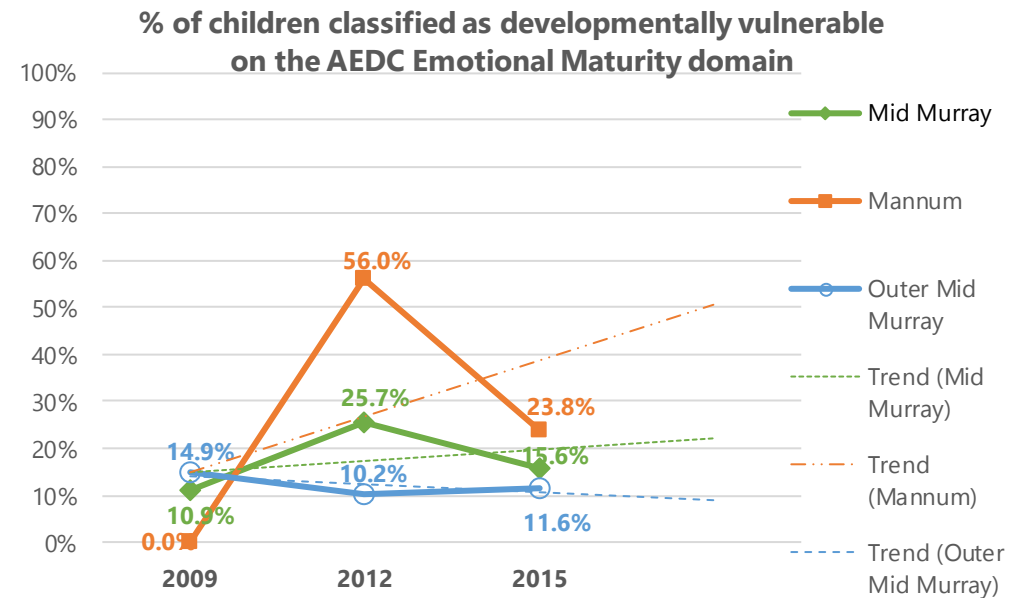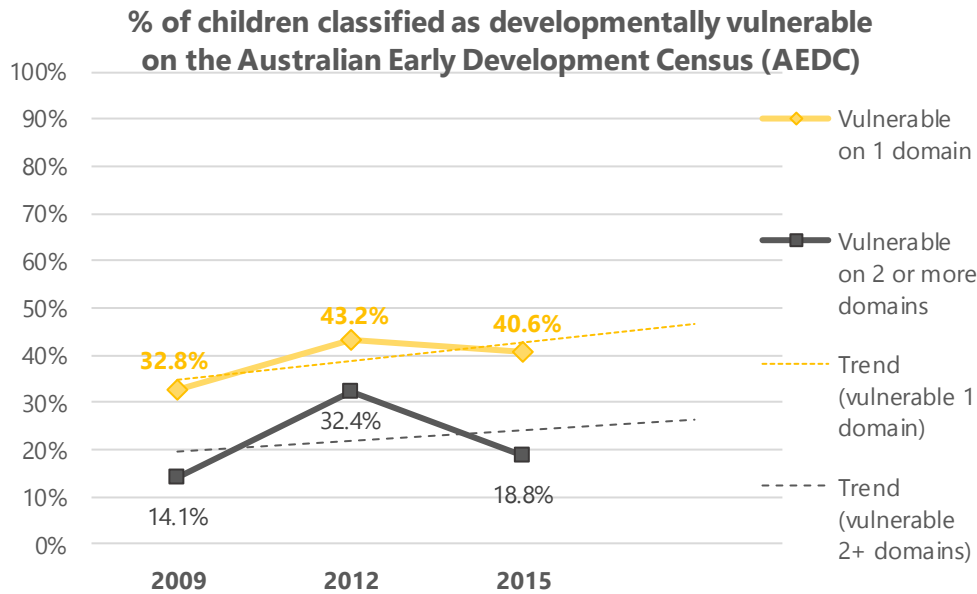
Partners who could help

- Kindergartens
- Playgroup Providers
- Family Day Care Providers
- Kinder-gym Providers
- Playgroup SA
- CaFHS
- Schools
- Housing SA
- Centrelink
- Domestic Violence services
- Non-government service providers.

Top Current Strategic

Advocate for data sharing
Advocate for data sharing by DECD, Families SA, Centrelink and SA Health, etc.

Advocate
Advocate for more childcare options in the Mid Murray region.

Promote
Promote the importance of play as a medium for learning.

Playgroup mapping
MMFC to develop a playgroup directory for Mid Murray region

Cross promotion
Playgroup Directory to be distributed to parents by service providers (such as CaFHS) who work with young families.

Communication
Connect playgroup coordinators with a quarterly newsletter.

Result Area 3 - Children are engaged learners – Age group: 5-8 years

Indicator: Proportion of children classified as developmentally vulnerable on the Australian Early Development Census.

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% of children classified as developmentally vulnerable on the Australian Early Development Census (AEDC)

Vulnerable on 1 domain

Vulnerable on 2 or more domains

Trend (vulnerable 1 domain)

Trend (vulnerable 2+ domains)

32.8%
43.2%
40.6%
14.1%
32.4%
18.8%

% of children classified as developmentally vulnerable on the AEDC Emotional Maturity domain

Mid Murray

Mannum

Outer Mid Murray

Trend (Mid Murray)

Trend (Mannum)

Trend (Outer Mid Murray)

56.0%
25.7%
23.8%
14.9%
10.2%
15.6%
10.9%
0.0%
11.6%

Story behind this indicator

- **Financial pressures:** Increased financial pressures in the region have an impact on and add stress to all aspects of family life.

- **Service accessibility:** the region intersects three state electoral districts, resulting in a black hole for services.

- **Low population:** the low population density leads to significant challenges in attracting resources, funding and services to the area.

- **Parental issues:** parents' and caregivers' mental health issues; limited and inconsistent support for parents; lack of positive parenting knowledge; children acting as cares for younger siblings.

- **Transient population:** looking for employment, low cost housing.

- **Unstable home environments:** including short term relationships, relationships breakdowns and domestic violence.

Some **strategies that could work** to support children emotional development:

- Mentoring: Children more likely to attend/engage at school if they are matched with a mentor they identify with.

- Strengths based approach: Rewards for attendance, engage learning, etc. rather than punitive approach.

- Psycho-social programs: embedding well-being programs In schools to increase support and build resilience.

- Promote family engagement in schools/community/recreational events to increase sense of belonging in the community.

- Promote education as a high priority for everyone in the community and education leading to pathways for children.

Partners who could help

- Schools/teachers
- Parents and children
- School counsellors and pastoral care workers
- Governing councils of schools
- Family support programs
- Local sporting clubs
- Community members

Top Current Strategic Focus

'Kids Matter'

Support primary schools to implement the federal mental health and wellbeing initiative 'KidsMatter'.

Partnerships

Form partnerships with every primary school in the region to support psycho-social well-being of students.

Supports

Support networks for parents:
- Lifelong learning, courses.
- Services and supports
- Interesting and attractive options to improve engagement.

Coordinating

Coordinate and filter communication to every primary school in the region to promote opportunities for learning, play and support for children and their families.

Result 4 Children and their caregivers are safe and supported – Age group: conception – 8 years
Indicator: Number of Child Protection notifications, not screened in by Families SA.

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Number of child protection notifications in SA, non-screened-in only
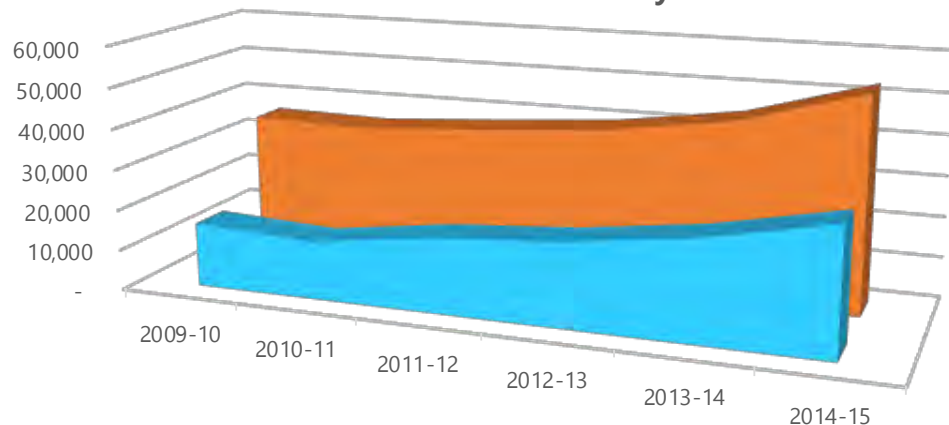
	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15
■ Not screened in	15,740	14,286	18,378	20,613	24,625	30,890
■ Total notifications	36,038	35,431	37,434	39,733	44,203	52,930

Stories behind the baseline

- High unemployment & low socioeconomic status.
- Cheaper housing in more isolated locations >> high cost of petrol >> social isolation.
- Impact of domestic violence and mental health issues.
- Drugs & alcohol: lack of self-awareness about the impacts.
- Lack of family support.
- Poor or no public transport.
- Poor connection of parents with schools.
- Some parents may seek rental in remote locations to justify non-attendance at Centrelink appointments.
- Stigma in taking up support

At this stage, local data is not available, only reports at state level. Together SA is working with the government agency to have the data made more relevant and accessible at community level.

In the meantime, it is worth noting that the non-screened in notifications - i.e. those that Families SA does not follow up - have been increasing at a faster rate than total notifications. There can be many reasons for this and MMFC will be exploring this further.

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Some **strategies that could enhance** children and their caregivers feeling safe and supported:

- Utilise cross community concern and support for children and families
- GP's are active gate keepers in linking families and social services
- Develop community approach to breakdown stigma of parents requesting support and help
- Advocate for greater health, social and educational service delivery across the Mid Murray Region.
- Distribute a resource card for support services & key messages, e.g. 1800 RESPECT
- Coordinate and filter communication to the community regarding learning, play and support opportunities for children and their caregivers.
- Better information and data sharing between agencies

Partners: everyone in the community

This is not an ideal short term indicator. This indicator will require a longer term focus. The focus may be on supporting the community to adopt an attitude that 'each and every member of the community is responsible for the well-being of every child.'

Top Current Strategic focus

Community awareness
Promote National Awareness raising campaigns relevant to children and their caregivers.

Information
Coordinate and filter communication to the community regarding learning, play and support opportunities for children and their caregivers.

Directory
Develop a resource directory specifically for the Mid Murray region, which can be easily updated.

Peer Support
Investigate the feasibility of developing a peer-to-peer support program for parents across the Mid Murray region.

Adaptive Strategic Actions - Present

Age Group Conception -2

1. Strengthen partnerships with General Practitioners to support family wellbeing.

2. Promote maternal wellbeing as being pivotal to children's wellbeing.

3. Promote 6 month and 18 month health and developmental checks offered by CaFHS.

4. Support the development and delivery of training in the community.

5. Support a community approach to the importance of the first 1000 days.

Age Group 2-5

1. Advocate for data sharing by DECD, FSA, Centrelink and health services.

2. Promote the importance of play as a medium for learning.

3. MMFC to develop a playgroup directory for the Mid Murray region to be distributed to parents by services providers (such as CaFHS).

4. Advocate for more childcare options in the Mid Murray region.

5. Connect playgroup coordinator with a quarterly newsletter.

Age Group 5-8

1. Support primary schools to implement the Federal mental health and wellbeing initiative 'KidsMatter'.

2. Support networks for parents: lifelong learning, services and supports, interesting and attractive options to improve engagement.

3. Form partnerships with every primary school in the region to support psycho-social well-being of students.

4. Coordinate and filter communication to every primary school in the region to promote opportunities for learning, play and support for children and their families.

Age Group Conception - 8

1. Investigate the feasibility of developing a peer-to-peer support program for parents.

2. Develop an online resource directory that can be easily updated (both for residents and professionals) for the Mid Murray region.

3. Promote National Awareness raising events relevant to children and their families (National Families Week, NAIDOC Week, National Youth Week NAPCAN, Mental Health Week, White Ribbon Day etc.)

Adaptive Strategic Actions Proposed - Future

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Age Group Conception - 2

1. Focus on embedding the principles of the first '1000 days' in all work undertaken for this age group.

2. Identified gap of playgroup opportunities for babies (0-12 months) across the region.

3. Build capacity of the community to address the gap(s).

4. Train MMFC workers and volunteers to facilitate playgroups.

Age Group 2 - 5

1. Build capacity of the community to engage in advocacy for more child care options.

2. Identified gap of story time opportunities for children.

3. Build capacity of the community to address gaps.

4. Advocate for greater playgroup options across the region.

Age Group 5 - 8

1. Investigating the feasibility of a parent centre attached to school sites in the region (immunisations, CaFHS health checks, playgroups, social service delivery).

2. Build capacity of schools to engage parents. Including the school community.

3. Develop a campaign promoting education as a priority for the community.

Age Group Conception - 8

1. Investigate and apply for funding to create a Families Portal linked to the Mid Murray Council website.

2. Investigate and apply for funding to develop a peer to peer, parent support program.

3. Advocate for greater service delivery across the Mid Murray region.

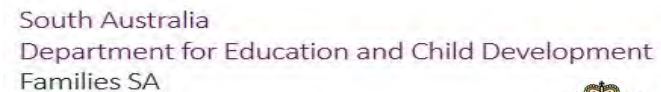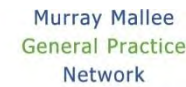4. Build capacity of the community to engage in advocacy.

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Appendices

Results Based Accountability™ (RBA)	A planning, monitoring, reporting and continuous improvement tool. It is a structured approach to thinking and taking action that starts with defining the desired outcome/result and working backwards to the means of getting there.
Outcome	The aspirational conditions of wellbeing for the community. Our desired outcome is to *Improve the wellbeing of children in the Mid Murray Council area by focusing on emotional maturity.*
Experience	This refers to the description of how the achieved outcome would look, sound or feel.
Indicator	Community level data used to monitor and demonstrate progress toward the achievement of the community outcome.
	Proxy indicator: a measure that can be used to stand in for missing or unobtainable data; an indicator that may represent evidence of something else when no direct measure of the desired indicator is available. Since there is not a set of data collected at the population level in relation to secure attachment formation between children and caregivers, *smoking during pregnancy* has been suggested by expert as the closest representation or indication of caregiver capacity/disposition to nurture secure attachment with their children.
Story Behind the indicator	A detailed analysis of causes and conditions that help to explain the current results – why the data trend looks the way it does.
Data development agenda	The list of the new/ additional data required to monitor progress.
Partner	Anyone with a role to play in achieving the desired outcome; may include individuals, organisations or government agencies/departments.
Stakeholder	Anyone with a significant interest in the achievement of the community results; it can include individuals or organisations.
Adaptive Strategic Action Plan	The description of activities that are being undertaken and future action/strategies that are likely to be carried out to advance positive change on the selected indicators and achieve our outcome. This is a dynamic strategic plan that is review and adapted periodically as progress is made and new needs or circumstances are identified.

AEDC

The Australian Early Development Census (AEDC) is a nationwide data collection that shows how young children have developed as they start their first year of full-time school. It measures five important areas of their early childhood development: physical health and wellbeing, social competence, emotional maturity, language and cognitive skills (school-based), communication skills and general knowledge[1].

Children 'developmentally vulnerable': Children who score below the 10th percentile (in the lowest 10 per cent) of the national AEDC population are classified as 'developmentally vulnerable'. These children demonstrate a much lower than average ability in the developmental competencies in that domain.

Children 'developmentally at risk': Children who score between the 10th and 25th percentile of the national AEDC population are classified as 'developmentally at risk'.

Children 'developmentally on track': Children who score above the 25th percentile (in the top 75 per cent) of the national AEDC population are classified as 'on track'.

(Note: that the AEDC acknowledge some variability in the data due to the distribution of results; natural breaks were used to define children 'on track' and 'at risk')
For more details about the measurement: https://www.aedc.gov.au/resources/detail/about-the-aedc-domains

Playgroup

Includes kindergym, play centre, mums groups, community library child-specific programs, Bub Club (Hub) and Joining the Dots (Kindy parenting program); mobile toy library.

Day Care

Refers to formal child care and family day care.

Other out-of-home care

Includes toy library, any other program outside the home that can be tracked.

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[1] AEDC https://www.aedc.gov.au/resources/detail/about-the-aedc-domains

Population as per 2015	**8243 people (stable over the last 10 years)**
	Land area 627,256 hectares (6723 Km²). Population density 0.01 persons per hectare.
2011 Census Data	
Children in the Mid Murray Region	Number of: 0 – 4 year olds: 351 **4.3**% (Regional SA 6.1%) 5 – 9 year olds: 411 **5.1**% (Regional SA 6.2%) 10 – 14 year olds: 477 **5.9**% (Regional SA 6.7%) *Number of children assessed by AEDC in 2015:* **71** *children (40 males 56%; 31 females 44%)*
Households with children	• Couples with children 721 20% (Regional SA 25%) • Couples with young children 360 10% (Regional SA 14%) • Single parents with children 108 3% (Regional SA 4%) • Single parents with young children 108 3% (Regional SA 4%)
Highest level of secondary schooling completed	• **Year 10:** 1555 - 23% • **Year 11:** 1409 - 20% • **Year 12:** 1773 - **26**% **Bachelor** or higher degree: 399 - 5.8% (Regional SA 8.2%) **Advanced Diploma** or Diploma: 334 - 4.8% (Regional SA 5.7%) **Vocational:** 1505 - 22% (Regional SA 21%) **No qualification:** 3656 - **53**% (Regional 54%)
Employment status	• Employed: 3260 - **94**% (Regional SA 95%) • Unemployed: 210 - 6% (Regional SA 5.4%)
SEIFA - Index of Relative Socio-economic Disadvantage[2]	• **Mid Murray Council:** 936.7 - **20th percentile** • Regional: SA 950.1 - 24th percentile • **South Australia:** 983.3 - 37th percentile • Australia: 1002.0 - 47th percentile

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[2] SEIFA Index measures the relative level of socio-economic disadvantage based on a range of Census characteristics. The index reflects disadvantage such as low income, low educational attainment, high unemployment, and jobs in relatively unskilled occupations. A higher score on the index means a lower level of disadvantage. A lower score on the index means a higher level of disadvantage.

The Australian Early Development Census (AEDC) is a population based measure of how children have developed by the time they start school. It looks at the 5 areas of early childhood development domains:

- **Physical health and wellbeing**

- **Social competence**

- **Emotional maturity**

- **Language and cognitive skills (school-based)**

- **Communication skills and general knowledge**

The AEDC is undertaken every 3 years for children in their first year at primary school (Reception) across Australia. It provides a snapshot of how our children are tracking and whether they are reaching important developmental milestones.

Within the Mid Murray region in 2012 this data was captured from 80 students, across 20 schools. In 2015 this data was captured from 71 students across 22 schools. Teachers at each school complete the Early Development Instrument for each child in their class. Teachers' professional expertise and knowledge of the children they teach means they are well placed to make observations about children's development.

www.aedc.gov.au

For more information phone Mid Murray Council on 8569 0100

www.mid-murray.sa.gov.au

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