

**Report on the findings from the Salisbury Communities for
Children Initiative facilitated by Ingle Farm Salvation Army
regarding the 'Community Strategic Plan' - consultation with the
community.**

UniSA and the Salvation Army

July 2005

This report was provided by Ms Lisa Nechvoglod from University of South Australia, de Lissa Research Institute of Early Childhood and Family Studies to the Salvation Army to use for preparation of their 'Community Strategic Plan' for approval to the Department of Family and Community Services.

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Executive Summary

Research was carried out by the staff of the Salvation Army, Ingle Farm to identify gaps in the services provided for families with young children aged 0-5 years living in the Salisbury, Para Vista, Pooraka and Ingle Farm areas. Information collected from the research will contribute to the development of a strategic plan which will utilise allocated commonwealth government funding to provide much needed support for families in the area. The Department of Family and Community Services is currently providing funding for the development of an Early Childhood Plan to support and develop better services and improve outcomes for children in South Australian communities.

There were two parts to the research, the first relates to parents views about what is needed in the community as well as where they go to access help for themselves and their families, the second part of the research relates to the views of service providers. Although the research on parent's views was based on a small sample of parents (approximately 10% of the population), weak trends can still be identified and used to guide the development of a strategic plan. This report provides an indication of recurring themes and reactions among parent participants rather than exact numbers of participants who felt a certain way. The data from the service providers was based on information from approximately 30% of services in the area, this provides a more reliable sample and clear directions can be obtained from these results.

The main findings from the parent responses were clear when it came to where they went to access information and help for health care, baby care, education and relationships. Parent's needs in the community mainly focused on better medical services, better playground facilities and a 'one stop shop' where they could easily access information relating to young children and families.

Service providers in the area indicated the need for parent education and access to social workers which they saw as important gaps in the existing services. Services highlighted the need for immediate access to speech pathologists for children in the community. Multicultural playgroups and culturally appropriate family services were also highlighted by service providers as lacking. The research has guided the strategic findings of this report and focuses on the need for better services including education for parents, affordable healthcare and access to educational facilities for early childhood such as supported playgroups and Kindergym. Also, support for parents and access to appropriate information and counsellors were all key issues coming out of this research. Finally, the development and maintenance of local infrastructure and community facilities were also highlighted as needing improvement.

Research Objectives

The objectives of this research were;

- a) Carry out a needs assessment through surveying parents with young children aged 0-5 years and service providers in the community and,
- b) Identify the gaps in services provided for parents with young children aged 0-5 years living in the community in an effort to improve support, assistance and outcomes for both children and families.

Research methodology

There were two distinct aspects to the qualitative research, the first involved parents and the second involved service providers. The parent survey will be discussed first followed by the research methods used for service providers in the area. Both groups were consulted during this research in an effort to give informative and balanced evaluation of the needs of the community.

Parent Survey

The survey questionnaire was developed for parents by staff of Salisbury Communities for Children based on assessing needs in the priority areas of the initiative. Parents with young children aged 0-5 years were asked what particular supports they were accessing, or have accessed, for information in relation to health care, baby care, relationship issues and educational issues. Parents were then asked to identify any additional supports that they thought may be useful in the community. The methodology adopted for this section of the project allows the researcher to gain a broad insight into the proportion of respondents holding particular views and enables a more detailed exploration of issues and potential solutions.

The survey was distributed by staff of Salisbury Communities for Children part of The Salvation Army Ingle Farm at 19 different sites within the council area. The participants were selected to include a randomised spread both geographically and socio-economically. All participation was on a voluntary basis. Participants were selected from existing playgroups, childcare centres, kindergartens, preschools and a recreation centre in the designated suburbs. Parents at these sites were either interviewed by the researchers for the project or wrote their responses on the questionnaire provided. Respondents from the recreation centre were indigenous families.

Phone interviews were conducted with severely disadvantaged parents living in supported accommodation in the area. In this situation parents were contacted by telephone and the program team leader interviewed parents over the phone.

An advertisement was placed in the local messenger newspaper with a printed survey on the 27th June, 2005. Seven surveys were returned via post to back to Salisbury Communities for Children group from anonymous parents including one in response to the article that appeared in the local newspaper. The other responses came from parents who had filled out the questionnaire which researchers left at childcare centres.

The final group of parents was recruited from shopping centres. The project officer, research assistant and a parent representative asked passers by in the shopping centre to participate, in this case parents were asked the questions and their answers were recorded by the interviewee. Participants were given a voucher for their involvement in the survey the voucher was a complimentary ice-cream from Wendy's. The Manager of Ingle Farm Wendy's was approached by Communities for Children about offering vouchers to participating parents after expressing an interest in supporting the initiative.

The survey was also translated into Vietnamese and distributed to a local church in the area which is attended by many Vietnamese families. The survey was also distributed to a neighbourhood centre in the area. Unfortunately, no surveys were filled out and returned by Vietnamese families and so the views of this sector of the community have not been included in the report. Attempts to gain information from this sector are still continuing.

In total there were 125 respondents, this equates to approximately 10% of the total population in the area. All the information from the parent surveys was entered into Excel spreadsheets and analysed for trends.

Services Survey

The survey questionnaire was developed for service providers by staff of Salisbury Communities for Children based on assessing needs in the priority areas of the initiative. Service providers were asked first about the services and information they provided and then about any additional supports they thought parents in the community needed. Services involved in the survey included neighbourhood houses, libraries, kindergartens, schools, medical clinics, childcare centres, playgroups, places of worship and community and welfare organisations. Staff sent surveys to all of the service providers in the council area via post. Surveys were either returned via post or fax. There were 30 responses from the service providers and equates to approximately 30% return rate, which provides a good sample.

Results

This section highlights the types of services and supports identified by parents and service providers as being available during the first five years of their child / children's lives. Results are reported first from the parent respondents under:

- a) Location
- b) healthcare
- c) baby care
- d) relationships
- e) education.

Results from parents responses to the second part of the survey are reported in the Section 2, titled what are the problems with the existing services and what parents say the need. Results from service providers are reported under Section 3 the heading what service providers say is needed in the community.

This is followed by Section 4 which is a discussion of the overall results and strategic directions resulting from the research.

Section 1

a) Location

Table 1: Parent Respondents by Location.

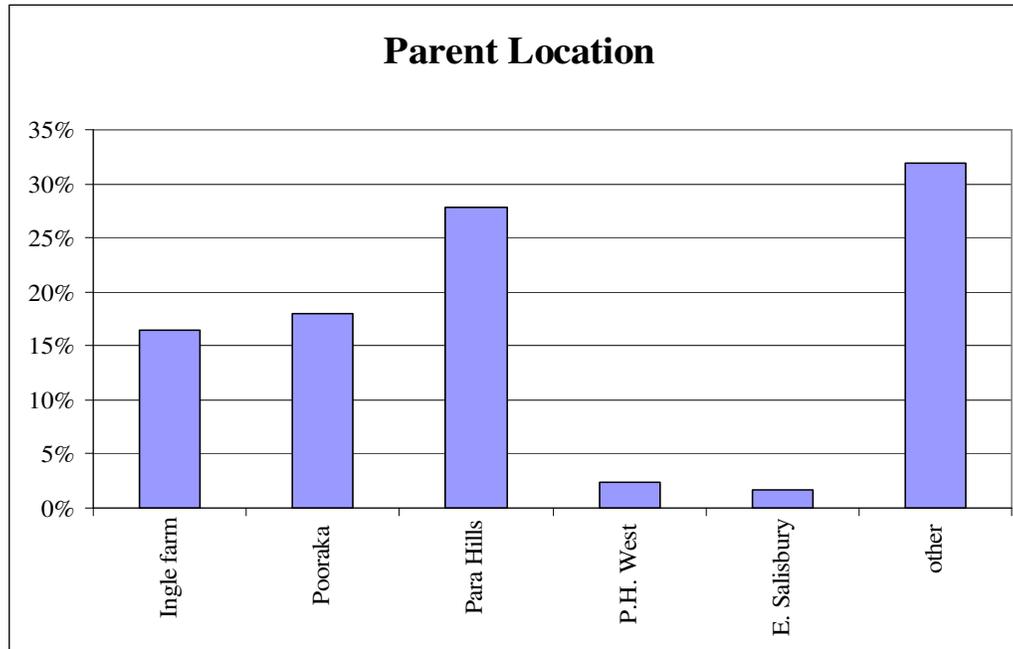


Table 1 shows the location of parents who participated in the survey. As is apparent most of the parents were from located in other (32%), this category relates to suburbs immediately adjacent to the target area including one new housing estate, sometimes due to lack of facilities these parents must utilise the existing services in the more established areas, as may be reflected here. The second highest area of parent survey participation was in Para Hills (28%), followed by Pooraka (18%), Ingle farm (16%) Para Hills West (2.5%) and East Salisbury(2%).

Table 2: Distribution of Parent's who participated in the survey

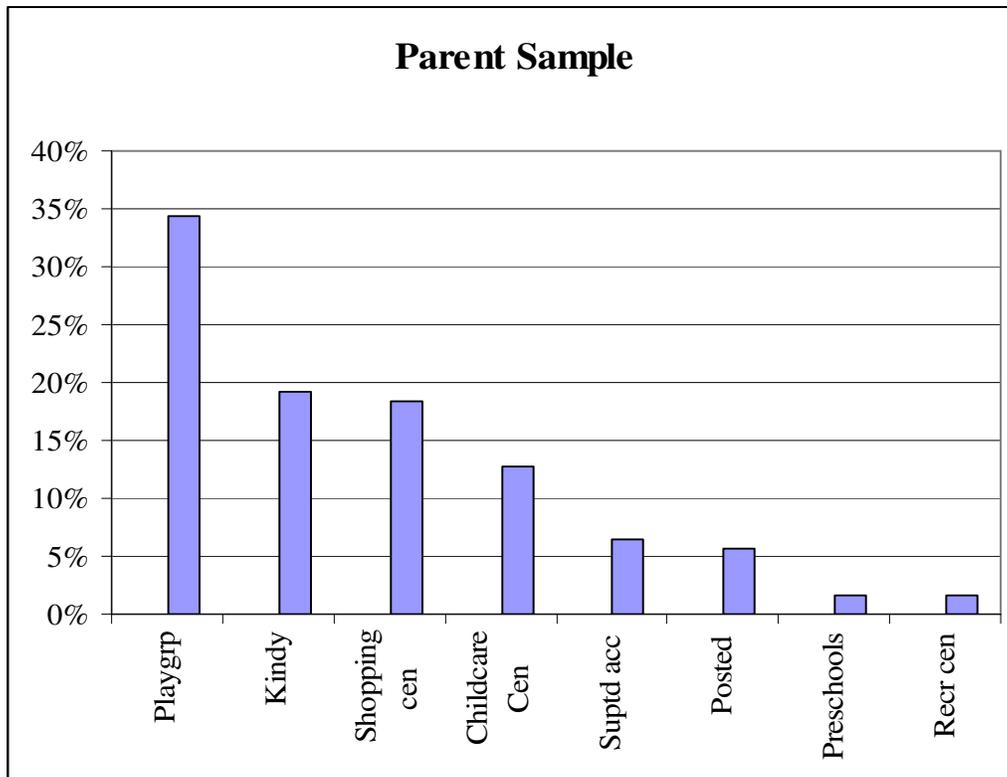


Table 2 shows the distribution of parents who participated in this survey. Most parents were surveyed at playgroups (34%) followed by kindergartens (19%) and shopping centres (18%). Thirteen percent of parents who participated were at childcare centres and 6% each at supported accommodation and from posted returns.

b) Health Care

Table 2: Healthcare Services Accessed by Parents

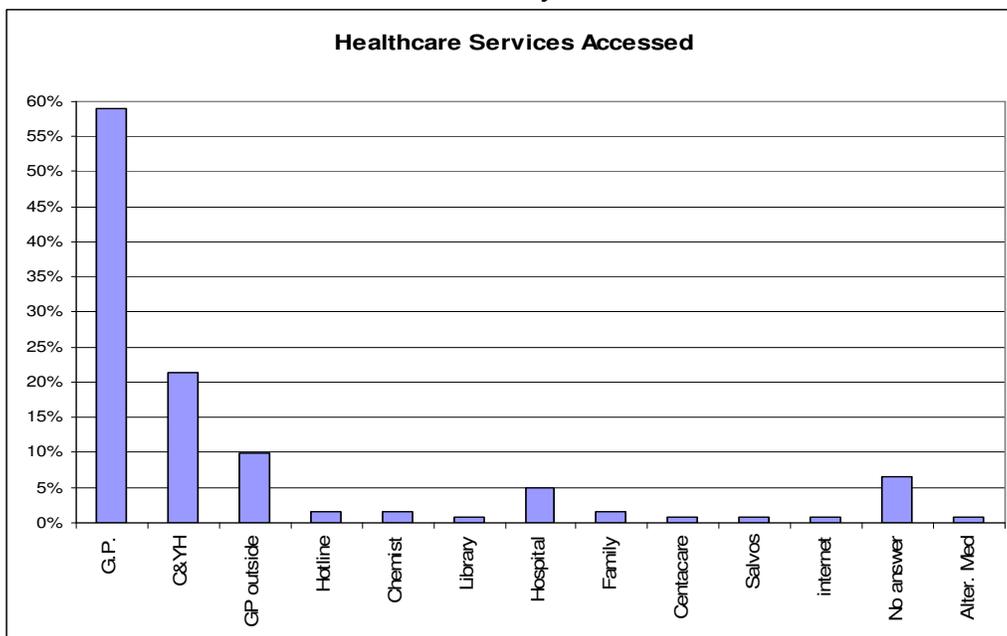


Table 2 shows the results from the survey of parent’s responses to services they accessed for healthcare. Most parents visit their local GP for health care (59%) or their local Child and Youth service (21%). However, parents also used GP’s outside the area and hospitals (5%). A smaller number relied on advice from family members (3%) and the chemist (3%) and finally 2% utilised the hotline for support and advice on healthcare.

c) Baby Care

Table 3: Baby Care Services Accessed by Parents

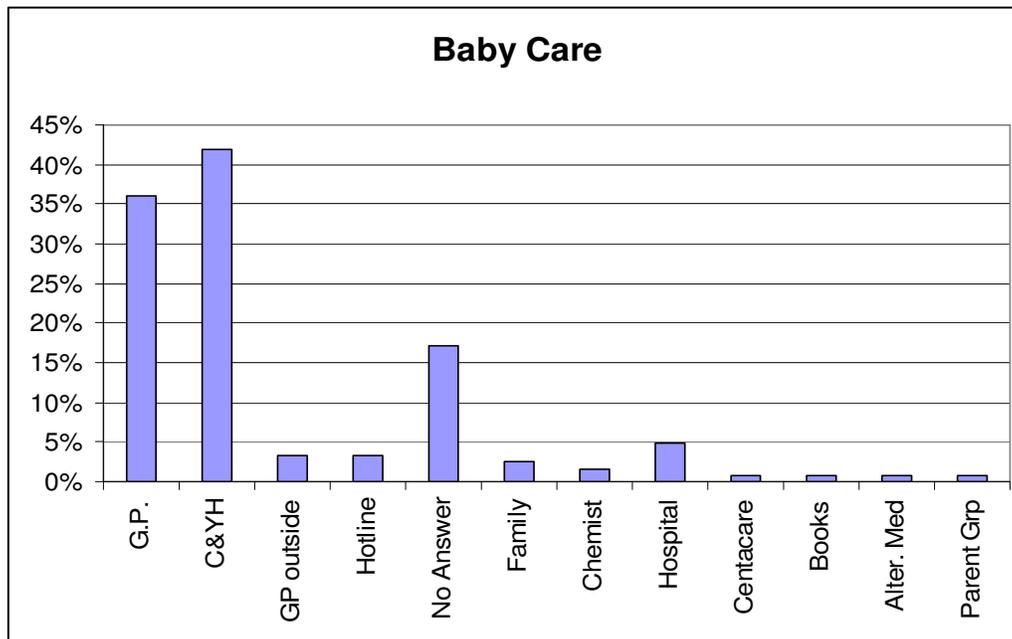


Table 3 shows the results of the responses by parents to services they accessed for support with baby care issues. The majority of parents relied on and the Child and Youth health service (42%), their GP’s (36%) and hospitals (5%). Parents also accessed parent hotline (3%), other GP’s outside the area (3%) and finally chemists (2%).

d) Relationship Issues

Table 4: Relationship Services Accessed by Parents

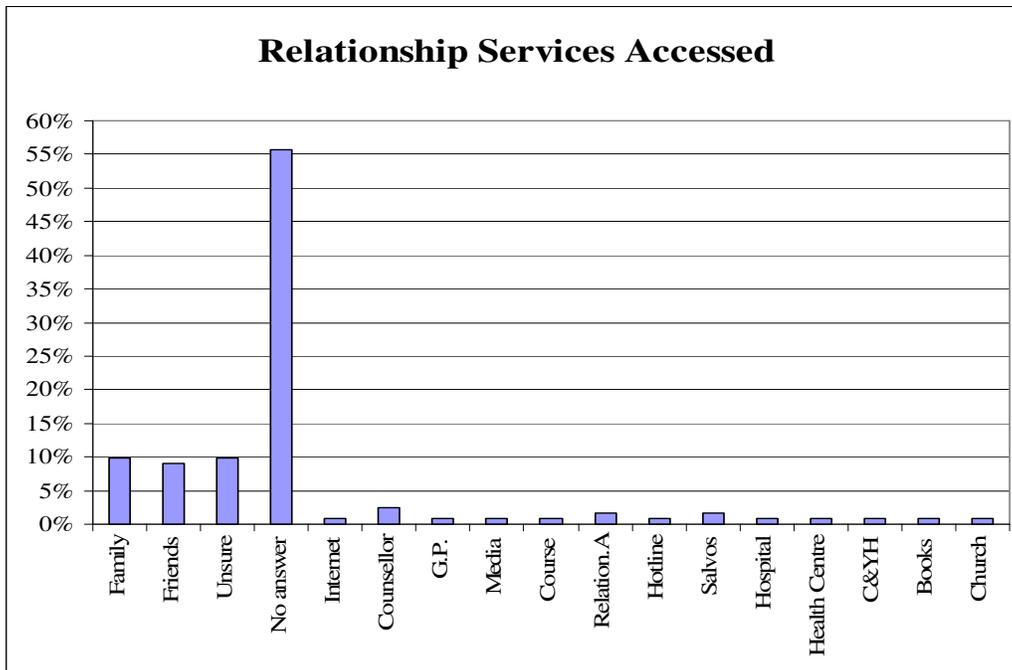


Table 4 shows the services accessed by parents for relationship issues. The survey shows 56% of parents gave no answer as to where they went to access services for relationship issues and it is not clear from this research why they gave this answer. Parents consulted family (10%) and friends (9%) to provide support and advice relating to relationship issues. A small group of parent's accessed counsellors (4%), Relationships Australia (3%) which provides a counselling service and the Salvation Army (3%) for issues to do with relationships. This is a significant amount of parents who utilised the various services for counselling available in the area.

e) Educational Issues

Table 5: Services Accessed by Parents for Education Issues

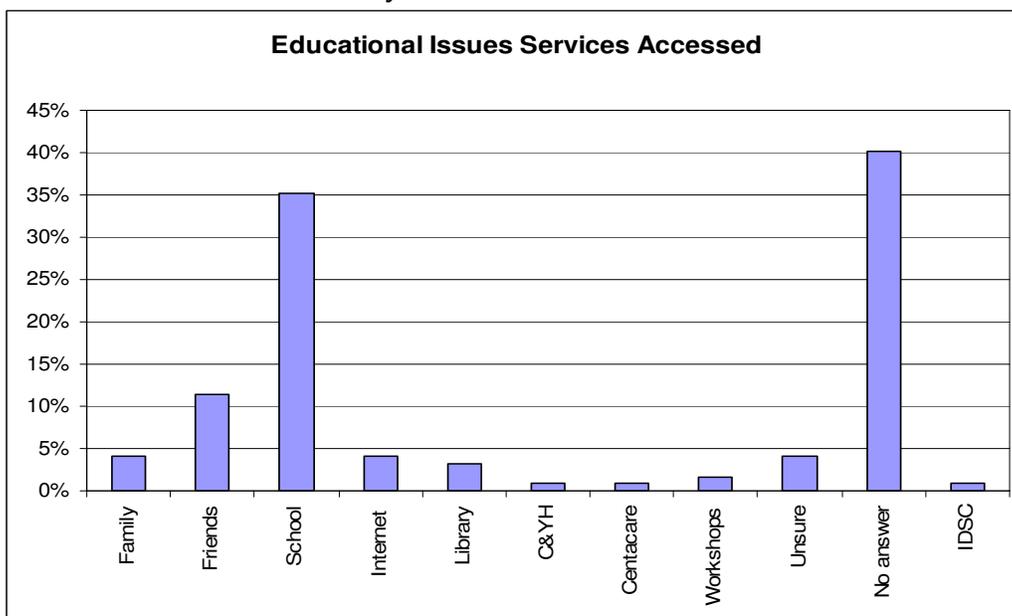


Table 5 shows the results from parents when asked where they go for issues concerning education. As is highlighted, most parents utilised the services of schools (35%). This is an unexpected finding as many of the children would not be attending school however, this can be explained by either the presence of older children who were attending school or children attending school from five years old. Also, children go to pre-school or kindy and these are often linked with schools so parents would have access to information this way. Family (4%) and friends (11%) were also useful sources of information, support and advice on educational issues relating to early childhood. This was followed by parents utilising the internet (4%) to locate information.

Section 2

Section two outlines the results from the second part of the parent's survey where they were asked to identify additional supports they thought may be useful.

2.1. There were four key points that hindered parent participants from using existing services in the community:

- While a reasonable number of parents said they found the services and support they needed was accessible, a majority of those surveyed were unaware of many of the services available as well as how to access this information
- Parents highlighted the lack of public transport and difficulty in accessing transport with young children
- Parents who worked found it difficult to access adequate services as there were no after hours or weekend appointments for service providers
- The cost involved of services was raised as an issue which prevented parents from participating in and utilising services and activities in the area.

2.2 What services parents say they needed

Section 2.2 is broken down into the following six headings: Health care, baby care, early childhood education, infrastructure, relationships and parent support.

Health care

- Lack of doctors when they were needed, many parents reported that doctors were heavily booked
- Needed a more comprehensive locum service and also a service to make home visits during the day
- Needed access to appropriate dental care for children
- Needed access to speech pathologists for children.

Baby care

- Parents expressed the need for more Child and Youth Health Centres in the community.
- Needed better immunisation facilities
- Needed more regular and longer appointments

- Non-judgemental service providers as some parents reported service providers made them feel like bad parents.
- Needed mobile health check service for kindy and school aged children.

Early childhood education

- Needed affordable and local play activities for children such as Kindergym and playgroup
- Needed special needs playgroups and multicultural playgroups.
- Needed more early learning centres, inexpensive educational kindergartens and a Montessori school in the Northern Suburbs.

Infrastructure

- Age appropriate and well maintained play areas for children. Parents cited the need for bike tracks, sun covers, toilets, fencing and indoor playgrounds as lacking in the community.
- A community bus was identified as important and could be used to allow access to council services such as immunisation, toy libraries and mobile libraries.
- Parents identified the need for more child friendly facilities in shopping centres. Parent parking, feeding rooms, indoor playgrounds and crèches were identified amongst those surveyed.
- Many parents said they would like a central area that was child friendly where they could access several services and information.

Relationships

- Many parents found the waiting list for counselling services and the cost prohibitive.
- Parents also said there were not enough counselling services in the community.
- Parents highlighted the need for counsellors specialising in children issues and life coaches.

Parent support

- Access to quality childcare services for working parents, parents who were studying and parents who needed respite rated highly amongst those surveyed.
- The need for various support groups for parents was highlighted these groups included special groups for single fathers, multiple births and groups for individuals experiencing post natal depression.
- Parents indicated information about relationships, education of young children and finances would be useful.
- The changing role of grandparents in our society was also highlighted by the suggestion of programs for grandparents and assistance for grandparents bringing up grandkids.

Section 3

What support service providers say is needed in the community

The most common facility that service providers cite as crucial in the community was information and education for parents relating to issues

about young children and their well-being. The suggestions covered areas such as workshops, forums, courses and information relating to:

- parenting skills
- positive parenting
- styles of communication
- behaviour guidance and management
- nutrition
- social and emotional development
- increasing parental involvement in early learning
- families working together and spending quality time with their children.

The support identified extended to services including mentoring, in-home assistance, support for post natal depression, breast feeding support and support for awareness of domestic violence and family breakdown and the effects this has on children. Similar services specifically for the different cultural groups within the community such as parent support groups for new refugees, and special playgroups were also mentioned.

Another issue raised was parenting support specifically for young parents. This support covered areas such as parenting help for young women, special young mum's groups, classes and information. Mentoring and in-home assistance and finally classes, information and support for young dads were also raised as needs that were not covered by current services in the community.

The need for the development of skills, education and information relating to day to day living, such as budgeting, gardening and maintenance was also highlighted as a community need by service providers. Other services cited various programs they thought would be useful such as 'Adopt a Grandparent' and support agencies for those who are at risk of domestic violence and providing a central place for families to meet with professionals.

Section 4

Discussion of the research findings.

Based on the findings of the research recommendations relating to services required in the community can be made. It is important to note that the input from the services sector was sufficient to draw sound conclusions about perceived gaps however, the input from parents, via the survey, was based on a small sample and therefore only weak conclusions can be drawn from these results. Parents should be consulted further to ascertain whether the trends and issues identified by the parent sample are also priorities for most parents in the area. Even though the number of parents surveyed was low the results still give some indication of the needs of families in the community. Despite trying to consult with the Vietnamese sector of the community there were no responses from parents so their input has not been included in this report. It is important to gain input from these groups as the

services and facilities developed need to be culturally appropriate so they are well utilised and well situated in the community.

Another aspect to consider when developing any new services or facilities is the importance of linking existing service providers and local government facilities as these sectors already provide many services and activities and replication should be avoided. The discussion of the findings has been categorised into the five priority areas identified by Salisbury Communities for Children; healthy young families, creating child-friendly communities, integration of services and supporting families and parenting.

Early learning and development

An area identified by both services and parents was education and information relating to a variety of areas concerning young children. The topics suggested by both groups in the research included behavioural management, positive parenting, social and emotional development and nutrition. An important aspect identified was the need to specifically target young parents in the community with information, education and support. The suggestions from services for young parents included information and support in the form of mentors and special parent groups.

Services and activities for young children such as Kindergym, kindy, playgroups and childcare were crucial to both parents and service providers. Local, easier to access, cheaper and quality services were all specified as needing to be developed further in the community. These services offer children and parents healthy activities and provide support and information relating to young children and so are vital to the development of young children.

Healthy young families

A key issue for parents was access to affordable health care. Location, variety of services available and waiting lists were all highlighted as issues that parents felt were lacking. As shown in the research a majority of parents relied on G.P's for health care and baby care accordingly these services are vital in the community and need to be improved.

Relationships and the need for accessible, affordable counsellors were mentioned by both parents and service providers. This is an area that needs to be considered as there are strong links between good relationships and healthy families. The need for more information and assistance for domestic violence is integral to healthy families. Services identified support for at risk families as an important issue in the community as well as access to affordable counsellors.

Supporting families and parenting

Also, one on one mentoring and support for new mothers, young parents, parents of children with special needs and grandparents raising children were all mentioned by either parents and services who took part in this research. Home visits were also highlighted as a means for supporting parents with young children. There are some existing home visiting services

in the community but the service could be extended to include parents who were having difficulty, were isolated or lacked support from family.

Integration of services

Parents indicated they would like a 'one stop shop' which provided unbiased information about children and services available for families in the community. These one stop shops should be located in convenient places in the community to allow the maximum number of parents to access information, suitable spaces may be community centres and shopping centres. One stop shops could act as an information store and direct parents to the appropriate service provider or government department. They could also display links with other institutions such as universities and local schools and help develop research projects and programs suitable for families and children in the community. Another important suggestion from parents was for after hours access to information, many parents reported being unable to attend during normal business hours due to work commitments.

Creating child-friendly communities

The development and maintenance of local infrastructure was an issue raised by a large majority of parents surveyed. The need for adequate playgrounds and facilities in the community was vital. Parents requested age appropriate play equipment, shade covers, toilet facilities and bike trails as well as fenced areas as needing upgrading and development in the area. Shopping centres were also mentioned as places that needed to develop the facilities for parents and children. Special rooms to feed and change children, parent car parks close to entrances, and indoor play facilities in the shopping centres were mentioned by parents. Also some parents said they would like a play café in the area, similar to others which are in major shopping centres around Adelaide.

Further, parents reported there were not enough activities for young children and parents to do on weekends and throughout the day that were educational and affordable. Adding to this was the issue of transport, which was highlighted by parents as lacking and often difficult to access as they said they needed help in lifting prams and young children onto buses.

In conclusion the research highlights the main issues that parents and service providers highlighted in the survey carried out by the Salisbury Communities for Children group. This research is essential to target the funding from government to provide much needed services and facilities to improve the well being of families and children in our community.