A place based approach to addressing inequities for children: How can research help?

INRICH
Montreal, June 2015

Associate Professor Sharon Goldfeld
Paediatrician and Research Fellow
Centre for Community Child Health, Royal Children's Hospital
Group Leader, Policy, Equity and Translation,
Murdoch Childrens Research Institute
NHMRC Career Development Research Fellow
sharon.goldfeld@rch.org.au
"A society that is good to children is one with the smallest possible inequalities for children, with the vast majority of them having the same opportunities from birth for health, education, inclusion and participation."

(Stanley, Richardson & Prior, 2005)
Social determinants

• “conditions in which people are born, grow, live, work, and age.”

• “social injustice is killing people on a grand scale”

3. Policy/societal level

Societal-level determinants
- Health care systems characteristics
- Racism

Community-level determinants
- Community social capital
- Social support

Family-level determinants
- Family income
- Genetic endowment
- Predisposing characteristics

Child-level determinants
- Child’s health care
- Child health behaviours
- Health behaviours of parents
- Health status of parents
- Performance of schools
- Public safety
- Inequalities between economic groups

Child development

CHALLENGES FOR CHILDREN’S POLICY (IN AUSTRALIA)
What does the A/EDI tell us?

- adaptation of the Canadian Early Development Instrument
- 104 item questionnaire
- Items form scores on 5 domains
  - Physical health and development
  - Social competence
  - Emotional maturity
  - Language and cognitive skills (school based)
  - Communication skills and general knowledge
- Developmental vulnerability reported for each domain and for one or more and two or more domains
Economic growth: the rate of change of real GDP (measure: percent)

http://www.theglobaleconomy.com/compare-countries
Millennial morbidity (2000–present): disorders of the bioenvironmental interface

- Socioeconomic influences on health— including poverty
- Health disparities
- Technological influences on health
- Overweight and obesity
- Increasing mental health concerns

Tackling wicked problems is an evolving art. They require thinking that is capable of grasping the big picture, including the interrelationships among the full range of causal factors underlying them. They often require broader, more collaborative and innovative approaches. This may result in the occasional failure or need for policy change or adjustment.

Lynelle Briggs
Australian Public Service Commissioner 2007
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Lynelle Briggs
Australian Public Service Commissioner 2007
2. Community/system level

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What is it about where you live that makes a difference to child development?
Neighbourhood effects research: “location matters”

‘If numerous and seemingly disparate outcomes are linked together empirically across neighbourhoods and are predicted by similar structural characteristics, there may be common underlying causes’

Sampson et al. 2002, p. 447
Disadvantaged communities:

• There is significant social inequality among neighbourhoods.

• Social and health problems tend to cluster together and can include crime, adolescent delinquency, social and physical disorder, low birth weight, infant mortality, school dropout, and child maltreatment.

• There are neighbourhood predictors common to many children and adolescent outcomes e.g. concentration of poverty, single-parent families and rates of home ownership, length of tenure.

• The concentration of poverty has increased in the last few decades as well as the concentration of affluence at the higher end of the income scale.

(Sampson et al. 2002)
This figure shows the average earnings of three groups of children whose families enrolled in the MTO Experiment before they turned 13: those who grew up in public housing projects (Control), those who received standard Section 8 housing vouchers, and those who received vouchers to move to low-poverty neighborhoods (experimental).

**Cost Effective Policy**

*The Moving to Opportunity experiment increased incomes by 31% for children who moved before age 13*

- **Control Group**
  - Average earnings = $11,270

- **Section 8 Voucher**
  - Average earnings = $12,994
  - 15% higher than control ($p = 0.1$)

- **Experimental Voucher**
  - Average earnings = $14,747
  - 31% higher than control ($p < 0.01$)

Chetty, Hendren and Katz, 2015
Strong communities derive from:

• The economic/natural/human/social capital assets of a community
• The knowledge within the community that allows for the sustainable use of assets
• The ability to collectively organise in order to work through issues, set priorities, and use resources to their full capacity
• Local institutions that provide governance structures through which collective action can be organised

A snapshot of place-based activity promoting children’s wellbeing
Collaborate for children: scoping project

Produced by the Centre for Community Child Health
Funded by the Australian Government Department of Education
November 2014

The evidence: what we know about place-based approaches to support children’s wellbeing
Collaborate for children: scoping project

Produced by the Centre for Community Child Health
Funded by the Australian Government Department of Education
November 2014
Frameworks for change
Collective Impact
By John Kania & Mark Kramer

Stanford Social Innovation Review
Winter 2011

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WHAT LIES BENEATH
I'm sure glad the hole isn't in our end...
Community system change:
Data informed
Hypothesis driven
Evidence based
Community indicators

Community engagement

Improvement science

Stacking evidence based interventions

Innovation

Implementation
Community indicators

Community engagement

EVOLUTION

Implementation

REVOLUTION

Innovation
Community indicators

Community engagement

EVOLUTION

Implementation

REVOLUTION

Innovation
Kids in Communities Study

KICS model

Measuring community level factors that may be influencing children’s development in 5 key domains or environments:

- Social capital environment
- Service environment
- Governance environment
- Physical environment
- Socio-demographic environment
Project Partners:
## Environments of influence

<table>
<thead>
<tr>
<th>Domains/Environments</th>
<th>Key proposed indicator areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical</td>
<td>Parks, public transport, road safety, housing</td>
</tr>
<tr>
<td>Social</td>
<td>Social capital, neighbourhood attachment, crime, trust, safety</td>
</tr>
<tr>
<td>Socio-economic</td>
<td>Community SES, Community demographics</td>
</tr>
<tr>
<td>Service</td>
<td>Quality, quantity, access, coordination</td>
</tr>
<tr>
<td>Governance</td>
<td>Citizen engagement, governance structures and policies</td>
</tr>
</tbody>
</table>
Learning from the extremes: off diagonal communities

<table>
<thead>
<tr>
<th>AEDI DV1% Quintile</th>
<th>Low % Vulnerable 1 or more domain</th>
<th>1</th>
<th>2</th>
<th>3</th>
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</table>

SEIFA IRSD Quintile

- **High level of disadvantage**
- **Low level of disadvantage**
## Measuring the domains

<table>
<thead>
<tr>
<th>Domain</th>
<th>Main methodologies to explore the domain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service</td>
<td>Focus groups, community surveys, stakeholder interviews, GIS, phone calls to service providers and yellow pages, parent and service surveys</td>
</tr>
<tr>
<td>Social</td>
<td>Focus groups, community surveys</td>
</tr>
<tr>
<td>Physical</td>
<td>GIS, desktop park audits, community surveys</td>
</tr>
<tr>
<td>Governance</td>
<td>Focus groups, community surveys, grey literature analysis/document analysis, stakeholder interviews</td>
</tr>
<tr>
<td>Socioeconomic</td>
<td>ABS stats, analysis of ABS SEIFA and AEDC data to identify on- and off- diagonal communities</td>
</tr>
</tbody>
</table>
State and federal government policies

Local Government
Governance domain:
Governance structures & policies

Community
Social domain:
Social capital, neighbourhood, attachment, crime, trust, safety

Service domain:
Quantity, quality, access and coordination of services

Physical domain:
Parks, public transport, road safety, housing

Governance domain:
Citizen engagement

Socio-economic domain:
Community SES

Family

Child

Kids in Communities Study
Goldfeld at al
Social Indicators, 2014
Community indicators

Community engagement

Improvement science

Implementation

Stacking evidence based interventions
Blue Sky Research Project
Re-design, change & sustain
All parents are supported

Services are family led and child centred

Services are easy to find, use and navigate

A smooth transition to school with appropriate support

All families have access to high quality universal services
Improvement science

- Focus on population outcomes
- Use data to identify ‘hotspots’
- Systems thinking (and action)
- Align efforts
- Consumer centred
- Use networks to produce & accelerate innovation
- Test promising ideas quickly but rigorously

Adapted from Inkelas, 2012
Collaborate
Act

Act and measure

90% of parents report services support them to **identify** their child’s needs

90% of parents report services support them to **respond** positively to their child’s needs

90% of parents report having **connections** (to services and other people) that assist them to support and promote their child’s healthy development
Act and measure

PDSA action: improving literacy
Measure

Monthly parent survey

Reach survey

Network survey

To ensure we provide the best possible support for your child and family, we are making improvements to our service as part of our involvement in the Blue Sky Project supported by the Murdoch Children's Research Institute. Your thoughts and feedback are important to us. We want to hear about your experiences at this service. The information collected in this survey may be used to improve our service and will not affect any services you may receive now or in the future. There are no right or wrong answers. Your name and your child's name are not on this survey. Thank you.

Note: Please check only one yes or no box for each question, like this →

During today's visit, did the staff in this service:

1. Pay close attention to what you were saying?
2. Let you tell your 'story' (not interrupting)?
3. Talk with you about how your child is growing and developing?
4. Ask if you have any concerns about your child's learning development?
5. Respect you as an expert about your child?
6. Help you to feel confident to act on what was discussed today?
7. Talk with you about resources for parents and families in your area (e.g. kindergarten, playgroups)?

In the last three months, did the staff in this service:

1. Talk with you about enrolling in early years programs (e.g. kindergarten, early child care)?
2. Talk with you about the importance of reading with your child?
3. Talk with you about what you can do at home to help your child learn to read?

In the last twelve months, please identify which services or resources your family have used:

- Mother and child health nurses at the centre
- Main care with the neonatal and child health nurse
- Immunisation services
- Breastfeeding support services
- Nannypet groups
- Postnatal support services
- Playgroup
- Supported playgroup (with playground)
- Online (including long day care and occasional care)
- Family play care
- Kindergarten
- Parenting programs (e.g. Trips 4 Programs)
- Primary school
- Out of school hours care
- Library

1. From the list below, please identify which you have visited with reference to:

   - Mental health services
   - Speech pathology services
   - Occupational therapy services
   - Audiology services
   - Social work services
   - Early intervention services
   - Family support services (e.g. toddler group, family services)
   - School family services
   - Financial services
   - Child care
   - Further education
   - Family referral services

   - Others (please specify):
Measure

Talk about importance of reading

- Primary School
- MCH
- ECEC
- Other

cycle 1  cycle 2  cycle 3
Results consider child development screening practices, service coordination & family centred care.
<table>
<thead>
<tr>
<th><strong>Child outcomes:</strong> Is children’s learning and development on track?</th>
</tr>
</thead>
<tbody>
<tr>
<td>AEDI</td>
</tr>
<tr>
<td>NAPLAN</td>
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<tr>
<td>Parent survey</td>
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<tr>
<td>Melton MEYP Survey</td>
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</tbody>
</table>

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<tr>
<th><strong>Parent actions and behaviors:</strong> Is parenting improving?</th>
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<tr>
<td>TBC</td>
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<thead>
<tr>
<th><strong>Family conditions:</strong> Do parents have what they need to support their children?</th>
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<td>TBC</td>
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<table>
<thead>
<tr>
<th><strong>Care provided to families:</strong> Is care improving?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent survey</td>
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<thead>
<tr>
<th><strong>Work as a system:</strong> Are the partners working as a system?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average ease-of-referral</td>
</tr>
<tr>
<td>Average linkage frequency</td>
</tr>
<tr>
<td>Average # of services used by parents</td>
</tr>
<tr>
<td>Parent survey</td>
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</tbody>
</table>

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<thead>
<tr>
<th><strong>Learning Culture:</strong> Do organisations have a supportive learning culture?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practice change</td>
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<td>Practice change</td>
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</tbody>
</table>
Learn

Pre-Work  Set improvement goals, collect baseline data and prepare for Learning Session 1

Action Period 1  Adapt and test improvement strategies

Action Period 2  Further refine improvement strategies, begin spreading successful changes throughout the organization

Action Period 3  Adopt successful changes throughout the organization

Learning Session 3  Document work, report on results and lessons learned

Learning Session 2

Ongoing support: Phone conferences, monthly team reports, on-site peer-to-peer visits

Community indicators

Community engagement

Improvement science

Innovation

Implementation

Stacking evidence based interventions
Making decisions “in the dark”??

... or using population-based research evidence

Birthday Game Disasters
Reducing Inter-generational Social Disadvantage in Australia
# Stacking interventions...

<table>
<thead>
<tr>
<th>Antenatal</th>
<th>Early childhood</th>
<th>School years</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Antenatal support</strong></td>
<td><strong>Early childhood education and care (0-5 years)</strong></td>
<td><strong>School-based early intervention</strong></td>
</tr>
<tr>
<td>• Targeted at parents-early intervention of modifiable risk factors eg smoking, alcohol, mental health</td>
<td>• Targeted at all kids (in groups)</td>
<td>• Targeted at kids (in groups and 1:1) who are learning-disadvantaged. Target schools and individuals</td>
</tr>
<tr>
<td>• Centre-based</td>
<td>• High quality for all children</td>
<td>• School-based</td>
</tr>
</tbody>
</table>
| • Outcomes:  
  - Healthy baby weight  
  - Good brain health  
  - Appropriate care  
  - “Adequate parenting” | • Delivered out of home in a “pseudo-home-learning environment” | • Outcomes: Children on optimal learning pathway by year 3 |

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</thead>
<tbody>
<tr>
<td>Antenatal support</td>
<td>Sustained nurse home-visiting</td>
<td>Early childhood education and care</td>
<td>Parenting programs</td>
<td>School-based early intervention</td>
</tr>
<tr>
<td>• Targeted at disadvantaged parents; health and development support</td>
<td>• Targeted at disadvantaged parents; health and development support</td>
<td>• Targeted at all kids (in groups)</td>
<td>• Centre-based programs, targeted at parents whose children have behavioural issues (higher prevalence in disadvantaged families)</td>
<td>• Targeted at kids (in groups and 1:1) who are learning-disadvantaged. Target schools and individuals</td>
</tr>
<tr>
<td>• Home-based</td>
<td>• Outcomes: parents develop parenting skills</td>
<td>• High quality for all children</td>
<td>• Delivered in groups or 1:1</td>
<td>• School-based</td>
</tr>
<tr>
<td>• Outcomes: parents develop parenting skills</td>
<td></td>
<td>• Delivered out of home in a “pseudo-home-learning environment”</td>
<td></td>
<td>• Outcomes: specific emerging behavioural issues are remedied</td>
</tr>
</tbody>
</table>
Our intent is to measure which on-the-ground factors are driving the gap between effort and outcomes.

<table>
<thead>
<tr>
<th>Effort</th>
<th>Quantity</th>
<th>Quality</th>
<th>Take-up</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Magic 5 standards and dosages</td>
<td>Are the services <strong>available</strong> locally in sufficient quantity, relative to the size of the target population?</td>
<td>Are the services delivered with sufficient <strong>quality</strong>, relative to defined performance standards?</td>
<td>Are the services <strong>used</strong> by the target population, at the right dosage?</td>
<td>Outcomes in target populations</td>
</tr>
</tbody>
</table>

**Contributing factors:**
- Policy settings
- Local leadership
- Awareness
- Funding
- Agreed standards
- Affordability and accessibility
- Appeal (motivation, peer pressure)
I would not give a fig for the simplicity this side of complexity, but I would give my life for the simplicity on the other side of complexity.

Oliver Wendell Holmes
(US Supreme Court judge)
Many things we need can wait, the child cannot. Now is the time his bones are being formed, his blood is being made, his mind is being developed. To him we cannot say tomorrow, his name is today.

Gabriela Mistral
(1889-1957)