



The 'D' Word: Responding to disadvantage within a universal and integrated service model for children and families

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Today's presentation

- Moving toward the 'universal' and 'integrated'.
- Implicit tensions:
 - Understanding of key terms
 - The place of disadvantage
 - 'Needs-led' versus 'rights-based'
- Reflections on the UK journey.
- The new National Strategy and conversations required at home.

The 'D' Word

- Has children's experience of disadvantage been a policy focus?
- The data of disadvantage:
 - Spatial clusters by family type and risk of social exclusion
 - Child abuse and neglect
 - Indigenous children

Why disadvantage matters

- Living in disadvantaged environments → greater exposure to developmental risk factors.
- Parents experiencing stress or with limited resources → ↓ capacity to compensate.
- In the absence of policy interventions/supports → children less likely to fulfil their human potential.
- Disparities in school readiness tend to widen or persist over the life course.

Child wellbeing - which looking glass?

- Multiple concepts of child wellbeing
- 'Needs-led' and 'rights-based' approaches foster different service styles.
- If the system is being asked to meet need *and* uphold rights do we pull children, families and services in different directions?
- Ways to minimise contradictions and promote system congruence.

Universal services

- Traditional understandings versus current usage:
 - Preschool provision
 - National Child Protection Framework
 - The National Early Childhood Development Strategy
- Quality universal services are pivotal because:
 - Most disadvantaged children do not live in disadvantaged areas
 - Disproportionate benefits to children in need

Hardly universal - a system stocktake

- Significant gaps in the health, education and care, and family support services available to ALL families and communities.
- Raises two key questions as we reflect on the National Strategy:
 1. What do we want the universal service platform to look like?
 2. How will universal services work with other service tiers to respond to children and families requiring greater support?

The case for integration

- Single programs struggle to meet complex needs.
- Evidence backs shift to an integrated tiered system of universal, targeted and specialist services.
- A universal prevention approach does not imply uniformity but requires increased resources to:
 - Engage with and retain vulnerable families
 - Respond to identified needs
 - Support collaboration and coordination

What does integration look like?

- An integrated system responds to emerging problems rather than eligibility thresholds.
- People not classified in risk categories. Focus on 'need' is compatible with a 'strengths-based' approach.
- Collaboration / coordination used to bridge 'silos'.
- Co-location and centre-based models may be more effective in disadvantaged areas.

Lessons from the UK

- Integration and collaboration central to:
 - Sure Start
 - Every Child Matters (ECM) Framework
 - Children's Trusts
- 10 year process covering the domains of:
 - Service delivery: multi-disciplinary teams
 - Common assessment, information sharing, referral
 - Joint commissioning and integrated governance

Sure Start

- SSLPs universally available to all families with children < 4 years in highly deprived local areas.
- Services spanned community health; family support; home visiting; ECEC; special needs. Different approaches to service delivery used.
- Phase 1 results - most disadvantaged children did less well than others in SSLP area.
- Phase 2 - beneficial effects for ALL children and families in SSLP areas relative to non-SSLP areas.

Evolution and challenges

- Sure Start now delivered through Children's Centres. Every community will have one by 2010.
- CCs in highly disadvantaged areas required to deliver a more comprehensive suite of services.
- Challenges to be addressed:
 - Difficulties in multi-agency teamwork
 - Role confusion and territorial overlap
 - Transcending professional boundaries problematic
 - Some mainstream services oppose collaboration.

A workforce model

- The UK's *2020 Children and Young People's Workforce Strategy* includes measures to embed in education, training and professional development:
 - Shared values and common core of skills and knowledge - including multi-agency working, supporting transitions and sharing information.
 - Clarity about how to work together, when and why
 - A shared approach to assessment, planning, intervention and review.

Questions for Australia

- ARACY argues that collaboration **is** rocket science
- A universal prevention model that provides better outcomes for all children **and** which ameliorates disadvantage demands a broader conversation. The National Strategy is a great place to start:
- What is our shared vision and purpose for children?
- What should our universal service platform look like?

Questions for Australia

- How do we identify and engage with children and families with greater needs?
- How do we integrate tiers of our service system to provide better outcomes to these children and families?
- What changes are required to the way we educate and train workers to support integration?
- Let the dialogue begin!

Thank you for listening

Suggestions on how we can move this debate forward particularly welcome.

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