

SUPPORT FOR NEW PARENTS AND BABIES IN NEW SOUTH WALES

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Position: CEO
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Mr Kevin Connolly, MP
Chair of the Legislative Assembly Committee
on Community Services
Parliament House
Macquarie Street
SYDNEY NSW 2000

Dear Mr Connolly

Support for new parents and babies in New South Wales

Thank you for the opportunity to provide comments within the current Legislative Assembly Committee on Community Services inquiry into support for new parents and their babies in New South Wales.

This response is prepared on behalf of Contact Inc. (Contact) a leading Australian organisation for isolated children, families and communities launched in 1979 as the follow-on initiative from the International Year of the Child.

The organisation has a history of successful assistance, lobbying and representation for this group with over 38 years' experience of working in rural and remote areas, serving the community by working directly with parents, carers and agencies that work in or are related to children and families in regional rural and remote Australia. Contact is dedicated to providing programs in ways that best fit local child, family, community context and need.

Contact applauds the NSW Government's commitment to improve the physical health, mental health and child protection outcomes for new parents and babies with consideration given to areas of disadvantage in relation to babies' health outcomes and to models of support for new parents in other jurisdictions and the role of technology in enhancing support services will also be examined.

Our response to this inquiry specifically focuses upon Contact's 38-year history of working within isolated contexts in NSW and the critical importance of recognising the unique needs of rural and remote areas within the inquiry considerations.

Contact looks forward to the potential of responsive rural and remote approaches being reflected within the resulting Committee on Community Services new parent and their babies inquiry recommendations and would be pleased to elaborate as required, on any of the comments presented.

Yours sincerely

A solid black rectangular box used to redact the signature of Sue Kingwill.

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Section 1

Observations

Contact's experiences of over 38 years' experiences of working in rural and remote areas of the State have reinforced the knowledge that rural and remote families and their communities face many challenges in accessing information, resources and professional parenting supports.

For some rural and remote areas, the challenge can be as straightforward at times not knowing to ask the questions – 'if you do not know what you do not know'.

Being a parent can be an exciting and rewarding experience.

It can also be challenging. Families living in rural and remote and isolated circumstances may be living away from most, if not all of their friends or extended family. A lack of opportunity to see their children interacting with other children, or to talk to other parents or access support services can erode personal confidence.

Contact's ongoing links with rural and remote communities suggest that access to professional supports and specialised information to guide new parents to meet defined requirements is not always possible. Constraints such as distance, road conditions, limited finances; climatic influences, time, work and family commitments and access to services have proven to be real barriers to individuals and services participating in their community.

A new baby in the family can change everything and often parents struggle to come to terms with those changes, particularly when it is their first child.

When baby just won't stop crying or settle, when breastfeeding seems impossible, when there is no trusted or immediate family to turn to for help or when parents feels constantly tired and overwhelmed, then it is hard to know how to change this situation or look for help.

With the exception of online web-based and parent help line services, from our experiences there are few parent specialised support parenting services in rural areas to tap into to access professional advice, guidance and assistance, to gain confidence in parenting abilities or to better assist families.

For over three decades, rural and remote communities have raised key new parenting service gaps with Contact including readily available professional parenting health supports to assist in settling babies, baby routines, parenting guidance and professional supports when it's needed before parenting challenges escalate into problems and the need for early identification of ante and postnatal depression with an adequate plan after diagnosis.

Challenges and Issues

Birthing Facilities in rural and remote areas

There is a lack of birthing facilities in a range of western NSW rural and remote communities, resulting in parents needing to relocate or travel often extensive distances to access birthing facilities in larger rural towns or regional centres such as Albury, Broken Hill, Dubbo and Wagga Wagga as examples.

When needing to relocate to larger centres for births – there are supports available relating to accommodation costs however if an expectant mother does not have reliable access to a car, their only alternate option may often be to travel by public transport via often through a Country Link coach.

In a number of instances, expectant mothers/families are not wishing to relocate out of their community to another area for the birthing and are waiting to last minute so that they commence to give birth in their local community Multi-Purpose Service, District Hospital or related Health services. These health centres may not have midwives or the facilities to support birthing, thus often resulting in medical evacuations of the birthing mother to a larger regional facility.

Supports for new parents and their babies

Contact's experiences have been that:

In a range of rural and remote western areas there are maternal child health nurse vacancies or if employed, these staff cover large geographic regions in a range of rural and remote areas, thus not readily able to follow-up with face-to-face home visits or intensive supports as needs emerge such as when a baby will not settle or breast feed.

Specialised mother craft parenting services such as Karitane and Tresillian offer rural and remote parents highly professional telephone guidance, resources and web-based programs, however their specialised parenting residential supports are in the main, based in urban Sydney-based centres.

High-risk mother and babies

Ante natal and early postnatal domestic violence is a problem and Contact believes in these situations should be identified as a high-risk baby and mother.

Section 2

Targeted responses for new parents and young babies needs

Defined Commonwealth and State Government research based and Community Programs - relevant to the inquiry.

Australian Government Approaches

■ Prime Minister and Cabinet - Stronger Communities for Children (SCfC)

SCfC aims to give Indigenous children and young people the best possible start in life through safer families and communities, nurturing educational environments, positive participation opportunities and cultural events so that children and young people grow up strong, healthy and confident.

■ Department of Social Services Communities for Children

Communities for Children work to give all children the best start in life by focussing on prevention and early intervention approaches in disadvantaged communities throughout Australia.

■ Australian Institute of Family Studies – Knowledge circle - The Australian Model of the First 1000 Days

An Indigenous-led initiative seeking to provide a co-ordinated, comprehensive intervention to address needs of Aboriginal and Torres Strait Islander children from (pre) conception to two years of age and their families to achieve health outcomes for their children by strengthening their extended family and community to realise the potential of all children. It also supports service providers to act on evidence and build service and regional level capacities to respond.

<https://www2.aifs.gov.au/cfca/knowledgecircle/discussions/children-and-young-people/australian-model-first-1000-days>

■ Australian Institute of Family Studies Child Family Community Australia- paper

‘Effective regional, rural and remote family and relationships service delivery’

Strong and healthy relationships play a vital role in building the ongoing health and wellbeing of individuals, families and the broader community. With increasing pressure on the traditional social support mechanisms of extended family, friends and neighbours, particularly in non-urban regions, there is a growing need for professional family and relationship services. However, there is limited robust evidence about what makes these services effective, especially when delivered in rural, regional or remote settings. This paper briefly reviews recent demographic, social and economic trends in rural, regional and remote Australia in order to provide the contextual background to service delivery in the region. A number of enablers and limiting factors for effective rural service delivery are outlined. These factors are based on a review of the limited evidence base on family and relationships service delivery and the broader literature on service delivery to rural settings. Considerable emphasis is given to workforce issues as a way of addressing service sustainability.

<https://www.ifs.gov.au/cfca/publications/effective-regional-rural-and-remote-family-and-relationship>

NSW State Government Approaches

■ Department of Health Western NSW Local Health - Western Integrated Health Strategy inclusive of a First 2000 Days Approach

An initiative aimed at the Integrated Care Strategy targeting and tailoring the needs of rural and remote communities, improved care and health outcomes with particular focus on closing Aboriginal health gaps.

The First 2000 days describe the period from conception to the beginning of school which is the focus of maternal, child and family health services. These 2,000 days are critically important as they impact the rest of an individual's life. The First 2000 Days initiatives defines the role of universal maternity, child and family health services in the context of the broader health, education and community services. It recognises that to deliver better health outcomes for children and families requires collaboration between relevant government agencies and the community. In Western NSW Local Health District (LHD) currently four sites implementing various projects targeted at the first 2,000 days of life. Evidence to date is that the model is improving health outcomes at birth and would benefit from expansion across the LHD.

Tele health options are currently being trialled in rural and remote areas of the Local Health District. These include:

- Provision of antenatal education, support and assessment in collaboration with specialist teams;
- Provision of 'booking in' to birthing facilities from home;
- Provide support and education to General Practitioner's and Registered Nurses caring for postnatal women in their communities;
- Provision of clinical advice and education to General Practitioner's and Registered Nurses in the emergency setting;
- Another option yet to be implemented is providing Breast Feeding education, advice and guidance using videoconferencing.

<https://www.wnswintegratedcare.com.au/Documents/Integrated%20Care%20Strategy%20MoH%20Report%20Nov16%20FINAL.pdf>

■ Department of Health – Sustaining NSW Families Program

A nurse-led evidence-based sustained health home visiting program that commences in pregnancy and continues until the child's second birthday. Working to ensure vulnerable families are assisted and linked early on in life, to ensure a seamless support system throughout a child's life.

Research Approaches

■ **The Parent-Infant Research Institute (PIRI) Perinatal depression and other difficulties facing parents and infants - Melbourne (www.piri.org.au)**

An Australian research institute whose vision is to improve the emotional wellbeing of parents and to optimise infant development. PIRI provides a unique contribution to early intervention in Australia by combining basic research and clinical expertise to address perinatal depression and other difficulties facing parents and infants. The Institute aims to become the pre-eminent body in Australia conducting research in parent-infant difficulties.

PIRI areas of specialty include:

- Supporting the mental health of parents in the transition to parenthood;
- Antenatal and postnatal depression and anxiety;
- Mother-infant relationships;
- Infant development;
- Mitigating the impacts of premature birth;
- Screening and identification of antenatal and postnatal depression;
- Developing intervention.

PIRI conducts leading research in the areas of parent-infant difficulties, prematurity, antenatal and postnatal depression. PIRI has developed the following community programs, some of which are still being trialled include:

- **Getting Ahead of Postnatal Depression** (group or individual treatment for postnatal depression). This treatment program is the only Australian cognitive behavioural therapy intervention for postnatal depression and was the basis for the development of an Internet treatment program (MumMoodBooster). This program has been robustly validated in several trials and has had wide uptake in Australia and internationally.
- **MumMoodBooster** (a web-based cognitive behavioural therapy for women with postnatal depression, developed in collaboration with Oregon Research Institute).
- **Beating The Blues Before Birth** (a group or individual treatment for antenatal depression).
- **HUGS** – a mother-infant intervention following postnatal depression.
- **Community HUGS** – a Community adaptation of the HUGS program for vulnerable mothers.
- **PRIMER** – Promoting Motivation, Empowerment & Readiness (a program to maximise help-seeking for perinatal depression through motivational interviewing).
- **PremieStart** – a parent sensitivity training program for families of premature infants.
- **Towards Parenthood** – an evaluated self-help intervention to prepare for parenthood; book published in English and Italian.

■ Fathers and Families Family Action Centre (FAC), Newcastle University

<https://www.newcastle.edu.au/research-and-innovation/centre/fac/research/fathers-and-families>

The FAC is a national leader in fatherhood research with a focus on fathers of young children and babies and supporting these fathers in their relationship with their partners. FAC's other major area of research is *Strong Families: Capable Communities*. The Centre's research in these fields provides evidence for policy and service system innovations that better mobilise capabilities to improve individual, family and community outcomes.

Well-established external collaborations with relevant branches of government, industry and community organisations support the research that is conducted at the Centre and this maximises scope for knowledge translation and exchange.

Key FAC's initiatives include:

- **SMS4Dads Project** – SMS4dads is a two-year feasibility study to develop and test a program sending text (SMS) messages to new fathers each week over the period before and after the birth. SMS4dads also checks in with dads at regular intervals to ask about their mood and fathering confidence. Those dads indicating distress or low confidence at any time will be linked to relevant information and support. This study is funded by *beyondblue* and Movember.
- **SMS4Families** – SMS4Families research will build on the success of SMS4Dads and be the first study to incorporate SMS messaging for fathers and mothers into a primary health setting over a metropolitan region. The project will deliver SMS messages to new and expecting parents. With a total catchment population of more than one million the testing of recruitment, materials and impact will produce important information on delivering IT-based interventions for parents in a real world setting.

Carrington Health Melbourne, are the lead agency providing funding to The University of Newcastle for various phases of this project including software development, messaging, monitoring, referral and data collection for research deliverables

- **SMS4dads in cases of severe maternal mental illness (SMMI)** – New mothers with severe mental illness need special care for themselves and their newborn. Partners of these mothers also need support. SMS4dadsSMMI will develop messages that are suitable for texting to mothers with severe mental illness and their partners. SMS4dads is partnering with Queensland Centre for Perinatal and Infant Mental Health (QCPIMH) to trial the messages in two rural areas of Queensland.
- **Stayin'On Track Project** – is a program designed to transition young Aboriginal men to fatherhood through a user-developed website, and will also test a smartphone app called Mood Tracker and Dad Tracker. Young Aboriginal fathers from Newcastle, Tamworth and Moree are co-investigators and have recorded their own stories on film to be used in the phone app.
- **Father-Inclusive Practice Guide** – this report describes the recent evidence that explains how fathers may be relevant to the work of an agency such as Berry Street Inc. which provides family services to support parents to better care for and nurture their children.

- **Text4Two – Strengthening Parenting Partnerships** – the main aim and objective of this Project is to develop and evaluate a combined text and email-based information and support system that is focused on strengthening parenting partnerships. Text4Two will send no-cost (for consumers) text messages, and identical emails, containing practical co-parenting information and links, simultaneously to both parents from 6 weeks to 46 weeks following their child's expected or actual date of delivery on the platform developed and tested through SMS4dads. This research is supported by *beyondblue* with funds donated through Movember Foundation.
- **Connecting2U** – A research service agreement with Children's Health Queensland Hospital and Health Service. Children's Health Queensland's, The Queensland Centre for Perinatal and Infant Mental Health (QCPIMH) in collaboration with the University of Newcastle, Family Action Centre (FAC) are undertaking research in Queensland, that will trial a digital mental health promotion and prevention intervention for parents, who are at greater risk of experiencing emotional distress in the perinatal period (pregnancy and early parenthood). The project will develop, implement and evaluate the provision of information and mental health support, via the use of smart phone text messaging (SMS) to a targeted group of parents, with an infant less than six months of age. The research aims to recruit participants from two public perinatal mental health services and deliver SMS messages to this group of parents, in regional and rural areas in Queensland.
- **Fathers and Family Violence** – Family violence is a critical national health problem and fathers are a key group to include in finding solutions the approach to this complex task is based on FAC experience researching and working with fathers across the community, and in teaching the Master of Family Studies postgraduate course on how to effectively work with the whole family to increase family well-being and eliminate violence. The focus is on early intervention in reducing and preventing family violence.
- **Small Steps DADS&DV** – FAC have developed a workshop for professionals wishing to initiate conversations with families where violence may be occurring.

See the workshop for professionals on our Workshops and Training page.

<https://www.newcastle.edu.au/research-and-innovation/centre/fac/workshops-and-training>

Community Approaches

■ Maranguka Justice Reinvestment Project Bourke

<http://www.justreinvest.org.au/justice-reinvestment-in-bourke/>

Maranguka Justice Reinvestment is a collaborative process involving a number of government and non-government agencies. Working towards the overall outcomes, both health and socioeconomic. Western NSW Local Health District participates at both the local work group level and the regional governance group. Attached is a snapshot overview of the project.

■ **Contact Incorporated**

<http://www.contactinc.com.au>

Contact has sought to access funding to develop programs to provide specialised parenting enterprises designed to offer rural and remote access to parents as well as the trusted child and family agencies that have ongoing links with the families with a range of professional parent support options. The aim of these proposed initiatives principally have been to respond to evidenced defined gaps in NSW rural and remote areas for regional families and communities to have access to specialised parenting programs and supports to best meet their needs, reduce the impact of isolation and provide some solutions on a local level.

To date funding applications have not met with success.

An overview of the proposed professional parenting support services that would be contracted with successful funding would provide assistance through a variety of ways including:

- Designated 1800 free call specialised parenting support telephone service;
- Delivery of professional development programs in remote communities for families with young children;
- Deliver professional development and support programs in the community to agencies that have a role to work with babies, young children and their families;
- Using technology such as webinars to facilitate links with specialist supports, facilitate parenting support programs and forums and disseminate information;
- Investigating regional options to better assist families in crisis such as working with local health providers and specialised parenting agency to enable earlier identification of ante and postnatal depression with an adequate care plan after diagnosis including options such as a dedicated Tresillian or Karitane dedicated postnatal bed in regional hospitals such as Dubbo and Wagga Wagga for parents with problems and these parents receiving support via Tresillian or Karitane.

It has been intended that initially these programs would be offered as a trial in designated remote regions of NSW before expansion to other areas.

■ **Teenage Parents – BushMob and Contact Inc. Partnership - Central Australia**

Most teenage pregnancies in Australia, as elsewhere, are unintended. Australian data (2015) indicates that births to mothers aged 19 years or younger were 2.8% of all Australian births. Although the numbers are small, the risks factors are greater for adolescence when considering socioeconomic disadvantage, sexual abuse in childhood, involvement within the child protection system, unstable or poor housing arrangement, a family history of teenage pregnancy and being Indigenous.

Population groups that are more likely to become young parents include Aboriginal and Torres Strait Islander children and young people, children and young people in out-of-home care, those excluded from or not at school, and those not doing well at school.

Teenage motherhood occurs more often within communities where poverty, Aboriginal and Torres Strait Islander status and rural/remote location intersect. The birth rate among Indigenous teenagers was more than 5 times the non-Indigenous rate (72 compared with 14 per 1,000 females aged 15–19 years). The rate among all teenagers increased with geographical remoteness, rising from 12 per 1,000 in *Major cities* to 57 in *Remote and very remote* areas.

The rate among teenagers living in the most socioeconomically disadvantaged areas was almost 8 times that of teenagers living in the areas of least disadvantage (30 compared with 4 per 1,000). *Australian Institute of Health and Welfare (AIHW 2017)*

Pregnant teenagers and their children from these profiles are vulnerable to numerous adversities “Teenage motherhood is associated with significant health and social problems for the infant and the mother. Children born to teenage mothers are at greater risk of low birth weight and increased morbidity during their first year of life, tend to develop more behavior problems than children of older mothers and are more likely to be born into, and continue to live in, social and economic disadvantage.” (*AIHW 2011*)

BushMob Aboriginal Corporation (www.bushmob.com.au) and Contact have worked in partnership over the last two years. BushMob and Contact have agreed that within the contexts both parties work within in the Northern Territory, there is a need for approaches to seek to decrease the risk profile and trajectory of young people and improve their capacity for safe and effective parenting.

BushMob runs a residential program for young people aged 12 to 25 years of age, wanting to get their lives back on track without alcohol, drugs or sniffing. Contact within the Northern Territory context delivers a range of early childhood education parenting supports and community capacity programs with isolated children, families and community members within the Utopia Homelands of Central Australia. Contact has a base within BushMob Alice Springs facilities.

The BushMob/Contact proposed teenage parent project model, is seeking to address:

- The stigma associated with young parenting, addressing the barriers that inhibit those opportunities;
- Build engagement and effective referral pathways for a co-ordinated holistic approach based on young parents need;
- Build parenting confidence and supports for genuine informed goals for young parents decision-making, problem-solving and coping skills, and with respect for their individuality; and
- Explore ways to support mental wellbeing of parents and babies.

Strategic priorities are to:

1. Better equip Indigenous teenagers to prepare for parenthood and their children and young people with the foundations for a healthy life.
2. Support young people to become strong and resilient parents and adults.
3. Support young people to make informed decisions about their bodies, their children and future.
4. Work from a strength based approach, consulting and valuing young parents thoughts and ideas, fostering personal and resilience agency.
5. Recognise, value and support culture, community and identity in raising healthy and happy children and young people.
6. Consult with Elders to respectfully, as an ongoing practice, to ensure cultural practices and requirements are imbedded throughout and engage them in the design of the resulting young parenting program/s.

Contact has also approached the Family Action Centre to explore the potential of a specialised app for teenage parents based on the SMS for Dads app model.

■ **Karitane**

<http://www.karitane.com.au>

Becoming a parent is an exciting and challenging time and Karitane have been the leaders in parenting services since 1923. They provide education and support on the unique challenges of parenting to mums and dads with children from birth to 5 years of age. All services are evidence-based and delivered by a caring and highly trained professional team of family health nurses, pediatricians, social workers, psychologists and psychiatrists offering complete holistic care.

Karitane support new parents around sleep and settling, establishing routines, feeding and nutrition, toddler behaviour and pre and postnatal anxiety and depression.

Karitane is a registered charity, supported by the NSW Ministry of Health and the Department of Family and Community Services.

■ **Tresillian**

<http://www.tresillian.org.au>

Tresillian is an early parenting service offering families guidance in the early years of their child's life. Tresillian supports new parents around breastfeeding and settling baby, as well as dealing with post-natal depression and nutrition. Each year Tresillian assists close to 80,000 families with a baby, toddler or young child.

Tresillian takes pride in offering caring, personalised advice to parents in the early years as we help them gain confidence in their new roles as mums and dads.

GROWING OUR KIDS UP

SAFE, SMART & STRONG



GOALS FOR CHILDREN

Every aboriginal Child...

- Is born healthy and on country
- Feels safe, respected & connected to country
- Arrives at school ready to learn



GOALS FOR PARENTS

Every aboriginal Parent...

- Values learning for their kids from birth
- Feels supported and confident in their parenting
- Supports their children's connection to culture & country



GOALS FOR CHILDREN & YOUNG PEOPLE

Every aboriginal Child & Young Person...

- Feels connected to school
- Is engaged in positive activities with strong peer support
- Is equipped with the life skills needed for adulthood
- Completes Year 12
- Is supported to address the impacts of trauma, grief & loss
- Who has been removed from Bourke returns to a nurturing and supportive environment



GOALS FOR MEN

Every aboriginal Man...

- Protects his family and community
- Nurtures his children
- Is a custodian of his culture



EARLY CHILDHOOD

MORE children in early learning programs

Children with a developmental vulnerability



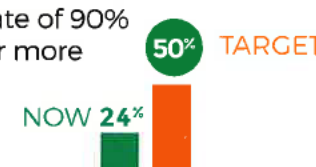
PRIMARY SCHOOL

Students receiving long suspensions



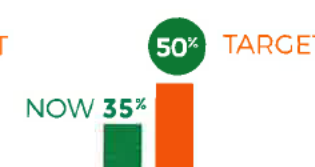
ATTENDANCE

High school students with attendance rate of 90% or more



COMPLETING SCHOOL

Students completing year 12



COME HOME STAY HOME

Men 18-25 reoffending within 6 months of court appearance



LEADERS

MORE men obtaining training or employment

MORE men taking up leadership and mentoring roles in the community



SAFE FROM THE START

PREGNANCY & BIRTH

Pregnant women see a doctor in the first 20 weeks of pregnancy



Families receive regular home visits in the first 2 years of a child's life



SMART YOUNG PEOPLE

HIGH SCHOOL

MORE students making a successful transition to high school



A DIFFERENT PATH

Young people reoffending within 6 months of court appearance



LESS offences committed by young people

(top 5 offence categories) **AIM TO BY 50%**

STRONG ROLE MODELS & MENTORS

SHUTTERS UP!

LESS boarded up shops

SAY NO TO VIOLENCE

LESS domestic violence offences

AIM TO BY 50%



TARGETS
BY 2020





GOALS FOR SERVICES

Every service supporting Aboriginal people in Bourke:

- Recognises the Bourke Tribal Council & adheres to the Maranguka protocol
- Engages Aboriginal people in the design & delivery of services & supports to Aboriginal people
- Is flexible and pulls together to meet people's needs
- Works within an effective case management system that has one plan.



UNDERSTANDING

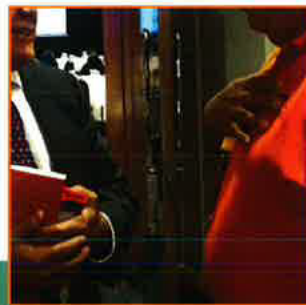
MORE individuals and families in case management with one integrated case plan

MORE families who report case management is meeting their needs

INCLUSION

MORE services that recognise Bourke Tribal Council through MOU or protocol

MORE services that undertake annual cultural training



JUST
REINVEST
NSW

JUSTICE REINVESTMENT A SMARTER SPEND

Creating alternative pathways for young people and building a safer community.



PRISON



PREVENTION

What needs to happen in Bourke?



A STRONG,
SAFE
COMMUNITY

JUNE 2016



JUST
REINVEST
NSW

GROWING OUR KIDS UP



SAFE
SMART &
STRONG