

QCOSS

queensland council of social service inc

WORKING FOR A FAIR QUEENSLAND

**Investing in
Prevention and Early
Intervention:
*A ten year plan***

**QCOSS
August 2006**

Published 2006 by:

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**Investing in Prevention and Early Intervention:
*A ten year plan***

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SUMMARY OF RECOMMENDATIONS: A TEN YEAR PLAN 2006-2016

In 2002, the Queensland Government committed to increasing its investment in prevention and early intervention services for children and families at risk from 13% to 25% of the then Department of Families budget over the next five years. The purpose was to "...extend a hand to families before they reach crisis point and children are harmed" (Department of Families, 2002).

In 2005, QCOSS estimated that this commitment would amount to approximately \$175m per annum. The most generous estimates of the existing funding for prevention and early intervention services in 2005 was \$75m., a shortfall at that point of \$100m.

In the 2005-06 financial year, an additional \$8.5m. per annum was allocated to service provision in prevention and early intervention.

In the 2006-07 financial year, another \$5m per annum was allocated, with a commitment to raise this by another \$5m per annum in 2007-08.

Not quite the much needed and promised \$100m.

Meanwhile, in the 2006-07 budget, the funding allocation to crisis child abuse services needed to be increased yet again reaching \$503m, a three fold increase over three years!

To match the 2002 promise of 25% of the former Department of Families budget (now the Department of Child Safety and the Department of Communities), the investment in prevention and early intervention for children and families should now be at least \$240m.

To make up this amount, the investment needed is another \$125m. per annum starting this financial year.

It is proposed that the 25% target be achieved as part of a ten year plan, with the 25% keeping constant pace with any increases in the Department of Child Safety's funding.

This is the only way that the demand for services to address child abuse will ever be reversed.

Priority areas for investment are outlined in the following recommendations.

1 Services which ensure the safety and well being of children and young people

RECOMMENDATIONS

(i) Early childhood services and enhancement to Early Years Strategy

- Increase the number of high quality community based child care and/or high quality child care based in schools, particularly in areas of high disadvantage. Ensure there is a focus on addressing all factors that lead to social exclusion – cultural, linguistic, poverty, literacy etc.
- Strengthen and expand the proposed Early Years Service Centres throughout Queensland to provide the base for universal early year's services and ensure that all children and their families are able to access them (see Best Start – Victoria; Sure Start – UK, and Early Years Service Centres - Qld) . The emphasis needs to be social health outcomes, learning and school readiness, and family support. Locality based services aimed at assertively developing the linkages with other services and facilitating access to them are essential in addition to family support and early childhood workers. Critical success elements include:
 - Home visiting;
 - Low staff-to-client ratios;
 - Skilled professional staff;
 - Using a strengths perspective, though recognizing family vulnerabilities; and
 - Skills and practice expertise in recognizing and addressing factors which can lead to social exclusion.
- Expand pre-schooling years - based on evidence of significantly improved outcomes for vulnerable children (Sure Start Evaluation, Melhuish:2006).
- All programs must have both a child and family focus. There is the need for a mix of parent support (including finding employment) and direct developmental services for children.

(ii) “Middle Years” Programs

- Ensure early years programs (above) build in programs which include equivalent targeted support for older siblings.
- Initiate a program for children in primary school which encompasses similar elements to the current Department of Communities and Education Qld Youth Support Coordinator program ie. aiming to maintain and build access of young people to education.

2. Services which support and improve the functioning of families

RECOMMENDATIONS

(i) Parent education and support

The risk of child abuse and neglect is increased when parents lack child rearing skills, knowledge of child development, social support and experience difficulty accessing services.

- Increase access to information and support in parenting children and young people.
- In parallel, provide targeted parent education and support interventions for ‘at risk’ parents to improve parental knowledge, develop parent-child relationships and decrease parental stress.

(ii) Home Visiting

Mothers of new born infants require information and support. Home visiting provides a means of delivering a range of information and support services.

- Identify existing home visiting services supporting mothers of new born and young children and review their models of service delivery against evidence of what works.

- Provide all mothers and children who are disadvantaged and/or 'at risk' with home visiting services of sufficient intensity and duration to meet their needs (professional services as well as an adjunct role for volunteer mentors).
- Review Community Child Health Services as a universal and targeted prevention service (See DHS, 2004; Scott, 2006).

Families who are disadvantaged and experiencing multiple and complex issues may have difficulty in accessing and using services. Some families are particularly at risk including families affected by imprisonment, young parents and families experiencing multiple risk factors in very disadvantaged localities.

- Fund a mix of short-term and intensive, individualised support and case management strategies and resources to support vulnerable children and families and to overcome barriers in accessing the full spectrum of services including housing and employment. These must be provided prior to any contact with the Child Safety service system.
- Expand funding for family reunification support following entry into the child safety system.
- Extending previous programs including "fax-back" services involving police when domestic violence and child protection issues are assessed.

<p>3. Services that support and strengthen young people, individuals and families with multiple and complex needs.</p>

RECOMMENDATIONS

It is proposed that a "supportive housing" program be developed, based on principles, practices and programs used by *Common Ground* in New York and *The Rough Sleepers' Initiative* in the United Kingdom. Such a program must have two essential features:

- a supply of housing which is affordable to people on low and very low incomes; and
- structured, ongoing support with the ultimate aim of sustaining tenancies.

Sustained tenancies in appropriate housing will establish the opportunity for individuals and families at risk to build ongoing connections with universal and targeted services available within a locality or region. Sustained tenancies are also the foundation for stronger local relationships and well developed natural helping systems facilitated through community development programs and delivered through neighbourhood/community centres.

- Funding to support a targeted number of tenancies (individuals, couples and families) across a range of housing types and tenures including:
 - community rental housing (encompassing the Boarding House Program, Community Rent Scheme, Long-term housing program and Brisbane Housing Company);
 - public rental housing;
 - private rental housing; and
 - Aboriginal and Torres Strait Islander housing programs (public and community).

Tenancies could be selected on the basis of assessing existing need and indicators or risk.

- The program would initially be delivered in areas with acute housing affordability issues where specific programs such as the Boarding House Program are already in place. It is recommended that in the initial stages, this program aims to provide intensive support to 1000 tenancies across this system. The pilot should include a framework for evaluation resulting in clear evidence of successful tenancy management and support practices resulting in sustainment of housing. The program should be characterised by an intensive and assertive style of outreach and support.

4. Building community development infrastructure to enhance community safety, strengthen community awareness, connectedness and cohesion to protect children and young people, individuals and families.

RECOMMENDATIONS

People, groups and organisations within communities share responsibility for the safety and well being of children and young people. Communities that are cohesive and in which people feel connected are less likely to experience social problems including child abuse and neglect and will have more capacity to resolve local problems and issues collectively.

Cohesive communities can also be a way of responding to issues experienced by smaller households including where people live alone or with one other person.

- Community education workshops and community development processes community (see NAPCAN's proposal '*Play A Part*') should be funded to identify and implement prevention strategies locally and address specific risk factors within the local community. Such a community development response will engage various stakeholders and community leaders in locally responsive solutions making best use of existing resources and infrastructure.
- Funding to expand and better utilise existing neighbourhood/community centres to strengthen information, referral and community development services to enhance community safety, and strengthen community awareness, connectedness and cohesion thus protecting children and young people, individuals and families.
- QCOSS also proposes that, in the context of a whole of government prevention and early intervention strategy, local area service-planning and delivery groups be established at a zonal/regional level. These groups would be comprised of government and non-government representatives and would be required to actively support the participation of children, young people and families. The primary role of these groups would be to develop, implement and evaluate a local area prevention and early intervention plan including:
 - identifying needs and strengths (incorporating the principles and methods of needs based planning);
 - commissioning services required to meet those needs;
 - supporting the establishment of services to agreed benchmarks;
 - promoting the integration of service delivery across services and sectors; and
 - evaluating progress against agreed goals.

1. INTRODUCTION

Queensland Council of Social Service (QCOSS) is the peak body for over 700 welfare and community sector organisations in Queensland. For over 50 years the Queensland Council of Social Service has worked to promote social justice through the elimination of inequity and disadvantage.

QCOSS exists to provide a voice for Queenslanders affected by poverty an inequality and acts as a State-wide Council that leads on issues of significance to the social, community and health sectors. We work for a Fair Queensland and develop and advocate socially, economically and environmentally responsible public policy and action by community, government and business.

In this context, QCOSS proposes long term social and economic investment in prevention and early intervention which focuses on:

1. Services which ensure the safety and well being of children and young people;
2. Services which support and improve the functioning of families;
3. Services that support and strengthen young people, individuals and families with multiple and complex needs; and
4. Building community development infrastructure to enhance community safety, strengthen community awareness, connectedness and cohesion to protect children and young people, individuals and families.

This proposal builds upon the QCOSS 2006/07 budget submission, which called on the Queensland Government to develop and implement a whole of government prevention and early intervention strategy that promotes the safety and well being of children and young people aged 0-17.

QCOSS also submits this proposal in the wake of the recently announced 2006-07 State Budget where considerable additional investment was earmarked to crisis responses.

The following proposal outlines service development priorities identified by drawing on evidence of what works in prevention and early intervention as identified in NAPCAN's *Towards A Better Future for Children: Preventing Child Abuse and Neglect* (Peltola and Testro, 2006) and other recent publications drawn from Australia and overseas.

The proposal is also focussed on “whole of community wellbeing” and “life transition points” which embraces the needs of individuals and families with high and complex needs.

2. BACKGROUND: POVERTY IN QUEENSLAND

The linkage between increasing poverty for some Queenslanders and increasing notifications of neglect of children needs to be considered. In recent reports of the Commissioner for Children and Young People, the clear linkage between poverty and child abuse has been documented. It is difficult for children and families to benefit from early intervention and prevention strategies without policies that reduce the stresses in their lives resulting from the poverty of their circumstances. Moran et al (2004) suggest that “results show time and time again that it is difficult for stressed families to benefit from parenting programs when they face multiple disadvantages, and thus policies that reduce everyday stresses in the lives of the families (poverty, unemployment, poor health, poor or inadequate housing, and inaccessibility of education and training) will support parents in caring for their children.

NATSEM estimates that the level of poverty in Queensland in 2001 stood at 231,547 adults and 102,292 children (or 9.9% of the total population) (Arts et al 2006:4) Arts et al cite Lloyd, Harding and Payne (2004) who determined that the overall poverty rate in Queensland in 2001 was 10.5 percent based on a definition of poverty as being the income units with disposable income below half the median income (Arts et al 2006:5). Saunders (2004) refers to three measures of poverty resulting in various estimates for poverty in Queensland between 10% and 27% highlighting that 10% is the most conservative estimate (Arts et al 2006:5). Using ABS data on household income and net worth Arts et al estimate that 401,700 households equalling 26% of households and 21% of people who are in the lowest average gross income quintile (2006:6).

10% of the population, is the most conservative estimate of poverty in Queensland which means 400,000 people, more than 100,000 of whom are children are struggling in this Smart State.

43.1% of lone person households and 51.3% of one parent families with dependent children are in receipt of government cash pensions and allowances compared with 23.8% of the general population.

It has been estimated, using ABS data, that 44% of single parent families felt unable to raise \$2000 within a week if they needed to and 43% had a least one problem with cash flow in the last 12 months. 33% indicate they were unable to pay utilities bills on time in the same period (Arts et al 2006:10-11).

QCROSS therefore strongly suggests that any program of prevention and early intervention must be placed in the context of poverty and social exclusion in this State. Early childhood, policies focusing on the multiple and complex needs of young people, individuals and families, must also address the other stresses which they are experiencing if they are to have an impact.

We strongly support the development of a Fairer Queensland Plan – a plan to end poverty and inequality in this State.

3. PRINCIPLES TO UNDERPIN A WHOLE OF GOVERNMENT PREVENTION AND EARLY INTERVENTION PROGRAM ---

Key principles to underpin a whole of government prevention and early intervention strategy should include :

- **Universal approaches** that support and strengthen the development of children, young people, parents/carers, families, individuals and communities.
- These should include ante-natal and post-natal care, home visiting of all new born babies, early childhood strategies (health, child care, pre-school), youth development (participation in social, community cultural and economic activities and access to opportunities), parenting and family initiatives (valuing parents, parenting information and support), community development (building social connectedness and cohesion within neighbourhoods)
- **Targeted approaches** embedded in universal strategies and programs that can provide services of sufficient intensity and duration to children, young people, families and communities where early onset of risk or difficulties have been identified..
- These should include similar services to those outlined above but may be delivered to specific groups within the general population or to specific communities, in different settings, with greater intensity and over longer periods.
- **Comprehensive** in scope to acknowledge the range of factors relating to the child, young person, parents, family/carers, community and broader society that impact on the safety and well being of children and young people.
- **Holistic** in nature to address the common risk and protective factors across a range of social issues (child abuse and neglect, youth offending, family violence, child and adolescent attachment issues resulting in behavioural difficulties, child and adolescent mental health, amongst others) that impact on children, young people, families and communities.
- **Integrated** across government departments and sectors to coordinate policy and service development, and service delivery.
- **Community based** to promote ownership, flexibility and improved coordination of service planning and delivery at a local level
- **Build** upon the capacity of existing services, increase the range and spread of services available across the State and promote innovation
- **Culturally appropriate** to the needs of Aboriginal and Torres Strait Islander people, and people from culturally and linguistically diverse backgrounds
- Contribute to **community cohesion and social capital**.

4. KEY COMPONENTS OF A PREVENTION AND EARLY INTERVENTION PROGRAM

4.1 Services which ensure the safety and well being of children and young people

The evidence base: Early Childhood

“Virtually every aspect of early human development, from the brain’s evolving circuitry to the child’s capacity for empathy, is affected by the environments and experiences that are encountered in a cumulative fashion, beginning in the prenatal period and extending throughout the early childhood years (Shonkoff and Phillips in Heckman 2006:1900). Heckman highlights that “the track records for criminal rehabilitation, adult literacy and public job training programs for disadvantaged young adults are remarkably poor (2006:1900).

However it is possible to highlight early intervention programs that markedly improve outcomes for disadvantaged young people. Heckman cites the Perry Pre-School program which was an experimental program for disadvantaged young African-American children aged three-four. While the children involved in the program didn’t score higher IQ tests as a result, they:

“had higher achievement test scores than the control children because they were more motivated to learn. In follow-ups to age 40, the treated group had higher rates of high school graduation, higher salaries, higher percentages of home ownership, lower rates of receipt of welfare assistance as adults.....and fewer arrests than the controls” (2006:1901).

Heckman also cites research to suggest that “later schooling and variations in schooling quality have little effect in reducing or widening the gaps that appear before students enter school (2006:1901) and concludes that most of the positive effects are achieved through much earlier intervention.

Melhuish (2006) acknowledges the work of Heckman (2000, 2006) to explain the relative rates of return for investment in early childhood compared to later in life. The graph explains there is over-investment in schooling and post-schooling programs and underinvestment in preschool programs considered in relation to rates of return (Heckman 2006:1901; Melhuish 2006:3).

Melhuish recently reported on the evaluation of the Sure Start Program in the United Kingdom highlighting the benefits of early pre-schooling as one example. In particular the relative costs of earlier pre-schooling compared to the positive results for children were low thus highlighting the benefits both socially and economically in the longer term.

In particular Melhuish outlined a strategy including the following initiatives:

- The establishment of children’s centres in every community providing integrated services to parents and children up to the age of five.
- The provision of universal free part-time pre-school education for three and four year old children.
- Extend school provision of child care from 8.00am-6.00pm all year from children up to 14 years.

- Programs to improve the quality of the workforce and the regime to inspect child care centres for quality.

The Centres proposed will offer:

- early learning by qualified teachers combined with day care;
- child and family health services;
- parental outreach;
- family support services;
- support for children and parents with special needs; and
- links to employment services

(Melhuish (2006))

Heckman concludes that investment in younger children as policy not only promotes fairness and social justice, but “productivity in the economy and in society at large.....and that early interventions.....have much higher returns than later interventions such as reduced pupil-teacher ratios, public job training, convict rehabilitation programs, tuition subsidies, or expenditure on police” (2006:1902). Heckman also demonstrates that these types of investments are more successful on the foundation of stronger early interventions.

Daly et al (2006) have studied indicators of social exclusion for Australia’s children by state and age group. While income poverty is acknowledged, they take a broader view of poverty as encompassing a number of indicators of social disadvantage (Daly et al 2006:5).

This research is based on the Census of Population and Housing by the Australian Bureau of Statistics (ABS). The social exclusion variables considered were:

- *family type (sole parent with low income)*
- *schooling (children with low incomes in government schools)*
- *education in family (children in families with low income where no-one has completed year 12)*
- *occupation*
- *housing tenure (proportion of children in public housing and low income)*
- *speaking English at home (proportion of children where at least one parent speaks a language other than English at home and in receipt of low income)*
- *labour force status of parents*
- *personal computer usage*
- *motor vehicle ownership.*

(From Daly et al 2006:9)

The research reports that:

“children from statistical local areas in Queensland and Tasmania accounted for a larger share of the population in the bottom child social exclusion decile than they did in the population of Australian children as a whole. Almost half (48.8%) the children in the bottom decile of the index were from Queensland, almost double its share of Australia’s child population”

(Daly et al 2006:15)

Given the evidence that investment in early childhood has demonstrated successful outcomes for disadvantaged children, and that Queensland accounts for a proportionally larger share of children at risk of social exclusion, the following framework is proposed as the basis of a prevention/early intervention strategy.

The evidence base: The Middle Years

Despite the importance of the early years in the developmental experience, it is important that this does not lead to the conclusion that investment in support for children should not

continue after they have turned eight years of age. “Human development is not an unfolding of pre-programmed propensities” (Homel, 2005). At various critical points, generally termed “life transition” points, critical choices are made.

“It is the lifelong capacity for change and reorganisation that renders human beings capable of dramatic recovery from early harm” (Shonkoff & Phillips, 2000). But the fulfilment of this capacity also involves opportunity and this should be the focus of government programs in the so-called “middle years” post eight years

Research indicates that interventions during this period should emphasise the provision of opportunities and resources to overcome barriers, problems, difficulties or obstacles that could lead to consequences that are harmful to the child (Homel, 2005).

RECOMMENDATIONS

(i) Early childhood services and enhancement to Early Years Strategy

- Increase number of high quality community based child care and/or high quality child care based in schools, particularly in areas of high disadvantage. Ensure there is a focus on addressing all factors that lead to social exclusion – cultural, linguistic, poverty, literacy etc.
- Strengthen and expand the proposed Early Years Service Centres throughout Queensland to provide the base for universal early year’s services and ensure that all children and their families are able to access them (see Best Start – Victoria; Sure Start – UK, and Early Years Service Centres - Qld) with there emphasis on health, learning and school readiness, and family support Locality based services aimed at assertively developing the linkages with other services and facilitating access to them are essential in addition to family support and early childhood workers. Critical success elements include:
 - Home visiting;
 - Low staff-to-client ratios;
 - Skilled professional staff;
 - Strengths perspective, though recognizing family vulnerabilities; and
 - Skills and practice expertise in recognizing and addressing factors which can lead to social exclusion.
- Expand pre-schooling years - based on evidence of significantly improved outcomes for vulnerable children (Sure Start Evaluation, Melhuish:2006).
- All programs to have both a child and family focus. There is the need for a mix of parent support (including finding employment) and direct developmental services for children).

(ii) “Middle Years” Programs

- Ensure early years programs (above) build in programs which include equivalent targeted support for older siblings.
- Program for children in primary school which encompasses similar elements of the current Department of Communities and Education Qld Youth Support Coordinator program ie. aiming to maintain and build access of young people to education.

4.2 Services which support and improve the functioning of families

The evidence: Parent Education

Holzer (2006) states that most evaluations of parent education programs reported successful results including:

- fewer incidents of child abuse and neglect (however, only a small number of studies directly measure this outcome);
- a reduction in the prevalence of negative/unhelpful parenting attributions;
- a greater ability to use positive/productive discipline strategies rather than punitive strategies;
- increased parental competence and self-efficacy; and
- greater parental knowledge/awareness of child development, risk factors for child abuse and neglect, and child outcomes following child abuse and neglect.

The key features of successful programs (Holzer, 2006) were identified as:

- targeted recruitment;
- a structured program;
- a combination of interventions/strategies; and
- a strengths based approach.

The evidence: Home Visiting

Higgins (2006) states that most evaluations of home visiting programs reported some degree of effectiveness including:

- fewer incidents of child abuse and neglect (where this outcomes was directly measured);
- enhanced parental knowledge and parental skills;
- improvements in children's cognitive and social development; and
- increased linking of parents to health care and other services.

The key features of successful programs (Higgins, 2006) were identified as:

- programs that targeted an 'at risk' population;
- programs where services were delivered by more highly trained and qualified home visitors;
- programs where home visitors were experienced in dealing with the complex needs of many 'at risk' clients;
- programs of long enough duration to impact upon parenting or risk factors that contribute to child abuse and neglect;
- programs that matched program designs to the needs of the client group; and
- programs that focused on improving both maternal and child outcomes.

The evidence: Enhanced Family Support

Statham and Biehal (2005) identify the following messages for supporting families:

- a range of services is needed to support families with different levels of need, with clear referral routes between them;
- services should be multi-faceted and mobilise a range of services from a variety of agencies to support children, young people and their families;
- both parents and children value continuity in their relationships with the people and services that support them;
- although short-term interventions may help defuse tension and resolve crises, families with multiple, long term problems are likely to need longer-term support; and

- adolescents have specific needs, so work with them may benefit from specialisation.

More attention needs to be given to intensive, targeted interventions where there is a significant level of risk and where issues may be long standing. Victoria's Innovation Projects is one example of such an approach. It is achieving positive outcomes including reducing notifications and the entry of children and young people to child protection orders (Peltola and Testro, 2006; Thomas, 2004).

RECOMMENDATIONS

(i) Parent education and support

The risk of child abuse and neglect is increased when parents lack child rearing skills, knowledge of child development, social support and experience difficulty accessing services.

- Increase access to information and support in parenting children and young people.
- In parallel, provide targeted parent education and support interventions for 'at risk' parents to improve parental knowledge, develop parent-child relationships and decrease parental stress.

(ii) Home Visiting

Mothers of new born infants require information and support. Home visiting provides a means of delivering a range of information and support services.

- Identify existing home visiting services supporting mothers of new born and young children and review their models of service delivery against evidence of what works.
- Provide all mothers and children who are disadvantaged and/or 'at risk' with home visiting services of sufficient intensity and duration to meet their needs (professional services as well as an adjunct role for volunteer mentors).
- Review Community Child Health Services as a universal and targeted prevention service (See DHS, 2004; Scott, 2006).

Families who are disadvantaged and experiencing multiple and complex issues may have difficulty in accessing and using services. Some families are particularly at risk including families affected by imprisonment, young parents and families experiencing multiple risk factors in very disadvantaged localities.

- Fund a mix of short-term and intensive, individualised support and case management strategies and resources to support vulnerable children and families and to overcome barriers in accessing the full spectrum of services including housing. These must be provided prior to any contact with the Child Safety service system.
- Expand funding for family reunification support following entry into the child safety system.
- Extending previous programs including "fax-back" services involving police when domestic violence and child protection issues are assessed.

4.3 Services that support and strengthen young people, individuals and families with multiple and complex needs.

The evidence

Young people, individuals and families with multiple and complex needs fall through the gaps in existing program and departmental service silos, and are generally those people who are constantly moving in and out of a variety of crisis services with little or no resolution of their basic needs. Early intervention services which are able to intervene in this cycle of crisis and dependence are critical in any comprehensive early intervention program.

Saunders et al (2006:5-31) used focus groups with clients of community services to explore their experience of poverty across a number of areas including housing, health, employment, education, support, finances and social/civic engagement. Participants highlighted the following experiences:

- Deciding to forgo food in favour of paying rent.
- Difficulty meeting new friends because of the cost of recreational and social opportunities.
- Lack of qualifications.
- Language as a barrier to good employment.
- Experience of multiple disadvantage: “I’m 48 years old, I have nothing, no car, no qualifications, no recent experience of any work and I have a slight disability”.
- Poor health including dental health and the resulting barriers to employment.
- Available, affordable and accessible housing was considered essential but very difficult to find and maintain – “I have five children in one room”.
- The need for mental, psychological, physical, emotional and social support were seen as essential: “I’m from a drug and alcohol background and violence and jail, and all that circle, and to stay out of that....it’s very hard...and (it’s important) just to have that ongoing help that you wouldn’t necessarily ask for”.

A basic need which is lacking in the majority of these cases is housing. If there is a stable base, a range of support services are more easily delivered in an integrated fashion. Housing is a significant issue impacting upon the safety and wellbeing of children and families. Inadequate or unaffordable housing can be a serious factor in the capacity of a family to care for children and can even be a factor in children going into foster care.

The *Common Ground* initiative in New York and the Supportive Housing Corporation in the USA focus on people experiencing extreme disadvantage which manifests as chronic homelessness. They build housing but more importantly attach well integrated support services delivered by partnering organisations with whom they have formal protocols. This model is called supportive housing and has managed to enable people to move directly from chronic homelessness into tenancies that are successfully maintained.

Rosanne Haggerty from Common Ground highlighted cost comparisons between emergency and institutional responses to homeless people. Although these costs are based on their work in the United States, it highlights that there is a cost/benefit in establishing a supportive housing model compared to allowing people to be disproportionately represented in corrective services or psychiatric institutions.

For example, it was outlined that the cost of a psychiatric bed was \$170 455 compared to a cost of \$11 497 for supportive housing at Common Ground (Haggerty 2006:7).

While Common Ground itself focuses on developing housing and managing tenancies, they are in formal partnership arrangements with support providers including the Centre for Urban Community Services (CUCS). CUCS works as follows:

“Supportive housing has been widely recognized as a practical, cost-effective solution to homelessness Permanent housing for the formerly homeless is most successful when supportive services are integrated into a community setting. The success of our supportive housing programs is reflected in our work with tenants over time to meet long range rehabilitation goals. In each residence, CUCS staff provides mental health and medical services, educational programs, job training and employment opportunities. Individualized attention makes meaningful progress and change possible.”

CUCS Website 2006

This model has been applied and evaluated in relation to individual and also family households.

There is also evidence from Australia that strong links between housing and support can result in sustained tenancies even in circumstances where long term, complex needs exist. The Housing and Accommodation Support Initiative (HASI) is a program funded by the NSW Departments of Health and Housing. The program aims to “improve housing stability and community participation for people with a mental illness through community based accommodation and coordinated support services” (Morris et al 2005:iii). A review of the project highlighted that:

- 93.1% of clients were satisfied with their housing;
- 85 % of clients maintained their housing; and
- Clients experienced a 90% fall in hospitalisation/residential rehabilitation

Research clearly demonstrates that it is difficult for multiply disadvantaged stressed families to benefit from parenting programs alone. Real change comes from policies that reduce everyday family stresses, including poverty, unemployment, poor health, housing and education (Moran et al, 2004).

RECOMMENDATIONS

It is proposed that a “supportive housing” program be developed, based on principles, practices and programs used by *Common Ground* in New York and *The Rough Sleepers’ Initiative* in the United Kingdom. Such a program must have two essential features:

- a supply of housing which is affordable to people on low and very low incomes; and
- structured, ongoing support with the ultimate aim of sustaining tenancies.

Sustained tenancies in appropriate housing will establish the opportunity for individuals and families at risk to build ongoing connections with universal and targeted services available within a locality or region. Sustained tenancies are also the foundation for stronger local relationships and well developed natural helping systems facilitated through community development programs and delivered through neighbourhood/community centres.

- Funding to support a targeted number of tenancies (individuals, couples and families) across a range of housing types and tenures including:
 - community rental housing (encompassing the Boarding House Program, Community Rent Scheme, Long-term housing program and Brisbane Housing Company);
 - public rental housing;
 - private rental housing; and
 - Aboriginal and Torres Strait Islander housing programs (public and community).

Tenancies could be selected on the basis of assessing existing need and indicators

or risk.

- The program would initially be delivered in areas with acute housing affordability issues where specific programs such as the Boarding House Program are already in place. It is recommended that in the initial stages, this program aims to provide intensive support to 1000 tenancies across this system. The pilot should include a framework for evaluation resulting in clear evidence of successful tenancy management and support practices resulting in sustainment of housing. The program should be characterised by an intensive and assertive style of outreach and support.

4.4 Building community development infrastructure to enhance community safety, strengthen community awareness, connectedness and cohesion to protect children and young people, individuals and families.

The evidence

A clear framework for investing in prevention and early intervention and intensive support responding to complex needs will be further consolidated by broader infrastructure focussed on community cohesion, engagement and development.

The “Family and Neighbourhoods Study” (FANS) explored what prevents or could enhance informal social control in neighbourhoods. The role of neighbourhoods in better outcomes for children highlights that “delinquency, criminal behaviour and child abuse (are) all linked with higher social disorganisation, typified by few shared norms and values (and) low collective efficacy” (Barnes, 2006:3). The study considered that “informal social control can potentially reduce disorganisation more effectively than formal control” (Barnes 2006).

This study explored the impacts of some potential protective factors for neighbourhood social cohesion including:

- shared norms, discipline;
- shared norms, monitoring;
- non-family local networks;
- family local networks;
- neighbourhood participation; and
- local group involvement

(Barnes 2006)

The study included transcripts of interviews with children and parents from four different neighbourhoods:

“they’re all friendly enough, you know, and I think everyone’s sort of got a common bond because we all live in the same sort of area and I think people seem to think that you’re gonna go through the same problems, especially if you’ve got children, you know, sort of watch out for one another’s children”.

(Barnes 2006)

The study explored both formal and informal control mechanisms highlighting the relative benefits of informal control because of more shared norms and behaviours, stronger non-family networks and greater neighbourhood participation. The study looked at questions such as risk and protective factors associated with more or less informal social control and whether parents would intervene (Barnes 2006).

The study found that “many parents have strong desire to protect other people’s children” as evidenced in the follow direct quote:

“I walked to the bus stop once, just after she was born, and there was a little boy in the park no more than eight, and there were two boys about twelve years old pulling him from side to side until he ended up on the floor. I thought, I’m not having this. The other mothers in the park all ignored him. So I picked this boy up and I told the other boys to go, and I walked this little boy home”.

(Barnes 2006)

Despite examples of parents prepared to intervene in a situation where a child’s safety was at risk, some parents indicated a fear of retribution (Barnes 2006).

Children who were interviewed indicated that they wanted:

- *safe spaces to hang out with friends:*
 - *parks and shelters*
 - *streets they can use*
 - *skateboarding and other sport facilities*
 - *facilities not restricted by fees or narrow time bands*
- *lighting*
- *tolerance*

(Barnes 2006)

The study concluded that “informal control was more likely when parents knew more of their neighbours and supported them in small ways” and that “local social participation and active citizenship could improve knowledge about neighbours but are a challenge for parents, particularly in deprived areas” (Barnes 2006).

In some ways the FANS study highlights that the elements and processes of social capital are relevant to the wellbeing of children and their families. The idea that “child development is powerfully shaped by social capital” is demonstrated according to Putnam (2000:296) in that “trust, networks and norms of reciprocity within a child’s family, school, peer group and larger community have wide ranging effects on a child’s opportunities and choices, and hence on (her) behaviour and development”.

Putnam refers to *The Kids Count Index of Child Welfare* which considers factors such as:

- *“percent of low-birth weight babies;*
- *infant mortality;*
- *child death rate;*
- *teen birth rate;*
- *percent of teens who drop out of high school;*
- *rate of arrest for violent crime;*
- *percent of teens not working or studying;*
- *percent of children in poverty; and*
- *percent of families headed by a single parent”.*

(in Putnam 2000:297)

Putnam found that states “whose residents trust other people, join organisations, volunteer, vote and socialise with friends are the same states where children flourish (2000:296). Putnam is careful to point out that other factors are also involved in whether children experience a high level of wellbeing including parental education levels, poverty and other demographic aspects. He nonetheless concludes that “socioeconomic and demographic characteristics do matter – but so does social capital” and that “social capital is second only to poverty in the breadth and depth of its effects on children’s lives” (Putnam 2000:297).

Putnam also cites examples of where “child abuse rates are higher where neighbourhood cohesion is lower” (2000:298).

Putnam goes on to ask “how do trust, social networks and citizen engagement translate into nice, safe neighbourhoods?” (2000:307). As poor people have less access to economic capital Putnam argues “social capital is disproportionately important to their welfare” (2000:318).

Bullen and Onyx (1999, 2005) write that the following characteristics are likely to exist in communities where there is a lot of social capital:

- *People will feel they are part of the community.*
- *They will feel useful and be able to make a real contribution to the community.*
- *They will participate in local community networks and organisations.*
- *In a crisis they will pull together.*
- *People will mind each other's children.*
- *They will safe at home in their neighbourhood.*
- *Strangers will be welcome.*
- *No one will do everything but everyone will help out with something.*
- *There will be many networks of reciprocal relationships.*
- *People will feel valued for who they are.*

Bullen and Onyx highlight the link between social capital and community development but are clear these concepts mean different things. They write that “social capital is a pre-requisite for community development processes” but that community development “will also generate social capital which can then be used in other community development processes” (1999). Gittell and Vidal (1998:14-56) write about an array of community based change initiatives that vary greatly but “share a joint focus on people and place”. These initiatives attach importance to the idea and practice of community building which they define as “strengthening bonds among community members and increasing community capacity”. They view the outcomes of community development as including “enhancement of community commitment, capacity and control and what (they) call bonding and bridging capital (1998:23-24).

Community development activities and community/neighbourhood centres provide unique opportunities to sustain and enhance the levels of social capital in geographically defined areas. A recent project commissioned by QCOSS and undertaken by Susan Black highlighted the outputs of community development and the potential impacts for communities:

- *Provision of accessible, affordable, safe space.*
- *Strengthened individual and group identities.*
- *Better community engagement and acceptance.*
- *Provision of flexible responses to individuals, groups and communities with specific interests or needs.*
- *New, enhanced, maintained or sustained infrastructure at a local or regional level.*
- *Collective analysis and voice.*
- *Viable, sustainable organisations.*

(Black 2006:5-6)

A census of neighbourhood centres in New South Wales conducted by Bullen (2003) highlighted that they provide a wide range of activities and services responsive to the local community including:

- *provision of accessible premises for local people to visit;*
- *provision of community information;*
- *provision of support, information and referrals to other services;*
- *running classes and groups;*

- *hiring rooms to community organisations; and*
- *carrying out community development work in their community.*

(Bullen 2003:10)

In particular many of the centres surveyed provided services that supported young people, children, individuals and families including:

- *information;*
- *groups/support groups;*
- *training;*
- *emergency relief;*
- *help completing forms;*
- *youth activities;*
- *social outings; and*
- *after school care.*

Broader activities focussed on community building included:

- *community information sessions;*
- *interagency meetings;*
- *development and support for other services;*
- *rooms for community meetings;*
- *community events;*
- *advocating on community issues;*
- *local planning and research; and*
- *recruitment and support of volunteers.*

(Bullen 2003: 11)

Bullen and Onyx (2005) undertook a study of five communities in New South Wales (NSW) to measure the level of social capital. They found that compared to general members of the community who completed the *Five Communities Study*, groups, volunteers and staff from neighbourhood and community centres have relatively higher levels of social capital and bring these levels of social capital to the work of the centre they are involved with (2005:17).

The work of Putnam establishes the important role of social capital in contributing to the wellbeing of people otherwise disadvantaged. The principles and practices inherent in these activities can apply in a variety of contexts and need to be supported in their various forms. Community and neighbourhood centres and many other related services undertake a range of developmental activities resulting in clear outputs that contribute positively to the level of cooperation, social connectedness, trust and reciprocity in a local community therefore enhancing the level of social capital.

RECOMMENDATIONS

People, groups and organisations within communities share responsibility for the safety and wellbeing of children and young people. Communities that are cohesive and in which people feel connected are less likely to experience social problems including child abuse and neglect and will have more capacity to resolve local problems and issues collectively.

Cohesive communities can also be a way of responding to issues experienced by smaller households including where people live alone or with one other person.

- Community education workshops and community development processes within the community (see NAPCAN's proposal '*Play A Part*') should be funded to identify and implement prevention strategies locally and address specific risk factors within the local community. Such a community development response will engage various stakeholders and community leaders in locally responsive solutions making best use of existing resources and infrastructure.

- Funding to expand and better utilise existing neighbourhood/community centres to strengthen information, referral and community development services to enhance community safety, and strengthen community awareness, connectedness and cohesion thus protecting children and young people, individuals and families.
- QCOSS also proposes that in the context of a whole of government prevention and early intervention strategy local area service-planning and delivery groups be established at a zonal/regional level. These groups would be comprised of government and non-government representatives and would be required to actively support the participation of children, young people and families. The primary role of these groups would be to develop, implement and evaluate a local area prevention and early intervention plan including:
 - identifying needs and strengths (incorporating the principles and methods of needs based planning);
 - commissioning services required to meet those needs;
 - supporting the establishment of services to agreed benchmarks;
 - promoting the integration of service delivery across services and sectors; and
 - evaluating progress against agreed goals.

The UK Children's Fund provides a useful model for consideration and a recent evaluation of this initiative is now available (Edwards 2006).

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